Authorization For Automatic Transaction

I authorize and First Farmers & Merchants
Bank to initiate entries to my checking/savings accounts, and if necessary, debit entries and
adjustments for any credit entries in error to my accounts. This authority will remain in effect until I
notify you in writing to cancel it in such time as to afford the financial institution a reasonable
opportunity to act on it.
(Employee's Name – Please print)
(Address – Please print)
(Address – Frease print)
(Bank Name – Please print)
(Bank Routing Number) (Between these symbols : : on the bottom left of your check)
(Checking Account Number)
(Savings Account Number)
(Savings Account Number)
Percentage or Dollar Amount
() Checking Account
() Savings Account
Date Employee's Signature