



AUTOMATIC OVERDRAFT TRANSFER AUTHORIZATION

<p style="color: red; text-align: center;">Customer Name and Address</p>	<p style="text-align: center;">Financial Institution</p> <p style="text-align: center;">Presidential Bank, FSB 4520 East West Hwy Bethesda, MD 20814</p>
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In this authorization, the words “we”, “our”, or “us” mean the Financial Institution and the words “you” or “your” mean the Account Holder(s). Text following a box which is not checked does not apply to this agreement. Ownership on the “To” and “From” account listed below must be similar. You authorize us to make the following transfer of funds:

<p style="text-align: center;">From Debited Account</p> <p>Account Title: _____ _____</p> <p>Account Number(s): _____ _____ _____</p> <p><i>When selecting multiple “From” accounts, debits will occur in the same order as listed above.</i></p>	<p style="text-align: center;">To Credited Account</p> <p>Account Title: _____ _____</p> <p>Account Number: _____</p> <p>Account Type: Checking Money Market</p> <p>OR, protect all my/our Checking Accounts</p> <p><i>Unless selecting “all” checking accounts, a separate form is required for each “To” account. Multiple “To” accounts are funded in numerical order.</i></p>
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Note: Automatic Overdraft Transfers do not protect accounts from minimum balance requirements. Minimum balance fees may apply.

We will make transfers on the following basis:

PERIODIC TRANSFERS

Amount to be transferred: **\$100.00 increments** Effective Date: _____

Frequency: **As the Account is overdrawn**

INSUFFICIENT FUNDS TRANSFER

You authorize us to charge your Debited Account and to transfer money into your Credited Account to cover each overdraft on your Credited Account. We will make all transfers in multiples of **\$100.00** providing funds are available in the selected account. You authorize us to charge your Debited Account **\$5.00**** for each overdraft transfer.

- **Savings and Money Market Only** - I understand that Banking Regulations limit third party transactions or pre-authorized transfers (including overdraft transfers) or transfers made by personal computer (including online banking or bill payment services) or telephone (including facsimile or data transmission), check, debit card, POS or similar order to six (6) each statement cycle. If you exceed more than six (6) such transfers, we need not honor the item. If you exceed these withdrawal limitations, the bank may close the account and the funds placed in another account that you are eligible to maintain, or we may take away the transfer and draft capabilities. Transfers made in person, by messenger, mail, or at an ATM are unlimited.

****Fees are subject to change.**

By signing below, you acknowledge receipt of a copy of this Authorization. **(All Owners on all accounts must sign)**

Signature: _____ **Signature:** _____

Date: _____ **Date:** _____

TERMINATION OF THIS AGREEMENT: Any authorized signer on the accounts listed above may cancel this agreement by providing written notice. Your notice will be effective the day it is received by a Presidential Bank Employee.

Effective _____ (date) the undersigned cancels this Automatic Transfer Authorization

Signed: _____

For Bank Use Only:

Date Received and Activated: _____ Date Received and Terminated: _____

By: _____ (Employee Name) By: _____ (Employee Name)