

BLOOMFIELD STATE BANK
TELEPHONE TRANSFER AUTHORIZATION FORM

Account Owner Information:

Name		Co owner (if joint account)	
Address			
City, State, Zip Code			
Day Phone	Night Phone	Day Phone	Night Phone
eMail		eMail	

Instructions:

Please list all accounts that you wish to have transfer and inquiry capabilities through Bloomfield State Bank's (BSB) Telephone Service (TS). List only one account number per line; attach additional sheet if necessary and initial each page.

App	Account Number	Inquiry	Transfer

App	Account Number	Inquiry	Transfer

Authorization Agreement:

I authorize Bloomfield State Bank to provide telephone access to my accounts listed herein through Bloomfield State Bank's Telephone Transfer Service until revoked by me in writing and received by Bloomfield State Bank, P.O. Box 407, Bloomfield IN 47424.

I will not hold Bloomfield State Bank responsible or liable for failure or refusal to honor my requests through Bloomfield State Bank's Telephone Transfer Service or for damages caused by an unauthorized person who may have had access to my personal identification number (PIN), consistent with the rules and regulations governing this agreement as set forth on the reverse side of this authorization form, my account agreement(s) or by Federal and Indiana State laws.

I understand for this reason that Bloomfield State Bank strongly recommends that I change my PIN to a personalized code.

Agreement of the above allows Bloomfield State Bank to combine statement cycles of the transfer accounts.

By execution of this agreement, I(we) acknowledge receipt of the rules and regulations governing BSB's Telephone Transfer Service and agree to be bound by the terms and conditions thereof.

Signature (Account holder)	Date	Signature (Co owner if joint account)	Date
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Please record and keep your Personal Identification Code (PIN) confidential



EVE 24 Hour Touch Tone Teller
812 384 2258 or 800 280 9132



