



## Overdraft Transfer Service

**ACCOUNT HOLDER:**

\_\_\_\_\_  
\_\_\_\_\_

**PROTECTED CHECKING ACCOUNT #:** \_\_\_\_\_

**REQUEST:** I hereby request the "Overdraft Transfer Service" be added to my checking account. I understand that Heartland Bank and Trust Co. ("Bank") is under no obligation to cover overdrafts that exceed the balance in my checking account. This agreement provides that the Bank may cover such overdrafts by transfer.

**TRANSFER INFORMATION**

**Authorization:**

I authorize Heartland Bank to transfer from the following account to cover the overdraft in my protected checking account:

**Transfer Account:**

**Transfer Account #:** \_\_\_\_\_

**Account Type:**

**Transfer in increments of:** \$ \_\_\_\_\_

\* Increments must be between \$0.00 (transfer only the amount needed to bring the balance to \$0.00) and \$100.

**Charge per transfer: \$10.00**

\* The charge is assessed to the protected checking account. It is assessed per transfer, which occurs once per business day during nightly processing.

**AGREEMENT:**

I agree to maintain a sufficient balance in my "transfer account" to cover the transfer. If the balance in the account is insufficient to cover the transfer requested, the Bank will transfer the amount available in the "transfer account" and assess the Transfer Fee. Any items that are not covered by the transfer and will overdraw the "protected checking account" may be returned by the Bank as unpaid. Paid Item and Return Item Fees may be assessed for the items that are overdrawing my account. I understand that the Bank is under no obligation to pay a check or other debit that exceeds the balance in my checking account.

I also agree to abide by the rules and regulations of the Bank governing checking and savings accounts (and all amendments thereto) as stated on the signature cards and Truth in Savings disclosures. In addition, Regulation D Withdrawal Limitations apply to savings and money market accounts (see the Truth in Savings disclosure for more information).

The Bank or any owner on the accounts may cancel this authorization upon written or verbal notice to the appropriate party. Such notice shall be effective immediately when received by the Bank or given to any owner on the account.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**BANKER:** \_\_\_\_\_

Indicate how the request was received: \_\_\_\_\_

*NOTE: If the account owners are not the same on both accounts, the account owner on the "transfer account" must authorize the transfer.*