EXTERNAL TRANSFER AUTHORIZATION

As used in this authorization, "we" and "us" means the owners of the accounts identified below. "You" and "yours" means The First.

I/We authorize and direct you to make the following transfer of funds: AMOUNT TO BE TRANSFERRED: \$ Frequency: Monthly ☐ Weekly Other Starting: Ending: FROM Name of Bank: External Routing & Transit#: Type Account Number: Ск □sv Account Title: TO Loan Payment - Internal Only Type ΠIL Loc Acct Number: External - Available for Deposit Accts Only Name of Bank: Routing & Transit#: Type Account Number: СК □ sv Account Title: I/We understand that this authorization replaces any previous authorization and will remain in full force and effect until you have received written notification from me (or either of us) of its termination in such time and in such manner as to afford you a reasonable opportunity to act on it. Signature - Owner(s) of FROM Account Signature - Owner(s) of TO Account - If different Signature - Owner(s) of FROM Account Signature - Owner(s) of TO Account - If different Printed Name Printed Name Account Address Account Address Accepted By