

Courtesy Pay Opt In/Opt Out

Account number _____ Name _____

FOR CHECKS, ACH, BILL PAYMENT

OPT IN _____: We do want Bar-Cons to pay my/our overdrafts under the Courtesy Pay program. Do not return any overdrafts unpaid, up to the limit set for my account.

OPT OUT _____: We do not want Bar-Cons to pay my/our overdrafts under the Courtesy Pay program. Return any overdrafts unpaid. I understand that I/we will be charged an overdraft fee as well as any fees imposed by merchants and collection agencies.

ATM & Everyday Debit Card Transaction Authorization

FOR DEBIT CARD PURCHASES AND WITHDRAWALS

OPT IN _____: We do want Bar-Cons to authorize and pay any overdrafts on my debit card purchases and withdrawals under the Courtesy Pay Program.

OPT OUT _____: We do not want Bar-Cons to authorize and pay any overdrafts on my debit card purchases and withdrawals under the Courtesy Pay Program.

Signature _____

Date _____

Employee # _____ Date _____