



State Bank of *Bement*

**inTouch24
Authorization and Funds Transfer Request Form**

1. Please respond to the following question:

_____ I/We do want to access the State Bank of Bement’s “inTouch24” automated voice response system. If you want funds transfer capabilities, you must also complete and sign #2 below.

_____ I/We do not want to access the State Bank of Bement’s “inTouch24” automated voice response system. Please deny our access to the system.

(IF JOINT ACCOUNT, BOTH ACCOUNT HOLDERS MUST SIGN)

Dated: _____

Signature

Signature

2. **Funds Transfer Authorization Request – If you desire funds transfers, please complete and sign below:**

As used in this authorization, “I”, “We” and “Us” means the owners of the accounts identified below.

I/We authorize and direct the State Bank of Bement to set up the following accounts for Funds Transfer on the bank’s InTouch24 24-hour automated telephone response system.

I/We understand that a maximum of 12 accounts may be listed for Fund Transfers.

Accounts to be set up for Funds Transfers:

_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature

Signature

_____ (__/__/__)
Printed Name and Date

_____ (__/__/__)
Printed Name and Date