

**ELECTRONIC BILL PAYMENT AUTHORIZATION**

I AUTHORIZE my Financial Institution to post payment transactions generated by PC and/or by Mobile Device from the Bill Paying Service to the account indicated on the form being sent electronically. I understand that I am in full control of my account and that my 100% satisfaction is unconditionally guaranteed. If at any time I decide to discontinue service, I will provide written notification to my Financial Institution. My use of the Bill Paying Service signifies that I have read the terms and conditions of the [Internet Banking Disclosure and Agreement](#) which have been provided to me electronically by the Financial Institution.

I UNDERSTAND that payments may take up to 5 business days to reach the vendor and that they will be sent either electronically or by check. The Financial Institution is not liable for any service fees or late charges levied against me.

I UNDERSTAND that I am responsible for any loss or penalty (\$) that I may incur due to the lack of sufficient funds or other conditions that may prevent the withdrawal of funds from my account.