

E-Banker & E-Pay

Setup / Transfer Authorization

Website: www.fb247.com Email: info@fb247.com

| Accounts to be set-up on E | NEW ADD DELETE | |
|----------------------------|------------------------------|-------------------|
| Account Number | Title on E-Banker | Set as E-Pay Acct |
| 123456 (example) | Household Checking (example) | |
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"I", "We" authorize First Bank & Trust Co. to set up the following accounts for funds transfer on E-Banker (Internet Banking). I understand and take responsibility for the security of my E-Banker ID and PIN number. I also take responsibility for reporting the loss/theft of my E-Banker ID and/or PIN number immediately to First Bank & Trust Co. I also understand that I have the ability to activate the E-Pay service and pay bills from the checking account(s) listed above. I authorize First Bank & Trust Co. to post payment transactions generated by Personal Computer (PC) from the E-Pay service to the account(s) listed above. I understand that I am in full control of my account and that 100% satisfaction is unconditionally generated. If at any time I decide to discontinue service, I will provide written notification to the Bank. My use of the E-Pay Service signifies that I have read and accepted all the terms and conditions of this service.

I UNDERSTAND that sufficient time must be allowed for the post office to deliver payments made by check and that 3 - 4 days should be allowed for electronic payments. My financial institution is not liable for any service fees or late charges levied against me. I also understand that I am responsible for any loss or penalty that may incur due to lack of sufficient funds (NSF fee \$27.00) or other conditions that may prevent the withdrawal of funds from my account(s).

I also understand that the Federal Government does not accept any payments made by a third party. All payments I set up to the IRS or any other government entity will be deleted.

E-Mail Address

□ If you do not wish to receive emails from First Bank & Trust Co. regarding enhancements, newsletters, new products & services, etc., please indicate so by marking the box.

 \Box I have read and agree to the Online Banking Agreement provided by First Bank & Trust Co. on the website at www.fb247.com.

Signature of Authorized Party

_(____/____/____) Date

Daytime Phone # ___

Print Name

**Remember your temporary password for E-Banker is the last 4 digits of your Social Security Number.

| | | | | | FOR | BANK | USE | O N | LY | |
|----------------|---|---|---|---------------|---------------------|------|-----|-------------|----|-------------|
| | | | | | | | | | | |
| CIF Number: | | | | E-Banker ID N | E-Banker ID Number: | | | Entered By: | | |
| Date Received: | (| 1 | 1 |) | Date Entered: | (| 1 | 1 |) | Checked By: |