

E-Banker & E-Pay

Setup / Transfer Authorization

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

Accounts to be set-up on E	E-Banker (NO DUPLICATE NAMES): s to all accounts shown on CIF.	NEW ADD DELETE
Account Number	Title on E-Banker	Set as E-Pay Acct
123456 (example)	Household Checking (example)	

"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 \$25.00) or other conditions that may prevent the withdrawal of funds from my account(s).

<u>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.</u>

E-Mail	Address
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□ 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.

□ 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 Number:					Entered By:			
Date Received:	(1	1)		Date Entered:	(1	1)	Checked By: