## Telephone Banking Authorization

I request the ability to transfer funds between the following accounts

	From:
I request access to my accounts through the telephone banking	То:
system. I understand I will be given a four digit PIN that I will be required to change during the first call. If I have any questions or concerns I will contact the bank.	From:
	To:
	From:
Customer Signature	То:
Customer Signature	
	From:
	To:
Date	
	I understand that transfers from or to passbook savings accounts are not permitted. All transfers after 2:00 will be on the next business day.
THE BANK OF HERRIN	Customer Signature
	Date