REQUEST BILL PAY / DELETE BILL PAY

I, _____, REQUEST TO HAVE BILL PAY <u>ADDED</u> TO MY

ONLINE BANKING BEGINNING: _____,

ON ACCOUNT NUMBER _____.

I UNDERSTAND THAT IT WILL BE UP TO ME TO LET THE BANK KNOW IF I DECIDE I DON'T

WANT BILL PAY.

SIGNED:_____   DATE:_____

CSR:_____   DATE:_____

I, _____, REQUEST TO HAVE BILL PAY

<u>REMOVED</u> FROM MY ONLINE BANKING ON ACCOUNT NUMBER _____.

SIGNED:_____   DATE:_____

CSR:_____   DATE:_____