

AUTOMATIC PAYMENT AUTHORIZATION

**Associated Credit Union
Mortgage Loan Center
6251 Crooked Creek Road
Norcross, GA 30092-3107**

In order to provide for convenient monthly payments to the credit union, I (we) hereby request and authorize the credit union, until this authorization is revoked in writing delivered to the credit union, to debit my (our) deposit account which is designated and maintained as follows:

Print name(s) of depositor(s) and account number as shown on credit union's records

This authorization is subject to the following conditions.

The amount authorized to be drawn each month on said account by the credit union shall be the amount indicated on reverse side hereof as the Regular Monthly Payment plus additional amounts as may be authorized from time to time by the credit union.

I (we) further agree to maintain a deposit account to cover these monthly payments. By accepting this authorization the credit union expressly agrees that as long as a sufficient balance is maintained in my (our) deposit account which is available to cover any payment authorized above, the borrower(s) will not be deemed to be in default of any such payment. If any loan on which such payments are to be made is sold or transferred by the credit union, its obligation under this agreement shall cease upon written notice to the undersigned.

Said debits shall be drawn on or about the check date indicated below:

Debit Account Number _____ Regular Monthly Payment _____

Additional Amounts _____ Effective Month _____ Effective Payment Date _____

Date _____

Signature(s) of Depositor(s) exactly as it (they)
appears on credit union records.