

INTERNAL AUTOMATIC FUNDS TRANSFER AUTHORIZATION AGREEMENT

To: Jackson County Bank, 8 Main Street, PO Box 490, Black River Falls WI 54615 ("Financial Institution")

The undersigned depositors ("Depositor," whether one or more) requests and authorizes the Financial Institution to establish the Automatic Transfer(s) described below:

1. From: (Account Title):
(Account Type):
(Account Number):

To: (Account Title):
(Account Type):
(Account Number):

In the Amount of: Frequency (and day of week/or calendar dates): Start Date: End Date:

2. From: (Account Title):
(Account Type):
(Account Number):

To: (Account Title):
(Account Type):
(Account Number):

In the Amount of: Frequency (and day of week/or calendar dates): Start Date: End Date:

Depositor agrees to maintain a sufficient account balance to cover the transfer(s) as specified in this authorization. Depositor agrees that if Depositor's account has insufficient collected funds on the agreed upon date from which to transfer the agreed upon amount, Financial Institution may decide in its discretion to not transfer the funds, and, in the case of a loan payment, it will be Depositor's responsibility to make such payment when due. However, Depositor authorizes the Financial Institution to make the transfer at its sole discretion even though the transfer may cause an overdraft to Depositor's account and Depositor agrees to pay any applicable fees. If the account is maintained in connection with an overdraft credit plan, any overdraft payment will be made in accordance with the agreement or rules governing that account rather than this Agreement. Depositor agrees that the Financial Institution's rights regarding each such debit shall be the same as if it were a check drawn on the Financial Institution and signed personally by Depositor.

Additional Provisions:

Depositor agrees to the terms and conditions of this Agreement, including the Additional Provisions on page 2.

Date:

DEPOSITOR (SEAL) (Depositor) (SEAL)
DEPOSITOR (SEAL) (Type of Organization)
DEPOSITOR (SEAL) (State of Organization)
DEPOSITOR (SEAL)

Address:
(Seal)
(Seal)
(Seal)

(Depositor Telephone Number)

Received by the Financial Institution

For the Financial Institution

Date

ADDITIONAL PROVISIONS

Depositor understands and agrees that if the transfer is for the purpose of a loan payment which includes escrow amounts, and if there are changes in the escrow requirements, or if the loan payment amount changes for any reason, the Financial Institution is authorized to change the transfer amount accordingly. If a change to the transfer amount occurs, the Financial Institution will send notice of the modification to Depositor.

This Agreement will remain in effect until (1) revoked in writing by any one Depositor, and such notice is received by the Financial Institution in such time to afford the Financial Institution a reasonable opportunity to act on it, (2) it is terminated by the Financial Institution, or (3) any loan that is being paid by a transfer subject to this Agreement is paid off. The Financial Institution reserves the right to terminate this Agreement at any time in its sole discretion.

Depositor has the right to stop any transfer by notification to the Financial Institution at such time as to afford the Financial Institution a reasonable opportunity to act on it prior to the transfer of the amount from the account. Financial Institution may charge Depositor a stop payment fee in connection with this service.

Depositor agrees to pay to the Financial Institution the fees and charges normally associated with Depositor's deposit account including, but not limited to, overdraft charges, account maintenance fees, stop payment fees, and other miscellaneous service fees, as the Financial Institution has previously disclosed to Depositor in the Financial Institution's fee schedule, which may be amended from time to time.

The Financial Institution will not be liable to Depositor for any loss or damage if the Financial Institution fails to make the transfer if (1) the account contains insufficient collected funds, (2) mechanical, electronic or equipment failure prevent the transfer, (3) the acts of third parties prevent the transfer, (4) the money in Depositor's account is subject to legal process or other encumbrances restricting the transfer, (5) the transfer would go over the credit limit on Depositor's overdraft credit plan, if any, or (6) circumstances beyond the Financial Institution's control prevent the transfer. In no event will the Financial Institution be liable to any party, including Depositor, for indirect, incidental or consequential damages.

NOTICE REGARDING FUNDS AUTOMATICALLY TRANSFERRED FROM YOUR DEPOSIT ACCOUNT:

FUNDS AUTOMATICALLY SWEEPED OUT OF A DEPOSIT ACCOUNT AND APPLIED TO THE OUTSTANDING PRINCIPAL BALANCE OF A LOAN ACCOUNT ARE NOT DEPOSITS AND ARE NOT INSURED BY THE FEDERAL DEPOSIT INSURANCE CORPORATION. If the Financial Institution were to fail while your funds reside in your deposit account the FDIC would recognize the deposit account. The funds would be insured and paid out by the FDIC under the rules applicable to FDIC deposit insurance for deposit accounts. The funds that have been transferred out of a deposit account to pay down a loan account will reduce the loan account balance and are not insured by the FDIC. In the event another institution were to acquire the Financial Institution, your automatic transfers would continue to occur in business as usual under the terms of this Agreement.

<p>TERMINATION OF AGREEMENT</p> <p>() By Depositor Request</p> <p>_____ Signature of Depositor</p>	<p>The above Internal Automatic Funds Transfer Authorization Agreement is hereby terminated.</p> <p>() Financial Institution Terminates Agreement</p> <p>_____ Financial Institution Employee Signature</p>	<p>Date: _____</p>
---	--	--------------------