ACH CREDIT (DEALER) PRE-AUTHORIZATION

Please fill in the requested information below. Per your instruction, First IB will credit (deposit funds to) your account with the other Financial Institution.

I/We authorize First Internet Bank of Indiana (Routing Number 074014187) to credit my/our account at the DEPOSITORY (identified below), for the purpose of accomplishing the following pre-authorized payments:

DEPOSITORY NAME:				
BRANCH:		PHONE:		
CITY:		STATE:	ZIP:	
ROUTING NUMBER:				
ACCOUNT NUMBER:		CHECKING		
	THIS ACCOUNT IS A:	BUSINESS		
	n time and in such manner		itten notification from me (or either of nternet Bank of Indiana and the	
NAME(S) (print or type):	e time to act on it.			
· , · , · , · , · , · , · , · , · , · ,		d): <u>2030</u>	00	
· , · , · , · , · , · , · , · , · , · ,		d): <u>2030</u>	00	
NAME(S) (print or type): First IB Account Number (th Signature		d): <u>2030</u> Signature	00 Date	