



WHAT YOU NEED TO KNOW ABOUT OVERDRAFTS AND OVERDRAFT FEES

An overdraft occurs when we pay a transaction on your account even though you do not have enough money to cover the transaction.

➤ **What are the standard overdraft practices that come with my account?**

We may authorize and pay overdrafts for the following types of transactions:

- Checks and other transactions made using your checking account number
- Automatic bill payments

We do not authorize and pay overdrafts for the following types of transactions unless you ask us to:

- ATM transactions
- Everyday debit card transactions

We pay overdrafts at our discretion, which means we do not guarantee that we will always authorize and pay any type of transaction.

If we do not authorize and pay an overdraft, your transaction will be denied.

➤ **What fees will I be charged if we pay your overdrafts?**

Under our standard overdraft practices:

- We will charge you a fee of **\$25.00** each time we pay an overdraft.
- There is a maximum limit of four overdraft fees per day.
- No overdraft fee will be charged if the total overdraft balance in your account is less than \$10.

➤ **What if I want to authorize you to pay my overdrafts on ATM and everyday debit card transactions?**

If you want us to authorize and pay overdrafts on ATM and everyday debit card transactions, call our 24-hour Opt-In Hotline at (913) 233-5308, or complete the form below and deliver it to any of our branches, or mail to: First Bank of Missouri, ATTN: Customer Service, 7001 N. Oak Trafficway, Gladstone, MO 64118.

_____ I want First Bank of Missouri to authorize and pay overdrafts on my ATM and everyday debit card transactions for the account(s) listed below. I understand this authorization also applies to all debit card holders on my account(s).

This change takes effect on August 15, 2010. If you opt in and change your mind, you can revoke your authorization at any time. It takes two business days to opt in or opt out of this service.

(No action is needed if you do not wish to authorize us to pay overdrafts on a discretionary basis for ATM withdrawals and everyday debit card transactions.)

Customer's Printed Name: _____ Date: _____

Customer's Signature: _____

Account Numbers: _____

Please allow up to two business days for us to process your Opt-In request.