

SafetyLink Transfer Plan Agreement

DEPOSITOR
ADDRESS



This is to authorize the Bank to place a SafetyLink Transfer Plan on my Checking Account Number (TO Account) _____.

I authorize the Bank to transfer funds from my _____ Number (FROM Account) _____ as described herein.

I agree to the following terms and conditions regarding this plan:

1. There must be at least one common account owner between the "FROM Account" and "TO Account" and all owners on the "FROM Account" must sign the SafetyLink Transfer Plan Agreement.
2. There is a limit of one "TO Account" per Savings or Money Market "FROM Account".
3. Funds will transfer from the "FROM Account" to the "TO Account" as needed when the "TO Account" balance is not sufficient to pay checks or other items presented against it. A \$10.00 transfer fee will be assessed against the "TO Account" each day a transfer occurs. The transfer will be made after the completion of daily processing in an amount sufficient to bring the "TO Account" to a zero balance plus an amount sufficient to cover the transfer fee of \$10.00. No transfer fee will be assessed when the total amount of the transfer is \$5.00 or less.
4. Certain types of transfer and withdrawal transactions, including SafetyLink transfers, are limited to a maximum of six per statement cycle (e.g. month) on Savings and Money Market accounts. Once the transfer and withdrawal limit has been reached no further transfers will be made and checks and other items presented against my "TO Account" will be returned and a fee (the "NSF Fee") will be assessed for each item. The NSF Fee will be \$17 or such other amount as the Bank may charge from time to time for insufficient items and additional merchant fees may apply.

If there are items we are unable to return, a fee (the "Overdraft Fee") will be assessed for each check or other item paid into a negative balance on your checking account. There is a maximum of 8 Overdraft Fees assessed to an account on a single business day regardless of the number of items paid into a negative balance. The Overdraft Fee will be \$17 or other such amount as the Bank may charge from time to time for items paid into the overdraft.

Types of transactions that are limited on Savings and Money Market Accounts each statement cycle includes; telephone transfers, online banking transfers, mobile banking transfers, ACH debits, debit card purchases, other automatic payments or checks written during the month. For example, if your "FROM account" is a Money Market account, and you do two telephone transfers from the account and write two checks, you will be limited to only two SafetyLink Transfers during the month.

5. When the balance in the "FROM Account" is not sufficient to cover the full amount of the overdraft plus the amount of the transfer fee on the "TO Account," transfers will be made to cover items according to the standard processing order, and including the transfer fee.
 - For example, the "TO Account (checking account) started with a zero balance and the "FROM Account" had a balance of \$100.
 - The first item in processing order is check number 101 for \$120.00, no transfer would be made and the check would be returned.
 - The next item is check number 102 for \$80.00. The "From Account" has \$100, enough to cover the \$80.00 check and the \$10 transfer fee so the check will be paid.
 - The next item is check number 103 for \$20.00. Since there is only \$10.00 remaining available in the "FROM Account" the check will be returned and no transfer will take place.
 - The next item is check number 104 for \$5.00. Since there is \$10.00 remaining available in the "FROM Account" the \$5.00 check will be paid. No addition transfer fee will be assessed.
 - At the end of the day the account activity would reflect one transfer in the amount of \$95.00 to cover the \$80.00 check, the \$5.00 check and the \$10.00 transfer fee. In addition, an NSF Fee of \$34 will be assessed (\$17 each for the \$120 check and the \$20.00 check that were returned.)
6. I understand that any overdraft limits that may be a feature of my checking account will be unavailable if I select SafetyLink. I also understand that when funds are not available in my "FROM Account," or I have reached the transfer and withdrawal limit on my "FROM Account," checks and other items causing an overdraft on my checking account will be returned and a NSF Fee will be assessed and additional merchant fees may apply. If there are items we are unable to return, such as preauthorized transactions or checks cashed at the bank, an Overdraft Fee will be assessed for each item paid into overdraft.
7. I understand that when the SafetyLink Transfer Plan is in effect on my checking account any debit card authorization requests for point of sale transactions will not consider any balance in the "FROM Account." Debit Card authorizations will be based only on the available balance in the checking account assigned to the debit card at the time of the request.

8. This agreement will be immediately terminated without notice if you close either your "TO Account" or your "FROM Account." If the "FROM Account" becomes dormant from inactivity (no customer initiated activity for 24 months) SafetyLink will not make transfers to cover overdrafts until you take action to remove the "FROM Account" from dormant status by conducting a deposit or withdrawal transaction. Arvest Bank reserves the right to terminate this service with a 30 day advance notice or by terminating your "FROM Account" or your "TO Account" or both, with or without notice, in accordance with the terms of our account agreements.

9. You can cancel SafetyLink service at any time by visiting your local branch or calling Customer Service at 866-952-9523. If you cancel SafetyLink service, you will have the option of participating in the Arvest Bank Overdraft Protection Plan or electing no overdraft coverage on your account at all. If you do not select an overdraft option, you will be placed in our Basic Overdraft Coverage subject to our standard eligibility requirement at that time. The present requirements are 30 days of account history with less than 3 days where the account balance was negative at the end of daily processing and less than 3 NSF items were presented for payment.

Signature of Account Owner	Printed Name of Account Owner	Date
Signature of Account Owner	Printed Name of Account Owner	Date
Signature of Account Owner	Printed Name of Account Owner	Date
Signature of Account Owner	Printed Name of Account Owner	Date

Branch#: _____ Associate Name: _____ Phone: _____

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