

AUTOMATIC TRANSFER NOTICE

NAME(S)/ADDRESS OF DEPOSITOR(S)	NAME/ADDRESS OF FINANCIAL INSTITUTION First Carolina Bank 171 N Winstead Ave Rocky Mount, NC 27804
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The Automatic Transfer Notice is used to document a depositor's authorization to a financial institution to debit funds from an account(s) of the depositor for credit/payment to another deposit account or loan of the customer at the same institution on a periodic basis or upon the meeting of certain balance criteria.

Date Related Sweep
Beginning on _____, and ending on (if known) _____
Financial institution will transfer the amount of \$ _____, every week, month, _____
from Depositor's (1): _____, Account Number _____, for credit to Depositor's (2) _____, Account Number _____
There is a \$ _____ charge to Account Number _____ For each transfer of funds.
 no charge for each transfer of funds.
There is a \$30.00 charge to (1) Account Number _____ when account funds are insufficient to allow the scheduled transfer.

OVERDRAFT PROTECTION
If (1) Account Number _____ becomes overdrawn by at least \$ _____, Financial Institution will transfer from (2) Account Number _____ and (3) Account Number _____, in that order, the amount of Depositor's overdraft plus \$ _____, with a minimum transfer amount of \$ _____, to keep the account open.
There is a \$ _____ charge to Account Number _____ for each transfer of funds.
 no charge for each transfer of funds.

MINIMUM BALANCE SWEEP
Financial Institution will transfer funds from (1) Account Number _____ to (2) Account Number _____ when the Ledger Balance, Collected Balance, Available Balance in (2) Account Number _____ falls below a minimum balance of \$ _____. The amount to be transferred shall equal the amount necessary to obtain the minimum balance be in multiples of \$ _____.
There is a \$ _____ charge to Account Number _____ for each transaction of funds.
 no charge for each transaction of funds.

EXCESS SWEEP
Financial Institution will transfer excess funds from (1) Account Number _____ to (2) Account Number _____ when the Ledger Balance, Collected Balance, Available Balance in (1) Account Number _____ exceeds \$ _____, by at least \$ _____.
There is a \$ _____ Charge to Account Number _____ For each transfer of funds.
 no charge for each transfer of funds.

Federal regulation limits the number of checks, telephone transfers, online transfers and preauthorized electronic transfers to third parties (including Point of Sale transactions) from money market and savings type accounts. You are limited to six such transactions from each money market and/or savings type account(s) you have each month for purposes of making a payment to a third party or by use of a telephone or computer.

When automatically transferring funds between deposit accounts, we recommend that you monitor activity to ensure that your account balances remain within FDIC insurance coverage.

If no termination date is stated above, this Authorization will remain in effect until terminated in writing by either - Depositor or Financial Institution. Depositor understands that he/she must abide by the terms and conditions of all of the accounts named above and that this Authorization does not change any such terms and conditions.

SIGNATURES

Authorization. Effective on the date signed below, I/we authorize the Financial Institution to initiate the above transfer(s) of funds.

X _____ X _____

Date:

Date: