

**BMO Harris Authorization for Automatic Credit Card Payments (“Auto Pay”)
Consumer Form and Terms and Conditions**

Name(s): _____

Address: _____ City/State/ZIP: _____

Credit Card Number: _____

The undersigned authorize BMO Harris Bank N.A. as the issuer of the credit card identified above, its agents, and assigns (“Bank”) to debit the following checking account for the following amount due on the credit card:

Auto Pay Amount (select one):

The Minimum Payment Due for each billing cycle

The New Balance for each billing cycle

Debit my checking account number: _____

Financial Institution Name: _____

Address of Financial Institution: _____

Financial Institution Transit Routing Number: _____

The nine-digit number printed on the lower left corner of a check for the account.

For a non-BMO Harris Checking Account, the undersigned must include a voided check of the account to be debited. The voided check must include the account holder’s name and address.

Cancellation will only be effective in accordance with the Terms and Conditions provided with this Form. I/we agree to inform the Bank immediately of any change in the account number identified above. The Bank may terminate this Agreement at any time upon written notice. Participation in the Auto Pay Program is subject to the Terms and Conditions accompanying this Form. At least one Cardholder’s signature is required to authorize recurring automatic payments from the checking account listed on this Form.

Cardholder Signature

Date

Cardholder Signature of Co-Borrower (for joint Accounts)

Date

Bank Reference Only

Is the DDA account set up with a debit filter? Yes No

Fax to: 1-855-803-7342 or
Mail to: BMO Harris Bank N.A., P.O. Box 6101, Carol Stream, IL 60197-6101

Customer should retain a copy of this form and terms for their records.

Auto Pay Terms & Conditions

Retain a copy of these Terms and Conditions for your records. If you have any questions, please contact the Customer Service center at the number on the back of your card.

Enrolling in the Program

By enrolling in the BMO Harris Credit Card Automatic Payment Program (the “**Program**”), you authorize BMO Harris Bank N.A. (“**BMO Harris**”, “**we**” or “**us**”) to debit the bank account you designated (the “**Designated Account**”) on the Form included with these Terms and Conditions each billing cycle for the purpose of automatically making payments on the BMO Harris Bank Credit Card account (“**Card Account**”) that you identified on the accompanying Form.

Making and Scheduling Payments

The amount of the debit will depend upon the payment preference you have selected on the Form. Your Auto Pay Amount debit will occur on the Payment Due Date of your billing statement (“**Auto Pay Debit Date**”) or the next business day, if your Payment Due Date falls on a non-business day.

We will remind you on your billing statement of your upcoming Auto Pay payment and date the payment will be automatically debited. To receive confirmation of the debit transfer taking place, you may log onto your Card Account online at www.bmoharriscreditcards.com or call Customer Service at the number on the back of your card.

We may reduce the amount of your Auto Pay payment (“**Auto Pay Amount**”) when any unscheduled payments have been made after the closing date shown on your billing statement and prior to the scheduled Auto Pay Amount Debit Date. We will not debit your Designated Account in an amount that would cause your Card Account to have a credit balance. You can schedule up to one payment per month, and the amount of the payment cannot exceed your New Balance.

You must ensure that there are sufficient funds in the Designated Account on the Auto Pay Debit Date to pay the amount of the Auto Pay Amount. If any electronic payment is returned unpaid by your financial institution for any reason you may be charged fees based on the terms and conditions of the Cardholder Agreement.

Stopping Payments or Canceling Your Participation in the Program

To stop an automated payment, to change the amount of future automated payments, or to terminate your participation in the Program, you may write to us at the following address BMO Harris Bank N.A., P.O. BOX 6101, Carol Stream, IL 60197-6101 or call Customer Service at the number on the back of your Card. We must receive any changes from you at least three business days prior to the scheduled Auto Pay Debit Date.

Continuing Enrollment in the Program

Your Auto Pay Amount payments will continue until you cancel your enrollment.

Our Termination of the Program

We may discontinue the Program at any time and for any reason. We may discontinue your participation in the Program if any Auto Pay Amount payment is returned unpaid by your financial institution. We will notify you if we discontinue your participation in the Program. Regardless of whether you receive notice from us in advance of your next Payment Due Date, you are responsible for payments under the terms of your Cardholder Agreement.

Unauthorized Transfers

If you believe an unauthorized electronic fund transfer has been made, please contact us by calling the Customer Service number on the back of your card.