



AUTOMATIC PAYMENT AUTHORIZATION — INTERNAL

I authorize The Bancorp Bank, N.A. (Bank) to transfer funds from my deposit account at the Bank for payment of the below referenced loan, designed in PART 1.

I understand that transfers will be made monthly, unless the one-time transfer option is selected, on the due date of the loan payment. If the due date falls on a holiday or non-business day, the transfer will be made the next business day. This authorization will remain in effect until I have cancelled it in writing at least three (3) business days prior to the applicable payment date. For one-time transfers, the debit will be processed on the business day the Bank receives this completed and signed form unless it is received after business hours, in which case it will be processed on the next business day.

I also understand that if funds are not available on the due date, additional attempts will be made to satisfy the payment, up to nine (9) times over nine (9) calendar days. If the payment is not paid at the conclusion of the ninth and final attempt, I must make a payment by utilizing a different payment method. A late charge may be assessed. If your payments fail for three (3) consecutive months, we reserve the right to remove you from this service. You will be notified should this occur.

Note: If you authorize these transfers, you will continue receiving your monthly statements.

Teles. If you dution the those transfers, you will contain a receiving your monthly statements.				
PART 1: Loan Account With The Bancorp Bank, N.A. ("Transfer To")				
Loan Account Name (exactly as titled on the account statement)	Loan Account Number			
PART 2: Deposit Account With The Bancor	n Bank N.A. ("Transfer From")			
TART 2. Deposit Account With The Bulleon	p bank, re.A. (mansier moni)			
Deposit Account Name (exactly as titled on the account statement)	Account Number			
Account Type: Checking Savings				

AUTOMATIC PAYMENT AUTHORIZATION — INTERNAL

Page 2 of 2

PART 3: Monthly Loan Payment Information

Please select one of the following payment options. If no selection is made, the default will be Recurring monthly payments of exact amount billed beginnin
rease selectione of the following payment options: If no selection is made, the default will be necurring monthly payments of exact amount blilled beginning
on the next payment due date. This completed and signed Automatic Payment Authorization - Internal must be received by Bank at least three (3) business
days before the payment due date to allow for processing.

One-time transfer of	Regular Paymer	nt Principal Payment
Recurring monthly paymen	t of exact amount billed beginning on	the next payment due date ¹ .
Recurring monthly paymen	t of exact amount billed plusDollar.	additional principal each month to begin on the next payment due date
Fixed recurring monthly pa	yment of to be	gin on the next payment due date ^{1,2} .
	interest accrual exceeds this amount, the fu	ull amount billed will be deducted from my account. te as the payment due date referenced on your monthly loan statement.
PART 4: Signature		
Signature of Authorized Account Signe	er	Date (mm/dd/yyyy)
Print Name		
Please mail or fax this completed of Banking Services Attn: Loan De 409 Silverside Road, Suite 105, Wiln	epartment	
Fax: 302.791.5610 PLEASE RETAIN A COPY OF THI	IS FORM FOR YOUR RECORDS.	
FOR BANK USE ONL	Y	
Date Received (mm/dd/yyyy)	Date Set-up Completed (mm/dd/yyy	y) Processed by