



# Automatic Payment Enrollment

**Instructions:** Sign up today online by visiting [MyJDFAccount.com](http://MyJDFAccount.com), OR  
 Please print legibly, sign this enrollment form and send via one of the following:  
 • Email - [JDFCustomerService@JohnDeere.com](mailto:JDFCustomerService@JohnDeere.com) • Fax – 800-826-9527  
 • Mail - John Deere Financial ATTN: Payment Specialist PO BOX 5327 Madison, WI 53705

## Bank Account Information

Name of Person or Entity on Bank Account: \_\_\_\_\_

Type of Account:  Checking  Savings

Routing Number # (9 digit): \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

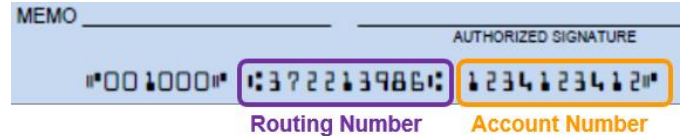
Enrollment Confirmation Email Address: \_\_\_\_\_

**Examples:** (a voided check is not required)

### **Personal Check**



### **Business Check**



John Deere Financial Account Number / App ID#	Accountholder Name	Accountholder Phone Number	Month to Begin Automatic Payments:

**For Revolving Plan Accounts Only:**  Minimum Payment Due or  Other Amount \$ \_\_\_\_\_

## **John Deere Financial Automatic Payment Authorization Form**

My signature authorizes Deere Credit Services, Inc. and its affiliates, (“the Company”), to initiate debit entries to the checking/savings account that I have provided to the Company for the regularly scheduled payments or other amounts owed to the Company on each individual John Deere Financial account referenced. I also authorize the Company to issue credit entries to the checking/savings account as necessary for amounts that may be due to me. If I have authorized payment of a specific amount (“Authorized Amount”) for a Required Payment, the Company is authorized to debit my Bank Account for the Authorized Amount for such Required Payments; provided, however, that: (i) if the Authorized Amount is less than the amount of the Required Payment, then I authorize payment of the amount of the Required Payment; and (ii) if the balance on the John Deere Financial account is less than the Authorized Amount, then only the balance, if any, will be debited. This authorization is to remain in full force and effect until canceled by the Company, or by written notification from me, given in such time and manner as to allow the Company a reasonable opportunity to act upon it. If any of the referenced John Deere Financial account is closed due to an Add-On transaction, consolidation or corrected loan agreement and I have recurring payments, this enrollment and banking information will be transferred to my new account(s). I acknowledge that I am subject to the NACHA Operation Rules and Guidelines applicable to electronic debit entries to my bank account.

**I understand any payment due prior to the month I requested above for each individual account must be made in order to be eligible for automatic payment for that account.**

Bank Account Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

Bank Account Owner Phone Number \_\_\_\_\_