

AUTOMATIC BANK DRAFT AUTHORIZATION FORM		
All information is required before processing.		
PERSONAL INFORMATION	FINANCIAL INFORMATION	
Name (please print)	Name of Financial Institution	
Service Address	Financial Institution Address	
City, State, and Zip	Financial Institution City, State, and Zip	
Telephone Number	Financial Institution Phone Number	
E-mail Address	Routing Number	Checking Account Number

Upon receipt of this completed authorization form, bank drafting of payments for the account(s) listed below will begin on the next billing statement. The word "MEMO BILL" will appear on your bill indicating the account(s) have been approved for automatic drafting. The payee on the statement from your bank will indicate EAST LOGAN WATER DISTRICT as the authorized drafting party.

I grant authority to EAST LOGAN WATER DISTRICT to draft my account listed above for payment amounts due on the account(s) listed below. The finical institution listed above is authorized to pay such drafts when so drawn and presented for payment until authority is revoked.

Signature (as accepted by your Financial Institution)

Date

Please list below the EAST LOGAN WATER DISTRICT account number(s) for each account to be paid by bank draft:

EAST LOGAN WATER DISTRICT Account Number(s)

Forward Completed Authorization Form

E-mail: <u>eastlogan@logantele.com</u>

Fax: 270-717-0958

Mail: 333 S Franklin Street

Russellville, Ky 42276

If you have any questions, please contact our office at 270-717-0991 during the hours of 8 a.m. to 4 p.m., Monday through Friday.