AND-TRO WATER AUTHORITY

Customer Authorization

I authorize And-Tro Water Authority and the financial institution listed below to initiate electronic debit entries. Payment will be deducted on the 14^{th} of each month (or the first business day after the 14^{th} , if it falls on a holiday or weekend). I understand that And-Tro Water Authority reserves the right to limit participation in automatic payment deduction to customers whose accounts are in good standing. This authority will remain in effect until I cancel it in writing with And-Tro Water Authority.

| Checking Account | (27) | | | | | | |
|-------------------------------------|-------|---------|-------|----------|------|---|--|
| Savings Account | (37) | | | | | | |
| Financial Institution | | _ City, | State | | | | |
| Service Address | | | | | | | |
| Customer Signature | | | | Date | | | |
| Customer Name (please print) | | | | | | _ | |
| Transit/Routing (ABA) Number | | | | | | | |
| | | | | | | | |
| Account Number at Financial Institu | ıtion | | | | | | |
| | | | | | | | |
| ***Please attach a voided check** | ** | | | | | | |
| FOR OFFICE USE ONLY | | | | | | | |
| ACCOUNT#(S) | | | | | | | |