

SERVICE ID #:

PWSD #1 of McDonald County
785A East State Hwy 90
Jane, MO 64856
417-226-0360

Authorization for ACH Debit

I (we) hereby authorize Public Water Supply District #1 of McDonald County (THE COMPANY) to initiate entries to my checking/savings account at the financial institution listed below (THE FINANCIAL INSTITUTION) and, if necessary, initiate adjustments for any transactions debited in error. This authority will remain in effect until THE COMPANY is notified by me (us) in writing to cancel it in such time as to afford THE COMPANY and THE FINANCIAL INSTITUTION a reasonable opportunity to act on it.

(Name of Financial Institution)

(Address of Financial Institution – Branch, City, State & Zip)

(Signature)

(Date)

(Name – Please Print)

(Address – Please Print)

To be drawn on 15th. If the bank is closed on the 15th it will be drawn the next business day.

Checking / Savings Account Number: _____

Financial Institution Routing Number: _____

Please attach a voided check below.