

Debit Authorization

I (we) hereby authorize Rural Water District No. 6, Garvin County hereinafter called "Company," to initiate debit entries to my (our) account indicated below and the financial institution named below, hereinafter called "Financial Institution," to debit the same to such account for the amount of my water bill. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Financial Institution _____ Branch _____

City _____ State _____ Zip _____

Routing Number _____ Account # _____

Type of Account (Checking or Savings): _____

This authorization is to remain in full force and effect until Company has received written notification or phone call from me (or any authorized account signer) of its termination in such time and manner as to afford the Company and Financial Institution a reasonable opportunity to act on the request.

Name(s): _____ Member Account # _____

Starting Date: _____

Date: _____

Signature **X** _____