



Automatic Payment Form

Sign up to have your monthly statement automatically withdrawn from your bank account or charged to your credit card.

Name

Address

City State Zip Phone

Pella Cooperative Electric Account Number

- Choose either withdrawal from your bank account or charge to your credit card.
- Provide the necessary information and sign the agreement below
- For automatic withdrawal from your bank account, please enclose a void check or deposit slip.
- Mail to: Pella Cooperative Electric, PO Box 106, Pella, IA 50219.

Yes! Sign me up for automatic withdrawal from my bank account.

Bank Name Bank Address

City State Zip Phone

Bank Routing Number Your Bank Account Number

Yes! Sign me up for automatic credit card payment. (Visa or MasterCard only)

Credit Card Number

Expiration Date

I (us) hereby authorize and request Pella Cooperative Electric hereinafter called PCE to effect payment for goods and services rendered at:

Service Address

by initiating debit entries to my account in the financial institution named hereinafter called BANK or charges against my credit card named hereinafter called CARD. These debit entries are to be initiated by PCE monthly as such amounts become due without any further authorization from me. I authorize and request BANK or CARD to accept any debit entries initiated by PCE to such account and to debit the same to such account without responsibility for the correctness thereof. It is understood that the debit entry sent to the BANK or CARD may not exceed the amount printed on the memo bill, which will be mailed approximately 20 days before the transfer takes place. The transfer will take place on the date shown as the "due date" on the memo bill. It is understood that this agreement may be terminated by me at any time up to here business days before the scheduled due date of transfer by oral or written notice to the PCE. Any such notification to the PCE shall be effective only with respect to entries debited to my account by BANK or CARD after receipt of such notification. It is also understood that I agree to be bound by the Operating Rules and Guidelines of the National Automated Clearing House Association and shall have the right set forth herein with respect to all entries initiated by PCE pursuant to this agreement.

Signature Date

Signature Date