

AUTOMATIC BILL PAYMENT

AUTOMATIC BILL PAYMENT service is offered at no additional cost for members of Butler County REC. The service provides monthly electronic transfer payments that save members the trouble of writing checks to pay their bill and postage costs.

Participating members receive their bill(s) marked "BANK DRAFT – DO NOT PAY." Two working days before the 28th of each month (or next banking day), we notify the financial institution of the amount to be transferred from the account to pay the electric bill. **The bank deducts that amount from the member's account on the 28th of each month (or next banking day).**

To sign up for Automatic Bill Payments:

1. Complete the authorization form below.
2. Sign the authorization form.
3. Attach a blank check (with the word **VOID** written across the face of the check)
4. Return to:

Butler County REC
521 North Main
PO Box 98
Allison, IA 50602

IMPORTANT: Don't forget to attach a VOIDED blank check with this authorization form.

BUTLER COUNTY REC AUTOMATIC BILL PAYMENT AUTHORIZATION

print names

I (We) _____ hereby authorize BUTLER COUNTY REC, to initiate debit entries to my (our) CHECKING _____ SAVINGS _____ account (select one) in the financial institution (BANK) named below. I (we) further authorize the BANK to debit such entries to my (our) account.

BANK _____ BRANCH _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

BANK TELEPHONE NUMBER _____

BANK ACCOUNT NUMBER _____

BANK ROUTING NUMBER _____

It is understood that this agreement may be terminated by me (either of us) at any time up to three business days before the 28th of the month by oral or written notice to BUTLER COUNTY REC. Any such notification to BUTLER COUNTY REC shall be effective only with respect to entries initiated after receipt of such notification.

It is also understood that I (we) agree to be bound by the Operating Rules and guidelines of the National Automated Clearing House Association and shall have the rights set forth here with respect to all entries initiated by BUTLER COUNTY REC pursuant to this agreement.

Depositor's Signature Date

Depositor's Signature Date

REC ACCOUNT NO. _____ REC ACCOUNT NO. _____

REC ACCOUNT NO. _____ REC ACCOUNT NO. _____

BUTLER COUNTY REC use only:
