



# Automatic Bill Payment Authorization

Send us this form to have your bill automatically deducted from your checking or savings account each month. You may also fill out the form on the back of your bill remittance slip.

The amount deducted from your account will be the total amount due on your bill. You'll still receive a bill statement in the mail so you'll know exactly how much to deduct each month.

Deductions are taken the 10<sup>th</sup>, 17<sup>th</sup> or 24<sup>th</sup> of each month. This form must be received in our office by the 28<sup>th</sup> of the month for your next month's bill to be drafted.

Mail with a voided check to Menard Electric Cooperative, PO Box 200, Petersburg, IL 62675.

Name: \_\_\_\_\_ SS# (last four digits) \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Account # \_\_\_\_\_

Bank Name: \_\_\_\_\_

Bank Account # \_\_\_\_\_ Routing # \_\_\_\_\_

Checking acct.  Savings acct.

Date payment will occur each month (choose one) \_\_\_\_\_ 10<sup>th</sup> \_\_\_\_\_ 17<sup>th</sup> \_\_\_\_\_ 24<sup>th</sup>

I, \_\_\_\_\_, authorize Menard Electric Cooperative (MEC) to draw monthly bank drafts through the automatic plan (ACH) on the account shown above for the payment of my electric bill in full and any other services I authorize. I understand that I may discontinue my participation at any time by notifying MEC in writing. Both MEC and the bank may terminate this agreement with 10 days written notice. I understand that MEC reserves the right to limit participation in this program to members who are in good standing; that the full amount of my bill will be drafted on the date selected or next business day; and that if funds are not available in my account there will a charge posted to my account and I will still be required to make full payment before the due date of the bill.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_