

AUTHORIZATION AGREEMENT

I (we) hereby authorize Highway 63 Water Users Assoc., Inc. hereinafter called COMPANY, to initiate debit/credit entries to my (our) account (if joint membership) indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to debit/credit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

PRIMARY ACCOUNT:

Date of Withdrawal: 7th of each month.

Financial Institution Name

Address

City/State

Zip

Bank Routing Number

Bank Account Number

Type of Account (circle one): Savings Checking

This authority is to remain in full force and effect until COMPANY has received written notification from me (either of us) of its termination in such time and manner as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

Should the COMPANY decide to discontinue the monthly debit/credit entries, a 30 day written notice will be provided.

A service charge will be applied to the customer's account should the draft be returned to the COMPANY unpaid by the FINANCIAL INSTITUTION

Print Name (as shown on Account)

Print Account Number

Signature

Date

Contact Phone Number

PLEASE ATTACH COPY OF A VOIDED CHECK TO THIS FORM