

BANK DRAFT AUTHORIZATION

TO WHOM IT MAY CONCERN:

I do hereby authorize Cobb EMC/Pataula District to draw a draft for my electric bill each month. I understand that the bill will be sent to me as usual so I can verify that the bill is correct before the draft is drawn on the 10th of the Month.

*Please enclose a voided check or a copy of a check.

Date of request _____

Name of Bank _____ Bank Transient # _____

_____ Bank Account # _____

Signature

Account # of Bills

***Please Note that if a draft is returned on this account it will no longer be drafted.**