FRANKLIN RURAL ELECTRIC COOPERATIVE

Automatic Bill Payment Authorization (ACH Debit)

PO Box 437, 1560 HWY 65, Hampton, Iowa

I (we) authorize Franklin Rural Electric Cooperative (Franklin REC) to automatically debit my (our) account, as noted below, for my (our) monthly Franklin REC charges. I (we) understand that this automatic debit will continue to recur each month for the amount due. I (we) may revoke this automatic payment authorization at any time with thirty (30) days written notice to Franklin REC.

I (we) also understand that I (we) are responsible for ensuring that the necessary funds are available at the time the debit occurs and I (we) may be charged a non-sufficient funds charge if funds are not available at the time of the debit. I (we) will continue to be responsible for payment should anything prohibit regular payment in this manner. Please contact us immediately should you have any questions concerning your bill at 641-456-2557 or email contact-frec@franklinrec.coop.

Name(s) on Franklin REC Account

Franklin REC Account Number(s)

Signature(s) of Account Holder

Date

Please provide a voided check to set up a checking account debit. <u>Payment processed around the 25th of each month.</u>

Bank Name

Bank's Routing Number

Bank Account Number

☐ Checking Account

☐ Savings Account