

**AUTHORIZATION AGREEMENT FOR DIRECT DRAFT
FROM YOUR CHECKING/SAVINGS ACCOUNT**

ACCOUNT NAME _____

ACCOUNT NUMBER _____

I (we) hereby authorize Mecklenburg Electric Cooperative hereinafter called MEC, to initiate drafts (debit) entries to my (our) ()Checking ()Savings account (select one) indicated below at the depository financial institution named below, hereinafter called BANK, and to debit the same to such account.

BANK NAME _____

CITY _____

STATE _____

ROUTING # _____

ACCOUNT # _____

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

NAME (S) _____

DATE _____

SIGNED (X) _____

SIGNED (X) _____

PLEASE ATTACH A VOIDED CHECK TO THIS AUTHORIZATION FORM WHEN RETURNED

Return To Your Local District Office:

**Gretna District
P O Box 617
Gretna, VA 24557
434-656-1288**

**Chase City District
P O Box 2451
Chase City, VA 23924
434-372-6200**

**Emporia District
P O Box 427
Emporia, VA 23847
434-634-6168**

PLEASE CONTINUE TO MAKE YOUR PAYMENTS AS NORMAL UNTIL YOU SEE "THIS BILL WILL AUTOMATICALLY BE DEDUCTED FROM YOUR CHECKING ACCOUNT" PRINTED ON YOUR BILLING STATEMENT. THIS PROCESS MAY TAKE 2-3 BILLING CYCLES.