



CRISP COUNTY POWER COMMISSION
ACH Debit Authorization

- Choose ONE:
 - ADD (New Participant)
 - CHANGE (Change Financial Institution and/or Account Number)
 - DELETE (Cancel Participation)

2. Complete the Following (Please Print or Type):

Financial Institution

Address

City/State/Zip

A voided check must be included with this form

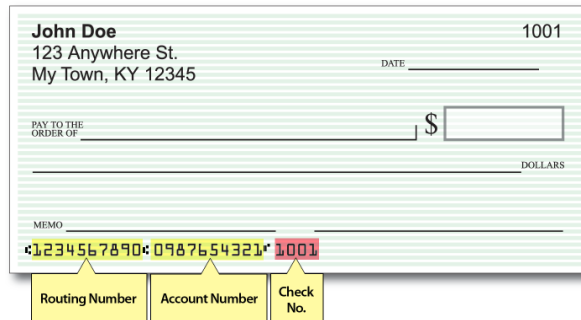
TRANSIT ROUTING NUMBER

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FINANCIAL INSTITUTION ACCOUNT NUMBER

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Where are my routing and account numbers on my check?



CCPC Account Number(s) or Member Number(s)

I hereby authorize CRISP COUNTY POWER COMMISSION, hereinafter called CCPC, to initiate debit entries and, if necessary, initiate credit correction or adjustment entries to my CHECKING account at the financial institution indicted above.

I understand the debit entries will RECUR MONTHLY on a date no earlier than the Due Date printed on my monthly bill. If the date of the debit falls on a non-banking day the debit will hit my account on the next banking day and will not hit my account prior to the authorized date.

I understand CCPC processes all draft authorizations immediately after they are received.

This authority is to remain in full force until CCPC has received written notification from me of its termination in such a time and manner as to afford CCPC and the Depository Institution a reasonable ability to act on it.

Print or Type Customer Name

Phone Number

Signature

Date
