AUTOMATIC BANK DRAFT

Save Time and Money Paying your Bills!

With our Bank Draft Program, you can have your monthly water bills paid automatically through your checking account. This saves you time and the expense of postage and envelopes. In addition, you will never have to worry about being late with your payment.

Here's How the Bank Draft Program works! Each month, you will be sent a statement showing the amount of your water bill. The water bills are due on the 10th of each month, on the 9th of each month your account will be drafted for the amount due on your water bill. If this date falls on the weekend or on a holiday, it will be drafted out on the next business day.

Signing Up is Easy! Simply complete the Automatic Bank Draft Authorization Form, attach a voided check, and return both documents to us. Your account will require a zero balance for the program to begin.

Please complete and return the Automatic Bank Draft Authorization Form along with a voided check to our office or mail to the following address:

East Allen Water Works 4033 Highway 26 Oberlin, LA 70655

If you have any questions about this program, please contact Stephanie or Melissa at (337) 639-4956 or (337) 603-9705. You can also contact us on our website, www.eastallen.my ruralwater.com or by E-mail, eastallenwaterworks@hotmail.com.

AUTOMATIC BANK DRAFT AUTHORIZATION FORM

| Personal Information | Financial Information (attach voided check) | | |
|---|--|--|--|
| Account Name | Name of Bank, Credit Union or Savings & Loan | | |
| Mailing Address | Bank Address (City, State, Zip) | | |
| City, State, Zip | Bank Routing Number (first 9-digit at bottom of check) | | |
| E-Mail Address | Checking Account Number | | |
| I (we) hereby authorize East Allen Water Works to initiate debit entries to my (our) Checking Account/ Savings Account (select one) indicated below at the depository financial institution named above and to debit 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. | | | |
| Signature (as accepted by Bank, Credit Union or Savings & Lo | an) Date | | |
| Please include the Water Service Account number and service address you would like to include in this service: | | | |
| Account/Location Number Service | e Address | | |

Send completed information, signed with a voided check to:

East Allen Water Works 4033 Highway 26 Oberlin, LA 70655

| Authorized Initial: | Authorized Date: | |
|---------------------|------------------|--|
| Authonzeu Initial. | Authorized Date. | |

ATTACH VOIDED CHECK HERE