

CLAIBORNE ELECTRIC COOPERATIVE, INC.
BANK DRAFT AUTHORIZATION
P. O. BOX 719
HOMER, LA 71040

DATE: _____

BANK NAME: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

ATTN: BANK BOOKKEEPING

I am a member of Claiborne Electric Cooperative, Inc., and have a checking account with your bank. This letter is to inform you that I wish to take advantage of Claiborne Electric's direct drafting for payment of my electric bill, and you are hereby authorized to allow drafting of my account for this purpose. Within a month you should be receiving a bank draft from Claiborne Electric, and I request that this draft, and future drafts from Claiborne Electric, be honored.

This letter was routed through the Claiborne Electric office prior to arriving at your institution. As you can see I have supplied them with my checking account number. With my signature, I hereby authorize drafting of my account for payment of my Claiborne Electric bills.

I understand that if this draft is dishonored, whether with or without cause, and whether intentionally or inadvertently, the bank shall be under no liability whatsoever.

This draft authorization shall remain in effect until revoked by me.

PRINTED
NAME: _____ SIGNATURE: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

Please enclose a VOIDED blank check so that Claiborne Electric will have the required data to send to the bank.

BANK ROUTING #: _____

CHECKING ACCOUNT #: _____