

# Meeker Cooperative Automatic Payment Plan Authorization

**I (WE) AUTHORIZE MEEKER COOPERATIVE TO INITIATE ENTRIES TO DEBIT MY (OUR) ACCOUNT DESCRIBED BELOW:**

Account Type:     Checking Account No. \_\_\_\_\_

Savings Account No. \_\_\_\_\_

Financial Institution \_\_\_\_\_

Financial Institution's Address \_\_\_\_\_

**Please attach a voided check or a savings deposit slip.**

Routing No. \_\_\_\_\_

**THIS AUTHORITY IS TO REMAIN IN FULL FORCE AND EFFECT UNTIL MEEKER COOPERATIVE HAS RECEIVED WRITTEN NOTIFICATION FROM ME (OR EITHER ONE OF US) OF ITS TERMINATION IN SUCH A TIME AND MANNER AS TO AFFORD MEEKER COOPERATIVE A REASONABLE OPPORTUNITY TO ACT ON IT.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Full Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Optional—For Joint Account)

Print Full Name \_\_\_\_\_

Telephone No. \_\_\_\_\_ Meeker Cooperative Account Number(s):

\_\_\_\_\_

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## HOW DO I APPLY?

Follow these easy steps:

1. On the authorization form above, print your name(s), address and Meeker Cooperative Account Number(s) exactly as they appear on your Meeker Cooperative electric bill.
2. Print your financial institution's name and address on the lines provided.
3. If your payment is to be deducted from a checking account, attach a blank check. Write VOID across the check. PLEASE DO NOT SIGN IT.
4. If your payment is to be deducted from a savings account, enclose a deposit slip that has your account number on it.
5. Sign and date the form. Be sure all signature(s) match bank records. If the account is in two names, either account holder may sign.
6. Return the upper portion of this form to: Meeker Cooperative, 1725 US Hwy. 12 E., Litchfield, MN 55355.

**Thank you for choosing Automatic Payment!**