As a duly authorized check signer on the financial institution account identified below, I authorize Dubois Rural Electric Cooperative, Inc. to draw monthly drafts on my bank account as listed below for the payment of my monthly electric bill. I understand that I can discontinue my participation by notifying Dubois REC in writing. I understand that Dubois REC reserves the right to limit participation to customers whose accounts are in good standing, and reserves the right to discontinue this agreement.

Furthermore, if any such electronic debit(s) should be returned by my financial institution as inactive, closed, or Non-Sufficient Funds (NSF), I authorize, Dubois REC to collect a returned check fee as set forth in Dubois REC's nonrecurring charges in effect at the time, and that my utility account shall be considered unpaid on the due date and may be subject to termination of utility service if my account remains unpaid. For accounting purposes, all electronic debits will be reflected in the monthly bank statement that corresponds with the financial institution account identified below.

I understand and authorize all of the above as evidenced by my signature below.

AUTHORIZING SIGNATURE: _____

DATE: ____

Dubois REC Account Information	Financial Account Information (Enter financial institution account information or attach a VOID check.)
Dubois REC Account Name:	Name of Financial Institution:
Street Address:	Branch:
City, State, Zip code:	City, State, Zip code:
Phone:	Transit/ ABA #:
All Dubois REC Account Numbers:	Bank Account #:

PLEASE SEND VOIDED CHECK WITH THIS APPLICATION

Bank Routing Number Some financial instit		l institutions add the between the Routing	
1.) Routing Number - This	-	2.) This Account Number is usually to the right of the Routing Number.	
Memo	(XX) -: (XXXX XXXX XXXXX)		
— E	XA		
Pay to the Order of	XAMPLE	Date	
John Doe 123 Street Anycity, ST 00000	Financial Institution 510 Money Street Anycity, ST 00000	00001	