



ACH AUTHORIZATION FORM

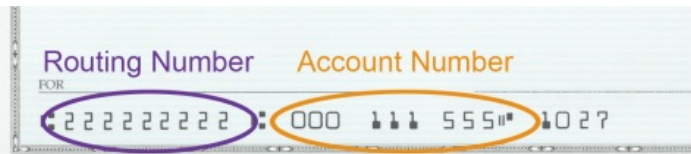
How it Works: After you are enrolled for ACH payment, you will continue to receive a detailed bill but mailing a payment will not be necessary. When this ACH payment option is in effect, you will see "Paid by Draft" printed on your bill as a reminder that you don't need to send any payment into Lakeshore. Your account will be debited within 1 week of bill due date. Please call our office at (903) 675-4316 if you have any questions prior to enrolling.

How to Enroll: Complete the form below and mail or deliver to:

Lakeshore Utility Company
106 E. Corsicana St.
Athens, TX 75751

Complete all information and sign. Please print clearly.

| | |
|--|-------------------------|
| Name: _____ | |
| Lakeshore Account Number: _____ | |
| Service Address: _____ | |
| City: _____ | State: _____ Zip: _____ |
| Phone: (____) _____ | Email: _____ |
| Financial Institution: _____ | Branch: _____ |
| Type of Account: <input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account (no passbook accounts) | |
| ABA Routing Number: _____ | Account Number: _____ |



I hereby authorize my financial institution to charge the account I have specified in the amount of my Lakeshore Utility Company (Lakeshore) bill and send that amount to Lakeshore. I agree that each charge to my account shall be the same as if had signed a check to pay my bill. This authority will remain in effect until I notify Lakeshore otherwise. If I wish to terminate ACH payment, change the account or financial institution specified, I will provide written authorization of such to Lakeshore. I understand that Lakeshore and the financial institution reserve the right to terminate my participation in this ACH Program. I further authorize Lakeshore to make the necessary adjustments as required for incorrect or duplicate debit entries received in error.

Signature: _____ Date: ____/____/____

Please remember to include a blank check or copy of a check, marked "VOID", along with this form.