AUTHORIZATION

AGREEMENT

AUTOMATIC BILL PAYMENTS

I (We) hereby authorize James Fork Regional Water District to initiate charge entries to my (Our) checking/saving account indicated below at the Bank named below, hereinafter called the Bank, and to charge the same to such account.

name:						_	
Address:						_	
Phone Numbers:						_	
Bank Name:						_	
City:		State:		Zip:		_	
Checking Acct. #		or Saving	s Acct.	#		_	
This authority is to notification from mafford District and I District reserves the	e (or either of u Bank a reasona	us) requesting able opportur	g termi nity to a	nation in act on it.	n such time . James Fork	and manne « Regional \	r as to Vater
Date:	Signature:	:					
Date:	Signature:	· 					
**PLEASE INCLUD	E A VOIDED C	HECK WITH	THIS F	ORM.			
THIS PORTION TO E	BE COMPLETE	D BY JAMES F	ORK R	EGIONA	L WATER DI	STRICT	
ACCOUNT#:		BANK C	CODE:_				
CUSTOMER BANK	\CCT.#				_		
BANK ROUTING#_					_		
COMPLETED BY:					_		