



Butte Electric Cooperative, Inc.

PO Box 137

Newell, SD 57760-0137

605-456-2494 or 1-800-928-8839

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS

(ACH Debits)

I _____, BEC Account # _____
hereby authorize Butte Electric Cooperative to initiate debit entries to my ___Checking
___Savings (check one) indicated below at the depository named below, hereinafter
called DEPOSITORY, to post the same to such account. The amount debited to your
bank account will be the amount of your monthly bill.

Depository Name _____

Branch _____

City/State/Zip _____

Routing Number _____

Account Number _____

Transfer Purpose _____

Start Date _____

Preferred Withdrawal Date ____5th ____15th (check one)

This authorization is to remain in full force and effect until Butte Electric Cooperative has written notification from me of its termination in such time and in such manner as to afford Butte Electric Cooperative and DEPOSITORY a reasonable opportunity to act on it.

Signed: _____