

ELECTRONIC FUNDS TRANSFER



Authorization for Direct Debit of Electric Bill Payment

THIS IS TO ADVISE YOU that I, the undersigned, a member of Cimarron Electric Cooperative, P.O. Box 299, Kingfisher, OK 73750, do hereby authorize said Cooperative, through its authorized employee, to draw monthly drafts on my account in your bank for current electric account and service furnished to me by the said Cooperative. Your authority to charge such drafts to my account shall cease upon my delivery to you of written notice of revocation of this authority, and until you actually receive such notice I agree that you shall be fully protected in honoring any such drafts. I further agree that if any such draft be dishonored whether with or without cause and whether intentionally or inadvertently, you shall be under no liability whatsoever even though such dishonor results in the forfeiture of service or disconnection of this utility.

FINANCIAL INSTITUTION NAME: _____

ROUTING NUMBER: _____

ACCOUNT NUMBER: _____

CHECKING SAVINGS

Funds will be drafted from your account on the 9th or the following Monday of every month. I understand that it is my responsibility to notify Cimarron Electric Cooperative of any changes to my direct debit account a minimum of four business days prior to the scheduled date for the funds to be transferred. This will ensure all changes are processed correctly.

MEMBER'S NAME (please print): _____

PHONE NUMBER: _____

CIMARRON ELECTRIC ACCOUNT NUMBER(S): _____

SIGNATURE

DATE

Completed forms can be returned to our office, mailed or emailed to billing@ce.coop.

Cimarron Electric Cooperative
PO Box 299
Kingfisher, OK | 73750

For more information or questions please contact Kayla Hamil at 405.375.4121 or 1.800.375.4121