



ph: (641) 332-2000 fax: (641) 332-2001

Automatic Bank Payment

Stop paying your bill with a check!
Save Time, Money and Postage!
Use electronic fund transfer to make your bill paying easier.

| Customer Information: | | | |
|--|-------------|---|---|
| Your Name: | | Acct/Tele #: | |
| Address: | | Soc. Sec. #: | |
| City: | State: | Zip Code: | |
| Home Phone: () | | Work Phone: () | |
| Name of Bank or Credit U | nion: | | |
| Routing Number: | | Account Number : | _ |
| Address: | | | |
| Type of Account: Checkin | g Savings _ | | |
| Bank Telephone Number: | | | |
| | | ons to deduct my payment from the account (s) listed abord, at any time, I decide that I would like to discontinue this | |
| Signature: | | Date: | |
| Return Form to: | | | |
| Guthrie Center Communic 403 State Street Guthrie Center, Iowa 5011 | | | |

We acknowledge that the origination of ACH entries to our account must comply with the provisions of U.S. law.