

FGWS Account name and # _____

FOR YOUR CONVENIENCE, WE OFFER BANK DRAFTING OF PAYMENTS INSTRUCTIONS TO SET UP PREAUTHORIZED PAYMENTS:

1. Carefully complete and return the following information:
2. Enclose a voided check or deposit slip from your current bank account

AUTHORIZATION TO HONOR DRAFTS

To: _____ Bank

Bank Address: _____

As a convenience to me, I hereby request and authorize you to pay and charge to my account drafts drawn on my account by and payable to the order of **Fort Gates Water Supply Corp., Gatesville, Texas**, provided there are sufficient collected funds in said account to pay the same upon presentation.

This authority is to remain in effect until revoked by me in writing.

Printed name of Bank Depositor

Bank signature of Depositor

Routing Number

Bank Account Number

Date

Your bill will be mailed on the first working day of the month, and will show the amount to be drafted from your bank account approximately on the **10th day of each month.**