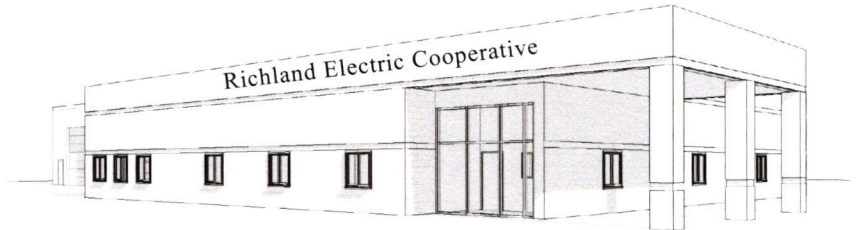




Richland Electric Cooperative

P.O. Box 439
Richland Center, WI 53581
Telephone (608) 647-3173
FAX (608) 647-4265



30 E Robb Road

PREAUTHORIZED PAYMENT/CHANGE AUTHORIZATION

CREDIT/DEBIT CARD

Credit/Debit Card can be setup by visiting <http://rec.coop/> and selecting SmartHub. You will need a valid email address and your account # to set up your credit/debit card.

CHECKING/SAVINGS

[] CHECKING [] SAVINGS

PLEASE ATTACH A VOIDED CHECK TO INSURE PROPER INFORMATION REGARDING YOUR ACCOUNT

FINANCIAL INSTITUTION _____

LOCATION _____

TRANS/ABA (BANK) # _____ ACCT. # _____

(9 digit # that appears on the bottom of a check or deposit slip)

Payment are due on the 25th of each month in which you receive your bill. There are two options for ACH withdrawal dates. Please select one of the following dates that works best for you.

15th of each month 25th of each month

AUTHORIZATION AGREEMENT FOR AUTOMATIC MONTHLY PAYMENTS

I hereby authorize Richland Electric Cooperative to initiate debit entries to my (our) Checking or Savings listed below for the amount due.

The authority is to remain in full force until Richland Electric Cooperative and Financial Institution has received written notification from me (or either of us) of its termination in such timely manner as to afford Richland Electric Cooperative and Financial Institution a reasonable opportunity to act on it.

Name On Account _____

Richland Electric Cooperative Account # _____

Phone # _____

Requested By _____

Signature _____ Date _____

