

AUTO PAY AUTHORIZATION

Enroll in Auto Pay and your monthly bill will be automatically deducted from your bank account on the due date.



No late fees



No checks or envelopes



Peace of mind each month



One less thing to think about

Name	Account Number(s)
Phone Number	Email Address
Service Address	
Financial Institution	
Routing Number	Bank Account Number
☐ Checking	☐ Savings

I authorize Nobles Cooperative Electric to initiate electronic payments from the account listed above. This authorization will remain in effect until I notify Nobles Cooperative Electric in writing to cancel it.

Signature	Date
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Please enclose a blank check or savings deposit slip.
Write **VOID** across the check.
DO NOT SIGN THE CHECK.
MAIL this form to Nobles Cooperative Electric.