ACH Origination Agreement/Third-Party Sender

Schedule E – Credit/Debit Authorization Form I hereby authorize ____ Coke County Water Supply Corporation ___ ("COMPANY") to initiate entries to my checking/savings account(s) at the financial institution listed below ("FINANCIAL INSTITUTION"), and, if necessary, initiate adjustments for any transactions credited/debited in error. This authorization will remain in effect until COMPANY is notified by me in writing to cancel it in such time as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it. Receiver Name: _____ Financial Institution: Routing Number: _____ (Look between the is symbols on the bottom left of the check) Account Number: Account Type: _____Checking _____Savings Amount: \$ (Specific or Variable Range, Blank for Direct Deposit of Payroll) Receiver Signature: _____ Date:

Please attached voided check below