

**FLO COMMUNITY WATER SUPPLY CORPORATION**

13934 FM 1511, Buffalo, TX 75831  
903-322-4134 (phone) ~ 903-322-1778 (fax)  
www.flocommunitywater.org

**CHECK BY PHONE PAYMENT AUTHORIZATION (ACH)**

I (we) hereby authorize **Flo Community Water Supply Corporation**, to initiate debit entries by electronic means to my checking or savings account indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

This authorization shall remain in full force and effect until Flo Community Water Supply Corporation has received written notification from me (or either of us) of its termination in such time and in such manner as to afford Flo Community Water Supply Corporation and the bank stated below a reasonable opportunity to act on it.

**THIS IS NOT AN AUTOMATIC DRAFT!!! IF MY BANK ACCOUNT CHANGES I MUST FILL OUT A NEW CHECK BY PHONE PAYMENT AUTHORIZATION FORM FOR THAT ACCOUNT.**

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Water Account Number

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Bank Name

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Bank Routing Number (always 9 digits)

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Bank Account Number

\_\_\_\_\_  
Signature Of Bank Account Owner

DRAFT EMAIL NOTIFICATION [ ] Yes [ ] No  
Please select one: [ ] Checking OR [ ] Savings

\_\_\_\_\_  
Date

\_\_\_\_\_  
Email Address:

**\*\*\* PLEASE INCLUDE A VOIDED CHECK \*\*\***

Flo Community WSC reserves the right to process drafts electronically, at first presentment and any re-presentments, if any, by transmitting the amount of the check, routing number, account number and check serial number to your financial institution. Your checking account may be debited as soon as the same day as authorized above. If we cannot collect the funds electronically at first presentment, your account will be charged a \$30.00 return check fee.

NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

Employee Name: \_\_\_\_\_ Date Received: \_\_\_\_\_

Employee Name: \_\_\_\_\_ Date Canceled: \_\_\_\_\_