



"Owned By Those We Serve" 1.800.262.5131

Headquarters
PO Box 602
Nahunta, Ga. 31553
Phone: 912.462.5131
Fax: 912.462.6100

Kingsland
PO Box 2530
Kingsland, Ga. 31548
Phone: 912.882.1362
Fax: 912.882.1624

Hilliard
PO Box 1229
Hilliard, Fl. 32046
Phone: 904.845.7477
Fax: 904.845.7510

Date _____

Account Name _____ Account Number _____

We appreciate your interest in the draft program. This service provides a convenient way for your electric bill to be paid each month without writing a check and paying postage.

You may select **any** of the dates shown below for your Draft Date. In order for your bill to be mailed approximately 10 days before your selected Draft date, the Billing Date and Past Due Date on your account may change. Please circle the Draft Date that you wish to have your draft submitted to our bank.

Draft Date: 1st 4th 7th 10th 13th 16th 19th 22nd 25th 28th

Please read the authorization below and complete the "First Draft Date".

Authorization to Draft Bank Account

As a convenience to me, I hereby request and authorize Okefenoke REMC to submit drafts or electronic debits to be drawn against my bank account payable to Okefenoke REMC, Nahunta, GA to be credited to the account name and account number shown above. I agree that your rights in respect to each such draft or electronic debit shall be the same as if it were a check personally signed by me. This authorization is to remain in effect until revoked by me in writing, and until Okefenoke REMC receives such notice, I agree that Okefenoke REMC shall have no liability in submitting any such draft or electronic debit.

I further agree that if any such draft or electronic debit is dishonored whether with or without cause and whether intentionally or inadvertently, Okefenoke REMC shall have no liability whatsoever. I further agree to pay any charges levied on my account by Okefenoke REMC for any draft or electronic debit returned due to insufficient, unavailable or uncollected funds, stop payment or closed account.

First Draft Date ____/____/____

Authorized Signature on Bank Account

Return this letter and a voided check (not a deposit slip) from the bank account you want us to draft.