

North Central Missouri Electric Cooperative
E-Z-PAY Automatic Payment Authorization

Member Information

Member Account Number: _____
Member Name(s): _____
Phone Number: _____

Bank Information

Bank Name: _____
Bank Phone (optional): _____
Routing Number: _____
Account Number: _____
Name(s) on Account: _____
 Checking Account Savings Account

Authorization Terms

I (We) authorize North Central Missouri Electric Cooperative, Inc. (NCMEC) to automatically debit my (our) bank account for the full amount of the monthly electric bill.
Draft Date: Payments will be deducted on the **6th of each month**. If the 6th falls on a weekend or holiday, payment will be drafted on the next business day.
First Month Notice: The first month of enrollment will be sent through the banking system as a prenote. During this prenote period, the first month's bill will be processed manually for the amount due.
This authorization will remain in effect until I (we) notify NCMEC to discontinue the service. NCMEC and the financial institution shall have reasonable time to process any cancellation request.
Both NCMEC and the financial institution reserve the right to terminate participation in this program.

Signatures

I (We) acknowledge that I (we) am (are) authorized signer(s) on the account listed above.
Signature: _____ Date: _____
Signature: _____ Date: _____
(If account is joint, both signatures are required.)

Please attach a voided personalized check to this form.