



Authorization For Automatic Payment

Nodak Electric Cooperative, Inc.
PO Box 13000
4000 32nd Ave South
Grand Forks, ND 58208-3000
800-732-4373 or 701-746-4461 fax 701-795-6701
www.nodakelectric.com
email: nodak@nodakelectric.com

Please complete and return this form. Please print clearly.

I authorize Nodak Electric Cooperative, Inc. and my financial institution to initiate entries to debit my account described below. I understand that this authority is to remain in effect until Nodak Electric Cooperative, Inc. has received notification of its termination and shall be received in such time as to afford Nodak Electric Cooperative, Inc. a reasonable opportunity to act on it.

Customer Information

Nodak Electric Account Number _____

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Signature _____ Date _____

Financial Institution Information

Financial Institution Name _____

Address _____

Routing Number _____

The routing number is a 9-digit number located at the bottom of the check after I: and before I:

Account Number _____

Account Type (circle one) Checking Savings

Bank Account Type (circle one) Personal Business

PLEASE ENCLOSE VOIDED CHECK

For office use only

Entered by _____

Start Date _____