Authorization for Direct Payment Via ACH to West River Lyman Jones Rural Water System

We are pleased to be able to offer you a popular service-the Direct Payment Plan. Now you can have your payment made automatically from your checking or savings account. And you won't have to change your present banking relationship to take advantage of this service.

The Direct Payment Plan will help you in several ways.

- It saves time-fewer checks to write.
- Helps meet your commitment in a convenient and timely manner-even if you are on vacation or out of town.
- No lost or misplaced statements, your payment is always on time-it helps maintain good credit.
- It saves postage.
- It is easy to sign up for, easy to cancel.
- No late charges.

Here's how the Direct Payment Plan works: You authorize regularly scheduled payments to be made from your checking or savings account. Then, just sit back and relax. Your payments will be made automatically on the specified day. And proof of payment will appear on your statement.

The authority you give to charge your account will remain in effect until you notify us in writing to terminate the authorization. If the amount of your payment changes, we will notify you at least 10 days before payment date.

The Direct Payment Plan is dependable, flexible, convenient and easy. To take advantage of this service, complete the attached authorization form and return it to us.

AU	THORIZATION FOR DIRE	CT PAYMENT VIA ACH	Please fill out this form in its
Check one: Begin Payment	Change Info	rmation	entirety.
I authorize the West River Lym and, if necessary, to electronic			o electronically debit my account s.
checking account	savings account	(select one)	
at the depository financial inst United States and applicable la			ons I authorize comply with all
Financial Institution		Name(s) on Account (Please Print)	
Branch		Signature	
City State	Zip Code		Date
TRANSIT ROUTING NUMBER :I		ACCOUNT NUMBER INFO	RMATION
On I authorized West River Lyman Jones Rural Water System			
Date	PO Box 407		e: (605)669-2931
	Murdo, SD 57559-0407		

STAPLE VOIDED

(select one) Single Debit Entry

Recurring Debit Entry

to initiate entries to my checking/savings account and have agreed to the terms listed on the authorization. I may

revoke my authorization with you at any time by contacting the information above.

Amount of debit, or method of determining amount of debit: ____

Start date of debit: _____

Frequency of Debit:_____