PRAIRIE LAND
Electric Cooperative, Inc.

AUTHORIZATION AGREEMENT

When signing up for automatic payment please ensure your account is at a zero balance or give PLE permission to run your payment for the current due immediately.

If you want to sign up for auto payment using a credit card you can go to www.prairielandelectric.com.

AUTOMATIC PAYMENTS (ACH DEBITS)

Complete the information below or go to www.prairielandelectric.com to enter the information.

I (we) ________________________________ hereby authorize Prairie Land Electric Cooperative, Inc., hereinafter called COMPANY, to initiate debit entries to my (our) account indicated below and the Financial Institution named below, hereinafter called FINANCIAL INSTITUTION, to debit the same to the listed account(s) on the due date or draft date identified on my monthly bill, beginning on the next billing cycle. The amount to be debited will be the balance owed on my account as of each due date. If there is currently a balance on my account, I acknowledge this enrollment will not apply to that balance and separate payment will be required.

____________________________ Electric Account Number

____________________________ Additional Electric Account Number(s)

Account Type

☐ Checking ☐ Savings

I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with provisions of U.S. law.

Financial Institution Name	Routing Number	Account Number

PLEASE ATTACH COPY OF VOIDED CHECK

This authority is to remain in full force and effective until COMPANY has received written notification from me (or either of us) of its termination in such time and manner as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

Terms and Condition, customer's signature and date required, a copy of voided check, and form mailed back to us or go to www.prairielandelectric.com and enter the information yourself. Once we receive the signed form back, ACH will start with your next billing period. Auto pay Customer's that pay with insufficient funds will be charged a $30 return fee. The returned payment charge will be applied to your balance and the immediate amount due must be paid within 10 days, customer will then be removed from automatic payments if not paid in full.

Print Individual Name	Signature	Date

14935 US Hwy 36, PO Box 360, Norton, KS 67654-0360 (785) 877-3323 FAX (785) 877-3572