



Appalachian Electric Cooperative

Authorization Form for Free Automatic Clearing House (ACH)

(Please Print) _____

(Your Name as Shown on Electric Bill)

Checking Account Number: _____

Name of Bank & Branch, if any: _____

Street Address if Bank _____

(City)

(State)

(Zip)

I hereby authorize my electric bill to be paid by my Bank:

_____ (Depositors Signature)

Phone Number: __ (____) _____ Date: _____

AEC Account # _____

**** Please provide a voided check on the account to be drafted**

Return to AEC for processing **

To: The Bank Named on the Reverse Side

I authorize Appalachian Electric Cooperative to debit my bank account monthly by Automated Clearing House for the payment of my electric bill due to Appalachian Electric Cooperative.

I further agree that you shall be under no obligation to furnish me with any special advice or notice in writing or otherwise of the charging of same to my account.

This authorization is to remain in effect until revoked by me in writing. Until you actually receive such notice, I agree you shall be fully protected in honoring any such electric debit to my account.

NOTE TO BANK: if the information on the card does not agree with your records, or if the arrangement is not in keeping with your procedures, please contact Appalachian Electric Cooperative, P. O. Box 710, Jefferson City, TN 37760.

Telephone: 865-475-2032 ext. 1107 (Jefferson & Sevier Counties)

865-828-5225 (Grainger County)

423-586-4755 (Hamblen County)