

WEST CENTRAL ELECTRIC DIRECT PAYMENT PLAN

West Central Electric is pleased to offer you the ease and convenience of 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're 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's 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. You will receive your electric bill as usual, marked Paid by Bank. Your payments will be made automatically on the 20th day of the month. Proof of payment will appear with your bank 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 authorization form below and return it to us.

Complete the form below and mail to:
West Central Electric Co-op
PO Box 17
Murdo SD 57559

AUTHORIZATION FOR DIRECT PAYMENT

STAPLE VOIDED CHECK HERE

I authorize **West Central Electric Co-op, Inc.** and the financial institution named below to initiate entries to my checking/savings account. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it. I can stop payment of any entry by notifying my financial institution 3 days before my account is charged.

(NAME OF FINANCIAL INSTITUTION) _____ (BRANCH) _____

(CITY) _____ (STATE) _____ (ZIP CODE) _____

(SIGNATURE) _____ (DATE) _____

(NAME – PLEASE PRINT)

(ADDRESS – PLEASE PRINT)

Account No. _____ Checking or Savings

Financial Institution Routing Number _____

(between these symbols ■ ∴ ■ ∴ on the bottom left of your check)