



HIGHLINE ELECTRIC ASSOCIATION

P O Box 57
Holyoke, Colorado 80734

BANK AUTHORIZATION

(for Automatic Bank Payment)

FOR YOUR SECURITY, PLEASE DO NOT RETURN FORM VIA EMAIL.

(Name)

Member Account Number(s)

(Address)

(Town/State/Zip)

This is to authorize _____
(Name of Financial Institution)

located in _____
(Name of Town)

to honor the monthly statements of Highline Electric Association as though they were my personal check, to be paid approximately the 10th of each month.

Name as appears on bank account: _____

Bank Routing #: _____

Corporate

Bank Account #: _____

Personal

(Signature)

(Date)