



Rochelle Municipal Utilities

333 Lincoln Highway
P.O. Box 456
Rochelle, Illinois 61068
Tele: (815) 562-4155
Fax: (815) 562-5861

AUTHORIZATION AGREEMENT FOR ELECTRONIC FUNDS TRANSFER

Customer Name

Address

City

State

Zip

Signature

Date

RMU Acct Number

By signing above I hereby authorize Rochelle Municipal Utilities and the financial institution designated to begin deductions for Electronic Funds Transfer payments. I understand an Electronic Funds Transfer of the billing amount will be made each month on the bill's due date. I further understand the Electronic Funds Transfer will begin on the bill's due date immediately following the date listed above.

Financial Institution

Branch

Address of Financial Institution

Routing Number

Account Number

This authorization is to remain in effect until RMU has received written notification of the termination of this agreement.

ATTACH CANCELLED CHECK