



1850 West Oklahoma Ave. / Ulysses, Kansas 67880



Debit Entry (ACH) Authorization

Please complete this authorization form and return it to Pioneer Electric.

Company Name: Pioneer Electric Cooperative, Inc.

Company Account No: _____

(If you have multiple accounts, please continue listing the account numbers on the back)

I (we) hereby authorize Pioneer Electric Cooperative, Inc., hereinafter called COMPANY, to initiate debit entries to my (our) Checking Savings account (select one) indicated below and the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Due to the new rate schedules (effective June 1, 2009), billing dates will be changed from the fifth working day of each month to the 12th of each month, unless the 12th is on a weekend or holiday. In that case, the billing date will be the Friday prior to the weekend or the day prior to the holiday.

Any non-residential service that has their account(s) paid automatically by electronic funds transfer (EFT) will be drafted 14 days after the billing date. All residential services EFT date will be drafted 19 days after the billing date. If the EFT date is on a weekend or holiday, the EFT date will shift to the following business day.

Depository Name: _____

Branch: _____

City: _____ State: _____ Zip: _____

Transit / ABA No. _____ Account No. _____

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

Name(s): _____

Date: _____

Signed: _____

Company Account No: _____

Company Account No: _____

Company Account No: _____

Company Account No: _____

Company Account No: _____

Company Account No: _____

Company Account No: _____

Company Account No: _____

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