

**AUTHORIZATION AGREEMENT FOR
DIRECT PAYMENTS**

**BANK OF GLEN ULLIN
PO BOX 99
106 SOUTH AVE W
GLEN ULLIN, ND 58631-0099**

AGREEMENT DATE

ACCOUNT HOLDER INFORMATION

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CREDIT ACCOUNT #	ACCOUNT TYPE	DEBIT ACCOUNT #	ACCOUNT TYPE
86	DDA		Checking <input type="checkbox"/>
			Savings <input type="checkbox"/>

CREDIT ACCOUNT INFORMATION	DEBIT ACCOUNT (Bank) INFORMATION (if different than above)
City of Glen Ullin, Water Department PO Box 70 Glen Ullin, ND 58631	Routing Number

AMOUNT	FREQUENCY
varies by bill	On the 15th of each month.
TERMINATION DATE	
UFN	

The RDFI is responsible only for performing the services provided for in this Authorization. The terms, conditions, and limitations of liability that govern this Authorization are stated in the Electronic Fund Transfer Disclosure and Account Agreement Accountholder received at account opening.

This Authorization will remain in full force and effect until Originator has received written notification from the Accountholder of its termination in such time and manner as to afford Company and RDFI a reasonable Opportunity to act on it.

Accountholder authorizes the Company to initiate debit entries to their account at the RDFI, and to debit the same to such account. Accountholder acknowledge's that the origination of ACH transactions to the account must comply with the provisions of U.S. law.

SIGNATURE	DATE
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NOTE: DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE COMPANY IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

TERMINATION OF DIRECT PAYMENTS

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SIGNATURE	DATE
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