AUTHORIZED AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS) FOR UTILITY BILL



City Administration Center Utility Billing Office 317 S. Washington Wellington, Ks. 67152

Company ID Number:	48-6006451
ellington, hereinafter call	ed COMPANY, to initiate debit
Savings	
——————————————————————————————————————	
Branc	h:
State:	Zip:
Account Number:	
of us) of its termination i	City of Wellington has received n such time and in such manner ble opportunity to act on it.
Accou	
City:	State: Zip:
gnature:	
	ID Number: ellington, hereinafter called Savings cory financial institution in to such account. I (we) and must comply with the product indicated and listed. Brance State: Account Number: Account Number: DEPOSITORY a reasona Utility Account No: City:

Signature: