CITY OF WHARTON AUTHORIZATION AGREEMENT FOR AUTOMATED PAYMENTS

I (we) authorize the CITY OF WHARTON, TEXAS (the CITY) to initiate debit entries to my (our) () Checking () Savings account (select one) indicated below and the depository named below, hereinafter called DEPOSITORY, to debit same to such account.

PLEASE PRINT			
DEPOSITORY NAME(S)			
BRANCH			
CITY	STATE	ZIP	
TRANSIT/ABA NO		_ACCOUNT NO	
	e (or either of us) of	its termination in sucl	DEPOSITORY has received time and in such manner as et on it.
SIGNATURE			DATE
SIGNATURE			DATE
() I DO NOT WISH TO F	PARTICIPATE AT	THIS TIME.	
SIGNATURE			DATE
SIGNATURE			DATE
•		JSE ONLY	
CUSTOMER ACCT. NO.		ENTERED	BY
DATE			

Mail, Email to Utility Clerk, or Fax form to City Hall.

120 E. Caney Street ° Wharton, TX 77488 Phone (979) 532-2491° Fax (979) 532-0181