



## BANK DRAFT AUTHORIZATION FORM

**DIRECTIONS:** Please complete this bank draft authorization form and return along with a voided check from your bank.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE # \_\_\_\_\_  
HOME WORK

**BROAD RIVER ELECTRIC ACCOUNT NUMBER:**

\_\_\_\_\_

List any additional BREC account numbers that you want drafted from this bank account.

\_\_\_\_\_

**NAME OF BANK:**

\_\_\_\_\_

As a convenience to me, and in accordance with the following information, I hereby authorize Broad River Electric Cooperative to draw drafts against my account for payment of my electric bill(s). I further authorize the bank to pay these draws from my account. This draft is to remain in force until my intent to withdraw is given in writing to Broad River Electric Cooperative at least 30 days prior to the presentation of a draft or revoked by Broad River Electric for two dishonored drafts within six months.

\_\_\_\_\_  
SIGNATURE ACCEPTED BY BANK

\_\_\_\_\_  
DATE

CHECKING

SAVINGS

Note: A special message will appear on your bill telling you "THIS ACCOUNT PAID BY DRAFT". Continue to pay this bill until you see that message. When this message appears, your electric bill will be drafted 3-5 business days prior to your *due date*.

**\*\*\* A VOIDED CHECK MUST ACCOMPANY THIS FORM \*\*\***

PLEASE MAIL THIS FORM WITH YOUR VOIDED CHECK TO:

Broad River Electric Cooperative, Inc.  
Attn Billing Department  
PO Box 2269  
Gaffney, SC 29340

Office use Only: Cycle # \_\_\_\_\_ Entered By: \_\_\_\_\_ Date: \_\_\_\_\_