

**TAYLOR COUNTY RURAL ELECTRIC
COOPERATIVE CORPORATION
P O BOX 100
CAMPBELLSVILLE, KENTUCKY 42719-0100**

**PHONE NUMBER 1-800-931-4551
FAX NUMBER 1-270-789-3625**

**COMPLETE THE FORM BELOW AND ATTACH TO A VOIDED
CHECK AND RETURNED TO OUR OFFICE**

AUTHORITY TO AUTOMATIC DRAFT

ACCOUNT NUMBER (OF BILL TO BE PAID) _____

CUSTOMER CHECKING ACCOUNT NAME _____

NAME OF BANK _____

ADDRESS OF BANK _____

BANK TELEPHONE NO _____ CUSTOMERS TELEPHONE NO. _____

BANK TRANSIT NO _____ CUSTOMERS CHECKING A/C NO _____

This will give authority for **TCRECC** to **AUTOMATICALLY DRAFT** my account for electric service furnished at my residence or business.

Signature of Customer _____ Date _____

Social Security Number _____