

**AUTOMATIC BANK WITHDRAWAL
AUTHORIZATION AGREEMENT**

I, (We), hereby authorize TRENTON MUNICIPAL UTILITIES to initiate debit entries (determined by utilities consumed) to my account identified below.
This will remain in effect until TMU receives written notification to terminate this entry.

Citizens Bank & Trust & Citizens Bancshares Co
Authorization to Draw ACH Debits / Credits for Transfer

Attachment A
(Please Print)

Debit From Account # _____ () DDA () SAV

Last Name: _____ First Name: _____ MI. _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

TMU Bank Information (Do not fill out.)

Credit To:

Recipient's Name: TRENTON MUNICIPAL UTILITIES

Name of Bank: CITIZEN'S BANK & TRUST

Address: _____

City: TRENTON State: MO Zip Code: 64683

Transaction Type: () Loan Payment () Funds Transfer (X) Utility Bill Payment

Bank ABA # 101901396 Social Security # _____

Bank Account #: _____ (XX) DDA

\$ Amount: varies Frequency 9th - 10th day of each month.

As a convenience to me, I hereby request and authorize you to pay and charge my account checks drawn on my account by and payable to the order of Citizen's Bank & Trust, provided there are sufficient collected funds in said account to pay the same upon presentation. I agree that your rights in respect to each such check shall be the same as if it were a check drawn on you and signed personally by me. The authority is to remain in effect until revoked by me in writing, and until you actually receive such notice. I agree that you shall be fully protected in honoring any such check. I further agree that if any such check were dishonored, whether with or without cause and whether intentionally or inadvertently, you shall be under no liability whatsoever even though such dishonor results in a loss to my account.

X _____ **Date:** _____, 20____
Signature as shown on Bank Records

Attach voided check (for checking account) or deposit slip (for savings account) below:

Bank Withdrawal Auth