



Debit Entry (ACH) Authorization

Please complete this authorization form and fax or return it to one of our offices.

Company Name: Southern Pioneer Electric Company

All accounts

Company Account No: _____

Company Account No: _____

Company Account No: _____

I (we) hereby authorize Southern Pioneer Electric Company, hereinafter called COMPANY, to initiate debit entries to my (our) Checking Savings account (select one) indicated below and the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

The payment will be drafted from your banking account one day prior to the due date, to allow for processing time.

Depository Name: _____

Branch: _____

City: _____ State: _____ Zip: _____

Transit / ABA No. _____ Account No. _____

This authority is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name(s): _____

Date: _____

Signed: _____

Southern Pioneer Electric Company

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Toll Free 800.670.4381

Fax 620.886.3066

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