AUTHORIZATION FOR BANK DRAFTING

I hereby authorize MUD #12 to initiate debit entries to my (our) checking or savings account indicated below and the DEPOSITORY named below to debit same to such account.

| A VOIDED check (or copy of same) is required. | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| The Bank Drafting will be from | |
| Bank (DI | EPOSITORY) |
| The Bank Drafting will be from my checking account indicate). | ount D my savings account C] (please |
| This authority is to remain in full force and effect Utility District #12 and DEPOSITORY has received of us) of its termination in such time and in such mat Municipal Utility District #12 and DEPOSITORY at | d written notification from us (or either nner as to afford the Galveston County |
| I understand that the automatic bank drafting will b this form. Payments are drafted between the 14th an | egin the following month after I return d 18 th of each month. |
| This drafting procedure must be in effect for a min reconnect fee has been waived. | nimum of 1 year from date received if |
| I also understand that I will continue to receive my n by automatic bank draft. | nonthly bill, but it will specify payment |
| Account Number on my Water/Sewer bill: | |
| Name: | |
| Service Address: | |
| Telephone number where I can be reached during t | he day: |
| Signature | Date |
| OFFICE U | USE |
| Date Received: | Bank Code: |
| Will Begin: | Revised: 4/18/17 |