



West End Water Supply Corp.

P.O. BOX 39
 INDUSTRY, TX. 78944
 979-357-2389

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Company Name : West End Water Supply Corporation
 Company ID Number WEWACH112P.ach

I (we) hereby authorize West End Water Supply Corporation, hereinafter call COMPANY, to initiate debit entries to my (our)

(Select One) Checking Account Savings Account

Indicated below at the depository financial institution named below, hereafter 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.

Depository Name _____ Branch _____
 City _____ State _____ Zip _____
 Routing Number _____ Account Number _____

This authorization is to remain in full force and effect until COOMPANY 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) _____ ID Number _____
 Please Print

Date: _____ Signature _____

NOTE: DEBIT AUTHORIZATIONS **MUST** PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE CRIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

West End Water Supply Corporation must have a voided check in order to activate the ACH program.