

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Company Name: **Emerald Bay Municipal Utility District**

I (we) hereby authorize Emerald Bay Municipal Utility District hereinafter called COMPANY, to initiate debit entries to my (our) Checking Account / Savings Account (select one) indicated below at 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.

Depository Name _____ Branch _____

City _____ State _____ Zip _____

Routing Number _____ Account Number _____

This authorization 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 such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name(s) _____ Club # _____

Address _____

Date _____ Signature _____

NOTE: ONLY NOTIFYING THE COMPANY IN THE MANNER SPECIFIED IN THE AUTHORIZATION MAY REVOKE THIS AUTHORIZATION.

***PLEASE ATTACH A COPY OF A
VOIDED/CANCELED CHECK***

(Cannot accept deposit slip.....must be voided/canceled check)

Return form and voided check to: EB MUD, 155 La Salle Drive, Bullard, TX 75757