

**City of Gonzales
PO Box 547
Gonzales, Texas 78629
(830) 672-2815**

**AUTHORIZATION AGREEMENT FOR DIRECT PAYMENT
(ACH DRAFT)**

This authorization is for the payment of utility bills for the utility billing account(s) listed below on or around the 10th of the month:

UTILITY ACCOUNT NAME	
UTILITY BILLING ACCOUNT NO.	

COMPANY NAME CITY OF GONZALES **COMPANY ID NUMBER** 74-6001001

I (we) hereby authorize the CITY OF GONZALES, hereinafter called COMPANY, to initiate debit entries to my (our) **(Check one)** checking account savings account indicated below and the depository named below, hereinafter called DEPOSITORY, to debit same to such account.

DEPOSITORY NAME (Your Bank)					
ADDRESS					
CITY		STATE		ZIP	
PHONE					
CONTACT					
TRANSIT/ABA NO:					
ACCOUNT NO:					

This authorization is to remain in full force and effect until COMPANY and DEPOSITORY have 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.

PRINT NAME(S)	
SIGNATURE(S)	
DATE	

STAPLE YOUR VOIDED CHECK HERE