

institution information.

Headquarters: N28988 State Road 93/P.O. Box 277, Arcadia, WI 54612 Branch Office: 1800 Granary, St. Holmen, WI 54636 (800) 411-9115 www.riverlandenergy.com

Bank Draft Auto Pay Authorization Form

To participate in bank draft auto pay, you can sign up conveniently and easily through SmartHub, our online account management tool on our website's home page at www.riverlandenergy.com. Or you can enroll in our bank draft auto pay. Once you sign up, your payment will be deducted automatically from your checking or savings account on the 20th of every month.

To sign up for auto pay, just complete and return this form along with a voided check. Beginning the following month, your payment will be automatically deducted from your checking or savings account on the 20th. You will receive a statement each month showing your electric usage, and the deduction will appear on your bank statement.

Please complete and return this form. Also enclose a voided check so that we can record the correct financial

| Member Name: | | | | |
|----------------------|----------|-----------|------------------------|-------------|
| Riverland Account Nu | ımber: | | | |
| Mailing Address: | | | | |
| City: | | | State: | Zipcode: |
| Home Phone: | | _ Cell ph | one: | Alt. phone: |
| E-mail Address: | | | | |
| Bank Name: | | | | |
| Type of Account: | Checking | | Routing Number: | |
| | Savings | | Bank Account Number: _ | |
| | | | | |

I authorize Riverland Energy Cooperative to instruct my financial institution to make my payments from the account listed on the attached check. I understand that I control my payments, and if at any time I decide to discontinue this service, or if my bank information changes, I will notify Riverland Energy Cooperative in writing prior to the 15th of the month I wish the changes to take place.

| Signature | Date |
|------------------|---------------|
| OFFICE USE ONLY: | |
| ENTERED BY: | DATE ENTERED: |