



Albemarle Electric Membership Corporation



Post Office Box 69 Hertford, North Carolina 27944-0069
Telephone 252-426-5735 Toll Free 1-800-215-9915 Fax 252-426-8270

BANK DRAFT CONSENT

DATE: _____

For your convenience, we will gladly draft your checking account for payment of your electric bill.

Please complete the following form and send a voided check from your checking account. Be sure to sign this form at the bottom authorizing us to draft your account.

Bank Name: _____

Bank Address: _____

Bank Transit/Routing Number: _____

Customer's Bank Account Number: _____

Draft Date (Choose one) 8th of the month or 20th of the month

Authorized Signature: _____

Name & Address: _____

Account Number _____