

## AUTOMATIC PAYMENT AUTHORIZATION

I hereby authorize The Blissfield State Bank (hereinafter referred to as BSB) to make periodic withdrawals from my account at \_\_\_\_\_ (name of financial institution—hereinafter referred to as DFI) and authorize the DFI to charge such withdrawals to my account there. These withdrawals shall be deposited to the account of Ogden Telephone Company.

Such withdrawals shall be equal to the amount billed as stated on the monthly billing for the purpose of paying my telephone bill to Ogden Telephone Company. Adjusting entries to correct errors are also authorized. It is agreed that these withdrawals and adjustments may be made electronically and under the rules of The Payments Authority. This authorization will remain in effect until written notice of termination is given to Ogden Telephone Company. Such notice of termination must be received by Ogden Telephone Company one week before the next scheduled payment in order to stop the charge.

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\_\_\_\_\_

(name of authorizing party)

\_\_\_\_\_

(address)

\_\_\_\_\_

(city, state)

\_\_\_\_\_

(zip code)

\_\_\_\_\_

(signature of authorizing party)

\_\_\_\_\_

(telephone)

\_\_\_\_\_

(date)

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REQUIRED ATTACHMENT--Please attach a VOIDED CHECK from your checking account to this form.

THE BLISSFIELD STATE BANK  
ACH DEPARTMENT  
P O BOX 40  
BLISSFIELD MI 49228-0040