City of Choctaw PO Box 567 2500 N Choctaw Rd Choctaw, OK 73020



Phone 405-390-8198 Fax 405-390-8607

AUTOMATIC BANK DRAFT AUTHORIZATION

Utility Account Information

Name:	Date:
	71 (//
Address:	Phone #1:
Email:	Phone #2:
Driver License #:	Utility Account #:
BANK DRAFT: Checking or Savings Acco	unt
Bank Name:	
Account#:	
Routing#:	
A VOIDED CHECK MUCT DE IN	ACLUDED OF VOUR PROJECT WILL NOT BE COMPLETED
A VOIDED CHECK MUST BE INCLUDED OR YOUR REQUEST WILL NOT BE COMPLETED.	
_	ayments as usual until my bill states "PAID BY DRAFT." ult in late fees and / or interruption of service.
SIGNATURE:	
Received date:	Employee: