




A Touchstone Energy® Cooperative 

East-Central Iowa Rural Electric Cooperative

2400 Bing Miller Lane  
PO Box 248  
Urbana, IA 52345-0248

Ph: 877-850-4343  
F: 319-443-4359  
ecirec@ecirec.coop

[www.ecirec.coop](http://www.ecirec.coop)

## ACH Recurring Payment Authorization Form

Account #: \_\_\_\_\_

Please complete the information below:

I \_\_\_\_\_ authorize East-Central Iowa REC to charge my checking/savings account for payment of my utility bill.

I understand and accept that the charges will be debited upon my bank account on my behalf on the 1st of every month. Each amount will vary based on my utility bill received and processed.

I understand that this authorization will remain in effect until I cancel it in writing or by oral communication and I agree to notify the Cooperative in writing or oral communication of any changes in my account information or termination of this authorization at least 15 days before the next billing date. You may contact us at (877) 850-4343 to terminate this agreement.

If periodic payment dates fall on a weekend or Federal holiday, I understand that the payment may be executed on the next business day. I understand that because this is an electronic transaction, these funds may be withdrawn from my account on the periodic payment dates. In the case of an ACH transaction being rejected for non-sufficient funds (NSF) I understand that there will be a \$30 charge for a returned NSF. I acknowledge that the origination of ACH transactions to my account must comply with the provision of U.S. law. I agree not to dispute this recurring billing as long as the transactions correspond to the terms indicated in the authorization form.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Billing Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email

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*Energy Wise, Community Connected*