



# TOWN OF COTTONPORT

(Home of the Christmas Festival on Bayou Rouge)

MAYOR: William "Scotty" Scott, III  
TOWN CLERK: Theresa J. Anderson  
CHIEF OF POLICE: Earnest Anderson, Jr.

931 Bryan St / PO Box 479, Cottonport, LA 71327

Telephone: (318) 876-3485  
FAX (318) 876-3356

## Town of Cottonport - ACH Authorization Form

**Customer's Name:** \_\_\_\_\_ **Customer's ID:** \_\_\_\_\_

I/We (the "Customer") authorize the Town of Cottonport (the "Company") to initiate debit entries and, if necessary, appropriate credit and adjustment entries electronically or by any other commercially accepted method, to my/our account indicated below and to other accounts I/we identify in the future (the "Account"). This agreement authorizes the financial institution holding the Account to post all such entries and will continue in effect until the Company receives written notice of termination from the Customer and has a reasonable opportunity to act on it. The Customer further agrees not to close any related account without giving the Company prior written notice. I/We acknowledge that the origination of these transactions must comply with the provisions of U.S. law.

As a convenience, the Company will draft the full amount of your water bill or the specified amount indicated below from the financial institution of your choice. The draft of your water bill payment will start on the date indicated below and will continue on the 10<sup>th</sup> of each month thereafter or until a written notice of termination is received.

Account Type: (circle one)    Checking                  Savings

Bank Name: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Amount to be Drafted from Account each month will be the Full Monthly Bill Amount.

The Draft will be on the 10<sup>th</sup> of each month beginning on: \_\_\_\_\_

Attach voided check or savings slip

**IMPORTANT:** This document must be executed by an authorized account signer when requesting or authorizing ACH transactions to the account listed above..A voided check or savings slip must be attached

Signature \_\_\_\_\_ Date: \_\_\_\_\_

Print Name \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_

Print Name \_\_\_\_\_

Mayor Pro-Tem  
Curtis J. Francisco

District 1  
Council Member  
Margaret Prater-Jenkins

District 2  
Council Member  
Kenneth Friels

District 3  
Council Member  
Luke Welch

District 4  
Council Member  
Dempie Prater

**EQUAL OPPORTUNITY EMPLOYER AND PROVIDER**