



Shelby Energy Cooperative

A Touchstone Energy[®] Cooperative 

BANK DRAFT AUTHORIZATION

SHELBY ENERGY ACCOUNT NUMBER

NAME AS SHOWN ON YOUR BANK RECORDS

CHECKING ACCOUNT NUMBER

NAME OF BANK AND/OR BRANCH

ADDRESS OF BANK

ADDRESS OF BANK

BANK ROUTING NUMBER

DEPOSITOR'S PHONE NUMBER

I certify that sufficient funds will be maintained to cover these drafts.
I hereby authorize my electric bills to be paid by my bank.

CUSTOMER SIGNATURE

DATE

Please sign, date and return this form, **ALONG WITH A VOIDED CHECK**, to the address below. Thank You.

SHELBY ENERGY, P.O. BOX 309, SHELBYVILLE, KY 40066

This institution is an equal opportunity provider and employer