## SOUTH LINCOLN RURAL WATER SYSTEM, INC.

28647 472<sup>ND</sup> Ave. Beresford, SD 57004

Ph.# 605-777-9905

Email: slrwbilling@slrws.com or cindy@slrws.com

## AUTOMATIC BANK PAYMENTS

We have automatic bank withdrawal for your monthly water bill. If you are interested in having your payments taken directly from your bank account please fill out the form below, sign it, attach a voided check and return to us in the enclosed envelope.

The payments will be taken out of your account on approximately the **10<sup>th</sup> of each month**.

Check One: Please debit my Checking Account

Please debit my Savings Account

BANK NAME (AND OFFICE, IF ANY) E-MAIL ADDRESS CITY STATE BANK ACCOUNT NUMBER SIGNATURE LAST NAME FIRST NAME	below to charge same This authority will rem Inc. or the bank in write opportunity to act on it	Lincoln Rural Water Syst to my checking account is hain in effect until I notifiting to cancel it in such the t. I can stop payment of nc. My account will be on the <b>10<sup>th</sup></b> of each month.	monthly in the amount of fy South Lincoln Rural V ime as to afford the band any entry by notifying S	of my water bill. Vater System, c a reasonable South Lincoln	:d
	BANK NAME (AND OFFI	CE, IF ANY)	E-MAIL ADDRESS		
SIGNATURE LAST NAME FIRST NAME					
TRANSIT ROUTING NUMBER (BANK USE ONLY) ACCOUNT NUMBER (BANK USE ONLY)	CITY	STATE	BANK ACCOUNT NU	JMBER	