

# SUBSCRIBER'S AUTHORIZATION FOR ELECTRONIC FUND TRANSFER

ACCOUNT NUMBER: \_\_\_\_\_

(This number is located on the upper right hand corner and below the telephone number of your Telephone or Cable TV bill)

By completing and submitting this form, I authorize The Ottoville Mutual Telephone Company to deduct payment of my Telephone and/or OTEC bill by electronic fund transfer (EFT).

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

Until this authorization is revoked in writing, I permit the FT. JENNINGS STATE BANK to initiate debit entries to my bank account, designated below:

BANK NAME: \_\_\_\_\_

BANK TELEPHONE NUMBER: \_\_\_\_\_

NAME ON ACCOUNT: \_\_\_\_\_

BANK'S ROUTING NUMBER: \_\_\_\_\_

YOUR BANK ACCOUNT NUMBER: \_\_\_\_\_

TYPE OF ACCOUNT: CHECKING ACCOUNT \_\_\_\_\_ SAVINGS ACCOUNT \_\_\_\_\_

I authorize and request that the above-named financial institution accept any debit entries initiated by the Ft. Jennings State Bank to the account specified and to debit the same to such account without responsibility for the correctness thereof.

I agree to maintain such money in this account to cover the debit. I understand that The Ottoville Mutual Telephone Company or OTEC Communication Company reserves the right to require payment in cash for any EFT transaction that are returned due to "Insufficient Funds" or "Account Closed". I understand that I will also be required to pay a returned EFT fee.

I understand that The Ottoville Mutual Telephone Company and OTEC Communication Company reserve the right at any time to require payment in any other commercially accepted manner.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**Please send a cancelled check or deposit slip with this form.  
Thank you. (See other side.)**

We will use information on your check or deposit slip to verify your bank account number and your bank's routing number, which are necessary to set up the electronic funds transfer that will occur each month. Please reference the sample check shown below to complete the form on the other side. Thank you.