



**DIRECT DEPOSIT (ACH)
AUTHORIZATION FORM**

Company or Individual Name

hereby authorizes Copper Valley Electric Association (CVEA), to initiate automatic deposits to my account at the financial institution named below. I also authorize CVEA to make withdrawals from this account in the event that a credit entry is made in error.

Further, I agree not to hold CVEA responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution, or due to any error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until CVEA receives written notification of cancellation from me or my financial institution, or until I submit a new direct deposit authorization to CVEA.

Bank Account Information

New Change Cancel

Name of Financial Institution _____

Routing Number _____

Account Number _____

Account Type Checking Savings
 Business Personal

Signature

Authorized Signature _____ Date _____

Print Name/Title _____

Contact Name _____ Phone _____

Contact Email* _____ Fax _____

*Email is required to provide notification of direct deposit and remittance advice.

Please attach a voided check and return this form to:

Copper Valley Electric Association
 Attn: Accounts Payable
 PO Box 45
 Glennallen, AK 99588

Tel: (907) 822-3211
 Fax: (907) 822-5586
 Email: accounting@cvea.org

Please allow 15 days for ACH request to become effective.