

## Town of Morrison Morrison Public Works Authority P.O. Box 96 308 Woolsey Ave.

Morrison, OK 73061

## Bank Draft Authorization Form

Account Holder:
Address:
Financial Institution:
Name of Bank:
City: State: Zip Code:
Contact Number:
Routing #:
Account #:
Account Type: Checking Savings
**Please attach a voided check and return this document to MPWA
This payment is for the Morrison Public Works Authority for which I voluntarily subscribe.
I further agree that I have the right to terminate or change my bank draft information; I will notify Morrison Public Works Authority and the above-named bank in writing at least thirty days before the effective termination date.
I understand that this authorization will remain in effect until terminated by me, and that the bank draft payments will be drafted on the 8th of each month. Please note that dates may vary by 1–3 days due to weekends or holidays.
Signature: Date:
Office Use Only: Location Account # Form Uploaded to Ampstun  Employee Initials