

**MISSOURI WEST WATER SYSTEM  
BANK DRAFT AUTHORIZATION**

I (We) authorize the Missouri West Water System and the financial institution named below to process variable entries to my (our) account. This consent will remain in effect until I (we) give reasonable notification to terminate this authorization.

MWWS Acct#: \_\_\_\_\_ Bank Name: \_\_\_\_\_

First Name(s): \_\_\_\_\_ Bank Routing#: \_\_\_\_\_

Last Name: \_\_\_\_\_ Bank Acct#: \_\_\_\_\_

Home Phone#: \_\_\_\_\_ Work Phone#: \_\_\_\_\_

Signature(s) \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

Please **include a voided check** for this account