

## **AUTO PAY AGREEMENT**

Sign up for Auto Pay and make paying your electric bill easy and convenient. There is no additional charge for this payment option.



Name(s) as shown on electric bill:			
ECE account number(s):			
Address:	City:	State:	ZIP:
Phone:	Cellphone:		
Email:			
ELECTRONIC FUNDS TRANSFER - I	MUST INCLUDE A VOIDED CHECK		
Type of account payment is to be deduc	ted from: Checking	Savings	
Name of financial institution:		Branch office:	
Please continue to make payments in yo bill stating BANK DRAFT next to the due	•	message printed in the blue box	on your electric
PAPERLESS BILLING			
To sign up for paperless billing, visit the download the SmartHub app from your a	•	You can log into SmartHub via (	our website or
I authorize East Central Energy (ECE) to initia remain in effect until I notify the cooperative		=	
AUTHORIZED SIGNATURE(S)			
Signature of member on account:		Date:	
Signature of joint member on account:		Date:	

Mail completed form to: East Central Energy, P.O. Box 39, Braham, MN 55006-0039