



Headquarters: P.O. Box 817, Nucla, Colorado 81424 (970)864-7311, 1-877-864-7311  
Office Hours: 7:00 AM to 5:30 PM, Monday thru Thursday **FAX (970) 864-7423**

## BANK DRAFT PROGRAM/AUTHORIZATION

The Bank Draft Program will allow SMPA to draft a checking account for your monthly electric bill. We will continue to mail a monthly statement showing the amount to be drafted and the due date which will be the date the draft will be sent to the designated bank account. You will not need to mail in any type of payment. A message "TO BE PAID BY DRAFT" will appear on the statement when the program is activated. Your bank statement will show the date and amount deducted with a description "SMPA Electric Bill. Please note that any draft returned unpaid by the bank will incur the same fee as a return check and is subject to removal from the Bank Draft Program.

If you wish to use this program, please complete and sign this form. We need to have a "void" check attached to the authorization form to complete the basic information required to set up the draft account. Please be sure that the information that you provide us with is correct and legible to avoid any delays in setting up this program. If you have any questions concerning our Bank Draft Program or if you're not sure what your account number with SMPA is, please contact our Billing Department at (970)864-7311 EXT 133 .

|  |                            |                     |
|--|----------------------------|---------------------|
| NAME OF BANK _____   |                            | TELEPHONE NO. _____ |
| ADDRESS _____  |                            |                     |
| SAVING/CHECKING ACCOUNT NUMBER _____   | *BANK ROUTING NUMBER _____ |                     |
| *The Bank Routing Number is located in the lower left corner of the check and is 9 digits.   |                            |                     |
| I authorize San Miguel Power Association to draft the <u>electric accounts</u> listed below. |                            |                     |
| ACCOUNT NO. _____  | MEMBER NAME _____          |                     |
| ACCOUNT NO. _____  | ADDRESS _____              |                     |
| ACCOUNT NO. _____  | TELEPHONE NO. _____        |                     |
| DATE _____   | SIGNATURE _____            |                     |
| <b>PLEASE FAX A COPY OF A CHECK FROM CHECKING ACCOUNT THAT IS TO BE DRAFTED</b>              |                            |                     |

FOR SMPA USE ONLY

DATE REC'D \_\_\_\_\_ CYCLE NO. \_\_\_\_\_ DRAFT CODE \_\_\_\_\_

### OFFICE LOCATIONS

Box 817, Nucla, CO 81424  
970-864-7311\*864-7423FAX

Box 1150 Ridgway, CO 81432  
970-626-5549\*626-5688 FAX

FOR LONG DISTANCE NUCLA 1-877-864-7311 / RIDGWAY 1-800-864-7256