

Automatic Payment Authorization

Checking or Savings Account

I hereby authorize Powder River Energy Corporation (PRECorp) to initiate automatic payments for my monthly electric utility bill from my account at the financial institution listed below. I agree that each payment from my account shall be the same as if it were a check or withdrawal personally signed and authorized by me. In the event that I believe an error has been made in my monthly bill, I agree to notify PRECorp of the issue within seven (7) days of the statement due date before instructing the financial institution to withhold payment.

Bank Information	n		
Name of financia	al institution:		
Routing Number:			Account Number:
Checking	Savings		
Please attach a voided check or savings deposit slip and return this form to a Customer Service Representative			
Credit or Debit C	ard		
electric utility bill to my monthly bill, I	from my credit/debit	card listed below. Corp of the issue w	RECorp) to initiate automatic payments for my monthly . In the event that I believe an error has been made in within seven (7) days of the statement due date before
This agreement will remain in effect until either party provides a written notice of termination to the other party.			
Credit Card	Debit Card	MasterCard	VISA
Card#			_ Expiration Date: Month Year
Name on Card:			Signature:
PRECorp Accou	nt Information		
Name (as it app	ears on your bill):		
Account number	(s):		
			<u> </u>
This agreement w	vill remain in effect ur	ntil either party pro	ovides a written notice of termination to the other party.
Signature			
Signature (prima	ıry):		Date:
Signature (joint):			Date: