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**AUTHORIZATION AGREEMENT**  
**Automatic Withdrawal for City Utilities**

To: Iowa State Bank  
Hull, Iowa 51239

Account Holder Name & Address

Account Number

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

I (We) hereby authorize the City of Hull, Hull, Iowa to initiate debit entries monthly to my (our) account indicated above for payment of monthly utility billing.

This authority to remain in full force and effect until written notification is given.

Signed: \_\_\_\_\_

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