

SIGN UP FOR DIRECT PAYMENT

Please complete ALL sections, sign and return this form:

I authorize the company(ies) indicated to instruct my banking/savings institution to make my payments from the account listed below.
I understand that I control my payments, and if at any time I decide to discontinue this payment service, I will notify the biller.

(PLEASE PRINT)

Name (as shown on bill) _____ Date _____

Service Address _____ City _____ State _____

SIGNATURE _____ Phone _____ Zip Code _____

Account Information (Bank, Savings & Loan, Credit Union)

Enter the **Routing Number**, **Account Number** and **Financial Institution** name from your check or share draft. (See sample right)

Routing Number

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Account Number _____

Financial Institution _____

2048

John Doe
123 Shady Lane
Yourtown, AA 12345

Date _____

PAY TO THE ORDER OF _____ \$ _____

Your Savings & Loan
Yourtown, AA

⑆ 24 10 2 2 2 3 3 ⑆ 3 3 3 9 6 2 2 2 2 ⑆ 2 0 4 8

↓ ↓ ↓

Routing Account (serial #)
Number Number Do Not Include

Biller Information (Participating billers are listed below)

PLEASE ALLOW 4-6 WEEKS

>>> *Biller #, biller name and account # are required to process application* <<<

BILLER #	PRINT NAME OF BILLER	BILLER'S ACCOUNT #
123 <small>(EXAMPLE)</small>	<i>ABC Company</i> <small>(EXAMPLE)</small>	1-234-5678-9 <small>(EXAMPLE)</small>
_____	_____	_____
_____	<small>(CABLE)</small>	_____
_____	<small>(ELECTRIC)</small>	_____
_____	<small>(GAS)</small>	_____
_____	<small>(TELEPHONE)</small>	_____
_____	<small>(WATER)</small>	_____

BILLER #	PARTICIPANT
AR200	Southwestern Electric Power Co. (SWEPCO-AEP)

SEND TO:
Direct Payment Plan
P.O. Box 359
Novelty, OH 44072

ENROLL AT:
WWW.DIRECTPAYMENTPLAN.COM

OR FAX TO:
440-564-1169