## TERMINATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Company		Company	
Name	BEAR CREEK SPECIAL UTILITY DISTR	ICT_ ID Number	
cancel debit	y request that <u>BEAR CREEK SPECIAL</u> entries to my (our) □Checking Accitory financial institution named belo	ount / 🗌 Savings Acc	count (select one) indicated below
Depository			
Name		Branch	
City		State	Zip
Routing		Account	
Number		Number	
Name(s)		ID Number	
\	(Please Print)		
Date		Signature	