

**Harmony Water Association, Inc.**  
**P. O. Box 342**  
**Quitman, MS 39355**

I, authorize \_\_\_\_\_ to charge my checking/savings account  
Name of Bank

number \_\_\_\_\_ on the 10<sup>th</sup> day of each month for Amount of Bill

and credit my utility account number \_\_\_\_\_

Beginning month/day/year \_\_\_\_\_.

Customer Signature \_\_\_\_\_ Date \_\_\_\_\_

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_