



CITY OF MEDFORD

UTILITY BILLING SERVICES

411 W. 8TH STREET
MEDFORD, OREGON 97501
www.ci.medford.or.us

TELEPHONE (541) 774-2140
FAX (541) 774-2552
utilities@cityofmedford.org

City of Medford Utility Bill Auto Pay Form

SERVICE ADDRESS:

CUSTOMER ACCT #:

PHONE NUMBER:

Three yellow rectangular input fields for service address, customer account number, and phone number.

Dear Customer,

Please complete the following information, and return form with a voided check.

AUTHORIZATION

I authorize the City of Medford and the financial institution listed below to initiate electronic debit entries, and if necessary, credit entries and adjustments for any debit entries in error to my:

Checking Account

Savings Account

on the billing due date each month.

This authority will remain in effect until I have cancelled it in writing. I have attached a voided copy of a check.

Yellow rectangular input field for signature.

Signature

Yellow rectangular input field for date.

Date

Yellow rectangular input field for name.

Name (Please Print)

Yellow rectangular input field for financial institution.

Financial Institution

Yellow rectangular input field for account number.

Account Number

Yellow rectangular input field for branch.

Branch

Transit routing number grid consisting of nine small yellow boxes.

Transit Routing Number

Yellow rectangular input field for city and state.

City

State