



**Stop Writing Checks!
Enroll in Direct Payment Today!**

#1 Complete the contact information requested below (please print)

Name _____
Service Address _____
City _____ State _____ Zip _____
Daytime Phone(____) _____
Email Address _____

#2 Provide your signature for authorization:

I authorize Great Lakes Energy to deduct my payment(s) from the checking or savings 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 Great Lakes Energy. I also understand that all information provided will remain confidential.

PLEASE SIGN

THIS FORM CANNOT BE PROCESSED WITHOUT YOUR SIGNATURE

Signature _____ Date _____

#3 To ensure the correct account number is used for this electronic payment and to obtain the ABA/routing number, PLEASE CONTACT YOUR FINANCIAL INSTITUTION FOR ASSISTANCE.

Name of Financial Institution _____
ABA/routing number _____
Checking Account # _____ or Savings Account # _____

#4 Provide your Great Lakes Energy account number(s): _____

See the back of this panel for Frequently Asked Questions. Return form with your bill payment or mail to:

Great Lakes Energy Customer Support Department
1323 Boyne Ave., P.O. Box 70 Boyne City, MI 49712