## **Bank Draft Authorization**

I hereby authorize Lubbock Power and Light to draw on my account, at the Financial Institution identified on this form, each month for the services used, as per the statement rendered at the Service Address identified on this form.



Customer Name on Bill:			
Account Number on Bill:			Attach a VOIDED CHECK and
Service Address on Bill:			Submit with Bill or Mail To:
City:			LP&L Customer Service
State:			1301 Broadway
Zip Code:			Lubbock, TX 79401
Financial Institution Name	:		Phone: 806-775-2509 www.lpandl.com
Financial Institution Accou	unt No:		
Signature:		Date:	