



*The Village of Anna*

209 West Main St. PO Box 140  
Anna OH 45302

Telephone (937) 394-3751  
FAX (937) 394-4704

**Pre-Authorized ACH Debit**

I authorize the Village of Anna to make electronic entries to my account below.

Bank Name: \_\_\_\_\_

Bank ABA Number: \_\_\_\_\_

Checking or Savings Account Number: \_\_\_\_\_  
(please circle one)

This arrangement shall remain in effect until written notice from either myself or the Village of Anna named above cancels this process and the service has been paid in full..

Name: \_\_\_\_\_

Phone#: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**\*\* Attach copy of voided check here.**