



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.**