

CITY OF OVERBROOK
401 MAPLE, PO BOX 288
OVERBROOK, KS 66524
785-665-7328 785-748-4815 FAX
www.overbrookks.com cityclerk@overbrookks.com

REQUEST TO BEGIN BANK DRAFT

DATE: _____

CITY OF OVERBROOK ACCOUNT #: _____

PROPERTY LOCATION ADDRESS: _____

To Whom It May Concern:

I, _____, authorize the City of Overbrook, KS to begin bank pay for my City of Overbrook Utility Bills through _____ (please include name of Bank/Credit Card).

I understand there is no cost from the City for this service and I can stop at any time by making a written request to the City Clerk. We will mail you a copy of your bill.

Payments are made on/or near either the 5th or the 20th of each month. (Please circle which works better for you).

I want this to begin on _____.

Please utilize my Checking, Savings, or Credit Card (please circle one) account number _____, routing number _____, or Credit Card information (type of card, name on card, card number, exp date, cvv number)

Signed _____

Jim Koger
Overbrook City Clerk
785-665-7328