Automatic Payment

An easy and secure way to pay

Simplify the way you pay your energy bills by enrolling in Automatic Payment. Save time, money and postage by authorizing your financial institution to automatically pay your bill each month.

Before completing and mailing this form, please read and understand the following:

- Energy bills will continue to vary monthly depending on usage and prices.
- You can continue to receive a paper bill or you can switch to the convenience of paper-free billing if you are not currently enrolled as a paper-free billing customer in My Account.
- · Your payments will begin with either the first or second bill you receive after you sign up for the plan.
- You'll know your next payment will be made automatically when you see "Payment Transfer Date" at the top of your bill.

Next, complete the form below, include the requested information for the account you want payments made from, and return to:

Wisconsin Public Service Attn: Customer Service P.O. Box 19003 Green Bay, WI 54307-9003

If your payment is due at this time, include it with your application so your account stays current until Automatic Payment begins. Continue paying your bill until you see "Payment Transfer Date" at the top of your bill.

Sign up for Automatic Payment

Print your name and account number exactly as they annear on your hill

Customer information	Payment information
Customer name: WPS account number (you can enroll multiple accounts in Automatic Payment):	If you want to use your checking account for payment, include a voided check.
	If you want to use your savings account for payment, follow these steps:
	 Verify with your financial institution that it will deduct payments from a savings account.
	2. Provide the following additional information:Name of your bank, credit union or savings and loan:
Service address:	
Mailing address: (if different than above)	 Routing number (provided by your institution):
City: State: ZIP:	Savings account number:
Phone number:	

Authorization

I have read this document and want to make the authorizations detailed on this form.

I hereby authorize WPS to initiate entries to my account at the institution named on the enclosed voided check or with the provided savings account information, and authorize that institution to debit my account for those entries. This authorization will remain in effect until I terminate it, allowing reasonable time for WPS and my financial institution to act.

I have the right to stop payment on an individual entry or to have entries corrected by timely notification to my financial institution, and will contact WPS when I plan to stop payment. WPS also has the right to cancel this agreement for insufficient payments to my account.

Date



Signature