

The City of Cologne is pleased to offer you a new service - the Direct Payment Plan. Now you can have your municipal utility bill payment made automatically from your checking account. And, you won't have to change your present banking relationship to take advantage of this service.

The Direct Payment Plan will help you in several ways:

- it saves time - fewer checks to write
- helps meet your commitment in a convenient and timely manner - even if you're on vacation or out of town
- no lost or misplaced statements, your payment is always on time
- it saves you postage
- its easy to sign up for, easy to cancel
- no late charges

Here's how the Direct Payment Plan works:

You authorize regularly scheduled payments to be made from your checking account. You will still receive your billing statement, so you can record the amount of your bill and check its accuracy. *On your due date*, your bank automatically deducts your payment from your checking account which makes the plan easy to use.

The authority you give to use this Direct Payment Plan will remain in effect until you notify us in writing to terminate the authorization.

The Direct Payment Plan is dependable, flexible, convenient and easy. To take advantage of this service, complete the attached authorization form and return it to us with a voided check or deposit slip.


AUTHORIZATION FOR DIRECT PAYMENT

I authorize the City of Cologne and the financial institution named below to initiate entries to my checking account. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it. I can stop payment of any entry by notifying my financial institution 3 days before my payment is made.

(NAME OF FINANCIAL INSTITUTION) (BRANCH)

(ADDRESS) (CITY) (STATE) (ZIP CODE)

Checking Account No. _____

Financial Institution Routing Number _____
(between these symbols  on the bottom left of your check)

(NAME - PLEASE PRINT)

(ADDRESS - PLEASE PRINT) (TELEPHONE #)

(SIGNATURE) (DATE)

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STAPLE VOIDED CHECK HERE