

TO: BANK NAME _____
ADDRESS _____

In consideration for this service I further agree that if any such check is dishonored, whether with or without cause and whether intentionally or inadvertently, you shall be under no liability whatsoever.

<u> </u>	<u> </u>	<u> </u>
Date	Signature of Depositor	Account #
 <u> </u>	 <u> </u>	 <u> </u>
Date	Water Superintendent	Routing #
 <u> </u>	 <u> </u>	
Date	Bank Representative	