



KRAMER OIL

EST. 1976

Kramer Oil Company, Inc.
P.O. Box 343
Marysville, KS 66508
local 1-785-562-2466

www.krameroil.com
office@krameroil.com

EFT Form

We understand that unreliable mail service can be frustrating, which is why we wanted to remind you about our EFT Auto Withdrawal option. With this service, you can ensure timely payment without the risk of a finance charge. If you're interested in enrolling and need more information, please call us at 785-562-2466! We're here to make your experience as smooth and hassle-free as possible. Also, to expedite the delivery of your statement please request to have your statement emailed!

If you would like to volunteer for this program, fill out the bottom portion of this letter, and return it to us with a voided check or voided deposit slip. ALL information you provide will be considered strictly confidential.

Once we receive this form from you signed and completed, an automatic withdrawal will be set up with one of your savings or checking accounts. On the **fifteenth of each month**, your previous billing statement balance will be transferred out of your account. We will still email or mail out your statement.

We would like to take this time to thank you for your continued business, and feel free to call us any time with questions or comments.

Return this completed form by mail, email at office@krameroil.com, or text a picture to 785-562-2466.

Sincerely,

Chad Kramer

I, (print your name) _____, hereby authorize Kramer Oil Company to initiate debit entries to my account and financial institution listed below to pay for the account(s) _____ (your 5 number account code found on your statement).

Financial Institution Name _____ Branch Location _____

Address _____ City, State _____ Zip _____

Bank Routing Number _____ Bank Account Number _____

Type of account: (circle) Checking/Savings Consumer/Business

Electronic Funds Transfer shall remain in effect until Kramer Oil Company has received verbal or written notification from me of its termination within a reasonable time of opportunity to act on it.

Account Holder's Signature _____ Date _____