Methods of Payment

Ohio Cumberland Gas Company Offers Several Ways to Pay Your Natural Gas Bill… We are pleased to offer you four convenient methods to pay your bill. Please note that all bills are due on the "Due Date" listed on the actual bill. Amounts not paid could require Ohio Cumberland to disconnect your gas service.

- **In Person**
  Our office is located at 20718 Danville-Amity Road (in Amity), Mount Vernon, Ohio. The office hours are 8:00 a.m. to 4:30 p.m., Monday through Friday, except holidays. We also have a night drop box at the front door for after hour payments.

- **By Mail**
  Our mailing address for payments is:
  P.O. Box 230
  Mount Vernon, Ohio 43050

- **At any First-Knox National Bank Office**
  First-Knox National Bank offices are accepting your payments. Please allow 1-2 working days for the payment to be processed and posted to your account. There is no charge to First-Knox National Bank customers; however, individuals without a First-Knox account will be charged an additional fee to process each payment.

- **By Automatic Bank Transfer**
  Your gas bill can be conveniently deducted from your bank account each month without writing a check or going online. Automatic transfer may help you in many ways by eliminating the possibility of lost, stolen or forged checks…and it means your bill is paid even if you're on vacation or away from home.

  To register, complete the Automatic Transfer Agreement below, and return it to our office with a ***voided check***. Your bill will be mailed to you and marked as ***"Memo Bill-Do Not Pay BANK TRANSFER"***. The "Amount Due" will be withdrawn from your account on the bill due date.

  Complete the form below and return to the Ohio Cumberland office to begin this convenient service.

  Please call with any questions you may have regarding automatic transfer or any other payment options.

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CUSTOMER'S AUTHORIZATION - Please fill out and return to Ohio Cumberland Gas Company

>>>>ATTACH VOIDED CHECK HERE<<<<

I authorize Ohio Cumberland Gas Company and the financial institution listed below to initiate electronic transfers in the payment of my natural gas bill each month. This authority will remain in effect until I have cancelled it in writing.

☐ Checking Account ☐ Savings Account _____ Date

_____ Financial Institution

_____ Branch

_____ City _____ State

_____ Phone

_____ Name (please print)

_____ Address

_____ Account Number at Financial Institution

_____ Signature

ROUTING NUMBER

ACCOUNT NUMBER