



DIRECT DEPOSIT AUTHORIZATION  
CenterPoint Energy Common Dividends

CNP 881 (11-2006)

SHAREHOLDER ACCOUNT INFORMATION

Name(s) on Shareholder Account (please print)		Shareholder Signature (if joint account one holder may sign)	
Shareholder Account Number	Social Security Number	Daytime Telephone Number (include area code)	Date

FINANCIAL INSTITUTION INFORMATION

Bank Name	Bank Account Number	<input type="checkbox"/> Checking
		<input type="checkbox"/> Savings
Bank Address		
Bank Routing Number	Bank Telephone Number (include area code)	Bank Representative (please print)

IMPORTANT: You must complete the Financial Institution Information section of this form and ATTACH A VOIDED CHECK in order to have funds directly deposited to your account. Failure to submit a voided check will result in rejection of your enrollment.

I authorize CenterPoint Energy, Incorporated to direct the net amount of the dividend payment for deposit to my account at the financial institution designated on this form. This authorization will remain in effect until I rescind such authorization by WRITTEN notice to CenterPoint Energy Investor Services.

A separate authorization form must be submitted for each account you have.  
Please complete and sign this form. (If joint account, one holder may sign.)

Return completed form and VOIDED check to:

CenterPoint Energy  
Investor Services  
P.O. Box 4505  
Houston, Texas 77210-4505

Questions concerning this service may be directed to:

(713) 207-3060 Houston  
1-800-231-6406 United States