

WEBSTER ELECTRIC COOPERATIVE

Your Touchstone Energy® Partner



MONTHLY RECURRING CREDIT/DEBIT CARD PAYMENT AUTHORIZATION AGREEMENT

CREDIT / DEBIT CARD INFORMATION

VISA
 MASTERCARD
 DISCOVER

CARD NUMBER: _____
EXPIRATION DATE: _____/_____
THREE DIGIT SECURITY CODE _____ (ON BACK OF CARD)
CARDHOLDER NAME _____ (AS APPEARS ON CARD)

CREDIT/DEBIT CARD BILLING ADDRESS:

STREET: _____
CITY _____ STATE: _____ ZIP _____

AUTHORIZATION

I HEREBY AUTOIZED WEBSTER ELECTRIC COOEPRATIVE TO DEBIT MY CREDIT/DEBIT CARD FOR PAYMENT OF MY MNHLTY ELECTRIC BILL. THIS AUTORIZTION IS TO REMAIN IN EFFECT UNTIL REVOKED BY ME IN PERSON OR WRITING. IT WILL BE MY RESPONSIBILIITY TO MAKE SURE THE CREDIT/DEBIT CARD INFORMATION IS DEPT UPDATED.

CARDHOLDER SIGNATURE _____
DATE: _____
ELECTRIC ACCOUNT NAME _____
ELECTRIC ACCOUNT # _____
PHONE# _____

PLEASE MAIL OR BRING THIS FORM TO WEBSTER ELECTRIC COOPERATIVE – PO BOX 87 MARSHFIELD MO 65706