

Return To:

Fax: 903-453-0784

Email:

customerserv@farmerselectric.coop



Or Mail To:

**Farmers Electric Cooperative
2000 I-30 E
Greenville, TX 75402**

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (RECURRING CREDIT/DEBIT CARDS)

I (we) hereby authorize Farmers Electric Cooperative Inc. (Farmers EC) to initiate credit/debit card transactions to the card listed below. I (we) acknowledge that the origination of the credit/debit transactions to my (our) credit/debit card account must comply with the provisions of U.S. law. Only Visa or MasterCard accepted.

Name on Farmers EC bill _____

Electric bill #(s) _____

Name on credit/debit card _____
(Please Print)

Credit/debit card account # _____ - _____ - _____ - _____

Expiration Date _____

Three Digit CVV# ___ __ _

This authorization is to remain in full force and effect until Farmers EC has received mail, fax or internet notification from me (or either of us) of its termination in such time and in such manner as to afford Farmers EC and the credit/debit card company entered above opportunity to act on it.

Authorized credit/debit card Signature _____

Date _____

Office use only: Cycle # _____