



Your Touchstone Energy® Cooperative

# Sequachee Valley Electric Cooperative

## Auto-Pay for Credit Card Draft Authorization

Member Name \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_

Home Telephone \_\_\_\_\_ Mobile Number \_\_\_\_\_

Please select type of credit card:

VISA

MASTERCARD

DISCOVER

AMERICAN EXPRESS

Name as it appears on the card: \_\_\_\_\_

Credit card number: \_\_\_\_\_

Zip code of credit card billing address: \_\_\_\_\_

Credit Card CVV2 code (on back of card): \_\_\_\_\_

Expiration Date: Month \_\_\_\_\_ Year \_\_\_\_\_

I (we) hereby authorize Sequachee Valley Electric Cooperative, herein called COMPANY, to initiate debit entries to my (our) credit card account indicated above. I (we) understand the debit will be initiated on the due date shown on the energy billing mailed to me each month. I (we) also acknowledge that the debit entries may not be on the due date shown on the energy billing if the account has been disconnected for non-pay or by member request.

This authority is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY a reasonable opportunity to act on it.

I further understand that the COMPANY may impose a service charge in the event that a debit entry is rejected by my credit card company.

\_\_\_\_\_  
*Member signature*

### For Office Use Only: SVEC Account Numbers

Draft Cycle No. _____	Draft Cycle No. _____
Draft Cycle No. _____	Draft Cycle No. _____
Draft Cycle No. _____	Draft Cycle No. _____