



CUSTOMER AUTO BILL SIGNUP FORM

Name: _____
(Please print your name as it appears on your bill)

ANEC account number(s) to be included in Auto Billing:

Home phone: (____) _____ Work phone: (____) _____

Master Card / VISA (circle one)

Account Number: _____ - _____ - _____ - _____

Expiration date: Month: ____ Year: ____

I agree to authorize A&N Electric Cooperative to automatically bill my monthly electric bill to the MasterCard or VISA as indicated above. I understand that I will receive a copy of my ANEC electric bill each month as a reference. I further agree to notify ANEC in writing should I wish to be removed from Auto Billing in the future.

I understand that I may continue mailing in my monthly meter reading(s) or I may sign up for ANEC's meter reading program by completing the enclosed sign up card. Meter readings may also be reported by email to dpenney@anec.com.

Signature _____ Date _____

Signature _____ Date _____

Please complete and return to: A&N Electric Cooperative
Attn: Jane Daisey
PO Box 290
Tasley VA 23441-0290