RURAL BARDWELL WATER SUPPLY CORPORATION

115 East Main P.O. Box 26

Itasca, Texas 76055 Phone: 254-687-2331 Fax: 254-687-2551

Credit Card Draft Authorization Form

Name(s): _	
(As it appe	ars on your bill)
riome riom	ne: () Business Phone: ()
Address: _	
City:	State: Zip Code:
Rural Bard	well Water Supply Corporation Account Number(s) to be paid by Draft:
Credit Card	, please check one: () Mastercard () Visa () American Express () Discover
Name as it	appears on your credit card:
Credit Card	Number:
Expiration 1	Date:
credit card. Bardwell W	chorize Rural Bardwell Water Supply Corporation to charge my bill to myeach month. I understand that my bill will be charged automatically each month to my This authorization is to remain in effect until revoked by me in writing. Rural fater Supply Corporation reserves the right to terminate this payment arrangement or ation therein.
prior to the n	ast be signed and returned to Rural Bardwell Water Supply Corporation a minimum of 15 days ext bill date in order for the draft to be effective for the current bill. If it is received less than to the current bill due date, the draft will not be effective until the next month's bill due date.
SIGNATUR	RE: Date:
Mail to:	Rural Bardwell Water Supply Corporation Attention: Consumer Drafts P.O. Box 26

Itasca, TX 76055