



# Automatic Credit Card Authorization

ACC #

1. Name on Card

*First Name Middle Initial Last Name*

2. Card Number:

3. Expiration Date

*Month/Year*

CVC Number

*Security Code*

That the business may communicate with me electronically at the email address and/or phone number listed below.

4. Most Preferred Method of Communication:

Text Message

Email

5. Contact Information

My Email and Phone Number

I can withdraw my consent to electronic communications by calling / emailing:

Tri- Community Water Supply Corporation

(512) 488-2573

tricomcommunitywater@gmail.com

7. Signature

Date of Signature

*MM*

*DD*

*YY*