



**HILCO ELECTRIC COOPERATIVE, INC.  
CREDIT CARD DRAFT AUTHORIZATION FORM**

Name(s): \_\_\_\_\_  
(As it appears on your electric bill)

Home Phone: ( ) \_\_\_\_\_ Business Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

HILCO Electric Account Number(s) To Be Paid By Draft: \_\_\_\_\_

**Credit Card**, please check one:    ( ) Mastercard    ( ) Visa    ( ) Discover    ( ) American Express

Name as it appears on your credit card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

I hereby authorize HILCO Electric Cooperative, Inc. to charge my electric bill to my: \_\_\_\_\_ credit card each month. I understand that my electric bill will be charged automatically each month to my credit card. **I understand this charge will occur on the Monday prior to the due date shown on the billing statement. If the Monday prior to the due date falls on a holiday, my credit card will be charged the next business day.** This authority is to remain in effect until revoked by me in writing.

HILCO Electric Cooperative, Inc. reserves the right to terminate this payment arrangement or my participation therein.

**This form must be signed and returned to HILCO a minimum of 15 days prior to the next bill due date in order for the draft to be effective for the current bill. If it is received less than 15 days prior to the current bill due date, the draft will not be effective until the next month's bill due date.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Mail to:** HILCO Electric Cooperative, Inc.  
Attention: Consumer Drafts  
P.O. Box 127  
Itasca, TX 76055-0127