

**Tongue River Electric Cooperative, Inc.**  
**Pay By Bank Bill Payment Authorization Form (Please Print)**

Complete the 'Authorization Form' and return it to Tongue River Electric at your convenience. Please attach a blank check or savings slip marked "VOID". This will be used to record the bank information needed to process the payment.

I authorize Tongue River Electric Cooperative, Inc. to initiate variable entries to my account identified below for payment of my electric bill.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Bank Account

\_\_\_\_\_  
Customer Address

\_\_\_\_\_  
Name of Financial Institution

\_\_\_\_\_  
Authorized Signature / Date

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Work Phone



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**TONGUE RIVER ELECTRIC COOPERATIVE, INC.**

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