



P.O. BOX 138 • ASHLAND, MONTANA 59003 • OFFICE: 1-406-784-2341 • FAX NUMBER: 1-406-784-2279

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**Tongue River Electric Cooperative, Inc.**  
**Automatic Checking Account Bill Payment Authorization Form (Please Print)**

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

\_\_\_\_\_  
Name on Account

\_\_\_\_\_  
Routing Number

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

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

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
TRECO Account number

Complete the 'Authorization Form' and return it to Tongue River Electric at your convenience. Bills will be charged to the credit card on file on the 10<sup>th</sup> of each month or the next business day.