



# Calhoun County Electric Cooperative Association

A Touchstone Energy® Cooperative



1015 Towanda | PO Box 312 | Rockwell City, IA 50579  
(712) 297- 7112 | (800) 821- 4879 | Fax: (712) 297-7211  
www.calhounrec.coop

Member Name: \_\_\_\_\_

Electric  
Account Number: \_\_\_\_\_

## General Outage & Text Message Alerts

*\*Notifications may include maintenance/planned outages, outage updates, upcoming events, etc.*

☐ Email Address(es): \_\_\_\_\_

☐ Phone Number(s): \_\_\_\_\_

☐ Both

## Paperless Statements

*\*Monthly billing and payment notifications will be sent to me via email or SMS/text.*

☐ Email Address(es): \_\_\_\_\_ ☐ Mark if same as above

☐ Phone Number(s): \_\_\_\_\_ ☐ Mark if same as above

☐ Both

## Automatic Bill Pay

Financial Institution: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

☐ Checking

☐ Savings

## Payment Acknowledgement

Payments will be taken out the 20th of each month. If the 20th lands on a Saturday or Sunday payment will be taken out the following Monday.

I authorize Calhoun County Electric Cooperative Association to initiate withdrawals and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my account at the financial institution named above effective upon arrival of this form for payment of my monthly bills.

I understand that three or more payments in a 12-month period resulting in overdraft of my account may result in termination of the direct payment plan. This authorization will remain in effect until Calhoun County Electric Cooperative Association has received notification from me of its termination.

By completing this agreement, you specifically request, expressly consent to receive, and authorize CCECA ("the Cooperative"), its affiliates, business associates, and service providers to deliver, or cause to be delivered, emails, and SMS/text to your cell phone or email. This could result in charges to you according to your data plan. If at any point you change or obtain a new email address, or if you no longer maintain the email address you originally provided to us, you agree to notify the Cooperative immediately. Your information will not be shared with anyone outside of the Cooperative.

Member's Signature \_\_\_\_\_ Date \_\_\_\_\_