



Highland Telephone Cooperative, Inc.

7840 Morgan County Hwy.
P. O. Box 119
Sunbright, TN 37872-0119
423-628-2121 Phone 423-628-2409 Fax

Automated Payment Service Authorization Form

I authorize Highland Telephone Cooperative, Inc. to automatically draft my checking account as noted below, for my monthly Highland Telephone Cooperative, Inc. charges. I understand that this automatic draft will continue to recur each month for the amount of my bill. I may revoke this Automated Payment authorization at any time with **thirty (30) days written** notice to Highland Telephone Cooperative, Inc. at the address identified above.

I also understand that I am responsible for ensuring that the necessary funds are available at the time the draft occurs. I will continue to be responsible for payment should anything prohibit regular payment in this matter.

Signature of Account Holder

Date

Please Print

Account Name

Telephone Number

Checking Account Draft

Please attach a **blank voided check** in order to set up a check account draft.

Your Bank's Name

Your Bank's Address

Retain a copy for your records.

Draft Date _____ each month

This institution is an equal opportunity provider and employer.