



Credit Card Authorization Form



Credit Information
Check one:



Cycle _____

Credit card number: _____

Expiration date _____

Electric/Internet Account Information

Account Number: _____

Name on Account: _____

Address: _____

Daytime phone: _____

I authorize the TMLP to charge against my MasterCard/Visa card monthly for:

Electric

Internet

I understand that the automatic charge will be

taken out of my MasterCard/Visa until I notify you that I wish it to stop.

Signature: _____

Date: _____