

Authorized Contact Agreement

P.O. Box 277

Arcadia, WI 54612

Return form to:

An "Authorized Contact" is a person you allow Riverland Energy Cooperative to give your account information to. To add an Authorized Contact(s), please fill in all the data included on this form, sign at the bottom and mail the completed back to our office or fill out the form online.

Riverland Energy Cooperative

Your Information			
Account Number:			
Name as it appears on a	account:		_
First Authorized Conta	ıct:		
Name:			
Address:			<u> </u>
City:	State:	Zip:	<u> </u>
Phone Number:		_Date of Birth:	
account which will incl	ude, but not be lime information. The	nited to, balances, p person(s) above are	ormation contained on my ayments, addresses and authorized to receive this
Signature of current me	mber:		Date: