

Mutual Telephone Company 365 Main St PO Box 338 Little River, KS 67457-0338 620-897-6200 or 1-877-216-9951

Fax: 620-897-6211

Account Name:					
Address:			recurring ACH debit t	Complete this form if you would like to make payment by either by recurring ACH debit to your bank account or by recurring charge to your Debit/Credit card.	
Contact number:					
Email Address:					
Transaction proces	sses on the 3rd day o	f each month, or t	he following business day. (Please allow	w 10 calendar days to set up the initial transfer)	
For Recurring Payment via	a ACH complete the	following:			
				Savings Account (select one) indicated at the count must comply with the provisions of U. S.	
		Please mail or fax	this form along with a VOIDED check		
Bank Name:			Branch:		
Bank Address:					
Routing Number:			Account Number:		
For Recurring Payment vis	a Debit/Credit Card	complete the follo	wing:		
	Discover	Visa	Master Card		
Credit/Debit Card:			<u> </u>		
Expiration Date:			Card Identification Number :		
			ank account or charge your debit/og your payment, we need signed &	credit card for your monthly account charges. If a dated written notification.	
Signature			Date		
Accepted by	MTC		Date re	eceived in office	