



Autopay Credit Card Authorization Form

PLEASE PRINT OUT AND COMPLETE THIS AUTHORIZATION AND RETURN TO US.
All information will remain confidential.

Monthly Bills will be sent out on the 1st and payment will be processed on 15th following bill cycle.

Cardholder Name: _____

Billing Address: _____

IF CREDIT CARD IS ALREADY ON FILE FOR DELTA ELECTRIC MBR SEP/ACCOUNT, YOU MUST USE SAME CARD OR CHOOSE BANK DRAFT. SYSTEM WILL NOT ALLOW MULTIPLE CREDIT CARDS FOR AUTO PAY UNDER ONE MEMBER.

Credit Card Type: ___ Visa ___ Mastercard ___ Discover ___ AmEx

Credit Card Number: _____

Expiration Date: _____

Card Identification Number: _____

(3 digit code on the back of credit card or 4 digit code on front of Amex Credit Card)

EMAIL ADDRESS (REQUIRED) _____

I _____ authorize **DE LightSpeed** to charge the monthly **DE LightSpeed** internet charges to my credit card provided herein on the due date of each month. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

Cardholder – Print Name, Sign and Date Below:

Name: _____

Signed: _____

Dated: _____

I am the authorized user of this credit card and will not dispute the scheduled payments outlined above. I understand that this authorization will remain in effect until I cancel the agreement in writing. In addition, I agree to notify **DE LightSpeed of any changes to my payment information at least 10 days prior to the next payment authorization monthly due date.**