

Granby Telephone Company  
GTC Broadband  
126 S Beaver Ave PO Box 200  
Granby MO 64844

## Automatic Payment Authorization Form

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone or Account Number \_\_\_\_\_

### Credit Card/Debit Card

Name on Card \_\_\_\_\_ Card Type \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ CSV \_\_\_\_\_

### Checking Account Bank Draft (ACH)

Attached a copy of check here. (Voided Check is Required)

Bank Account Holder Signature

\_\_\_\_\_ Date \_\_\_\_\_

By Signing this form, I authorize GTC and GTC Broadband to automatically charge my account monthly for my billed services. I understand that late and reconnect fees will apply for all non-cleared charges. Termination Requires a 30-day notice prior to the next billing cycle.

\_\_\_\_\_ Date \_\_\_\_\_

Customer Signature