

Auto Payment CREDIT CARD PROCESSING FORM

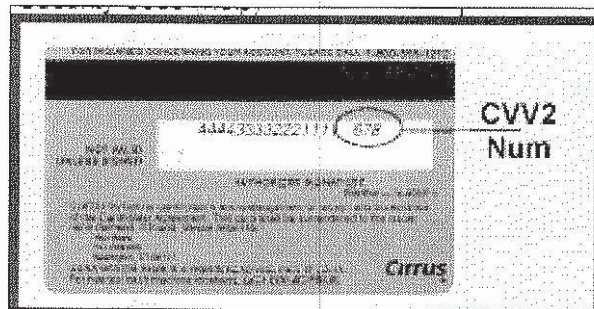
Carefree Water Company Account Number

Card Type:

Card Number:

Security Code:

Help Note: 3 number code located behind the credit card



Card Holder's First Name:

Card Holder's Last Name:

Card Exp. Date:

Billing Address:

Signature

Date

By using the e-signature feature of this Credit Card Payment Authorization Form, I represent and warrant without reservation that I have the legal right, power, and authority to agree to all terms contained in the electronic records of this Credit Card Payment Authorization Form on behalf of myself (or on behalf of the individual on whose behalf I am acting, if different). I further agree that my use of the e-signature feature of this payment authorization form constitutes an "electronic signature" as defined by the Electronic Signatures in Global and National Commerce Act ("E-Sign") and Uniform Electronic Transactions Act ("UETA") and that I have formed, executed, entered into, accepted the terms of, and otherwise authenticated the terms specified herein for the use of the e-signature feature of this Credit Card Payment Authorization Form.