



# Authorization for Release of Information



Your Touchstone Energy® Cooperative 

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I, \_\_\_\_\_ and \_\_\_\_\_ (if applicable) hereby authorize Jackson Electric Cooperative to disclose information relating to my account, including information regarding the account balance, payment information, and disconnect status ("Account Information"), to the following individual(s) and/or organization(s):

<b>Authorizing Member(s)</b>
Name:
Name:
Security Question:
Answer:

<b>I authorize disclosure of Account Information to the following individual(s)</b>	
Name:	Relationship:
Name:	Relationship:
Security Question:	
Answer:	

<b>I authorize disclosure of Account Information to the following organization(s)</b>	
Name:	
Contact Person (if applicable):	
Security Question:	
Answer:	

**I recognize that this consent will remain in effect until I give written notice to Jackson Electric Cooperative to discontinue or terminate this consent for disclosure.**

Member Signature:	Authorization Date:
Member Printed Name:	
Member Signature:	Authorization Date:
Member Printed Name:	

<b>Internal Use Only: Account holder was contacted to confirm his/her authorization.</b>	
JEC Representative:	Date: