



# West River Electric Association, Inc.

Your Touchstone Energy® Partner 

**Home Office**  
1200 West Fourth Ave.  
PO Box 412  
Wall, SD 57790-0412  
Telephone: (605) 279-2135  
Toll Free: 1-888-279-2135

**Branch Office**  
3250 E. Hwy. 44  
PO Box 3486  
Rapid City, SD 57709-3486  
Telephone: (605) 393-1500  
Toll Free: 1-888-393-1500

## Information Authorization

Account # \_\_\_\_\_

Name \_\_\_\_\_

Date: \_\_\_\_\_

Joint Name \_\_\_\_\_

This document is to give authorization to \_\_\_\_\_ to be able to receive information about my account with West River Electric. This will include usage amounts, dollar balances and make payment arrangements to the account. This person(s) will NOT have the authority to make changes to the account.

This Authorization is valid until it is revoked by the member.

\_\_\_\_\_  
Signature - Member

\_\_\_\_\_  
Signature – Joint Member

This must be either witnessed by a WREA employee OR signed by a Notary Public.

Witness: \_\_\_\_\_  
Signature – WREA Employee

STATE OF SOUTH DAKOTA COUNTY OF \_\_\_\_\_

On this the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, before me, \_\_\_\_\_ the undersigned officer, personally appeared \_\_\_\_\_ known to me or satisfactorily proven to be the person whose name(s) subscribed to the within instrument and acknowledged that \_\_he\_\_ executed the same for the purposes therein contained. In witness whereof I hereunto set my hand and official seal.

\_\_\_\_\_  
(Notary Public)

My Commission Expires \_\_\_\_\_

(SEAL)