

# As part of Meeker Cooperative's Red Flag Rules required by the FTC,

Meeker Cooperative personnel may only discuss a member's account with the member whose name appears on the account. If you wish a spouse or other person to be able to discuss your account with Meeker personnel, you must complete the form below and return it to the address noted at the bottom of the form.

DO NOT RETURN WITH YOUR BILL PAYMENT.

## ACCOUNT AUTHORIZATION FORM

I hereby authorize \_\_\_\_\_, \_\_\_\_\_  
Full Name Relationship

access to information in my Meeker Cooperative account, by supplying Meeker Cooperative with the last 4 digits of my Social Security number: \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_.

It is my responsibility to notify Meeker Cooperative to amend this authorization.

\_\_\_\_\_  
Member Name — PRINT

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Member SIGNATURE

\_\_\_\_\_  
Phone Number

Please complete, clip and mail to Meeker Cooperative, Attn. Mary Walters, P.O. Box 68, Litchfield, MN 55355. DO NOT SEND ALONG WITH YOUR BILL PAYMENT.

All bill payments go to an off-site location.