

WHY AUTO PAY? Save \$1 Per Month!

☐ YES! I would like to sign up for CASSCOMM's Automatic Payment Program.
I authorize CASSCOMM to automatically collect from my checking account.

		VOIDED CHECK □	
lame (as it appears on the account)		(Send with this form)	
CASSCOMM Account #			
ASSOCIATION ACCOUNT #			
Address	City	Signature	-

Mail this form with the necessary information to CASSCOMM, PO Box 200, Virginia, IL 62691