



"The Energy Company Of Choice"
A Touchstone Energy Cooperative 

REQUEST FOR BUDGET BILLING REMOVAL

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

REMC ACCOUNT NUMBER(S): _____

I wish to be removed from WIN Energy REMC'S Budget Billing Program.

SIGNATURE: _____

DATE: _____

Please complete and return in the enclosed envelope. Due to timing, it may take one billing cycle to remove this account from budget billing.