



Online Form Instructions

- For the purpose of ECI REC online forms, when the word “signature” appears, a typed, legal name is an acceptable substitute. As long as the complete, legal name appears in each blank for which a signature was requested, the form is accurate and binding (pending accurate completion of all other form sections). It is not necessary to print and sign the form if users plan on taking advantage of the “submit by email” option provided on the final page of each form.
- Some rebates may require the actual signature of mechanical engineers. ECI REC will follow-up with members applying for those rebates as necessary.
- Please do not fill out the “office only” sections of the form. Tab past them when filling out the form.
- Completed forms and required sales receipts or invoices may also be submitted to ECI REC via fax at (319) 443-4359. Please submit both the completed form and accompanying invoice(s) using the same method—fax or email—to ensure they arrive together at ECI REC.



East-Central Iowa Rural Electric Cooperative
2400 Bing Miller Lane | PO Box 248 | Urbana, IA 52345-0248
Ph: 877-850-4343 | F: 319-443-4359 | ecirec@ecirec.coop
www.ecirec.coop

RECare Consumer Contribution Plan

Your electric Cooperative extends a helping hand to those in need. East-Central Iowa REC has established RECare, a program where members help others. RECare will provide funds to be distributed by local community action agencies to help pay winter heating bills and to assist in weatherization of homes for low-income consumers. You may make a one-time contribution or a monthly pledge that will be automatically added onto your electric bill. Even a dollar a month pledge helps others! You care, we care, RECare.

Yes, I want to be a part of members helping others and contribute to RECare.

- I will make a one-time contribution to RECare.
- I will contribute \$_____ per month to RECare. (I understand that this amount will be automatically added to my monthly electric bill.)
- My check is enclosed.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Account Number: _____

Please fill out and return form to: RECare
East-Central Iowa REC
2400 Bing Miller Lane
PO Box 248
Urbana, IA 52345-0248