



Guarantee of Payment

I will guarantee payment of all telephone charges for the following name and telephone number listed below:

Name: _____

Address: _____

Telephone Number(s):

If said name above fails to make payment in a satisfactory length of time, to be determined by WEST RIVER TELECOMMUNICATIONS COOPERATIVE, I will pay all charges on the account listed below for the length of time specified below.

Guarantor please check charges you will accept to pay:

- Local Toll Charges Email/Internet/DSL Charges
 Calling Features PERS System Security System

Guarantor please select payment guarantee for the above person listed above:

- 6 Months 9 Months 12 Months 2 Years Lifetime

Guarantor's Name: _____

Guarantor's Telephone Number: _____

Guarantor's Address: _____

Guarantor's Signature: _____

Date: _____

For Office Use Only

Date: _____

Accepted for West River Telecommunications Cooperative