The Globe

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**Call us:** 507-376-9711

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**Please mail to:**
**The Globe, PO Box 639, Worthington, MN 56187**

☐ **YES!** I authorize The Globe to initiate EZ Pay and I have selected the automatic payment option I would like to use.

The Globe

Signature: _____ Date: _____

☐ **EZ Pay from Credit Card**

I would like to pay with my credit card every:

☐ month ☐ 3 months ☐ 6 months ☐ year

Card Number:

Expiration Date: / ☐ Visa ☐ MasterCard ☐ Discover

Signature: _____

Name on card: _____
*(please print)*

☐ **EZ Pay from Bank Account** *Must include a voided check*

☐ Debited from account on the 5th of every month
☐ Debited from account on the 20th of every month

Financial Institution: _____

City: _____ State: _____

9-digit routing number: _____

Checking account number: _____

Printed Name: _____

Address: _____

City: _____ State: _____ Zip: _____

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