

FULMONT MUTUAL INSURANCE COMPANY

PO Box 487, Johnstown, NY 12095-0487

Fax: 518-762-7870

E-Mail: info@fulmontmutual.com

Credit Card and E-Checks Payment are available. There are three ways you can send it to us:

- Fill out this form, print it and fax it to us at 518-762-7870
- Fill out this form, print and mail it to: Fulmont Mutual Insurance Company, P.O. Box 487, Johnstown, NY 12095-0487
- E-mail: info@fulmontmutual.com

Name: _____
Company: _____
Street: _____
State: _____ Zip Code: _____
Daytime Telephone: _____
Fax: _____
E-Mail: _____
Total Payment: _____
Policy# _____

Payment Method:  VISA
Please check one

 MasterCard
 E-Check

Bank Name _____
ABA# _____ ACCT# _____

Credit Card #: _____
CVV# _____
Expiration Date: _____

Yes, I have double checked the entries that I have made, and I hereby authorize the total amount entered above to be charged to the credit card number or my bank account that I have entered.

Signature: _____
Date: _____