

Sign me up for Wellspring!

Name on electric bill _____

Address _____

City/State/Zip _____

Phone # _____ Cell Phone # _____

REA Account # _____

Select one (solar):

_____ 100 kWh (\$2) _____ 200 kWh (\$4) _____ 300 kWh (\$4)

_____ 400 kWh (\$8) _____ 500 kWh (\$10)

Select one (wind):

_____ 100 kWh (40¢) _____ 200 kWh (80¢) _____ 300 kWh (\$1.20)

_____ 400 kWh (\$1.60) _____ 500 kWh (\$2)

Signature _____

**Send to BCREA, PO Box 529, Sleepy Eye, MN 56085. Questions?
Call 794-3331 or 1-800-658-2368.**

