

AUTHORIZATION AGREEMENT For E-bill with Auto-Bank Draft

I hereby authorize Home Telecom hereinafter called COMPANY, to initiate debit entries, or such entries (debit or credit), which are necessary for corrections, to my indicated bank account. I further authorize the Financial Institution named below, to debit (or credit) the name to such account.

FULL NAME:	_ CONTACT NU	JMBER:		
EMAIL:	_ ACCOUNT N	JMBER:		
ADDRESS:				
NAME:				
FINANCIAL INSTITUTION:				
BANK ROUTING NUMBER:				
BANK ACCOUNT NUMBER:				
I understand that I am enrolling to receive my monthly statement of month. This authority is to remain in full force and effect until COM such manner as to afford COMPANY a reasonable opportunity to a	1PANY has received w			
I would like to receive my billing statements el	ectronically:	Yes 🗌	No 🗌	
Please note that by opting out of electronic statements, your quote	ed price will increase k	by \$5 per month.		
SIGNED:			DATE:	