



P.O. Box 3198, Shallotte, N.C. 28459 • 640 Whiteville Road NW • (910) 754-4311

## AUTHORIZATION AGREEMENT FOR PREARRANGED PAYMENTS

I (we) authorize FOCUS Broadband to automatically debit my (our) checking or savings account from the bank indicated below:

NAME: \_\_\_\_\_

ACCT #: \_\_\_\_\_ CYCLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

### For Office Use Only

BANK NAME: \_\_\_\_\_

TRANSIT/ABA #: \_\_\_\_\_

ACCOUNT #: \_\_\_\_\_

PRENOTE: \_\_\_\_\_

START DATE: \_\_\_\_\_

**\*\*\*ATTACH VOIDED CHECK HERE\*\*\***