## Simplify Your Monthly Billing

>> Simplify your billing by having pre-authorized debits (PADs) made from your bank account each month. Your monthly electronic statement summary provides a quick look to confirm your charges, then with pre-authorized debits, you can spend less time paying bills by not having to prepare and send your payment each month.



>> Having the amount you owe come out of your account each month offers the peace of mind that your payments are made on the same date each month, but not earlier than necessary. Payments come out on the 21st every month (or the next business day when it falls on a weekend or holiday).

## PRE-AUTHORIZED DEBIT AGREEMENT

Hay Communications	Account Number	Residenti	al Business
banking you can obtair the funds withdrawn, o	equired – Include a VOID cheque a a digital VOID cheque from the a you can enter the required infor a pre-authorized form with this in	account you want mation below. Your	Hay Customer 999 Bundle Street Zunds, ON HONG 2TO  DATE 2 0 Y Y MM D D  SOURCE STREET  PAY TO THE ORDER OF  LIbro  MISSO  MONO XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Transit	Institution	Account Number	
Bank Authorization: required, then both or all Payo		Account, then only 1 Pay	or need sign. If 2 or more signatures are
I/We agree that a debit in the amount of my monthly invoice may be drawn from my account on the 21st (due date). I/We will inform Hay Communications, in writing, of any changes in the account information at least 10 days prior to the next due date of the pre-authorized debit. Either myself or Hay Communications may revoke this authorization by delivering written notice to the other party at any time. I/We have authority under the terms of my/our account agreement with my/our financial institution to debit the above account.		I/We acknowledge that this agreement is provided for the benefit of the "Payee" and "Processing Institution" and is provided in consideration of the Processing Institution agreeing to process debits ("PAD's) against the Account with the Processing Institution in accordance with Payment Canada Rules. I/We acknowledge that I/we have certain recourse rights if any debit does not comply with this agreement. For example, I/We have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD agreement. To obtain more information on your cancellation/recourse rights, you may contact your financial institution or visit www.payments.ca.	
Customer Name on Bank Account		Additional Name on Bank Account	
Address			
Email Address		Phone Number	
Signature		Signature	
Date		Date 21st	Watch your e-statement summary on the 1st of each month to make sure you
l've included the requ	uired banking information from al	(	

Deliver or mail this completed form and the required banking information to a Hay Communications location.

Drop boxes are available at all locations.

Zurich – 72863 Blind Line, NOM 2T0

Exeter – 168 Thames Road, W, NOM 1S3

Grand Bend – 30 Ontario Street, N, NOM 1T0

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