



DOYLESTOWN TELEPHONE EASY-PAY AUTHORIZATION

I (we) hereby authorize **Doylestown Telephone Company**, herein called COMPANY, to initiate debit entries to my (our) checking account, savings account, (select one) indicated below at financial institution names below, hereafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the organization of ACH transactions to my (our) account must comply with the provisions of U.S. law. Please note: the charge will appear on your bank statement as "Doytel/DCI".

Customer Name: _____

Customer Telephone Number/Billing Number: _____

Bank Name: _____

Bank Routing/Transit Number (9 Digits): _____

Bank Account Number: _____

IMPORTANT: PLEASE INCLUDE A CURRENT VOIDED CHECK
(Deposit slips are not acceptable)

This authorization is to remain in full force and effect until the COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name: _____

Name: _____

Signature of Account Holder(s): _____ **Date:** _____

Mail form and voided check to:

Doylestown Telephone Company
81 N. Portage Street
Doylestown, Ohio 44230

For questions regarding this service please contact us at 888.881.0805