

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENT WITHDRAWAL

I (we) hereby authorize PENN BROADBAND , hereinafter called COMPANY , to initiate debit entries to my/our Checking or Savings Account (select one) indicated below at the depository financial institution named below, hereinafter called DEPOSITORY , and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.	
DEPOSITORY NAME	
BRANCH	_
CITY	
	PHONE
ABA ROUTING NUMBER	
ACCOUNT NUMBER	
This authorization is to remain in full force and effect until COMPANY receives written notification from me (or either 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(S)	
(PLEASE PE PHONE NUMBER	RINT)
DATE	SIGNED X
	SIGNED X
NOTE: All written debit authorization	ns must prove that the receiver may revoke the

All written debit authorizations must prove that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.