

### **Direct Answers To Questions About Electronic Payment**

#### Q: What is Electronic Payment?

A: Electronic Payment is an automatic bill payment whereby your payment is deducted automatically from your checking or savings account.

### Q: What is the advantage of electronic payment?

A: It saves time! It saves work! It simplifies your life! You can avoid the hassle of writing and mailing checks!

### Q: How can you transfer money from my account?

A: Only with your authorization.

### Q: When is the electronic payment transferred from my account?

A: Every two or four weeks, whichever payment option you choose. You never have to worry about forgetting a payment or mailing it on time.

#### Q: If I do not write checks, how do I keep my checkbook balance straight?

A: Since your payment is made at a pre-established time, you simply record it in your check register on the appropriate date.

# Q: Without a canceled check, how can I prove I made my payment?

A: Your bank statement gives you an itemized list of electronic payments. It is your proof of payment.

#### Q: Is electronic payment risky?

A: Electronic payment is less risky than check payment. It cannot be lost, stolen or destroyed in the mail. It has an extremely high rate of accuracy.

#### Q: What if I change bank accounts?

A: Notify us and we will give you a new authorization form to complete.

### Q: How much does electronic payment cost?

A: It costs you nothing. Plus you save the cost of stamps, checks and envelopes.

## Q: What if I try electronic payment and don't like it?

A: You can cancel your authorization by notifying us any time. But once you've enjoyed the convenience, time and money savings of electronic payment, we doubt you will want to go back to paying bills the way you did before.

### Q: How do I sign up for electronic payment?

A: Complete and sign the authorization form below and return it to us along with a voided check or savings deposit slip.

## Q: When will my automatic payments begin?

A: We will notify you beforehand of when the next two or four-week payment cycle will process.

ayment Frequency:			
Name on account (Please	Print):		
Address:			
City:		State:	Zip:
Bank Name:			
Please transfer payments directly from my:		☐ Checking Account (attach a voided check)	
		☐ Savings Account (attach a savings deposit slip)	
Routing Number:		Account Number:	
Routing number must start w	rith 0, 1, 2 or 3 is 9 digits long		
and is located at the bottom of the check.			
I authorize Children's Discove	ry Child Care & Learning Cen	ter to process debit entries	s from my account. This authority will
remain in effect until I give reasonable notification to terminate this authorization or until the last specified payment date. I			
understand there will be a \$25.0	00 fee automatically charged to m	y account for any insuffic	ient funds (NSF) transactions. I have
attached a voided check or savi	ngs deposit slip.		
Authorized signature on account:			Date: