

# We'll gladly stop mailing you a bill



**EZ Pay** is just that -- EASY! No more bills. No more checks. No more hunting for stamps and envelopes. Best of all it's safe and reliable. With your authorization, we'll either charge the cost of your Daily Register subscription to your credit card or deduct from your bank account each month.

## Gainesville Daily Register

306 E. California, Gainesville, Texas 76240  
940-665-5511

### How EZ Pay Benefits You

1. Monthly billing - doesn't tie up large amounts of money in advance.
2. Never receive another renewal notice - no more checks to write or stamps to find.
3. Switch at any time - prefer to go back to paying another way after trying EZ Pay? Just call us.

# 940-665-5511



EZ Pay works by letting you automatically bill your subscription to your credit/ATM/debit card, checking or savings account. It's the easy way to subscribe to The Gainesville Daily Register.

## Choose From Two Convenient Payment Options

### Credit Card Payment

I want to take advantage of EZ Pay, and I authorize you to bill my credit/ATM/debit card for the applicable amount each month until I instruct you otherwise.

Please bill my:      

Credit Card Account Number \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

Signature \_\_\_\_\_  
Required for validation

Mail To: Daily Register P.O. Box 309  
Gainesville, TX 76421

### Direct Debit from Checking/Savings Account

I want to take advantage of EZ Pay, and I authorize you to process a payment-in paper, electronic or other form-for the applicable amount on my checking/savings account each month until I instruct you otherwise.

Enclosed is a check for my first month's payment, along with a blank check/deposit slip marked "VOID" across the front

**Important: Please include a voided check/deposit slip**

Savings/Deposit Slip	
John Smith 123 Any Street Anytown, TX 12345	1234
PAY TO ORDER OF _____	
<b>"VOID"</b>	
123-4567-8900 _____	

### AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS (ACH DEBITS)

Company Name Gainesville Daily Register Company ID Number \_\_\_\_\_

I (we) hereby authorize Gainesville Daily Register, hereinafter called COMPANY, to initiate debit entries to my (our)  Checking Account/  Savings Account (select one) indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to credit 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 \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Routing Number \_\_\_\_\_ Account Number \_\_\_\_\_

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

Name(s) \_\_\_\_\_ ID Number) \_\_\_\_\_

Please Print

Date \_\_\_\_\_ Signature \_\_\_\_\_

NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.