



Palo Alto Community Child Care  
 3990 Ventura Court - Palo Alto, CA 94306  
 (650) 493-2361 \* fax (650) 493-0936

# Automatic Debit Authorization

## Summer 2008

<b>FOR PACCC USE ONLY</b>
Account No.

FUTURE PAYMENTS I (we) hereby authorize Palo Alto Community Child Care, hereinafter called PACCC, to initiate debit entries to my/our (select one)  checking  savings account indicated below at the Depository Financial Institution named below, hereinafter called DEPOSITORY, and to debit the same to such account.

DEPOSITORY NAME \_\_\_\_\_ BRANCH \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 ROUTING NUMBER \_\_\_\_\_ ACCOUNT NUMBER \_\_\_\_\_

Please attach a voided check for a checking account, or a deposit slip for a savings account.

This authorization is to remain in full force and effect through August 2008, or until PACCC has received written notification from me (or either of us) of its termination in such time and in such manner as to afford PACCC and DEPOSITORY a reasonable opportunity to act on it.

Name(s) \_\_\_\_\_

please print

Address \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_

Cell / Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Account holder(s)

Sign here: \_\_\_\_\_ Sign here: \_\_\_\_\_

Please  this box to authorize PACCC to debit your account for late fees.

I hereby authorize Palo Alto Community Child Care (PACCC) to debit my account for child care services provided to:

Name(s) of child(ren) \_\_\_\_\_

at the \_\_\_\_\_ PACCC center(s) in the amount of \$ \_\_\_\_\_ for the enrollment DEPOSIT.

\*\*\*\*\* **FUTURE PAYMENTS BY AUTOMATIC DEBIT** \*\*\*\*\*

this box if you would like PACCC to fill in the following payment schedule for you.

\$ \_\_\_\_\_ due on MAY 30, 2008

\$ \_\_\_\_\_ due on JUNE 30, 2008

\$ \_\_\_\_\_ due on JULY 31, 2008

<p><b>Need a Receipt?</b></p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> this box and PACCC will send you a receipt each month.</p>
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Please notify us of any change of information on this form. Any change in contract requires two weeks' prior written notice (see contract) and completion of a new Debit Authorization Form if there are fee changes.