



Serving Lawrence County

"Life. Printed and delivered"

Dear Valued Subscriber,
Thank you for your interest in our new E-Z Pay program. Below is an ACH debit form that needs to be returned to the News office so you may begin your savings.

Paying the E-Z Pay way has never been easier. No Checks to write!
No Postage to buy! No Hassle! Non stop paper delivery!

E-Z Pay rates are as follows.

	Carrier rate	Motor rate	Savings
5 weeks	\$10.50	\$11.00	\$1.00 each time
13 weeks	\$27.30	\$28.60	\$2.60 each time
26 weeks	\$54.60	\$57.20	\$5.20 each time
52 weeks	\$109.20	\$114.40	\$10.40 each year

E-Z Pay savings for the whole year is over 1 month of free papers!
(as opposed to regular home delivery price.) This is the lowest price in over 10 years!

If you have any questions please feel free to call the New Castle News office at 724-654-6651.

Direct Debit (ACH Debit) Authorization Form

Customer Name: _____

Customer Account Number: _____

I (we) hereby authorize NEW CASTLE NEWS, herinafter called COMPANY and the depository financial institution named below, herinafter called DEPOSITORY, to initiate electronic debit entries, and if necessary, process adjustments needed to correct entries made in error, to my account listed below. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with provisions of U.S. Law.

Financial Institution Name (Bank, Credit Union)

Branch

Routing Number

Account Number

☐

Checking Account

☐

Savings Account

This authority is to remain in full force and effective until COMPANY has received written notification from me of its termination in such manner as to afford the COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Choose options for billing. I want to be debited every:

☐

5 weeks

☐

13 weeks

☐

26 weeks

☐

52 weeks

Print Name

Date

Authorized Signature

PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM