



AUTODEBIT AUTHORIZATION FORM FOR CHECKING/SAVINGS WITHDRAWAL(ACH)

Sign and return this form with a voided check.

SECTION A – APPLICANT INFORMATION				
Last Name (as it appears on account)	First Name	Middle Initial		
If joint account, list other names				
Current Street Address				
City/State	Zip	Home Phone	Username	
SECTION B – BANK ACCOUNT INFORMATION				
Bank Name			Routing Number	
Account Number	Check one: <input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account			

I, the undersigned, hereby authorize and request Fox Business Systems and the financial institution listed above to debit the indicated bank account in the amount of \$ _____ on the first day of each month.

Note: KansasNet is a subsidiary of Fox Computers Inc. Billing of your account may appear under the “Fox” name.

Debits are generally made between the 1st & the 3rd day of the service month. In order to cancel this agreement, the subscriber must send a written notice to KansasNet, 531 Ft. Riley Blvd, Manhattan, KS 66502, or via FAX to (785) 776-1633, or send an email from the subscriber’s KansasNet email account to billing@kansas.net. KansasNet will not accept cancellation notices via telephone. KansasNet requires a 20-day notice for all auto-debit cancellations. Please fill out and return the cancellation form 20-days prior to the first day of the next activation period (1st day of the next service month). Notices to cancel services received later than 20-days prior to the first day of the next activation period (next service month) will be subject to a \$3.00 processing fee. In addition to the fee above, your account will incur an additional \$4.00 processing fee if a refund is to be given for the next activation period for which charges to your account may have already been invoiced or processed. Applicable taxes may apply to any processing fees described above.

There are NO REFUNDS to subscribers who provide notice to cancel services for a current activation period, in which services have already been utilized by the subscriber during that activation period. The current account period will continue, but we will cease billing and charging you for future periods. If you would like to know your discontinuation date, please state so when canceling. Our Billing Department will notify you of this information by email only.

There will be a \$20.00 service charge in addition to any fees by your bank may make on drafts returned unpaid. Any check returned unpaid will immediately terminate your access to KansasNet Internet Services.

I, the undersigned, understand that I may terminate this agreement by giving notice to the company, and that cancellation notice must be received by KansasNet no less than 20-days prior to the first day of the next activation period (service month) in order to avoid processing fees described above. I may do this at any time in writing, but must allow a reasonable amount of time after receipt for the company to act upon it. I also understand that additional service charges may apply if payment is returned due to insufficient funds.

APPLICANTS SIGNATURE

DATE

X _____

[Attach Check or Deposit Slip Here]