

Pacific Bell Inc. 8 The Green Ste A Dover, DE 19901

Form Remittance: billcenter@pacificbel	II.com
Date:	
I,account listed below each month for the	, authorize Pacific Bell, Inc. to charge my banking current statement amount billed by Pacific Bell Inc for
communications services and products.	
My account information is as follows:	
Customer's Name (as it appears on Ban	k account):
Bank Name:	
Bank Account Type: □ Checking □ Savin	-
Bank ABA Routing Number:	
Bank Account Number:	
This payment authorization is valid and to notify Pacific Bell Inc of its cancellation but billcenter@pacificbell.com	o remain in effect unless I by sending written notice via email to:
Customer Name Printed:	Date:
Customer Signature:	