



## BUSINESS PRE-AUTHORIZED DEPOSIT/DEBIT AGREEMENT

You authorize Plastiq Canada Inc. (Plastiq) and the financial institution designated (or any other financial institution you may authorize at any time by providing Plastiq with alternate account information), for business services, to:

1. make deposits in the account as per your instructions (such as, but not limited to, telephone instructions, or the placing of an order for goods or services) for regular recurring payments and/or one-time payments,
2. debit the account for refund amounts authorized by you and shown as credits in Plastiq Canada Inc's system from time to time.
3. debit the account at any time for any other amount you may authorize in writing, by telephone or otherwise without further notice; and
4. re-present a debit for any debit that is dishonoured, without notice.

This authority is to remain in effect until Plastiq has received written notification from you of its change or termination. This notification must be received at least ten (10) business days before the next debit is scheduled at the address provided above. You may obtain a sample cancellation form, or more information on your right to cancel a PAD Agreement at your financial institution or by visiting [www.cdnpay.ca](http://www.cdnpay.ca).

Plastiq may assign this authorization with 10 days notice to you and may cancel this agreement with 25 days notice to you, or cancel it without notice if the financial institution refuses the debits for any reason.

You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement. To obtain a form for a Reimbursement Claim, or for more information on your recourse rights, you may contact your financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca)

### Client Information

Merchant: CHESTER VALLEY GOLF CLUB  
Address: 430 SWEDES FORD RD  
MALVERN, PA 19355

Telephone: 610-647-4007  
Signature: [Signature] Date: 2-11-15  
Printed Name: JAMES A. ANGELUCCI  
Title: CONTROLLER

### Financial Institution Information

Bank Name: WELLS FARGO  
Address: 17 LANCASTER AVE., MALVERN, PA 19355  
Transit #: 031000503 Account #: 2000460469438

PLEASE ATTACH A CHEQUE MARKED "VOID"



26636

CHESTER VALLEY GOLF CLUB

26636

CHESTER VALLEY GOLF CLUB

Detach Before Depositing

THIS CHECK IS PROTECTED BY A VOID PANTOGRAPH, MICROPRINT SIGNATURE LINE AND A HEAT SENSITIVE PADLOCK ICON. ADDITIONAL SECURITY FEATURES ARE LISTED ON BACK.



1923

**CHESTER VALLEY GOLF CLUB**

430 SWEDESFORD ROAD  
MALVERN, PA 19355



3-5/310

VOID AFTER 180 DAYS

No. 26636

PAY TO THE  
ORDER OF:

PAY  
EXACTLY

26636

DATE	CHECK NO.	AMOUNT
		\$

*[Signature]*

AUTHORIZED SIGNATURE



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