

Pre-Authorized Payment Information

Hello Everyone,

Tired of all the accounting work that needs to be done? At Produce Express, we are always looking to help schools become more efficient; making your lives easier when it comes to paying bills. Several schools have already switched to "DEFT", which is direct electronic funds transfer. This is a secure and simple payment option which reduces the amount of accounting work for the school. We've put together some questions and answers to tell you more about it.



What are DEFT payments?

DEFT payments are payments where funds are withdrawn directly from the school's bank account. The set-up and processing is initiated by Produce Express' accounting team. A simple form is required to be filled out by the school. Please see attached for reference to this form.



When are funds withdrawn?

Payments are scheduled on a bi-monthly basis, on the 1st of the month and the 16th of the month.



What are payments based on?

On the 1st of the month, invoices from the prior month dated the 16th through to the end of the month are processed. On the 16th of the month, invoices dated from the 1st of the current month through to the 15th are processed. Note, if the 1st or the 16th fall on a weekend or holiday, payment is processed the following business day. Receipts are emailed upon completion of withdrawals.

It's that easy!

Should you have any further questions, please contact Janelle in Accounting at 519-539-9333 ext. 4 or by email at: ar@fresherproduce.ca

Thank you for your continued support.



Pre-Authorized Payment Form & Credit Application

Please complete all sections of this form and return to Produce Express. Please email the completed form to **ar@fresherproduce.ca**. Produce Express will only process payment from your bank account if this form is complete and an authorized signature is obtained.

Please note that the information collected on this form is used only for the purpose of payment of your invoices and will not be disclosed to anyone. Please notify us immediately if this information changes.

Pre-authorized debits will be withdrawn from your bank account on a bi-monthly basis, on the 1st and 16th of each month. Please note if these dates fall on a weekend, your withdrawal will take place the following business day.

I (we) would like to be notified of withdrawal by _____ Email ____ No notification needed.

This authorization is to remain in effect until cancelled by notice given in writing. You, the Payor, may revoke your authorization at any time by providing written notice of at least 5 business days. All NSF charges will be subject to a \$50 service fee.

I (we) the account holder(s) authorize Produce Express and my financial institution to debit my bank account, under the terms and conditions agreed to me with Produce Express. I will provide Produce Express with **at least one month's notice** if there are any changes to my bank account and will submit a new Pre-Authorized Payment Form with the updated bank account information. I will notify Produce Express in writing of any changes in the account information or termination of this authorization. I agree that if I revoke this agreement, I am still responsible for providing payment for any outstanding invoices.

Authorized Signature Name Date



Instructions

- 1. Please complete all sections of this form.
- 2. Please return the completed form along with a void cheque to Produce Express
- 3. If you have any questions, please email **ar@fresherproduce.ca** or call **519-539- 9333 ext.4**

PAYOR INFORMATION

Payor Name:							
Payor Address (Street Address	s, PO Box, Apo	urtment Number):					
City/Town:		Province:	rovince: Postal C		Country:		
Business Telephone Number:		Email Address:					
AUTHORIZED SIGNING C	FFICER(S)					
Signature of Authorized Signing Officer:				Date:			
Authorized Officer Name (First & Last Name):				Title:			
PAYOR BANKING INFOR Branch Number:		tution Number:	Δ	.ccount N	umber:		
Name of Financial Institution:							
Branch Address (Street Addre	ss, PO Box, Ap	partment Number):					
City/Town	Prov	Province:			Postal Code:		
PAYEE INFORMATION:							
Payee: Produce Express Inc		Phone Number: 519-539-9333 ext. 4		Email Address: ar@fresherproduce.ca			
Payee Address: 1149 Commerce Way, Woo	dstack ON	N4V 0A2			<u> </u>		

