



Direct Draft Card

If you wish to pay your monthly service by direct draft, please fill out the card at right and return with a voided check. **Remember, you will now be charged a \$2.00 fee for receiving a paper bill. Please avoid this additional charge by signing up for direct draft today!!** Your account will be drafted on or after the 5th of each month. A "test" draft will be activated for the first month to ensure accuracy, therefore, you will receive one more statement for that month to be paid by check or money order. Thereafter, all monthly payments will be direct drafted from the account specified by you.



Is it Flu or Common Cold?

With flu and cold season upon us, do you know how to tell the difference between these two common illnesses? Below are some of the main signs and symptoms to help you determine. If you think you have the flu, contact your doctor immediately. An antiviral medication may help you recover from the flu faster.

Flu

- Symptoms start suddenly
- High fever (over 101 degrees) that lasts 3-4 days

- Dry cough that can become severe
- Prominent headache
- Often severe aches and pains
- Tiredness and weakness that sometimes lasts up to 2 -3 weeks
- Early and noticeable exhaustion

Occasionally will cause a stuffy nose, sneezing and sore throat

Common Cold

- Symptoms start gradually
- Usually does not cause fever

- Hacking cough
- Slight aches and pains
- Mild tiredness
- No noticeable exhaustion

Usually will cause a stuffy nose, sneezing and sore throat.

-www.seniorark.com



Authorization Agreement for Pre-authorized Payments

Company Name: Acadian On Call

I (we) hereby authorize Acadian On Call to initiate debit entries to my (our) Checking account indicated below at the depository named below, hereinafter called DEPOSITORY, to debit the same to such account.

****First month is test month. You will receive a bill.**Please include voided check**

****For the initial debit month, all previous balances will be debited to bring account current.****

Depository Name: _____ Branch: _____

City Routing Number: _____ State: _____ Zip: _____

Account#: _____

This Authorization is to remain in full force and effect until Acadian On Call has received written notification from me (either of us) of its termination in such time and in such manner as to afford Acadian On Call and DEPOSITORY a reasonable opportunity to act on it.

Name(s): _____ ID#: _____

Date: _____ Signed _____

Note: All written debit authorizations MUST provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.