



TELSCO SECURITY SYSTEMS INC.

#102, 8620 JASPER AVENUE
EDMONTON, ALBERTA T5H3S6

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EMAIL: info@Telsco.com
WEBSITE: www.telsco.com

Telsco's Direct Debit Payment Option

To participate in the Direct Debit plan, please sign the authorization below and return it along with a blank cheque marked "VOID" to Telsco at your earliest convenience.

COMPANY: _____

SURNAME: _____ FIRST NAME: _____

ADDRESS: _____ CITY: _____

POSTAL CODE: _____ PHONE NO: _____

I (we) as the account holder(s), authorize Telsco Security Systems Inc. (Telsco) and my financial institution to debit my (our) account, at the branch indicated on the attached "VOID" cheque, under the terms and conditions agreed to by me (us) and Telsco until such time as written notice of cancellation is given by me (us) to Telsco.

I (we) will notify Telsco in writing of any changes to the account information or termination of this authorization.

Payment Specification – An electronic debit in the amount of \$ _____ may be drawn on my account on the 20th of each month beginning _____.

Signature(s) of Account Holder(s)

Date

Signature(s) of Account Holder(s)

Date

ATTACHED VOID CHEQUE