



Company Name: _____

Company Address: _____

Company ID #: _____

I/We, _____, authorize the COMPANY (named above) to initiate credit entries and, if necessary, to initiate any debit entries to correct an erroneous credit entry to my account at the DEPOSITORY (identified below), for the purpose of automatically depositing funds to my account. I acknowledge that the origination of these transactions must comply with the provisions of U.S. law.

Depository Name: First State Bank of Bédias
22201 Highway 90 North
Bédias, TX 77831

Phone: (936) 395-2141

Routing Number: 113109377 [] See attached voided check/draft or deposit slip

Account Number: _____

[] Checking [] Savings [] Money Market [] Other

I/We understand that this authorization replaces any previous authorization and will remain in full force and effect until the COMPANY has received written notification from me of its termination in such time and in such manner as to afford the COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name: _____
(Print Name)

Signature: _____ **Date:** _____