

Quick Oil Company

Budget

Automatic Debit Authorization



AUTHORIZATION AGREEMENT FOR ACH DEBIT PAYMENTS

I (We) _____ hereby authorize GUTHRIE COUNTY STATE BANK (GCSB) to initiate debit entries on the **10th of each month** to my (our) Account at the financial institution (F1) named below, thereby crediting QUICK OIL COMPANY for payment of our monthly budget account.

QUICK OIL COMPANY Customer Number: _____

F1 Name: _____ City: _____
Bank or Financial Institution

Routing Number: _____ Account Number: _____

Account Type: Checking Savings

This authorization is to remain in full force and effect until QUICK OIL COMPANY has received notification from me (or either of us) of its termination in such time and in such manner as to afford QUICK OIL COMPANY and GCSB a reasonable opportunity to act on it. I (we) furthermore authorize GCSB to submit reversals in the event a correcting entry is required. I (we) acknowledge that the ACH transactions to my (our) account must comply with the provisions of U.S. law.

NAME: (print) _____ Date: _____

SIGNATURE: _____

ATTACH VOIDED CHECK