

AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENT
(ACH DEBIT)

I (we) hereby authorize SNOWCREST, INC. hereinafter called COMPANY, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our)

() Checking () Savings account (select one)

indicated below, hereinafter called DEPOSITORY, to credit and/or debit the same such account.

DEPOSITORY (Bank) NAME: _____

BRANCH: _____

CITY: _____ STATE: _____ ZIP: _____

ROUTING NUMBER (9 digits): _____

ACCOUNT NUMBER: _____

This authorization is to remain in full force and effect until COMPANY has received written notice from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable time to act on it.

NAME: _____
(Please print)

SNOWCREST EMAIL: _____

DATE: _____

SIGNED: x _____

NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS SHOULD PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.