

AUTHORIZATION AGREEMENT FOR PRE-ARRANGED PAYMENTS (ACH)

Customer Name	(hereinafter called CUSTOMER)
Title	Date
Legal Business Name	
Address	
FEIN #	Customer Tax ID Number
Customer Fax Number	Email
Mobile Number	Store Number
below and the bank named l same to such account for the	t and credit entries to the checking account indicated below, hereinafter called BANK, to debit or credit the purpose of payment of invoices in accordance with the es, or any other amount due to COMPANY.
Bank Name	Branch
Bank Address	
Bank Contact	Tel
Bank Transit/ABA Number	r
DDA Account Number	
notification from me/either o	n full force & effect until COMPANY has received written of us of its termination in such time and manner as to afford ORY a reasonable opportunity to act on it.
<u>Customer Signature</u>	
A copy of this document will Please attach a voided check	be forwarded to your BANK. or deposit slip for the bank account identified above and return

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