

**AUTHORIZATION AGREEMENT FOR EFT SERVICE
FOR RETAILERS AND DEALERS**

PREAUTHORIZED PAYMENTS

We/I hereby authorize ED STAUB & SONS PETROLEUM, hereinafter called COMPANY, to initiate debit entries to our checking account indicated below and the depository institution named below, hereinafter called DEPOSITORY, to debit the same account, for fuel invoices.

ED STAUB & SONS
PETROLEUM Account Number: *

Payee/Customer Information

Name:

Address:

City, State, ZIP:

Account Number: *

Due Date:

Financial Institution Information

Bank Name: *

Address: *

City, State, ZIP: *

Phone Number: (ex: 541-555-1212) *

Transit/ABA: *

Account #: * Checking Savings

This authority is to remain in full force and effect until COMPANY has received written notification from me or its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Authorized By: *

Date: (ex: 1-1-06 or 1/1/06) *

* - Indicates required fields