



**ELECTRONIC FUND TRANSFER AUTHORIZATION**  
**DEBIT/CREDIT AGREEMENT**

\_\_\_\_\_  
(CUSTOMER NAME)

\_\_\_\_\_  
(PHONE)

\_\_\_\_\_  
(CUSTOMER ADDRESS)

\_\_\_\_\_  
(CITY)

\_\_\_\_\_  
(STATE)

\_\_\_\_\_  
(ZIP)

\_\_\_\_\_  
("Customer") authorizes Foster Blue Water Oil, L.L.C.  
("Company") to initiate debit or credit entries to customer's bank account indicated below and the bank named below:

BANK NAME: \_\_\_\_\_ BRANCH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TRANSIT/ABA NO: \_\_\_\_\_ ACCOUNT NO: \_\_\_\_\_

CHECKING or SAVINGS ACCOUNT: \_\_\_\_\_ BANK TELEPHONE NO: \_\_\_\_\_

This authorization is intended to allow Company to make withdrawals or deposits from or to Customer's bank account for varying amounts for product purchases, and other charges or for reimbursements, payments, or adjustments payable to or by Company.

This authority will remain in effect until the Company receives written notice at P.O. Box 430, Richmond, MI 48062-0430, and Customer's bank receives written notice of termination or of any change of bank account number or bank in such time or in such manner as to afford Company and Bank a reasonable opportunity to act on the notice. Customer assumes responsibility for any erroneous information provided in this authorization. Notice of termination in no way affects debit or credit transactions initiated prior to actual receipt of notice.

The customer will be notified via fax twenty-four hours prior to an EFT settlement.

Please provide your dedicated fax number for settlement notices: \_\_\_\_\_

Or e-mail address: \_\_\_\_\_

Authorized this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
(PRINTED NAME AND TITLE)

**\*\*\*Please attach a copy of a voided check\*\*\***