

AUTHORIZATION AGREEMENT FOR DIRECT DEBIT TRANSACTION

I hereby authorize Anchor Industries, Inc. to initiate Direct Debit entries and any necessary Credit entries for adjustments to my ___ **CHECKING** or ___ **SAVINGS ACCOUNT** (select one) as indicated below. These entries are to be initiated by me through communication with Anchor Industries, Inc.

BANK NAME _____

CITY _____ STATE _____ ZIP _____

TRANSIT/ABA NO. _____ ACCOUNT NO. _____

This authorization is to remain in full force and effect until Anchor Industries, Inc. has received written notification from me of its termination and in such manner as to afford Anchor Industries, Inc. and the Bank a reasonable opportunity to act on it.

CUSTOMER NAME (PLEASE PRINT) _____

DATE _____

SIGNED _____