

to the above bank.

## **Coastal Energy Corporation**

Attention: Sherry Venneman PO Box 218 • 1 Coastal Drive Willow Springs, MO 65793 Ph. (417) 469-2777 Fax (417) 469-4903 Electronic Funds Transfer Authorization Agreement

Business Name:		
Business Address:		
Phone:	Fax: _	
Email:		
Accounts Payable Contact	(Please type or print):	
	t described below, and does further a	tiate electronic funds transfer debit and credit entries to authorize the financial institution described below to debit
Name of Bank:	Accou	nt Number:
Bank Address:	Bank (	Contact:
	Bank A	ABA#:
Bank Contact Phone:		
•		10) days written notice by either Customer or Coastal t debit entries initiated prior to actual receipt of notice.
Coastal Energy Corporatio		in such form and at such time as may be established by nd conditions of trade credit otherwise established in in effect.
Dated this	day of	, 2
Authorized Signature:		Title:
Print Name:		_

**Return Completed Form To:** 

This authorized agreement is established between Customer and Coastal Energy Corporation with respect to currently prevailing trade credit terms. Coastal Energy Corporation may change the applicable trade credit terms without notice

Coastal Energy Corporation PO Box 218 Willow Springs, MO 65793

Email: sherry@coastal-fmc.com Confidential Fax: 1 (417) 469-4903