

to the above bank.

United Distributing Company

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):
	ributing Company to initiate electronic funds transfer debit and credit entries to elow, and does further authorize the financial institution described below to debit account.
Name of Bank:	Account Number:
Bank Address:	Bank Contact:
	Bank ABA#:
Bank Contact Phone:	
	It terminated upon ten (10) days written notice by either Customer or United ation shall in no way affect debit entries initiated prior to actual receipt of notice.
	of invoices and/or debits in such form and at such time as may be established by terms and other terms and conditions of trade credit otherwise established ing Company shall remain in effect.
Dated this	_day of
Authorized Signature:	Title:
Print Name:	

Return Completed Form To:

This authorized agreement is established between Customer and United Distributing Company with respect to currently prevailing trade credit terms. United Distributing Company may change the applicable trade credit terms without notice

United Distributing Company PO Box 218 Willow Springs, MO 65793

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