
**AUTOMATED CLEARING HOUSE SERVICE AUTHORIZATION AGREEMENT
“ACH”**

I (we) hereby authorize Sydri Operating LLC, hereinafter called “COMPANY” to initiate ACH entries to my (our) ___ Checking ___ Savings account (select one) indicated below and the financial institution named below, hereinafter called “Bank”, to credit the same to such account. **Please check with your Bank and verify that the ABA No. and the Routing Number are the same, as some Banks use a different ABA No. for ACH.**

BANK NAME _____ BRANCH NAME _____
CITY _____ STATE _____ ZIP _____
ABA No. for ACH _____ ACCOUNT No. _____

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

NAME(S) _____ SS#/TAX ID _____
(Please Print)

SIGNATURE _____ DATE _____

TITLE _____ PHONE #: _____

ATTACH VOIDED CHECK