

**ELECTRONIC FUNDS TRANSFER AUTHORIZATION AGREEMENT CUSTOMER
INFORMATION**

CUSTOMER NAME ("CUSTOMER")			FEDERAL TAX ID NUMBER	
ADDRESS		CITY	STATE	ZIP
ACCOUNTING / EFT CONTACT NAME		TELEPHONE	EFT FAX NUMBER	
EMAIL ADDRESS			EFFECTIVE DATE	

Above named "Customer" hereby authorizes Better Day Energy Company to originate Automated Clearing House electronic funds transfer credit/debit entries to "Customer's" account, indicated below, and hereby authorize the Depository institution, named below, hereinafter called "Financial Institution" to accept and credit or debit the amount of such entries to the "Customer's" account.

BANKING INFORMATION

BANK NAME			NAME AS LISTED ON BANK ACCOUNT IF DIFFERENT THAN ABOVE	
ADDRESS			BANK ROUTING NUMBER	CUSTOMER ACCOUNT NUMBER
CITY	STATE	ZIP	PHONE	FAX
BANK CONTACT NAME			BANK AUTHORIZED SIGNATURE (IF REQUIRED BY BANK)	

"Customer" shall be responsible for any loss which may arise by reason of any error, mistake or fraud regarding the information provided in this agreement, except losses incurred as a result of any error, mistake or fraud of Better Day Energy, its officers, directors, employees or agents. "Customer" may change any portion of the information provided under Bank Information by giving at least fifteen (15) days written notice to Better Day Energy at the address shown below.

This authority shall remain in effect until fifteen (15) days after Financial Institution, at address shown above, and Better Day Energy, at address shown below, have received written cancellation from "Customer". Notice of cancellation shall in no way affect credit or debit entries initiated prior to actual receipt and processing of notice. "Customer" understands that Better Day Energy may suspend this Agreement at any time.

"Customer" understands that the Automated Clearing House electronic funds transfer debit entry will only be accepted by Financial Institution if sufficient funds are available in "Customer's" account listed above and "Customer" agrees separately with Better Day Energy to maintain sufficient funds at all times in this account.

By signing this Authorization, "Customer" in no way relinquishes any legal right to dispute any item.

Customer Authorization:

Authorized Name _____
Authorized Signature _____
Title _____
Date _____