## **Authorization Agreement**

For Automated Clearing House Transactions (ACH Debits)

ABA No. ("Routing No.")

| ACH Authorization  |   |  |  |  |
|--|---|--|--|--|
|  |   |  |  |  |
| Individual / Company Name  | Individual SSN / Company EIN  |  |  |  |
|  |   |  |  |  |
| I/We hereby authorize GRENKE Leasing ILLLC hereinafter called Grenke, to initiate debit entr | issandtainitiata ifnassaaru araditantriasandadi.ustmantafaranudahitantriasinarrar |  |  |  |
|  |   |  |  |  |
| to my/our account indicated below and the depository named below, hereinafter called deposit | tory, todebit and/orcredit thesameto suchaccount.                                 |  |  |  |
|  |   |  |  |  |
| Bank Information   |   |  |  |  |
| Bank information   |   |  |  |  |
|  |   |  |  |  |
| Depository Name (Bank Name)  |   |  |  |  |
|  |   |  |  |  |
|  |   |  |  |  |
| ZIP  |   |  |  |  |
|  |   |  |  |  |
| City   |   |  |  |  |
| Oity   |   |  |  |  |
|  |   |  |  |  |
| State  |   |  |  |  |
|  | i   |  |  |  |

Application No.

| 4 | This authority is to remain in full force and effect until Grenke has received written notification from me (or either of us) of its termination in such time and in such manner |
|---|--|
|   | as to offerd Cranka and denositary a reasonable enpertunity to act on it   |

| Please  |  |
|---------|--|
| fill-in |  |

| Printed name(s) and title(s) | <b>V</b>     |
|------------------------------|--------------|
|                              | X            |
| Date                         | Signature(s) |