



AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS

I (we) hereby authorize PANHANDLE ESCROW COMPANY, INC., hereinafter referred to as PEC, to initiate credit entries to my (our)

(please check only one) _____ Checking Account _____ Savings Account

at the financial institution named below:

BANK/CREDIT UNION NAME: _____

CITY: _____ STATE: _____ ZIP CODE: _____

ROUTING NO: _____ ACCOUNT NO: _____

IMPORTANT: PLEASE ATTACH A CHECK MARKED "VOID" FOR PROPER SET-UP.

This authorization shall remain in full force and effect until PEC has received written notification of its termination. I (we) understand that written, thirty (30) days notice to PEC is required if I (we) change banks and/or accounts.

Seller Name (Please print or type & sign below). Social Security No.

X _____

Seller Name (Please print or type & sign below). Social Security No.

X _____

Daytime Phone Date Signed

PEC hereby acknowledges receipt of the foregoing agreement, and agrees to hold and dispose of the same in accordance with the instructions and upon the terms and conditions above set forth.

PANHANDLE ESCROW COMPANY, INC. **DATE RECEIVED** _____

By: _____ **Escrow Account #** _____
 Authorized Escrow Officer