

AUTHORIZATION AGREEMENT FOR INVOICE PAYMENTS

Natural Direct LLC, 1207 Bilter Rd. Ste. 100, Aurora, IL 60502

I hereby authorize, on behalf of the COMPANY listed below, Natural Direct LLC to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to the account indicated below. I further authorize the depository named below (the "DEPOSITORY") to debit and/or credit the same to such account.

Checking Savings account (select one)

DEPOSITORY (Bank) NAME: _____

CITY: _____ STATE: _____ ZIP: _____

BANK ROUTING NO.: _____

ACCOUNT NO.: _____



This authority is to remain in full force and effect until Natural Direct LLC has received written notification from COMPANY or its termination in such time and in such manner as to afford Natural Direct LLC reasonable opportunity to act on it. COMPANY has the right to stop payment of a debit entry by notification to DEPOSITORY as such time (at least five (5) business days) as to afford DEPOSITORY a reasonable opportunity to act on it prior to charging such account. After such account has been charged, COMPANY has the right to have the amount of an erroneous debit immediately credited to my account by DEPOSITORY, provided COMPANY send written notice of such debit entry in error to DEPOSITORY within fifteen (15) days following issuance of the account statement or sixty (60) days after posting, whichever occurs first.

COMPANY: _____

DBA: _____

ADDRESS: _____

DATE: _____

SIGNED: _____

PRINTED: _____

TITLE: _____