AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Company Name: Hub City Ventures, LLC

I hereby authorize Hub City Ventures, LLC, hereinafter called COMPANY, to initiate debit entries to my (our) Checking Account indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to credit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository Bank Name:	
Account Title (name on account):	
ABA Routing Number:	
Account Number:	
	e and effect until COMPANY has received written termination in such time and in such manner as to reasonable opportunity to act on it.
Name	(Please Print)
Signature	Date
NOTE WINDERS DEDUT AUTHORIZA	

NOTE: WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

Please return a completed, signed copy of this agreement with a voided check to info@hubcityventures.com OR mail to:

Hub City Ventures, LLC 727 N Sandhill Tahoka, TX 79373