

## **ACH DEBIT AUTHORIZATION FORM**

IF THIS IS FOR A SINGLE AUTHORIZATION, PLEASE SPECIFY THE AMOUNT AUTHORIZED AND SETTLEMENT DATE REQUESTED (PLEASE LEAVE THIS PORTION BLANK IF THIS IS FOR A RECURRING OR ONGOING AUTHORIZATION):

AMOUNT: \$			
	SINGLE TRAN	SACTION  RECUR	RING TRANSACTIONS
TYPE OF ACCOUNT	CHECKING	SAVINGS	
ACCOUNT NAME:			
BANK NAME:			
ADDRESS:			
ROUTING #:			
ACCOUNT #:			
EMAIL:			
BANK OF SANTA MARIA (	AN AGENT FOR TROJAN F		DRAWN ON MY ACCOUNT BY COMMUNITY N PETROLEUM, INC. AS THE PAYEE, PROVIDED IPON PRESENTATION.
CHOSEN ABOVE FOR VAR	YING AMOUNTS. IT IS AC	KNOWLEDGED AND ACCEPTED	GE DEBITS TO THIS ACCOUNT AT INTERVALS THAT TROJAN PETROLEUM, INC. MAY DEBIT AN OBLIGATION TO TROJAN PETROLEUM, INC.
WILL BE SENT VIA EMAIL RIGHT TO REVIEW INVOICE	UPON REQUEST. THERE N	WILL BE A \$100 CHARGE FOR AN ADE IS RELINQUISHED WITH TH	E PRIOR TO INVOICE DUE DATE. A DRAFT NOTICE NY DRAFT RETURNED UNPAID BY THE BANK. THE IIS FORM. IN THE EVENT A DEBIT IS SHOWN TO CT SUCH ERROR IMMEDIATELY.
THIS AUTHORIZATION IS RECEIVED WRITTEN NOTI	FICATION FROM THE CUS	STOMER OF ITS TERMINATION,	PETROLEUM, INC. AND THE BANK HAVE IN SUCH TIME TO ALLOW TROJAN PETROLEUM,
DATE	CL	JSTOMER NAME	AUTHORIZED SIGNATURE

PLEASE ATTACH A VOIDED CHECK FOR THE ACCOUNT REFERENCED ABOVE