

Authorization Agreement for Direct Debits

Winterhaven Water &Development
Company

86-0117572
Company ID

I (we) hereby authorize Winterhaven Water &Development, herein after called COMPANY, to initiate DEBIT entries and/or correction entries to our:

Checking account Savings account

at the depository named below, herein after called DEPOSITORY, to credit the same to such account.

Depository Name

Branch

City

State

Bank Transit/ABA number

Account Number

This authorization is to remain in full force until COMPANY has received written notification from me (or either of us) of its termination in such manner as to afford COMPANY and DEPOSITORY reasonable opportunity to act upon it.

Name(s)

Winterhaven Account Number(s)

Phone number

Signature (s)

Date