

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENT (DEBITS)

I (we) authorize **COLSON SERVICES CORP.** (Company) to initiate debit entries payable to the account (described below) and bank named below to debit the amounts of such entries to the account:

(X) Periodically as such amounts become due, without further authorization (standing authorization)

| | | |
|-----------|--------|-----|
| Bank Name | Branch | |
| Address | | |
| City | State | Zip |

Account: Checking Savings Other: _____

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Transit Routing Number <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td> </tr> </table> | | | | | | | | | | | Transit ABA Check Digit <table border="1" style="width:30px; height: 20px; margin: 0 auto; border-collapse: collapse;"> <tr> <td style="width:100%;"></td> </tr> </table> Designated by Federal Reserve | | Account Number Information <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td> </tr> </table> | | | | | | | | | | | | | | | |
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NOTE: When completing account number information, insert a hyphen(-) for each Dash Cue Symbol (-) contained in the field, and insert a number sign (#) for each "On Us" Cue Symbol (I')

| | | | |
|--------------|----------|--------|--------|
| DEPOSITOR(S) | Name (s) | | |
| | Date | Signed | Signed |

FOR CDC USE ONLY

CDC Number: 09-024 _____

SBA Loan Number: _____

Borrower Name: _____