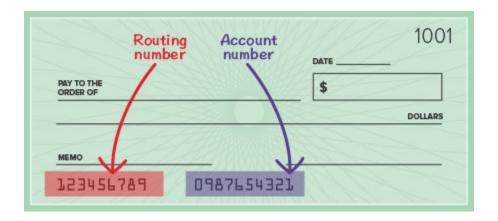
Authorization Agreement For Automated Clearing House Transactions (ACH Credits)

ACH Authorization			
Company			
Name:			

I (we) hereby authorize the Toledo Regional Chamber of Commerce, hereinafter called COMPANY/INDIVIDUAL, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our)

Checking Savings account (select one) indicated below and the depository named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

Bank Information			
DEPOSITORY NAME:		Branch: (if applicable)	
City, State, ZIP:			
Transit/ABA No: ("Routing #")		Account #:	
RE-ENTER Transit/ABA No: ("Routing #")		REETNTER Account #:	



This authority is to remain in full force and effect until COMPANY/INDIVIDUAL has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY/INDIVIDUAL and DEPOSITORY a reasonable opportunity to act on it.

Name:	
Date:	