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I authorize Owens Distributors Inc. to initiate either an electronic debit or to create and process a demand draft against my bank account on or after [Month / Day / Year]_____ for the amount of [Amount]_____. I acknowledge that the origination of ACH transactions to my account must comply with the provisioning of United States law. My account information is as follows:

Bank ABA Number [Customer's Routing Number]

Bank Account Number [Customer's Account Number]

Bank Account Type: [Checking / Savings / Business Checking]

[Customer Signature]

[Customer Printed Name]

[Date Signed]