



ACH AUTHORIZATION RELEASE

_____ (“Customer”) authorizes Columbus Data Services, (“CDS”) to initiate ACH transfer entries and to debit and/or credit the account identified herein for all charges and services. CDS shall have the right to credit or debit account, on behalf of the Customer, for settlement of transactions, settlement error corrections, transaction adjustments and any amounts or fees due CDS by Customer. Customer agrees to keep account funded to the extent needed to support transaction adjustments. All shortages and adjustments are the full responsibility of the Customer. Customer agrees to comply with all electronic fund transfer regulations, requirements and rules. This Authorization shall remain in effect unless cancelled by Customer by providing written notice of cancellation to CDS and after such time as all settlements and adjustments have been processed /cleared through the account. Any debits and credits pursuant to this Authorization will be affected through the Federal Reserve System automated clearing house (ACH) system.

SETTLEMENT DISPUTES

Customer shall audit and balance the terminal(s) and/or accounts indicated below and shall notify CDS of any disputed or missing item(s). Customer must notify CDS within 30 days of the date of the disputed or missing item(s). If CDS determines that the disputed or missing item was the result of an error by CDS, CDS shall correct the error; however, CDS shall not be liable for any recovery of any amounts if CDS was not notified of the error within the 30 day notification period. CDS will use commercially reasonable efforts to recover any amounts over 30 days from the disputed date. The undersigned represents and warrants to CDS that the person executing the Authorization is an authorized signatory on the Account referenced below and all information regarding the Account and the Account Holder is true and correct.

Signature: _____ Date: _____

Print Name and Title: _____

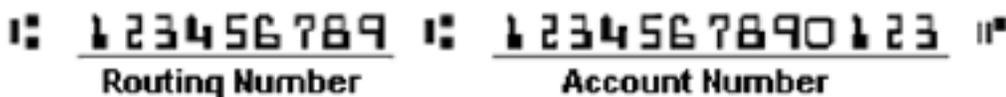
ACCOUNT INFORMATION

This form **MUST** be accompanied by a pre-printed voided check or a letter from the Bank to which the funds are settling referencing the Customer’s name, routing number and account number. The information on the check or bank form must match the information provided below. Forms submitted without all fields on this document completed will not be processed.

Routing/Transit Number (9 digits): _____

Account Number: _____

These numbers are printed on the bottom of your check. See example below:



CDS OFFICE USE ONLY			
Date Received		Entered By	
Date Entered		Date Scanned	