## AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS (ACH CREDITS)

Company Name: Marie Hansen Properties, Inc.	ID Number: 1	990269514
I (we) hereby authorize <u>Marie Hansen Properties</u> , Inc. Checking Account / Savings Account (select one) indicated below at the deposit and to credit the same to such account. I (we) acknowledge that the origination of 0 U.S. law.		
Depository Name:	Branch:	
City: Sta	ate:	Zip:
Routing Number:		
Account Number:		
This authorization is to remain in full force and effect until COMPANY has receive time and in such manner as to afford COMPANY and DEPOSITORY a reasonal		
Name(s):ID	Number:	
(Please Print)		
Date:Signature:		

NOTE: CREDIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

ATTACH VOIDED	CHECK HERE	(REQUIRED)
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WOULD YOU PR	EFER ON LINE STATEMEN	TS	
PLEASE	CHECK PREFERENCE	YES NO	