

BANK DRAFT AUTHORIZATION

I (we) hereby authorize Cardinal Bakery Inc., hereinafter called COMPANY, to initiate bank drafts to my (our) Checking Account indicated below, at the depository Financial Institution named below, and to debit the same from such account. I (we) acknowledge that the authority will remain in effect until I have (or either of us) cancelled it in writing and that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Bank Name: _____ City _____ State _____ Zip _____

Type of bank account _____

Name (as it appears on account): _____

Routing number: _____

Account number: _____

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

Name of Authorized signer (s) _____

Contact number _____

Signature _____

Date (mm/dd/yyyy) _____

***** PLEASE ATTACH VOIDED CHECK *****