



AUTOMATIC PAYMENT AUTHORIZATION

I (we) hereby authorize McMahon Oil to initiate debit entries to my (our) account at the financial institution listed below. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. laws and regulations.

Customer Name:	
Bank Name:	
Bank Address:	
Bank City/State/Zip:	
Routing Number:	
Account Number:	
Account Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
Amount to Debit:	<i>INVOICE TOTAL, LESS PROMPT PAY DISCOUNT</i>
Date to Debit:	<i>SEVEN (7) DAYS AFTER DELIVERY OF FUEL</i>

I (we) understand that should the regularly scheduled debit date fall on a weekend or federal holiday, the debit shall occur on the following banking date.

This authorization is to remain in full force and effect until McMahon Oil has received written notification from me (or us) of its termination in such a time and manner as to afford McMahon Oil and the financial institution a reasonable time to act upon it.

Name:	
Signature:	
Date:	

Please include a voided check or financial institution account verification letter with this form.

Note: Written debit authorization must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.