

ACH PREAUTHORIZATION FORM



"Your Discount Tobacco Source"

Marshall IGA
 1010 McHenry Ave
 Woodstock, IL 60098
 Phone:(815)334-8505
 Fax:(815)334-8508

The undersigned direct buying customer authorizes (1) Harvard Distributing to originate debit/credit entries by EFT to the direct buying customer's bank account, indicated below, and (2) the depository institution named below, (the Bank), to accept and to debit/credit the amount of such entries to the direct buying customers account.

DEBIT/CREDIT ENTRIES WILL BE INITIATED BY THE CORPORATION THROUGH HOME STATE BANK
 ELECTRONIC FUNDS WILL BE PAYABLE THROUGH:
 HOME STATE BANK FOR CREDIT/DEBIT TO MARSHALL IGA INC. DBA HARVARD DISTRIBUTING.

CREDIT ENTRIES WILL RESULT IN DEPOSITS TO DIRECT CUSTOMERS ACCOUNT SPECIFIED BELOW

BANK NAME	TELEPHONE
ADDRESS	FAX
CITY STATE	ZIP CODE
BANK ACCOUNT NUMBER	BANK ABA NUMBER

Cancelation of the authority shall occur (30) days after the corporation and customer's bank each have received written notification from the direct buying customer of termination of such authority. The direct buying customer understands that drafts of transfer requests will only be honored if sufficient funds are available in the direct buying customer's pre-designated bank account. The undersigned understands also that this agreement will become effective as soon as necessary banking network pre-authorizations are certified and operational.

CUSTOMER NAME AS SHOWN ON BANK ACCOUNT	CUSTOMER NUMBER
ADDRESS (CITY, STATE, ZIP)	TELEPHONE
CUSTOMER CONTACT (PRINT)	FAX
CUSTOMER CONTACT (SIGNATURE)	DATE
EFT AUTHORIZATION (SIGNATURE)	DATE

PLEASE INCLUDE A COPY OF A VOIDED CHECK