

LONE ROCK INC., DBA - YOUR PROGRAM PARTNER PAYMENT AGREEMENT ACH AUTHORIZATION

AUTOMATIC PAYMENT PLAN. You, the print event advertiser, authorize and request Lone Rock Inc. DBA, Your Program Partner to debit or otherwise withdraw (via ACH system, electronic checks, wires, or otherwise) the Scheduled Business Day payment amounts from the below designated account on each Scheduled Business Day until we have received the entire payment amount under the agreement. You agree that, except to the extent prohibited by applicable law, you will not revoke this authorization and instruction without our prior written consent. In addition you will not close the designated without prior written notice to us, and any such notice, and such notice will include authorization to debit or otherwise (via the ACH system, electronic checks, wires, or otherwise) the Business Day payment amounts from the new bank account you have opened. You understand and agree that the agreement allows us to access any Designated Accounts.

In Addition, you agree to pay us a fee of \$30 if such payment ACH debit is returned, rejected, or dishonored by your financial institution. Upon notice of the ACH return, rejection, or dishonored payment Your Program Partner will immediately resume payment ACH schedule as per the terms of the agreement.

PAYMENT SCHEDULE	_		AMOUNT DUE:		
DATE:	AMOUNT DUE:		DATE:	AMOUNT DUE:	
DATE:	AMOUNT DUE:		DATE:	AMOUNT DUE:	
DATE:	AMOUNT DUE:		DATE:	AMOUNT DUE:	
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DATE:	AMOUNT DUE:		DATE:	AMOUNT DUE:	
DATE:	AMOUNT DUE:		DATE:	AMOUNT DUE:	
CLIENT INFORMATION	<u> </u>				
NAME:		_REFERENCE:			
ADDRESS:		CITY:		STATE: ZIP CODE:	
AUTHORIZED BY:		EMAIL:		DATE:	
FINANCIAL INFORMATION			BANK ACH	CREDIT CARD ACH	
BANK/CREDIT CARD NAME:					
BANK ACCOUNT NUMBER:			CREDIT CARD NUMBER:		
BANK ROUTING NUMBER:			CREDIT CARD EXP. DATE		
			CVC:		