EXHIBIT C Account Authorization Form



debit account on behalf of the Customer, any amounts or fees due ASAI by Custo	ccount provided below for all Proce for settlement of transactions, set	•	the right to credit or
Customer agrees to keep account funde	d to the extent needed to reasonal	oly support transaction adjustme	nts.
All shortages and adjustments are the fu transfer regulations, requirements and ru	•	customer agrees to comply with a	all electronic fund
This authorization shall remain in effect usuch time as all settlements and adjustment but not be limited to Customer invoices, claims.	ents have been processed and cle	eared through the account. Adjus	stments shall include
Any debits and credits pursuant to this a house (ACH) system.	uthorization will be effected throug	h the Federal Reserve System a	automated clearing
Business Name as it Appears on A	Account:		
Business Name as it Appears on A	Account:Routing #	Account #	Type C/S

Please Fax or Email completed form and the supporting Voided Check or Bank executed account letter directly to ASAI

Fax: (818) 957-5482 Email: carrie@asaiatm.com

All **Exhibit C** forms must be signed by the Account Holder.

For questions concerning the completion or use of this form, please contact Carrie @ (818) 957-5471 Ext.107