



One-time check authorization

I authorize AMBER WAVES to initiate either an electronic debit or to create and process a demand draft against my bank account on or after date on check below for the amount of listed on Check Number ____ I acknowledge that the origination of ACH transactions to my account must comply with the provisioning of United States law. My account information is as follows:

Bank Information (Tape Check Below)

Customer Signature _____

Customer Printed Name _____

Date Signed _____