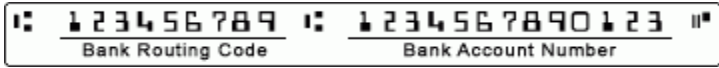
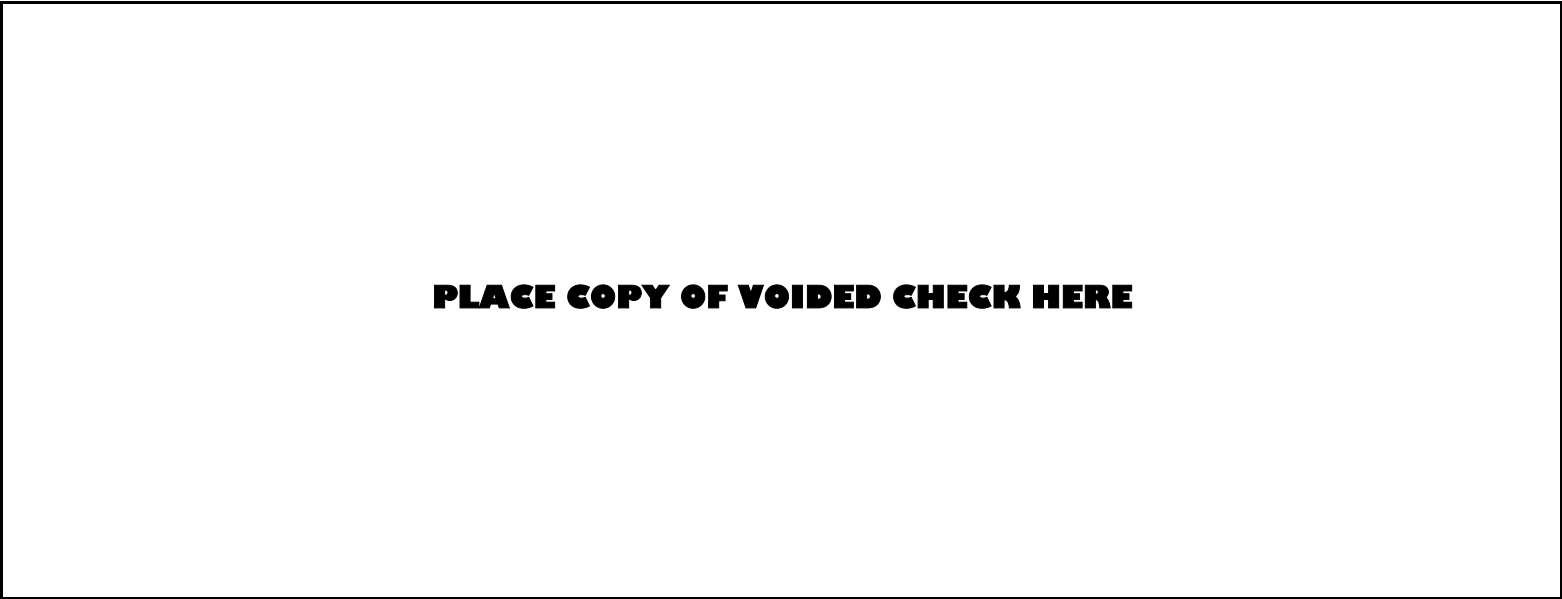


Bazco Enterprises, Inc.
 30825 26 Mile Rd., New Haven, MI 48048
 Phone: (586) 749-7444, Fax : (586) 749-8444

EFT AUTHORIZATION

DATE RECEIVED:

Thank you for your interest in Bazco Enterprises, Inc. We appreciate the opportunity to be of service to you. To help us better understand your needs and service your account, the following information is needed. Please take the time to completely fill-out this section, so that Bazco Enterprises, Inc. can meet all of your needs. CUSTOMER hereby authorizes Bazco Enterprises, Inc., hereinafter called COMPANY, to initiate debit and credit entries to the checking account indicated below and the bank named below, hereinafter called BANK, to debit and credit the same to such account for the purposes of payment of product invoices in accordance with the payment terms of the invoice. CUSTOMER has the right to stop payment of a debit entry by notification to the BANK prior to charging account.



BANK INFORMATION	BANK NAME		BRANCH		
	BANK ADDRESS		CITY	STATE	ZIP CODE
	BANK ROUTING NUMBER				
	BANK ACCOUNT NUMBER				
	BANK ACCOUNT TYPE		<input type="checkbox"/> CHECKING	<input type="checkbox"/> SAVINGS	<input type="checkbox"/> OTHER
	VERIFIED	VERIFIED BY	TEST DATE	TESTED BY	

This authority may be terminated upon thirty days written notice of its termination from CUSTOMER to the COMPANY. A copy of this form may be forwarded to your BANK.

CUSTOMER: _____ SIGNED: _____ FEDERAL TAX ID: _____
 TITLE: _____ PRINTED NAME: _____ DATE: _____