



SBA FMLP PROGRAM

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENT (DEBIT)

I (we) authorize BNY Mellon c/o Colson Services Corp. to initiate debit entries from the following account and bank periodically as such amounts become due, without further authorization (standing authorization). Your lending institution will advise you of the monthly payment amount that will be debited from your account.

BANK INFORMATION:

BANK NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TRANSIT ROUTING (ABA) NUMBER: _____

ACCOUNT INFORMATION:

ACCOUNT TYPE: CHECKING SAVINGS; ACCOUNT #: _____

DEPOSITOR(S): _____ ACCOUNT TITLE: _____

SIGNATURE 1: _____ DATE: _____

SIGNATURE 2: _____ DATE: _____

TAX ID NUMBER: _____

SBA 504 LOAN NUMBER: _____

**** PLEASE ATTACH VOIDED CHECK OR DEPOSIT SLIP ****

_____ 19

PAY TO THE ORDER OF _____ \$ _____

DOLLARS

FOR _____

VOID

FOR COLSON SERVICES CORP. INTERNAL USE ONLY:

OC'D BY/DATE: _____