

## **EFT** Authorization

Corporate Office P.O. Box 910550 St. George, UT 84791 Phone (435) 628-4141

I(We) hereby certify the information ser Overland Petroleum to initiate debit and credit entries to my (our) account for business purposes for payment of all obligations determined by Overland a customer to Overland Petroleum, and all obligations determined by Overland Petroleum to me (us) as a customer.	indicated below, which is used solely nd Petroleum to be owing by me (us) as
Customer Name	
Address	
City, State, Zip	
Telephone	Please complete this
Bank Name	form and mail to our
Bank Address	( <del>1</del> 00) 020 2200 Attil.
City, State, Zip	Credit Department
Bank Contact Name	
Bank Telephone	
Bank Account Number	
Customer Routing Number	
I(we) further certify that I(we) have contacted and authorized the above na credit entries from Overland Petroleum. This authority shall remain in full for Petroleum and the above named bank have received written notification from time and in such manner as to afford Overland Petroleum and the bank resunderstand that this E.F.T. service is governed by the rules of the Automat Overland Petroleum can terminate or modify is at any time.	orce and effect until Overland om me (us) of its termination in such asonable opportunity to act on it. I(we)
Dated Signed	