



ACH electronic payments

(For Dividends & Master Notes)

PLEASE PRINT LEGIBLY

CLI Capital
905 S. Polk St, Suite 300
Amarillo, TX 79101
Fax: 806-318-2425
Phone: 806-358-3667
shareholder.info@clicapital.com

1. Complete the authorization below.
2. Attach a voided check.
3. Send both the authorization and voided check back to us either by mail, fax or scanned email to the address at the left.

Bank Account Information

Name of Bank _____
City _____ State _____ Zip _____
Routing/ABA # _____
Account # _____

Name on bank account _____
Account Type Checking Savings

CLI Account Information

Name _____
Title of CLI account _____
Address _____
City _____ State _____ Zip _____
e-mail address _____
Account # _____ Phone _____

Apply to all related accounts No Yes

Comments _____

Authorization

- I hereby authorize CLI Capital to make periodic deposits of dividends or deposits and withdrawals regarding customer master note accounts to the indicated bank account.
- I agree this is a continuing authorization.
- I agree to notify CLI Capital in writing of any changes in my account information or termination of this authorization 30 days prior to the next scheduled deposit to the account.
- I guarantee and warrant that I am the legal duly authorized check signer on the above account and that I am legally authorized to enter into this agreement with CLI Capital.

Signature of
account
owner _____ Date _____
Printed
name _____