



721 S State St, Aberdeen, SD 57401  
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**AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS**

INDIVIDUAL NAME(S): \_\_\_\_\_ SS#: \_\_\_\_\_

I (WE) hereby authorize **North Star Energy LLC**, hereafter called COMPANY, to initiate credit and/or debit entries to my (our)  Checking  Savings account (select one) indicated below and the depository named below, hereinafter called BANK, to debit and/or credit same to such account. If necessary, to initiate an adjustment entry for any entry processed in error.

BANK NAME: \_\_\_\_\_ BRANCH: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TRANSIT/ABA NO. \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

This authority is to remain in full force and effect until COMPANY and BANK has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and BANK a reasonable opportunity to act on it.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

NOTIFICATION METHOD  Fax  Email (select one)

Fax # / Email address: \_\_\_\_\_

*RETURN FORM TO: Fax No. (605) 225-6389 or Email: info@nstarenergy.net*

**TAPE VOIDED CHECK HERE:**