

OLICTE OR LOAN NUMBER(S).

Commercial ACH Debit Authorization

This Commercial ACH Debit Authorization (the "Agreement") authorizes FIRST Insurance Funding, A Division of Lake Forest Bank & Trust Company, N.A. ("FIRST"), to initiate recurring ACH debit transactions from Company's bank account identified below (the "Designated Account") and, if necessary, electronically credit the account to correct erroneous debits. Both FIRST and Company agree to be bound by NACHA Operating Rules as they pertain to all ACH transactions initiated by FIRST that credit or debit the Designated Account.

This Agreement constitutes Company's authorization for FIRST to debit the Designated Account on a recurring basis to collect all payments due under the Premium Finance Agreement identified by the Quote or Loan Number below and any subsequent Premium Finance Agreements by and between FIRST and Company (collectively, the "PFA"), including installment payments and any late charges or other fees as shown on Company's billing statement or otherwise authorized under the terms of the PFA, and the Down Payment, if Company elects to make this payment to FIRST by ACH.

Company agrees not to dispute any ACH transactions initiated by FIRST from the Designated Account, provided such transactions correspond to the terms of this Agreement. FIRST will send a notice confirming Company's enrollment in recurring ACH debits once this Agreement has been processed, which may take several business days. Company is responsible for any payments due prior to its receipt of the confirmation notice. This Agreement will remain in effect until Company cancels it in writing as provided below.

QOOTE ON EOAN	Compan	y Information		
Company Name	Compan	y information		
Address				
Phone Number				
Email Address				
	Designated A	ccount Information		
Bank Name				
Transit Routing No. (9 digits)				
Bank Account No.				
Account Type	Checking	Sa	avings	
By signing below, I certify that I am ar Agreement on the Company's behalf. on the Property of the test of the tes	Company understands that this An advance of any changes in its I nectronic transactions, it will have I (NSF), Company understands the charge, as allowed by applicable I may time for any reason, including ms of the PFA. Company certified fees incurred as a result of Colfor ACH transactions. Company as of U.S. law.	Agreement will remain in effect Designated Account information imited time to report and dispute that FIRST may at its discretion aw, for each subsequent debit at but not limited to ACH debits to the state the Designated Account impany's bank rejecting ACH dey acknowledges that the original	until it is canceled in writing, and a n or termination of this Agreement. On e errors. In the case of an ACH debit attempt to process the debit again attempt that is returned NSF. FIRST being returned NSF, and Company is enabled for ACH transactions, an abits or credits as a result of the De- ation of ACH transactions to its De-	agrees to Company it attempt within 30 reserves remains ad agrees esignated esignated
Signature		Date		
Print Name		Title		

PLEASE FAX THIS FORM TO (847) 509-7105 OR EMAIL BANKING@FIRSTINSURANCEFUNDING.COM