



Automatic Payment Authorization

New Transaction Change of Information

Agreement No. Master Loan and Security Agreement No. _____
and all related Loan Schedules now existing or hereinafter
entered into between Borrower and Lender.

Borrower _____

Lender **Wells Fargo Practice Finance,**
a division of Wells Fargo Bank, N.A.
2000 Powell Street, 4th Floor
Emeryville, CA 94608

Instructions:

1. Complete the form
2. Mail or fax the completed form and a copy of a voided check for the account to be debited to:

By Fax:
1-866-851-3120

By Mail:
Wells Fargo Practice Finance
Attn: Client Services
2000 Powell Street, 4th Floor
Emeryville, CA 94608

First Payment Due Date to be Debited: _____

Pursuant to the terms of the above Agreement between Lender and Borrower, the above Borrower hereby authorizes Lender to charge Borrower's bank account each month for the amounts then due under the above referenced Agreement. Lender may initiate such charges until all amounts due under the Agreement are paid in full or until Lender has received from Borrower written notice revoking this authorization. Borrower understands that the amount may vary each month as applicable. Sales and/or Use tax will be added to the payment, if applicable. In addition to such payments, Borrower authorizes Lender to charge its account for any other charges then due to Lender under the terms of the Agreement. Borrower understands that this authorization and the services undertaken by Lender in no way alters or lessens its obligations under the Agreement including those provisions regarding the amount of payments, when payments are due, the application of payments, the assessment of late charges or the determination of delinquencies.

To initiate the automatic payments from a checking account, please attach a voided bank check (not a deposit slip), and complete the section below.

Financial Institution _____

Address _____

Transit Routing No. _____ - _____ - _____ **Branch No.** _____

Account No. _____ This is a **checking** account.

Borrower has the right to stop payment of any debit entry by advance written notice to Lender. Cancellation requests must be received at least 10 days prior to the next debit date. Borrower authorizes Financial Institution to accept and charge any debit entries initiated by Lender to the Borrower's account. Lender has the right to re-initiate a debit entry if the first one in any given month was unsuccessful whether due to insufficient funds or bank error. Borrower agrees that Lender may impose and collect a service charge of \$25 for any entry that is returned due to insufficient funds or as a result of the closure of Borrower's account. This fee will be in addition to any applicable late fee.

Authorized by Account Holder:

Signed _____

By _____

Title _____ **Date** _____

PLEASE NOTE: Your debit entry will be reflected on your statement as a payment to Wells Fargo Bank N.A.

Remember to attach your **Voided Check** as indicated above.