

1064 Great Street Prince George, BC, V2N 2K8 Ph: (250)562-8166

Fax: (250)562-4712 info@jepsonpetro.com

Client Authorization For Automatic Bank Withdrawals (ABW)

TERMS OF AGREEMENT

I hereby authorize **JEPSON PETROLEUM LTD.** to initiate automatic withdrawals for invoice payments from my account at the financial institution named below.

By signing this form, the client permits **JEPSON PETROLEUM LTD.** and the client's financial Institution to debit the client's financial institution account for the monthly balance owing on their **JEPSON PETROLEUM LTD.** statement. **JEPSON PETROLEUM LTD.** will debit the below listed account on the 15th of each month for the total balance owing. The client shall notify **JEPSON PETROLEUM LTD.** within 10 days of any changes in account information.

This agreement will remain in effect until **JEPSON PETROLEUM LTD.** receives a written notice of cancellation from me or my financial institution.

Please fill out the information below and attach a void cheque.

| BANKING INFORMATION | | | |
|--|-----------------------|-------|--|
| Financial Institute Name: | | | |
| Financial Institute Address: | | | |
| Branch / Transit Number: | | | |
| Business Name on Account: | | | |
| Bank Account Number: | | | |
| Account Type: | Checkings □ Savings □ | | |
| SIGNATURE OF APPROVAL | | | |
| Authorized Signature: | | Date: | |
| Print Name: | | | |
| Jepson Petroleum Ltd. Account Number: | | | |
| By signing this form, the client agrees and understands to all provisions stated within. | | | |

Please attach a void cheque and return this form to Jepson Petroleum Ltd.'s Accounts Receivable Department.

Fax: 250-562-4712 Email: melanie@jepsonpetro.com

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