



NMLS COMPANY ID 270929
NMLS LOAN ORIGINATOR LICENSE 274116
PHONE: 503-222-4466 FAX: 503-222-4467
8555 SW APPLE WAY, SUITE 330, PORTLAND, OR 97225

ACH Debit Authorization Agreement

PRE AUTHORIZED PAYMENTS

I (We) hereby authorize TriTalent Funding Group, Inc. to initiate a debit entry(s) to my (our) Checking Account indicated below and the depository institution named below, hereinafter called DEPOSITORY, to debit the same to such account.

I (We) authorize TriTalent Funding Group, Inc. to debit our account noted below for a one-time payment of a documentation fee in the amount of \$595.00, to be debited on _____, 20__.

DEPOSITORY NAME:
BRANCH:
NAME ON ACCOUNT:
CITY, STATE, ZIP:
TRANSIT/ABA NUMBER:
ACCOUNT NUMBER:

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

NAME(S) (PLEASE PRINT):
DATE:
SIGNATURE:
SIGNATURE:

* Please include a voided check for account verification.