

**ALPHA PEST CONTROL, INC.
ACH CREDIT/DEBIT AUTHORIZATION RELEASE**

I (we) hereby authorize Alpha Pest Control, Inc. dba Alpha Ecological, herein after called Company, to initiate debit or credit entries to my (our) account at the financial institution named below, herein after called Depository.

(Depository Name) (Branch)

(City, State, & Zip)

(Routing No.) (Account No.)

The credits and debits pursuant to this agreement will be affected through the Federal Reserve Automated Clearing House System.

Settlement account information. These numbers are located on the bottom of your check as follows:

Ⓜ 1 2 3 4 5 6 7 8 9 Ⓜ 1 2 3 4 5 6 7 8 9 0 1 2 3 Ⓜ
Routing Number Account Number

1. This form **MUST** be accompanied by a preprinted voided check.
2. Return the original form and the voided check to the Company.
Please return to:
Alpha Ecological
Attn: Accounting Department
1200 NE 112th Avenue, Vancouver, WA 98684
Email: deena.boyer-salas@sayfrog.com
T 360-885-4000
F 360-885-4189
3. Retain a copy of this form for your files.

Undersigned represents and warrants to the processor that the person executing this Release is an authorized signatory on the account referenced above and all information regarding the account and the account holder is true and correct. This authority is to remain in full force and effect until Company 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 Depository a reasonable opportunity to act on it. To revoke the authorization, I must send written notification to revoke the authorization to the Company at the physical address or email address listed above.

(Account Owner - PLEASE PRINT)

(Account Owner - SIGNATURE) (DATE)

(Account Owner - PLEASE PRINT)

(Account Owner - SIGNATURE) (DATE) *(If your account is a joint account both account holders must sign this form)*

Note: Please be advised that these transfers may take up to 30 days to effectuate the implementation of this transaction.