

Authorization Agreement For Direct Payments (ACH Debits)

I hereby authorize Würth Baer Supply, hereinafter called Company to initiate debit entries to the account at the depository financial institution named below hereinafter called Depository and to debit same to such account. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. Account Type: Savings Checking Financial Institution Name: _____ Name on Bank Account: City: _____ State: ____ Zip Code: ____ Routing Number: _____ Account Number: ____ This authorization is to remain in full force and effect until Company has received written notification from me of its termination in such time and in such manner as to afford Company and Depository a reasonable opportunity to act on it. Account Name with Würth Baer Supply: Printed Name of Signer: _____ Account #:____ Signature: _____ Date: _____ Once this agreement is on file, you can place a phone order and then provide us with the last four digits of the bank account number and you're all set. There's no need to fax a check in or anything. The payment process is handled

For payments on account or to get set up on automatic monthly account payments, please contact your Collection

Please return completed form via mail, fax or email:

Specialist at 800-944-2237; select Option 2, then Option 3.

Mail: Attn: Elizabeth Campos - 909 Forest Edge Drive, Vernon Hills, IL 60061

Fax: 847-613-3334

electronically and securely.

Email: liz.campos@wurthbsc.com