THOMAS PETROLEUM, LLC

Authorization Agreement for Automatic Drafts (Debits)

Company Name	Thomas Petroleum Fleet Card Account Numb
Contact	Phone Number Fax Number
Address	City State Zip

I hereby authorize Thomas Petroleum, LLC to initiate debit entries and to initiate, if necessary, credit entries for debit entries made in error under this program to my checking account indicated below and the DEPOSITORY named below to debit and/or credit the same to such account. It is my understanding that I will continue to receive from Thomas Petroleum, LLC an EFT notice for each draft and that this authorization does not breach the confidentiality between me and my DEPOSITORY regarding my account.

Bank Name	Branch
Address	City State Zip
Bank Phone No.	Checking Acct No. Savings Acct No.
ABA Bank Transit Routing No.	Bank Account No.

CUSTOMER AUTHORIZATION

Authorized Signature	Title	Date
Authorized Signature	Title	Date

Please attach a voided check or deposit slip.