

DAILY WINDOW PRODUCTS, INC.
ELECTRONIC CHECK PAYMENT AUTHORIZATION
(RECURRING PAYMENTS)

As an authorized signer on the business checking bank account described below, I hereby authorize Daily Window Products, Inc. ("DWP") to charge this account for products shipped in response to orders from my business.

Bank Name: _____

Bank Account Type: Business Checking

Bank ABA Routing Number (9 digits): ____ _ ____ _ ____ _ ____ _ ____ _

Bank Account Number: _____

Maximum Charge Authorized: \$ _____ .00

This payment authorization is valid upon receipt by DWP. It is to remain in effect through _____ [enter a date no more than 12 months from today] unless I notify DWP in writing by fax of its cancellation at an earlier date. I understand that in order to avoid any unintended charge to my bank account, I must notify DWP in writing by fax at least three (3) full banking days in advance of the date I wish any cancellation to take effect.

(Signature)

(Printed Name)

(Title)

(Company Name)