

#1 SECURITY
A Protection Service Company



Authorized Agreement for Automatic Debits (ACH Debits)

Name _____ Address _____

I (we) hereby authorize MRK Corp. d/b/a #1 Security Company to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my Checking ____, Savings ____ Account. Please indicate below the bank, credit union, savings and loan, etc. hereinafter called the DEPOSITORY, named below to credit and/or debit the same account.

Depository Name _____
Address _____
City _____ State _____ Zip _____
Transit/ABA No. _____ Account No. _____

****MUST INCLUDE A VOIDED CHECK OR SAVINGS DEPOSIT FORM**

This authority is to remain in full force and effect until MRK Corp. d/b/a #1 Security Company has received written notification from me of its termination in such time and in such manner as to afford MRK Corp. d/b/a #1 Security and DEPOSITORY a reasonable opportunity to act on it.

Name _____ ID # _____
(Please Print Clearly)

Signature _____ Date _____

TRANSFER WILL BE ON THE 15TH OF EACH MONTH OR NEXT BUSINESS DAY IF IT FALLS ON A WEEKEND OR HOLIDAY.

RETURN FAX NUMBER 781-639-2935