

HEALCEUTICALS, L.L.C.

AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWALS (DEBITS)

Company: _____.

I (we) hereby authorize your company, **Healceuticals, L.L.C.**, hereinafter referred to as “**Healceuticals**”, to initiate, against confirmed orders/invoice, debit entries to my (our) checking account indicated below **day** **receipt of goods.**

These debit entries will be initiated via the Automated Clearing House Services (ACH) provided by Healceuticals’s bank (*Wachovia Bank*).

Federal Tax I.D. Number: _____

Account Name: _____

Bank Name: _____

City: _____ State: _____ Zip Code: _____

Account Number: _____ Bank Transit/ABA Number: _____

This authorization is to remain in full force and effect until Healceuticals has received a written notification from me (*or either of us*) of its termination in such time and in such manner as to afford Healceuticals a reasonable opportunity to act on it.

Name(s): _____

Title: _____

Signed: _____

Date: _____

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