### Instructions

To receive your revenue/royalty payments directly into your checking or savings account:

- Complete and sign this application
- Enclose an original voided check from your account or an original document from your financial institution with letterhead stating
  - your name
  - type of account
  - account number and
  - routing number

All fields are required unless noted otherwise. The application **cannot** be processed without an original voided check or an original document from your financial institution providing your account information.

## Please mail your application to:

Vencer Energy, Attn: Division Orders Energy Tower IV 11750 Katy Freeway, Suite 200 Houston, TX 77079

Please allow 4–8 weeks for setup, change, or termination of automated payments. Pending testing and authorization of your banking information, you will continue to receive physical checks via U.S. Mail.

If you have questions, please contact Vencer Energy Owner Relations Department: (281) 562-7482 Include original Check or Bank Letter

Please do not send a
Temporary Check or
Check copy

Direct Deposit
Enrollment/
Change
Authorization
Form

No more waiting for your checks to arrive. Enjoy the ease and security of automatically receiving your revenues directly into your checking or savings account with Vencer Energy's direct deposit service. Under no circumstance can Vencer Energy view your account's private information. This service is optional and provided for your convenience at no charge to you.

Vencer Energy

Owner Relations Department
(281) 562-7482
ownerrelations@vencerenergy.com



# Authorization Agreement for Direct Deposit

I (we), hereinafter "Owner", do hereby authorize Vencer Energy ("Vencer") to make direct deposit payments to the financial institution and account designated herein. If the funds deposited are determined to be fraudulent, duplicate or made in error, Owner authorizes Vencer to direct Owner's financial institution to return from Owner's account the funds to which Owner is not entitled, not to exceed the original amount of the erroneous payment. Owner does hereby release and hold Vencer harmless for any loss, claim, or damage incurred as the result of Owner's financial institution's failure to properly or promptly post any payment. Either Owner and/or Vencer shall have the right to terminate this agreement at any time and resume payments via physical check to the address on file.

All fields are required unless noted.

## **STEP ONE:**

## Owner Signature(s)

ORIGINAL SIGNATURE(S) REQUIRED			
All signatures required for joint Vencer account			
X			
X			
x			
Date			

#### **STEP TWO:**

## **Owner Information**

Please select on	e: 🚨	New Request
		Change Request
Vencer Owner N	umber (loc	ated on check detail)
Owner Name		
Last 4 digits of T	ax ID or So	cial Security Number
(required for veri	fication, <b>m</b>	ust match the number
on file with Vence	,	
x x x—x x	<u> </u>	
Mailing Address		
City		State
Zip		
Owner Phone Nu	ımber	
Owner E-Mail Add	dress	

STEP THREE: ☐ Check this box to change the address currently on file with Vencer to the one listed above.

#### **STEP FOUR:**

## **Banking Information**

Name on Bank Account		
Bank Name		
City	State	
Account Type (Se	lect one):	
Checking	Savings	
ABA Routing Num on the bottom of	nber (Nine digit number listed your check)	
Account Number		

### **STEP FIVE:**

You must enclose an original voided check or an original document from your financial institution. See Instructions on reverse side for details.