



Kwik Trip, Inc.
 1626 Oak Street • P.O. Box 1597
 La Crosse, WI 54602-1597
 Phone: (608) 793-6310 • Fax: (608) 781-7517

"To serve our customers and community more effectively than anyone else by treating our customers, co-workers and suppliers as we, personally, would like to be treated."

AUTHORIZATION AGREEMENT FOR FUNDS TRANSFERS

_____ ("Purchaser") hereby authorizes Kwik Trip, Inc. to originate entries transferring funds from ("debit") or to ("credit") Purchaser's deposit account as follows:

Account Number: _____
 Financial Institution : _____
 Located at : _____
 Transit/ABA Number : _____
 Phone Number : _____
 Account Type :Checking_____ Savings_____

The amount of debit entries to Purchaser's account will be based on monies due Kwik Trip, Inc. All payments are due upon the shipment of the order(The next banking day).

Any notice required or permitted under this Agreement will be properly given via U.S. Mail, fax, or E-mail. Notices mailed, faxed, or E-mailed to Purchaser will be sent to Purchaser's address:

_____, faxed to _____, or E-mailed to _____.

Notice of termination shall not affect entries originated prior to actual receipt of notice of termination of this Agreement and will not be effective until fifteen (15) days after properly given. Kwik Trip, Inc. may terminate this Agreement at any time without notice.

Kwik Trip, Inc. will use its best efforts to ensure that debit entries to Purchaser's account, originated by Kwik Trip, Inc., are in the correct amounts. In no event will Kwik Trip, Inc. be liable for any incidental or consequential damages associated with an incorrect entry process by Purchaser's financial institution and will be responsible only for the refund of any overcharge when verified by Kwik Trip, Inc. as such.

Purchaser agrees to keep sufficient funds in the account to cover debit entries originated by Kwik Trip, Inc.

Agreed to and accepted this _____ day of _____, 20__.

Signature: _____

Title: _____