

1820 E. Locust St
Ontario, CA 91761-7737
Website: www.tigerrockinc.com



Tel: (818) 863-9796 x206
Fax: (909) 259-9289
Email: sales@tigerrockinc.com

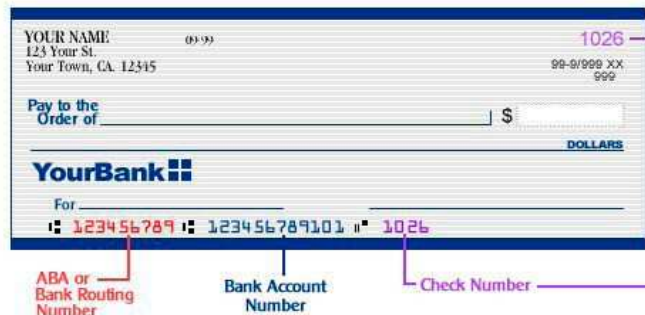
Customer Electronic Debit Authorization

I _____ the undersigned ("Customer") hereby authorize Bank of American ("BOA") to act as agent for TIGER ROCK INC ("Subscriber") for the purpose of initiating a one-time, recurring, or variable amount electronic debit to Customer's personal or business financial demand deposit account on the date(s) such authorization is received by Subscriber and where such authorization is validly given, complies with U.S. or Canadian law as applicable, and does not violate any prohibitions enforced by the Office of Foreign Assets Control ("OFAC"), or act on behalf of, or transmit funds to or from any party subject to such prohibitions. This consent is given for the payment of goods and/or services provided under this Agreement ("Agreement") or any other agreement initiated by and between Customer and Subscriber.

CUSTOMER ACCOUNT INFORMATION

Account Type:	Checking	Saving
Business Name (if a Business Account):	_____	
Customer Name:	_____	
Street Address:	_____	
City, State, Zip:	_____	
Customer's Financial Institution /Bank Name:	_____	
Routing Number:	_____	Account Number: _____

Please attach a voided check on next page



Frequency: On the **DUE DATE** of each invoice for payment of orders placed with TIGER ROCK INC.

Amount: Variable amount on each invoice of orders placed with TIGER ROCK INC.

Customer may withdraw this authorization in writing at any time and understand that a written acknowledgement by Subscriber is required. Subscriber will agree to return this authorization as long as all transactions have been settled.

AGREEMENT

Customer acknowledges that he/she is an authorized signer on behalf of the account shown above, is of legal age, and shall be liable to Subscriber for the entire amount due plus a twenty-five dollar (\$25.00) service charge (or the maximum allowed by state or provincial law) in the event an electronic debit is not honored when presented to Customer's financial institution for payment. Customer acknowledges that any debit (either for the principal amount shown above or a service charge in the event of its dishonor) failing to clear may be re-presented electronically or by paper draft at the sole discretion of BOA and that no further authorization will be necessary to execute such electronic re-presentation under this Agreement. In the event subsequent attempts to debit this processing fee are additionally dishonored then Customer shall make immediate payment to BOA or Subscriber when so requested.

Customer authorizes his/her Financial Institution to debit his/her account and to pay BOA by electronic funds transfer the amount due as shown above. Customer acknowledges that this debit or series of debits will be initiated immediately upon receipt of this authorization (or if on a weekend or bank holiday then the following business day). Unless specified otherwise in writing, Customer acknowledges that this authorization may only be reversed or denied upon the mutual written consent of the parties. Customer acknowledges that he/she has the right to dispute the validity of either a prior transaction or future scheduled transaction and that Customer may contact Subscriber at (818) 863-9796 (Area Code/Phone #) to resolve such and, where such debit is in the future, to provide at least five (5) business days advance notice so as to afford Subscriber reasonable time to act upon such information.

Authorized By: _____
Customer Signature

Date

Printed Name

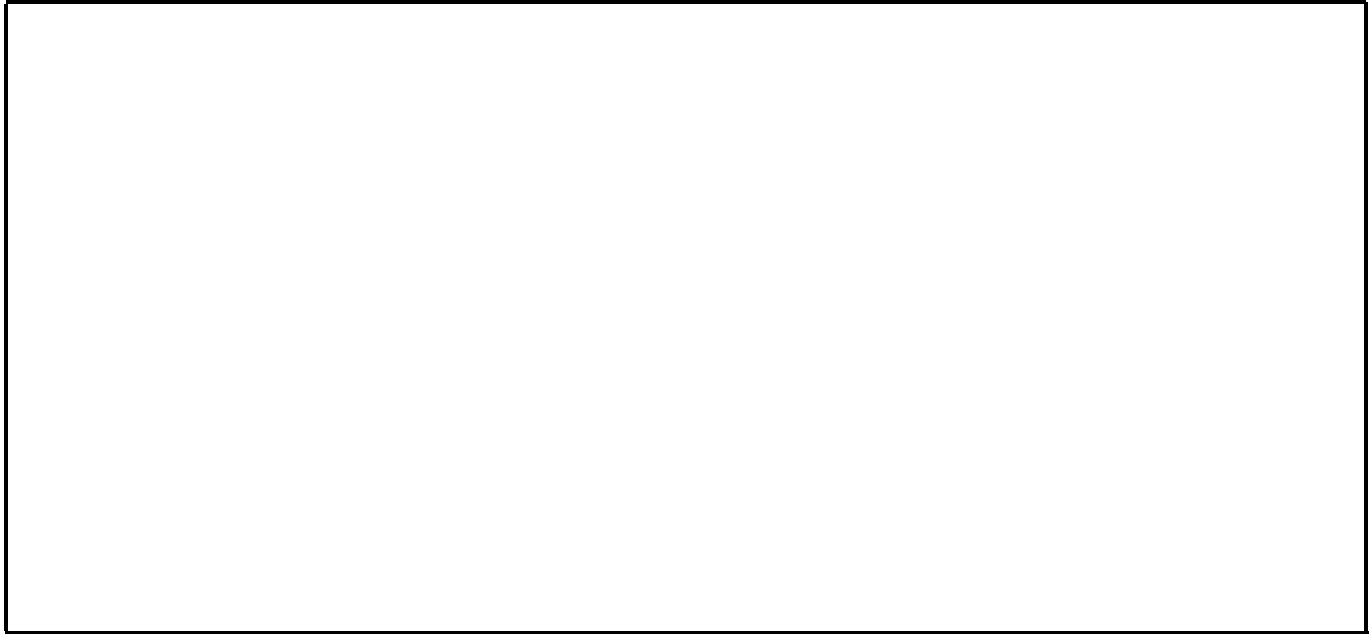
Title (if drawn on a Business Account)



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Please attach a voided check HERE



There will be a **three day** hold on shipping while ACH clears.

\$1 ACH FEE WILL BE CHARGED THRU CREDIT CARD BELOW FOR EACH TRANSACTION:

In the event my ACH is declined my credit card will be charged the total amount and an additional 3% credit card fee.

Credit Card Type: **VISA** **MASTERCARD** | **AMEX**

CARD NUMBER

EXPIRATION DATE(MM/YY)

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Card Identification Number (3 Digits on Back of Credit Card) _____ **Zip Code associated w/card** _____

I _____ (PRINT full name) hereby give TIGER ROCK INC authorization to charge my credit card (information listed above) for various purchases that I place in which I ask that terms of credit card be extended. I am the authorized user of the credit card listed above. I also understand that I will be personally responsible for any charge-backs related to any credit card transactions I authorize. I may withdraw this authorization in writing at any time and understand that a written acknowledgement by TIGER ROCK INC is required. TIGER ROCK INC will agree to return this authorization as long as all transactions have been settled.

SIGNATURE _____

DATE _____

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify in writing of any changes in my account information or termination of this authorization at least 5 days prior to the next billing date. If the above noted periodic payment dates fall on a weekend or holiday, I understand that the payment may be executed on the next business day. I understand that because this is an electronic transaction, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of an ACH Transaction being rejected for Non Sufficient Funds (NSF) I understand that **TIGERROCKINC.** may at its discretion attempt to process the charge again within 3 days, and agree to an additional **\$75.00** charge for each attempt returned NSF which will be initiated as a separate transaction from the authorized payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I agree not to dispute this charge with my bank so long as the transactions correspond to the terms indicated in this authorization form. I also state that I am the owner or authorized user of the above related account to be charged.