

WIRE TRANSFER AUTHORIZATION

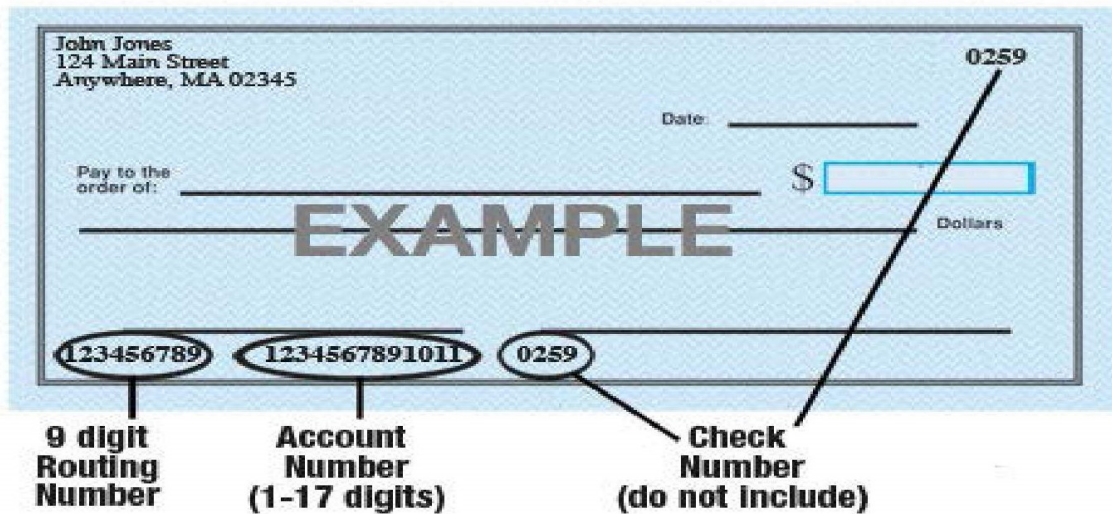
Personal Information

Name: _____ Contact#: _____

Address: _____

Email: _____

Bank Information



Name of Financial Institution: _____

Address of Financial Institution: _____

Checking/Savings Account #: _____

Routing #: _____

Attached a voided check for the bank account above to which funds should be deposited

Authorization

I, _____, hereby authorize PhoneOps Funding LLC to wire my commissions to the account listed above. I acknowledge and agree to the wire fee of \$55. This authorization will remain in effect until I modify or cancel it in writing.

Signature: _____ Date: _____