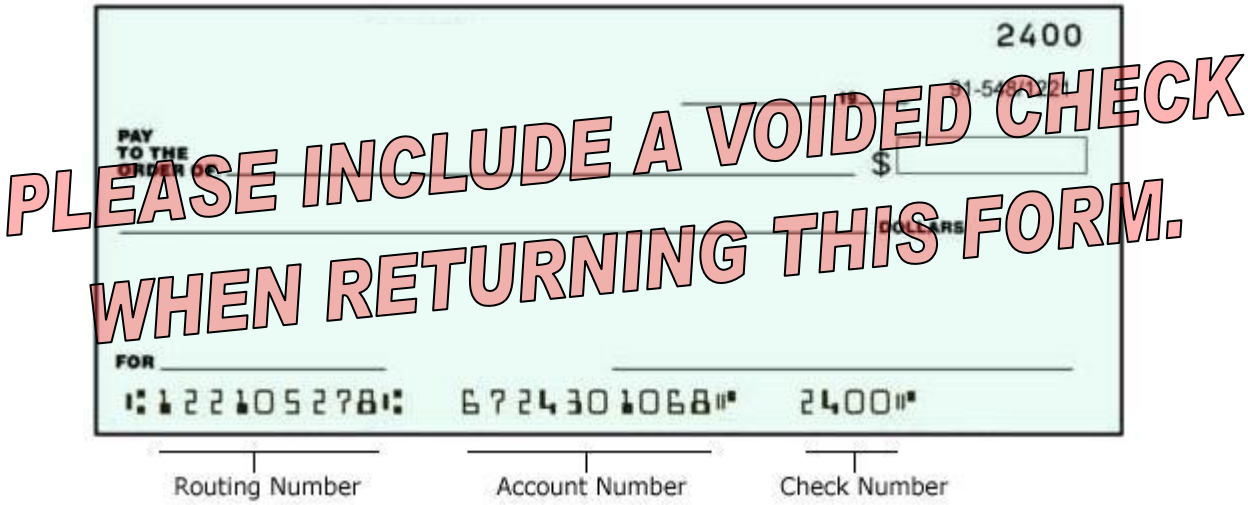
Direct Payment Authorization Form

Please complete the information below:

I _____authorize Badger Properties, LLC, to initiate electronic debits
(Customer name)

from my checking account in the amount of _$_____for payment of rent on a monthly

basis to begin in August 2010, and end with the July 2011 payment.



PLEASE INCLUDE A VOIDED CHECK WHEN RETURNING THIS FORM.

FINANCIAL INSTITUTION NAME (PLEASE PRINT) _____

FINANCIAL INSTITUTION ROUTING NUMBER _____

FINANCIAL INSTITUTION ACCOUNT NUMBER _____

FINANCIAL INSTITUTION CITY AND STATE _____

PLEASE EMAIL THE NOTIFICATIONS AND RECIEPTS TO: _____

PLEASE CALL (_____)_____ IF THERE ARE ANY QUESTIONS WITH MY INFO.

SIGNATURE_____DATE_____

I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I agree to notify merchant in writing of any changes in my account information or termination of this authorization 15 days prior to the due date of the charges. I understand that cancellations must be made in writing and I will not dispute merchant debiting my checking/savings account, so long as the amount corresponds to the terms indicated in the lease.

If you have any questions, please call Badger Properties at 334-821-3023

When completed, please return this form to Badger Properties by fax (334-246-4380) or email (info@badgerprops.com)