

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Company Name _____ Company ID Number _____

I (we) hereby authorize JRJP, INC. T/A FALCON OIL,
hereinafter called COMPANY, to initiate debit entries to my (our) Checking Account/
Savings Account (select one) indicated below at the depository financial institution
named below, hereafter called DEPOSITORY, and to debit the same to such account. I
(we) acknowledge that the origination of ACH transactions to my (our) account must
comply with the provisions of U.S. law.

Depository Name _____ Branch _____

City _____ State _____ Zip _____

Routing Number _____ Account Number _____

This authorization is to remain in full force and effect until COMPANY has received
written notification from me (or either of us) of its termination in such time and in such
manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on
it.

Name(s) _____ ^{Fed} ID Number _____
(Please Print)

Date _____ Signature _____