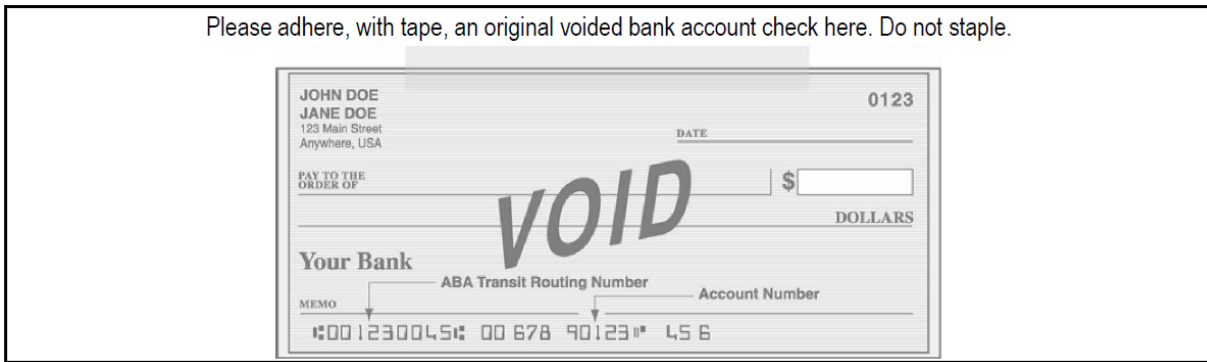




CREDIT/DEBIT AUTHORIZATION FORM

I (we) hereby authorize KORE Property Management, LLC, to initiate entries to my (our) Checking /savings account(s) at the financial institution listed below (THE FINANCIAL INSTITUTION), and, if necessary, initiate adjustments for any transaction(s) credited/debited in error. This authority will remain in effect until KORE Property Management, LLC, is notified by me (us) in writing to cancel it in such time as to afford KORE Property Management, LLC, and THE FINANCIAL INSTITUTION a reasonable opportunity to act on it.

1. Affix bank instrument (i.e. pre-printed check).
2. Instrument must bear ABA routing number and account number in MICR characters.
3. MAKE sure that instrument is from institution to/from which funds are to be transferred.
4. Void the instrument properly.
5. Complete account name, ABA routing number and account number below



FUNDS SETTLEMENT INFORMATION		
In accordance with the terms set out herein and in the AGREEMENT, transfer funds to/from the account set out below (In case of discrepancy, the data in the attached bank instrument will be assumed to be correct):		
Financial Institution Name:	Branch:	
Account Owner:		
Account Name:		
Branch Address:	City:	State:
Routing # (9 digits):		
Account#		

I would like to be notified by email when a withdrawal is initiated, at: _____

SIGNATURE OF AUTHORIZED SIGNER ON ACCOUNT

SIGNER'S TITLE

SIGNER'S NAME (PLEASE PRINT)