

**DEBIT AUTHORIZATION**  
(Recurring Payments)

I, \_\_\_\_\_ (name, title) hereby authorize **Mars Equities, Inc.**, hereinafter called MARS, to initiate debit entries to the account indicated below and the financial institution named below, hereinafter called BANK, to debit the same to such account.

This authorization is for the purpose of making rent payments and I understand that amounts may vary and authorize payments in the amounts as indicated below:

\_\_\_\_\_  
Financial Institution Name

\_\_\_\_\_  
Branch

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Routing number

\_\_\_\_\_  
Account Number

Checking

Savings

\$

\_\_\_\_\_  
Monthly amount

All transactions shall be conducted on the first business day of each month.

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

\_\_\_\_\_  
Company

\_\_\_\_\_  
Authorized individual name

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Please attach a voided check to this completed form and mail to:

Eileen Keeler  
Mars Equities, Inc.  
150 Harvester Drive, Suite 100  
Burr Ridge, IL 60527