



ACH/ E-Remittance Request Form

In an effort to streamline payments and related procedures, Verdad Resources LLC (“Verdad”) is transitioning to an all-electronic payment process. Please complete, sign and return the below form along with a voided check or bank authorization form to: Verdad Resources LLC, Attention: Noemi Robles, 5950 Sherry Lane, Suite 700, Dallas, TX 75225. Should you need assistance or have any, please contact 888-585-8413 or askverdad@lislsv.com.

Owner Information .

Owner Number:

Tax ID or Social Security Number:

Name:

Street Address/Suite/Apt #:

City, State, Zip:

Telephone Number:

Email Address:

Banking Information

U.S. Bank Name:

Name on Account:

9 Digit Routing Number (ABA):

Type of Account (Checking or Savings):

Bank Account Number:

Bank Contact Phone Number (Optional):

Authorization

The undersigned Owner (“Owner”) or authorized representative of Owner represents that it authorizes Verdad to make direct deposit (“ACH”) payments to the financial institution designated above in lieu of paper checks. Owner certifies that the above information is accurate and that Owner is the lawful party entitled to receive such proceeds. Owner agrees that Verdad may unilaterally reverse any ACH payments determined to be fraudulent, duplicative or made in error. Owner agrees that any future mailing address changes will continue to only be submitted in writing to Verdad at the address listed below. Owner agrees that Verdad will not be held liable for any interest or other claim arising as a result of Owner’s failure to provide timely written notice of any payment instruction changes, and Owner releases and agrees to indemnify and hold Verdad harmless for any loss, claim, damage, interest or fees incurred due to the financial institution’s failure to properly or promptly post any ACH payment and/or as a result of any error or omission in the payment instructions provided by Owner. Owner understands and agrees that Verdad will have up to ninety (90) days after receipt of this form to process the initial ACH request. Once initial setup has been established, any future changes will be processed within thirty (30) days. Please note that upon execution of ACH payment to Owner, supporting payment detail will be provided via Energylink by phone 888-573-3364 or <http://www.energylink.com/contact>. This authorization will remain in effect until 30 days after written communication of termination has been received by Verdad. Verdad may cease making ACH payments to Owner at any time for any reason at Verdad’s sole discretion and resume making paper check payments on the next check cycle.

Signature: _____

Date: _____