

SLANT OPERATING LLC DIRECT DEPOSIT FORM

NAME: _____ ACCOUNT # _____

ADDRESS: _____

TAX ID # _____ - _____ - _____

BANK NAME _____

CITY/STATE _____

ROUTING # _____

ACCOUNT # _____ ACCOUNT TYPE CHECKING _____ SAVINGS _____

NOTE VOIDED CHECK OR BANK LETTER REQUIRED FOR DIRECT DEPOSIT SETUP

EMAIL ADDRESS: _____

Contact Name: _____

SIGNED: _____

TELEPHONE #: _____

DATED: _____

Please allow 1-2 calendar months for verification and processing

Please mail to Slant Operating LLC, Attn Accounting Department, 822 Harding Street, Suite 400,
Lafayette LA 70503 or email to kolivier@slantenergy.com.