VOLVO

Volvo Car
Financial Services

AUTOMATIC PAYMENT PROGRAM

Account Number: _____

_____
Customer Name

_____   _____
Customer Address 1   Customer Address 2

_____   _____
Customer City   Customer State   Customer Zip

Introducing the Volvo Car Financial Services Automatic Payment Program. The Automatic Payment Program automatically deducts the exact amount of your payment from your checking account on your payment due date each month.

Getting started on the Automatic Payment Program is easy. Simply…

1) Complete the entire form.

2) Please ensure each person on the bank account signs the authorization fields below.

3) Continue to make monthly payments on your account until you have received confirmation of your enrollment.

4) Mail or fax this form and a voided check to:

Volvo Car Financial Services
PO Box 91300
Mobile AL 36691-1300
Fax: 314-702-4621

(!) **Please remember to include your voided check!**

Volvo Car Financial Services Automatic Payment Enrollment Authorization

I (we) hereby authorize and request Volvo Car Financial Services (VCFS) to initiate electronic debit entries or effect a charge by any other commercially accepted practice to my (our) checking account at the financial institution indicated below, and I (we) authorize and request said financial institution to honor the debit entries initiated by VCFS and debit such account. This authorization is for payments described in the related retail installment contract or lease agreement. This authorization is to remain in effect until VCFS and the financial institution listed have received written notification from me (or either of us) or from VCFS of its termination in such a manner and time as to afford VCFS and the financial institution a reasonable opportunity to act upon it, or all payments required by the retail installment contract or lease agreement have been made. I (we) further represent and warrant to VCFS that the person(s) executing this authorization is (are) an authorized signatory on the account referenced below.

_____   _____
Bank Name (please print)   Bank Routing Number

                                       _____
                                       Bank Account Number

_____   _____
Name(s) on Bank Account (please print) Name(s) on Bank Account (please print)

_____ _____   _____ _____
Signature of Bank Account Owner(s) Date Signature of Bank Account Owner(s) Date