

Richmond Auto Parts Technology, Inc.
5000 Corporate Way
Richmond, Ky 40475



June 15, 2016

Dear Valued Supplier:

Richmond Auto Parts Technology is striving to improve the promptness with which we remit payment to our suppliers. We now have the capability to expedite payment by remitting payment via electronic funds transfer in the form of an ACH payment.

By utilizing ACH payments, you, our valued supplier will receive payment directly into your checking account instead of waiting for the USPS to deliver a paper check to either your office or lockbox. You will also receive via e-mail a payment advice detailing which invoices were paid and the total dollar amount deposited into your bank account.

In order to start this process, we need you to complete the attached form. In addition, please attach a copy of a voided check or a bank letter on bank letterhead certifying the account name, account number and routing number. An updated W-9 should also be completed and sent. Please complete all sections, sign and date the form and return all documents by mail to our address with the Attention to: ACH Payment. The forms can also be emailed to invoice@raptech.com. This is the email address that should be used to send all of your invoices for payment processing. The authorization form must be signed by the Controller, CFO or officer authorized to sign on the account.

Since payment via ACH is both faster for you and less costly for us, this payment method is now our preferred payment method. Presently, payment to you via ACH is optional; however, in the very near future, Richmond Auto Parts Technology, will require you to accept payments via ACH.

Should you have any questions or require additional information, please don't hesitate to contact us.

Best regards,

Brad Poll
Accounting Manager
invoice@raptech.com

An electronic copy of this letter and ACH enrollment form can be found by going to http://bit.ly/RAPT_ACH_Enroll.

SUPPLIER ACH PAYMENT / ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION FORM

MAIL FORM TO	RICHMOND AUTO PARTS TECHNOLOGY, INC. ATTN: ACH Payment 5000 CORPORATE WAY RICHMOND, KY 40475	OR	EMAIL FORM TO	INVOICE@RAPTECH.COM
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TYPE OF APPLICATION	<input type="checkbox"/> NEW	<input type="checkbox"/> CHANGE	<input type="checkbox"/> CANCELLATION
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SUPPLIER INFORMATION	
COMPANY NAME _____	
REMITTANCE ADDRESS _____	
CITY _____ STATE _____ ZIP _____ FEDERAL TAX ID _____	
CORRESPONDENCE ADDRESS _____	
CITY _____ STATE _____ ZIP _____	
A / R CONTACT NAME _____	PHONE # _____
A / R CONTACT EMAIL ADDRESS _____	FAX # _____
REMITTANCE ADVICE EMAIL ADDRESS _____	

SUPPLIER FINANCIAL INFORMATION	
BANK NAME _____	
BANK ADDRESS _____	
CITY _____ STATE _____ ZIP _____	
BANK CONTACT _____	EMAIL _____ PHONE # _____
BANK BRANCH ADDRESS _____	
CITY _____ STATE _____ ZIP _____	
BANK ABA NUMBER _____	BANK ACCOUNT NUMBER _____
<input type="checkbox"/> CHECKING ACCOUNT	<input type="checkbox"/> SAVINGS ACCOUNT

THIS ACH PAYMENT / EFT AUTHORIZATION IS TO REMAIN IN EFFECT UNTIL RICHMOND AUTO PARTS TECHNOLOGY, INC. (RAPT) HAS RECEIVED WRITTEN NOTIFICATION IN SUCH TIME AND MANNER AS TO AFFORD RAPT AND RAPT'S BANK REASONABLE OPPORTUNITY TO ACT. IT IS THE SOLE RESPONSIBILITY OF THE SUPPLIER TO NOTIFY RAPT IN WRITING OF ANY BANK ACCOUNT CHANGES AND / OR CLOSURES A MINIMUM OF 30 DAYS IN ADVANCE. THIS NOTIFICATION REQUIRES WRITTEN DOCUMENTATION ON THE PAYEE'S LETTERHEAD OR A NEW ACH / EFT AUTHORIZATION FORM BE SUBMITTED TO RICHMOND AUTO PARTS TECHNOLOGY.

THE PAYMENT TERMS FOR THE PURPOSE OF THIS ACH / EFT AUTHORIZATION SHALL BE MODIFIED BY ADDING THREE (3) CALENDAR DAYS TO THE STANDARD RAPT PAYMENT TERMS AS SPECIFIED ON THE SUPPLIER PURCHASE ORDER. IF THE ACH / EFT PAYMENT DATE IS A NON-BANKING DAY, THE ACH / EFT WILL OCCUR ON THE FOLLOWING BANKING DAY.

WE, (YOUR COMPANY NAME) _____, HERBY AUTHORIZE RICHMOND AUTO PARTS TECHNOLOGY, INC. TO INITIATE CREDIT ENTRIES AND TO INITIATE, IF NECESSARY, ADJUSTMENTS FOR ANY CREDIT ENTRIES IN ERROR ELECTRONICALLY TO OUR BANK ACCOUNT INDICATED ABOVE AND THE FINANCIAL INSTITUTION NAMED ABOVE.

SIGNATURE				
# 1	NAME _____	(PRINT)	TITLE _____	DATE _____
SIGNATURE				
# 2	NAME _____	(PRINT)	TITLE _____	DATE _____
(IF NECESSARY)				