



Revenue Payment Direct Deposit Enrollment Form

To take advantage of direct deposit, please complete this form entirely. If you choose direct deposit, you will no longer receive a check in the mail. The check detail is available online, via email or through regular mail. If you do not provide an email address below, your check detail will be mailed to you. You can receive your check detail via email if you provide your email address below, or you may log into your account through EnergyLink's secure website to view or download your detail. If you do not have an account, please contact Energy Link at 888-573-3364 or email help@energylink.com

If you have already signed up for direct deposit for this owner number, you DO NOT need to sign up for new well(s). The first time you sign up will cover all future wells(s).

Enrollment Type (check one): New Enrollment Request Change Request Cancellation

Owner Name: _____

Gulfport Owner Number: _____ SSN# or Federal Tax ID: _____

Owner Mailing Address: _____

**If the address listed is different than the address on the account, Gulfport will update the owner's account to reflect the mailing address noted above.*

Phone Number: _____ Email: _____

Account Type (check one): Checking Savings

Financial Institution Name: _____

Routing Number: _____ Bank Account Number: _____
(Must be 9 digits)

WE CANNOT PROCESS YOUR DIRECT DEPOSIT FORM WITHOUT A VOIDED CHECK OR LETTER FROM YOUR FINANCIAL INSTITUTION DETAILING YOUR ACH PAYMENT INSTRUCTIONS.

The undersigned hereby agrees that Gulfport may reverse any electronic payment that is determined to be duplicate or made in error. Such owner further agrees that authorization of EFT (electronic funds transfer) as evidenced by the signature(s) below amends your existing payment instructions to us. In the event that EFT is unable to go through (e.g., due to closure or abandonment of an account or inaccurate account information), Gulfport will resume making payment to you via check. I hereby agree to the terms enumerated herein, certify that the depository information listed above is accurate and authorize Gulfport to issue payments to me electronically via ACH. **If you have a joint account within Gulfport, signatures of both parties are required.**

**Gulfport Energy Corporation
Attn: Division Orders
3001 Quail Springs Parkway
Oklahoma City, OK 73134**

Signature: _____

Signature: _____

Date: _____

PLEASE ALLOW 90 DAYS FOR THIS REQUEST TO BE COMPLETED
Before mailing, please remember to:

- Provide your tax ID or Social Security on the designated line above.
- Sign and date the form (all owner signatures are required for joint accounts, joint tenants, trusts, estates, etc.)
- Attach a voided check or attach the letter from your financial institution.
- Provide your email address above if you would like to receive your check details via email. To receive your check detail via mail or you will retrieve online via EnergyLink, leave the email address line blank.
- Verify all information is correct. Missing and/or incorrect information will delay setup of direct deposit.

FOR OFFICE USE ONLY

DIVISION ORDERS _____ ACCOUNTS PAYABLE _____ TREASURY _____