



USAA Federal Savings Bank
10750 McDermott Freeway
San Antonio, Texas 78288-0544

ROBERT R WEED
45575 SHEPARD DRIVE
SUITE #201
STERLING, VA 20164

March 2, 2016

Reference: Bankruptcy Filing for USAA Account Holder -

Dear Robert R Weed,

We have been notified that the above-referenced accountholder filed for protection under the Bankruptcy Code. The filing affects the consumer loan for the following:

Account # ending in:
Collateral description: KIA

If there was an automatic payment plan previously set up for the account that deducts payments from a bank account, that plan has been stopped as a result of the accountholder's bankruptcy filing.

If a confirmed bankruptcy plan provides for payments to be made directly to USAA, or if the accountholder wishes to make voluntary payments, payments can be made using one of the following methods. Any voluntary continuation of payment is not a reaffirmation of the debt.

Automatic payments

Payments can be made conveniently using automatic payments. To set up automatic payments, the account holder must complete the enclosed authorization form and return it to us:

Mail: Attention: Consumer Loan ACH Dept.
USAA Federal Savings Bank
10750 McDermott Freeway
San Antonio, TX 78288-0544
Fax: 1-800-531-5717
Attention: Unit: 94081

Other payment methods

The account holder can mail a check, call us to pay by electronic check or make a payment on mobile:

Mail: USAA Federal Savings Bank
10750 McDermott Freeway
San Antonio, TX 78288-0544
Phone: 1-800-284-9821
Mobile: USAA Mobile App or mobile.usaa.com

To ensure payments are properly credited, please include the account number with all payments.



USAA Federal Savings Bank
 10750 McDermott Freeway
 San Antonio, Texas 78288-0544

Authorization Agreement For Preauthorized Loan Payments

- STEP 1:** Complete and sign this form.
STEP 2: Enclose a check marked VOID or a deposit slip.
STEP 3: Retain a copy of this form for your records.
STEP 4: Return to USAA Federal Savings Bank using one of the following methods:

Fax: 1-800-531-5717

Mail: USAA Federal Savings Bank
 10750 McDermott Freeway
 San Antonio, Texas 78288

The undersigned (hereinafter "I," "me" or "my," whether one or more) authorizes USAA FEDERAL SAVINGS BANK ("USAA") to initiate debit entries to the account I have identified on this form at the financial institution named below. I acknowledge that the origination of ACH (automated clearing house) transactions to and from my bank account must comply with the provisions of applicable law. If the designated payment or debit date falls on a weekend or bank holiday, the transmission will be initiated from the bank account on the next banking business day.

Payment Authorization

This authorization is for one or both of the following:

- Loan Payment:** Payments due on the loan account referenced below, as and when payments become due. Payment under this authorization means the regularly scheduled payment due on the identified loan together with any late, return payment, and other fees and charges that may be due on the loan account. Generally debits may vary \$100 above or below the regularly scheduled payment amount specified in the loan documents for the loan account.
- Loan Principal Payment:** Additional principal payment on the loan account identified below in the amount of \$_____. Frequency: Monthly Semimonthly Biweekly beginning on _____. If the request is not processed by this date, the additional payment will be debited on the next available draft date.

All information must be completed correctly. I understand that my failure to complete the form correctly may result in a delay in implementing automatic debits from the selected bank account, cause payment of more interest, and incur late fees on the loan account if this authorization is for the scheduled payment due on the loan account. This form must be received and processed before preauthorized payments can begin. I understand I must allow at least five business days for this authorization to take effect and that payments must be made on the loan account by some other method if this authorization is not in effect or payment cannot be made from my bank account for any reason.

Banking Information

If the account you want your payment taken from is a savings or money market account, there may be transaction limits. Please contact your financial institution for information regarding these accounts.

Account Holder Name _____

Debit Account: Checking Savings

Loan Account Number _____

Financial Institution _____

Routing Number _____

Account Number _____

Financial Institution Address _____