

# AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

## Automatic Checking Deductions

Unit Owner Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Acct No or Unit # \_\_\_\_\_

I (we) hereby authorized \_\_\_\_\_ hereinafter called the ASSOCIATION, to initialize entries to my (our) checking account at the DEPOSITORY INSTITUTION listed below, to debit the same to such account. I understand my participation in this program involves deduction from my account listed below, which can be subject to corrections and/or adjustments as instructed by the ASSOCIATION.

Unit Owner's Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Routing number or ABA number: \_\_\_\_\_

Account number: \_\_\_\_\_

DDA    
 SAV \_\_\_\_\_

Amount of monthly dues or Payment \_\_\_\_\_ Frequency \_\_\_\_\_

Date due: 5TH OF EACH MONTH \_\_\_\_\_



ASSOC NAME

This authorization is to remain in full force and effect until \_\_\_\_\_ has received written notification from me (or either of us) of its termination in such time and in such manner as to afford \_\_\_\_\_ & EXECUTIVE NATIONAL BANK a reasonable opportunity to act on it.

\_\_\_\_\_  
Signature of Member Date

\_\_\_\_\_  
Signature of Member (2nd authorized person) Date

Attention participants: Whenever possible provide \_\_\_\_\_ a copy of a voided check to verify bank information. Return or rejected ACHs are subject to late fees

<b>Joe Smith</b>		<b>0783</b>
<b>Any Town</b>		63-815/670
<b>USA</b>		DATE _____
PAY TO THE ORDER OF _____		\$ _____
 Bank Routing Number <b>NK</b> Account Number		<small>INQUIRE</small>  <small>Update on name</small>
FOR _____		0783 ← <b>Check Number</b>
⑆067008155⑆ 073409821⑆06		