Authorization Agreement for direct payments

I (we) herby authorize Lavend	er Fields Homeowners' Association hereinafter
called company, to credit/deb	it entries to my (our)checking account
savings account indicate	ated below at the depository institution named
below, hereafter called depos	tory, to credit/debit the same such account. I (we)
acknowledge that the originat	ion of ACH transactions to or from my (our) account
must comply with the provisio	ns of U.S. law.
Depository Name:	
	City
State	Zip Code
written notification from me (in full force and effect until company has received or either of us) of its termination in such time and in IPANY and DEPOSITORY a reasonable opportunity
Name (s) on account:	
Routing Number:	
Account Number:	
	Date:
Property Address (in HOA) :	
Phone:	email:

PLEASE ATTACH VOIDED CHECK

NOTE: WRITTEN CREDIT/DEBIT AUTHORIZATION MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.