

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

COMPANY
NAME: LEISURE VILLAGE WEST ASSOCIATION

I (we) hereby authorize LEISURE VILLAGE WEST ASSOCIATION, hereinafter called COMPANY, to initiate debit entries to my (our) bank account indicated below and the depository named below, hereinafter called BANK, to debit the same to such account.

BANK NAME: _____ BRANCH: _____
CITY: _____ STATE: _____ ZIP: _____
TRANSIT/ABA NO.: _____ BANK ACCOUNT NO. _____
MONTH AND YR. OF FIRST WITHDRAWAL: _____ MONTHLY MAINT. FEE AMOUNT: \$ _____
(All withdrawals are done on the 10th of the month)

PLEASE ATTACH A VOIDED CHECK TO THIS FORM. TRANSIT/ABA NO. AND BANK ACCOUNT NO. ARE ON THE VOIDED CHECK.

This authority is to remain in full force and effect until COMPANY and BANK have received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and BANK a reasonable opportunity to act on it.

NAME(S): _____ PHONE NO.: _____
(PLEASE PRINT)

UNIT ADDRESS: _____

DATE: _____ SIGNED: X _____ SIGNED: X _____