

HEATHERWOOD HOMES ASSOCIATION DUES CREDIT/DEBIT AUTHORIZATION FORM

I/WE _____ HEREBY AUTHORIZE Heatherwood Homes Association to initiate entries to my checking/savings accounts for the sole purpose of paying my monthly homeowners dues. Funds may be drawn from the financial institution listed below, and if necessary initiate any adjustments for any transactions credited/debited potentially made in error. This authority will remain in effect until Heatherwood Homes Association is notified by Me/Us in writing to cancel it in such time as to afford Heatherwood Homes Association and The Financial Institution a reasonable opportunity to act on it.

Name of Homeowner's Financial Institution

Address of Financial Institution (*Branch, City, State & Zip Code*)

Checking or Savings Account Number

Financial Institution Routing Number

Monthly Dues Amount: \$

Date for Credit/Debit withdrawal: / / (*Dues must be received by the 1st of the month*)

Full Name as listed on the account (*please print clearly*)

Signature (*must be a hand signed signature*)

Date

Please remit this form to:

Supporting Strategies, Inc. (a division of Bukaty)
4601 College Blvd., Suite 200
Leawood, KS 66211
Re: Heatherwood Homes Association Dues

Filled our forms may also be scanned and emailed to the following address:

HAH@KSC.myworkplace.co (*please note it is .co NOT .com*)

Do not send this form to the Heatherwood HOA Board, but please ***be sure to notify the Board Treasurer of your submission of this form to Supporting Strategies via email*** – Thank you.