|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| A sign with text on it  Description automatically generated | East Oaks HOA - Automatic Payment  **AUTHORIZATION FORM** (Required Fields)  **Effective Date of Authorization:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_ | | | |
| **Type of Authorization:** Stop outlineNew Authorization Stop outline Change Payment Amount Stop outline Change Payment Date  Stop outlineChange Banking Information Stop outline Discontinue Electronic Payment | | | | |
| Last Name | | | First Name | |
| Street Address | | | | |
| City | | State | | Zip |
| Email Address | | | | |
| **Payment Frequency** Stop outline ONE-TIME Recurring (select one) Stop outline WEEKLY Stop outline MONTHLY Stop outline ANNUAL Stop outline OTHER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **Date of One-Time Payment** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_ **Amount** $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **Date of First Payment** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_ **Amount of Recurring Payment:** $363.75 | | | | |
| **Please debit payment from my (check one)**  Savings Account (contact your financial institution for your routing #)  Checking Account (staple a voided check to bottom of page) | | | Routing Number:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Valid Routing # Must Start With 0, 1, 2 or 3  Account Number:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  See the source image | |
|  | | |  | |
| ***I authorize the above organization to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.***  Authorized Signature: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |