



## ACH (AUTO-DEBIT) CANCELLATION

Date: \_\_\_\_\_

Association Name: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Unit #: \_\_\_\_\_

The undersigned authorizes cancellation of auto-debit of Association dues

ACH (auto debit) effective (date): \_\_\_\_\_.

**NOTE: This will not stop any credit card, e-check, electronic or other payments to the association that you have set up directly with Smartstreet/RBC, your bank, or an on-line payment company.**

Owner Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Please fax, email or mail this form to: **Carol Jensen**  
**Hoffmann & Associates**  
**7926 Old Seward Hwy #B4**  
**Anchorage, AK 99518**

**Fax: (907) 562-8221**  
**Email: vegas.girl@yahoo.com**

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