

DEBIT AUTHORIZATION FORM

AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED DEBITS

COMPANY NAME: RE/MAX Advantage Realty, Inc.

I (WE) HEREBY AUTHORIZE RE/MAX Advantage Realty, Inc., HEREINAFTER CALLED COMPANY, TO INITIATE DEBIT ENTRIES TO MY (OUR) CHECKING ACCOUNT / SAVINGS ACCOUNT (SELECT ONE) AT THE FINANCIAL INSTITUTION NAMED BELOW, HEREINAFTER CALLED DEPOSITORY. THE PURPOSE OF THESE DEBITS ARE TO PAY FOR THE MONTHLY OFFICE BILL.

DEPOSITORY:

NAME: _____ BRANCH: _____
CITY: _____ STATE: _____ ZIP: _____
TRANSIT/ABA NO: _____ ACCOUNT NO: _____

THIS AUTHORITY IS TO REMAIN IN FULL FORCE AND EFFECT UNTIL COMPANY AND DEPOSITORY 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 DEPOSITORY A REASONABLE OPPORTUNITY TO ACT ON IT.

NAME(S): _____
(PLEASE PRINT)

DATE: ___ / ___ / ___ SIGNED: _____ SIGNED: _____

(PLEASE ATTACH VOIDED CHECK)