

## Sun Lakes ACH Authorization Form

<b>4-Digit Unit/Lot#:</b>	<b>Association:</b> Sun Lakes Homeowners Association #1, Inc.	
<b>Owner Name (please print):</b>	<b>Owner Name (please print):</b>	
<b>Street Address:</b>	<b>City &amp; State:</b> Sun Lakes, AZ	<b>Zip code:</b> 85248
<b>Daytime Phone Number:</b>	<b>Email Address:</b>	

I (we) hereby authorize Sun Lakes Homeowners Association #1, Inc., to initiate debit entries to my (our) checking/savings account at the financial institution named below:

<b>Financial Institution:</b>	<input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account
<b>Account Number:</b>	<b>Routing Number:</b>

Preauthorized charges to your account will be processed, when due, for the amount of your **regular assessment payment**. Payments so collected will be deposited to the checking/savings account of your Association. Funds are transferred on the 15th day of the month and appear on your bank statement each month.

This authority is to remain in full force and effect until Sun Lakes Homeowners Association #1, Inc. has received written notification from me (or either of us) of its termination. ***"I (we) understand that said company requires at least 30 days prior notice in order to cancel this authorization.***

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SIGNATURE (REQUIRED) DATE

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If you have questions or need further information, please contact:

Accounting Department, A/R Specialist	Phone Number: (480) 895-9270, Ext. 153 or <b>Email: <a href="mailto:lmatteson@slhoa1.com">lmatteson@slhoa1.com</a></b>
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**ATTACH THE VOIDED CHECK HERE:**