

**AUTHORIZATION AGREEMENT FOR AUTOMATED DEPOSITS
(ACH CREDITS)**

COMPANY NAME Vista Point Owner's Association COMPANY ID NUMBER _____

I (we) hereby authorize _____, hereinafter called COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) ___ Checking ___ Savings account (select one) indicated below and the depository named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

DEPOSITORY NAME _____ BRANCH _____
CITY _____ STATE _____ ZIP _____
TRANSIT/ABA NO. _____ ACCOUNT NO. _____

This authority is to remain in full force and effective until COMPANY has received written notification from me 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) _____ ID NO. _____
DATE _____ SIGNED _____

**PLACE A
VOIDED CHECK
HERE**