

AUTOMATIC BANK DRAFT INFORMATION FORM

If you choose to pay quarterly automatic bank draft you need to fill out the form below. This form gives us the authorization to debit your account for the quarterly dues payment. This form must be filled out and signed before we can process your payment. The quarterly payments will be processed on or about January 10, April 10, July 10, and October 10. If for any reason you choose to stop paying by automatic bank draft or change your account, you need to notify The Magnolia Group immediately.

If you have any questions, please do not hesitate to contact The Magnolia Group at (615) 599-0746.

Tennessee Commerce Bank Authorization Agreement for Direct Payments

Avalon Homeowners' Association

I.D. Number: 20-3767667

I (We) hereby authorize **Avalon Homeowners' Association**, hereinafter called Company to initiate debit/credit entries to my (our) account indicated below at the depository institution named below, hereinafter called Depository, to debit/credit the same account. I (We) understand that \$255.00 will be taken out of my (our) account on the 10th day of January, April, July, and October as long as I (we) am a resident of the Development.

Bank Name: _____ Branch: _____

City: _____ State: _____ Zip: _____

Routing Number: _____ Account Number: _____

This authorization is to remain in full force and effect until **Avalon Homeowners' Association** has 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.

Name: _____ SS Number: _____

Name: _____ SS Number: _____

Address: _____

Authorized Signer: _____ Date: _____

Authorized Signer: _____ Date: _____

Note: All written authorizations must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.

Please attach a voided check. Your request cannot be processed without the voided check attached.