To All Homeowners:

Your Association offers electronic payment processing as an **optional** method for your monthly assessment payment. Pre-authorized automatic payments mean that homeowners can pay their assessments automatically without writing checks, thus eliminating the potential for late payments. In addition, the association is assured prompt, predictable payments to help better manage funds. This program is available to all homeowners regardless of where they bank. Funds are transferred from the homeowner's checking account directly into the association's bank accounts. Funds are transferred between the 10th and 15th of the month. ***This form needs to be received by the 30th of the month for auto payments to start the following month.***

If you would like to sign up for this service, please fill out the form below and return it to the Association office at 16625 S. Desert Foothills Pkwy. Phoenix, AZ 85048 ***along with a voided check (deposit slips are NOT acceptable).***

Pre-Authorized Electronic Assessment Payment Authorization (please print)

Premiere at Desert Breeze Homeowners Association
Association Name

_____ _____
Lot Number Assessment Amount (Monthly)

_____
Name(s) Last First M.I.

_____
Name(s) Last First M.I.

I (we) hereby authorize Community Association Banc, hereinafter referred to as BANK, as agent for the association named above to initiate debit entries to my (our) checking account indicated above at the depository named below, hereinafter referred to as DEPOSITORY, to debit same to such account.

_____
Depository Name (Homeowner's Bank)

_____
Branch Name

_____
City State Zip Code

This authority is granted in accordance with the terms and conditions of the Bank's pre-authorized electronic assessment payment agreement & disclosure statement receipt of which I hereby acknowledge. This authority is to remain in full force and effect until BANK has received written notification from me (or either of us) of its termination in such manner as to afford BANK a reasonable opportunity to act on it.

_____
Signed Phone

_____
Signed Phone

Please make sure you send a voided check with this agreement and mail all to:
VISION Community Management, 16625 S. Desert Foothills Pkwy Phoenix, AZ 85048.