AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENT OF ASSESSMENTS

I (we) hereby authorize **Foster/Premier Inc.** as Agents for **Winding Creek Townhome Association** to initiate debit/credit entries to my (our) account at the financial institution named below in the amount indicated on my (our) monthly assessment invoice/coupon.

I (we) understand that my (our) checking/savings account will be debited/credited from the invoice/coupon amount on **the 10th of each month**, or the first business day thereafter.

FINANCIAL INSTITUTION

NAME OF FINANCIAL INSTITUTION	
BANK ROUTING NUMBER	
BANK ACCOUNT NUMBER	
CHECKING () SAVINGS ()	You must attach a VOIDED check
This authorization will remain in effect until Foster/Premier Inc. as Agents for Winding Creek Townhome has received written notification from me (either of us) of its termination in such time and manner as to allow reasonable opportunity to act on it.	
SIGNED	_ SIGNED
NAME	NAMEPlease print
Please print	Please print
PHONE (home)	(business)
ADDRESS	DATE
Email Address	
Please forward this form in one of the following methods:	
Mail: Winding Creek Townhomes Fax- 815 c/o Foster/Premier, INC 456 B North Weber Rd Romeoville IL 60446	-886-9480 Email- ralonso@fosterpremier.com

Notice to Account Holder: This agreement authorizes the periodic transfer of funds from your account at the financial institution listed above by electronic means. Your rights and liabilities under this agreement are governed in part by federal laws and regulations dealing with electronic fund transfers. You should consult your agreement with the financial institution which holds your account for a more complete disclosure of your legal rights. The above-signed customer acknowledges that the information provided is true and accurate.