

Tanglewood West Homeowners Association

ACH Withdrawal of Monthly Homeowner Dues

ACH CREDIT OR DEBIT AUTHORIZATION AGREEMENT

Homeowner Name	Unit Address
Homeowner Phone Number	Homeowner E-mail

PRE AUTHORIZED PAYMENTS

I (We) hereby authorize **Tanglewood West Homeowners Association** hereinafter called the COMPANY, to initiate debit entries to my (our) checking account indicated below and the depository institution named below, hereinafter call DEPOSITORY, to debit the same to such account.

Depository (Bank) Name	Branch	
City	State	Zip Code
Routing Number	Account Number	

This authority is to remain in full force and effect until COMPANY 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 on it.

NAME(S) (Please Print)	DATE
SIGNATURE	SIGNATURE

Please attach a voided check to this form and submit to:

Tanglewood West Homeowners Association
 c/o Holmquist Liewald LLP
 3415 Cerritos Ave.
 Los Alamitos, CA 90720
 OR
Tracee@liewald.us