



AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH CREDITS)

I authorize **MontagnaProperties, Inc.** to initiate credit entries to my bank account described below:

I agree not to hold **MontagnaProperties, Inc.** responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

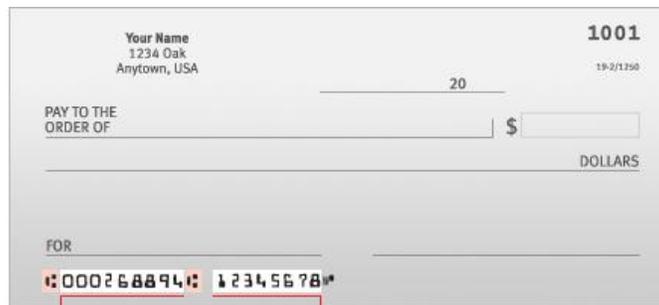
I agree that the credit entries authorized by this Agreement shall be subject to the rules of the National Automated Clearing House Association or other applicable clearing system as in effect on the date of the transaction.

This authorization will remain in effect until I provide **MontagnaProperties, Inc.** written notice of revocation. The notice of revocation must be provided to the same person or office to whom this authorization was delivered.

I acknowledge that an initial deposit of \$0.01 will be made to my account when it is set up for direct payments. This deposit is for the purpose of verifying my account and requires no additional steps on my part.

Account Information

Name of Financial Institution:	
Routing Number:	
Account Number:	Checking <input type="checkbox"/> Savings <input type="checkbox"/>



Routing number is found between the "Ⓜ" and "Ⓜ" symbols. **Account Number**

Signature

Mailing Address	Email Address
	Phone Number
Name (please print)	Social Security #:
Authorized Signature:	Date:
Name (please print)	Social Security #:
Authorized Signature:	Date: