



504 Clubhouse Way SW
Desert Aire, WA 99349

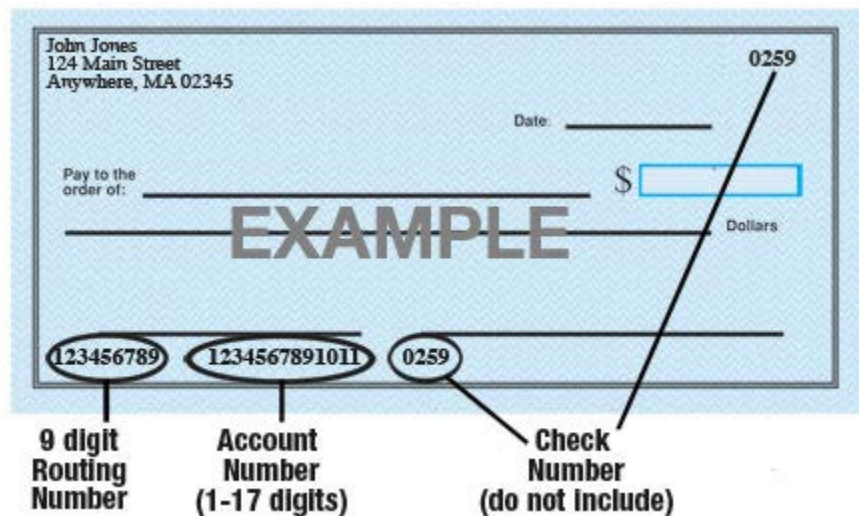
www.desertaire.org
office@desertaire.org

Phone: (509) 932-4839
Fax: (509) 932-5844

ACH Authorization Form

Please print and complete ALL the information below.

Name: _____
Address: _____
City, State, Zip: _____
Email: _____
Phone: _____



Name of Bank: _____

9-Digit Routing #: _____

Account #: _____

Type of Account: Checking Savings (Circle One)

Please attach a voided check for processing.

Would you like the ability to charge to your account? Yes No (circle one)

Desert Aire Owners Association is hereby authorized to process ACH payment from the account listed above on the 20th of each month a balance is due. This authorization will remain in effect until I modify or cancel it in writing.

Member Signature: _____

Date: _____