

# ACH FORM

## EL PASEO HOMEOWNERS ASSOCIATION

### Authorization Agreement for Preauthorized Payments

Company Name: **enTrust Association Management**  
**A Division of AMMRE, Inc.**  
**Property Management Trust Account for**  
**El Paseo Homeowners Association, Inc.**

**Property Street Address:** \_\_\_\_\_

I hereby authorize enTrust, Inc., hereinafter called COMPANY, to initiate debit entries to the

( ) **Checking account**      ( ) **Savings account**

Indicated below and the depository named below, hereinafter called DEPOSITORY, to debit the same to such account. **I am a signor on the account indicated below.**

**Name of Bank:** \_\_\_\_\_ **Amount:** Outstanding Balance

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Routing #:** \_\_\_\_\_ **Account:** \_\_\_\_\_

**FEES WILL BE DRAFTED ON THE FIRST BUSINESS DAY OF EACH MONTH.**

This authority is to remain in full force and effect until COMPANY and DEPOSITORY have received **written notification** from me of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

**NAME ON ACCOUNT:** \_\_\_\_\_ **(please print)**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Note: All written debit authorizations must provide that the receiver may revoke the authorization only by notifying the originator in writing the manner specified in the authorization.

**A COPY OF A VOIDED CURRENT CHECK MUST BE ATTACHED**

Return Form to:  
enTrust Association Management; 2823 Richmond NE; Albuquerque, NM 87107  
ph (505) 266-2000 / fax 266-0300