

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Mail this form with an attached void check to:

LCM Property Management, Inc.

1776 S. Jackson St. Suite 530

Denver, CO 80210

ASSOCIATION NAME: CANYON CLUB CONDOMINIUMS - (B18)

I (we) hereby authorize LCM Property Management, Inc. hereinafter called COMPANY, to initiate debit entries or automatically process drafts to my (our) Checking Savings account (select one) at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account one time per month after the 4th of each month.

DEPOSITORY (Your Bank)

BANK NAME _____ BRANCH _____

CITY _____ STATE _____ ZIP _____ PHONE _____

ROUTING NUMBER _____ ACCOUNT NO. _____

This authorization 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.

YOUR NAMES(S) _____ Begin in the Month of _____
(PLEASE PRINT)

YOUR ASSOCIATION ACCOUNT # OR ADDRESS AND UNIT # _____

YOUR PHONE NUMBERS-H _____ W _____ C _____

DATE _____ SIGNED X _____ SIGNED X _____

NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER (YOU) MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR (COMPANY) IN THE MANNER SPECIFIED IN THE AUTHORIZATION. YOU MUST STAPLE A VOID CHECK THAT IS ASSOCIATED WITH THE ABOVE NAMED DEPOSITORY TO THIS FORM AND MAIL THIS FORM WITH THE VOID CHECK TO THE ABOVE JACKSON ST ADDRESS.