PRISTINE FIELDS HOA AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

NOTE: A VOIDED CHECK MUST BE ATTACHED TO THIS FORM TO BE PROCESSED PROPERLY

TOTE! IT TOTAL CHECK WEST BE AT	THERED TO THIS TOTAL TO BE TRO	EESSED I KOI EKEI
I (we) hereby authorize Rj Community Mgt. (our) Checking Account or Savings Acinstitution named below, hereinafter called "purpose of collecting assessments for Pristin or about the 10th of each month in which as origination of ACH transactions to my (our) law.	count (select one) indicated below at the 'Depository," and to debit the same to sure Fields HOA. I (we) understand that this sessment payments are due. I (we) acknowledges	e depository financial ch account for the s debit will occur on owledge that the
Depository Name:	Branch:	
City:	State:	Zip:
Routing Number (9 digits):	Account Number:	
from me (or either of us) of its termination Depository a reasonable opportunity to act o		afford Company and
Name(s):(Please print)	(Please print)	
Signature(s):		
Date:		
NOTE: A VOIDED CHECK MUST BE AT	TACHED TO THIS FORM TO BE PRO	CESSED PROPERLY
PLEASE RETURN F	ORM AND VOIDED CHECK TO:	
	Rj Community Mgt. 20475 Route 19, #4 Jerry Township, PA 16066	
Management Company Use Only:		
Homeowner Account Number:		