



**2023 DEBIT AUTHORIZATION**

I \_\_\_\_\_, hereinafter called DEBTOR, authorize Heritage Hills Golf Corporation to initiate debit entries to my account indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to debit the same to such account. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. Law.

\_\_\_\_\_  
(Financial Institution Name)

\_\_\_\_\_  
(Address) (City/State) (Zip)

\_\_\_\_\_  
(Routing Number) (Account Number) Type of Account : \_\_\_\_Checking \_\_\_\_Savings

Date of Monthly Debit: \_\_\_\_1<sup>st</sup> or \_\_\_\_15<sup>th</sup>

Please debit my bank account during the following selected months: Jan \_\_\_\_, Feb \_\_\_\_, Mar \_\_\_\_, Apr \_\_\_\_, May \_\_\_\_, Jun \_\_\_\_, Jul \_\_\_\_, Aug \_\_\_\_, Sep \_\_\_\_, Oct \_\_\_\_, Nov \_\_\_\_, and Dec \_\_\_\_.

Authorizations will be divided equally by the number of months selected and will include a **\$3.00 per month** processing fee.

Total amount from Heritage Hills dues form \_\_\_\_\_

Number of monthly payments times \$3.00 \_\_\_\_\_

Total amount to be debited from bank for 2023 \_\_\_\_\_

DEBTOR acknowledges they are responsible for the full amount. Therefore, at no point in time shall DEBTOR stop payment for the months indicated above. If such event should arise where withdrawal of funds are denied by FINANCIAL INSTITUTION, DEBTOR shall be responsible for the outstanding balance in full within 30 days of denial.

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

