

ACH Debit Authorization

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENT

THE AUTOMATIC WAY TO MAKE YOUR ASSOCIATION PAYMENT

- When your payment is due, your account is debited automatically on the 3rd of the month.
- If the 3rd is on a weekend or holiday, your account is debited the next business day.
- Debits can be made from any US Financial Institution.
- **COMPLETE THIS AUTHORIZATION AND RETURN TO SWFL CAM SERVICES ALONG WITH A VOIDED CHECK**

Association Name _____

Account # or Property Address _____

Name _____

Phone _____ Email _____

Financial Institution _____ Phone _____

Routing No. _____ Account No. _____

Checking _____ Savings _____

I hereby authorize the above-named Association to debit my checking or savings account to collect my Association payments. This authorization is to remain in full force until the Association has received written notification from me within 15 days before the next transaction effective date.

Date _____ Signature _____

Return this completed form with a voided check (or copy of a voided check) to:

SWFL CAM Services
10231 Metro Parkway #204
Fort Myers, FL 33966

Scan and email to:

Accounting@SWFLCAM.com

Questions? Contact [Accounting](#) at 239-243-8700

OFFICE USE ONLY:

Posted: _____ Start Date: _____