

**KPG ACCOUNTING SERVICES, INC.
 AGREEMENT FOR PRE-AUTHORIZED PAYMENTS (AUTO PAY)**

KPG Accounting Services, through Iberia Bank, offers association members the ability to pay their association's regular assessments using automated electronic payments. This service allows you to have regular or one-time assessment payment(s) deducted automatically from your checking account, savings account or credit/debit card (**fees apply for credit/debit card transactions, SEE BELOW). Assessment payments are processed electronically through the Automated Clearing House (ACH). In order to participate in this service, association members must be current in assessments and must complete and return this authorization form to KPG Accounting Services, Inc.

OWNER INFORMATION

Association Name:		
Owner Name(s):		
Unit/Property Address:		
Contact Information:	Phone:	Email:
CHECKING/SAVINGS BANK INFORMATION (PLEASE ATTACH A VOIDED CHECK, IF APPLICABLE)		
Check Here for Bank Account: <input type="checkbox"/>	Name on Account:	
	Routing Number (must be 9 digits):	
	Account Number:	
	Financial Institution:	
CREDIT OR DEBIT CARD INFORMATION (**FEES APPLY, SEE BELOW)		
Check Here for Credit/Debit Card: <input type="checkbox"/>	Debit or Credit Card Number:	
	Expiration Date:	
Name on Account:		
Billing Zip Code:		

DO YOU WANT RECURRING PAYMENTS? YES NO

Start Date (for RECURRING PAYMENTS): _____

I hereby authorize KPG Accounting Services, Inc. as agent for the ASSOCIATION, to initiate debit entries in the amount of my monthly or quarterly assessments and any subsequent special assessments from my account indicated above. I also authorize the Financial Institution named above to debit the same such account. This authority is to remain in full force and effect until the Community and Financial Institution have received written notification from me of its termination in such time and manner as to afford the Community and the Financial Institution a reasonable opportunity to act upon the request. I further understand that payments will be deducted from my account between the first and tenth of each month/quarter in which the assessment is due, and should my payment be returned for any reason, I understand that I can be terminated from the program and I will be charged a \$25 administrative fee.

DO YOU WANT A ONE-TIME PAYMENT? (to be processed immediately) YES NO

**** CREDIT OR DEBIT CARDS- I understand that CREDIT CARD transactions will incur a fee of 2.95% of the total amount paid and DEBIT CARD transactions will incur a fee of \$4.95 per transaction (\$3000.00 limit). There are NO fees for Checking/Savings Account transactions. ****

Date: _____

Signed: _____

Signature of Account Holder

**PLEASE EMAIL THIS FORM TO AR-MANAGER@KPGACCOUNTING.NET
 OR MAIL THIS FORM TO:**

KPG Accounting Services, Inc.
 3400 Tamiami Trail N. #302
 Naples, FL 34103