

Portofino Shores
C/o Bayshore Assoc. Mgmt.
PO Box 880038
Port St. Lucie, FL 34988-0038

DIRECT DEPOSIT AUTHORIZATION

One Account

I (we) hereby authorize Portofino Shores HOA, hereinafter called "Company", to initiate credit entries and, if necessary, debit correction and adjustment entries to my(our) account at the financial institution listed below.

(Financial Institution) _____ (Branch) _____

(Address) _____ (City/State) _____ (Zip) _____

(Routing & Transit #) _____ (Account #) _____

(Account Type) Checking/Draft Savings/Share
MONTHLY \$

This authority is to remain in full force and effect until "Company" has received written notification from the recipient of its termination in such a time and manner as to afford "Company" a reasonable time to act upon it.

(Recipient Signature) _____ (Date) _____

(Print Name) _____

(Property Address) _____

(Please attach a voided check or financial institution account verification letter to this form.)

