

# Wild Eagle Lodge Condominium Association

1965 Wild Eagle Lane

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## ACH Transfer Authorization Form

I authorize **Wild Eagle Lodge Condominium Association** to directly withdraw my monthly dues from the bank account listed below. *I have attached a voided check or deposit slip for the account specified below:*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Effective Date: \_\_\_\_\_

### Transfer Instructions

#### Account Information

Accountholder Name: \_\_\_\_\_

Financial Institution Name: \_\_\_\_\_

Financial Institution Address: \_\_\_\_\_

Financial Institution Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_      \_\_\_\_\_ Checking      \_\_\_\_\_ Savings

I, the Accountholder, understand that this authority will remain in effect until I notify **Wild Eagle Lodge Condominium Association** in writing of the termination of this authorization at least **three (3) banking days** prior to the next scheduled transfer. I agree to maintain a sufficient balance in the referenced deposit account to fund the full debit amount on each scheduled transfer date. I acknowledge that this ACH transfer must comply with U.S. Law. **Wild Eagle Lodge Condominium Association** reserves the right to revoke this authorization at any time.

Accountholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

