AUTHORIZATION FOR AUTOMATIC PAYMENT FORM AND INSTRUCTIONS

FILL IN YOUR APARTMENT NUMBER. PLEASE BE SURE TO PUT A "D" OR "E" BEFORE THE APARTMENT NUMBER TO INDICATE WHICH TOWER YOU LIVE IN.

PLEASE STAPLE **VOID CHECK HERE**

AUTHORIZATION FOR AUTOMATIC PAYMENT (DEBIT\$) Kukui Plaza

1255 Nuuanu Avenue Honolulu, Hawaii 96817-4017

I (we) authorize the Association of Owners of Kukui Plaza (Association) to initiate debits, and/or correct previous debits, to the below indicated account at the identified Financial Institution, solely for payment of recurring monthly maintenance fees regularly assessed by

the Associati		ation shall NOT exter		ssessments, fines, or la				
FINANCIAL INSTITUTION:		ABC Bank		ADDRESS	ADDRESS: 123 Anywhere Street			
BRANCH: _		CITY:		OV.	_ STATE:	ST ZIP:	12345	
This autho	ority is to remain i	n full force effect until	you have rec	eived written notification				
NAME: John Doe				APARTMENT NUMBER: <u>E0001</u>				
1/1/0000		SIGNATURE: John Doe						
		N WILL TAKE EFFEC	T NOT LESS	THAN 10 DAYS AFTE	R ACCEPTA	NCE BY THE I	3ANK	
1:							CHECKING SAVINGS	
	PLEA			ND RETURN IT TO THE N				
PLEASE S		AUTHORIZATION FOR AUTOMATIC PAYMENT (DEBITS) Kukui Plaza						
VOID CHECK HERE		1255 Nuuanu Avenue Honolulu, Hawaii 96817-4017						
indicated acc	count at the identif	fied Financial Institution ation shall NOT exter	on, solely for p	ciation) to initiate debits payment of recurring mossessments, fines, or la	onthly mainter	nance fees reg	ularly assessed by	
				ADDRESS:				
BRANCH: _		CITY:			_ STATE:	ZIP:		
	-		•	eived written notificatior	,	either of us) o	f its termination.	
				APARTMENT NUMBER	R:			
DATE:		SIGNATURE: _						

AUTHORIZATION WILL TAKE EFFECT NOT LESS THAN 10 DAYS AFTER ACCEPTANCE BY THE BANK

ACCOUNT NUMBER

CHECKING SAVINGS

FINANCIAL INSTITUTION ROUTING NO.