



JEFFERSON POINTE

I (WE) hereby authorize Jefferson Pointe Apartments, herein after called COMPANY, to initiate debit entries and/or correction entries to our ____ checking ____ savings account (select one) indicated below at the depository named below, herein called DEPOSITORY, to credit the same such account.

DEPOSITORY NAME

BRANCH

CITY

STATE

BANK TRANSIT/ABA NO.

ACCOUNT NO.

This authorization is to remain in full force until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY reasonable opportunity to act upon it.

PRINTED NAME(S)

BUILDING & APT. NUMBER

SIGNATURE(S)

DATE

SIGNATURE(S)

DATE

PLEASE ATTACH VOIDED CHECK HERE.

Resident Signature

Leasing Agent Signature