

# The Crossings of Millbrook

## SINGLE ENTRY DEBIT AUTHORIZATION FORM

I (we) hereby authorize The Crossings of Millbrook to initiate debit entries to my (our) account indicated below, and to debit or credit the same such account. If this item is returned unpaid, I authorize an additional returned item fee of the maximum amount allowed by the state to be charged to this account.

### Checking or Savings Account

<b>Type of Account</b>	<input type="checkbox"/> Checking <input type="checkbox"/> Savings		
<b>Depository Financial Institution Name</b>			
<b>Name on Account</b>			
<b>Routing Number</b>		<b>Account Number</b>	

### Credit Card Account

<b>Card Type</b>	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express		
<b>Name on Card</b>			
<b>Credit Card Billing Address</b>			
<b>Card Number</b>			
<b>Expiration Date</b>		<b>CVV</b>	

### Payment Setup Information

<b>Amount</b>		<b>Transaction Date</b>	
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### Authorization

This authorization is to remain in full force and effect for the number of payments authorized above or until The Crossings of Millbrook has received written notification from me (or us) of its termination, in such time and such manner as to afford The Crossings of Millbrook a reasonable opportunity to act on it. There will be a \$10 service charge applied to credit card payments.

<b>Name</b>		<b>Unit #</b>	
<b>ID#</b>		<b>State</b>	
<b>Signature</b>			
<b>Date</b>			