



I (we) _____ hereby authorize CMG, hereinafter called COMPANY, to initiate credit entries and to initiate, if necessary debit entries and adjustments for any credit entry in error to my (our) account indicated below and the financial institution named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account. This authority is to remain in full force and effect 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 a reasonable opportunity to act on it.

Depository Name _____

City, State and Zip _____

Type of Account _____ Checking _____ Savings

Transit/ABA Number _____

Account Number _____

Name: _____

Rental Property Address: _____

Owner Signature and Date

Owner Signature and Date

Attach voided check here or email to accounting@cecilmanagement.com

NOTE: Deposit slips do not show the transit/ABA number and therefore cannot be used.