

ACH AUTHORIZATION

SOMA DEVELOPMENT HOMEOWNERS ASSOCIATION, INC.

All SoMa Homeowners are required to pay monthly assessments by ACH draws on a bank account owned by the Homeowner.

I hereby authorize SoMa Development Homeowners Association, Inc. to initiate debt entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my checking or savings account indicated below.

Name: _____

SoMa Address: _____

Mailing Address: _____

Bank Name: _____ Account Type: Checking Savings

Transit/ABA Number: _____ Account Number: _____

This authority is to remain in full force and effect until SoMa Development Homeowners Association, Inc. has received written notification from me 30 days prior to its termination in such time and in such manner as to afford SoMa Development Homeowners Association, Inc. reasonable opportunity to act on it.

Signature: _____

Date: _____

Please return this signed form to:

PJ Morgan Real Estate

ATTN: SoMa Homeowners Association

7801 Wakely Plaza

Omaha, NE 68114

Please direct any questions to PJ Morgan Real Estate office: 402-397-7775

YOU MUST ATTACH A "VOIDED" CHECK FOR VERIFICATION OF YOUR ACCOUNT INFORMATION.

Affix Check Here