

Guardian Association Management, LLC

**AUTO WITHDRAWAL INITIATION FORM**

Save time and money by using automatic debit for your Semi-Annual payments. Please submit this form with a **Blank/Voiced** check to Guardian Association Management, LLC. Your authorization and **Blank /Voiced** check must be received at least 15 days prior to the month in which the automatic deduction is to be initiated.

Property Name- **Sunrise Community Association, Inc.**

Lot Number \_\_\_\_\_

Name (please Print) \_\_\_\_\_

Address \_\_\_\_\_

City, State & Zip Code \_\_\_\_\_

Month Recurring Auto Debit to begin \_\_\_\_\_

Checking (  )      Savings (  )

I acknowledge that Guardian Association Management, LLC will originate a debit on the **1<sup>st</sup> of the month** to my Checking/Savings account on a recurring basis.

Signature \_\_\_\_\_

Please remit to:  
Guardian Association Management, LLC.  
P. O. Box 143005  
Gainesville, FL 32614

**\*PLEASE INCLUDE A BLANK/VOIDED CHECK\***