



# Venture Out at Mesa, Inc.

5001 E. Main St.  
Mesa, AZ 85205-8008

"A 55+ Community"

Administration (480) 832-0200  
Info@ventureoutmesa.com  
www.ventureoutmesa.com

## SUREPAY AUTHORIZATION AGREEMENT

For Pre-Arranged Payments (ACH Debits)

\_\_\_\_\_  
House Number and Street Name

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Start Date: \_\_\_\_\_

The current quarterly assessment is \$ 800.00

\*\*\*Please complete bank information and **ATTACH A VOIDED CHECK** below:\*\*\*

**SUREPAY CAN ONLY BE MADE FROM USA BANKS**, we are not able to process on foreign banks.

DEPOSITORY Name: \_\_\_\_\_ Branch: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Routing #: \_\_\_\_\_ Account #: \_\_\_\_\_  
(9-digit number)

I(We) hereby authorize **Venture Out**, to initiate debit entries to my (our) Checking account indicated below and the depository named below, hereafter called DEPOSITORY, to debit the same to such account.

This authority is to remain in full force and effect until **Venture Out** and DEPOSITORY has received written notification from me (of either of us) of its termination in such time and in such manner as to afford **Venture Out** and DEPOSITORY a reasonable opportunity to act on it. I (either of us) have the right to stop payment of a debit entry by notification to DEPOSITORY at such time as to afford DEPOSITORY a reason opportunity to act on it prior to charging account. After account has been charged, I have the right to have the amount of an erroneous debit immediately credited to my account by DEPOSITORY, provided I (we) send written notice of such debit entry in error to DEPOSITORY within 15 days following issuance of the account statement or 45 days after posting, whichever occurs first.

Signature: (please print) \_\_\_\_\_ Date: \_\_\_\_\_

Signature: (signed) \_\_\_\_\_