

**Booth Farms Community Association**  
C/O Foster Management  
PO BOX 6125  
Longmont, CO 80501

July 1, 2008

TO:  
Booth Farms Community Association Property Owners

RE: ACH Withdrawal Application

Dear Booth Farms Community Association Property Owner,

Booth Farms Community Association, Inc. is proud to announce that an automatic payment service is now available to you for the payment of your Semi-Annual HOA dues. With this service, the semi-annual payment of your association dues can be automatically deducted from your checking or savings account and paid directly to the association, all at no additional cost to you. Once the service has begun, your HOA payments will be automatically deducted from your checking/savings account on or about the 5<sup>th</sup> of the month in which an assessment is due. There will no longer be a need to mail coupons and payments, saving you time and money.

To enroll in this service, please fill out the attached authorization form, and mail it back to the address listed above along with a voided check. A confirmation of receipt for your authorization will be mailed to you, along with notice of when the automatic payments will begin.

If you have any questions regarding this service, please do not hesitate to contact me via email at **Kevin@FosterMgmt.net** or via telephone at **(303) 532-4148**.

Sincerely,



Kevin Lucas CPA  
Foster Management – Community Managing Agent

# Booth Farms Community Association, Inc.

## AUTHORIZATION AGREEMENT AUTOMATIC DEPOSITS (ACH WITHDRAWALS)

Association Name: **Booth Farms Community Association, Inc.** TAX ID Number: **46-0479711**

I(We) hereby authorize Booth Farms Community Association, Inc., Hereinafter called ASSOCIATION, to initiate debit entries to my (our)  Checking Account /  Savings Account (**Select One**) indicated below at the depository financial institution named below, and to debit the same to such account. I (We) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law.

Financial Institution Name: \_\_\_\_\_ Branch: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

ACH/Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_  
(Must be Nine Digits)

This authorization is to remain in full force and effect until ASSOCIATION has received written notification from me (or either of us) of its termination in such time and in such manner as to afford ASSOCIATION and the FINANCIAL INSTITUTION a reasonable opportunity to act on it.

**Booth Farms Community Association, Inc.** Current Amount to be Debited: **\$160.00**  
HOA Acct Number: \_\_\_\_\_, Property Address: \_\_\_\_\_

\_\_\_\_\_  
Daytime Phone Number Email Address

\_\_\_\_\_  
Print Account Holder Name Print Co-Account Holder Name

\_\_\_\_\_  
Account Holder Signature Date Co-Account Holder Signature Date

**PLEASE ATTACH A VOIDED CHECK TO THIS FORM**

**Please Return Form to Booth Farms Community Association  
C/O Foster Management  
PO BOX 6125  
Longmont, CO 80501  
Phone #: (303) 532-4148 Fax #: (888) 697-8805**