



**OCEANA SOUTH  
CONDOMINIUM ASSOCIATION, INC**  
10600 South Ocean Drive  
Jensen Beach, FL 34957

EMAIL: OS2MANAGER@COMCAST.NET  
Tel: (772) 229-1898  
Fax: (772) 229-1911

**AUTHORIZATION AGREEMENT FOR DIRECT PAYMENT**

I/We hereby authorize Seacoast National Bank (SCNB) to initiate EFT debit entries (withdrawals) from my/our checking account for credit to the below-named account quarterly in the amount declared by the Board of Directors at the annual budget meeting. Debit entries will be processed on or around the dates quarterly fees are due each year as mandated in OSII By-Laws: January 1, April 1, July 1 and October 1. This authority will remain in effect until I/we notify SCNB otherwise. I/we understand the amount of the debit may change on an annual basis according to the requirements of the Board of Directors. I/we acknowledge that the origination of ACH transactions to my/our account must comply with the provisions of the U.S. law. I (we) confirm that the source of the funds for payment of these debit entries will not originate from a Financial Agency's office located outside the territorial jurisdiction of the United States.

Owner Name(s): \_\_\_\_\_ Unit # \_\_\_\_\_  
Please print

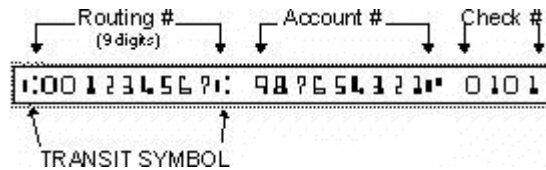
Name of Your Bank: \_\_\_\_\_

Bank Routing/Transit Number \_\_\_\_\_ Account # \_\_\_\_\_

Date first payment is to be debited: \_\_\_\_\_

**Routing/Transit Number:** the 9-digit number found on lower left side of check between the transit symbols.

**Account Number:** the next series of numbers after the Routing/Transit number.



If you are unsure of the numbers, please attach a VOIDED CHECK to the form and we will process the information for you.

Account Owner's Signature(s): \_\_\_\_\_  
\_\_\_\_\_

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

Mail to: Oceana South Condominium Association, Inc.  
Attn: Tim Erickson, Property Manager  
10600 South Ocean Drive  
Jensen Beach, FL 34957

Email: [os2manager@comcast.net](mailto:os2manager@comcast.net) Fax: (772) 229-1911