

In the past, homeowners have asked that Gassen Management provide more and varied ways to pay association fees. With this in mind, you now have the following four payment options:

**1. AUTOMATIC PAYMENT PROGRAM (ACH)**

- With this option your association fees are automatically withdrawn from your checking account on *the 5<sup>th</sup> of each month*.
- To participate in this program simply complete and sign the enclosed form and return it with a VOIDED check to Gassen Company.

**2. LOCKBOX / MAIL**

- Enclosed are payment coupons and pre-addressed envelopes for payment of your association fees (which are due on the 1<sup>ST</sup> of each month). If you choose to use this option all you need to do is issue a check or money order payable to *GREENSBORO CONDO CONDOMINIUM ASSOCIATION* and mail it with a payment coupon in the envelopes provided (this P.O. Box is the address for the lockbox). *Please write your account number on check.*

NOTE

Do NOT use the self-addressed envelopes for correspondence. All correspondence should be mailed to Gassen Company, 6438 City West Parkway, Eden Prairie, MN, 55344-3245.

**3. BILL PAY / ON-LINE BANKING CHECKS**

- For those of you who pay your bills through on-line banking, you simply need to contact your bank to establish *GREENSBORO CONDO ASSOCIATION* as a payee, requesting payment be made *at least 7 days prior to due date*, and utilizing the following address:

Gassen Company  
P. O. Box 485  
Chaska, MN 55318-0485

NOTE

Your account number should be referenced on top left corner of every check (This is found on the bottom of each payment coupon).

# GASSEN | AUTHORIZATION FOR AUTOMATIC PAYMENT



## GREENSBORO CONDO ASSOCIATION

I authorize Gassen Company and the financial institution named below, on behalf of *GREENSBORO CONDO ASSOCIATION*, to initiate entries to my checking/savings account. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it.

---

NAME OF FINANCIAL INSTITUTION

---

ADDRESS OF FINANCIAL INSTITUTION

---

NAME – PLEASE PRINT CLEARLY

---

STREET

CITY

STATE

ZIP CODE

---

HOME PHONE NUMBER

WORK / CELL PHONE NUMBER

---

CHECKING / SAVINGS ACCOUNT NUMBER:

---

FINANCIAL INSTITUTION ROUTING NUMBER

(ROUTING NUMBER IS ON BOTTOM LEFT PORTION OF YOUR CHECK BETWEEN THE : : SYMBOLS):

---

SIGNATURE

DATE

Please attach a VOIDED CHECK to this form and mail to Gassen Company, 6438 City West Parkway, Eden Prairie, MN, 55344-3245. Please return this form to Gassen Company by the 20th of the month prior to the month you wish this service to begin. Automatic payments will be withdrawn on the 5th of the month.