

AMH | ASSET MANAGEMENT HOLDINGS. LLC

8350 Bee Ridge Road, Suite 308
Sarasota, FL 34241
800-217-3880
Fax: 941-926-7744

AUTOMATIC BANK DRAFT AUTHORIZATION FORM

I authorize Asset Management Holdings, LLC ("AMH"), to draft my account specified below until the loan reaches maturity or is paid in full. I agree to make my monthly payments until the automatic bank draft payments become effective. I agree to maintain a sufficient balance to cover the automatic bank draft payments on each payment date. You may rely on this authorization until you receive written notice of revocation at least 15 days in advance of the next payment date.

AMH Account Number

Borrower Name

Bank Routing Number

Bank Account Number

Bank Name

Bank City and State

This is a (Please check one): Checking Account Savings Account

Amount of Monthly Payment: \$_____

Date of first payment: _____

Signature of Borrower

Signature of Co-Borrower

Borrower's Phone Number

Today's Date

If automatic payment is returned as a result of insufficient funds, both AMH and the Borrower's financial institution may assess a fee.

Please return this completed form to:

Mailing Address
8350 Bee Ridge Road
Suite 308
Sarasota, FL 34241

Fax Number
(941) 926-7744

Email Address
Customerservice@amhusa.com