

AUTHORIZATION FOR AUTOMATIC PAYMENT

I authorize Kentucky Realty Corporation and the financial institution named below 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. I can stop payment of any entry by notifying my financial institution (3) days before my account is charged. I can have the amount of an erroneous charge immediately credited my account up to (15) days following issuance of my financial institution statement or (60) day after posting, whichever occurs first.

NAME OF FINANCIAL INSTITUTION _____

Address _____

City _____ State _____ Zip _____

ACCOUNT NUMBER _____ This is a () Checking () Savings

ROUTING NUMBER _____ (9 digit string at the bottom of your checks)

A VOIDED CHECK MUST ACCOMPANY THIS FORM

I authorize Kentucky Realty Corporation to initiate electronic entries to my checking/savings account and agree to the terms on the authorization for payment of my monthly maintenance fee dues.

NAME OF COMPLEX _____ Date _____

Signature _____ Print _____

Please complete ALL fields in this form, attach a VOIDED check and mail to:

Kentucky Realty Corporation
attn/ Accounting Dept.
3944 Bardstown Road
Louisville, KY 40218

Questions? Call 502-473-0003