

DIRECT DEBIT FOR ASSOCIATION DUES

Virginia Run Community Association Authorization Agreement for Direct Payment

Complete ALL of the following information OR include a voided check and ONLY sign and date on the bottom line.

Bank _____ Branch/Location _____

City _____ State _____ Zip Code _____

Routing # (located on the bottom of the check) _____

Bank Account # _____

Virginia Run Account # VAR _____

Name(s) _____

Address _____

Daytime Phone # _____ Email _____

Signature _____ Date _____

Please send the completed form to management@virginiarun.com or drop it off in the door mail slot at the Community Center, 15355 Wetherburn Court, Centerville, VA 20120.