

ELECTRONIC FUNDS TRANSFER CANCELLATION FORM

Community Name: \_\_\_\_\_

Unit Account#: \_\_\_\_\_

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

I hereby authorize Campbell Property Management (the "Company") to cancel debit (withdrawal) transactions from my checking account as indicated below and the depository name below to cancel debit to such account.

Debit Amount: \_\_\_\_\_

Bank Routing/Transit #: \_\_\_\_\_

Bank Account #: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Account Owner's Name(s) \_\_\_\_\_ (Please Print)

Account Owner's Signature(s) \_\_\_\_\_ (Please Print)

**CAMPBELL PROPERTY MANAGEMENT**

**1215 E. HILLSBORO BLVD.**

**DEERFIELD BEACH, FL 33441**

**954-427-8770**

**Please return form to: [ar@campbellproperty.com](mailto:ar@campbellproperty.com)**