

MARION COUNTY

AUTO PAY ENROLLMENT FORM FOR PROPERTY TAXES

(Please Print or Type All Information)

SECTION A: ENROLLMENT OR CHANGE AUTHORIZATION

COMPLETE ONE FORM FOR EACH TAX ID NUMBER

Complete this section for new enrollments, financial institution or account changes. Enrollee may select one account (either checking or savings) with one financial institution.

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Tax ID Number (EXAMPLE: 2008-1-MAR000)

SELECT ONE: New Enrollment Change

Name as shown on tax statement

Name of Financial Institution

Address as shown on tax statement

Address (City) of Financial Institution

City, State, Zip

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Checking

Routing Number (see example below)

Savings

Daytime Phone Number

E-Mail Address

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Account Number (see example below)

I hereby authorize the Marion County Treasurer and the financial institution named above to initiate entries to my bank 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 five (5) days before my account is charged. I also understand that if I change or close my account at the financial institution listed on this authorization, I must immediately notify the Treasurer's Office. All notifications to the Marion County Treasurer's Office must be in writing and sent to the address shown below.

(Signature)

(Date)

PLEASE CHOOSE ONE WITHDRAWAL OPTION

On the due dates in December and May

In monthly installments of \$ _____ beginning _____

NOTE:

To change a withdrawal option, you must submit a new enrollment form.

SECTION B: CANCELLATION

Complete this section to cancel the Auto Pay Withdrawal Authorization. Effective Date: _____

I hereby cancel the authorization for Marion County to originate deductions to my checking/savings account for payment of property taxes.

(Signature)

(Date)

PLEASE ATTACH VOIDED CHECK HERE: (do not send deposit slip)

John & Jane Doe 123 Anywhere St. Marion, KS 66861	0426	
Pay to the Order Of _____	20 _____ \$ _____ Dollars	
USA Bank Anywhere, USA		
FOR _____		
123456789	1002003007897	0426

Routing No.

Checking Account No.

**RETURN SIGNED
AGREEMENT AND
VOIDED CHECK TO:**

Jeannine Bateman
Marion Co. Treasurer
200 S. 3rd St., Ste 102
Marion, KS 66861