

# 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

☐

Checking

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Routing Number (see example below)

☐

Savings

City, State, Zip

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Account Number (see example below)

Daytime Phone Number

E-Mail Address

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 _____	
<b>123456789</b>	<b>1002003007897</b>
<b>0426</b>	
↑ Routing No.	↑ Checking Account No.

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

Susan Berg  
Marion Co. Treasurer  
200 S. 3<sup>rd</sup> St., Ste 102  
Marion, KS 66861