

**Automatic Draft/Payment Authorization
Townhomes of Shadow Glen**

Date: _____

Townhomes of Shadow Glen Homeowners Association
c/o Paragon Management Group, Inc.
845 Bell Road, Suite 210
Antioch, TN 37013-2114

Request to Establish Automatic Draft/Payment

Name: _____

Address: _____

Routing Number / ABA Number: _____

Bank Account Number: _____

(VOID check attached)

I hereby authorize Paragon Management Group, Inc. to automatically draft my account for payment each month starting _____, 2007 from the bank account indicated above on the 5th of each month (currently \$75). This payment is for the purpose of satisfying maintenance fee requirements for the Townhomes of Shadow Glen. I further authorize Paragon Management Group, Inc. to initiate adjustment entries for payments made in error. This authority will remain in effect until I have cancelled it in writing.

Signature

Printed Name: _____