

REAL ESTATE AGENCY STATE OF OREGON

FEE TRANSMITTAL

Submit the completed form, cover letter and fee by fax or mail

USE THIS FORM WHEN SUBMITTING YOUR FILING BY COMPLETING THE FOLLOWING INFORMATION;

Date _____	Name _____
Address _____	
City _____	State _____ ZIP _____
Fee in the amount of \$ _____ is for the following timeshare:	
Name of project _____	
File Number, if applicable _____	

PAYMENT OPTIONS:

CHECK or
CREDIT CARD:

<input type="checkbox"/> VISA		<input type="checkbox"/> MasterCard		Card No. _____ - _____ - _____ - _____
Billing Address _____				Expiration Date (mo/yr) __ __ / __ __
Authorized Signature _____	Authorized Name _____	Phone _____		
Name on Credit Card _____	Email Address for receipt (required) _____			

Mail to: Oregon Real Estate Agency, 530 Center St NE #100, Salem, OR 97301
Or fax back to: 503-378-2491

Oregon Real Estate Agency

ACH DEBIT AUTHORIZATION FORM

Instructions

1. Fill in your name at the top of the form.
2. Mark the box before type of account to indicate whether your payment will be deducted from your checking or savings account.
3. Attach a voided check for verification of all financial institution information. If you are unable to attach the voided check, please be sure you fill in your account number and routing number.
4. This authorization authorizes the state to debit your account on a one-time basis. If your checking account authorized for this debit has a debit filter/block in place, please contact the Oregon Real Estate Agency to obtain the company ID. This 10 digit number will need to be provided to your bank to allow the debit transaction to process through your account successfully.
5. If you are funding this debit with specific payment instructions to move funds from a bank outside the United States to a US financial institution, please check the box indicating this. A representative from the state will contact you with more instructions on how this payment will be processed. Depending on how this transaction is funded, you may not be able to have your account automatically debited by the state agency you are working with.
6. **Be sure to sign the form and return to the Oregon Real Estate Agency: Fax back to: 503-378-2491 or mail to: Oregon Real Estate Agency, 530 Center St NE #100, Salem, OR 97301**

I, _____, authorize the Oregon Real Estate Agency to initiate an electronic debit entry for payment of _____ Timeshare to my:

TYPE OF BANK ACCOUNT:

Checking account Savings account
Business Account (Check this box only if the checking or savings account is a business account),

I have a Debit Filter or Debit Block on this account. Please contact me with the Company ID that I can provide to my bank to allow this debit to process as authorized.

BANKING INFORMATION:

Financial institution name _____

Account number _____

9 digit financial institution routing number _____

Financial institution city, state and postal code _____

INTERNATIONAL ACH DETERMINATION: Indicate by checking the box below if you have payment instructions to transfer funds from a Non US Financial Institution to a US Financial Institution explicitly for funding of this debit transaction:

I have payment instructions in place with a non US Financial Institution to transfer funds to my US Financial Institution identified above for the specific purpose of funding this one-time debit transaction.

Changes to your ACH Direct Debit Authorization:

In order to warrant that payments the State originates through the ACH network comply with all US Laws, the State must rely upon the employee or organization to advise if this debit authorized by you is being funded from a Non US Financial Institution explicitly for the purpose of this payment. Please contact (Insert Agency Contact) with any changes to your ACH Debit Authorization.

I acknowledge that the origination of ACH transactions to the authorized account must comply with the provisions of Oregon and U.S. law.

Name on account _____ Signature _____

Address on account _____

Date _____ Phone number _____ Email address for receipt _____