

**TRUIST ASSOCIATION SERVICES**  
**Truist Bank, formerly known as BB&T**  
**ASSOCIATION PAY – AUTHORIZATION TO CANCEL**

Mail To: Truist Association Services, P.O. Box 2914, Largo, FL 33779-2914  
Phone No.: 727-549-1202  
Fax To: 727-548-0277 or Toll Free Fax: 866-297-8932  
Email Address: ASDAutopay@Truist.com  
Attention: Truist Association Services

- Truist Association Services must receive this form by the 27th of the month to be effective for the next debit month. If the 27th is on a weekend or a holiday, Truist Association Services must receive this form by the last business day prior to the 27th. Some exceptions apply, visit Truist.com/Payments to view an Association Pay deadline calendar.
- Management companies or self-managed associations are authorized to complete a cancel request on behalf of homeowners by using Web Vault Unit Manager or by completing this form.

Do you want all payment obligations on Association Pay for this unit cancelled?  Yes  No  
If No, please list the specific payment obligations that you would like to cancel.

If you are cancelling Association Pay for units in different associations, please submit the information on separate cancel forms.

**I authorize Truist Association Services to CANCEL Association Pay, for the unit below.**

Terminate Service: Month: \_\_\_\_\_ Year: \_\_\_\_\_

Association/Community Name: STONEHEDGE RESIDENTS

Homeowner's Name: \_\_\_\_\_

Homeowner's Phone No.: \_\_\_\_\_ Contact email address: \_\_\_\_\_

Homeowner's Unit No.: \_\_\_\_\_ Amount of Payment: \_\_\_\_\_

\_\_\_\_\_  
Signature of Authorized Signer on Bank Account that is debited

\_\_\_\_\_  
Date

**Management Company Use Only:**

Reason for Cancel

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Management Company Name  
Truist Bank, Member FDIC.