

Morrison County, Minnesota

Authorization for Automatic Withdrawal

Property Information: (Please Print)

Taxpayer's Name(s): _____

Property Identification Number								
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Taxpayer's Name(s): _____

Property Identification Number . .

Taxpayer's Name(s): _____

Property Identification Number . .

**Additional Parcels may be added on the back, if necessary please indicate:*

Taxpayer's Mailing Address	Address:		
	City:	State:	Zip:
Daytime Phone Number	<input type="checkbox"/>	()	
Home Phone	<input type="checkbox"/>	()	

The account information is as follows: (Please attach a voided check or savings slip providing the following information)

Checking or Savings

Name(s) on Account: _____

Financial Institution Name: _____

Reporting/Transit Number on

Routing/Transit Number

*Please return the completed form to: Morrison County Treasurer's Office
213 1st Ave S.E.
Little Falls, MN 56345*

I hereby authorize Morrison County to debit my (our) account for payment of real estate taxes for the parcel described above. This authority is to remain in effect until Morrison County has received written notification to terminate this authorization, or Morrison County requires termination and notifies me.

Signature: _____ Date: _____

Signature: _____ Date: _____