

Anacortes Farmers Market Authorization for Direct Deposit

I authorize **Anacortes Farmers Market** to deposit any compensations (primarily token and incentive reimbursements) automatically to the account indicated below and, if necessary, adjust or reverse a deposit made to my account in error. This authorization will remain in effect until I cancel it in writing and in such time as to afford **Anacortes Farmers Market** a reasonable opportunity to act on it.

Name on Bank Account: _____

Bank Routing Number: _____ Account Number: _____

Or attach voided check below

Indicate Checking _____ or Savings _____

Federal Tax ID # _____

(commonly your Social Security number, but whatever you use on your Federal Tax return. Not the state UBI #)

Name _____

Farmers Market Booth/Business Name _____

Email: _____

Date: _____

Signature: _____

Please attach voided check here