



GO GREEN

Portland Farmers Market - ACH Authorization Form

Portland Farmers Market is pleased to offer Electronic Funds Transfers (called ACH). This is an optional, no charge service that allows you to have your monthly invoices debited from your bank account, and/or your token reimbursements credited to your bank account. This is a great way to pay your bills on time, avoiding costly late fees, and to have your token payments deposited directly.

To sign up for this service, fill out this form and **return the original signed form to PFM's Info/Managers Booth or to the PFM office at the address below along with a VOIDED CHECK** from your bank account.

You can have ACH debits from or credits to your bank account, or you can have it both ways.

Please check the boxes here:

Your monthly invoice(s) will be debited from your bank account on the 20th of the following month (or next business day). A copy of your invoice(s) will be sent to you at 10 calendar days before this debit.

Your token and market voucher reimbursements will be credited to your bank account at the end of the second and fourth weeks of each month. A copy of your token remittance will be emailed to you.

I would like my correspondence emailed to this address: _____

Vendor / Company Name: _____

I (we) hereby authorize Portland Farmers Market (PFM) to initiate debit and/or credit entries to my (our) **checking** **savings** account (select one) at the financial institution named below, and to debit and/or credit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Financial Institution (Bank): _____ Branch: _____

City: _____ State: _____ Zip: _____

Routing Number: Account Number: _____
(9 digit #)

Detail ID (if required by your financial institution): _____

Our policy for uncollectable funds applies to ACH debits. For each returned item, your account will be charged **\$25.00** and you authorize us to make an electronic fund transfer from your account to collect this fee.

This authority is to remain in full force and effect until PFM has received **written notification** from me (or either of us) of its termination in such time and in such manner as to afford company and financial institution a reasonable opportunity to act on it.

Name(s): _____ Tax id number: _____
(please print)

Signature: _____ Date: __/__/----

Name(s): _____ Tax id number: _____
(please print)

Signature: _____ Date: __/__/----

January 2025