



## Electronic Fund Transfer Authorization

---

Date  New EFT Authorization  
 Revision to existing authorization

Business Name

Corporate Headquarters or Legal Name (if different)

---

Maine Liquor License #

Contact Person

E-mail

Phone #

Yes, I would like to receive EFT (Electronic Funds Transfer) notifications.

\*Notifications include confirmation of each withdrawal and a list of invoices included in each transaction.

Preferred Email for Notifications

---

### Banking Information

Name of Financial Institution

Location (City, State)

Financial Institution's Routing/Transit Number

(nine digits)

Checking Account Number

**Please attach a copy of a canceled or voided check.**

---

I hereby authorize Bow Street Beverage and Bow Street Beverage Wells to initiate a debit entry to my checking/savings account at the banking institution indicated above, and initiate adjustments (if necessary) for any transactions debited in error. This authority will remain in effect until Bow Street Beverage is notified by me in writing to cancel it.

---

Signature

Print Name

Title