



## Island County Treasurer

### AUTHORIZATION TO CANCEL AUTOPAY

Please list all Property ID numbers you wish to cancel from AutoPay Program, then sign and return this form at least thirty (30) days prior to April 30<sup>th</sup> or October 31<sup>st</sup>.

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\_\_\_\_\_  
Authorized Signature #1

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature #2 (if applicable)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

Island County Treasurer

Wanda J. Grone, CPA

P.O. Box 699

1 NE 7<sup>th</sup> St, Ste. 111

Coupeville, WA 98239

Ph: (360)-679-7302

[treasurerwebinfo@co.island.wa.us](mailto:treasurerwebinfo@co.island.wa.us)

Fax: (360)-240-5567

Treasurer Office Use Only

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Date Received: \_\_\_\_\_

Date Auto-Pay Cancelled: \_\_\_\_\_

Authorization by: \_\_\_\_\_

Letter Sent: \_\_\_\_\_