

ORGANIC FARMERS OF MICHIGAN



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Individual Membership Agreement Of The Operating Agreement OFM, LLC A Michigan Limited Liability Corporation

Farm Name: _____

Name: _____

S.S.#: _____

Street Address: _____

City, State, Zip _____

Phone: _____

Fax: _____

E-mail: _____

Authorized Signature: _____

Date signed: _____

Please check one of the following options:

_____ I am mailing a check for the one time \$500.00 membership fee back with this form.

_____ Please deduct the one time \$500 membership fee from my next sale .