

Christ-centered Education that Transforms

Electronic Funds Transfer (EFT) AUTHORIZATION

HOW DO YOU USE AN ELECTRONIC FUNDS TRANSFER AUTHORIZATION?

Regular giving is more convenient with Electronic Funds Transfer (EFT). It is a document authorizing York University to draw upon your account on a monthly basis to fulfill your pledge. Authorizations involve the following steps:

- 1. Be sure that every blank on the following page is completed.
- 2. Use your signature as you do on your checking account.
- 3. Return your authorization, pledge card and a voided blank check to York University.
- 4. Your EFT Authorization will be recorded by the University.
- 5. Each month a draft will be made electronically on your account by York University.
- 6. Your bank will deduct the amount of the draft from your account.

To make future inquiries about your EFT Authorization: Call 402-363-5664 or toll-free at 800-950-9675



Please designate my gift to:

ANNUAL SUPPORT

- □ York University Fund
- □ Student Scholarships
- □ Bible Scholarships
- □ Panther Booster Club
- □ Where needed most
- □ I would like for someone from the University to contact me

MATCHING GIFTS

- □ My employer _
 - will match my gift.

Questions? Contact Office of Advancement at 402-363-5664 or toll-free at 800-950-9675

Office of Advancement 1125 E 8th Street York, NE 68467

MONTHLY ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION

I (We) hereby authorize York University to initiate entries to my checking/savings account at the financial institution listed below. This authority will remain in effect until York University is notified by me (us) in writing to cancel it in such time as to afford York University and the financial institution a reasonable opportunity to act on it. Until further notice, this will authorize you to honor a draft on my account by York University around the 10th or 20th day of each month.

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	NA	ME OF BANK OR FINANCIAL INSTIT	UTION	
ADDRESS OF BAN	NK/FINANCIAL INST	TITUTION - BRANCH		
CITY		STATE	ZIP	
	□ SAVINGS	ACCOUNT NUMBER		
FINANCIAL INST	TUTION ROUTING	NUMBER		
		LOOK BETWEEN THESE S	YMBOLS I: :I ON BOTTOM LEF	T OF YOUR (
DM MC				
	YOUR PRIN	TED NAME AS IT APPEARS ON ACC	COUNT	
ADDRESS				
ABBREEG				
CITY		STATE	ZIP	
DAYTIME PHONE		EMAIL		
SIGNATURE			DATE	
	PLEASE	E ATTACH A VOIDED CHI	ECK HERE.	

Mail to: York University, Office of Advancement, 1125 E 8th St, York, NE 68467