



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



Please
designate
my gift to:

ANNUAL SUPPORT

- YU Scholarship Fund
- Bible Scholarships
- Panther Booster Club
- Where needed most
- Other _____
- I would like for someone from the University to contact me

MATCHING GIFTS

- My employer _____, will match my gift.

Questions? Contact the YU Office of Advancement at 402-363-5664

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.

IN THE AMOUNT OF \$ _____ PER MONTH.

TO _____

NAME OF BANK OR FINANCIAL INSTITUTION

ADDRESS OF BANK/FINANCIAL INSTITUTION - BRANCH

CITY

STATE

ZIP

CHECKING SAVINGS

ACCOUNT NUMBER _____

FINANCIAL INSTITUTION ROUTING NUMBER _____

LOOK BETWEEN THESE SYMBOLS I : I ON BOTTOM LEFT OF YOUR CHECK

FROM _____

YOUR PRINTED NAME AS IT APPEARS ON ACCOUNT

ADDRESS

CITY

STATE

ZIP

DAYTIME PHONE

EMAIL

SIGNATURE

DATE

PLEASE ATTACH A VOIDED CHECK HERE.

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