

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 ACU 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 ACU.
4. Your EFT Authorization will be recorded by the university.
5. Each month a draft will be made electronically on your account by ACU.
6. Your bank will deduct the amount of the draft from your account.

To make future inquiries about your EFT Authorization, call 325-674-2612 or toll-free at 800-588-1514.



*Please designate
my gift to:*

ANNUAL SUPPORT

- Annual Fund
- Hope for the Future Scholarships
- Science-Math Research
- Bible Scholarships
- Missions Seminar Scholarships
- Wildcat Annual Fund (athletics)
- Other _____
- Where needed most
- I would like for someone from the university to contact me.

Questions? Call *Gift Records* at 325-674-2612 or toll-free at 800-588-1514.

Monthly Electronic Funds Transfer (EFT) Authorization

I (We) hereby authorize Abilene Christian University to initiate entries to my checking/savings account at the financial institution listed below, and, if necessary, initiate adjustments for any transactions credited/debited in error. This authority will remain in effect until Abilene Christian University is notified by me (us) in writing to cancel it in such time as to afford ACU 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 Abilene Christian University around the **5th or 20th** day of each month

CIRCLE ONE

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 ⑆ ⑆ ON BOTTOM LEFT OF YOUR CHECK

FROM _____
YOUR PRINTED NAME AS IT APPEARS ON ACCOUNT

ADDRESS

CITY STATE ZIP

DAYTIME PHONE CELL EMAIL

SIGNATURE DATE

