



YORK COLLEGE

A Fellowship of Learning... A Community of Faith

Electronic Funds Transfer (EFT) A U T H O R I Z A T I O N

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 College 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 College.
4. Your EFT Authorization will be recorded by the college.
5. Each month a draft will be made electronically on your account by York College.
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

YORK COLLEGE

1125 EAST 8TH ST · YORK, NE 68467
800-950-YORK · WWW.YORK.EDU



Please
designate
my gift to:

ANNUAL SUPPORT

- York College Fund
- Student Scholarships
- Bible Scholarships
- Panther Booster Club (athletics)
- Where needed most
- I would like for someone from
the college to contact me.

The 2010 Challenge: Any gift amount above your 2009 gift will be matched, dollar for dollar, by an anonymous donor.

MATCHING GIFTS

- My employer, _____,
will match my gift.

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

MONTHLY ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION

I (We) hereby authorize York College to initiate entries to my checking/savings account at the financial institution listed below. This authority will remain in effect until York College is notified by me (us) in writing to cancel it in such time as to afford YC 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 College around the **10th** 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 _____ EMAIL _____

SIGNATURE _____ DATE _____



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