



Electronic Funds Transfer (EFT) or Recurring Credit Card Gifts Form

Now you can enjoy the convenience of making gifts to the Jackson State University Development Foundation without writing a check! With **Electronic Funds Transfer (EFT)** your gifts to the Foundation will be automatically deducted from your checking or savings account. With **Recurring Credit Card**, gifts will be charged to the card you select. Both options will enroll you into monthly deductions of the amount you designate. The minimum monthly amount to enroll is **\$10.00** and deductions/charges occur around the 1st of each month. To enroll, mail the completed form to:

Jackson State University Development Foundation
Post Office Box 17144
Jackson, MS 39217

OR

Download and fax the completed form to: (601) 979-9043

With all gift transactions, the Foundation keeps personal information private and strictly confidential.

Please note: You may change your EFT or Recurring Credit Card option at any time in writing. To change or cancel an **Electronic Funds Transfer** or **Recurring Credit Card** deduction, notify the Office Manager in the Office of Development. For questions or additional information, call 601-979-1759.

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Download form and fax to: 601-979-9043

Class Year: _____ Major: _____

Name: _____

Address: _____
Street City State Zip

Home Phone: (____) _____ Business Phone: (____) _____

E-mail: _____ FAX _____

Employer: _____

Monthly Deduction Amount: (\$10 minimum) \$ _____

Select One Deduction Option:

Electronic Funds Transfer (EFT):

Name of Financial Institution: _____

Routing Number: _____

Account Number: _____

Recurring Credit Card: American Express Discover MasterCard VISA

Name on Card: _____

Card Number: _____ Exp. Date: _____

Select One Gift Timeframe Option:

Set Timeframe: Start Month: _____ End Month: _____

End when pledge of \$ _____ is reached.

Signature: _____

(Required for all gifts and pledges and authorizes use of credit card. Must match exact name on credit card if charging and checking and/or saving account if EFT).

11/2008

Office Use

_____ Date verified name and account number with financial institution.