

Vanderbilt University Electronic Funds Transfer

I would like to give a gift in the amount of:	\$ _____
I would like to support:	<input type="checkbox"/> I would like to support the following area(s), with the amount indicated for each: _____ \$ _____ _____ \$ _____ <i>Note: For gifts of \$25,000 and up, you may be contacted for additional information.</i>

Electronic Funds Transfer information	<p><i>To set up your electronic funds transfer, please complete the information below.</i></p> <p>I (we) authorize Vanderbilt and the financial institution named below to electronically charge my (our)</p> <p><input type="checkbox"/> checking <input type="checkbox"/> savings account specified below:</p> <p>Bank Name: _____</p> <p>City/State/Zip: _____</p> <p>Routing Number: _____</p> <p>Account Number: _____</p> <p>Amount to deduct \$ _____</p> <p>Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly (January, April, July, and October)</p> <p>Day of month: <input type="checkbox"/> 3rd banking day <input type="checkbox"/> 12th banking day</p> <p>Date plan to commence _____</p> <p>It is understood this agreement may be terminated by me (either of us) at any time by written notification to Vanderbilt University Gift Processing Office. Any such notification to the university shall be effective only with respect to entries initiated by the university after receipt of such notification and a reasonable opportunity to act on it.</p> <p>PLEASE ATTACH A VOIDED CHECK (optional)</p>
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Your contact information:	Name: _____ Employer: _____ Address (<input type="checkbox"/> Home <input type="checkbox"/> Business): _____ City/State/Zip: _____ E-mail: _____ Phone: _____												
Don't forget to sign:	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">_____</td> <td style="width: 50%; border: none;">_____</td> </tr> <tr> <td style="border: none; text-align: center;">AUTHORIZING PARTY (PLEASE PRINT)</td> <td style="border: none; text-align: center;">AUTHORIZING PARTY (PLEASE PRINT)</td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> <tr> <td style="border: none; text-align: center;">Signature (required)</td> <td style="border: none; text-align: center;">Date</td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> <tr> <td style="border: none; text-align: center;">Signature</td> <td style="border: none; text-align: center;">Date</td> </tr> </table>	_____	_____	AUTHORIZING PARTY (PLEASE PRINT)	AUTHORIZING PARTY (PLEASE PRINT)	_____	_____	Signature (required)	Date	_____	_____	Signature	Date
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Vanderbilt University, Gift Processing
 PMB 407727, 2301 Vanderbilt Place
 Nashville, TN 37240-7727
 Questions? (615) 322-2979

Thank you for your gift and your commitment to Vanderbilt. Wherever you direct your support—students, patients, faculty or research—every gift in every amount makes a lasting impact.