ELECTRONIC FUNDS TRANSFER INFORMATION

To set up your electronic funds transfer, please complete the information below and return to:

Vanderbilt University
Gift Processing Office
PMB 407727
2301 Vanderbilt Place
Nashville, TN 37240-7727

I (we) authorize Vanderbilt and the financial institution named below to electronically charge my (our)
☐ checking  ☐ savings account specified below:

Bank name:________________________________________________________________________________________
City:____________________________________________________ State ______________ Zip Code_______________
Day of Month:  ☐ 3rd banking day  ☐ 12th banking day

I authorize $__________ per month/quarter for a total of $__________ per year.

Frequency:  ☐ Monthly  ☐ Quarterly (January, April, July and October)

Date plan to commence __________ Month ________ Year

Designation _______________________________________________________________________________________

It is understood this agreement may be terminated by me (either of us) at any time by written notification to Vanderbilt University. 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.

__________________________________________ __________________________________________
AUTHORIZING PARTY (PLEASE PRINT)      AUTHORIZING PARTY (PLEASE PRINT)

__________________________________________ __________________________________________
Signature                      Date                           Signature                      Date

PLEASE ATTACH A VOIDED CHECK BELOW

Thank you for your support of Vanderbilt. Your gift counts toward the Vanderbilt Fund and our ongoing Shape the Future campaign.