

K C C K - F M
Electronic Funds Transfer Authorization

(new enrollees only)

THANK YOU for inquiring about our Electronic Funds Transfer charitable contribution program. By completing and returning this form, you will be establishing an easier and less costly way of making your gift to KCCCK. Your monthly statement will describe this draft when it occurs as "KCCCK ACH Gift." Mail the completed form to KCCCK, 6301 Kirkwood Blvd. SW, Cedar Rapids, IA 52406. You will receive a receipt in January of each year, listing the amount of your total annual gift. If you have any questions, please call (319) 398-5446.

THANK YOU!

AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED BANK ACCOUNT DRAFT

I (we) hereby authorize KCCCK-FM, through the Kirkwood Community College Foundation to initiate debit entries to my (our) bank account at the financial institution named below on the attached voided check.

Amount Per Month: \$ _____ **Until:** \$ _____ **is reached.**

OR - One Time Payment of \$ _____

Transaction(s) take place on the 15th of every month. Your first transaction will take place in the month following our receipt of this form.

VERY IMPORTANT: If you do not specify an amount to be reached, we will continue to deduct the specified monthly amount until you notify us in writing.

This authorization to charge your account shall be the same as if you had personally signed a check to KCCCK-FM. This automatic gift withdrawal will remain valid until the donation total is reached, or KCCCK-FM receives written notice of its termination in such time and manner as to afford KCCCK-FM a reasonable opportunity to act on it. A record of each charge will be included in your bank statement. This record will serve as your receipt of the bank charge. In case of error, you have the right to authorize your bank to reverse any charge.

First and Last Name(s): _____

Preferred Address: _____
(if different than on check)

Email Address: _____ **Phone:** _____

Signature(s): _____

PLEASE ATTACH A VOIDED CHECK HERE
(NO Deposit Slips Please)

Please attach a matching gift form if your company will match your gift.
We'll submit the form with your final payment.

Please Detach this stub and retain for your own checkbook records

Monthly Reminder: Deduct \$ _____ on the 15th of each month to reflect my gift to KCCCK-FM, which will be automatically debited from my account.

Thank you for your generous support!