

## University of Nevada, Reno Foundation

127 Mackay Science/162 Reno, Nevada 89557-0162 (775) 784-1587 phone | (775) 784-1957 fax Email: giving@unr.edu Tax Identification No. (TIN): 94-2781749

## **Electronic Funds Transfer Authorization Form**

Thank you for inquiring about our Electronic Funds Transfer (EFT) charitable contribution program. By completing and returning this form, you will be on your way to establishing an easier and less costly way of making your gift to University of Nevada, Reno Foundation. This notification to draft your account on or about the 1st of each month will remain in effect until we have received written notification from you of its termination, and the University of Nevada, Reno Foundation has had a reasonable opportunity to act upon your request. Your monthly bank statement will describe this draft when it occurs.

**Contact Information** 

You should anticipate the first draft approximately 30-45 days after we have received your authorization.

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Address:									
City, State, Zip:									
AUTHORIZATION I (we) hereby authorize the University the financial institution named below,	of Nevada, Ren	o Foundation to	initiate deb			ur) bank a	account i	ndicated bel	low and
Financial Institution/Bran	ıch:								
Addr	ess:								
City, State, 2	Zip:								
Transmit/ABA	No:								
Account Numl	per:								
Account Typ	g O Sav	<ul> <li>Savings (Select one account for gift to be drawn</li> </ul>					—— drawn from	)	
Check the amount to debit P	Circum	_	•	(Will occ	ur on or	about th	ne 1st of	each month	1)
Engineering Dean's Fund		e - 250010	○ \$5	○\$10	○\$15	○\$20	<b>(</b> \$25	Other	
Engineering General Under Scholarship Fund - 55253	_		○\$5	⊜\$10	<b>()</b> \$15	⊜\$20	<b>(</b> \$25	Other	
☐ Engineering K-12 Outread	eh - 250025		<b>(</b> \$5	<b>()</b> \$10	<b>(</b> \$15	<b>(</b> \$20	<b>(</b> \$25	Other	
Academic Interest			_ () \$5	○\$10	○\$15	○\$20	○ \$25	Other	
This authority to remain in full force a (or either of us) of its termination in s opportunity to act on it. Also, I autho adjustments to my (our) account.	uch time and in s	such manner as t	o afford the	Universi	ty of Nev	ada, Ren	o Founda	ation a reaso	onable
Signature:					_ Date:				
Signature:					_ Date:				
		PLEASE ATTACH	VOIDED CHEC	K					