



Texas A&M Foundation EFT Authorization

Mail this form along with a voided, unused check or deposit slip to: Texas A&M Foundation, Attn: Director of Gift Processing, 401 George Bush Drive, College Station, Texas 77840-2811.

Name(s) (please print): _____

Address: _____

City, State and ZIP: _____

Area Code and Phone (daytime): _____

E-mail address: _____

I authorize the Texas A&M Foundation to deduct from my _____ checking or _____ savings account until further notice as follows (choose one):

\$_____ monthly (\$25 minimum), or \$_____ quarterly (\$75 minimum) from
_____ (your bank) at account # _____.

Total amount to be drafted: \$_____.

This gift is for unrestricted use.

This gift is to be used for _____
_____.

My employer, _____, will match my gift. I have enclosed my employer's matching-gift form.

As requested, I have enclosed a voided, unused check or deposit slip to identify my EFT bank and account number.

Signature(s)

Date _____