



# IMSA Fund for Advancement of Education EFT Authorization Form

Yes, I want to save time and money in supporting IMSA and the IMSA Fund for Advancement of Education through my EFT contribution.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Email \_\_\_\_\_

Alumnus/Class of \_\_\_\_\_

Parent of \_\_\_\_\_

Current/Former IMSA Employee

Board Member

Friend

I authorize the IMSA Fund for Advancement of Education to deduct from my:

Checking     Savings account until further notice as follows (enter one figure):  
\$ \_\_\_\_\_ monthly (\$5 minimum)

I designate that my gift be used for:

IMSA Fund – IMSA’s Greatest Need  
 Other: \_\_\_\_\_

My company, \_\_\_\_\_, will match my gift. I enclose my employer’s matching gift form indicating the total amount of my gift.

***You must attach a voided check for identification of your bank and account numbers***

Signature \_\_\_\_\_

Date Authorized \_\_\_\_\_

**Please complete this form and mail it to:**

IMSA Fund for Advancement of Education  
1500 Sullivan Road, Aurora, IL 60506

**For Your Information**

Your gifts will appear on your bank statement automatically. Transactions will take place on the 25<sup>th</sup> of each month unless you let us know an alternate specific if advance. You will also receive a gift receipt at year-end from the IMSA Fund for your tax purposes. To change the amount of your gift, please complete a new EFT Authorization Form. A change of banks requires a new voided check for bank and account identification. Contact us to cancel your authorization. If you have any questions, please contact us at (630) 907-5040 or giving@imsa.edu.