



The Newman Catholic Student Center at The University of Iowa Authorization for Direct Debit (ACH)

Return to: Newman Center, 104 East Jefferson Street, Iowa City, IA 52245 or Fax 319-337-6858.

I (We) hereby authorize the Newman Catholic Student Center of Iowa City, Iowa (hereinafter called the Newman Center) and/or Newman Singers Ministries, Inc. (hereinafter called the Newman Singers) to initiate Debit entries to my (our) account(s) indicated below and the Depository financial institution named below, herein after called Depository, and to credit the same to the Newman Center and/or Newman Singers account(s). I (we) acknowledge that the origination of electronic funds transactions to my (our) account must comply with provisions of U.S. law. This authority is to remain in full force and effect until the Newman Center and/or Newman Singers has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the Newman Center and/or Newman Singers and Depository a reasonable opportunity to act on it. The Newman Center and Newman Singers are both registered 501 (c) 3 not-for-profit organizations. Donations are tax-deductible in accordance with IRS rules and regulations. Annual year-end giving statements for all donations will be sent to donors at the last known address of record each January. Statements may also be requested by contacting the Newman Center.

Financial Institution Information

Depository Name: _____
(Name of Bank)

Branch: _____ City: _____ State: _____ Zip (optional): _____

Routing/Transit # (9 digits) _____

Account Number: _____ Checking Savings

Gift Designation

Checking/Savings Automated Contributions: Each month, please debit my account on the on

1st or 15th of the month beginning _____ and apply my gift as follows*:

\$ _____ Annual Fund

\$ _____ Offertory

\$ _____ Securing Their Future Capital Campaign Pledge Payment

\$ _____ Outreach and Education Fund

\$ _____ Endowment for Fellowships and Scholarships

\$ _____ Newman Singers Ministries

\$ _____ Other (Please Specify) _____

\$ _____ Newman Singers Scholarships

\$ _____ TOTAL DONATION

Apply this to my annual Founders Club Commitment

*Please note that if you authorize contributions to more than one fund, the Newman Center and/or Newman Singers may, at its discretion, process the gifts individually. Your bank statement may show separate charges on the same date.

Recognition Information

For gift recognition purposes, please list my/our name as follows:

I/we would like to designate this in memory of, in honor, in celebration of:

Authorized By

Print Name: _____ Email: _____
(include both names on joint account)

Address: _____
(as filed with your financial institution)

City: _____ State: _____ Zip: _____

Home Ph: _____ Work Ph: _____ Cell Ph: _____

Signature: _____ Date: _____

Signature: _____ Date: _____
(include both names on joint account)

ATTACH A VOIDED CHECK OR SAVINGS DEPOSIT SLIP