



## EFT (ELECTRONIC FUNDS TRANSFER) AUTHORIZATION FORM

### A. CREDIT CARD OPTION

Name(s) as shown on Credit Card: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Card:  VISA  MASTERCARD  DISCOVER

Credit Card No.: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Monthly Payments \$ \_\_\_\_\_/mo.  One Time Payment \$ \_\_\_\_\_

I authorize EFT processing. (Note: EFT's are processed on the 10<sup>th</sup> of each month; if the 10<sup>th</sup> falls on a weekend, it will process the following Monday. All monthly payments will be processed until pledge is paid in full or by notifying Star 88.3 Accounting Department.)

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

### B. PRE-AUTHORIZED CHECKING OPTION

Name(s) as shown on Account: \_\_\_\_\_

Address: \_\_\_\_\_

Bank Name: \_\_\_\_\_

Bank Routing # \_\_\_\_\_ Checking Account # \_\_\_\_\_

Monthly Payments \$ \_\_\_\_\_/mo.  One Time Payment \$ \_\_\_\_\_

I authorize EFT processing. (Note: EFT's are processed on the 10<sup>th</sup> of each month; if the 10<sup>th</sup> falls on a weekend, it will process the following Monday. All monthly payments will be processed until pledge is paid in full or by notifying Star 88.3 Accounting Department.)

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

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