

Bank Draft Form - For Preauthorized Payments

CITY	STATE ZIP
PHONE NUMBER	
EMAIL ADDRESS	
v 1	niversity, herein after called ETBU, to initiate debit entries to my ch ned below, herein after called BANK, to debit the same such accou
BANK NAME	BRANCH
CITY	STATE ZIP
ROUTING #	ACCOUNT #
Please debit \$per_month	until notified to stop the debit OR
	 until notified to stop the debit OR for months
Please use this gift for:	
Please use this gift for:	
Please use this gift for: Blue and Gold Fund Scholarship Fund	

either of us) of its termination at such a time and manner as to afford ETBU and BANK a reasonable opportunity to act on it.

Date ______ Signature ______

Please complete this form and return it to: East Texas Baptist University, Office of Advancement, One Tiger Drive, Marshall, Texas, 75670

Thank you for your faithful support of East Texas Baptist University.