

UNM Automatic Contribution Authorization (Electronic Funds Transfer)

Please print this form, fill it out, and send it with your voided check to the address below.

I (we) hereby authorize the University of New Mexico Foundation, Inc., hereinafter called COMPANY, to initiate debit entries to my (our) † **Checking** † **Savings** account (select one), at the depository named below, hereinafter called DEPOSITORY, to debit the same to such account.

Amount of monthly contribution: \$_____ (the minimum is \$5.00 per month)

Name(s): _____

Address: _____

City/State/Zip: _____

Please deposit these gifts:

† where the need is greatest † to the _____

Other instructions regarding your gift:

Transfers will be made the same day each month (on or about the 15th).

Bank/Depository Name: _____ **Branch:** _____

City: _____ **State:** _____ **Zip:** _____

Transit/ABA No.: _____ **Account No.** _____

Signature(s): (1) _____ (2) _____

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Please attach a voided check to this form and mail to:

The UNM Foundation, Two Woodward Center
700 Lomas NE, Suite 108, Albuquerque, NM 87131

Thank you for your support of higher education in New Mexico!