



### BANK DRAFT AUTHORIZATION FORM

With the bank draft program, your gift will be spread over several months. By completing this form, you authorize the MUW Foundation to make gift payments from the account of your choice to the fund of your choice.

**Complete this form, attach a voided check, and select the date/month that you would like the first gift to be deducted.** You can elect an end date for your bank transfer or continue your giving in support of The W. You may begin, cancel, or change your gifts at any time by contacting the MUW Foundation.

Each January, you will receive a statement from the MUW Foundation showing the amount of your total gifts for the preceding calendar year. This letter will be your receipt for tax documentation. Gifts are tax deductible as allowed by law.

\_\_\_\_\_  
NAME

\_\_\_\_\_  
PHONE

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
EMAIL

\_\_\_\_\_  
CITY / STATE / ZIP CODE

**Total amount deducted monthly:** \$ \_\_\_\_\_

**Start Date:** \_\_\_\_\_

**End Date (if applicable):** \_\_\_\_\_

**Designation:** [ ☐ ] The W Fund or [ ☐ ] Other Designated Fund: \_\_\_\_\_

**Electronic Funds Authorization Statement:**

I authorize the MUW Foundation to transfer the amount indicated from my bank account to the selected MUW Foundation Fund of my choice. This authorization will remain in effect until I notify my bank and/or the MUW Foundation that I wish to discontinue my regularly scheduled gifts.

A record of each transfer will be noted in my account statement by my bank or savings institution. I understand that the MUW Foundation will send me a receipt each January detailing my total giving for the preceding calendar year.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**Mail to:** MUW Foundation  
1100 College Street, MUW-1618  
Columbus, MS 39701

**Telephone:** 662-329-7148  
**Email:** giving@muw.edu