DONOR ACH GIFT AUTHORIZATION

Authorize a one-time or recurring charitable gift to the Hoover Presidential Foundation by electronic bank withdrawal (ACH).

1 DONOR INFORMATION

Donor name(s): _____

Mailing address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

2 GIFT INSTRUCTIONS

Gift amount: $_____ ☐ One-time gift ☐ Recurring gift

For recurring gifts: ☐ Monthly ☐ Quarterly ☐ Annually ☐ Other: _____

Requested first withdrawal date: _____

Gift designation: ☐ Where most needed (unrestricted) ☐ Other: _____

If the requested designation cannot be honored, the Foundation will contact me for instructions.

3 BANK ACCOUNT TO BE DEBITED

Name on bank account: _____

Financial institution: _____

Bank routing number (9 digits): _____

Bank account number: _____

Account type: ☐ Checking ☐ Savings

4 AUTHORIZATION

I authorize the Hoover Presidential Foundation to initiate ACH debit entries from the bank account identified above for the charitable gift(s) specified on this form. I also authorize any necessary credit entries to correct an erroneous debit. For a recurring gift, this authorization will remain in effect until I revoke it by notifying the Foundation in writing with sufficient time to process the request. I understand that the Foundation will provide a record or acknowledgment of my gift(s), and that I may contact the Foundation regarding changes to my authorization. I certify that I am an authorized signer on the bank account listed above.

Donor / authorized account holder signature: _____

Printed name: _____ Date: _____

SECURE RETURN: This form contains confidential banking information. Please do not email a completed copy without a secure transmission method. Contact the Foundation to arrange secure delivery.

FOR FOUNDATION USE ONLY Date received: _____ Entered by: _____ Verified: _____