

Electronic Fund Transfer



ONCE I'M IN THE PROGRAM, HOW DO I CHANGE MY DONATION AMOUNT OR THE DESIGNATIONS OF MY GIFT?

To change the amount of your donation or how you want your donation designated, contact the Youth for Christ EFT Program at the address listed below. You will need to contact us before the 1st of the month to change the same month's withdrawal.

WHAT IF I NEED TO STOP MY WITHDRAWALS?

You must let us know by the 1st of the month to cancel the withdrawal occurring on the 25th of the month.

WHAT IF I CHANGE BANKS?

Please send us a voided check from your new bank account by the 17th of the month of the first withdrawal from your new account. You may close your old account after the 28th of the month in which we withdraw the final gift.

WHAT IF SOMEONE I SUPPORT LEAVES EMPLOYMENT WITH YOUTH FOR CHRIST?

Our EFT policy is to withdraw donations for active staff only. We will notify you of a staff member's departure and you will be given an opportunity to change or cancel your automatic donation.

WHERE DO I SEND MY COMPLETED FORM?

Send your completed Electronic Fund Transfer Enrollment and Authorization Form and voided check to Youth for Christ at the address below.

**YOUTH FOR CHRIST/USA
IS A CHARTER MEMBER
OF THE EVANGELICAL
COUNCIL FOR FINANCIAL
ACCOUNTABILITY.**

All funds given in support of a Youth for Christ staff person are received with the donor's intent in mind. To ensure the tax deductibility of the gift, the final distribution is under the control of the governing board of YFC. These gifts are classified as designated funds, which means they are "... unrestricted funds set aside for specific purposes by action of the governing board."
(AICPA 78-10)



Youth for Christ EFT Program
PO Box 4478 ♦ Englewood, CO 80155-4478
303/843-9000

DESIGNATION: Please designate my gift monthly as follows:

YFC Staff, Missionary or Project	Account #	Amount Per Month
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL MONTHLY DONATION:

SIGNATURE REQUIRED:

I/we hereby authorize Youth for Christ/USA, or its agents, to transfer the amount listed above from the indicated account on the 25th of each month (if the 25th falls on a weekend or holiday, on the next business day).

Donor's signature

Donor's signature

Youth For Christ

PO Box 4478
ENGLEWOOD, COLORADO
80155
303/843-9000

Electronic

Fund

Transfer

YOU CAN HAVE YOUR DONATIONS TO YOUTH FOR CHRIST AUTOMATICALLY WITHDRAWN MONTHLY FROM YOUR CHECKING OR SAVINGS ACCOUNT

Youth for Christ offers Electronic Fund Transfer (EFT) to all donors. To participate in this convenient program, please follow the instructions below carefully.

HOW DOES THE EFT PROGRAM WORK?

On the 25th of each month Youth for Christ's bank will withdraw your donation from your bank account. Your withdrawal will appear on your monthly bank statement and you'll receive a tax-deductible receipt from Youth for Christ by the end of the month.

HOW DO I ENROLL?

- Fill out the entire enclosed Electronic Fund Transfer Enrollment and Authorization Form.
- If your donations will be withdrawn from a checking account, **enclose a voided check** from that account.
- If your donations will be withdrawn from a savings account, you will need to provide us with your routing and account numbers. You will need to obtain those numbers from your bank before enrolling.
- It is very important you include your bank's phone number. Our bank may need to contact your bank if any problems arise while withdrawing funds from your account.
- Return your form by the 20th of the month to qualify for the next month's debit. Late enrollments will not take effect until the following month (for example: if your enrollment reaches us on June 22, you've missed the deadline for the July 25 withdrawal and your first withdrawal will be August 25th).



continued...

ELECTRONIC FUND TRANSFER ENROLLMENT AND AUTHORIZATION FORM

YOUR INFORMATION (As currently found on any of your Youth for Christ receipts)

Youth for Christ ID # _____ Daytime Phone: _____
Name _____
Address _____
City _____ State _____ Zip _____

BANK INFORMATION

Your Bank's Name _____ Phone: _____
Address _____
City _____ State _____ Zip _____

- The withdrawals will be made from my checking account:
Account number is _____ Routing number is _____
- The withdrawals will be made from my savings account:
Account number is _____ Routing number is _____
- Date of first withdrawal: ____/25/____ Date of final withdrawal: ____/25/____ **OR**
- I will be giving monthly for an indefinite amount of time.