

YORK COUNTY SPCA
Electronic Funds Transfer (EFT) Authorization

York County SPCA is pleased to offer you the opportunity to give your contributions to the SPCA through Electronic Funds Transfer (EFT). EFT allows you to have your contribution automatically withdrawn from your checking or savings account on a date specified by you.

How does it work? – By completing the form below, the SPCA will receive your contribution through an electronic bank transfer. You specify the amount and the frequency of your gifts. The transaction will appear on your bank statement the day after the transaction is initiated by the SPCA.

What do I need to do? – Complete the form below by first choosing the frequency of your giving (semi-monthly, monthly on a specific date, or quarterly), and then indicate the amount you wish to contribute next to the frequency you have selected. Complete your name and address. Indicate if your account is a checking or a savings account. Enter your account number and routing number. **Please attach a voided check.** By attaching a voided check, the SPCA can verify your bank account information for accuracy. Please sign and date the form. You can place the form and voided check in an envelope and mail it to the SPCA at 3159 Susquehanna Trail North, York, PA 17406. If you have any questions, please call 717-764-6109.

YORK COUNTY SPCA
EFT Authorization Form

Date contributions are to begin: _____. (Please allow two weeks for bank verification.)

Contribution Amount: (Please indicate the amount of your contribution by the frequency of your choice.)

\$ _____ Semi-Monthly on the 15th **and** 30th/31st
\$ _____ Monthly on the 15th _____ or 30th _____ (Select one)
\$ _____ Quarterly on the 15th _____ or 30th _____ (Select one);
beginning _____ (date).

Name on the Account (Please print): _____

Address: _____

City: _____ State: _____ Zip: _____

Account Type (Circle one): Checking Savings

Account #: _____ Routing # _____
(The routing number is 9 digits long and is located at bottom of check.)

I authorize the York County SPCA to process debit entries from my account. I have attached a voided check. I acknowledge that the origination of ACH transactions from my account must comply with the provisions of U.S. law. **This authority will remain in effect until I have cancelled it in writing.**

Authorized signature on account: _____ Date: _____

Please return a completed EFT Authorization Form and a voided check to the York County SPCA.