



MONTHLY RECURRING DONATION FORM
Direct Debit • Payroll • Credit Card

Name: \_\_\_\_\_ Spouse Name: \_\_\_\_\_

Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Spouse Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Spouse Email: \_\_\_\_\_

(Circle One) Dr. Mr. Ms. Mrs. Drs. Mr. & Mrs. Other: \_\_\_\_\_

GIVING SUMMARY

Please enroll me in recurring giving and charge the same gift amount monthly as indicated below. I understand that I can cancel or edit this giving method at any time.

MONTHLY GIFT AMOUNT \$25 \$35 \$50 \$100 \$200 Other \$ \_\_\_\_\_

GIFT FUND DESIGNATION (Choose one)

- President's Excellence Fund President's Council (min. \$84/month)
Mays Cancer Center Mays Cancer Center Cabinet (min. \$125/month)
Dentistry Graduate Health Professions Medicine Nursing
Barshop Institute CMHE Greehey CCRI - Ambassadors' Circle (min. \$11/month)
Other \_\_\_\_\_

PAYROLL DEDUCTION

Please enroll me in monthly payroll deduction payments. I understand payroll deduction payments are recurring gifts that continue monthly until written notice is received from me, or my employment with UT Health San Antonio terminates.

My signature below authorizes UT Health San Antonio to initiate charges as indicated above.

Signature required for payroll: \_\_\_\_\_ Date: \_\_\_\_\_

BANK DRAFT OPTION

Financial Institution: \_\_\_\_\_ Branch: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Signature required for bank drafts: \_\_\_\_\_ Date: \_\_\_\_\_

CREDIT CARD OPTION

Cardholder Name: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Security Code #: \_\_\_\_\_

Signature required for credit cards: \_\_\_\_\_ Date: \_\_\_\_\_

DONATION IS IN HONOR MEMORY OF: \_\_\_\_\_

Please notify the following of my gift: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Email form to: GiftProcessing@uthscsa.edu

I am interested in learning how to use my IRA for charitable gifts.

OFFICE OF INSTITUTIONAL ADVANCEMENT