

We are excited to offer the safety, convenience and ease of Tuition Express — a payment processing system that allows secure, on-time tuition and fee payments to be made from your bank account.

No Processing fees will apply for ACH Payments. ELETRONIC FUNDS TRANSFER AUTHORIZATION FOR BANK ACCOUNT

I (we) hereby authorize (business name) ________ to initiate debit entries to my (our) checking or savings account, indicated below. To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit union members: please contact your credit union to verify account and routing numbers for automatic payments.

Your Name	Phone #			
Address	City	State	Zip	
Bank or Credit Union Na	me Bank or Credit Union Address	City	State Zip	
Routing Number (see san	nple below) Account Number (see sample be	elow) Checking	g Savings	
Authorized Signature	Date			
Authorized Signature For Official Use Only Date Received	Date John Sample Mary Sample 123 Nice Street Anytown, USA Pay to the order of: Attach Voided Check He		A service of	

Routing # Account # Check #



We are excited to offer the safety, convenience and ease of Tuition Express, a payment processing system that allows secure, on-time tuition and fee payments to be made from your Credit Card.

Processing Fees apply. Fee vary per card, ranging from .095% to 3.9% according to issuing bank.

ELETRONIC FUNDS TRANSFER AUTHORIZATION FOR CREDIT CARDS

I (we) hereby authorize (business name) to initiate credit entries to my (our) Credit Card, indicated below. To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice.

Your Name	Phone #			
Address	City	State	Zip	
Card Number	Expiration Date		CVV	
Authorized Signature	Date			