## **Automated Payment Processing**

Safe. Convenient. Easy.

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 either your bank account or credit card.

## ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR BANK ACCOUNT AND CREDIT CARD

I (we) hereby authorize (business name) to initiate credit card charges to the below-referenced credit card account (Section A) OR, initiate debit entries to my (our) checking or savings account, indicated below (Section B). 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. Check with the center for

## accepted credit card types. **COMPLETE ONE SECTION ONLY SECTION A (Credit Card)**

Cardholder Address City State Zip Account Number Expiration Date

Cardholder Signature Date

Cardholder Name Phone #

**SECTION B (Bank Account)** 

Your Name Phone #

Address City State Zip Bank or Credit Union Name Bank or Credit Union Address City State Zip Routing Transit Number (see sample

below) Account Number (see sample below) Checking Savings

**Authorized Signature Date** 

FOR OFFICIAL USE ONLY

**Date Received** 

**ATTACH VOIDED CHECK HERE DEPOSIT SLIPS NOT ACCEPTED** 

**Employee Signature** 

800.338.3884 • procaresoftware.com

NUMBERACCOUNT NUMBERCHECK NUMBER