



PUBLIC RADIO

WWW.WVTF.ORG

3520 Kingsbury Lane
Roanoke, VA 24014
540-989-8900



WWW.RADIOIQ.ORG

Electronic Funds Transfer Form

(Please Print)

Name: _____

Address: _____

(street)

(City) (State) (Zip)

Home Phone: _____ Cell Phone: _____

If you would like an email confirmation of your payment, please provide your email address:

Financial Institution Name: _____

Routing #: _____

Account #: _____

Joe Smith 1234 Anystreet Court Anycity, AA 12345	1234
Pay to the order of _____	Dollars
Bank Anywhere	
123456789	123456789123 1234

SAMPLE

Account Type:

Checking: _____

Savings: _____

Routing Number **Account Number** **Check Number**

Would you like for payments to be withdrawn from your account on the 1st _____ or the 15th _____ of every month?

Would you like to make this a sustaining pledge? Yes: _____ No: _____

Please sign and date this form and return it to WVTF/RADIO IQ along with the bottom portion of the enclosed letter in the return envelope provided.

(Signature)

(Date)