



PI KAPPA PHI  
**FOUNDATION**

**RECURRING ACH DONATIONS**

The Pi Kappa Phi Foundation appreciates your planned donations to further its important mission. In that regard, please complete the requested information below.

**BASIC INFORMATION**

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

Chapter: \_\_\_\_\_

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

Phone: \_\_\_\_\_

**RECURRING DRAFT INFORMATION**

ABA (9-digit bank routing number): \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

Pi Kappa Phi Foundation Campaign to Benefit from Gift: \_\_\_\_\_

Recurrence (check one):  Monthly  Quarterly  Biannually  Annually

*Quarterly recurring drafts will occur in January, April, July, and October.*

*Biannually recurring drafts will occur in January and June.*

*Annual recurring drafts will occur in June.*

Day to Draft (check one):  1st  15th

*If the 1st or 15th falls on a holiday or weekend, the following business day will be drafted.*

Amount to Draft: \$ \_\_\_\_\_

By signing below, I hereby authorize the Pi Kappa Phi Foundation to make drafts in the amount of \$ \_\_\_\_\_ on the \_\_\_\_\_ of the month from the bank account listed above. If I wish to stop the recurring draft, it is my responsibility to contact the Pi Kappa Phi Foundation.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Please contact Becky Smith, associate director, leadership fund, at [bsmith@pikapp.org](mailto:bsmith@pikapp.org) or 980.318.5384 with questions.*