



You can enjoy convenient automatic payments by authorizing a transfer from your checking or savings account for your monthly South Carolina Tuition Prepayment Program payments. To sign up, simply:

1. Complete the account identification section below and sign the authorization in ink.
2. Make a copy for your records.
3. Enclose a voided check (for checking) or deposit ticket (for savings). These documents must have your preprinted name and account number. If you do not have a check or deposit slip, please have your financial institution complete the account identification section below.
4. You will be notified in writing when the automatic payments are scheduled to begin. Please allow 4-6 weeks from receipt of your form for processing.

Send this form to: **The South Carolina Tuition Prepayment Program, P.O. 44289, Jacksonville, FL 32231-4289.** You must make payments by check until you are notified that your automatic payments have been set up. Remember to include your account number on your check. Send your payments to:

**South Carolina Tuition Prepayment Program  
P.O. Box 44259  
Jacksonville, FL 32231-4259**

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### AUTOMATIC PAYMENT AUTHORIZATION

**Contributor Name:** \_\_\_\_\_

**Account Number:** \_\_\_\_\_

**Monthly Payment Amount:** \_\_\_\_\_

**I hereby authorize 1) South Carolina Tuition Prepayment Program to make withdrawals from the checking or savings account indicated below and, 2) the Financial Institution listed below ("Financial Institution") to debit the same such account. If erroneous entries are posted to my bank account, I authorize South Carolina Tuition Prepayment Program to direct the Financial Institution to return such entries. This authority remains in full force and effect until South Carolina Tuition Prepayment Program receives written notification from me of its termination in such time and such manner as to afford South Carolina Tuition Prepayment Program a reasonable opportunity to act on such revocation or until my South Carolina Tuition Prepayment Program contract has been paid in full. Revocation by notice to the Financial Institution is not sufficient.**

\_\_\_\_\_  
Contributor Signature

\_\_\_\_\_  
Date

**ACCOUNT IDENTIFICATION – Attach a voided check or deposit slip and complete the information below. If you do not have these documents, you must have a representative from your financial institution also sign this form.**

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

Type of Institution:      Bank       Savings & Loan       Credit Union

Type of Account:      Checking Account       Savings Account

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

Account Holder Name and Signature (if different from Purchaser):      Name: \_\_\_\_\_

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

Authorized Financial Institution Representative (*must be completed unless form is accompanied by a deposit slip or voided check*)

Name \_\_\_\_\_      Title \_\_\_\_\_

Signature \_\_\_\_\_      Phone \_\_\_\_\_

*Rev 10/15/2012*