

STATE OF OKLAHOMA
ELECTRONIC FUNDS TRANSFER AUTHORIZATION
Oklahoma Guaranteed Student Loan Program

If you would like your monthly payment automatically debited from your checking account, complete the following form and return it to:

Oklahoma Guaranteed Student Loan Program
P.O. Box 3010
Oklahoma City, OK 73101-3010

I hereby authorize the State of Oklahoma Treasury, hereinafter called treasury, to initiate credit entries and to initiate, if necessary, debit entries as adjustments for checking account indicated below and the financial institution named above, hereinafter called depository, debit the same any amount(s) owed by me. This authority is to remain in full force and effect until the treasury has received written notification from me of its termination in such time and in such manner as to afford the treasury and depository a reasonable opportunity to act on it.

NOTE: Please continue to mail in your monthly payment until your automatic payment is verified. Thirty days notice is required to start, stop or change EFT.

1. First payment: \$ _____

2. CIN: _____

3. **Attach a voided check.**

4. Monthly debit amount: \$ _____

5. Month you want to automatic payment to begin: _____

6. Select Due Date (circle one): 5th 10th 15th 20th 25th

7. _____
Authorized Signature _____
Date