



ELECTRONIC FUNDS TRANSFER (EFT)/
AUTOMATIC INVESTMENT PLAN (AIP)
AUTHORIZATION

This form authorizes TIAA to transfer funds electronically from your bank to TIAA. The minimum contribution for Electronic Funds Transfer (one-time or recurring) is \$100.

If you are setting up EFT contributions to more than one TIAA contract, you will need to submit an additional EFT authorization for each contract with an original signature on each form. Allow at least 7 business days for these services to be activated after we receive your form.

Please print using black or dark blue ink.

1. PROVIDE YOUR INFORMATION

First Name Middle Initial
[Input fields]

Last Name Suffix
[Input fields]

Social Security Number / Taxpayer Identification Number
(Enter the last 4 digits of your SSN or TIN) Contact Telephone Number Extension
[Input fields]

Please check with your financial institution to make sure it is able to transact an electronic funds transfer. If your financial institution is a Non-Participating Depositing Financial Institution, it cannot perform an electronic funds transfer.

2. BANK INFORMATION

Bank Account Type: [ ] Checking [ ] Savings [ ] Money Market

Account Owner's Last Name Account Owner's First Name
[Input fields]

Last Name of Joint Owner First Name of Joint Owner
[Input fields]

Bank Name Bank Telephone Number
[Input fields]

Bank Routing Number (ABA) Bank Account Number
[Input fields]





# ELECTRONIC FUNDS TRANSFER (EFT)/ AUTOMATIC INVESTMENT PLAN (AIP) AUTHORIZATION

The contributions will be allocated according to the instructions that we have on file for this account. You may change your allocation at any time using Account Access at [tiaa.org](http://tiaa.org), or by calling at 800-842-2252.

### 3. CONTRIBUTION INFORMATION

Apply my contribution to (select one):

TIAA Account Number

**OR**

A new TIAA Account (enrollment form enclosed)

The minimum contribution for Electronic Funds Transfer (one-time or recurring) is \$100.

I would like to initiate:

A one-time contribution of: \$  For Tax Year

For IRAs, one-time contributions are applied to the current calendar year unless otherwise specified.

Recurring monthly contributions of: \$

All recurring contributions are applied to the current calendar year, and your monthly contribution cannot exceed 1/12th of your annual contribution limit.

The first Electronic Funds Transfer should begin on:

Month  / Day  / Year

Please allow at least 7 business days after we receive this form for these services to be activated.

### 4. SIGNATURE

I hereby authorize and request TIAA to make contributions to the TIAA IRA above. TIAA is authorized to instruct my bank to present Automated Clearing House (ACH) transactions or Depository Transfer Checks (DTCs) on my account indicated in this form. I agree to indemnify TIAA from any liability for any losses TIAA may sustain in relying on these instructions. TIAA will use reasonable procedures to verify the authenticity of these instructions, including the use of personal identification or encrypted passwords. I understand that anyone who can properly identify my account and provide my user ID and password can change these instructions. For recurring payments, this authorization will remain in effect until I notify TIAA to the contrary by telephone, online or in writing, and TIAA has sufficient time to implement any change. TIAA reserves the right to stop this service at any time.

Authorized Signature on Account

Print Name

Today's Date (mm/dd/yyyy)

/  /

Please sign your full legal name with suffix, if applicable, using black or dark blue ink. Digital signatures are not accepted.

© 2016 Teachers Insurance and Annuity Association of America-College Retirement Equities Fund, (TIAA-CREF), New York, NY





ELECTRONIC FUNDS TRANSFER (EFT)/  
AUTOMATIC INVESTMENT PLAN (AIP)  
AUTHORIZATION

**RETURN COMPLETED FORMS PACKAGE TO:**

STANDARD MAIL:

TIAA

P.O. Box 1271

Charlotte, NC 28201-1271

OVERNIGHT:

TIAA

8500 Andrew Carnegie Blvd.

Charlotte, NC 28262

