



## PAYMENT FORM

Students, you asked for it and now it is here! You can set up recurring payments. Please note, you must include a \$0.75 fee.

Name(s) _____		Student ID _____
Address _____		(if applicable): _____
City _____	State _____	Zip Code _____
Telephone _____	Email _____	

I would like to make a Student Payment of: \$\_\_\_\_\_ (Please note, you must include a \$0.75 fee for all student payments)

Extra Pmt for Student Loan Regular Pmt of: \$\_\_\_\_\_ Extra Pmt for Student Loan Interest Pmt of: \$\_\_\_\_\_

To be processed: \_\_\_\_\_ Monthly \_\_\_\_\_ Quarterly \_\_\_\_\_ Semi-Annual \_\_\_\_\_ Annually \_\_\_\_\_ One-Time

**Please choose which day of the month you'd like your payment to be processed:**

\_\_\_\_\_ 1<sup>st</sup> \_\_\_\_\_ 5<sup>th</sup> \_\_\_\_\_ 10<sup>th</sup> \_\_\_\_\_ 20<sup>th</sup> \_\_\_\_\_ 25<sup>th</sup>

Start Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (mm/dd/yyyy)

**Enclosed is a voided check for my payment.** Please transfer my payment from my checking/savings account. I understand my future payments will be transferred directly from my account as stipulated above. I understand that I may increase, decrease, or suspend my payment any time through the online form at [www.rotarylinc.org](http://www.rotarylinc.org) or by contacting Lincoln County Rotary Student Loan Fund, Inc. by phone or mail. All payments provided to Lincoln County Rotary Student Loan Fund, Inc. comply with U.S. Law.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Required)

### KEEP THIS PORTION FOR YOUR RECORDS

For your convenience, record your Student Payment Amount: \$\_\_\_\_\_ Extra Loan Payment: \$\_\_\_\_\_ Extra Interest Payment \$\_\_\_\_\_

To be processed: \_\_\_\_\_ Monthly \_\_\_\_\_ Quarterly \_\_\_\_\_ Semi-Annual \_\_\_\_\_ Annually \_\_\_\_\_ One-Time

**Please choose which day of the month you'd like your payment processed:**

\_\_\_\_\_ 1<sup>st</sup> \_\_\_\_\_ 5<sup>th</sup> \_\_\_\_\_ 10<sup>th</sup> \_\_\_\_\_ 20<sup>th</sup> \_\_\_\_\_ 25<sup>th</sup>

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Lincoln County Rotary Student Loan Fund, Inc.  
PO Box 682; Lincolnton, NC 28093  
(704) 732-0867 • [www.rotarylinc.org](http://www.rotarylinc.org)