

## Electronic Funds Transfer Sign Up Form

Please fill out and return this form if you wish to have your gift automatically deducted from your bank account. Your gift(s) will be deducted from your checking/savings account on or around the 15<sup>th</sup> of the month. Please enclose a voided check for our processing.

Please return this form with a voided check to:

Saint Therese Foundation, 1660 S Hwy 100 Ste 103, St Louis Park, MN 55416.

Questions? Contact: Cheri Phillips – Database & Events Coordinator 952-283-2219 or development@sainttherese.org

## **AUTHORIZATION FOR DIRECT PAYMENT:**

I authorize Bremer Bank, Minneapolis to initiate entries to my checking/savings account.

Monthly Gift Amount: \$\_

This authority will remain in effect until I notify you to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it.

## OR

One-time Gift Amount:  \$			
I would like to my gift to support:	Oxbow Lake	] Woodbury	🔲 St. Odilia
Enclosed is my voided check			
Name			
Address			
Signature	Date	:	
Bank Account Number	Checkii	ng	Savings
Financial Institution Routing Number			
		For Office Us	e Only: Customer #

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