

Electronic Funds Transfer Gift 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 15th 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 – Philanthropy Services Manager

952-283-2219 or development@sainttherese.org

AUTHORIZATION FOR DIRECT PAYMENT: I authorize Bremer Bank, Minneapolis to initiate entries to my checking/savings account. One-time Gift Amount: \$ OR 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.	
A specific program: Area of Greatest Need White Rose Scholarship Fund	storal Care Community Life
Enclosed is my voided check	
Name	
Address	
Signature	Date
Bank Account Number	Checking Savings
Financial Institution Routing Number	