

## WHAT IS DDFT?

DDFT (Direct Debit Fund Transfer) is a simple and easy way to make monthly or bimonthly offertory contributions by having your donations drafted from your checking or savings account on a regular and consistent basis. Your donation will be recorded in your parish contribution record as it always has been. In addition, you will see the debit amount and date of debit reflected on your bank statement.

This method is a convenient way to consistently remember your church's life and ministry. This method also helps the church by ensuring that our home parish is not forgotten when the summer months draw families away for vacation.

It is our hope that you would prayerfully consider making your generous gift by using this convenient method. You may indicate 1<sup>st</sup> Collection, 2<sup>nd</sup> Collection or both. If you would like to participate in the Cathedral of St. Andrew DDFT program, please complete the Form below. Return the form to Shawn Hallman at the Cathedral Office, by mail, drop off or place in the collection basket in an envelope marked "DDFT". You may stop any automatic debit by notifying us 30 business days prior to the draft date. Should you have any questions, you may contact Shawn Hallman at 374-2794, [Shallman@csalr.org](mailto:Shallman@csalr.org).

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## CATHEDRAL OF ST. ANDREW DIRECT DEBIT TRANSFER FORM

(Please type or print and attached a "Voided" check)

### Please Choose One Option:

**OPTION 1:** Semi-monthly gift of \$ \_\_\_\_\_ to 1<sup>st</sup> Collection. Semi-monthly gift of \$ \_\_\_\_\_ to 2<sup>ND</sup> Collection/Building Maintenance Fund.

I understand that this amount will be charged to my bank account on the 1<sup>st</sup> and 15<sup>th</sup> of each month. All future gifts will be charged directly to my account.

**Option 2:** Monthly gift of \$ \_\_\_\_\_ to 1<sup>st</sup> Collection. Monthly gift of \$ \_\_\_\_\_ to 2<sup>nd</sup> Collection/Building Maintenance Fund.

I understand that this amount will be charged to my bank account on the 1<sup>st</sup> or 15<sup>th</sup> of each month (**CHECK ONE**). All future gifts will be charged directly to my account.

ENVELOPE / ID #: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_