

Deposit Form

Please make checks payable to **The Diocese of Stockton Revocable Trust** and mail check along with this form to: Trustees, The Diocese of Stockton Revocable Trust, 212 N. San Joaquin Street, Stockton, CA 95202

Name of Entity:	Amount:	Date:
Deposit to: Short-Term Fund <input type="checkbox"/> Long-Term Fund <input type="checkbox"/>	Are these funds restricted? Yes <input type="checkbox"/> (provide documentation) No <input type="checkbox"/>	
Reason for deposit:		

Authorization:		

Withdrawal Request Form

Please mail withdrawal request form to: Trustees, The Diocese of Stockton Revocable Trust, 212 N. San Joaquin Street, Stockton, CA 95202

Name of Entity:	Amount:	Date:
Withdraw from: Short-Term Fund <input type="checkbox"/> Long-Term Fund <input type="checkbox"/>	<i>If these are restricted funds, please ensure the withdrawal complies with the restrictions. If withdrawal exceeds \$25,000 please provide written approval from your finance council (finance council minutes will suffice).</i>	
Reason for withdrawal:		

Date required:	Authorization:	