

Catholic Diocese of Saginaw Inter-Parish Deposit & Loan Program

Parish / Organization / School _____

City _____

Date _____

TRANSACTION TYPE

PAYMENT TYPE

				Sav-to-Sav	Sav-to-Loan	Check	Check #	ACH	ACH CODE
<input type="checkbox"/>	DEPOSIT	Amount	Description						
	IPDL Account #	\$							
	IPDL Account #	\$							
	IPDL Account #	\$							
	IPDL Account #	\$							
	IPDL Account #	\$							
	IPDL Account #	\$							
	IPDL Account #	\$							

<input type="checkbox"/>	WITHDRAWAL		Purpose						
	IPDL Account #	\$							
	IPDL Account #	\$							
	IPDL Account #	\$							

<input type="checkbox"/>	LOAN PAYMENT		Description						
	IPDL Loan #	\$							
	IPDL Loan #	\$							
	IPDL Loan #	\$							

AUTHORIZED SIGNATURE: _____ TITLE: _____	FOR DIOCESAN OFFICE USE ONLY:
AUTHORIZED SIGNATURE: _____ TITLE: _____	RECEIVED BY / ENTERED BY _____ DATE _____

Please send to "INTER-PARISH DEPOSIT & LOAN" or fax to 989-797-6645