



Parish Deposit & Loan Fund Trust
Finance

523 N. Duluth Ave.
Sioux Falls, SD 57104
(605) 988-3760 phone
(605) 334-2092 fax

Attention: Debra Miller, Finance Department

XXX

Parish Deposit & Loan Fund Trust - Withdrawal Request Form

Account Name _____

City _____

If different then mailing address

Please Indicate Please mail the check _____ Will pick up the check _____

EFT _____
(must submit voided check for this option)

Mailing Address _____

PD<rust # Account Name

Amount _____

Please circle the date funds are needed. 10th ck run 20th ck run 30th ck run or
last day of the month

Signature **XXX** _____
Authorized Signor - Name on file with Chancery

Date: _____

Printed Name _____

Please fax, mail or e-mail original signed form to:

Catholic Chancery Office
Attn: Debra Miller
523 N Duluth Ave
Sioux Falls SD 57104
fax: (605) 988-3860
email: dmiller@sfcatholic.org