



Catholic Foundation of Southwest Iowa

Fund Distribution Form and Instructions

Please scan this completed document to: contact@cfswia.org

Today's date: _____

Which fund do you wish to disburse funds from:

Fund name: _____

Fund #: _____

If simply moving the funds into another fund, please note which fund they are to be moved into:

Fund name: _____

Fund #: _____

Please process an ACH distribution in the amount of \$ _____ from the fund listed above.

We require these funds no later than _____.

If you do not have ACH set up, please contact our office. In effort to expedite distributions. Funds should be expected to arrive within 1-2 business days.

ACH is the only option to receive funds.

What number can CFSWIA call for questions?: _____

Authorized individual #1 signature Individual #1 printed name Title or position

Authorized individual #2 signature Individual #2 printed name Title or position

Authorized individual #3 signature Individual #3 printed name Title or position

Note: There may be more lines than you need for authorization. Only list what/who your fund requires.

For CFSWIA use only:

- entered in database spreadsheet Date: _____
- copy in fund folder Date: _____
- copy sent to Accounting Date: _____