



# ARCHDIOCESE OF LOS ANGELES INVESTMENT POOL

## INVESTMENT POOL DEPOSITS, WITHDRAWALS AND TRANSFERS

MAIL TO: ARCHDIOCESE OF LOS ANGELES  
 INVESTMENT POOL  
 PO BOX 51752  
 LOS ANGELES, CA 90051-6052

Date:

Parish/Schools/Others:	Telephone No:
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Address:	Fax No:
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Account Name	Dept ID (5)	Acct Number (3)	Check #	Check Amount	Transfer (X)	Balanced Pool		Income Pool	
						Deposit	Withdrawal	Deposit	Withdrawal
<b>TOTAL</b>									

**Instructions To Complete This Form:**

- 1) Record Check Deposits first, Check Withdrawals next, then Pool and Account Transfers last.
- 2) Transfers require 'X' in transfer column. Group related transactions.
- 3) Proof Total of Transfer Deposits must equal Total of Transfer Withdrawals.
- 4) Construction withdrawals need invoices attached.

Proof as follows:			
Total Check/Cash Deposits	Total Check/Cash Withdrawals	Total Transfer Deposits	Total Transfer Withdrawals

Authorized Signature:		
<table style="width: 100%; border: none;"> <tr> <td style="width: 70%; border: none;">Pastor, Administrator and/or School Principal      Print Name</td> <td style="width: 30%; border: none;">Date</td> </tr> </table>	Pastor, Administrator and/or School Principal      Print Name	Date
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Reason for withdrawals

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Requests over \$20,000.00 require Regional Bishop approval. Construction withdrawals need invoices attached.

Authorized Signature:		
<table style="width: 100%; border: none;"> <tr> <td style="width: 70%; border: none;">Regional Bishop      Print Name</td> <td style="width: 30%; border: none;">Date</td> </tr> </table>	Regional Bishop      Print Name	Date
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