

EPISCOPAL DIOCESE OF BETHLEHEM

Diocesan Investment Trust Contribution Form (for existing accounts)

Date of Request: _____

Parish / Organization Name: _____

Parish / Organization City: _____

Trust Name / I.D.#: _____

Amount of Contribution: _____

AUTHORIZATION:

Vestry has approved this contribution: YES ____ NO ____

Submitted By: _____

Signature: _____ Date: _____

MAKE CHECKS PAYABLE TO: Truist

**Submit this form and check
to:**

**Truist – F&E
P.O. Box 896743
Charlotte, NC 28289-6743**

(Overnight delivery only)

Truist
Attn: Lockbox #896743
5130 Parkway Plaza Blvd.
Charlotte, NC 28217-1964

*Truist personnel only: please credit fund to account xx0905 and
reference fund ID # in description.*

Also mail a copy of this completed form to: Cynthia Bakos
Diocese of Bethlehem
333 Wyandotte Street
Bethlehem, PA 18015

Or email to: cindy@diobeth.org

Diocesan Review: _____

Signature: _____ Date: _____

Episcopal Diocese of Bethlehem ~ 333 Wyandotte Street ~ Bethlehem, PA 18015