

Retained Earnings to Corpus Request

Please use this form to make a Retained Earnings transfer to Corpus.
You may make **one transfer to Corpus per quarter per account.**
Questions, call 815-399-4300. Please mail or fax to 815-399-5657.



**THE CATHOLIC
FOUNDATION**
For the People of the Diocese of Rockford

Date _____

Participant Name _____

City _____

The Catholic Foundation
PO Box 7044
Rockford, IL 61125-7044

Please Transfer From Retained Earnings:

Account # _____

Account Name _____

Transfer Amount \$ _____ ①

Please Transfer To Corpus:

Account # _____

Account Name _____

Transfer Amount \$ _____ ① Amounts must equal

Pastor/Supervisor Signature

Date

| | |
|-----------------|--|
| Office Use Only | |
|-----------------|--|