

## Maitland Newcastle Diocesan Trust Fund

841 Hunter Street PO Box 756 Newcastle NSW 2300

**P** 4979 1160 **F** 4979 1169 **E** cdf@mn.catholic.org.au

## REQUEST FOR PAYMENT FROM PARISH TRUST FUND

It is requested that the following amou	unt be paid	
From: (Parish Trust Account)		
Name:		
Account Number:		
To: (either the school or the sup	olier)	
If the invoice has been paid by school then the transfer is to the school account	If the invoice is unpaid then the supplier is paid directly from Trust Account by electronic transfer or cheque	
Account Name:	ELECTRONIC TRANSFER	CHEQUE
	Account Name:	Address:
Account No:	Account No:	
	BSB:	
Reason for transfer request:		
Have you attached a Tax Invoice and	I any other relevant paperwork?	
I authorise the transfer of the above mentioned account	nentioned amount from the Parish Tru	st Account to the above
School Principal	Parish Priest	
Please complete this form attaching all su	oporting documents and email to cdf@m	n.catholic.org.au
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## REQUEST FOR PAYMENT FROM PARISH TRUST FUND

It is requested that the following amount_	be paid	
From: (Parish Trust Account)		
Name:		
Account Number:		
To: (Parish Cheque Account or Dire	ectly to Supplier)	
If the invoice has been <u>paid</u> by Parish then the transfer is to the Parish Cheque Account the transfer is to the Parish Cheque Account	If the invoice is <u>unpaid</u> then the supplier is paid directly from the Trust Account by electronic transfer or cheque Account by electronic transfer or cheque	
Account Name:	ELECTRONIC TRANSFER	CHEQUE
	Account Name:	Address:
Account No:	Account No:	
	BSB:	
Reason for transfer request:  Have you attached a Tax Invoice and any o	ther relevant paperwork?	
I authorise the transfer of the above mentio Cheque Account.		to the above mentioned account Parish
Parish Priest		
DATE:		
Please complete this form attaching all suppo	orting documents and email to cdf@mn.catho	olic.org.au
Sean Scanlon		
DATE:		