



The Episcopal Diocese of Hawai'i

Request to Withdraw Funds from the Endowment Account Form

[Date]: _____

NOTE: Check will be issued from Bank of Hawaii

To: Diocesan Controller

From: [Name of Priest, Warden, or Treasurer, and Title] _____

Church/Organization: [Name of church or organization] _____

At its meeting on [date] _____ the [Vestry, Bishop's
Committee, or name of governing group of an
organization _____] approved the withdrawal of funds from
the Diocesan Portfolio. Please see the attached minutes from that meeting.

[name of fund as written in quarterly report. If you are withdrawing from more than one fund, please list funds and amounts below.]

Withdraw from: _____

[amount cannot exceed 90% of amount on last quarterly report due to fluctuations of market]

Amount: _____

Purpose: _____

[what funds will be used for]

[If you are withdrawing from more than one fund, please list funds and amounts
here or insert any additional information]