

**Episcopal Diocese of Delaware**  
**MASTER FUND A REQUEST FORM**

**Section I. Check Deposit Transmittal – LOCK BOX**

**DEPOSITS WILL NOT BE PROCESSED WITHOUT ALL INFORMATION.**

This section must be completed and mailed with all checks that are to be deposited to the named account. Instructions for mailing are below.

**Failure to provide the account number could delay check deposit**

Episcopal Diocese of Delaware  
Company/Account Name

\_\_\_\_\_   
Check Number

\_\_\_\_\_   
Fund Name - Parish

Receipt Code	Description	Amount
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38	DEPOSIT TO ACCOUNT <b>(PLEASE CHECK ONE BOX)</b> <input type="radio"/> Purchase of Master Fund A – Truist Account # 7044649 <input type="radio"/> For Cash Equivalents – Truist Account #7044613	
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Description Required:

Received from \_\_\_\_\_ \$ \_\_\_\_\_  
( Input Fund Name/Parish above)

**Mailing Instructions**

**(A) CHECK DEPOSITS – Mail check and this form to:**

Truist Institutional Advisory Services - Transmittals  
P.O. Box 896735  
Charlotte, NC 28289-6735

**Or Overnight:**

Truist  
P.O. Box 896735  
Attn: Lockbox # 896735  
5130 Parkway Plaza, Blvd.  
Charlotte, NC 28217-1964

Send copy of this form to  
Brenda Marshall @ [Brenda.marshall@truist.com](mailto:Brenda.marshall@truist.com)  
Teri Quinn Gray @ [tgray@delaware.church](mailto:tgray@delaware.church)