



Remittance Form for the Episcopal Diocese of San Joaquin

Church Name: _____ Church City: _____

One check may be used for the following items: Make check payable to The Episcopal Diocese of San Joaquin or EDSJ. Please use the memo line on your check. **Do not mail cash. Do not staple checks to this form.**

Due to the Diocese:

	Invoice # /Month	Amount
Assessment	_____ / _____	\$ _____
Clergy Compensation	_____ / _____	\$ _____
Conference/Workshop/Retreat Registration (Conference Name: _____)	_____ / _____	\$ _____

Donations:

	Purpose	Amount
Bishop's Discretionary Fund	_____	\$ _____
Specific Donation: i.e. United Thank Offering, DioSJ Emergency Relief Fund, Immigration Task Force	_____	\$ _____
Other (Specific purpose)	_____	\$ _____

Total Check Amount

check # _____

\$ 0.00

Mail Remittance to: [The Episcopal Diocese of San Joaquin](#)
Attn: Accounts Receivable, 1528 Oakdale Road, Modesto, CA 95355
Tel 209.576.0104 **Fax** 209.576.0114 **Web** www.diosanjoaquin.org