



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 # _____

_____ \$ _____

Mail Remittance to: [The Episcopal Diocese of San Joaquin](#)
Attn: Accounts Receivable, 4147 E Dakota AVE Fresno, CA 93726
Tel 209.576.0104 **Email** dioadmin@diosanjoaquin.org
Web www.diosanjoaquin.org