

TRUSTEES OF TRUST FUNDS WITHDRAWAL TRANSMITTAL

Date:		
Funds to be withdrawn from:		
Funds held at:		
Amount:		
Sources of Funds:		
Public or Private Fund Source?	Public Private	
Withdrawal Authority:		
Authorized Signers:	Title:	Date:
Authorized Signers:	Title:	Date:
Authorized Signers:	Title	Date: