

LOAN AUTHORIZATION FORM
PARISH INVESTMENT PROGRAM

DATE _____

FROM:

PARISH

MAILING ADDRESS

CITY STATE ZIP

It is requested that a loan from the Parish Investment Program for the above named parish be granted in the amount of \$ _____.

Signed (Parish Pastor or Parish Life Coordinator)

Please make a copy of this request for your files, and then return the original:

TO: FINANCE OFFICE
The Pastoral Center
1280 Med Park Drive
Las Cruces, NM 88005

Loan Authorized by _____
Finance Office of the Diocese of Las Cruces

Title Date