Kingdom of Calontir
Transfer Form
(Use for any transfer to any SCA group)

To: ____________________________  (Group Name)

From: ____________________________  (Group Name)

Date: ________  Check Number: ____________  Amount: ____________

Reason for Transfer: ____________________________

________________________________________________________________

This check is being recorded in OUR report:  (check one)
□ Funds Transferred Out to Another SCA Account – Within Kingdom
□ Funds Transferred Out to Another SCA Account – Outside Kingdom

This check must be recorded in YOUR report:  (check one)
□ Funds Transferred In from Another SCA Account – Within Kingdom
□ Funds Transferred In from Another SCA Account – Outside Kingdom

Sender’s Name: ____________________________

Street Address: ____________________________

City: ____________________________  State: _________  Zip Code: ________

Telephone:(____) - _________  Email: ____________________________

SCA Name: ____________________________

CC: Regional Files
   Exchequer Files  Date Received: ________________