

# Charitable Asset Management Check Deposit Form

## Mailing addresses

### Deposits through UPS or FEDEX:

FIS Global  
Attn: CAM Global 6838  
270 Remington BLVD Suite B  
Bolingbrook, IL 60440

### Deposits through United States Postal Service:

CAM Global  
PO Box 6838  
Carol Stream, IL 60197-6838

## Deposit details

### Check 1 (Only add donor if not a beneficiary)

#### Beneficiary 1 name

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

#### Beneficiary 2 name

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

#### Donor name

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

**Check 2 (Only add donor if not a beneficiary)**

**Beneficiary 1 name**

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

**Beneficiary 2 name**

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

**Donor name**

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

**Check 3 (Only add donor if not a beneficiary)**

**Beneficiary 1 name**

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

**Beneficiary 2 name**

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

**Donor name**

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

**Check 4 (Only add donor if not a beneficiary)**

**Beneficiary 1 name**

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

**Beneficiary 2 name**

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

**Donor name**

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

**Check 5 (Only add donor if not a beneficiary)**

**Beneficiary 1 name**

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

**Beneficiary 2 name**

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

**Donor name**

Repeat donor  New donor

New donor's date of birth (MM/DD/YYYY)

Account name

Account number

Deposit amount

**statestreet.com/investment-management**

Print clearly in CAPITAL letters and black ink.

**Please do not send cash.** This form should accompany any checks sent for deposit.

Investing involves risk including the risk of loss of principal.

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**Not FDIC insured. No bank guarantee. May lose value.**