

**SOUTHERN DOCUMENTARY FUND**  
**Fiscal Sponsorship Disbursement Request Form**

DATE: \_\_\_\_\_ AMOUNT REQUESTED: \_\_\_\_\_

PROJECT TITLE: \_\_\_\_\_

PROJECT DIRECTOR: \_\_\_\_\_ FEDERAL TAX ID# \_\_\_\_\_

WILL THIS DEplete YOUR ACCOUNT? YES \_\_\_\_\_ NO \_\_\_\_\_

IS THIS A FIRST - TIME REQUEST FOR THIS PROJECT? YES \_\_\_\_\_ NO \_\_\_\_\_

PHASE OF PRODUCTION: \_\_\_\_\_

CHECK PAYABLE TO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Is this a different or new address from the one we have? yes \_\_\_\_\_ no \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

PLEASE LIST ANTICIPATED EXPENSES FOR THIS DISBURSEMENT:

(attach extra sheets if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PLEASE LIST EXPENSES INCURRED (EXACT AMOUNTS) AND PAID FOR WITH PREVIOUS DISBURSEMENT (attach extra sheets if necessary):

\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE OF PROJECT DIRECTOR: \_\_\_\_\_

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**FOR SDF OFFICE USE ONLY**

Date Request Received: \_\_\_\_\_ Date of Disbursement: \_\_\_\_\_

SDF Approval: \_\_\_\_\_ Project Balance: \_\_\_\_\_

Date: \_\_\_\_\_ Check Number: \_\_\_\_\_