

**South Country Education Foundation, Inc.**

PO Box 512, Bellport, NY 11713

[www.scefonline.org](http://www.scefonline.org)

# **Request for Grant Disbursement of Funds Instructions & Form**

## **Process:**

1. Fill out the Grant Disbursement Form.
2. Fill out the End of Grant Reporting Form, once grant project has completed.
3. Send a copy of an order form, an invoice or receipt(s) to cover the expense requested.
4. The SCEF will write and mail checks to all vendors submitted and approved for reimbursement. Please include for whom the check is to be written, the address of where it is to be sent, and a contact phone number if applicable.
5. If you expend money and then want reimbursement (which is discouraged), you must provide the receipts before a check can be written. *However, we will be unable to reimburse any sales tax that may have been paid.*

## **Send the Request to:**

SCEF, Inc.

Attn: Treasurer

PO Box 512

Bellport, NY 11713-0512

## **Questions?**

If you have questions regarding the disbursement of grant funds, contact us at

[www.scefonline.org/contact.html](http://www.scefonline.org/contact.html).

# Request for Grant Disbursement of Funds Form

## Mail to:

SCEF, Inc.  
Attn: Treasurer  
PO Box 512  
Bellport, NY 11713-0512

Grant Code Number (Official Use Only): \_\_\_\_\_

Name of Grant: \_\_\_\_\_

Contact Person(s): \_\_\_\_\_

Contact Person(s) Email: \_\_\_\_\_

Contact Person(s) Phone Number: \_\_\_\_\_

Grant Cycle: Year \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Date Grant Completed \_\_\_\_\_

**Make Check Payable to:** \_\_\_\_\_

**Address to Where Check Should be Mailed:** \_\_\_\_\_

**Contact Name and Phone Number of Vendor (if applicable):** \_\_\_\_\_

Total Amount of Grant Award: \_\_\_\_\_ Amount of Disbursement Request: \_\_\_\_\_

*Please allow at least two weeks from our receipt of this form for the disbursement of funds.*

**An order form, invoice or receipt(s) covering the expense requested must be attached.**

**Please note that equipment and/or software purchased through a SCEF grant becomes the property of the South Country School District.**

**Comments:**

# End of Grant Reporting Form

**Mail to:**

SCEF, Inc.  
Attn: Treasurer  
PO Box 512  
Bellport, NY 11713-0512

Grant Code Number (Official Use Only): \_\_\_\_\_

Name of Grant: \_\_\_\_\_

Contact Person(s): \_\_\_\_\_

Contact Person(s) Email: \_\_\_\_\_

Contact Person(s) Phone Number: \_\_\_\_\_

Grant Cycle: Year \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Date Grant Completed \_\_\_\_\_

Total Amount Spent on Grant (Please include all costs submitted to the school district): \_\_\_\_\_

Please provide us with a brief synopsis of your grant. Any additional information or materials (pictures, DVDs, etc.) you would like to include may be attached and sent with this form. \_\_\_\_\_

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Thank you for completing this form It will help us keep records of our expenditures and will provide documentation to the government to support our ongoing non-profit status.

*The South Country Education Foundation, Inc. is a 501(c)(3) non-profit organization committed to improving educational opportunities for all students in the South Country School District. Its mission is to promote and enhance educational initiatives by providing supplemental financial support for projects and programs that are outside of the South Country School District budget.*