



Community Fund Management Foundation

17900 Jefferson Park, Suite 102 • Middleburg Heights, OH 44130
(216) 736-4540 • Fax: (216) 867-9783 • www.cfmf.org

Receipt Log for Advances

Please complete, attach legible copies of receipts, and return to the above office by mail or fax.

Agreement No.	Name of Beneficiary

Distribution Amount Previously Approved

\$

Minus: Total Value of Receipts Attached (List below)

- \$

Date of Receipt	Description of Purchase	Amount on Receipt
		\$
		\$
		\$
		\$
		\$
		\$
		\$

Equals: Total Value of Receipts Still Due to CFMF

\$

I declare that the information provided on this form is accurate and current.

Printed Name of Designated Advocate

Date

Signature of Designated Advocate