



Community Fund Ohio
17900 Jefferson Park, Suite 102 • Middleburg Heights, OH 44130
Phone: 216.736.4540 • Fax: 216.867.9783
www.communityfundohio.org

Receipt Log for Advances

Please submit the completed form and receipts to Community Fund via mail or fax. The receipts must be on 8½" x 11" paper and should not contain staples or tape.

Agreement Number (consists of 1-2 letters and 8 numbers): _____

Beneficiary's Name: _____

Distribution Amount Previously Approved and Advanced \$ _____

Minus: Total Value of Receipts Attached (List below) \$ _____

| Date | Description | Amount |
|------|-------------|--------|
| | | \$ |
| | | \$ |
| | | \$ |
| | | \$ |
| | | \$ |
| | | \$ |
| | | \$ |

Equals: Total Value of Receipts Still Due to Community Fund \$ _____

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

Printed Name of Designated Advocate

Date

Signature of Designated Advocate