

For Requesting Disbursements from the MASSB Foundation

(to be customized to justify the request and to identify the payor, with Schedule 1 being required for government year-end tax reporting):

Withdrawal Request Form: Dated _____, 20__

MASSB Foundation
Attn: Foundation Treasurer
103 Market Street
Annapolis, MD 21401

Re: Withdrawal of Funds

To Whom it May Concern:

Please be advised that the Board of Directors for the _____ County Department of Social Services has duly approved resolutions authorizing and recommending to the Community Foundation the release of \$_____ from our [__short-term OR __endowment] account within the MASSB Foundation.

Our Board of Directors represents and covenants that the funds being disbursed will be used solely for the purpose of paying expenses associated with the following program that is consistent with the charitable purpose of the mission of the _____ County Department of Social Services: _____ . Specifically, the disbursement advances child protection or family preservation expenses, that are not otherwise governmentally funded, in the following way(s): _____ .

We certify that the financial information set forth in Schedule 1 is, to the best of our knowledge, true and accurate for tax reporting purposes. Note that applicable tax laws now require Schedule 1 in order for us to process a withdrawal request.

The funds being requested should be made payable to _____, and should be mailed to the following person:

Payee: _____

_____ <Street Address>

_____, _____ <City, State, Zip>

Invoice #: _____ <if applicable to facilitate payment>

Please send the undersigned an email (to _____@_____._____) as confirmation of payment to the above.

Best regards,

Signature: _____

Signature: _____ *

Printed Name: _____

Printed Name: _____ *

* include 2nd signature only if local board adopts resolutions to require that for enhanced security.

Updated 12/5/2019

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[NEW PAGE]

MASSB FOUNDATION
Withdrawal Request

Schedule 1: Information about Disbursement Request

Category of Expense (from Form 990 by Row #)	Fundraising Expense	Program (Services) Expense
22. Grants and Allocations	\$ _____	\$ _____
26. Salaries and Wages		
30. Professional Fundraiser		
31. Accounting Fees		
32. Legal Fees		
33. Supplies (including software)	\$ _____	\$ _____
34. Telephone		
35. Postage and Shipping	\$ _____	\$ _____
36. Occupancy		
37. Equipment and Maintenance		
38. Printing and Publishing	\$ _____	\$ _____
39. Travel (food, trips)	\$ _____	\$ _____
40. Conferences and Meetings	\$ _____	\$ _____
43. Other - Insurance		
43. Other - Admin Fee (prog mgmt)		
TOTAL		

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