

## SERF REQUEST FOR PAYMENT FORM

THIS FORM MUST ACCOMPANY ANY REQUEST FOR PAYMENTS. Use separate form for each check requested.  
Make copies of this form as needed.

**Today's Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Grant Title:** \_\_\_\_\_

**Grant ID:** \_\_\_\_\_

**Amount requested:** \_\_\_\_\_

**Make check payable to:** \_\_\_\_\_

**Mail to (if different from above):** \_\_\_\_\_

\_\_\_\_\_

### Requesting payment for (check one):

\_\_\_\_\_ Teacher time (\$25/hour) – Provide social security number: \_\_\_\_\_  
(SERF will file IRS Form 1099 and send copy to recipients awarded more than \$600 per year.)

\_\_\_\_\_ Materials or equipment

\_\_\_\_\_ Conference fees

\_\_\_\_\_ Consultants fees

\_\_\_\_\_ Other – Describe: \_\_\_\_\_

\_\_\_\_\_

*Attach receipts, purchase orders, and/or invoices when applicable. Return completed form to SERF, Grant Administrator, PO Box 891, Sudbury, MA 01776. Allow 2 to 4 weeks for payment.*

### Grant status (check one):

\_\_\_\_\_ I will not be submitting additional check requests. This grant is now complete.

\_\_\_\_\_ I will be submitting additional check requests. This grant is not complete.

### Other requests:

\_\_\_\_\_ Send SERF labels to affix to materials/equipment purchased using SERF funds – Quantity needed: \_\_\_\_\_

\_\_\_\_\_ Send Grant Evaluation form

\_\_\_\_\_ Send Archive Request form to request a list of projects funded by SERF which meet a specific search criterion.

**NOTE: Grant funds are reserved for one year from date of grant award unless written request for an extension is submitted to grant administrator 30 days prior to expiration date.**