

INTERSECTION INCUBATOR - REQUEST FOR PAYMENT Date: _____

Name of Fiscally Sponsored Project: _____

Name of Payee: _____

Payee's Street Address: _____

Payee's City, State, Zip: _____

Payee's Social Security # (required for payments to ALL individuals): _____

Please indicate if check should be: Mailed Held for pick-up in WILL CALL box

ACCOUNT #	NAME OF EVENT/WORK and EXPENSE DESCRIPTION	PROJECT GRANT? **	AMOUNT
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total to be Paid: \$ _____

Notes/Additional Info: _____

Name of Project Director: _____ Signature: _____

Approval: IA Admin: _____ IA Prog Dir: _____ IA Exec Dir: _____

ACCOUNT #'S:

INDEPENDENT CONTRACTORS

- 5510 Artist & Performers
- 5520 Production Personnel
- 5525 Graphic Designer
- 5535 Accounting-Bookkeeping
- 5545 Strategic Planning Consultants
- 5550 Fundraising
- 5555 Marketing & PR
- 5560 Administrative Support
- 5590 Other Services

OPERATING EXPENSES

- FACILITIES*
- 6010 Office Rent
- 6020 Utilities
- 6030 Facility Supplies/Maintenance
- 6040 Insurance
- 6050 Telephone
- MARKETING & COMMUNICATIONS*
- 6110 Internet & Website
- 6120 Printing & Copying
- 6130 Postage & Delivery
- 6140 Hospitality & Receptions

GENERAL OPERATING

- 6210 Office Supplies
- 6230 Professional Development
- 6240 Memberships & Subscriptions
- 6250 Misc Fees & Taxes
- 6270 In-Kind Contributions
- 6280 Travel & Parking
- 6500 Fiscal Sponsorship Fees
- ASSETS**
- 6310 Equipment-Lease/Purchase

PROGRAM EXPENSES

- 7010 Program Space Rental
- 7020 Production & Exhibition Supplies
- 7030 Product Distribution Expenses
- 7040 Printing & Copying-Program
- 7190 Other Production Expenses

****PROJECT GRANT:** If you have received any specific grants in support of this event/work, please list them in this column.

PLEASE NOTE: Request for Payment Forms are due by noon on Friday, for payment by 1pm the following Friday.