



## FISCAL SPONSORSHIP DISBURSEMENT REQUEST FORM

Please send form to Easmanie Michel at [emichel@nywift.org](mailto:emichel@nywift.org)

**Note: All requests must attach a W9 form.**

---

**Date of Request:**

**Project Title:**

**Project Director:**

---

**Amount Requested:**

*Note: If you take all the funds in your account, it still remains open as long as you continue to file your End Of Year Report and pay your membership fees on a timely basis.*

---

**Check Preferred Payment Method:**

☐

**CHECK PAYABLE TO:**

Check processing time: 7 business days

☐

**WIRE TRANSFER PAYABLE TO:**

Wire Transfer processing time: 7 business days

**Address:**

**City/State:**

**Zip code:**

**Phone Number:**

**Email:**

For any questions regarding your disbursement form or fiscal sponsorship project, please contact Easmanie Michel at [emichel@nywift.org](mailto:emichel@nywift.org) or 212-679-0870 x 39.

# NYWIFT || New York Women in Film & Television

## WIRE TRANSFER INFORMATION:

**Beneficiary Bank Name:**

**Beneficiary Routing Number:**

**Beneficiary Account Number:**

**Beneficiary Bank Address:**

**Beneficiary Name:**

**Beneficiary Address:**

---

**PLEASE LIST EXPENSES** (attach receipts and invoices):

## **Phase of Production:**

☐ Pre

☐ Prod

☐ Post

☐ Dist

Reimbursement: ☐ YES ☐ NO

**E-Signature of Project Director:**