

Authorization for Release of Funds

In order to receive the funds in your account, please complete Section 1 of this form and return it with the required documentation to the Rotary Club of San Mateo, Attention: SMART Chairperson, P.O. Box 95, San Mateo, CA 94401 or Email to Accounting@RotaryClubOfSanMateo.com. Please consider including a note or letter of thanks to the Rotary Club of San Mateo.

Section 1:	
I am currently enrolled for theser	nester at
•	a copy of receipt for payment of fees, a copy of my class
schedule, and/or a copy of my transcript.	
Name (please print):	
Address:	
	Date:
Section 2:	
	has satisfied the suitouis for receipt of Detam CNAADT
Program funds Please sign below authorizi	has satisfied the criteria for receipt of Rotary SMART ing the release of funds, and send this form to Sylvia Rich at
Boston Private Bank and Trust Company.	ing the release of famas, and send this form to sylvia men at
• •	
Signature: SMART Chairperson	Date:
Signature: SM Rotary Officer	Date:
Signature: SM Rotary Officer	Date:
Section 3:	
A cashier's check in the amount of \$	has been issued, closing the SMART account of
Name:	Account #:
Signature:	Date:
(Officer of Boston Private Bank a	

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