STATE OF CALIFORNIA Loan Programs Loan Escrow Disbursement Request CalRecycle 809 (New 03/2016)

Loan Escrow Disbursement Request

Borrower Name				
Loan Number				
Total Request				
VENDORS OR BORROWER TO BE PAID (attach invoices)				
Payee Name:				
Complete Address:				
Total dollar amount to be paid:				
Purpose: Equipment Working Capital Other (Describe):				
Payee Name:				
Complete Address:				
Total dollar amount to be paid:				
Purpose: Equipment Working Capital Other (Describe):				
Payee Name:				
Complete Address:				
Total dollar amount to be paid:				
Purpose: Equipment Working Capital Other (Describe):				
BORROWER APPROVAL Date:				
Authorized Name: Signature:				

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DEPARTMENT OF RESOURCES RECYCLING AND RECOVERY (CalRecycle)

CalRecycle Staff Approval				
Loan funds available for requested amount and purpose? Yes No				
Amount Requested:	Adjustments:		Amount Approved:	
Date approval emailed to escrow:				
Approval Signature of CalRecycle Staff Date:				
Printed Name of CalRecycle Staff		Signature:		
Approval Signature of CalRecy	cle Supervisor	Date:		
Printed Name of CalRecycle Supervisor		Signature:		