



## INVOICE FOR GRANT PAYMENTS

### PART A - GRANT INFORMATION

DATE _____	INVOICE NUMBER _____ (Enter your grant number above.)
GRANTEE'S NAME/ADDRESS _____ _____ _____	GRANT PERIOD _____ (MM/DD/YYYY to MM/DD/YYYY)
	<b>TYPE OF REQUEST</b>
	90% ADVANCE PAYMENT <input type="checkbox"/>
	10% FINAL PAYMENT <input type="checkbox"/>

### PART B - 90% ADVANCE PAYMENT

GRANT AWARD \$ \_\_\_\_\_ X 90% = TOTAL ADVANCE PAYMENT REQUEST \$ \_\_\_\_\_

### PART C - 10% FINAL PAYMENT

To qualify for release of the 10% final payment, the grantee must have done **ALL of the following**

- Have completed the scope of work found in Exhibit A of the Grant Standard Agreement.
- Submitted the CAC/NEA Grants Activity Survey
- Submitted the Final Report

FINAL PAYMENT AMOUNT REQUESTED \$ \_\_\_\_\_

### CERTIFICATION

"I hereby certify under penalty of perjury that this report is in accordance with the grant approved by and the standards of the California Arts Council, and that payment has not been previously received for the amount claimed herein."

\_\_\_\_\_  
AUTHORIZED OFFICER (PRINT) PREPARER'S PRINTED NAME

\_\_\_\_\_  
AUTHORIZED OFFICER (SIGNATURE)\*\*\*  
\*\*\*DO NOT USE BLACK INK PHONE NUMBER

### FOR CAC ACCOUNTING USE ONLY

FY \_\_\_\_\_ FUND \_\_\_\_\_ CODING \_\_\_\_\_ SCHEDULE \_\_\_\_\_

FY \_\_\_\_\_ FUND \_\_\_\_\_ CODING \_\_\_\_\_ SCHEDULE \_\_\_\_\_

\_\_\_\_\_  
PROGRAM SIGNATURE (For Final Payments Only) DATE

\_\_\_\_\_  
ACCOUNTING SIGNATURE DATE