



MASSACHUSETTS CULTURAL COUNCIL LOCAL CULTURAL COUNCIL PROGRAM REIMBURSEMENT FORM

Grantee _____

Project Title _____

For Council Use:
Application Number _____

Total award amount \$ _____ Amount to be paid now \$ _____

***Please attach supporting documentation such as copies of programs, fliers, press, invoices, cancelled checks, receipts, etc. as required by the local cultural council for payment.**

This request is:

<p>1. <input type="checkbox"/> a progress payment or <input type="checkbox"/> a final payment</p>	<p>2. <input type="checkbox"/> for the grantee or <input type="checkbox"/> for third-party vendor</p>
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MAKE CHECK PAYABLE TO:

NAME _____
ADDRESS _____
CITY/TOWN _____ STATE/ZIP _____
TAX ID #/FED EMPLOYEE # **OR** SOCIAL SECURITY # _____

"As grantee for the project as detailed above, I certify that the statements made herein are true and that the funds requested to be disbursed fulfill the purpose indicated in the approved application, and that I have fulfilled the credit policy requirements outlined on the MCC's website at www.massculturalcouncil.org."

[If your grant was approved with a CONDITION]: "I further testify that the condition imposed on the project has been met."

Signed under the pains and penalties of perjury:

Signature of grantee or officer of grantee organization with legal authority to bind and execute this certification

Date

FOR LOCAL CULTURAL COUNCIL USE ONLY: Must be completed and signed by **at least two** cultural council members

Please check:

- The LCC has notified the grantee of the credit policy outlined in the *LCC Program Regulations and Guidelines*.
- The grantee has completed all or part of the project described in the approved application, and has submitted appropriate supporting documentation regarding how funds were used.

_____ LCC Member Signature	_____ Print Name	_____ Date
_____ LCC Member Signature	_____ Print Name	_____ Date