LOCAL CULTURAL COUNCIL PROGRAM
REIMBURSEMENT FORM

Grantee____________________________________________________________
Contact Phone ____________________________
Contact Email ______________________________
Project Title ________________________________
Total award amount $____________ Amount to be paid now $____________

Please attach supporting documentation such as copies of programs, press, invoices, cancelled checks, and receipts, as required by the Local Cultural Council for payment.

This request is: 1. [ ] a progress payment  2. [ ] for the applicant
   [ ] final payment  [ ] third-party vendor

MAKE CHECK PAYABLE TO:
NAME______________________________________________________________
ADDRESS__________________________________________________________
CITY/TOWN_____________________________STATE/ZIP___________________
TAX ID/ FED EMPLOYEE ID/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 Mass Cultural Council website."

[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 Date
legal authority to bind and execute this certification

FOR LOCAL CULTURAL COUNCIL USE ONLY: If the council is satisfied that the project has been completed as promised, a sub-committee of a minimum of two council members must approve the payment. Both members can sign the form to indicate approval, or one member can sign the form on behalf of both members. If you are singing on behalf of another member, sign your name and print theirs below.

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 original proposal approved and has submitted appropriate supporting documentation regarding how funds were used.

_________________________ ________________________________
LCC Member Signature     Print Name     Date

_________________________ ________________________________
LCC Member Reviewer/Signature     Print Name     Date

Once processed, please obscure the recipient’s Social Security or Tax ID number. 

Revised July 2024