

LCC Grant Program FINAL PAYMENT INVOICE

Instructions: This is a Final payment. Please allow four to six weeks for processing. You must submit the following documents along with this form to receive payment:

| | Final Report | | | |
|--------|---------------------------------------|---|----|--|
| | Budget Forms | 5 | | |
| | Project Receipt | ots | | |
| | DATE: | | | |
| | то: | Cambridge Arts Council 344 Broadway, 2 nd FL Cambridge, MA 02139 | | |
| | FROM: | Grantee: | | |
| | | Project Title: | | |
| | | Project Dates: | | |
| | PAYABLE/ REMIT TO: | Name: | | |
| | | Address: | | |
| | | City: State: Zip: | | |
| | | Tax ID/FEI/SS# : | | |
| | FOR: | Final Grant Payment for the Grant Cycle | | |
| | TOTAL GRANT AMOUNT: <u>\$</u> | | | |
| | BALANCE DUE (25%): <u>\$</u> | | | |
| | GRANTEE'S SIGNATURE: | | | |
| OFFICA | LUSE ONLY | | | |
| | | Vendor #: Account Code: | | |
| Approv | ed By: | | | |
| | arry, Director of dge Arts Council | f Community Arts Date Jason Weeks, Executive Director Dat Cambridge Arts Council | te | |