STATE OF CALIFORNIA
INVOICE FOR GRANT PAYMENTS
CAC-575 (Revised 11/3/15)

CALIFORNIA ARTS COUNCIL

INVOICE FOR GRANT PAYMENTS

PART A - GRANT INFORMATION

DATE: _____

INVOICE NUMBER: _____
(Grant Number) Format: XX-XX-XXXX

GRANTEE NAME/MAILING ADDRESS:

_____
Grantee Name

_____
Mailing Address 1

_____
Mailing Address 2 (Optional)

_____ _____
City, State Zip Code

GRANT PERIOD: _____ to _____
Format: MM/DD/YY to MM/DD/YY

TYPE OF REQUEST:

☐ 75% ADVANCE PAYMENT
☐ 25% FINAL PAYMENT

PART B – 75% ADVANCE PAYMENT

GRANT AWARD $ _____ x 75% = TOTAL ADVANCE PAYMENT REQUEST $ _____

PART C – 25% FINAL PAYMENT

To qualify for release of the 25% final payment, the Grantee must have done **ALL of the following:**

☐ Completed the Scope of Work as provided in Exhibit A of the Grant Standard Agreement
☐ Submitted and submitted the Final Report (including the NEA Grants Activity Survey) online

FINAL PAYMENT AMOUNT REQUEST $ _____

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'S PRINTED NAME / TITLE

_____
PREPARER'S PRINTED NAME

_____
AUTHORIZED OFFICER'S SIGNATURE
(Only use blue ink)

_____
Contact's Phone Number

_____
Contact's Email Address

FOR CAC ACCOUNTING USE ONLY

FY _____ FUND _____ APPROP REF _____ VOUCHER _____
FY _____ FUND _____ APPROP REF _____ VOUCHER _____

PROGRAM STAFF (Signature) _____ APPROVAL DATE _____

ACCOUNTING STAFF (Signature) _____ PROCESS DATE _____