CASH REQUEST

Cash Requests must be in the North Carolina Arts Council Grants Office by the 15th of the month for payment during the next month. You may request an advance for the next calendar month’s anticipated grant expenditures, or you may be reimbursed for actual grant expenditures.

Payment will be mailed after the first of the next month.

Make sufficient copies of this form for your use during the project period.
Mail or fax to the following address:

Grants Office, North Carolina Arts Council
4632 Mail Service Center
Raleigh NC 27699-4600
Fax: 919-814-6532

Name of Grantee Organization ____________________________________________
Mailing Address ________________________________________________________
City ____________________________ State _________ Zip Code ___________
Day Phone area code ( ) number ________________________________________
Grant Number (from contract) ____________________________________________
Month(s) Covered by This Request _______________________________________
Amount of Request $_____________________________________________________

Certification
I certify that to the best of my knowledge these grant funds will be spent in accordance with the conditions of the grant contract and by the end of the month indicated above. If not spent by such time, I understand that the balance of the funds must be returned to the North Carolina Arts Council unless prior approval to extend the expenditure period has been obtained.

_________________________________________ Date
Signature of Authorizing Official for Grantee Organization

_________________________________________
Typed Name and Title