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Northampton Arts Council Reimbursement Information for Grant Recipients

Arts grants work on a reimbursement basis only! In other words, you need to have paid for budgeted goods and services before we can pay you. The state guidelines on reimbursement of grant funds are detailed. Please believe that we want to keep the reimbursement process as simple as possible, but we must satisfy some state-specified criteria before we can release your funds.

Use the enclosed forms to request reimbursement. Complete both the cover sheet and the budget summary and send them to the Arts Council in Memorial Hall. We'll be looking for a couple of things in reviewing your request:

1. **Your project must have been completed according to the description in your original application.** Please enclose proof of performance, exhibition, etc. with your reimbursement request. Press releases, reviews, and/or programs are fine. You must also submit proof that you have credited the Northampton Arts Council and the Massachusetts Cultural Council for their support of your project as per the credit acknowledgement on your approval letter.
2. Your expenses must relate to the project as outlined in your application. **Please submit documentation that proves you have paid these expenses,** such as receipted invoices from vendors or copies of cancelled checks. We can pay third-party vendors directly. If you would like us to pay your suppliers direct, indicate that, and let us have copies of their bills to you. If any part of your grant money is being used to pay artist's fees for yourself, enclose an invoice for your time.
3. Under certain conditions (for example, if your proposal is for a series of performances) you may receive progress payments. These are generally based on the percentage of the project that has been done. If you'll be submitting more than one reimbursement request, photocopy the enclosed forms so you'll have blanks for later requests.

Once we receive your reimbursement form, summary of expenses form and documentation, it may take three weeks to pay you. The Arts Council needs to approve your reimbursement and submit documentation to the city auditors, who will issue your check and mail it to you. If you have any questions, please contact Sondra Peron. Thank you for your patience.



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: 1. [] a progress payment or [] a final payment | 2. [] for the grantee or [] for third-party vendor

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 _____

