SAMPLE: COMPLETED APPENDIX C – REIMBURSEMENT REQUEST FORM

- Appendix C is three (3) pages and can be located in the appendices of your signed contract
- Complete all sections highlighted in yellow
- The expenses you list and attach for page 2 can total more than your grant award, **however**, the amount you request on page 1 and in the **Total amount** requested on page **CANNOT** exceed the total grant award

| Page 1 | Page 2 | | | | | | |
|--|--|-----------------------------------|---|-----------------|--|--------------|----------|
| Appendix C-1—Form of Funding Request for Reimbursement | Budget Line Category | Payee | Description | Period incurred | Payment method (check, credit card) | Payment date | Amount |
| FUNDING REQUEST | Gross salaries | ADP | Payroll register | 7/1-7/15/24 | Electronic | 8/15/24 | \$4,000 |
| Department Name: Grants for the Arts Supplier Name: ABC Dance Company | Monthly rent | Smith Property Mgt. Company | | 7/1-7/31/24 | Check# 1234 | | \$4,000 |
| Supplier Number: 22026 Supplier Remittance Address: 12 FULTON STREET, SAN FRANCISCO, CA. 90000 | Contractors | Joe Mann, Artist | Dance performance at XYZ festival | 9/1-9/3/24 | Venmo | 9/30/24 | \$3,000 |
| Organization being Sponsored (if applicable): Dance with Me, Inc. Contract Number: 10000XXXXXX Purchase Order Number: | | | | | | | \$11,000 |
| Invoice Number: GFTA-AP-1123- <mark>03/12/2025</mark> Invoice Date: 03/12/2025 | | | | | | | |
| Funding Source: Grant – Arts Programming | | | | | | | |
| Pursuant to Section 5.3 of the Grant Agreement (the "Grant Agreement") dated as of September 1, 2024, between the undersigned ("Grantee") and the City and County of San Francisco (all capitalized terms defined in the Grant Agreement shall have the same meaning when used herein), Grantee hereby requests a disbursement of Grant Funds as follows: | | | | | | | |
| | uests | | | | | | |
| Minimum amount of grant funds specified on \$10,000 Page 1 of this grant agreement: | | | | | | | |
| Total of all grant funds disbursed prior to this \$0 | | | | | | | |
| Total amount requested in this request \$\frac{10,000}{} | PLEASE ADD MORE ROWS IF YOUR LIST IS LONGER THAN | | | | | | |
| Total of all grant funds remaining after this request \$0 | WHAT IS PROVIDED HERE] | | Total amount | | | | |
| Grantee certifies that: | | | requested: | \$10,000 | _ | | |
| (a) The total amount of Grant Funds requested pursuant to this Funding Request will be used to pay Eligible Expenses, as defined in Appendix A, and as detailed on the chart below and supported by the attached documentation; | D 2 | Print | Name: Jan | e Doe | | | |
| (b) After disbursement of funds requested in this Funding Request, the total Grant Funds disbursed to Grantee as of the date of this disbursement will not exceed the maximum amount set. | Page 3 | Title | Finance M | anager | | | |
| forth in Section 5.1 of the Grant Agreement; | | Signs | gnature: <i>Jame</i> Dce | | | | |
| (c) The representations and warranties made to the Grant Agreement are true and correct in all material respects as if made on today's date; | | | | | | | |
| (d) No Event of Default has occurred and is continuing; | | Date | 10/1/2024 | | | | |