



Libraries Illuminated Grant Request for Payment

This is an agreement for use of funds to participate in the Libraries Illuminated project.

Please initial each line. Complete the form below, sign by the Director (no exceptions), scan and email to Diane Satchwell.

_____ Funds will be used as submitted in the application.

_____ No administrative or fiscal fee will be used with the funds.

_____ Evaluations will be submitted on time.

_____ All invoices will be copied and emailed to SCLC.

_____ Any request for change will be submitted to SCLC.

Amount requested (amount awarded): \$2723

Library Name: Riverside Public

Address to send: (on file)

Send check attention to: Erin Christmas

Contact: Erin Christmas

Signature (Director)

Date

Email to dsatchwell@socallibraries.org