CHESAPEAKE FINE ARTS COMMISSION

INVOICING FORM

FOR PROJECT OR INDIVIDUAL OPPORTUNITY GRANTS, THE CITY OF CHESAPEAKE REQUIRES THAN AN INVOICE BE SUBMITTED UPON COMPLETION OF THE PROJECT OR WHEN PERIODIC PERFORMANCE ARE SCHEDULED IN ORDER TO RELEASE FUNDS. *

DATE OF INVOICE: _____

ORGANIZATION: _____

FEDERAL EMPLOYER ID #_____ OR INDIVIDUALS'S SOCIAL SECURITY NUMBER: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____PHONE: _____FAX: _____

PERFORMANCE/ PROJECT DATE: _____

PERFORMANCE/ PROJECT SITE: _____

AMOUNT DUE: _____

*FEDERAL W-9 FORM MUST BE ON FILE WITH THE CITY OF CHESAPEAKE BEFORE FUNDS ARE RELEASED.

Applicant's Signature: _____ Date: _____

Grant Chairperson: _____ Date: _____

CFAC Chairperson: _____ Date: _____

*INVOICE MUST BE SUBMITTED TO RELEASE FUNDS.