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| |  |  | | --- | --- | | **Grant Payment Request Form/Invoice** | | | Please provide payment for grant project listed below. | | | **Type of payment:** | **Fixed Cost/Reimbursement** | | **Date of Request:** |  | | **Organization Name:** |  | | **Project Number:** |  | | **Project Name:** |  | | **Payment Number:** |  | | **Deliverable** (as stated in grant agreement)**:** | | | **Deliverable provided:** | | | **Documentation provided:** | | | Signature of Project Manager: | | | **Do Not Write Below this Line – For DLIS Use Only** | | |

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| --- | --- | --- | --- |
| Deliverables and minimum performance levels have been satisfactorily completed by the recipient. | | YES | NO |
| **DLIS Approval:** |  | | |