

**CITY OF SAN DIEGO COMMISSION FOR ARTS AND CULTURE  
 CREATIVE COMMUNITIES SAN DIEGO PROGRAM  
 REQUEST FOR PAYMENT FORM**

**Complete, Print, Sign and Mail this Form to:**

Contracts Coordinator  
 Commission for Arts and Culture  
 1200 Third Avenue, Ste. 924  
 San Diego, CA 92101-4106

**Request period:**

Month	Day	Year	through	Month	Day	Year
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**Contract Information:**

Fiscal Year	Amount of Funding
Contract #	Minimum Required Match

**Organizational Information:**

Organization	
Mailing Address	
City, State, Zip	
Person completing this form	Name
	Title
	Telephone
	Fax
	Email

**Project Budget Table: Column F to be completed ONLY WITH Final Request for Payment**

Column A	Column B	Column C	Column D	Column E	Column F
Expense Category	Arts and Culture Funds Allocation	Arts and Culture Payments Received to Date	Total Expenses for this Period	Expenses to be Reimbursed this Period	Total Project Expenses for the Year
<b>Personnel (Wages and Benefits)</b> ////////////////////////////////////					
Artistic/Entertainment (A)					
Administrative (AD)					
Event Organizer (EO)					
Technical/Production (TP)					
Security/Cleaning Crews (SC)					
Other (OP)					
Personnel Subtotal					
<b>Operating Expenses (Non-personnel)</b> ////////////////////////////////////					
Facility/Space/Rent (FS)					
Marketing/Publicity (MP)					
Materials/Supplies (MS)					
Fundraising (FR)					
Other (OO)					
Operating Subtotal					
Total					

- Total of Column B should equal Arts and Culture Funds for the year.
- Total of Column E should equal request for this period.
- Total of Column F should equal total project expenses.

