

**2022 Schoolyard Habitat Action Grant
Payment Request Form**

Your Name: _____

I hereby certify that this project cost breakdown is correct, just and based on actual payment(s) of record by the Grantee referenced above; that payment for these costs has not/will not be received from any source other than the Illinois Conservation Foundation; that payment from the Illinois Conservation Foundation has not been received for these costs; and that the completed work is in accordance with the provisions of the signed Grant Agreement, including amendments thereto, with the Illinois Department of Natural Resources.

Signature: _____ Date: _____

The school/organization information should be the same as that submitted on the W-9 form in your grant application.

School /Organization: _____

Address: _____

City: _____ State: IL Zip Code: _____

| Items(s) Purchased | Vendor | Amount Paid |
|--------------------|----------------------------|-------------|
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| | | |
| | Total Amount Paid = | |

PLEASE REMEMBER TO ATTACH A COPY OF THE CANCELED CHECK OR PAID RECEIPT FROM YOUR SCHOOL/ORGANIZATION AND A COPY OF THE ORIGINAL INVOICE FOR EACH PAYMENT REQUEST.

Mail to:
Illinois Department of Natural Resources
Division of Education
One Natural Resources Way
Springfield, IL 62702.

IDNR USE ONLY

Received: _____

Grant Number: _____ **Grant Award:** _____ **Funding Source:** ICF