Claim for Payment

Greenway Conservancy for the Hudson River Valley, Inc. and Hudson River Valley National Heritage Area

Grantee Name:					
Address:			Grant #		
			Project Name:		
City:					
State:		Zip:			
Grant expense between the dates:			and:		

Description	Grantee Match (50% min) Source	Grantee Match (50% min) Amount	Amount Requested
Total	xxx	$ 0.00	$ 0.00
	xxx		
Net	xxx		

Grantee Certification:
I certify that the above bill is just, true, correct, and pursuant to the intended purposes of the grant listed above; and as per grant agreement; and that no part has been paid unless stated.

x Grantee Signature	**x** Grantee Title	**x** Date

For Greenway Use Only Below This Point

Approval for Payment:
I certify that this voucher is correct, just, and payment is approved.

x Authorized Signature	**x** Date		
		Invoice Date:	
		Invoice #:	
		Program:	
x		Check #:	
Authorized Title		Date:	