

FY2026

MISSOURI ARTS COUNCIL INVOICE FOR REIMBURSEMENT

For expenses spent July 1, 2025 through June 30, 2026.

Deadline and Matching Requirements:

Submit your invoice as soon as you have spent your funds and match, no later than May 26, 2026. Timely invoicing is important as the state may withhold funding. No need to wait until the Final Report is completed. Most MAC awards must be matched with cash. (Exception: Express Grants and Partnership match varies.)

How to get paid:

1. Complete all fields, print, and authorizing official hand sign. No digital signatures on invoices.
2. Scan as PDF document
3. Email to MACGRANTS@LTGOV.MO.GOV

Report changes using Notes in the online grant system SmartSimple, if necessary:

- Project changes
- Contact person or address
- Authorizing official
- Releasing/returning MAC funds
- Banking information
- Legal name of organization

Keep a copy of the signed invoice along with supporting documentation for four (4) years.

Full Payment or Partial Payments:

Item 3 – If you have spent all the funds and any required match, select **100%**.

If you have spent some and any required match, select **partial**.

If you have spent the last amount and any required match, select **final**.

When may we expect payment?

Processing time varies. MAC pays invoices when funds are available. Grants using federal funds take more time.

The following will add time to the process:

- Invoice is submitted with errors
- Project changes were not approved in advance
- State Vendor System has outdated information

Questions: Contact your [Program Specialist](#).

Submit Invoice: Scan the physically hand-signed invoice as PDF and email it to MACGRANTS@LTGOV.MO.GOV

FY2026 MISSOURI ARTS COUNCIL INVOICE FOR REIMBURSEMENT		
Grant Recipient Information		
1. Grant Number 2026-	2. Grant Program (drop down box)	3. Full Payment or Partial Payments ☐ 100% ☐ Partial ☐ Final
4. Legal Name of Organization (This must match your legal name with IRS and Missouri Secretary of State's Office)		
5. Contact Person		6. Day Telephone
Project Information		
7. Title of Funded Project (Touring grantees should write in the performing artist's name.)		
Project Expenses. Cash expenses only. All numbers must be rounded to nearest dollar.		
8. How much have you spent on the MAC-funded project?		
9. How much reimbursement are you requesting from MAC?		
10. This form will subtract Line 9 from Line 8 to calculate the difference, if any. If a match is required, this counts toward that amount.		
Certification		
I certify, to the best of my knowledge, that the project will occur and the information included in this invoice is true and correct in all material matters; and that adequate records, including bills, receipts, and other supporting documentation, will be maintained to substantiate all information reported for a period of no less than four (4) years from this date. By signing this form, you attest that you are an authorized signature on record with the Missouri Arts Council.		
Type Authorizing Official's Name		Type Authorizing Official's Title
Print Invoice and Sign		
PHYSICAL HANDWRITTEN Signature of Authorizing Official (Digital signatures of any type will not be accepted) →		Date →

FOR MAC USE ONLY: PVS 221 P009 _____	
Vendor Number + Address Indicator _____	
Fund Source: State (0262) _____	Federal (0138) _____
Notes _____	