

Nebraska Library Commission



1200 N Street, Suite 120
Lincoln, NE 68508-2023
402-471-2045 • Fax 402-471-2083

REQUEST FOR PAYMENT – Youth Grant

Pay To: _____

Name of Public Library/Friends/Foundation

Attention: _____

Mailing Address _____

City, State, Zip _____

NIS Address Book Number (to be completed by NLC) _____

Project: 2025 Nebraska Library Commission Youth Grant Program

For Period: January 2025 to June 30, 2025

| Description | Total |
|------------------|-------|
| Amount Requested | \$ |

I certify that the above funds requested are correct and for the purposes set forth in agreement documents.

By: _____ Date: _____
(Signature) (Title)

Submit original to: Sally Snyder <sally.snyder@nebraska.gov> Make copy for your records
Nebraska Library Commission
1200 N Street, Suite 120
Lincoln, NE 68508-2023

January 2023

Nebraska Library Commission Use Only

Approved By: _____ Date: _____
(Nebraska Library Commission Authorized Agent)