

CALIFORNIA STATE LIBRARY  
California Library Services Act  
**FINANCIAL CLAIM  
FIRST PAYMENT**

Invoice#: ZIP21-56-01  
PO#

ENY: 2021  
ITEM NO: 6120-211-0001 Chapter 21, Statutes of 2021  
PURCHASING AUTHORITY NUMBER: CSL-6120  
REPORTING STRUCTURE: 61202000  
COA: 5432000  
PROGRAM #: 5312

Date: \_\_\_\_\_

Claim of: Siskiyou County Public Library

Address: \_\_\_\_\_

For: Siskiyou County Public Library

Project Title: Zip Books Grant Project

Amount Claimed: \$ 23,400

Grant Award Number: ZIP21-56

For Period From: upon execution to end of grant period

Type of Payment      **PROGRESS**                      FINAL                      IN FULL

Payable Upon Execution of Agreement

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**CERTIFICATION**

I hereby certify under penalty of perjury: that I am the duly authorized representative of the claimant herein; that this claim is in all respects true, correct and in accordance with law and the terms of the agreement; and that payment has not previously been received for the amount claimed herein.

By

\_\_\_\_\_  
(Signature of the authorized representative)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
Title

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State of California, State Library Fiscal Office

By \_\_\_\_\_ Date \_\_\_\_\_  
(State Library representative)

If you are not using DocuSign electronic signature to submit your claim, please complete the following:

<p><b>EMAIL A SCANNED COPY:</b> Fiscal Services <a href="mailto:stategrants.fiscal@library.ca.gov">stategrants.fiscal@library.ca.gov</a></p>	<p><b>MAIL ONE ORIGINAL SIGNATURE TO:</b> California State Library Fiscal Office – CLSA PO Box 942837 Sacramento, CA 94237-0001</p>
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