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| A close up of a logo  Description automatically generated | Small GrantReimbursementRequest |
| **1605 E Capitol Ave, Suite 101****Bismarck, ND 58501****(701) 223-8501** | Date: |  |
| Grant #: |  |
| All reimbursement requests need to be accompanied by either a Status Update, Interim Progress Report or Final Report.Instructions can be found in the Program Manual on the website:<http://www.ndnrt.com/programs/small-grant-program/>Email payment requests with supporting documentation to brenda@naturalresourcestrust.com. | Organization Name: |  |
| Address: |  |
| Phone: |  |
| Contact/Prepared by: |  |
| Make Checks Payable to: |  |

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| \*Provide receipts or supportive documentation for each item. Total to be reimbursed:Indirect costs allowed at 10% of total grant.Request must be submitted by the 25th of the month. |  |