## **Certification of Applicant Match**

Organization Name

Project Name

Project Number

The sources and amounts of our matching share will be:

Source of Match – Non-Grant	Amount

Source of Match – Grant	Additional Information about Grant	Amount

Total:

As the authorized financial representative for the above identified organization, I hereby certify that the sponsor matching resources are available for the project referenced above. I further acknowledge that our organization is responsible for supporting all noncash commitments and donations should they not materialize.

Signature	
Printed Name	
Title	
Date	