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| Transforming Lives |  **Funds Match Certification** (This form must be submitted with final contract billing.) |
| I,  certify that local funds and/or in-kind items PRINT NAME |
|  |  | were provided in the amount of | $  |
|  | TYPE AND SOURCE OF PRIVATE / LOCAL FUNDS / ITEMS |
|  |  | were provided in the amount of | $  |
|  | TYPE AND SOURCE OF NON-PROFIT FUNDS / ITEMS |
|  |  | were provided in the amount of | $  |
|  | TYPE AND SOURCE OF FEDERAL FUNDS / ITEMS |
| and were used to match funds paid during the time period of  through  for .TYPE OF SERVICE/CONTRACT |
| 5 |
| NAME OF ENTITY |
| NAME OF AUTHORIZED AGENT | CONTRACT / VENDOR NUMBER |
| AUTHORIZED REPRESENTATIVE’S SIGNATURE DATE | TITLE OR POSITION |
| PRINTED NAME OF AUTHORIZED REPRESENTATIVE | TELEPHONE NUMBER |
| **Instructions** Name: Printed name of the entity’s agent authorized to complete certification form. Type and source of funds: The type and source of funds used. Please break out different types of funding sources. Not all funding sources will be necessary to complete each certification. In-kind sources need specific identification showing who donated the item(s) (e.g., volunteers, building use, etc.). Dollar amount: Dollars that were used to match funds paid during the time period. Dollars reported must agree with amount on the final billing. Time frame: Period of time the services were provided. Type of service/contract: Services eligible for matching. Name of entity: Name of entity that is providing the funding match. Name of authorized agent: Name of agent, if different than “name of entity” above, that is authorized to act on behalf of entity. Contract/vendor number: The contract or vendor number of the entity. Authorized representative’s signature: The signature of the entity authorized representative. Date: Date when form was completed. Title or position: Title or position of entity authorized representative Printed name: Printed name of authorized representative. Telephone number: Telephone number of authorized representative. Include the area code. |