

RCDG

Verification of Third-Party CASH Matching Funds

For purposes of carrying out the Work Plan and Budget Activities identified in the _____ (Center's) FY 2023 Rural Cooperative Development Grant (RCDG) Program application, and as an Authorized Representative of the third-party organization identified below, I verify and confirm the following information:

Table 1.

Legal Name of Third-Party	Cash Matching Amount	Availability of Funds (month/day/year)	Source
	\$		
	\$		
	\$		
Total Cash	\$		

Our governing body (i.e., Board of Directors or Tribal Council) has formally Resolved / Confirmed the Cash Matching contribution amount for RCDG purposes on _____.

I/We do not need a Resolution because it is not required by our governing body for us to authorize the Cash Matching contribution amount described above.

I/We understand the Cash Matching contribution amount described above is to be used for grant eligible Center expenditures and that I/we cannot limit how or where the Center uses these funds. In addition, I/we understand the Cash Matching contribution amount described above cannot be used to provide services which directly benefit me/us.

Print Name of Authorized Representative: _____

Signature of Authorized Representative: _____ Date: _____

Title of Authorized Representative: _____

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