

RCDG

Verification of Applicant CASH Matching Funds

For purposes of carrying out the Work Plan and Budget Activities identified in our FY 2024 Rural Cooperative Development Grant (RCDG) Program application, I verify the following information: Legal Name of Applicant:		
Total Project Costs: \$ Total Applicant Cash Match: \$		
As applicable, identify all source(s), amount currently has available and committed to eli		Applicant Cash Matching Funds that your organization bject expenditures during the grant period.
Source of Cash Funds	Cash Matching Amount	Use of Funds for Project Budget Activities
Checking or Savings	\$	
Certificate of Deposit	\$	
Money Market	\$	
Mutual Funds	\$	
Salaries and Expenses (Universities)	\$	
Unrecovered indirect cost (Universities)	\$	
Program Income from Executed Contract	\$	
Other (Describe)	\$	
,	\$	
Total Cash	\$	
Matching contribution amount for RCDG pu	rposes on it is not require	council) has formally Resolved / Confirmed the Cash ed by our governing body for us to authorize the Cash
Print Name of Authorized Representative:		Deter
Signature of Authorized Representative:		Date:
Title of Authorized Representative:		