



RCDG

Verification of Applicant CASH Matching Funds

For purposes of carrying out the Work Plan and Budget Activities identified in our FY 2020 Rural Cooperative Development Grant (RCDG) Program application, I verify the following information:

Legal Name of Applicant: _____

Beginning and End Dates for Proposed Grant Period: _____

Total Project Costs: \$_____ Total Applicant Cash Match: \$_____

As applicable, identify all source(s), amounts, and uses of Applicant Cash Matching Funds that your organization currently has available and committed to eligible RCDG project 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	\$	

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.

Print Name of Authorized Representative: _____

Signature of Authorized Representative: _____ Date: _____

Title of Authorized Representative: _____