

**Appendix C**

IN WITNESS WHEREOF, the parties hereto have caused this Grant Agreement to be executed by its duly authorized officials.

**GRANTEE**

\_\_\_\_\_  
SIGNATURE  
PRINT OR TYPE NAME AND TITLE

\_\_\_\_\_  
SIGNATURE  
PRINT OR TYPE NAME AND TITLE

**COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF HUMAN SERVICES**

**Secretary**

\_\_\_\_\_  
SIGNATURE

**COMPTROLLER OPERATIONS**

I hereby certify that funds in the amount shown are available under the Appropriation Symbols shown

AMOUNT	SOURCE	APPROPRIATION SYMBOL	PROGRAM

\_\_\_\_\_  
SIGNATURE COMPTROLLER

**Approved as to Legality and Form:**

\_\_\_\_\_  
DEPARTMENT OF HUMAN SERVICES

\_\_\_\_\_  
OFFICE OF ATTORNEY GENERAL  
(when required)

\_\_\_\_\_  
OFFICE OF GENERAL COUNSEL  
(when required)