

ATTACHMENT 12

**REQUEST FOR APPLICATION FOR
CHILDREN'S TRUST FUND
COHORT 31
RFA 13-23
ATTACHMENT 12
Matching Funds Verification Letters**

Directions:

Matching Funds Verification Letters

The Applicant must include Local and Private Match Verification Letters from each match contributor that align with the proposed budget and narrative for each year of the grant. The required form is included as **Attachment 12**.

Each Match Letter must be signed by the match contributor, specify the amount and type (cash or in-kind) of match being contributed and provide a short description of how the match will be used within the proposed program (this should match the line-item descriptions provided as part of the budget).

Do not include more than one match contributor or one match type on a single Match Verification Letter. The total amount of match included in the combined match letters must be equal to the total amount of match stated in each year of the budget submission.

**REQUEST FOR APPLICATION FOR
CHILDREN'S TRUST FUND
COHORT 31
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ATTACHMENT 12
Local Match Verification Letter**

Directions: Complete one original form and each type of match (cash and in-kind) for each contributor. Duplicate this form as needed.

APPLICANT NAME: _____

YEAR OF GRANT

[] Year of Grant Award 1, 2, or 3 – From _____ to _____

TYPE OF MATCH

[] Cash (Monetary donations from individuals or funds from private or community foundations, local government or other local or private grant sources. Applicants can include funds from their organization if the funds originate from a local or private source. Funds from the state and federal government cannot be used as match.)

[] In-Kind (Defined as: donated services, materials, time from volunteers (non-paid staff).)

MATCH AMOUNT

I certify that \$ _____ has been designated by:

(NAME OF CASH OR IN-KIND MATCH SHARE CONTRIBUTOR)

to be used solely for the purpose of the above-referenced grant for the period noted above

and in accordance with the Department of Human Services' definitions and guidelines regarding match.

Description of how match funds will be used:

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CONTRIBUTOR COMPLETING THE FORM:

(SIGNATURE OF THE CONTRIBUTOR'S AUTHORIZED OFFICIAL - ELECTRONIC SIGNATURES ARE ACCEPTABLE)

(PRINT OR TYPE NAME AND TITLE)