

MATCH VERIFICATION LETTER

[Application Authorized Organizational Representative]

[Applicant Organization Address]

Dear [Application Authorized Organizational Representative]:

We commit to providing the following matching funds to the [Current Year] [Grant Program] application: [Project title]

1. Cash in the total amount of \$XXX, which we will provide during the grant period May 2023 through May 27, 2027..
 - a. Funds will be used for [provide particular item(s) corresponding to the budget narrative or describe how the applicant will otherwise use the funds].
 - b. We will provide the following amounts per year:
 - i. Year 1:
 - ii. Year 2:
 - iii. Year 3:
2. In-kind contributions in the total amount of \$XXX, will be contributed as follows:
 - a. Salaries and wages of staff time for the following employees:

Employee Name (add additional lines as needed)	Title	Description of Duties	Base Rate (\$)/hr or % FTE	Year 1: # of Hours or \$ Equivalent	Year 2: # of Hours or \$ Equivalent	Year 3: # of Hours or \$ Equivalent

- b. The following items/activities with a total fair market value of \$XXX:

Item/Activity (add additional lines as needed)	Fair Market Value per Unit:	How Fair Market Value Determined (must provide documentation):	Amount Donated Year 1:	Amount Donated Year 2:	Amount Donated Year 3:

Sincerely,

[Signature of Matching Organization Representative]

[Printed Name of Matching Organization Representative]

[Title]

[Email, address and phone number if not already included on letterhead.]