**Sub-Grantee Match Certification**

This form certifies that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ agrees to all of the provisions listed in this document during the entire commencement of the Indiana AmeriCorps\*State Funding Agreement entered into between the party listed above and the Office of Faith-Based and Community Initiatives (OFBCI). The organization agrees to the following:

1. The organization stipulates that the cash matching funds as specified in the Indiana AmeriCorps\*State Funding Agreement will be derived from non-federal monies.
2. The cash match will be provided in accordance with applicable federal regulations that includes the 2004-05 AmeriCorps Provisions, the Uniform Administrative Requirements [OMB Circulars A-102 (45 C.F.R. 2543) and A-110 (45 C.F.R. 2541)], and the Federal Cost Principles (OMB Circulars A-21, A-87, and A-122).
3. The cash match for member support costs (living allowance category) excluding health care will be in non-federal monies.
4. The cash match will be verifiable in the organization’s accounting records.
5. The match will not be included as contributions for any other federally-assisted program.
6. If federal cash match is used for program operating costs, then the federal statute and/or implementing federal regulations for such federal cash must specifically indicate that such federal funds may be used to meet the cost sharing or matching requirements of another federal grant.

This form does not void or nullify any portion or agreement contained within the Indiana AmeriCorps\*State Funding Agreement. If any disagreement exists between the two documents, the Indiana AmeriCorps\*State Funding Agreement takes precedence and this document is secondary. No part of this document is meant to be interpreted as a promise or agreement made on behalf of the OFBCI with any party that it has not entered into a legally binding agreement. The individual(s) signing this document, by signing, do declare they have the legal authority to sign the document on behalf of the organization listed above.

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Typed Name Organization Name

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Signature Date of Signature