**ATTACHMENT 2**

**CERTIFICATION OF CASH AND IN-KIND MATCH**

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| **CASH MATCH** ***The total Cash Match on this sheet should match the total Cash Match on ATTACHMENT 3- Sheet 1*** |
| **Source of Cash Match** (include name of funding entity, grant name, etc) | **Brief Description** (What does funding pay for?) | **Dollar Amount** | **Is funding already secured?** (Y or N) | **If not Secured, when do you expect to know if is secured?** | **Funder’s Performance Period** (start and end date) |
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| **Total Cash Match** |  |   |   |   |

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| **IN-KIND MATCH** ***The total In-Kind Match on this sheet should match the total In-Kind Match on ATTACHMENT 3- Sheet 1*** |
| **Source of In-Kind Match** (include name of donating entity) | **Brief Description**(What is the in-kind for?) | **Dollar Value** | **New in-kind source or used in the past?** | **Documentation type to be used to for certifying in-kind?**  |
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| **Total Cash Match** |  |   |   |   |

As the authorized representative of the Applicant Organization, I hereby certify that the Small Business Development Center program budget as set forth in this proposal contains match in the amount and from the sources listed above. I certify that these funds and contributions are/will be under the control of the top SBDC manager and that these funds are not being used to match any other federal funds.

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| **Signature** | **Printed Name and Title** | **Date** |