

## HOME-ARP Exhibit 26 -

## **In-Kind Contribution Certification**

Proposed Project Name:		
Proposed Project Location:		
Applicant Name:		
<b>Explain</b> what the contribution is and how	v the project and/or its residents will benefit from the contr	ibution:
Contributor Information		
Contributor Name:		
Contact Person:	Contact Title:	
Contact Email:	Contact Phone:	
Contribution Information		
Value of Contribution:	Anticipated Date of Contribution:	
Other:		
If applicable, provide links to any statute	es/resolutions authorizing the contribution that can be found	on the Internet:
If non-monetary, describe justification of	fair market value and provide documentation:	
I certify that the information contained o	on this form is true and complete to the best of my knowledg	e.
Signature of Contributor	Date	
Contributor Printed Name	<del></del>	