Proposed Project Name:				
Proposed Project Location:				
Proposed Project Location: Applicant Name:				
Explanation of how the project and/or its	s residents will benefit from			
Contributor Information				
Contributor Name:				
Contact Person:	Title:			
E-mail				
Contribution Information				
Amount of Contribution:	Anticipated date	of Contribution:		
Type of Contribution:	☐ Grant ☐ In-kind	☐ Concession	☐ Tax Abatement	☐ Other
If applicable, provide any statutes/resolu	utions authorizing the contr	ibution:		
Trapplicable, provide any elatates/recen	anone admonizing the contr	ibation.		
Description of Contribution:				
If non-monetary, justification of fair marl	ket value:			
,,,===================================				
I certify that the information contained o	n this form is true and com	plete to the best of	my knowledge.	
				_
Signature of Contributor		Date		
Printed Name				

SRDP Exhibit 26

In-Kind Contribution Certification