



Authorized Electronic Signature

The electronic signature on this document is of the person authorized to make legal contracts for our organization, the organization's acceptance of this award and agreement to comply with the stated terms and conditions of this grant. Please signify your agreement to the foregoing terms and conditions by providing all required information in the spaces below. You must be an authorized officer of the Organization and duly empowered to make legal contracts for the Organization.

| | |
|--|--|
| Name (Please print or type) | |
| Position Title | |
| Organization | |
| Signature | |
| Date | |

| | |
|---|--|
| Board President/Chair (Please print or type) | |
| Organization | |
| Signature | |
| Date | |