

III Maryland Avenue | Rockville, Maryland 20850-2364 | 240-314-5000 www.rockvillemd.gov

We, the undersigned, authorize the submission of this application to the City of Rockville and confirm that the information contained herein is accurate and can be verified as such. We understand and agree that if the requested grant is awarded, the disbursement of grant funds will be subject to all grant conditions established in a contract executed by all parties.

CEO Signature	
CEO Name	Date
Title, Name of Organization	5
Board President's Signature	
Board President's Name	Date
Title, Name of Organization	