

**COLORADO DIVISION OF CRIMINAL JUSTICE  
CERTIFICATION OF MATCH (DCJ Form 32)**

*INSTRUCTIONS: Complete the table below with information found in the Grant Agreement. Read the form completely, **identify the person authorized to commit match funds on behalf of the agency. This individual is either the signature authority or appropriate controller of the matching funds.** This form must be completed and accompany the signed Grant Agreement. Funds will not be released until this form is completed. See page two for additional instructions.*

GRANTEE: <b>Adams County</b>	GRANT NUMBER: <b>2018-DV-18-20012-17</b>
PROJECT TITLE: <b>Positive Action/Family Therapy</b>	PROJECT DURATION FROM: <b>7/1/17</b> TO: <b>6/30/18</b>
CASH MATCH AMOUNT COMMITTED: \$ 24,921.00	
IN-KIND MATCH AMOUNT COMMITTED: \$ 0.00	

**PERSON AUTHORIZED TO COMMIT MATCH FUNDS CERTIFICATION:**

I have read and understand the differences between cash and in-kind match as described on page two of this form and, if awarded federal funds, that I have read and understand [2 C.F.R. § 200.29](#) and [2 C.F.R. § 200.306](#). I accept responsibility for ensuring that project programmatic and financial staff understands their responsibilities for tracking and reporting match, and that under the terms of the Grant Agreement match requirements must be met by this agency. I will contact my grant manager if I have question.

- Matching funds/donations are earmarked for only this grant
- Source of match funds are non-federal
- Matching funds will not be used to match other grants
- Grantee will maintain records that clearly show the source, amount, and timing for all matched contributions.

As the person authorized to commit match funds on behalf of the above grantee, I certify, by my signature below, that I have read and am fully cognizant of our duties and responsibilities under this Certification.

Name & Title: Eva Henry, Chair, Adams County Board of County Commissioners

Phone: (720) 523-6358

Email Address: EHenry@adcogov.org

Signature Authority or Controller's Signature:

Date:

**SUBMIT ONE SIGNED COPY TO DCJ**

INSTRUCTIONS FOR COMPLETING  
CERTIFICATION OF MATCH (DCJ Form 32)

**HEADING:**

**Grantee:** This is the agency to which the grant award was made.

**Grant Number:** This is the grant number assigned to the project by DCJ. It can be found on the Grant Award Documents.

**Project Title:** This is the name of the project which is identified on the Grant Award Documents.

**Project Duration:** This is the period of the grant award. It can be found on the Grant Award Documents, and is changed only if the project requests and receives a grant extension.

**Signature authority or appropriate controller of the matching funds must certify that he/she understands the match requirements obligated by the agency and listed in the Grant Agreement.**

**MATCH/COST SHARING** is a specific portion of a total program costs not supported by award funds and the minimum match requirement is prescribed by the program guidelines. In-kind and cash match are subject to the same accounting and expenditure requirements as the award funds. Grantees must maintain financial records which clearly show the source, the amount, and the date of receipt and expenditure of all matching contributions during the grant period. **Federal funds cannot be used as match for federal grants.**

**CASH MATCH** is a designated amount of non-federal dollars the grantee is required to use for the project, in addition to the award amount. It includes actual cash spent by the grantee for budgeted costs of the project. The amount will appear as part of the approved budget in the Grant Agreement. The cash and/or in-kind match must be spent during the period of the grant award. Failure to spend the minimum required match would reduce the amount of the award funds on a proportionate basis. The match in the approved budget may not be used to match other funds.

**IN-KIND MATCH** is a specific amount of non-cash donations (assigned a dollar value), which the grantee is required to use for the project in addition to the award amount. Some examples of in-kind match are volunteer time, donated equipment, supplies, space, or services. All of the above examples must be assigned a dollar value (based on the local fair market value of similar services) and appear in the project budget. The basis for determining the valuation of in-kind match, such as personal services, material, equipment, and space, must be documented by the grantee. The in-kind match must be spent during the period of the grant award. Failure to spend the minimum required in-kind match would reduce the amount of the award funds on a proportionate basis. The in-kind match in the approved budget may not be used to match federal funds.

**Signature:** The Signature Authority or appropriate Controller authorized to commit funds on behalf of the agency must sign.

**Submit one signed form to DCJ with the signed Grant Agreement**