## **DISCLOSURE STATEMENT**

(Must be signed by all applicants)

On behalf of the (agency)	
I, (name of authorized representative)	
hereby state that the funds that are being requested will be used in	accordance with the scope-of-
work identified in this application, and that funding obtained thro	ough this grant will not be used
to replace existing revenue sources.	
Signature of Authorized Representative	Date
{Must sign in blue ink}	