



Commitment of Local Funds

My name is _____ and I have the authority to represent the
City/County of _____ as it relates to the contents of this
document.

For Fiscal Year 2022-2023 we are committed to contribute a total of:

\$_____ to the _____ Senior Citizens Program.

This contribution is *not* an in-kind resource.

If for any reason this commitment is not able to be met by the City/County of:

_____. We will submit a letter of justification.

Print Name

Print Title

Signature

Date