REPORT OF IN-KIND / CASH MATCH CONTRIBUTIONS

State Form 50066 (R2 / 5-09)

Approved by State Board of Accounts, 2009

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Grant Name	
(Non-Federal Funds Only)	
To	Project EDS number
From (*Grantee Name*)	
For Period Beginning	For Period Ending

This report must be itemized to show: date service was rendered; by whom; itemization of service including rate per hour, rate per mile, price per foot, etc.; and amount of contribution.

Date *(month, day, year)*	**By Whom Rendered**	**Kind of Service and Itemization**	**Amount**
		TOTAL	

I hereby certify that the foregoing account is just and correct, that the items and amounts reported were used specifically for the above described project and that no part of same was used or reported as in-kind or cash matching contributions to any other federal grant agreement, a federal procurement contract or any other award of federal funds.

Signature	Date (*month, day, year*)
Title	