Appendix C: State Grant Certification – No Overdue Tax Debts

Entity's Letterhead

[Date of Certification (mmddyyyy)]

To:	Office of State Budget and Management, Director and Chief Fiscal Officer
Certif	ication:
	ertify that the <i>[insert organization's name]</i> has no overdue tax debts, as defined by N.C.G.S. 105-at the federal, State, or local level.
Swori	n Statement:
Board [City] i the be	e of Board Chair] and [Name of Second Authorizing Official], being duly sworn, say that we are the Chair and [Title of the Second Authorizing Official], respectively, of [insert name of organization] of in the State of [Name of State]; and that the foregoing certification is true, accurate and complete to est of our knowledge and was made and subscribed by us. We also acknowledge and understand my misuse of State funds will be reported to the appropriate authorities for further action.
	Board Chair
[Title o	of Second Authorizing Official]
Sworn	to and subscribed before me on the day of the date of the said certification.
	My Commission Expires:

(Notary Signature and Seal)