**DENVER REGIONAL COUNCIL OF GOVERNMENTS**

1290 Broadway, Suite 700

Denver, CO 80203

**STATEMENT OF IN-KIND CONTRIBUTIONS**

In-kind Contributor (“Agency”)

THIS AGENCY hereby grants to the Denver Regional Council of Governments the following non-cash contributions in the form of charges for property and the value of goods and services directly benefiting, and identifiable, to the project as follows:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **1.0** **Project Name** | | **Sustainable Communities Initiative** | | | | **Project #** | **270012** |
| **2.0** **Term** | The services were performed from: | |  | **to** |  | | |
| **3.0** **Valuation** | The values of the services are: | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **3.1**  **Direct Salaries** | | | **Individual** | | | **Hours** | **Hourly Rate** | | **Amount of Contribution**  **(rounded)** | **TOTAL**  **Direct Salaries** |
|  | | |  | | |  | $ | | $0 |  |
|  | | |  | | |  | $ | | $0 |  |
|  | | |  | | |  | $ | | $0 |  |
|  | | |  | | |  | $ | | $0 |  |
|  | | |  | | |  | $ | | $0 |  |
|  | | |  | | |  | $ | | $0 |  |
|  | | |  | | |  | $ | | $0 | $0 |
| **3.2** **Direct Expenses** | | | **Description** | |  | |  | | **Amount of Contribution** | **TOTAL**  **Other Direct Expenses** |
|  | | |  | | |  |  | | $ |  |
|  | | |  | | |  |  | | $ |  |
|  | | |  | | |  |  | | $ |  |
|  | | |  | | |  |  | | $ |  |
|  | | |  | | |  |  | | $ |  |
|  | | |  | | |  |  | | $ | $0 |
| **3.3.**  **Indirect** | | | **Description** | | |  |  | | **Amount of Contribution** | **TOTAL**  **Supporting Costs** |
|  | | |  | | |  |  | | $ |  |
|  | | |  | | |  |  | | $ |  |
|  | | |  | | |  |  | | $ |  |
|  | | |  | | |  |  | | $ |  |
|  | | |  | | |  |  | | $ |  |
|  | | |  | | |  |  | | $ | $0 |
| In-kind Contributions may include a share of supporting costs and supervision directly required in performing the service. Actual supporting costs related to this activity may be determined or, in lieu thereof, an amount equal to ten percent of direct labor cost of providing the service, excluding overtime and fringe benefits, may be allowed. | | | | | | | | |  |  |
| **3.4 Total In-kind Contribution** | | | |  | | | | | | **$** **0** |
| **4.0 Verification** | The services are verifiable from agency records and may be inspected upon request. | | | | | | | | | |
| **5.0 Federal Program** | | The In-kind Contributions reported above have not been included as contributions for other assisted programs, and are not paid for by the federal government under any assistance agreement. | | | | | | | | |
| Each of the undersigned signatories represents that he or she has been duly authorized to execute this Statement of In-kind Contributions and has full power and authority to bind the agency he or she represents to the provisions hereof.  Each of the undersigned signatories certifies that the signature below, whether handwritten, typed, electronic, or digital or submitted by facsimile or electronic mail, is their own.  The agency and each of the undersigned signatories further understands and agrees that no further certification or verification is necessary to validate any signature hereto and that the purported lack of any such certification or verification will not in any way affect the enforceability of the statements, representations, or certifications contained herein.  IN WITNESS WHEREOF, the agency certifies that the statements herein are true and accurate, verifies the provision of such services as of this       day of      ,      and acknowledges that its signatures hereon, whether handwritten, typed, electronic, or digital or submitted by facsimile or electronic mail, are sufficient and legally binding. | | | | | | | | | | |
| BY: | | | | | | | |  | | |
| Title: | | | | | | | |  | | |