



NORTH STATE TOGETHER IN-KIND/CASH MATCHING DECLARATION COLLABORATIVE: _____

Budget Categories	Amount of in-kind/cash match	Funding Source (Public, Private, Donation)*	Description of Expenditures in Relation to Collaborative Work
Staffing/Coordinator			
Training/Staff Development			
Technology/Database			
Marketing/Outreach			
Travel			
Evaluation			
Physical Space			
Subgrants/Regrants (i.e., mini-grants to participants)			
Other			

*Name Source if Possible

Total amount claimed: _____

Certified by: _____ Date: _____
Executive Director, Collaborative

Approval: _____ Date: _____
Kevin O'Rorke, CEO North State Together