**Non-Profit Assistance Federal Aid Affidavit**

 I, the affiant, being duly sworn, do hereby depose and state as follows, under the penalty of perjury:

1. I am a duly authorized owner, officer, director, principal, and/or partner of [INSERT NON-PROFIT NAME], which is a Qualifying Nonprofit Organization based in Kentucky, as each of those terms are defined in the Nonprofit Assistance Fund Program Guidelines; and
2. [INSERT NON-PROFIT NAME] has not received Federal Aid, as that term is defined in the Nonprofit Assistance Fund Program Guidelines, prior to its submission of an application through the Nonprofit Assistance Fund Program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AFFIANT

**Notary Acknowledgement**

THE STATE OF KENTUCKY

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_

Subscribed, sworn to, and acknowledged before me by the affiant, on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2022.

Notary Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary ID Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_