**Non-Profit Assistance Financial Filing 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;
2. [INSERT NON-PROFIT NAME] has enclosed Certified Financial Documents, as that term is defined in the Nonprofit Assistance Fund Program Guidelines, with its application for Nonprofit Assistance; and
3. The enclosed Certified Financial Documents accurately reflect the financial information of [INSERT NON-PROFIT NAME], including the Net Negative Revenue Difference, as that term is defined in the Nonprofit Assistance Fund Program Guidelines, of [INSERT NON-PROFIT NAME].

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

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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_