

Appendix C – Statement of Assurance

The authorized representative of the applicant organization (whose signature appears on the Face Page of the application, SF-424) must complete and sign this Assurance, which validates that the information submitted is accurate.

Applicants must specify the geographic catchment area in which the project will be implemented. Rural applicants must specify if the project will be implemented in a community of high need.

The project will be implemented in Pinellas County, Florida

Please check the appropriate box:

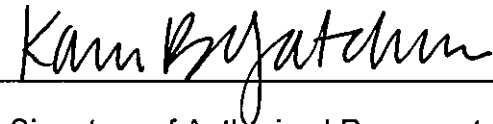
- The organization will be implementing the project in a **rural geographic area** not located in a metropolitan statistical area (as defined by the Office of Management and Budget).
- The organization will be implementing the project in a **non-rural geographic area** located in a metropolitan statistical area (as defined by the Office of Management and Budget).

If you are applying as a rural applicant, please check the appropriate box:

- The project **will be** implemented in a community of high need.
- The project **will not be** implemented in a community of high need.

Karen Yatchum, Director of Human Services

Name and Title of Authorized Representative



Signature of Authorized Representative

May 11, 2021

Date of Signature