

U.S. SMALL BUSINESS ADMINISTRATION Grant / Cooperative Agreement Cost Sharing Proposal

PURPOSE: This form is used by the recipient organization to indicate its portion of match it is contributing to the project.

OMB Approval 3245-0140 Expiration Date:06/30/2012

percent of the total allowable

This form is submitted via www.grants.gov

1. NAME OF GRANTING AGENCY

2. GRANT / CA NO.

3. ADDRESS OF APPLICANT ORGANIZATION

4. PROJECT PERIOD 1
From:
To:

5. TITLE OF PROJECT

(Name of Applicant Organization)

proposes to share
in the cost of this project during the project period specified above (or any subsequent revision of that project

7. SIGNATURE AND TITLE OF AUTHORIZED GRANTEE OFFICIAL	8. DATE

this minimum percentage will apply to the project period as a whole, but not necessarily to each budget

It is understood that if the project period consists of more than one budget period,

SBA Form 1224 (4-12)

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period) to the minimum extent of

costs of the project.²

period.

Note: The estimated burden completing this form is 3 hours per response. You will not be required to respond to any collection of information unless it displays a currently valid OMB approval number. Comments on the burden should be sent to U.S. Small Business Administration, Chief, AlB, 409 3rd S., S.W., Washington, D.C. 20416 and Desk Office for Small Business Administration, Office of Management and Budget, New Executive Office Building, room 10202 Washington, D.C. 20503. OMB Approval (3245-0140). PLEASE DO NOT SENDFORMS TO OMB.

¹ The project period includes the initial budget period and the budget period(s) of any non-competing continuation grant(s).

² Total allowable costs of the project includes both costs charged to the Federal grant funds and costs contributed by the grantee organization, and will be determined in accordance with the cost principles designated by the granting agency.