**Match Letter Template**

**Please copy the following template to your letterhead. A separate letter must be completed for each of your projects:**

Ms. Karia Basta

Special Needs Program Administrator

Arizona Department of Housing

1110 West Washington Street, Suite 280

Phoenix, AZ 85007

Dear Ms. Basta:

Please consider this the formal match letter for

Name of Project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The current grant number is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A total of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of match is available for this project for the 2017/2018 program year. The match will be provided as (check all that apply):

 \_\_\_\_\_\_ cash \_\_\_\_\_\_ in kind

The detail is as follows:

|  |  |
| --- | --- |
| Category (i.e. cash, personnel, household items, services provided by the agency) include the basis for figuring the amount (i.e. household items @ $200 per household unit) | Amount |
|  |  |
|  |  |
|  |  |
| Total |  |

Please call me at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ if you need any additional information.

Sincerely,

Signatory’s Name

Signatory’s Title