Mandatory Reference:303Supplementary Reference:N/AFile:303515m

SIMPLIFIED GRANT FORMAT

Mr./Ms	
XYZ Organization	

SUBJECT: Grant No. (use normal grant numbering)

Dear Mr/Ms. ____:

In response to your request for assistance dated ______ I am pleased to award to the XYZ Organization this grant in the amount not to exceed \$______ as a contribution to your program to _______ during the period ______ to _____. We understand that the XYZ Organization will contribute goods and services valued at approximately \$______ to the program.

Funds provided under this grant may be utilized to reimburse your organization for actual incurred costs of ______

required to complete the program. Requests for reimbursement shall be made to the Controller,_____.

By accepting this grant the XYZ Organization agrees to:

1. Document that reasonable steps were taken to ensure that all purchases charged to the grant are at reasonable prices and from responsible sources;

2. Maintain complete records of all costs charged to the grant for a period of three years after the expiration of the grant and make such records available to USAID or its representatives for review at any time; and

3. At USAID request, refund to USAID any funds received from USAID that represent reimbursement for any costs determined by USAID not to meet the terms and conditions of this grant.

USAID does not assume liability for any third party claims for damages arising out of this grant. USAID may terminate this grant upon 30 days written notice.

Please sign the original and each copy of this letter to acknowledge your receipt of this grant and return the original to the Grant Officer.

Sincerely yours,

Grant Officer

ACKNOWLEDGED:

XYZ Organization

By: _____

Title _____

Date: _____

Accounting Data:

PIO/T No. Appropriation No. BPCC: Obligation No.

DRCD11 adsfin 303515m