

Certification of Final Report for Oklahoma Humanities Grant

We certify that, to the best of our knowledge and belief, the material in the final program evaluation report and the final financial report represents an accurate and complete account of actual events, expenditures, and cost-share on this project.

FISCAL AGENT	
Signature:	Date:
Name:	
Address:	
City, State, Zip:	
Work Phone:	E-Mail:
Please note: If individual or AUTHORIZING OFFICIAL	address has changed, check here \square and contact OH.
Signature:	Date:
Name:	
Address:	
City, State, Zip:	
Work Phone:	E-Mail:
Please note: If individual or	address has changed, check here \Box and contact OH.