## **Healthy Homes and Lead Hazard Programs**

## **U.S. Department of Housing** and Urban Development Office of Lead Hazard Control

OMB Approval No. 2539-0015 (expires 11/30/2008)

| Factor 4  | Leveraging Resource                                | es   |   |  |
|---|--|--|---|--|
|   |  |  | T   | 1  |
| Name Of The Organization Or Entity That Will<br>Contribute Match Or Leveraged Funds And If The<br>Organization Will Be a Subgrantee/Subrecipient  | Work To Be Accomplished In Support Of The Program. | Value Of In-Kind<br>Or Cash Match<br>Contribution* | Additional<br>Leveraged Funds<br>Contribution | Total Of Match And Leveraged Contributions |
| Name:   |  |  |   |  |
| Type of Organization:   |  |  |   |  |
| Subgrantee/Subrecipient: ☐ Yes ☐ No   |  |  |   |  |
| Name:   |  |  |   |  |
| Type of Organization:   |  |  |   |  |
| Subgrantee/Subrecipient: ☐ Yes ☐ No   |  |  |   |  |
| Name:   |  |  |   |  |
| Type of Organization:   |  |  |   |  |
| Subgrantee/Subrecipient: ☐ Yes ☐ No   |  |  |   |  |
| Name:   |  |  |   |  |
| Type of Organization:   |  |  |   |  |
| Subgrantee/Subrecipient: ☐ Yes ☐ No   |  |  |   |  |
| Name:   |  |  |   |  |
| Type of Organization:   |  |  |   |  |
| Subgrantee/Subrecipient: ☐ Yes ☐ No   |  |  |   |  |
| Name:   |  |  |   |  |
| Type of Organization:   |  |  |   |  |
| Subgrantee/Subrecipient: ☐ Yes ☐ No   |  |  |   |  |
| Name:   |  |  |   |  |
| Type of Organization:   |  |  |   |  |
| Subgrantee/Subrecipient: ☐ Yes ☐ No   |  |  |   |  |
| Name:   |  |  |   |  |
| Type of Organization:   |  |  |   |  |
| Subgrantee/Subrecipient: ☐ Yes ☐ No   |  |  |   |  |
| Name:   |  |  |   |  |
| Type of Organization:   |  |  |   |  |
| Subgrantee/Subrecipient: ☐ Yes ☐ No   |  |  |   |  |
|   | Total Amount                                       | \$   | \$  | \$   |
| Name of the organization or entity that will contri explanatory.  Work to be accomplished in support of the programment of the | am: The type of activities that                    |  | _   | -  |

outreach, training, risk Assessments/paint Inspections, relocation, etc.)

Value of In-kind or Cash Match Contribution: As required by statute or appropriation.

Additional Leveraged Funds Contribution: Additional funds above the match contribution required by statute or appropriation

Total of Match and Leveraged Contributions: The total of an applicant's In-kind or Cash Match Contribution and any additional Leveraged **Funds Contribution**