To expedite the development of the Memorandum of Agreement (MOA), please complete and return this form.

**Project Administration** (Please select one and provide supporting information)

|  |  |
| --- | --- |
| **For ADD or Other Entities** | |
| Name of Entity |  |
| Contact Person |  |
| Title |  |
| Mailing Address |  |
| Email Address |  |
| Phone Number(s) |  |
| **Private Grant Manager** | |
| Name |  |
| Title |  |
| Mailing Address |  |
| Email Address |  |
| Phone Number(s) |  |

**MOA Approval** (Please provide information on who will sign the MOA on behalf of Sub-Recipient)

|  |  |
| --- | --- |
| Name |  |
| Title |  |
| Mailing Address |  |
| Email Address |  |
| Phone Number(s) |  |

**Sub-Recipient Identification**

|  |  |
| --- | --- |
| Sub-Recipient Name |  |
| Tax-ID Number |  |
| SAM/Cage Code |  |
| Unique Entity Identifier |  |

**Financial Information**

Separate Bank Account Setup

Electronic Funds Transfer (EFT) Form Completed

* Return to:
  + Kayla Thornsberry ([kayla.thornsberry@ky.gov](mailto:kayla.thornsberry@ky.gov))
  + Hannah Radosevich ([hannah.radosevich@ky.gov](mailto:hannah.radosevich@ky.gov))