**Form B-1, Governmental Entity**

**Authorized Officials**

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| **Legal Business Name of Respondent:** |  |

Include the full names (last, first, middle) and addresses for the officials who are authorized to enter into a Grant Agreement on behalf of the respondent.

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| **Name:** |  | | |  | **Mailing Address (incl. street, city, county, state, & zip):** | |
| **Title:** |  | | |  |  |  |
| **Phone:** |  | | Ext. |  |  |  |
| **Fax:** |  | | |  |  |  |
| **Email:** |  | | |  |  |  |
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| **Name:** |  | | |  | **Mailing Address (incl. street, city, county, state, & zip):** | |
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| **Name:** |  | | |  | **Mailing Address (incl. street, city, county, state, & zip):** | |
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| **Name:** |  | | |  | **Mailing Address (incl. street, city, county, state, & zip):** | |
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| **Fax:** |  | | |  |  |  |
| **Email:** |  | | |  |  |  |
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| **Name**: |  | | |  | **Mailing Address (incl. street, city, county, state, & zip):** | |
| **Title:** |  | | |  |  |  |
| **Phone:** |  | Ext. | |  |  |  |
| **Fax:** |  | | |  |  |  |
| **Email:** |  | | |  |  |  |
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