

**Attachment G:
IRS Tax Exemption Verification Form (Annual)**

We, the undersigned entity, hereby testify that the 501 (c)(3) status is on file with the North Carolina Department of Health and Human Services and is still in effect.

Name of Entity

Signature of Chairman, Executive Director, or other authorized official

Title of above signed authorized official

Sworn to and subscribed before me this _____ day of _____, 20____

Notary Signature and Seal

Notary's commission expires _____, 20 ____.