

AmplifyMass

Authorized Applicant's Signature and Acceptance Statement

The undersigned is a duly authorized representative of the applicant listed below. The applicant has read and understands the program requirements as outlined on the AmplifyMass webpage.

The applicant specifically acknowledges that all confidential and sensitive information is redacted from all application materials. The applicant understands that all materials submitted as part of its AmplifyMass application are subject to disclosure under the Massachusetts Public Records Law, codified at Chapter 66 of the Massachusetts General Laws.

Applicant acknowledges and agrees that MassCEC has no obligation, and retains the sole discretion to fund or choose not to fund the application set forth herein, and that MassCEC's receipt of the application does not imply any promise of funding at any time.

I certify that the statements made in this application, including all attachments and exhibits, are true and correct to the best of my knowledge.

AUTHORIZED SIGNATORY:		
Print Name:		
Title:		
Date:		

[PI Last Name] [Date of Application]