## Submission Deadline: January 13, 2024 22007apply.gov

## Inflation Reduction Act Financial Assistance

## SIGNATURE PAGE

OMB No: 0503-0028

Applicant's Social Security Number or Individual Taxpayer ID Number

ignature of pre	<mark>parer, guardian, or lawyer</mark> :	
he fee I have ch	arged for helping the applicant, if any, is:	
or all preparers,	guardians, or lawyers, please initial in ackn	nowledgement of the following:
		nis Application for the applicant, based on information provided to me by the fully provided all relevant information that has been shared with me.
Initial Here	Here I hereby certify that I have informed the applicant that the government is not charging any fee to an applicant that the apply for financial assistance under this program.	
I hereby certify that I do not have knowledge or information that the information provided in this Application an its documents is incorrect or untruthful.		
Initial Here	I understand that false statements or applications made in connection with the Application may result in fines,	
Initial Here		
Signature of preparer		Date of signature
Printed name	e of preparer	
Preparer's organization (if applicable)		
Preparer's ph	none number	
Preparer's er	mail	