

[Insert organization official letterhead]

From: [Insert name and contact info of someone in a senior leadership position at your organization or the lead organization of a Collaborative Partnership]

Donovan Morgan

Assistant Director of Contracts

TN Division of TennCare

310 Great Circle Rd.

Nashville, TN 37243

RE: Statement of Assurance

On behalf of, \_\_[Insert (lead) organization name]\_\_\_\_, I understand the requirements of the funding for the TennCare Outreach and Advocacy grant application. If \_\_[Insert (lead) organization name]\_\_\_\_ is selected to receive this grant funding I am committed to fulfilling these requirements over the course of the grant contract period.

Signature/Title:

Date: