

**Minnesota State Colleges and Universities
Matching In-Kind Commitments Form GR-C**

Matching In-Kind Commitments - All Sources

Title _____ Date _____
 Program/Project _____
 Director _____

**OOC In-Kind. Matching In-Kind Commitments From Office of the
Chancellor Only**

Fiscal Year	OOO Budget Source/Dept.	Cost Center Number	Authorizing Signature	Date	Value
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
Total Value - Office of the Chancellor Matching In-Kind Commitments					\$

External In-Kind. Matching In-Kind Commitments From Non-OOO Sources Only

Fiscal Year	Source of External In-Kind	Authorizing Signature	Date	Value
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
Total Value - External Matching In-Kind Commitments				\$

TOTAL VALUE - MATCHING IN-KIND COMMITMENTS \$ _____