To: (name & address of Grant Recipient & name & title of Chief Executive Officer)	Copy To: (name & address of SubRecipient)
We received your Request for Release of Funds and Certification, form HUD-7015.15 on	
Your Request was for HUD/State Identification Number	

All objections, if received, have been considered. And the minimum waiting period has transpired. You are hereby authorized to use funds provided to you under the above HUD/State Identification Number. File this form for proper record keeping, audit, and inspection purposes.

Typed Name of Authorizing Officer

Signature of Authorizing Officer

Date (mm/dd/yyyy)

Title of Authorizing Officer

× Willin Bodfort

form **HUD-7015.16** (2/94) ref. Handbook 6513.01

Previous editions are obsolete.