**Attestation**

By my signature below, I hereby certify that:

I have the necessary authority to execute this agreement between my Agency and the Department of Children and Families (DCF).

{Insert Agency Name} agrees to:

 1) Report into the Homeless Management Information System (HMIS). {Insert agency name} agrees to pay a $750 annual fee for reporting and having access to the system. This expense will be included in the program budget {or} Our agency already reports into HMIS and pays an annual fee, however will continue paying the annual fee out of this program budget as needed.

2) Report into the National Youth in Database (NYTD) system through technical support and training by DCF.

Print Agency Representative Name and Title

Signature Agency Representative