

Arkansas BEAD Letter of Support [download/upload]

Required standard template for Eligible local government officials.

*The following **should be completed by the individual who is supporting you** as the applicant.*

Required information

Printed name of eligible government official:

Printed name of applicant:

Please select your title from the list below:

- | | |
|---|---|
| <input type="checkbox"/> State Senator | <input type="checkbox"/> Member of City Council |
| <input type="checkbox"/> State Representative | City: |
| <input type="checkbox"/> County Judge | <input type="checkbox"/> Member of School Board |
| County: | School district: |
| <input type="checkbox"/> Justice of the Peace | <input type="checkbox"/> Other |
| County: | Provide title: |
| <input type="checkbox"/> Mayor | |
| City: | |

Attestation

1. Do you certify that the applicant provided all requested, necessary details on the broadband deployment project for which they are requesting your support? Yes No

2. Do you and your community support this project and believe that it advances your goals for broadband deployment? Yes No

Signature

By signing below, I hereby confirm that all information provided by me in this document are true, accurate, and complete to the best of my knowledge.

(Government official's signature) (Date)

(Applicant's signature) (Date)