

LETTER OF ACKNOWLEDGMENT

Dated : _____

March of Dimes Birth Defects Foundation
Office of Government Affairs
1146 19th Street NW - Sixth Floor
Washington, DC 20036

Attn: _____

Dear _____:

This Letter of Acknowledgement will confirm _____
_____ (RESEARCHER NAME) receipt, understanding and agreement with
the provisions of the March of Dimes Birth Defects Foundation *General Request for Public Policy
Research Proposals*, inclusive of the *Instructions for Public Policy Research Funding*.

Yours truly,

(Name and Title)

For: _____
(Researcher Name)

(Street Address)

(City, State, Zip Code)

() _____ () _____
(Phone No.) (Fax No.)