Exhibit 4

Stewardship Fund Project

CONTRACT OFFICER DESIGNATION

Starting on the date of execution of agreement The _____ **(Sponsor)** designates those listed below as Contract Officer's to authorize payment of expenditures for _____ **(Project)** from grant funds and other local match funds, per the specifications of all applicable Agreement(s). A Contract Officer may not authorize a payment to himself/herself.

Sponsor agrees that the signature on a payment request by one of the Contract Officer(s) designated herein shall authorize **Cascade Pacific RC&D** (**CPRCD)** to make that payment without further approval from the **Sponsor**.

This Attachment replaces all previous **Contract Officer** designations for the Project as of the date of the **Sponsor's** signature below and upon receipt at **CPRCD**.

The Contract Officer(s) are valid for a period of one year from the date of signature of this form, or until CPRCD receives a new **Contract Officer Designation** for this Project.

SIGNED:

Sponsor: *(not a Contract Officer)*

_____ _____ _____
Signature *Print Name & Title* *Date*

Contract Officer #1:

_____ _____ _____
Signature *Print Name & Title* *Date*

_____ _____
Address *Phone*

_____ _____
City, State & Zip Code *Email*

Contract Officer #2: *(if applicable)*

_____ _____ _____
Signature *Print Name & Title* *Date*

_____ _____
Address *Phone*

_____ _____
City, State & Zip Code *Email*