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EXECUTIVE 405-264-5000 FAX 405-264-5099	FINANCE 405-264-5004 405-264-5099	GRANTS 405-264-5008 405-264-5099	VICTIMS 405-264-5006 405-264-5097	IT 405-264-5002 405-264-5099	TRAINING 405-264-5000 405-264-5099	UVED 405-264-5010 405-429-4274
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Forensic Medical Examination Payment Certification of Compliance

The subgrantee assures that the policies and practices of the project's service area comply by making sure the State, Indian tribal government, unit of local government, or another government entity incurs the full out-of pocket cost of forensic medical exams for victims of sexual assault and coordinates with health care providers in the region to notify victims of sexual assault of the availability of rape exams at no cost to the victims. The subgrantee further assures that the policies and practices of the project's service are not requiring a victim of sexual assault to participate in the criminal justice system or cooperate with law enforcement. [34 US Code § 10449](#)

Signature of Authorized Official

Date

Signature of Project Director

Date