

Opioid Settlement Advisory Committee
Project/Request for Funding Submission Requirements

Section 1:

Date of Submission:

Name/Title/Organization:

Address:

Email & Phone:

Please list any conflicts of interest:

Section 2:

Project Name:

Who will be responsible for the project implementation (Agency/Individual)?

Please list any additional partners for this project:

Please list the specific criteria under Exhibit E that this project meets:

Overview of the Project: (Include Target Population & Number of People to be Served)

Will this project serve 100% of OUD population? If not, how will you fund the percentage of non-OUD persons?

Describe the unmet need:

Describe the intended outcome:

Describe how this project will impact our community:

What metrics will be utilized to measure effectiveness?

Is this is an Evidence-Based Program: Yes_____ No_____ if Yes, on which registry is it found?

Is this project implemented in any other community? Describe:

Section 3:

Cost of the Project: (Initial Implementation Costs/Ongoing Costs vs. 1X Cost): Please include a detailed budget

Describe any additional funding that will support this project (Source/Amount/Entity):

Please include a detailed sustainability plan for your project beyond any Opioid Settlement Funds:

Section 4: Please include the following to your submission:

- Required Documentation;
 - a. Completed W-9 of entity
 - b. Copy of the IRS Tax Exempt Affirmation Letter
- Website(s)
- Commitment from Agency Leadership
- Additional Information to support your request
- Please use additional pages as needed.

Section 5: If approved for funding, quarterly reports will be required to be submitted to the Chief Clerk of Mercer County. Quarterly reports will include a receipt log, original legible receipts, and a description of the purchase for ALL expenses paid from the funding allocation.

Please note: Status/Project Updates will be required if funded either in writing and/or in person***