

Preston County Commission

Outside Agency Funding Request Application

To submit completed application or ask questions please email County Administrator Nate Raybeck at nraybeck@prestoncountywv.gov .

Application Period

☐ 1st Period (February 1st – February 28th)

☐ 2nd Period (November 1st – November 30th)

☐ Emergency Request

Fiscal Year: _____

I. Organization Information

- Organization Name: _____

- Address: _____

- Contact Person: _____

- Title: _____

- Phone: _____

- Email: _____

- Is your organization a 501(c)(3) or government entity? Yes / No

II. Program or Project Details

- Title of Program/Project: _____

- Amount of Funding Requested: \$_____

Please attach the following:

1(a). Has your organization previously received funding from the County Commission?

(b). If yes, when and for what purpose?

2. Brief Description of Program/Project and Intended Use of Funds?

3. What Preston County community needs does this program address?

4. Who will benefit (population served, number of residents, etc.)?

5. Timeline for Implementation?

III. Distribution Type Selection

Refer to the Outside Agency Funding Policy for more information.

- ☐ Reimbursement of Expenses (preferred method)
- ☐ Direct Bill Payment
- ☐ Direct Funding to Agency (Emergency Request Only)

If you selected Direct Bill Payment, or Direct Funding to Agency please explain the reason for requesting that method:

IV. Supporting Documentation (Required)

Please attach the following:

1. W-9 Form.
2. Most recent financial statement or IRS Form 990.
3. Detailed project or program budget .
4. Organizational mission statement and overview.
5. List of current Board of Directors or governing body.

V. Certification

I certify that the information provided in this application is true and accurate to the best of my knowledge and that I have read and understand the Preston County Commission Outside Agency Funding Policy.

Signature: _____

Printed Name: _____

Title: _____

Date: _____