

**APPLICATION FOR CITY ONE CENT FUNDS
FISCAL YEARS 2011 TO 2015
(July 1, 2010 to June 30, 2015)**

GENERAL INFORMATION:

NAME OF ORGANIZATION: Sheridan County Emergency Management PHONE: 307-675-2569

CONTACT PERSON: Dave Coleman ADDRESS: 224 South Main, Suite B-1, Sheridan, Wyoming

AMOUNT OF FUNDS REQUESTED: \$10,000 per year AMOUNT APPROVED: _____

TAX STATUS: Exempt FEDERAL ID NO: _____ EMAIL: dcoleman@sheridancounty.com

DESCRIBE PRINCIPAL PURPOSE OF YOUR ORGANIZATION: Sheridan County Emergency Management Provide Emergency Management Coordination for all of Sheridan County which includes our Emergency Operations Plan, the all Hazards Mitigation Plan and the management of Homeland Security Federal Grants for the purchase of equipment and training for all entities in Sheridan County. The office is also responsible for the coordination of any disaster or emergency which would occur in Sheridan County.

DESCRIBE BOARD OF DIRECTORS SELECTION PROCESS: _____

NO OF BOARD MEMBERS: _____ TERM: _____

LIST NAMES OF BOARD MEMBERS AND OFFICERS: _____

BRIEFLY LIST PURPOSE AND OBJECTIVES FOR REQUESTED FUNDS (Indicate if the funds are to be used for an operational subsidy or for one-time expenditures such as a project or equipment acquisition or capital improvements; indicate whether other sources are available and been applied for; indicate the reason the City, rather than the County, Optional One Cent Sales tax funds are appropriate; if possible, estimate the number of citizens to benefit):

The funds will be used to partially fund the Sheridan County Office of Emergency Management. The Office of Emergency Management's responsibility is to coordinate and assist any entity in Sheridan County with any type of emergency or disaster

OBLIGATIONS:

ANTICIPATED EXPENDITURES OF APPROVED FUNDS (Indicate amount per year and years for which funds are requested):

	AMOUNT	DESCRIPTION
1.	\$10,000	Sheridan County Office of Emergency Management
2.	\$10,000	Sheridan County Office of Emergency Management
3.	\$10,000	Sheridan County Office of Emergency Management
4.	\$10,000	Sheridan County Office of Emergency Management
5.	\$10,000	Sheridan County Office of Emergency Management
6.	\$10,000	Sheridan County Office of Emergency Management
7.	\$10,000	Sheridan County Office of Emergency Management
8.	\$10,000	Sheridan County Office of Emergency Management

GOALS AND BENEFITS TO THE CITY OF SHERIDAN RELATING TO THE EXPENDITURES LISTED ABOVE:

1. Coordination of any disaster or emergency which would occur in Sheridan County
2. Coordination of any disaster or emergency which would occur in Sheridan County
3. Coordination of any disaster or emergency which would occur in Sheridan County
4. Coordination of any disaster or emergency which would occur in Sheridan County
4. Coordination of any disaster or emergency which would occur in Sheridan County
5. Coordination of any disaster or emergency which would occur in Sheridan County
6. Coordination of any disaster or emergency which would occur in Sheridan County
7. Coordination of any disaster or emergency which would occur in Sheridan County
8. Coordination of any disaster or emergency which would occur in Sheridan County

DESCRIBE LAST YEAR'S ACCOMPLISHMENTS AND BENEFITS ATTRIBUTED TO ONE CENT OPTIONAL FUNDS RECEIVED (If applicable):

Coordinated the minor flooding that occurred in Sheridan County last year. Coordinated a shelter for travelers during a severe winter storm. Managed several Homeland Security Grants that benefited all entities in Sheridan County.

**PLEASE INDICATE IF YOUR ORGANIZATION IS APPLYING FOR THE COUNTY OF SHERIDAN
OPTIONAL ONE CENT TAX FUNDS. IF SO, THE AMOUNT REQUESTED AND FOR WHAT YEAR(S) AND
PURPOSE.**

N/A _____

****PLEASE PROVIDE A COPY OF YOUR LAST FISCAL YEAR AUDIT (Or a Balance Sheet and Profit and
Loss Statement):**

****PLEASE PROVIDE A COPY OF YOUR CURRENT FISCAL YEAR BUDGET**

****PLEASE PROVIDE A COPY OF THE LATEST IRS FORM 990 (If Applicable)**

SIGNED: _____

Title: _____

Date: _____

**PLEASE COMPLETE THIS APPLICATION. You may provide additional information if you wish,
which will also be distributed to the Mayor and Council.**