



The Putnam County Commission is accepting programmatic or project related applications requesting the use of Opioid Settlement Funds. Please be advised, each application must demonstrate the project request falls under one or more of the following “Approved Purposes” listed below as outlined in the Memorandum of Understanding. The approved purposes are listed below:

- Evidence-based strategies, programming, and/or services used to expand the availability of treatment for individuals affected by substance use disorders and/or addiction,
- Develop, promote and provide evidence-based substance use prevention strategies,
- Provide substance use avoidance and awareness education,
- Engage in enforcement to curtail the sale, distribution, promotion or use of opioids and other drugs,
- Decrease the oversupply of licit and illicit opioids
- Support recovery from addiction to be performed by qualified providers

In order to be considered for funding, please ensure the application below is completed in its entirety. You may attach additional pages if needed. All applications will be accepted; however, approval of funding requests will be limited to the amount of funding available from the settlement funds received.

Applications will be evaluated by a multidisciplinary team comprised of experts from the Substance Use Prevention and Treatment field. Funding recommendations will be made to the Putnam County Commission based on the contents of the applications and the needs demonstrated therein.

Once submitted, this application and any supporting documents are considered a public record and will be made available to the public and the media upon request.

Opioid Settlement Fund Application can be submitted to the Putnam County Commission via email at thanna@putnamwv.org or by mail your completed application to:

Putnam County Commission
12093 Winfield Road
Winfield, WV 25213.

For questions, call 304-586-0201

Applicant Contact Information

Name of Organization: _____

Contact Persons Name for application: _____

Address: _____

Website, if applicable: _____

Phone number: _____

Email address: _____

Project Summary

*In this sections, please provide a summary overview of your proposal that should include but not be limited to the following:
Brief description of the proposal, that includes which approved uses will be met with this project, the individuals or communities served by the project, the purpose and key anticipated outcomes of the project, the amount of funding requested and how it will be used, anticipated timeline for the project*

Proposal Details

This sections should include a description the problem or need that your project seeks to address, the steps that will be taken to address the problem identified, the goals and objectives for the project, the anticipated leadership team for the proposed project (please upload/attach resumes), a list any partners in this proposal, their roles in the project and your relationship with the partners, and a description of how your project will continue after the requested funds have been exhausted.

Project Budget

The budget must include the total cost of the project, the amount of Opioid Settlement Funds requested for the project and a detailed description of their use, any additional funding for the project (not originating from Putnam County's Opioid Settlement Funds) and its sources including matching funds. Please include all quotes/bids that have been received that are related to this project.

Organization information

Please include your organization's mission statement, a brief history of your organization including any significant accomplishments achieved in the last three years, a current list of programs and activities performed by your organization, a list any federal, state, local or private grant awards or funding received in the last three years and the current status of those funds, a list your Organization's Owner(s), Board of Directors, senior staff members, or other key members of your organization, and a list the staff involved with this project describing their roles and responsibilities

Supplemental Information and Attachments

Please upload/attach the following financial documents, if applicable:

1. Most recent audited financial statements
2. Current operating budget
3. Any other funding applications for this project from other sources (city, state, private or non-profit organizations) please list the same here.
4. Letters of Support for the project

Application Certification

Certification: To the best of my knowledge, the information contained in this application is true and correct. The submission thereof has been duly authorized by the governing body.

Signature: _____

Name (Print): _____

Title: _____

Date: _____