

RESOLUTION _____

**AUTHORIZING APPLICATION FOR
FINANCIAL ASSISTANCE FROM THE RURAL ECONOMIC ACTION PLAN FUND**

WHEREAS, _____ desires to
NAME OF ENTITY
seek funding from the Rural Economic Action Plan Fund for “ _____
_____”, in the County of _____; and

WHEREAS, it is in the best interest of the residents of _____
to expedite the preparation and submission of an application for financial assistance
from the Rural Economic Action Plan Fund, in the form of a grant.

NOW THEREFORE, BE IT RESOLVED THAT,

_____ and
E. NAME & TITLE OF AUTHORIZED AGENT

_____ are
NAME & TITLE OF ALTERNATE AUTHORIZED AGENT
authorized to be the contact persons on file to work with the city / county authorized
agents and SODA representatives; on behalf of _____.
NAME OF ENTITY

PASSED AND APPROVED by the Board of Directors of _____,
NAME OF ENTITY
on the _____ day of _____, 20__.

By: _____

Attest: _____

Entity
