

1594 Esmeralda Avenue Minden, Nevada 89423

www.douglascountynv.gov 775-782-9821

DOUGLAS COUNTY COMMUNITY GRANT ASSURANCE FORM

Project Name:	
Organization:	
By signing this form, you are confirming that the information provided in the Community Grants application is complete and accurate and are agreeing to the following statements: I understand that the organization's application and supporting documents will be reviewed and accepted as submitted. I have read and understand Douglas County Policy 100.08 Community Grants Program and will adhere to the procedures. I have read and understand Douglas County FY18-22 Strategic Plan and will adhere to the County's mission, values, visions and objectives.	
Required Signatures	
Organization President/Director/Chair	Project/Grant Director
Print Name	Print Name
Date	 Date