

Governor's Council on Alcoholism and Drug Abuse
Fiscal Grant Cycle July 2020-June 2025

FORM 1B

WHEREAS, the Governor's Council on Alcoholism and Drug Abuse established the Municipal Alliances for the Prevention of Alcoholism and Drug Abuse in 1989 to educate and engage residents, local government and law enforcement officials, schools, nonprofit organizations, the faith community, parents, youth and other allies in efforts to prevent alcoholism and drug abuse in communities throughout New Jersey.

WHEREAS, The Township/Borough/City Council of the Township/Borough/City of West Orange, County of Essex, State of New Jersey recognizes that the abuse of alcohol and drugs is a serious problem in our society amongst persons of all ages; and therefore has an established Municipal Alliance Committee; and,

WHEREAS, the Township/Borough/City Council further recognizes that it is incumbent upon not only public officials but upon the entire community to take action to prevent such abuses in our community; and,

WHEREAS, the Township/Borough/City Council has applied for funding to the Governor's Council on Alcoholism and Drug Abuse through the County of Essex;

NOW, THEREFORE, BE IT RESOLVED by the Township/Borough/City of West Orange, County of Essex, State of New Jersey hereby recognizes the following:

1. The Township/Borough/City Council does hereby authorize submission of a strategic plan for the (name) Municipal Alliance grant for fiscal year July 1, 2022 to June 30th, 2023 in the amount of:

DEDR	\$ <u>23,580.80</u>
Cash Match	\$ <u>5,837.20</u>
In-Kind	\$ <u>17,685.60</u>
2. The Township/Borough/City Council acknowledges the terms and conditions for administering the Municipal Alliance grant, including the administrative compliance and audit requirements.

APPROVED: _____
(Name), Mayor/Head of Governing Body

CERTIFICATION

I, (name), Municipal Clerk of the Township/Borough/City of _____, County of _____, State of New Jersey, do hereby certify the foregoing to be a true and exact copy of a resolution duly authorized by the Township/Borough/City Council on this (day) day of (month), (year) .

Karen J. Carnevale, Municipal Clerk

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