

APPLICATION FOR FEDERAL ASSISTANCE	2. DATE SUBMITTED	Applicant Identifier
1. TYPE OF SUBMISSION Application Non-Construction	3. DATE RECEIVED BY STATE	State Application Identifier
	4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier
5. APPLICANT INFORMATION		
Legal Name City of Shoreline	Organizational Unit Finance Department	
Address 17544 Midvale Avenue N Shoreline, Washington 98133-4921	Name and telephone number of the person to be contacted on matters involving this application Wolbrecht-Dunn, Bethany (206) 546-8297	
6. EMPLOYER IDENTIFICATION NUMBER (EIN) 91-1683888	7. TYPE OF APPLICANT Municipal	
8. TYPE OF APPLICATION New	9. NAME OF FEDERAL AGENCY Bureau of Justice Assistance	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: 16.580 CFDA Edward Byrne Memorial State and Local Law TITLE: Enforcement Assistance Discretionary Grants Program.	11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT City of Shoreline, WA High School School Resource Officer (SRO) Program.	
12. AREAS AFFECTED BY PROJECT The City of Shoreline, specifically the two High Schools of the Shoreline School District.		
13. PROPOSED PROJECT Start Date: January 01, 2007 End Date: December 31, 2007	14. CONGRESSIONAL DISTRICTS OF a. Applicant b. Project WA01	
15. ESTIMATED FUNDING	16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS? Program is not covered by E.O.	
Federal	\$20,803	
Applicant	\$84,618	
State	\$0	
Local	\$30,000	

Other	\$0	12372
Program Income	\$0	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? N
TOTAL	\$135,421	
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS REQUIRED.		

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