OMB Number: 4040-0004 Expiration Date: 11/30/2025

Application for Federal Assistance SF-424							
* 1. Type of Submission:	* 2. Type of Application:	* If Revision, select appropriate letter(s):					
Preapplication New							
Application	Continuation *	* Other (Specify):					
Changed/Corrected Application	Revision						
* 3. Date Received:	4. Applicant Identifier:						
5a. Federal Entity Identifier:		5b. Federal Award Identifier:					
G26RM0004A							
State Use Only:							
6. Date Received by State:	7. State Application I	Identifier:					
8. APPLICANT INFORMATION:							
* a. Legal Name: Douglas County	Government						
* b. Employer/Taxpayer Identification Nu	mber (EIN/TIN):	* c. UEI:					
84-6000761		LXE5XEA44AH6					
d. Address:							
* Street1: 100 Third Str	reet						
Street2:							
* City: Castle Rock							
County/Parish:							
* State: CO: Colorado							
Province:							
* Country: USA: UNITED S	STATES						
* Zip / Postal Code: 80104-2425							
e. Organizational Unit:							
Department Name:		Division Name:					
Douglas County Government		Rocky Mountain HIDTA					
f. Name and contact information of p	erson to be contacted on ma	atters involving this application:					
Prefix: Mr.	* First Name	: Keith					
Middle Name:							
* Last Name: Weis							
Suffix:							
Title: Executive Director							
Organizational Affiliation:							
ONDCP							
* Telephone Number: 303-671-2180) ext 249	Fax Number: 303-671-2191					
* Email: kweis@rmhidta.org							

**1. Subscription Identification Number: ### Indicator Scription Identification Number: ### Indicator Scription Identification Number: #### Indicator Identification Number: #### Indicator Identification Number: #### Indicator Identification Number: ##### Indicator Identification Number: ##### Indicator Identification Number: ###################################	Application for Federal Assistance SF-424
Type of Applicant 2: Select Applicant Type: Type of Applicant 3: Select Applicant Type: **Other (specify): ****Un. Name of Foderal Agency: ONDED** ***10. Name of Foderal Agency: ONDED** ***11. Catalog of Foderal Domestic Assistance Number: 55:001 CFDA Title: ###################################	* 9. Type of Applicant 1: Select Applicant Type:
Type of Applicant 3: Select Applicant Type: **Other (specify): **Other (specify): **Other (specify): **Discretification of Federal Agency: **Discretification of Federal Domestic Assistance Number: 95.001 **CFDA Tale: ##IDITA **12: Funding Opportunity Number: ##IDITA = 0.268M0004A **Title: **Rocky Mountain ##IDITA **13. Competition Identification Number:	B: County Government
* Other (spacify): **10. Name of Foderal Agency: DNDCP **11. Catalog of Foderal Domestic Assistance Number: DS: 0.001 CFDA Trille: HIDTA **12. Funding Opportunity Number: HIDTA-02-69:M0004A **Title: Rocky Mountain HIDTA **18. Rocky Mountain HIDTA **19. Competition Identification Number: Intle: Add Attachment Delete Attachment View Attachment	Type of Applicant 2: Select Applicant Type:
* Other (specify): **10. Name of Foderal Agency: ONDCP **11. Catalog of Foderal Domestic Assistance Number: DEDA Trille: ##################################	
*10. Name of Federal Agency: ONDEP 11. Catalog of Federal Domestic Assistance Number: 95.001 CFDA Title: HIDTA *12. Funding Opportunity Number: HIDTA-G265N0004A *Title: Rocky Mountain HIDTA 13. Competition Identification Number: Title: 14. Areas Affected by Project (Cities, Counties, States, etc.): Add Attachment Delete Attachment View Attachment *15. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	Type of Applicant 3: Select Applicant Type:
*10. Name of Federal Agency: ONDEP 11. Catalog of Federal Domestic Assistance Number: 95.001 CFDA Title: HIDTA *12. Funding Opportunity Number: HIDTA-G265N0004A *Title: Rocky Mountain HIDTA 13. Competition Identification Number: Title: 14. Areas Affected by Project (Cities, Counties, States, etc.): Add Attachment Delete Attachment View Attachment *15. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	
### Catalog of Federal Domestic Assistance Number: 95.001	* Other (specify):
### Catalog of Federal Domestic Assistance Number: 95.001	
11. Catalog of Federal Domestic Assistance Number: 55.001	* 10. Name of Federal Agency:
95.001 CFDA Title: HIDTA *12. Funding Opportunity Number: HIDTA-G26RM0004A *Title: Rocky Mountain HIDTA 13. Competition Identification Number: Title: Title: Add Attachment Delete Attachment View Attachment *16. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	ONDCP
* 12. Funding Opportunity Number: ### 12. Funding Opportunity Number: ###################################	11. Catalog of Federal Domestic Assistance Number:
* 12. Funding Opportunity Number: HIDTA - G26RM0004A * Title: Rocky Mountain HIDTA	95.001
*12. Funding Opportunity Number: HIDTA-G26RM0004A *Title: Rocky Mountain HIDTA 13. Competition Identification Number: Title: 14. Areas Affected by Project (Cities, Counties, States, etc.): Add Attachment *15. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	CFDA Title:
#IDTA-G2 6RM0004A *Title: Rocky Mountain HIDTA 13. Competition Identification Number: Title: 14. Areas Affected by Project (Cities, Counties, States, etc.): Add Attachment Delete Attachment View Attachment *15. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	HIDTA
*Title: Rocky Mountain HIDTA 13. Competition Identification Number: Title: Title: Add Attachment *15. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	* 12. Funding Opportunity Number:
13. Competition Identification Number: Title: 14. Areas Affected by Project (Cities, Counties, States, etc.): Add Attachment Delete Attachment View Attachment * 15. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	HIDTA-G26RM0004A
13. Competition Identification Number: Title: 14. Areas Affected by Project (Cities, Counties, States, etc.): Add Attachment Delete Attachment View Attachment * 15. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	* Title:
Title: 14. Areas Affected by Project (Cities, Counties, States, etc.): Add Attachment Delete Attachment View Attachment * 15. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	Rocky Mountain HIDTA
Title: 14. Areas Affected by Project (Cities, Counties, States, etc.): Add Attachment Delete Attachment View Attachment * 15. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	
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14. Areas Affected by Project (Cities, Counties, States, etc.): Add Attachment Delete Attachment * 15. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	13. Competition Identification Number:
14. Areas Affected by Project (Cities, Counties, States, etc.): Add Attachment Delete Attachment * 15. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	
* 15. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	Title:
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* 15. Descriptive Title of Applicant's Project: High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	14. Areas Affected by Project (Cities, Counties, States, etc.):
High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	Add Attachment Delete Attachment View Attachment
High Intensity Drug Trafficking Area Attach supporting documents as specified in agency instructions.	
Attach supporting documents as specified in agency instructions.	
	High Intensity Drug Trafficking Area
Add Attachments Delete Attachments View Attachments	Attach supporting documents as specified in agency instructions.
	Add Attachments Delete Attachments View Attachments

Application for Federal Assistance SF-424							
16. Congressional Districts Of:							
* a. Applicant CO-4 * b. Program/Project CO-All							
Attach an additional list of Program/Project Congressional Districts if needed.							
Add Attachment Delete Attachment View Attachment							
17. Proposed Project:							
* a. Start Date: 01/01/2026							
18. Estimated Funding (\$):							
* a. Federal 2,576,391.00							
* b. Applicant							
* c. State							
* d. Local							
* e. Other							
* f. Program Income							
*g. TOTAL 2,576,391.00							
* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?							
a. This application was made available to the State under the Executive Order 12372 Process for review on							
b. Program is subject to E.O. 12372 but has not been selected by the State for review.							
∑ c. Program is not covered by E.O. 12372.							
* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)							
☐ Yes ☐ No							
If "Yes", provide explanation and attach							
Add Attachment Delete Attachment View Attachment							
21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001) ** I AGREE ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.							
Authorized Representative:							
Prefix: * First Name: Abe							
Middle Name:							
* Last Name: Laydon							
Suffix:							
* Title: Chair							
* Telephone Number: 303-660-7401 Fax Number:							
* Email: bocc@douglas.co.us							
* Signature of Authorized Representative:							

OMB Number: 4040-0006

SECTION A - BUDGET SUMMARY

	Grant Program Function or	Catalog of Federal Domestic Assistance	Estimated Unobl	ligated Funds			Ne			
	Activity	Number	Federal	Non-Federal		Federal		Non-Federal		Total
	(a)	(b)	(c)	(d)		(e)		(f)		(g)
1.	Rocky Mountain HIDTA	95.001	\$	\$	\$	2,576,391.00	\$		\$	2,576,391.00
2.										
-										
3.										
4.										
\vdash						1				
5.	Totals		\$	\$	\$ [2,576,391.00	\$		\$	2,576,391.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories		GRANT F	PROGRAM, FUNCTION OR	ACTIVITY	Total
o. Object Glass Gategories	(1)	(2)	(3)	(4)	(5)
	Rocky Mountain HID	·A			
a. Personnel	\$ 1,003,541.0	\$	\$	\$	\$ 1,003,541.00
b. Fringe Benefits	436,508.0	00			436,508.00
c. Travel	172,500.0	00			172,500.00
d. Equipment					
e. Supplies	17,000.0	00			17,000.00
f. Contractual	921,942.0	00			921,942.00
g. Construction					
h. Other	24,900.0	00			24,900.00
i. Total Direct Charges (sum of 6a-6h)	2,576,391.0	00			\$ 2,576,391.00
j. Indirect Charges					\$
k. TOTALS (sum of 6i and 6j)	\$ 2,576,391.0	\$	\$	\$	\$ 2,576,391.00
	· · · · · · · · · · · · · · · · · · ·				
7 Program Income	\$	 \$	\$	\$	\$
7. Program Income	T			_*	

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	SECTION C - NON-FEDERAL RESOURCES										
	(a) Grant Program				(b) Applicant		(c) State		(d) Other Sources		(e)TOTALS
8.	Rocky Mountain HIDTA			\$		\$		\$		\$	
				ľ			L] *		*	
9.								1		Т г	
J.								1		L	
								+		+	
10.										L	
								_			
11.											
										<u> </u>	
12.	TOTAL (sum of lines 8-11)			\$		\$		\$		\$	
				D ·	FORECASTED CASH	NE					
			Total for 1st Year		1st Quarter	١,	2nd Quarter		3rd Quarter	╢┌	4th Quarter
13.	Federal	\$_	2,576,391.20	\$	644,097.80	\$	644,097.80	\$	644,097.80	\$_	644,097.80
14.	Non-Federal	\$									
15. ⁻	TOTAL (sum of lines 13 and 14)	\$	2,576,391.20	\$	644,097.80	\$	644,097.80	\$	644,097.80	\$	644,097.80
	SECTION E	- BUDGE	T ESTIMATES OF FE	DE	RAL FUNDS NEEDED	FO	R BALANCE OF THE	PF	ROJECT	1	
	(a) Grant Program						FUTURE FUNDING				
					(b)First		(c) Second		(d) Third		(e) Fourth
16.	Rocky Mountain HIDTA			\$		\$		\$] \$[
								'		' -	
17.										ĪГ	
]		<u>ال</u>	
18.										ÌГ	
							<u> </u>	1	<u>L</u>		
19.								1		ÌГ	
							1		/		
20. TOTAL (sum of lines 16 - 19)			\$		\$		\$		\$		
SECTION F - OTHER BUDGET INFORMATION											
21.	Direct Charges:				22. Indirect (
23.	Remarks:										

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352

OMB Number: 4040-0013

1. * Type of Federal Action:	2. * Status of Federal Action:	3. * Report Type:
a. contract	a. bid/offer/application	a. initial filing
b. grant	b. initial award	b. material change
c. cooperative agreement	c. post-award	
d. loan		
e. loan guarantee		
f. loan insurance		
4. Name and Address of Reporting	Entity:	
Prime SubAwardee		
*Name Douglas County Government		
*Street 1 100 Third Street	Street 2	
* City Castle Rock	State CO: Colorado	Zip 80104-2425
Congressional District, if known:		
5. If Reporting Entity in No.4 is Subay	wardee, Enter Name and Address of Pr	ime:
6. * Federal Department/Agency:	7. * Federal Pro	gram Name/Description:
ONDCP	HIDTA	
	CFDA Number, if applic	able: 95.001
8. Federal Action Number, if known:	9. Award Amou	nt, if known:
	\$	
10. a. Name and Address of Lobbying	<u> </u>	
Prefix *First Name	Middle Name	
* Last Name	Suffix	
* Street 1	Street 2	
* City	State	Zip
b. Individual Performing Services (inclu	uding address if different from No. 10a)	
Prefix * First Name	Middle Name	
* Last Name	Suffix	
* Street 1	Street 2	
* City	State	Zip
Information requested through this form is outhorized.	by title 31 U.S.C. section 1352. This disclosure of lobbying a	ntivities is a material representation of feet, upon which
reliance was placed by the tier above when the transa	action was made or entered into. This disclosure is required pu	rsuant to 31 U.S.C. 1352. This information will be reported to
the Congress semi-annually and will be available for p \$10,000 and not more than \$100,000 for each such fa	oublic inspection. Any person who fails to file the required disc ailure.	iosure snail be subject to a civil penalty of not less than
* Signature:		
*Name: Prefix *First Nam	e [Middle N	lame
	Abe	
* Last Name Laydon	Su	ffix
Title: Chair	Telephone No.: 303-660-7401	Date:
Federal Use Only:		Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE:

Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
- Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
- Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- 5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
- 6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C.§§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation

- Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U. S.C. §§6101-6107), which prohibits discrimination on the basis of age: (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee- 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
- 7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
- 8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

- Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514: (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

- 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
- Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
- 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE Chair
APPLICANT ORGANIZATION	DATE SUBMITTED
Douglas County Government	

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

* APPLICANT'S ORGANIZATION Douglas County Government	
* PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE Prefix:	Middle Name: Suffix:
* SIGNATURE:	* DATE: