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In response to:
**FFY24 Substance Use Prevention, Treatment and Recovery Services (SUPTRS)
Request for Application**

Deadline for Submission: 05/31/2023

Our application is respectfully submitted as follows:

Company Name:	
Site Address where services will be administered:	
Mailing Address: (If different)	
Phone:	
Executive Director/CEO:	
Primary Contact for Proposal:	
Primary Contact Email Address:	

Applicants may check the funding focus areas for the proposed project:

- Prevention
- Treatment
- Recovery

As a duly authorized representative, I hereby certify that I have read, understand, and agree to all terms and conditions contained within this request for applications and that information included in our organization's application hereby submitted is accurate and complete.

Signed:

Date:

Print Name:

Title:
