## Virginia Opioid Abatement Authority

## **Timeline for Project Number #1**

Proposed by:	Appomattox County								
_	(Insert name of city or county)								
Project Name:	Lock Box Program								

		REQUIRED													Optional														
Insert Project Objectives and place an "X" in the appropriate month/year. Add additional objectives as needed.							<u>FY24</u>										<u>FY25</u>				<u>FY26</u>				<u>FY27</u>				
#	Objective	March	April	May	June	July	August	September	October	November	December	January	February	March	April	May	June	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
1	Reduce opioid availability and promote community safety		submit grant pu			urchase supples available to the		to the public	distribute	distribute	bute distribue distribute		ss need/supplies																
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