



---

**Virginia Opioid Abatement Authority**  
**(OAA) Grant**  
**Application Portal User Guide**

---

Version 1 September 13, 2024  
Version 2 October 29, 2024

**Version 3 January 10, 2025**  
**Version 4 February 10, 2025**

THIS PAGE INTENTIONALLY LEFT BLANK

# TABLE OF CONTENTS

<b>Purpose</b> .....	<b>6</b>
<b>Personas</b> .....	<b>6</b>
<b>Process Flow Diagram</b> .....	<b>8</b>
<b>Signing Up</b> .....	<b>9</b>
To Login or to Create a New Account:.....	9
<b>Dashboard – OAA Site Navigation</b> .....	<b>19</b>
Dashboard overview: .....	19
<b>Grants Management</b> .....	<b>23</b>
Types of Grants:.....	23
<b>Members</b> .....	<b>25</b>
Invite Members:.....	25
<b>Historical Downloads</b> .....	<b>29</b>
Historical Downloads:.....	29
<b>Estimated Funds Look-Up Tool</b> .....	<b>30</b>
Direct Distributions: .....	30
OAA Individual Distribution: .....	31
OAA Gold Standard Incentive: .....	31
<b>COOP Partner Dashboard</b> .....	<b>31</b>
COOP Partner Actions: .....	32
<b>Communications</b> .....	<b>33</b>
All Communications: .....	34
My Communications:.....	35
Bookmarked: .....	36
<b>Grant Types Available For Application</b> .....	<b>37</b>
<b>Applying for a Grant</b> .....	<b>38</b>
Grants Management: .....	38
<b>Direct Distribution Report Process</b> .....	<b>39</b>
Select a Direct Distribution Information:.....	39
Direct Distribution Information Instructions: .....	40
Direct Distribution Information Contact Information:.....	40
Distribution Informations: .....	42
Reference Information:.....	44
Submit: .....	45
<b>"Gold Standard" Incentive Application Process</b> .....	<b>47</b>
Select the "Gold Standard" Incentive: .....	48
"Gold Standard" Incentive Instructions:.....	49

---

"Gold Standard" Incentive Contact Information:.....	49
"Gold Standard" Incentive Agreements:.....	52
"Gold Standard" Incentive Reference Information:.....	58
"Gold Standard" Incentive Signature:.....	59
<b>Individual Grant Application Process .....</b>	<b>68</b>
Select an Individual Grant: .....	68
Instructions:.....	70
Contact Information:.....	70
Distribution Informations: .....	72
Gold Standard: .....	73
Project Proposal:.....	78
Budget - Personnel Expenditures: .....	80
Budget - Operating & Capital Expenditures: .....	81
Budget Overview:.....	82
Performance Measurement:.....	83
Objectives: .....	85
Reference Information:.....	86
Signature:.....	89
<b>Cooperative Grant Application Process .....</b>	<b>100</b>
Select a Cooperative Partnership Grant: .....	100
Instructions:.....	101
Fiscal Agent: .....	101
Partner Contact Informations: .....	103
Project Proposal:.....	107
Allow newly added Partner Organizations to a COOP to be removed before final submit: .....	109
Budget - Personnel Expenditures: .....	111
Budget - Operating & Capital Expenditures: .....	112
Budget Overview:.....	113
Agreements:.....	116
Performance Measurement:.....	123
Objectives: .....	125
Reference Information:.....	126
Signature:.....	129
<b>State Agency Grant Application Process .....</b>	<b>133</b>
Select a State Agency Proposal:.....	133
Instructions:.....	135
Agency Information: .....	135
Project Informations: .....	137
Budget - Personnel Expenditures: .....	139
Budget - Operating & Capital Expenditures: .....	140

---

Budget Overview: .....	141
Performance Measurement:.....	142
Objectives: .....	143
Reference Information:.....	145
Prepare for E-Signature: .....	149
State Agency Send for E-Sign: .....	151
<b>Award Package, Appeal, Annual Reporting, and Contingencies .....</b>	<b>154</b>
Award Package: .....	154
Appeals: .....	159
Annual Reporting: .....	161
Contingencies: .....	169
CarryForward Reporting:.....	170
E-Signature for Carryforward / TrueUp: .....	178
Staff Requested Updates to Carryforward / TrueUp: .....	187
Updates to System Created PDF Documents: .....	188
<b>Application Statuses .....</b>	<b>189</b>

## PURPOSE

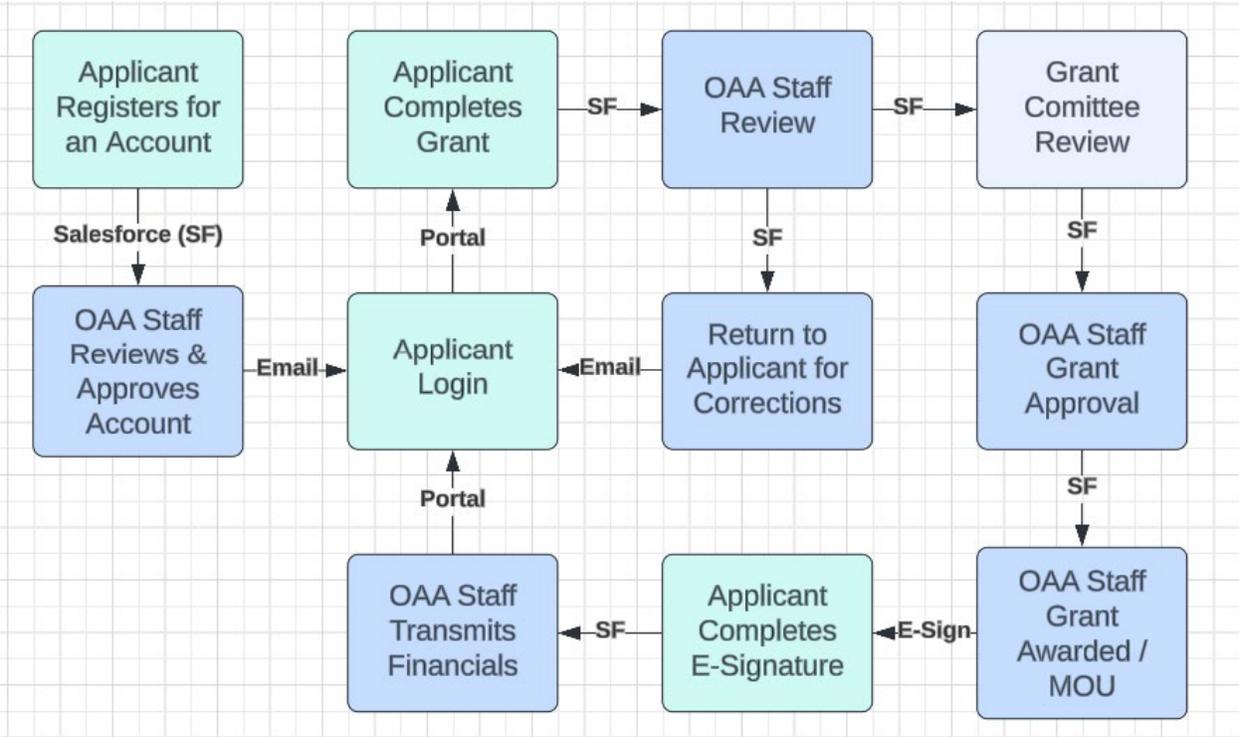
The OAA portal allows users to register and apply for a grant for their City, County, Cooperative or State Agency to receive funds allocated to the Abatement of Opioid Abuse in Virginia. The **Grant Application – User Guide** explains the comprehensive end-to-end procedure to create a Grant Application.

## PERSONAS

Persona	Responsibilities
<p><b>Individual Distribution</b> (a single City or County) Grant Applicant</p>	<ul style="list-style-type: none"> <li>● One City or County applying for an Individual Grant. The applicant is responsible for registering an user account and completing their profile. Then the applicant can start applying for a new grant, amending an existing grant, and/or renewing their approved grant application. If any updates are requested by OAA then the applicant must respond using this Portal in order to complete their application process. Also, an Annual Report is also required at the end of the Fiscal Period in order to complete that year’s grant lifecycle. At least one person with the legal authority to sign for the City or County must also complete an e-Signature before a grant application can be submitted.</li> <li>● All applicants responsible for completing the application must be designated as an Authorized Person.</li> </ul>
<p><b>Cooperative Partnership</b> (more than one Cities and/or Counties) Grant Applicant</p>	<ul style="list-style-type: none"> <li>● Only one of the Cities or Counties completing the competitive Cooperative Application must be designated as a <u>Fiscal Agent</u> (who completes the main application on behalf of their City or County and the other <u>Partner</u> Cities and/or Counties). The Fiscal Agent is responsible for registering an user account and completing their profile.</li> </ul>

	<p>Then the applicant can start applying for a new grant, amending an existing grant, and/or renewing their approved grant application. If any updates are requested by OAA then the applicant must respond using this Portal in order to complete their application process. Also, an Annual Report is also required at the end of the Fiscal Period in order to complete that year’s grant lifecycle. The Partner applicants must also provide their portions of the Cooperative application separately. At least one person with the legal authority to sign for each Fiscal Agent or Partner City or County must also complete an e-Signature before a grant application can be submitted.</p> <ul style="list-style-type: none"> <li>• All applicants responsible for completing the application must be designated as an Authorized Person.</li> </ul>
<p><b>State Agency</b> (Virginia Commonwealth – State - Government) Grant Applicant</p>	<ul style="list-style-type: none"> <li>• The person applying for a competitive State Grant is responsible for registering an user account and completing their profile. Then the applicant can start applying for a new grant, amending an existing grant, and/or renewing their approved grant application. If any updates are requested by OAA then the applicant must respond using this Portal in order to complete their application process. Also, an Annual Report is also required at the end of the Fiscal Period in order to complete that year’s grant lifecycle. At least one person with the legal authority to sign for the State Agency must also complete an e-Signature before a grant application can be submitted.</li> <li>• The applicant responsible for completing the State Agency must be designated as an Authorized Person.</li> </ul>

# PROCESS FLOW DIAGRAM

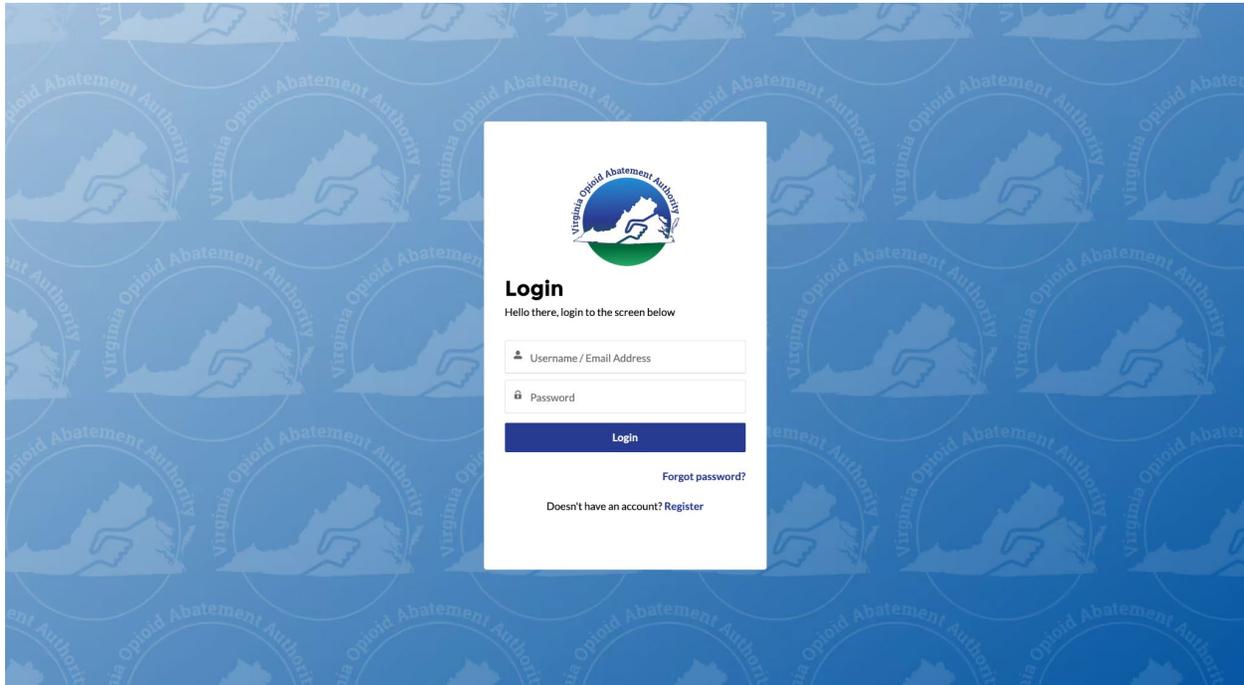


Your submitted application will be reviewed by OAA staff and possibly returned to you for revisions to data entry or additional inputs such as uploaded files. The Grant Committee will review your application and make an award based on their assessment. If your application is awarded you will receive an email and payment will be processed as appropriate based on the award amount(s) specified.

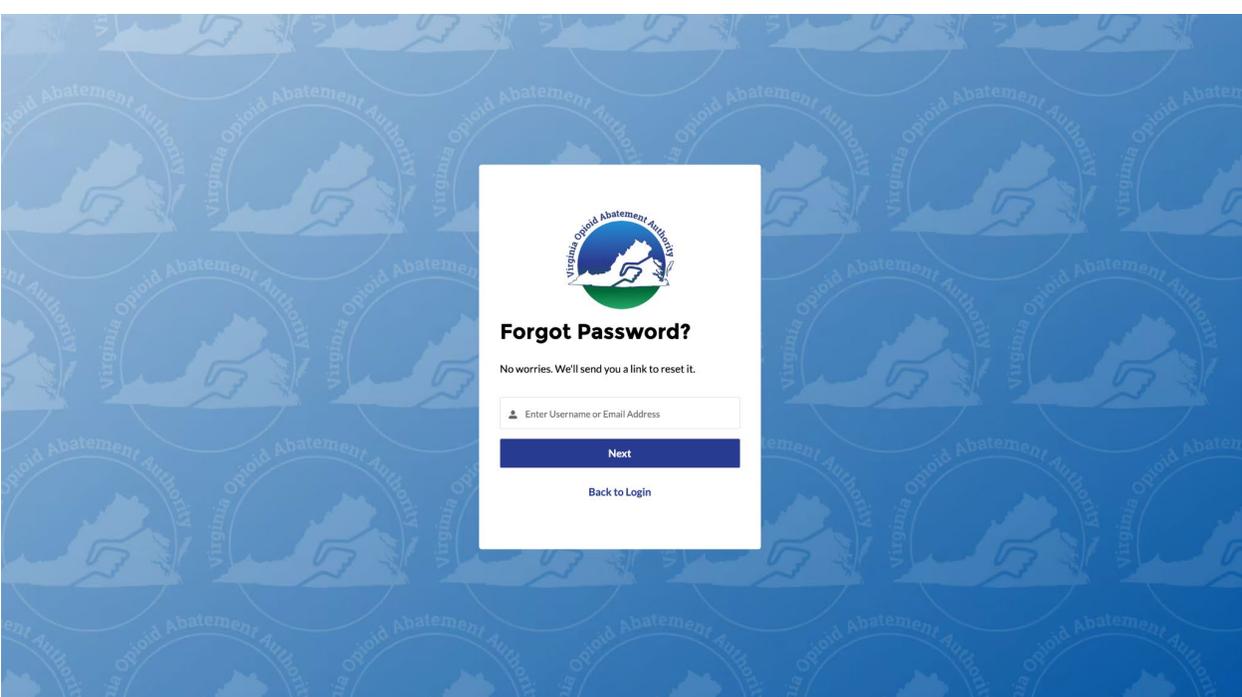
## SIGNING UP

### TO LOGIN OR TO CREATE A NEW ACCOUNT:

1. Access the **Virginia OAA Grants Portal** at <https://www.voagrants.us>
  - a. Please reference this User Guide and FAQ (Frequently Asked Questions) at **URL**.
2. The following screen will appear:



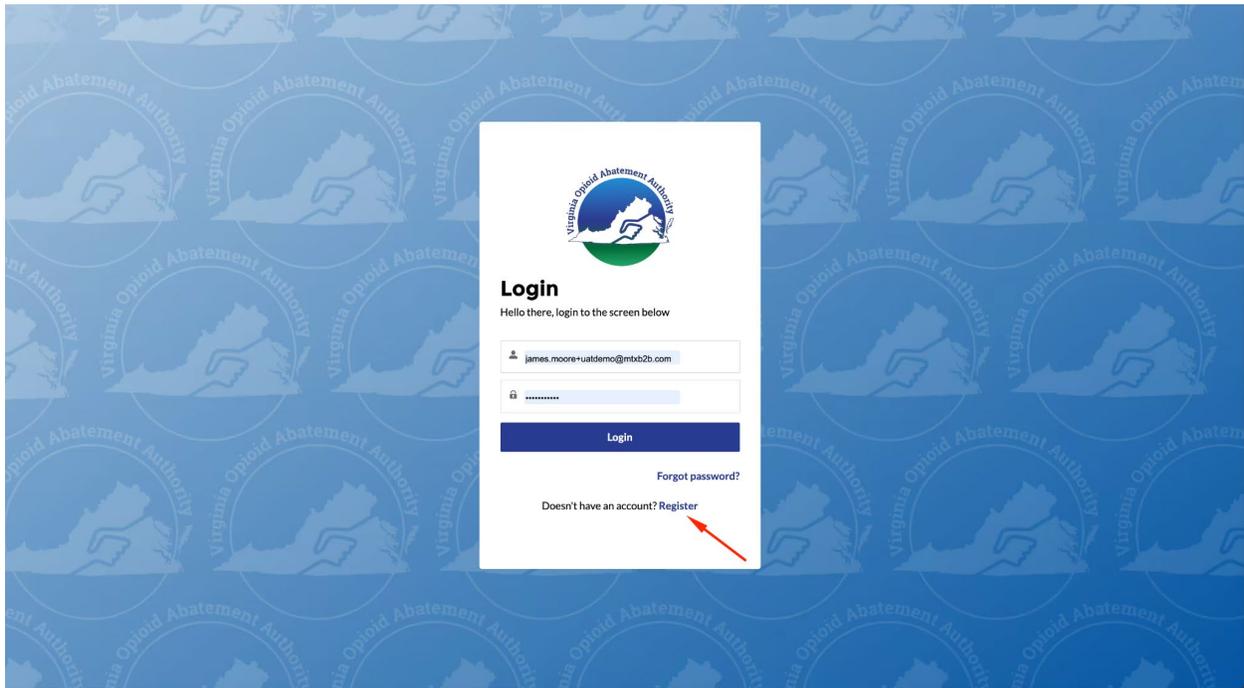
3. If you already have an account then please enter your **Username / Email Address** and **Password** in the associated fields and click the **Login** button.
4. If you forgot your password, click the **Forgot password?** link on the **Forgot Password?** page.



- 5. After entering your email address and selecting the Next button the system will email you a password reset link and you will see this screen pictured below:



6. If you haven't registered then please select the blue [Register](#) link at the bottom of page, it appears after this text: Doesn't have an account?



7. Fill out the required fields and upload the required document on the Register page.
  - a. This process will require you to download a letter template that must be filled out authorizing you to apply for a grant on behalf of the city, county, or state agency that you select as a part of the registration.
  - b. The uploaded letter must be on the letterhead of the city, county, or state agency.



# Register

Hello there, fill details to register.

\* First Name

Middle Name

\* Last Name

Suffix

\* Email

\* Phone

\* Title

\* Organization Type

\* City/County/State Agency Name

Additional cities/counties can be selected once registration has been completed.

\* Upload Signed Letterhead

Or drop files

If primary contact for city/county, please include signed letterhead stating so

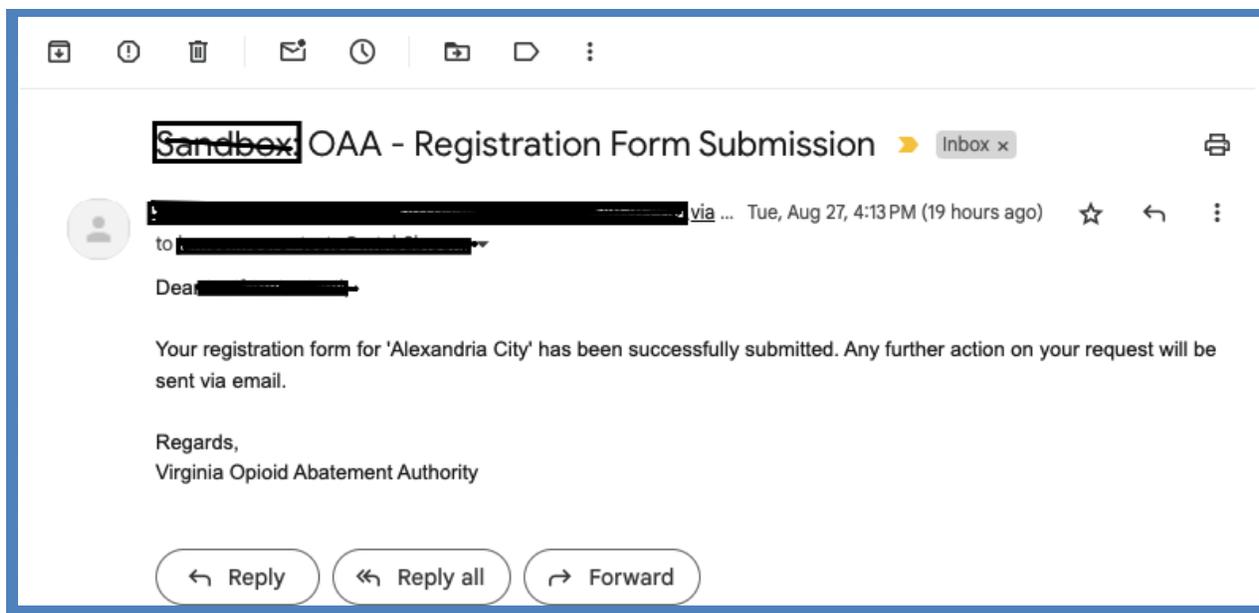
[Download Sample letter for Primary Contact](#)

Already have an account? [Login](#)

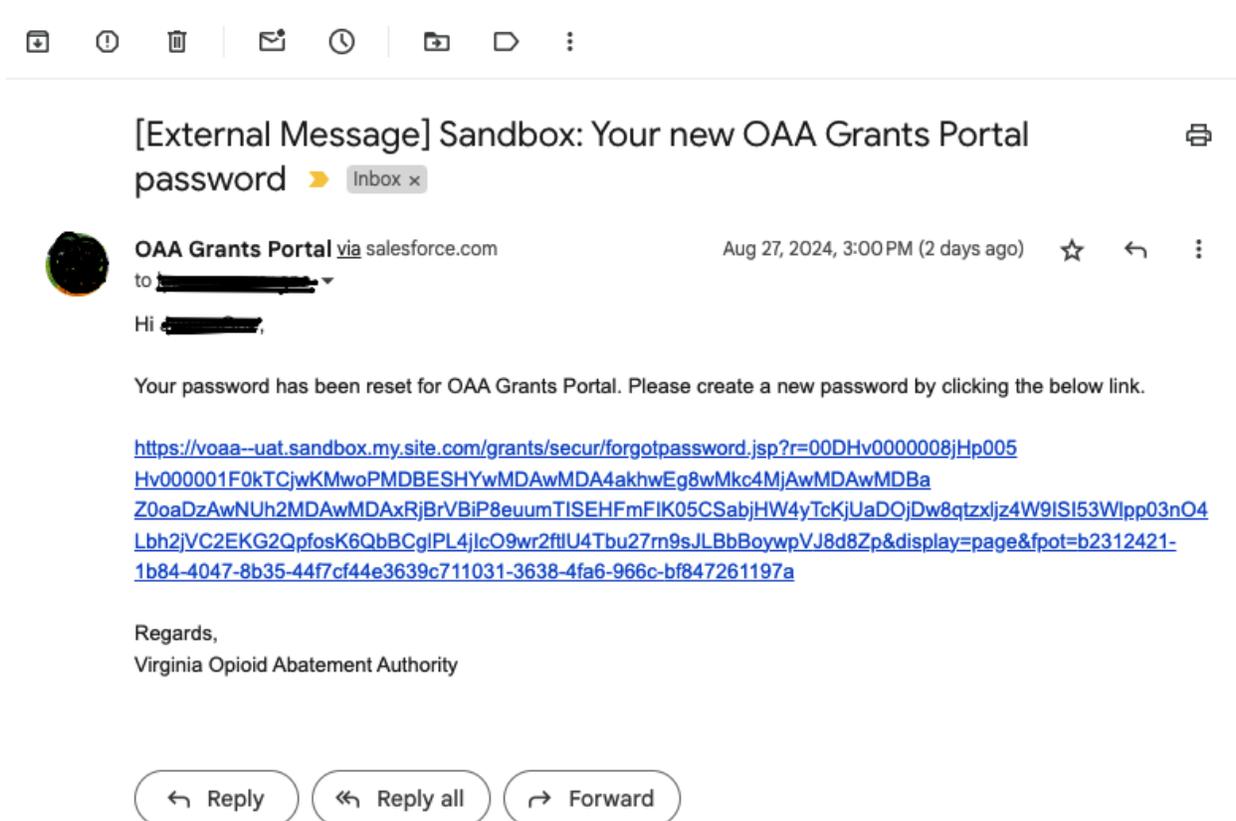
8. After you submit the Registration, it will be forwarded to the OAA for review and approval. Your authorization letter will be reviewed by the OAA and your registration will be either Approved or Declined. This could take one or more business days.



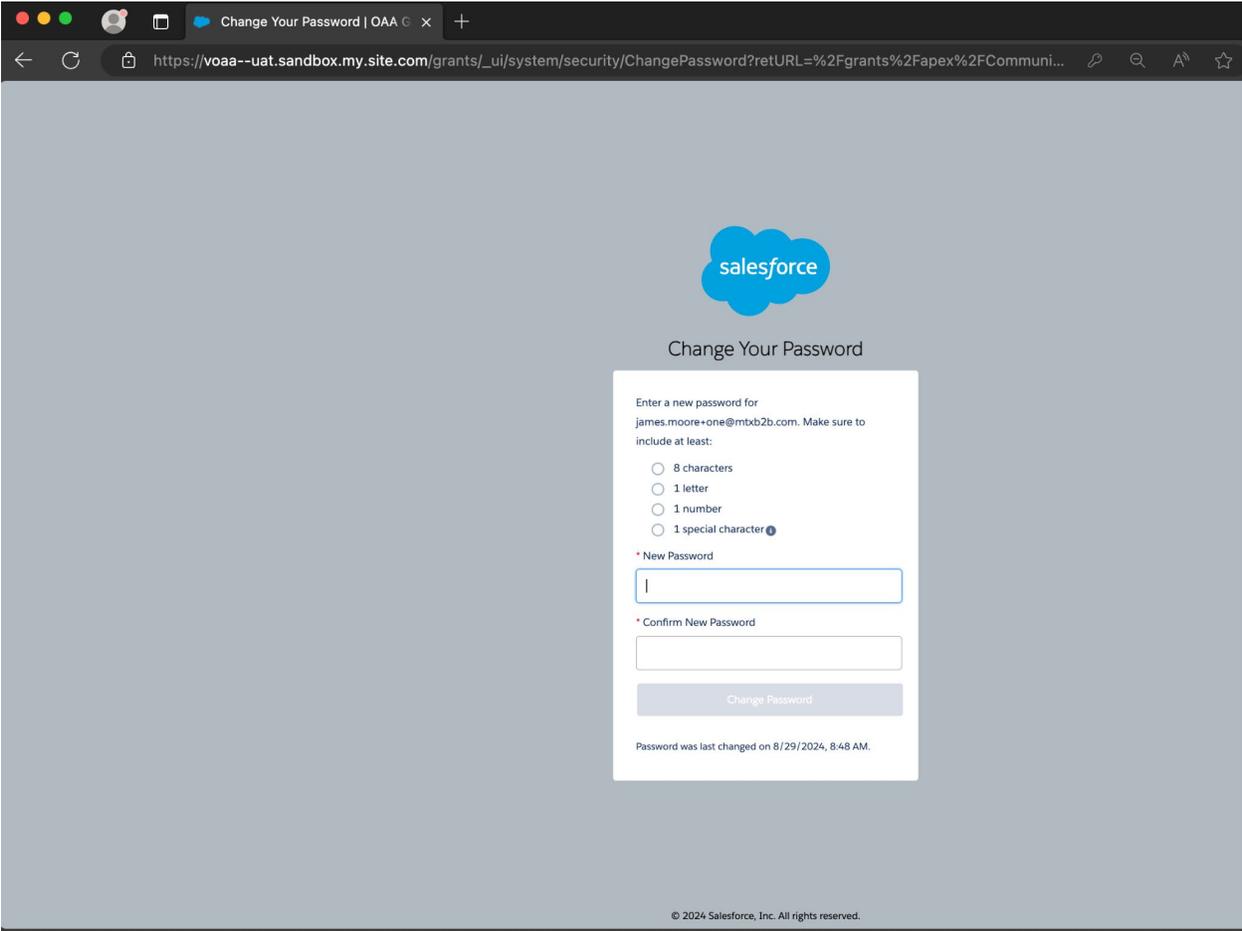
9. If your registration is Approved you will receive a confirmation email for your OAA Registration Form Submission.



10. And you will receive a second email with a password reset link so you can choose your own password.



11. This is the Change Your Password (password reset page):



12. Your new password must be 8 characters in length, with 1 letter, 1 number and 1 special character.



## Change Your Password

Enter a new password for james.moore+one@mtxb2b.com. Make sure to include at least:

- ✓ 8 characters
- ✓ 1 letter
- ✓ 1 number
- ✓ 1 special character ⓘ

\* New Password

 Good

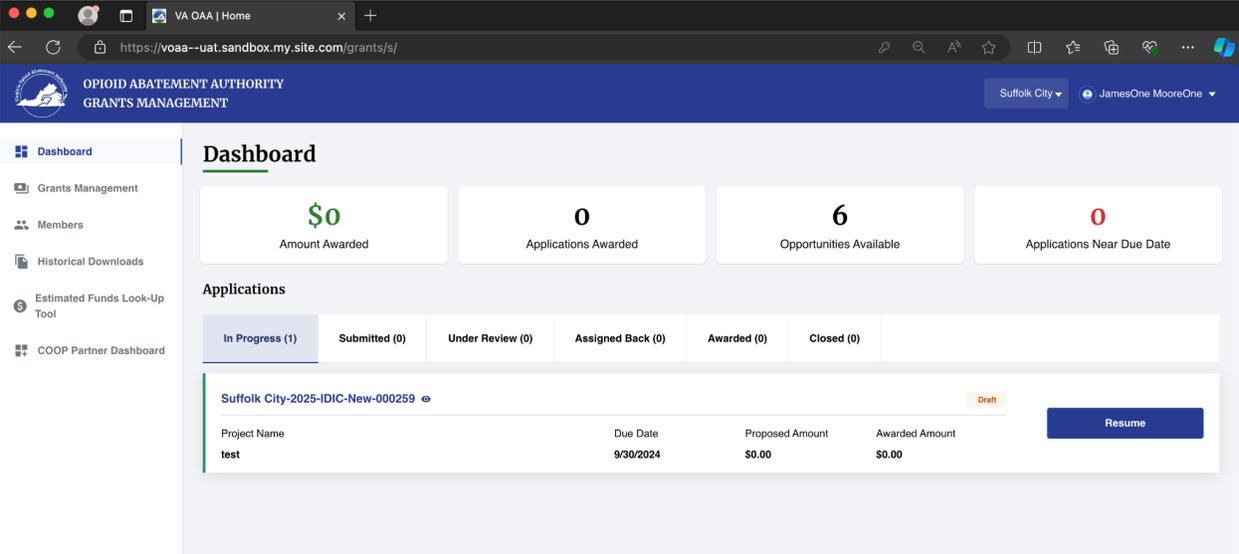
\* Confirm New Password

 Match

Change Password

Password was last changed on 8/29/2024, 8:48 AM.

13. The Dashboard page displays From this page you can choose different options using the navigation provided. See next section "Navigation".



## DASHBOARD - OAA SITE NAVIGATION

### DASHBOARD OVERVIEW:

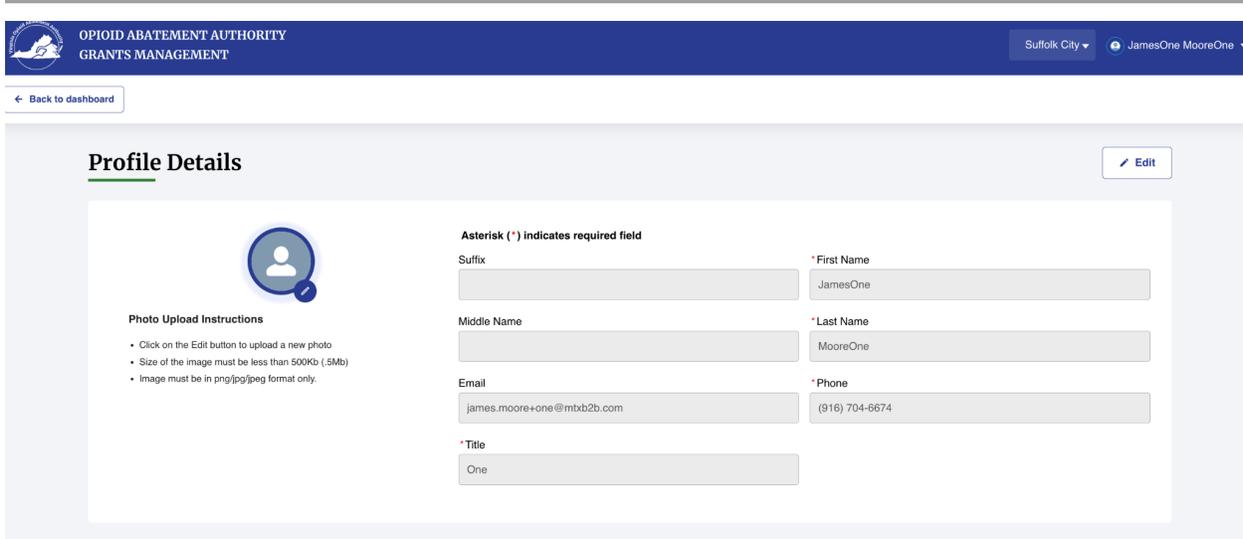
In the upper left hand corner is the OAA logo, a Home button which will take you back to the Dashboard.

- a. NOTE: Be careful when using this button there will be no option to Save your progress if you are working on an application.

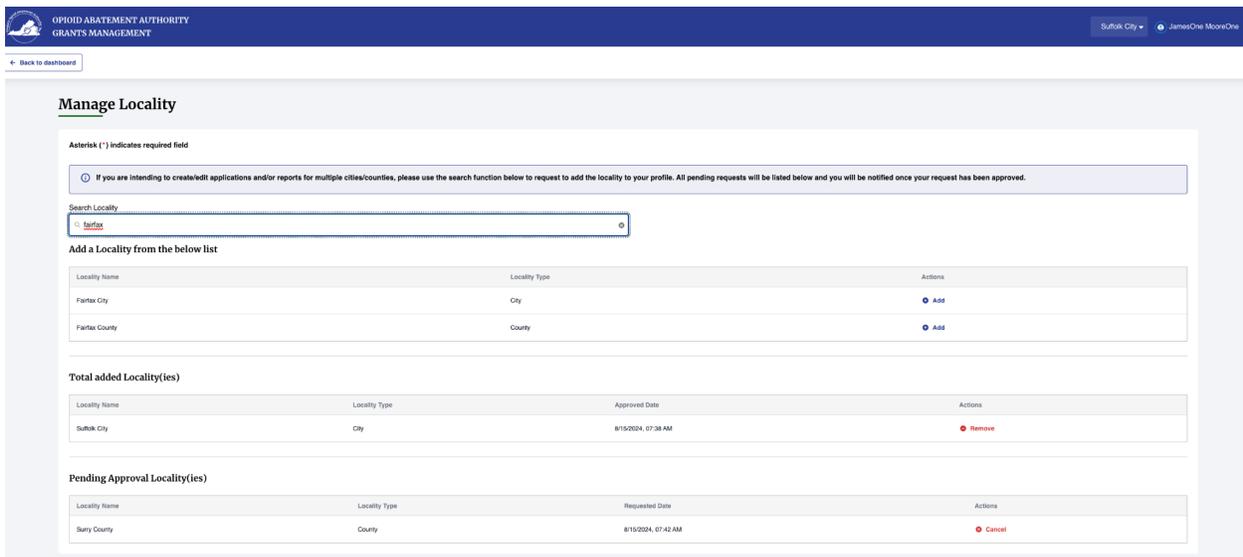
The screenshot shows the OAA Grants Management Dashboard. The top navigation bar includes the OAA logo, a 'Home' button, a 'Switch Locality' button, and two dropdown menus for 'Suffolk City' and 'JamesOne MooreOne'. The main dashboard area features four summary cards: 'Amount Awarded' (\$0), 'Applications Awarded' (0), 'Opportunities Available' (6), and 'Applications Near Due Date' (0). Below these are 'Applications' filters for 'In Progress (1)', 'Submitted (0)', 'Under Review (0)', 'Assigned Back (0)', 'Awarded (0)', and 'Closed (0)'. A table below shows a draft application for 'Suffolk City-2025-IDIC-New-000259' with a 'Resume' button. A 'Navigation' sidebar is on the left, and a 'List of Grant Applications for selected Status filter' is at the bottom.

In the upper right hand corner there will be 2 drop down lists:

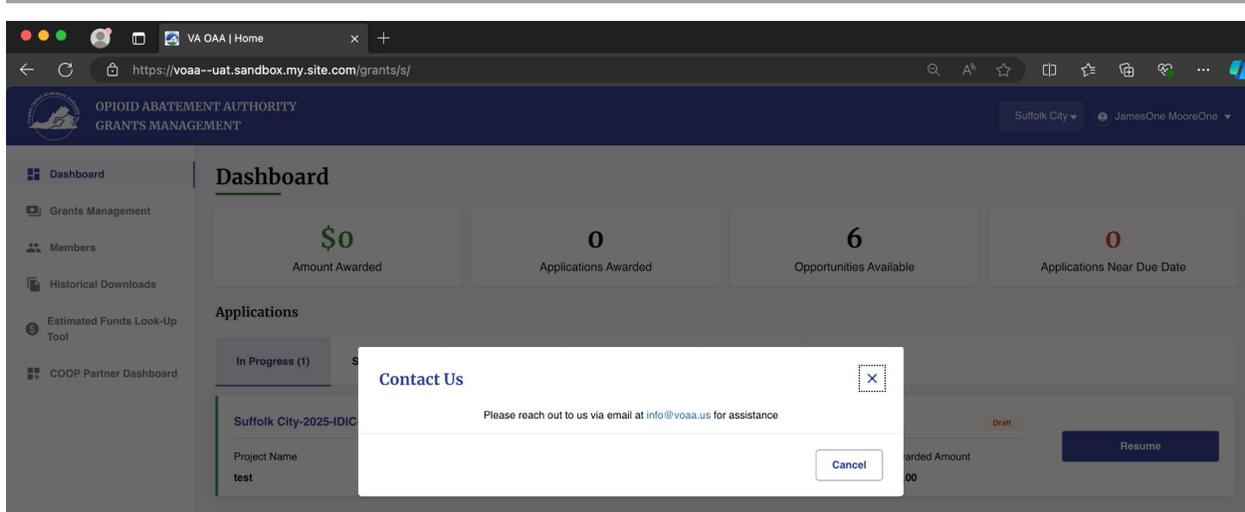
- b. The first will allow you to Switch Locality (City or County or to access a different State Agency) than currently listed on the drop down.
- c. The second will allow you to Access Profile this will display your First and Last Names then drop down menu with a down arrow:
  - Profile Menu options:
    1. My Profile - opens a page where you can edit some of your Profile Details such as contact information, you may also upload a small (500 kb max.) photo of yourself.



2. Manage Locality - allows you to add your user to other Localities (Cities or Counties or State Agencies, for instance) or remove your user from an already existing Locality.



3. Contact Us - displays a pop-up with the email address for OAA.



4. Log Out – ends your current session.

- a. NOTE: Unsaved information may not be retained if you log out.

Below the OAA Logo / Home button on the left hand side there is a series of buttons which provide Navigation:

- d. Dashboard – will return the user to this page.
- e. Grants Management – will take the user to a page where the user may select to apply for different types of grants.
- f. Members – will take the user to a page where they can view and invite members to a grants application.
- g. Historical Downloads – will take the user to a page where they can download PDF versions of various documents related to the Grant Application.
- h. Estimated Funds Look-Up Tool – will take the user to a page where they can see yearly grant amounts available for certain types of grant funds. It is recommended that users begin their grant application process by reviewing the eligibility per fund for their locality (City or County).
  - NOTE: State Agency grant applications are competitive and do not have predetermined fund availability.

In the center of the page is a list of Applications filtered by status so the applicant can determine which grant applications are at what stage of the process:

- i. In Progress – typically indicated that the grant application is in Draft status and has not been fully completed.

- j. Submitted - this indicates that the grant application has been completed and will be queued for review by OAA Staff.
- k. Under Review - this indicates that the grant application is being reviewed by OAA Staff. It could also have been resubmitted by the applicant with requested information or updates requested by OAA Staff and then provided by the applicant.
  - NOTE: This could represent one or more internal OAA Staff review steps.
- l. Assigned Back - the grant application has been returned to the applicant with requested information or updates requested by OAA Staff. Those items will then be provided by the applicant in order to advance the internal review process.
- m. Awarded - the grant application has been reviewed, approved and awarded. There may be additional steps for the purpose of making the award payments including signatures.
- n. Closed - the grant application has been closed, either running its complete course of action or not being accepted for committee review or not being approved.

# GRANTS MANAGEMENT

The screenshot displays the 'Grants Management' page for the Opioid Abatement Authority. It features a sidebar with navigation options: Dashboard, Grants Management (selected), Members, Historical Downloads, Estimated Funds Look-Up Tool, and COOP Partner Dashboard. The main content area shows two grant entries for 'OAA Individual City/County Distribution Grant'. The first entry is for Fiscal Year 2025 and is marked as 'Open'. It includes buttons for 'Start Annual Reporting' and 'Apply', and a table of application types with their respective open and due dates. The second entry is for Fiscal Year 2026, also marked as 'Open', with similar buttons and a table of application types.

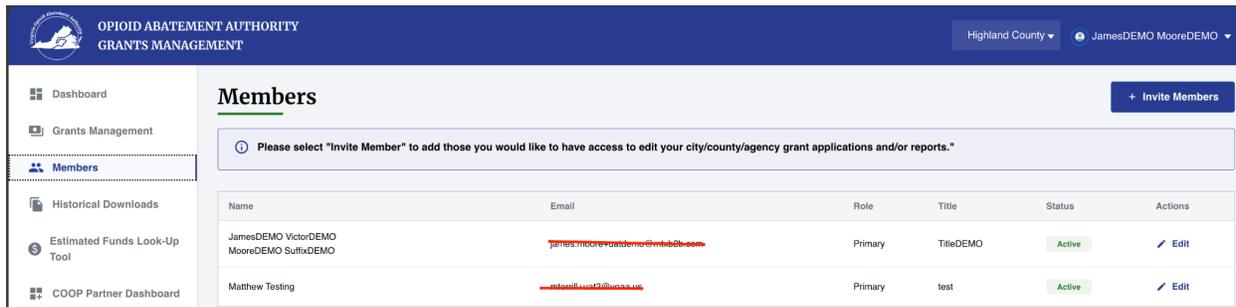
Fiscal Year	New Application	Renewal Application	Amend Application	Annual Reporting
2025	Open Date: 8/1/2024 Due Date: 9/30/2024	Open Date: 7/29/2024 Due Date: 10/16/2024	Open Date: 7/30/2024 Due Date: 10/3/2024	Open Date: 7/28/2024 Due Date: 11/1/2024
2026	Open Date: 8/18/2024 Due Date: 9/30/2024	Open Date: 8/18/2024 Due Date: 9/30/2024	Open Date: 8/13/2024 Due Date: 9/30/2024	Open Date: 8/13/2024 Due Date: 9/30/2024

## TYPES OF GRANTS:

1. Locate the type of grant you want and check the button to “Apply” or “Start Annual Reporting”. The Annual Reporting only applies to previously awarded grants.
  - a. You can also use the Search Grants feature in the upper left hand corner to locate a specific grant type.
2. The type of grant name is visible at the top of each grant.
3. If the type of grant you select is available for application, there will be green “Open” to the right of the name of the grant.
4. Immediately below the type of grant name the Fiscal Year for the grant is displayed as a 4-digit year.
5. To the right of the Fiscal Year are one or more of the gray boxes that describe the Open Date and Due Date for each type of grant Application (**New, Renewal, Amend, or Annual Reporting**). The dates indicate what the date ranges are allowed for that type of application to be submitted.

6. Beneath those boxes will be the Purpose of the grant type in a summary the View Details link will display more information and you can use the View Less link to hide the extra text.
7. There is also a link for the email address "[info@voaa.us](mailto:info@voaa.us)" to contact OAA.
8. Finally there is a "Download Terms & Conditions" link to view a PDF of the terms and conditions.

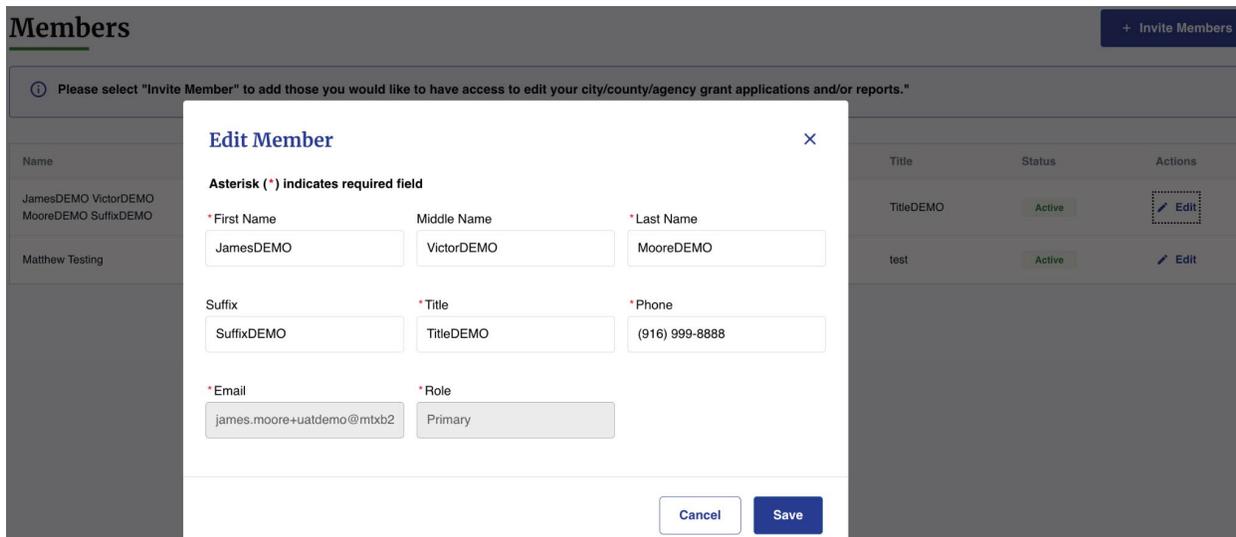
# MEMBERS



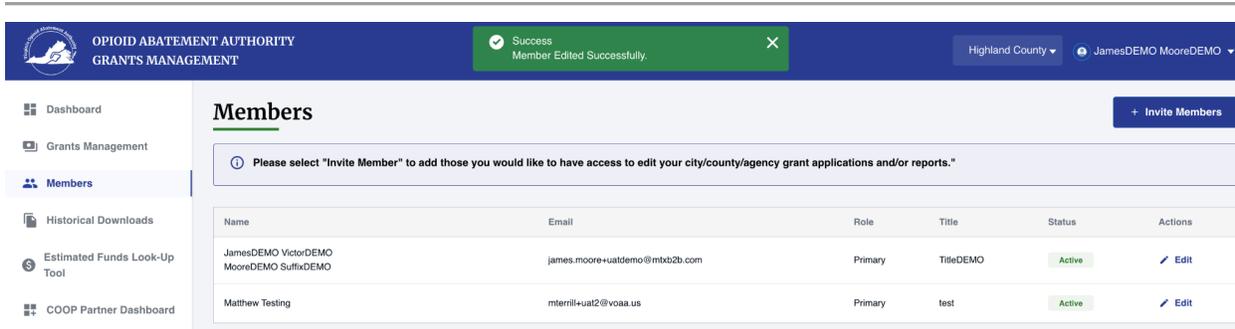
## INVITE MEMBERS:

You may either select an existing Member to “Edit” or you may choose to use the dark blue button in the upper right corner to “+ Invite Members”.

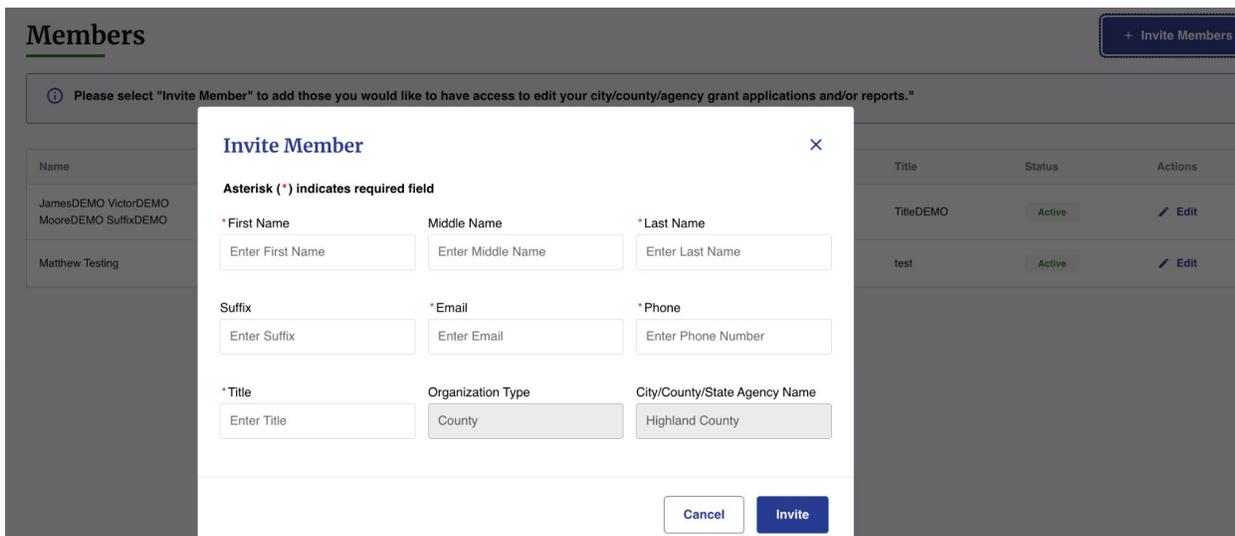
1. Edit existing member:
  - a. Select the “Edit” button.
    - i. The following pop-up will be displayed:



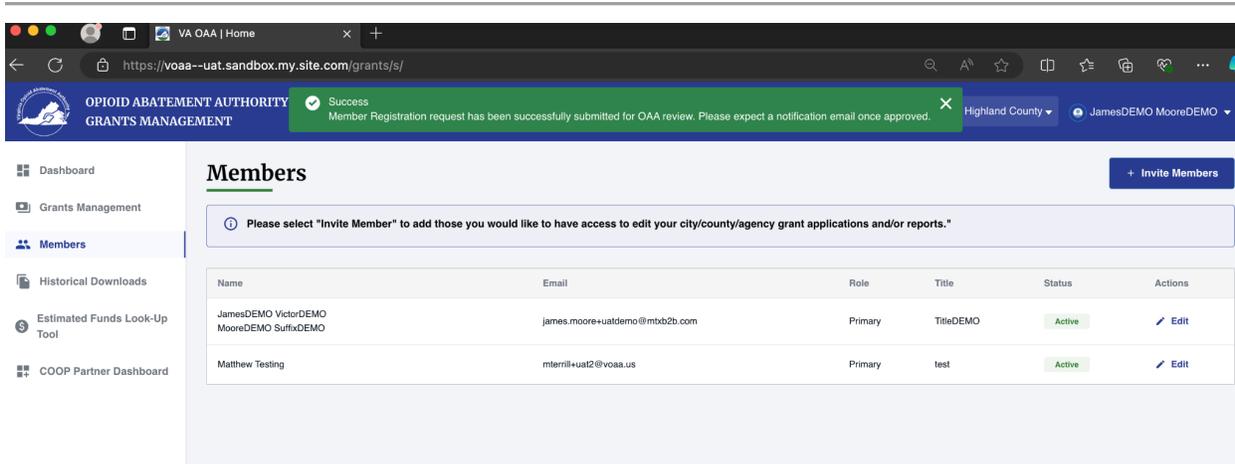
- ii. Make any changes to the editable fields and then select the “Save” button.
- iii. A “Success Member Edited Successfully.” message will appear in a green box as shown below:



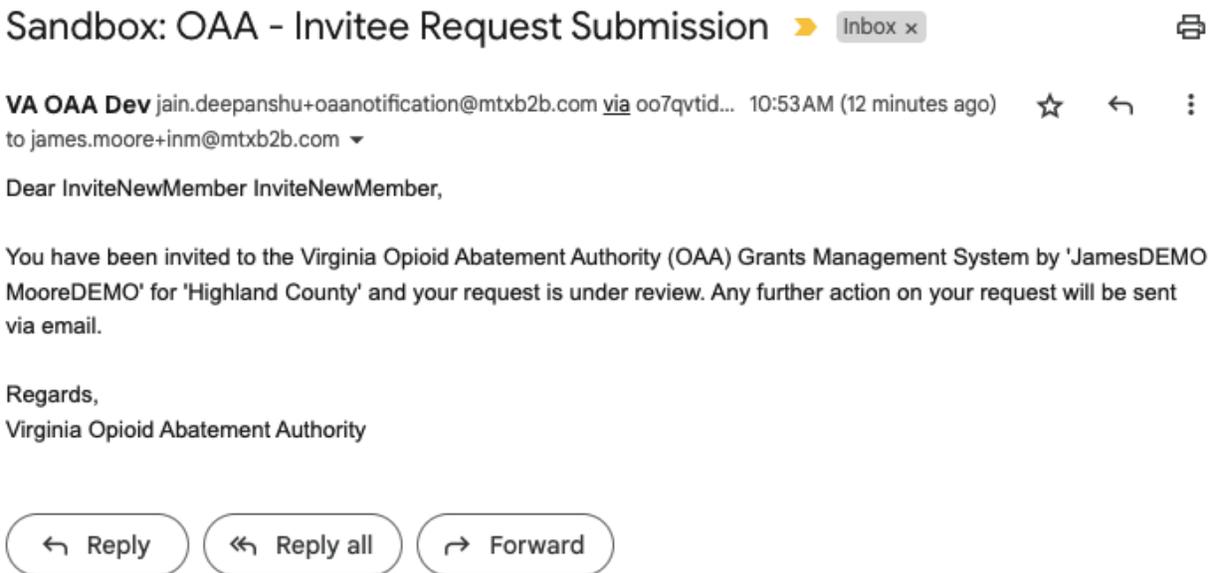
1. Add or invite a new member:
2. Select the “+ Invite Members” button.
  - a. The following pop-up will be displayed:



- b. Fill in any information to the editable fields and then select the “Invite” button.
  - c. A “Success Registration request has been successfully submitted for OAA Review. Please expect a notification email once approved. Edited Successfully.” message will appear in a green box as shown below:



d. An automated email message will be sent to the invited member.



e. OAA Internal Staff will review and approve (or reject) the member invite.

- i. An email notification will be sent once the request has been reviewed and approved. A second email message will be sent with the link to choose a password.

## Sandbox: OAA - Registration Request Approved ▶ Inbox x

**VA OAA Dev** jain.deepanshu+oaanotification@mtxb2b.com [via](#) 770lq6oy... 11:10 AM (0 minutes ago)     
to james.moore+inm@mtxb2b.com ▼

Dear InviteNewMember InviteNewMember,

Your registration request for 'Highland County' has been approved.

Another email will be sent with your login username and a password reset link.

Regards,  
Virginia Opioid Abatement Authority

 Reply  Reply all  Forward

## Sandbox: OAA - Account Information ▶ Inbox x

**OAA Grants Portal** [via](#) 9uhh5dru42xg.hv-8jhpmai.cs308.bnc.sandbox.s... 11:10 AM (14 minutes ago)     
to james.moore+inm@mtxb2b.com ▼

Dear InviteNewMember InviteNewMember,

Please find below the login username and click on password link to create a password.

Username: [james.moore+inm@mtxb2b.com](mailto:james.moore+inm@mtxb2b.com)

Password Link: [https://voaa--uat.sandbox.my.site.com/grants/login?c=mG1PKQAsbVBVEjG\\_NzpxWA3GvkEWNxKHcwCR1pUlj2TTC\\_02SP6kwNMKfFW921uexxegsktFQuQPA3ZKkUHNLCac8m9gJqXeaGTZiwFdYVhVOWAR2tkDdPEgbtWVWGkvW2vqR6N4tTw91uv390mxvzFTNcOvd63wHnpob8hLcl7.2xrQbWS6pl2mgNy0cfoDAPoBZVDa](https://voaa--uat.sandbox.my.site.com/grants/login?c=mG1PKQAsbVBVEjG_NzpxWA3GvkEWNxKHcwCR1pUlj2TTC_02SP6kwNMKfFW921uexxegsktFQuQPA3ZKkUHNLCac8m9gJqXeaGTZiwFdYVhVOWAR2tkDdPEgbtWVWGkvW2vqR6N4tTw91uv390mxvzFTNcOvd63wHnpob8hLcl7.2xrQbWS6pl2mgNy0cfoDAPoBZVDa)

Regards,  
Virginia Opioid Abatement Authority

 Reply  Reply all  Forward

## HISTORICAL DOWNLOADS

This page is where you can View/Download PDF versions of various documents related to the Grant Application. You need to be aware of the status for a given application because that might indicate that something is still in progress.

**OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT** Highland County JamesDEMO MooreDEMO

**Historical Downloads** Search with Application Name Filter Clear

Grant Type	Application Name	Project Name	Status	Fiscal Year	Document Type	Actions
Direct Distribution	Highland County-2025-DIRECT-New-000237		Submitted	2025	Application Intake	View/Download
Individual Distribution (IDIC)	Highland County-2025-IDIC-New-000504	test	Payment Initiated	2025	Gold Standard Agreement	View/Download
Individual Distribution (IDIC)	Highland County-2025-IDIC-New-000504	test	Payment Initiated	2025	Award Letter	View/Download
Individual Distribution (IDIC)	Highland County-2025-IDIC-New-000504	test	Payment Initiated	2025	Application Intake	View/Download

### HISTORICAL DOWNLOADS:

If there are too many Historical Downloads displayed you can use either the “Search with Application Name” control above the table of results or you can use the “Filter” control. This will allow you to select a single specific “Fiscal Year” and “Document Type”.

**Historical Downloads** Search with Application Name Filter Clear

Grant Type	Application Name	Project Name	Status	Fiscal Year	Document Type	Actions
Direct Distribution					Application Intake	View/Download
Individual Distribution (IDIC)					Gold Standard Agreement	View/Download
Individual Distribution (IDIC)					Award Letter	View/Download
Individual Distribution (IDIC)					Application Intake	View/Download

**Historical Document Filter** X

Fiscal Year  
Select an Option

Document Type  
Select an Option

Close Apply Filter

## ESTIMATED FUNDS LOOK-UP TOOL

This page is where you can see the amounts for different types of Distributions available per Fiscal Year. You can also use the “[Download Estimated Funds Lookup Tool](#)” link/button to download a copy as a .PDF file for reference as you complete a City or County allowable Distribution amounts for an Individual Grant Application, or Coop Grant Application. You may already have access to your Direct Distributions but you will need to apply for any OAA Individual Distributions. In order to access the OAA Gold Standard Incentive you must use the system to request approval and once you have an eligible grant application to receive Gold Standard Incentives. **Please note that all the Distribution Amounts are subject to availability and subject to change.** The Individual Distribution and Gold Standard Incentive must be approved by the Grants Committee before payments can be made to the Locality with the exception of the Direct Distribution. You request up to the Balance Available in the last column of each appropriate Distribution per Fiscal Year, be aware that those amounts will be adjusted as any Grants are applied for or awarded.

Fiscal Year (FY)	Direct Distributions				OAA Individual Distribution			OAA Gold Standard Incentive		
	Projected	Pledged/Used as OAA Match	Non - OAA Projects Awarded/Proposed Amount	Balance Available	Eligible to Receive	Awarded / Used as Match	Balance Available	Eligible to Receive	Awarded / Used as Match	Balance Available
2022	\$935.26	\$0.00	\$0.00	\$935.26	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2023	\$5,920.71	\$0.00	\$0.00	\$6,855.97	\$2,678.03	\$0.00	\$2,678.03	\$669.51	\$0.00	\$669.51
2024	\$7,301.75	\$0.00	\$0.00	\$14,157.72	\$3,099.96	\$0.00	\$5,777.99	\$774.99	\$0.00	\$1,444.50
2025	\$2,304.59	\$2,304.56	\$300.00	\$13,857.75	\$1,459.82	\$1,459.82	\$5,777.99	\$364.96	\$364.59	\$1,444.86
2026	\$3,009.00	\$0.00	\$0.00	\$16,866.75	\$1,612.66	\$0.00	\$7,390.65	\$403.17	\$0.00	\$1,848.03
2027	\$3,197.85	\$0.00	\$0.00	\$20,064.60	\$1,612.66	\$0.00	\$9,003.31	\$403.17	\$0.00	\$2,251.19
2028	\$2,436.32	\$0.00	\$0.00	\$22,500.92	\$1,263.63	\$0.00	\$10,266.94	\$315.91	\$0.00	\$2,567.10
2029	\$3,414.52	\$0.00	\$0.00	\$25,915.44	\$1,735.62	\$0.00	\$12,002.56	\$433.90	\$0.00	\$3,001.00
2030	\$3,430.06	\$0.00	\$0.00	\$29,345.50	\$1,721.04	\$0.00	\$13,723.60	\$430.26	\$0.00	\$3,431.26
2031	\$3,211.54	\$0.00	\$0.00	\$32,557.04	\$1,614.71	\$0.00	\$15,338.30	\$403.68	\$0.00	\$3,834.94
2032	\$2,980.33	\$0.00	\$0.00	\$35,537.37	\$1,398.57	\$0.00	\$16,736.87	\$349.64	\$0.00	\$4,184.58
2033	\$2,739.89	\$0.00	\$0.00	\$38,277.26	\$1,398.57	\$0.00	\$18,135.44	\$349.64	\$0.00	\$4,534.22

### DIRECT DISTRIBUTIONS:

The Direct Distribution funds are already allocated to your Locality (either a Virginia City or County). There is a way in the system to record how much you have received

---

in a given Fiscal Year and doing that will automatically update your remaining Direct Distribution amounts per Fiscal Year after processing is complete. **Please note that these amounts are subject to change and availability.** The Direct Distribution funds can be Pledged as an OAA Match or allocated to Non-OAA Projects if desired.

---

#### **OAA INDIVIDUAL DISTRIBUTION:**

The Individual Distribution funds listed are the amounts for each Fiscal Year, those amounts will change as awards are made or other adjustments are accounted for in the system. The Awarded /Used as a match column takes into account previous or current awards and amounts for your Locality (either a Virginia City or County) Individual Grant or linked to a Cooperative Grant as matching funds for Fiscal Agents / Partners in a Cooperative Grant Application. **Please note that these amounts are subject to change and availability.**

---

#### **OAA GOLD STANDARD INCENTIVE:**

These Gold Standard Incentive funds listed are the amounts for each Fiscal Year, those amounts will change as awards are made or other adjustments are accounted for in the system. The Awarded /Used as a match column takes into account previous or current awards and amounts for your Locality (either a Virginia City or County) Individual Grant or linked to a Cooperative Grant as matching funds for Fiscal Agents / Partners in a Cooperative Grant Application. **Please note that these amounts are subject to change and availability.**

## **COOP PARTNER DASHBOARD**

This page is specific to Partner Cities and Counties who are part of a Cooperative Grant Application. It lists the Cooperative Grant Applications where your selected City or County is a Partner, this is where you would go to Upload documentation as a file requested by OAA Internal Staff as a part of your Cooperative Grant. If you are a Partner in many Cooperative Grants, you may wish to use the Search with Application Name feature in the upper right hand corner. The table displaying the

results will only display matching application names if that feature is used, otherwise all Cooperative Grant Applications with your Locality as a Partner will be displayed.

The screenshot shows the 'COOP Partner Dashboard' interface. At the top left is the OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT logo. The top right shows 'Highland County' and 'JamesDEMO MooreDEMO'. A left sidebar contains navigation items: Dashboard, Grants Management, Members, Historical Downloads, Estimated Funds Look-Up Tool, and COOP Partner Dashboard. The main content area has a search bar 'Search with Application Name'. Below it is a notification: 'Partner City/County can upload supporting documents for renewing cooperative partnership application using Upload Documents button.' A table with columns 'Application Name', 'Project Name', 'Status', 'Proposed Amount', 'Awarded Amount', and 'Actions' is shown, but it is empty. A message 'No Cooperate Partner found.' is displayed in the center of the table area.

**COOP PARTNER ACTIONS:**

MOVE THIS PART

# COMMUNICATIONS

This section is dedicated to the Communications that have taken place between the applicants and the OAA internal staff.

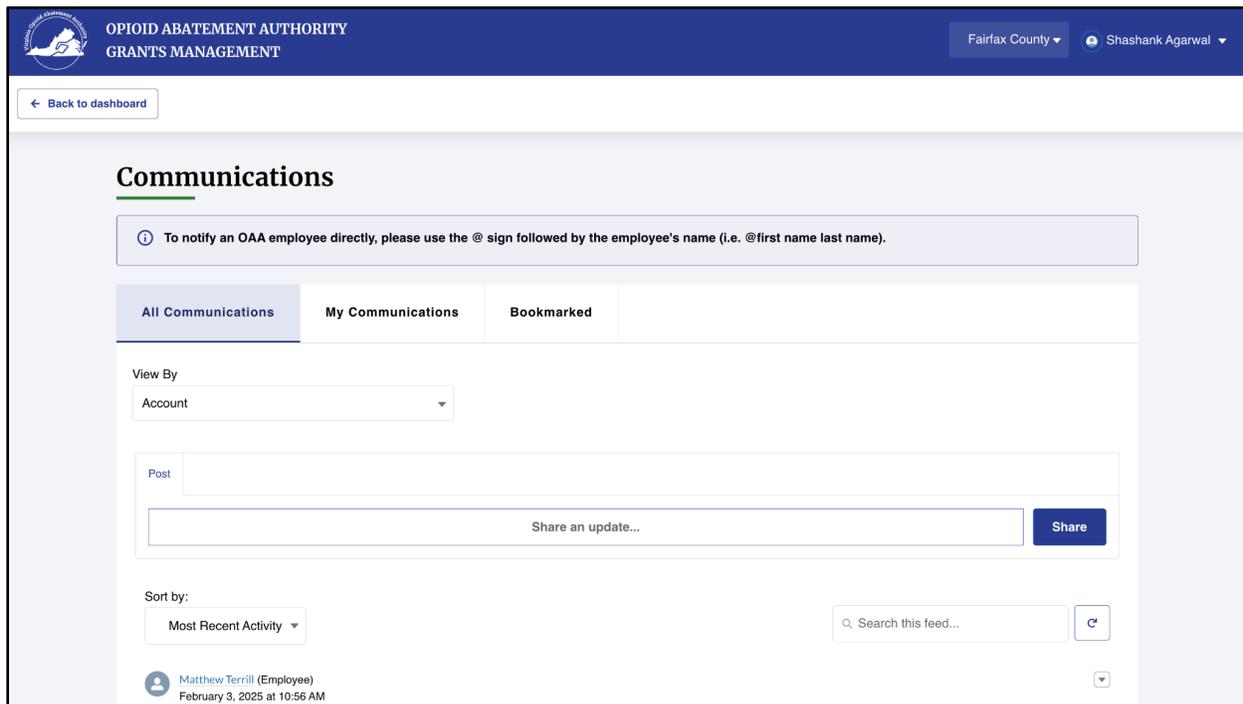
It can be accessed via the Communications tab from the left side navigation. Clicking on this left side navigation tab should take applicants to the new window screen where all the Communications can be seen.

The screenshot shows the Opioid Abatement Authority Grants Management interface. The top header includes the organization's name and the user's name, Shashank Agarwal, for Fairfax County. The left navigation menu lists various dashboard options, with 'Communications' currently selected. The main dashboard area features a 'Note' section with two orange warning boxes regarding reporting deadlines for Fiscal Year 2024. Below this are four summary cards: 'Amount Awarded' at \$526,999, 'Applications Awarded' at 9, 'Opportunities Available' at 4, and 'Applications Near Due Date' at 1. An 'Applications' section provides a status overview with 'In Progress (7)' highlighted. A specific communication entry for 'Fairfax County-2025-COOP-Annual Reporting-001211' is shown in a 'Draft' state, with a 'Resume' button and a table of project details.

Project Name	Due Date
CO#2 COOP Test	2/26/2025

**Communications** screen has the following tabs available to the applicant users i.e. All Communications, My Communications, Bookmarked.

**ALL COMMUNICATIONS:**



**All Communications** tab should have the following filter options available for them to select

- **View By:** This filter should have the following options available for selection
  - Account
  - Applications

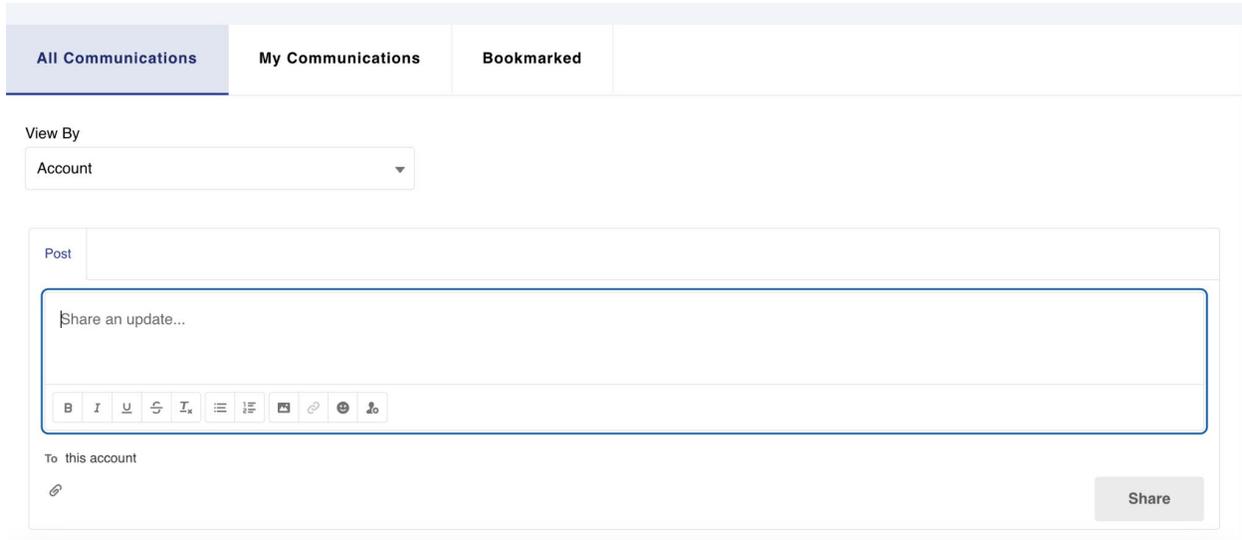
Clicking on either of Account or Applications will lead to the additional filter to be selected

- **Application Name** – This filter would be coming based on the filter selected as **Applications** in the **View By filter**.

This should display the list of Applications which are present under the selected Agency i.e. City, County or State Agency. Applicants should have the option of selecting the **Application Name** from the list of Applications drop down.

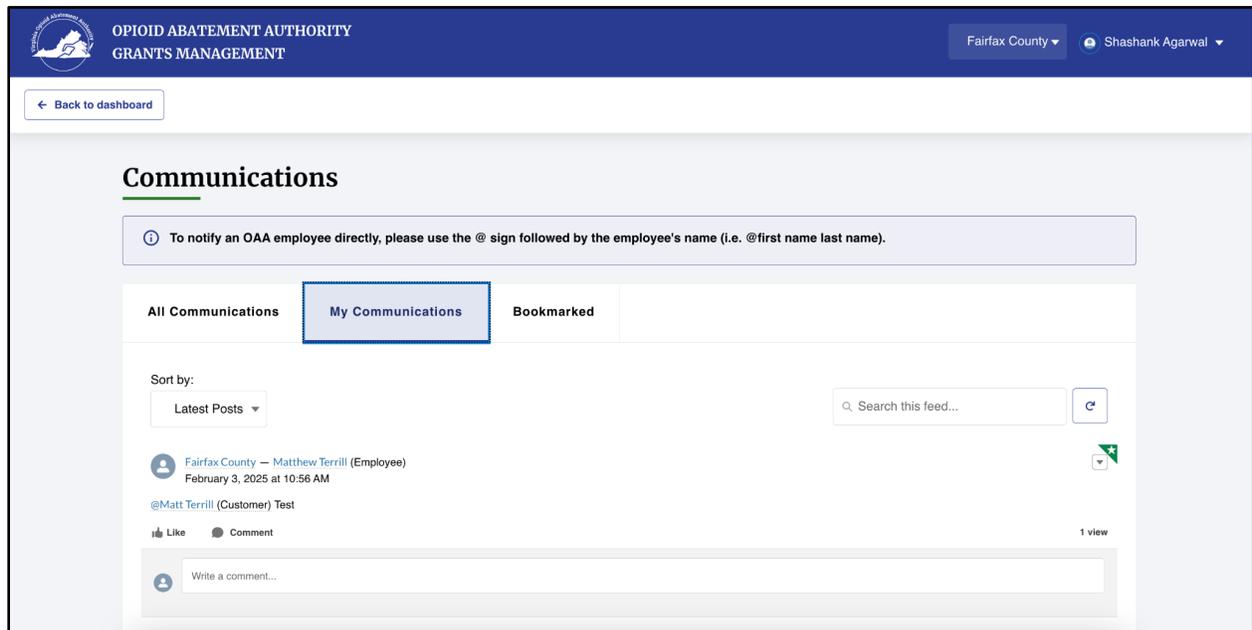
On selecting the Application Name should also display the **Project Name** associated with that Application Name.

Clicking on **Share** button should allow applicants to initiate the chatter conversation where Applicants can tag the respective OAA staff or other agency users to be notified along with ability to attach files or attachments.



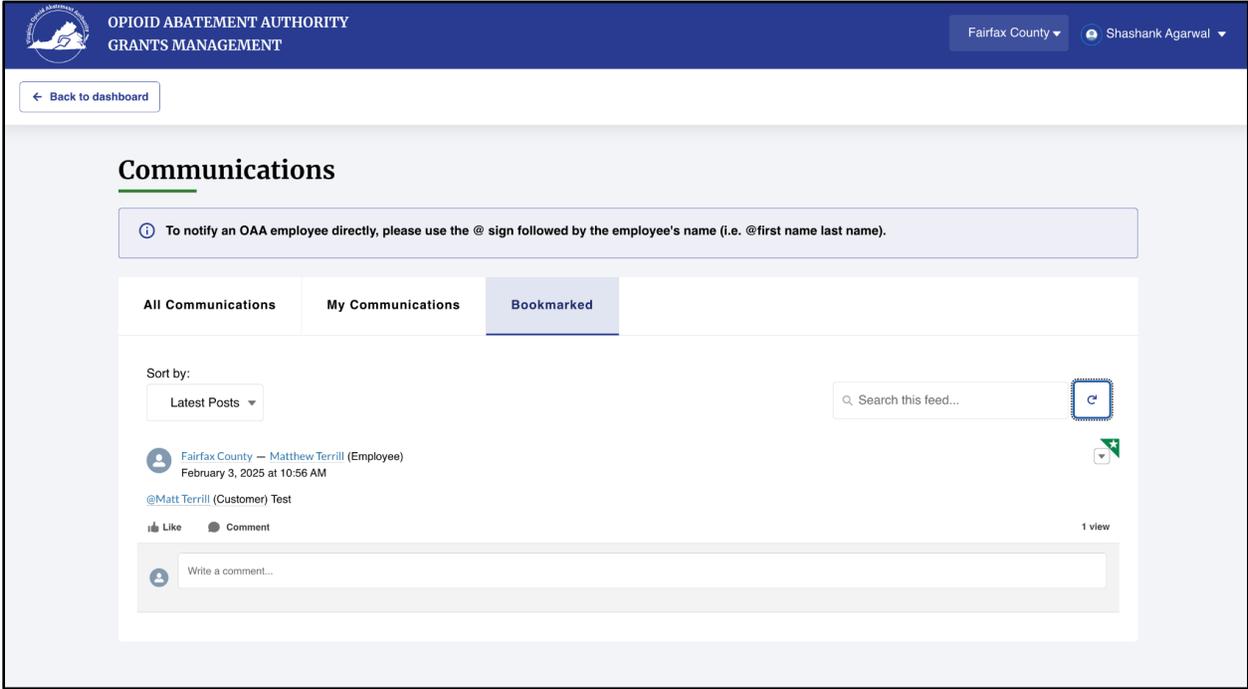
**MY COMMUNICATIONS:**

**My Communications** tab should display all the chatter communications where the logged in applicant user is being included in the communication.



**BOOKMARKED:**

This is the section where all the Communications that have been bookmarked by the logged in applicant user will be appearing here.



## GRANT TYPES AVAILABLE FOR APPLICATION

The following Grant Types are available for application:

**Direct Distribution** – this is available to Cities and Counties and can be used by itself, or as a part of an Individual or Cooperative. These funds are already allocated to the City or County and don't require Grant Committee approval.

**Gold Standard** – your City or County must apply for this as a part of the Individual or separately. If approved for your City or County, then there would be additional funds available on an Individual or as matching funds contribution on a Cooperative. If you want to apply for a Gold Standard you must apply for the Direct Distribution to be eligible for this potential allocation of funds.

**Individual Distribution** – your City or County must apply for an Individual and also apply for a Gold Standard (if not already applied for separately). These grants do require review and approval by the Grants Committee.

**Cooperative Partnership** – This is a competitive Grants Application where more than one City or County are participating as partners with one City or County designated as the Fiscal Agent and the other Cities or Counties are designated as Partners. The Grants Committee will review and determine if an approval for funding is available for that Cooperative Partnership. These Programs can only run a maximum of 5 years.

**State Agency** – This is a competitive Grants Application where a single State Agency can apply for a grant that would fund one or more Projects. The Grants Committee will review and determine if an approval for funding is available for that State Agency. These Programs can only run a maximum of 5 years.

**Unrestricted** – this is not a Grant Type you can apply for directly, however the Grants Committee and Board may determine that they want to provide additional funds for a specific application when it is approved. These funds are provided entirely at the discretion of the Grants Committee and Board.

## APPLYING FOR A GRANT

There are several types of grants to apply for including grants for individual cities or counties, cooperative grants for more than once city or county applying together, state agency grants or special grants. You may also use Direct Funds or Gold Standard Funds.

**GRANTS MANAGEMENT:**

Find a type of grant to apply for within the New Application period. Select the “Apply” button. NOTE: Be sure to use the “Estimated Funds Look-Up Tool” and either print the results , download it or write down the amounts you can apply for per type of Distribution per Fiscal Year (FY). This information will make it easier to determine how much you are eligible for a grant. This doesn’t apply to State Agency grants.

The screenshot displays the 'Grants Management' page for the Opioid Abatement Authority. The page is titled 'Grants Management' and includes a search bar for grants. It features two main sections for grant details, one for Fiscal Year 2025 and one for Fiscal Year 2026. Each section includes a table of application and reporting dates, a purpose statement, and contact information.

Fiscal Year	New Application	Renewal Application	Amend Application	Annual Reporting
2025	Open Date: 8/1/2024	Open Date: 7/29/2024	Open Date: 7/30/2024	Open Date: 7/28/2024
	Due Date: 9/30/2024	Due Date: 10/16/2024	Due Date: 10/3/2024	Due Date: 11/1/2024
2026	Open Date: 8/18/2024	Open Date: 8/18/2024	Open Date: 8/13/2024	Open Date: 8/13/2024
	Due Date: 9/30/2024	Due Date: 9/30/2024	Due Date: 9/30/2024	Due Date: 9/30/2024

**Purpose**  
 The Virginia Opioid Abatement Authority's (OAA's) Individual Distribution and "Gold Standard" Incentive grant awards for cities and counties come from the Opioid Abatement Fund. The contents of this application are for cities and counties applying for awards for Individual Distribution and "Gold Standard" Incentive projects from the OAA in compliance with the national settlement agreements, Commonwealth's memorandum of understanding (MOU), and Code of Virginia.

[View Details](#)

[info@voaa.us](mailto:info@voaa.us) [Download Terms & Conditions](#)

## DIRECT DISTRIBUTION REPORT PROCESS

Completing this form is required at least once per year. It is always specific to a single City and County who could apply for an Individual Distribution Grant, a “Gold Standard” Incentive, or a Cooperative Partnership Grant.

The Direct Distribution Workbook helps the OAA accurately maintain the Locality Look-up Tool and is a requirement for participating in any of the following OAA programs:

- “Gold Standard” Incentive
- Individual Distribution Grants
- Cooperative Partnership Grants

This form must be filled out at least once per year and the one filing per city/county completes the requirement for all three programs listed above.

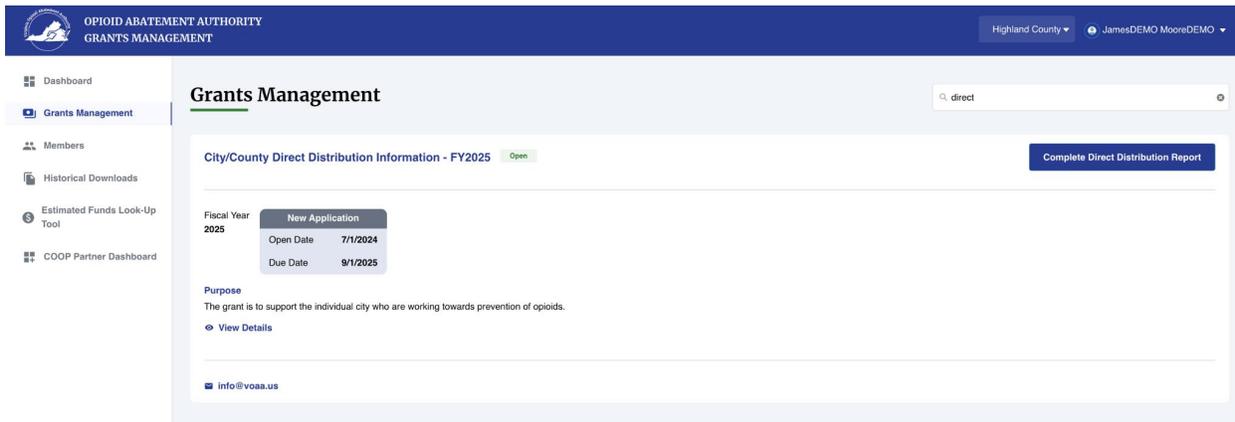
Below is a list of items to consider that will be necessary to complete the application.

- Direct Distribution funds received by fiscal year
- Expenditures of Direct Distribution funds that were used for OAA awarded projects
- Expenditures of Direct Distribution funds that were used for non-OAA projects
- A listing and general description of each non-OAA awarded project where Direct Distribution funds were used and the amount spent on that project.
- Amounts held in reserve

---

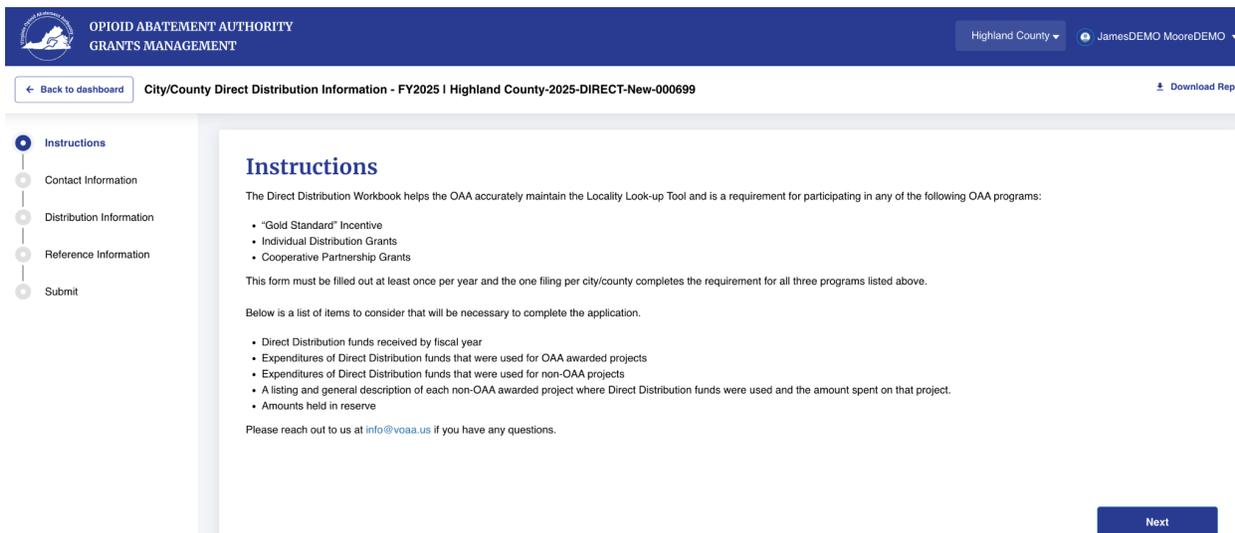
### SELECT A DIRECT DISTRIBUTION INFORMATION:

In order to locate the Direct Distribution Workbook, you may wish to use the Search with Application Name feature in the upper right hand corner of the Grants Management tab to locate the Direct Distribution Information Grant Type or you can scroll down to the Direct Distribution Information. After selecting this the application will open .



**DIRECT DISTRIBUTION INFORMATION INSTRUCTIONS:**

Carefully review the Direct Distribution Instructions. Then select the “Next” button in the lower right hand corner to move to the next step.



**DIRECT DISTRIBUTION INFORMATION CONTACT INFORMATION:**

This step is where you must specify a Contact Person for this City or County. This is the contact information for the person who will complete the application process and provide the requested information on the following steps. You may add a new

Contact Person by selecting the “Invite New User” option and providing their contact information so the system can send them an email to login to the portal or you may add any current contact related to your city or county by selecting the “Add Existing Contact” and then select the appropriate person’s name to be the Fiscal Agent.

**Contact Information**

Asterisk (\*) indicates required field

Name of City or County: Highland County

City or County: County

**Address Information**

**Physical Address Information**

\*Physical Street Address 1: 1223 test

Physical Street Address 2: test

\*City: test

\*State: Virginia

\*Zip/Postal Code: 65485

\*Country: U.S.A

**Mailing Address Information**

Same as Physical Address

Mailing Street Address 1: 1223 test

Mailing Street Address 2: test

\*City: test

State: Virginia

Zip/Postal Code: 65485

Country: U.S.A

**Contact Person for this Application**

This should be someone who can answer programmatic and financial questions regarding the application and does not have to be the signer of the application or the city/county executive.

\*Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

Exit Previous Save & Next

“Invite New User”

**Contact Information**

Name of City or County: Highland County

City or County: County

**Address Information**

**Physical Address Information**

\*Physical Street Address 1: 1223 test

Physical Street Address 2: test

\*City: test

\*State: Virginia

\*Zip/Postal Code: 65485

\*Country: U.S.A

**Mailing Address Information**

Same as Physical Address

Mailing Street Address 1: 1223 test

Mailing Street Address 2: test

\*City: test

State: Virginia

Zip/Postal Code: 65485

Country: U.S.A

**Contact Person for this Application**

This should be someone who can answer programmatic and financial questions regarding the application and does not have to be the signer of the application or the city/county executive.

\*Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

\*First Name: [Field]

Middle Name: [Field]

\*Last Name: [Field]

\*Job Title: [Field]

Office Phone: [Field]

Cell Phone: [Field]

Suffix: [Field]

\*Email: [Field]

Exit Previous Save & Next

“Add Existing Contact”

The screenshot shows a web application interface for a grant application. At the top, there is a navigation bar with a 'Back to dashboard' button and the title 'City/County Direct Distribution Information - FY2025 | Highland County-2025-DIRECT-New-000699'. A 'Submit' button is visible on the left. The main content area is titled 'Address Information' and is divided into two sections: 'Physical Address Information' and 'Mailing Address Information'. Both sections have identical form fields for 'Physical Street Address 1', 'Physical Street Address 2', 'City', 'State', 'Zip/Postal Code', and 'Country'. The 'Mailing Address Information' section has a checkbox labeled 'Same as Physical Address' which is checked. Below these sections is the 'Contact Person for this Application' section, which includes a dropdown menu for selecting a contact, radio buttons for 'Add Existing Contact' (selected) and 'Invite New User', and a form with fields for 'Name' (with sub-fields for First, Middle, and Last), 'Job Title', 'Office Phone', 'Cell Phone', 'Suffix', and 'Email'. At the bottom right, there are 'Previous' and 'Save & Next' buttons.

After the required information is added, you can use the “Save & Next” button to advance the application to the next step.

**DISTRIBUTION INFORMATIONS:**

This is the step where you add Distribution Information.

You can specify Direct Distribution Information per Fiscal Year and allocate “Amounts Expended towards OAA Projects” and/or “Amounts Expended towards Non-OAA Projects” and/or “Amounts Held in Reserve”. Use the checkbox next to the Fiscal Year you want to update and click the “Edit” button or use the “Add New” button to create a new row for a Fiscal Year, then enter the amounts. You could also use the “Delete” button to remove a row.

You can also specify Direct Distribution for Non-OAA Projects by editing the rows by checkbox next to the Project you want to update and click the “Edit” button or use the “Add New” button to create a new row for a Project, then enter the “Amount Allocated/Spent”, “Starting Date” / “Ending Date” and a “Brief Description of Project” and also specify “Does the project continue into the next year?” by checking a box.. You could also use the “Delete” button to remove a row.

Next answer the required questions. After the information is added, you can use the “Save & Next” button to advance the application to the next step.

“Add New” Direct Distribution – Add Budget example:

You can select the Fiscal Year from the dropdown menu and you can enter Amounts for each type, and then click the “Save” button.

The process is the same for OAA Direct Distribution and Non OAA Projects.

Note: There is a system check that the “Total of Expended towards Non-OAA Projects should be matching with Total of Amount Allocated/Spent”. If you get this message please verify your entries.

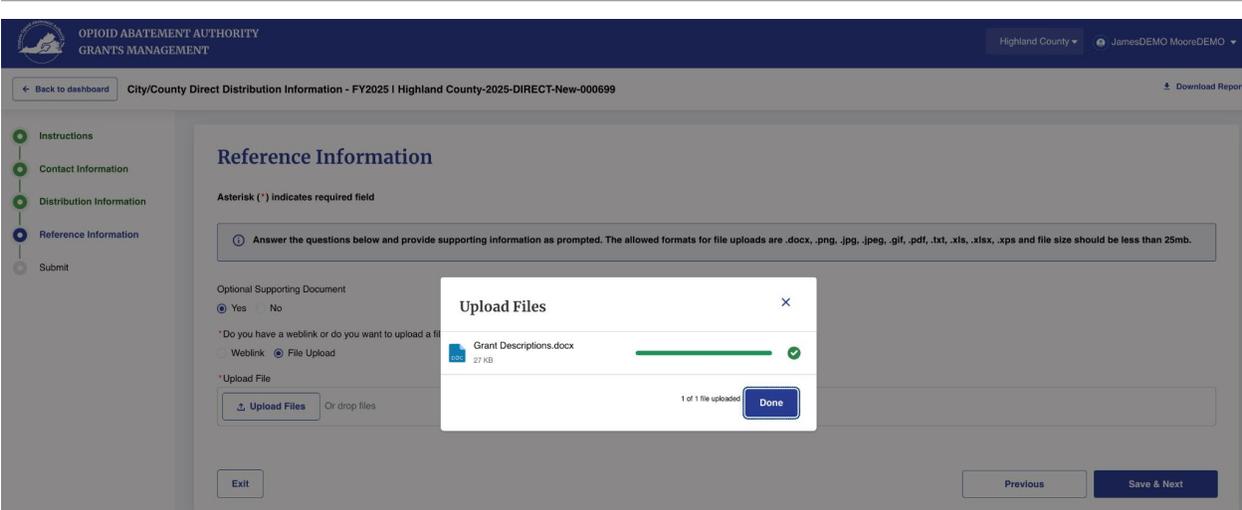
After the required information is added, you can use the “Save & Next” button to advance the application to the next step.

**REFERENCE INFORMATION:**

This is the step where you add any optional Reference Information by providing a Web Link or File Upload. After answering the questions please provide a Weblink or File Upload for the “Yes” answers. The allowed formats for file uploads are .docx, .png, .jpg, .jpeg, .gif, .pdf, .txt, .xls, .xlsx, .xps and file size should be less than 25mb..

Weblink Example:

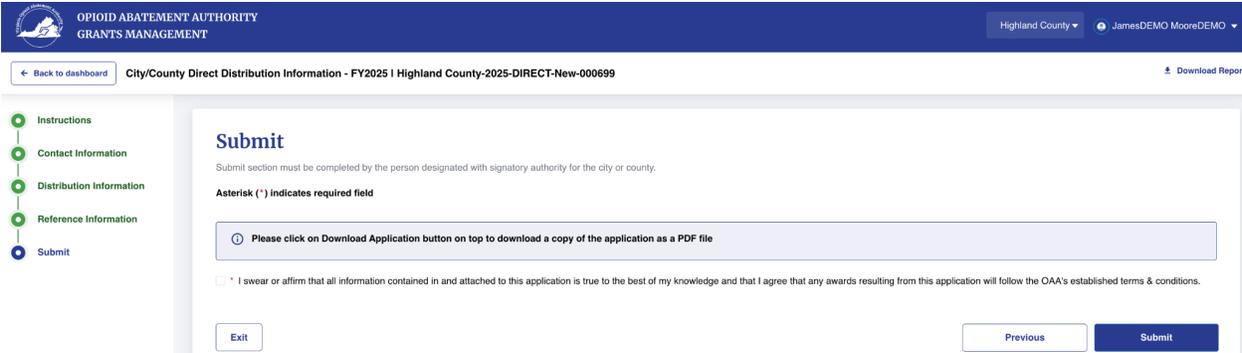
File Upload Example:



**SUBMIT:**

This page is where you can make the submission of your Direct Distribution Information Report. Note: You can use the “Download Report” link in the upper right hand corner of the page to retain a copy of your submission.

When you answer the questions (checkbox) then click the “Submit” button.



After the “Submit” button was pressed this page will be displayed as shown below:

The screenshot shows a web interface for the Virginia Opioid Abatement Authority (OAA) Grants Management system. At the top left is the OAA logo and the text "OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT". At the top right, there are dropdown menus for "Highland County" and a user profile for "JamesDEMO MooreDEMO". The main content area features a green checkmark icon followed by the heading "Application Submitted Successfully". Below this, a message states: "Thank you for submitting your application! Your application has been received and is currently being processed. We appreciate your interest and will carefully review the information you have provided." The application name is listed as "Highland County-2025-DIRECT-New-000699". A section titled "Next Steps" contains three bullet points: "Please keep this Application Name for your records, as it will be used for any future correspondence regarding your application.", "Our team is dedicated to ensuring a thorough and fair review of all applications. You will be notified of the outcome as soon as the review process is complete.", and "If you have any inquiries or need further assistance, please feel free to contact our support team at info@voaa.us." At the bottom of the content area, there are two buttons: a blue "Download Report" button with a PDF icon and a white "Back to Dashboard" button with a left arrow icon.

This allows you to click a button to “Download Report” as a PDF for your records.

## "GOLD STANDARD" INCENTIVE APPLICATION PROCESS

The Board of Directors (Board) of the Opioid Abatement Authority (OAA) is statutorily required to allocate a specific portion of the Opioid Abatement Fund (Fund) to each participating city and county (see Virginia Code § 2.2-2374(D)(2)). For purposes of this policy, this allocation will be referred to as the “OAA Distribution”.

In turn, each participating city and county has statutory obligations attached to the receipt of OAA Distributions (see Virginia Code § 2.2-2370(A)). These obligations are summarized below. For purposes of this policy these statutory obligations will be referred to collectively as the OAA “Gold Standard”.

- Participating cities and counties will only utilize OAA Distributions to fund efforts designed to treat, prevent, or reduce opioid use disorder or the misuse of opioids through evidence-based or evidence-informed methods, programs, or strategies
- Participating cities and counties shall not supplant funding of an existing program nor collect indirect costs
- Participating cities and counties shall provide the Authority with information on implementation of said methods, programs, or strategies and allow such monitoring and review as may be required by the Authority.
- Participating cities and counties must agree to certain base terms and conditions established by the OAA Board of Directors before receiving and OAA Distributions.

In addition to receiving the OAA Distribution, each participating city and county will also receive distributions directly from the settling companies. For purposes of this policy, this allocation will be referred to as the “Direct Distribution”.

The use and reporting requirements of the Direct Distribution are outlined in the nationally-negotiated settlement agreements and not through State statute. These use and reporting requirements are not as stringent nor as clear as the OAA’s Gold Standard, and in fact the OAA Gold Standard will always meet or exceed the requirements of the settlement agreements.

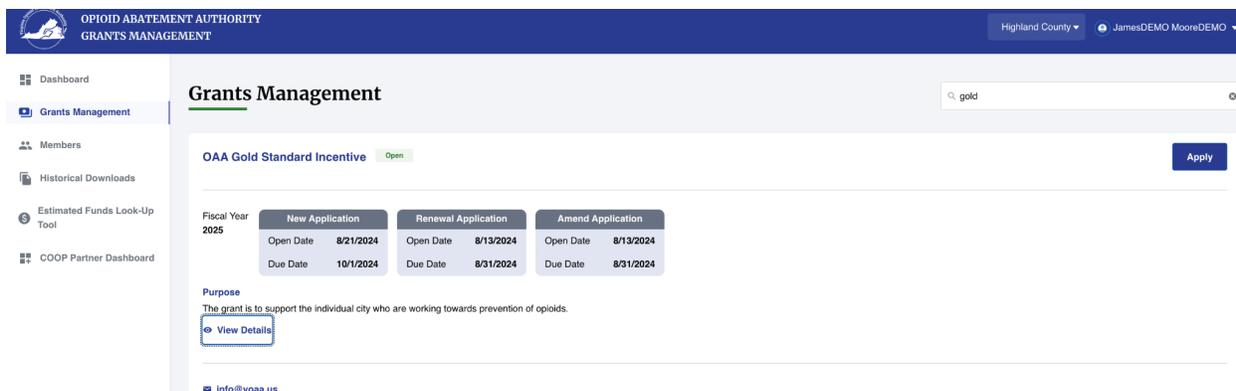
To encourage participating cities and counties to use all of the Direct Distribution funds fully for remediation and abatement, and to encourage participating cities and counties to report the use of their Direct Distribution funds to the OAA for the purpose of ensuring statewide adherence to the various settlement agreements, the Board hereby offers a voluntary financial incentive to each participating city and county. For each fiscal year

that a participating city or county agrees to use and report their Direct Distribution funds according to the same standards they are required to use and report their OAA Distribution funds (i.e., the Gold Standard), the Board agrees to increase that city or county’s OAA Distribution by 25% above the base amount for that same fiscal year.

As noted above, each year that a city or county applies for any OAA Distribution, it must first agree to a set of base terms and conditions set by the OAA Board. In addition to those base terms and conditions, there will also be an additional set of extra terms and conditions that only apply to specify the requirements for participation in the incentive. In short, each city or county will communicate its decision as to whether it will participate in the incentive by completing and submitting this additional set of terms and conditions.

**SELECT THE "GOLD STANDARD" INCENTIVE:**

In order to locate the "Gold Standard" Incentive, you may wish to use the Search with Application Name feature in the upper right hand corner of the Grants Management tab to locate the "Gold Standard" Incentive Application Type or you can scroll down to the "Gold Standard" Incentive Information. After selecting this the application will open.



If you have already opted into the "Gold Standard" Incentive you will receive the following error message:

The screenshot shows the 'Grants Management' section of the Opioid Abatement Authority Grants Management system. At the top, there is a navigation bar with the logo, 'OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT', a location dropdown set to 'Highland County', and a user dropdown for 'JamesDEMO MooreDEMO'. A red error banner states: 'Error Highland County has already opted for Gold Standard and does not need to apply again.' The main content area is titled 'Grants Management' and features a search bar with 'gold' entered. Below this, there is a card for 'OAA Gold Standard Incentive' with an 'Open' status and an 'Apply' button. A table shows application dates for Fiscal Year 2025:

	New Application	Renewal Application	Amend Application
Open Date	8/21/2024	8/13/2024	8/13/2024
Due Date	10/1/2024	8/31/2024	8/31/2024

Below the table, the purpose is stated: 'The grant is to support the individual city who are working towards prevention of opioids.' There is a 'View Details' link and an email address 'info@voaa.us'.

**"GOLD STANDARD" INCENTIVE INSTRUCTIONS:**

Carefully review the "Gold Standard" Incentive Instructions. Then select the "Next" button in the lower right hand corner to move to the next step.

The screenshot shows the 'Instructions' page for the 'OAA Gold Standard Incentive | Bath County-2025-GOLD-New-000700'. The page has a breadcrumb trail: 'Back to dashboard' > 'OAA Gold Standard Incentive | Bath County-2025-GOLD-New-000700'. A 'Download Application' link is in the top right. A sidebar on the left contains a navigation menu with 'Instructions' selected. The main content area is titled 'Instructions' and contains the following text:

The Board of Directors (Board) of the Opioid Abatement Authority (OAA) is statutorily required to allocate a specific portion of the Opioid Abatement Fund (Fund) to each participating city and county (see Virginia Code § 2.2-2374(D)(2)). For purposes of this policy, this allocation will be referred to as the "OAA Distribution".

In turn, each participating city and county has statutory obligations attached to the receipt of OAA Distributions (see Virginia Code § 2.2-2370(A)). These obligations are summarized below. For purposes of this policy these statutory obligations will be referred to collectively as the OAA "Gold Standard".

- Participating cities and counties will only utilize OAA Distributions to fund efforts designed to treat, prevent, or reduce opioid use disorder or the misuse of opioids through evidence-based or evidence-informed methods, programs, or strategies
- Participating cities and counties shall not supplant funding of an existing program nor collect indirect costs
- Participating cities and counties shall provide the Authority with information on implementation of said methods, programs, or strategies and allow such monitoring and review as may be required by the Authority.
- Participating cities and counties must agree to certain base terms and conditions established by the OAA Board of Directors before receiving and OAA Distributions.

In addition to receiving the OAA Distribution, each participating city and county will also receive distributions directly from the settling companies. For purposes of this policy, this allocation will be referred to as the "Direct Distribution".

The use and reporting requirements of the Direct Distribution are outlined in the nationally-negotiated settlement agreements and not through State statute. These use and reporting requirements are not as stringent nor as clear as the OAA's Gold Standard, and in fact the OAA Gold Standard will always meet or exceed the requirements of the settlement agreements.

To encourage participating cities and counties to use all of the Direct Distribution funds fully for remediation and abatement, and to encourage participating cities and counties to report the use of their Direct Distribution funds to the OAA for the purpose of ensuring statewide adherence to the various settlement agreements, the Board hereby offers a voluntary financial incentive to each participating city and county. For each fiscal year that a participating city or county agrees to use and report their Direct Distribution funds according to the same standards they are required to use and report their OAA Distribution funds (i.e., the Gold Standard), the Board agrees to increase that city or county's OAA Distribution by 25% above the base amount for that same fiscal year.

As noted above, each year that a city or county applies for any OAA Distribution, it must first agree to a set of base terms and conditions set by the OAA Board. In addition to those base terms and conditions, there will also be an additional set of extra terms and conditions that only apply to specify the requirements for participation in the incentive. In short, each city or county will communicate its decision as to whether it will participate in the incentive by completing and submitting this additional set of terms and conditions.

Please reach out to us at [info@voaa.us](mailto:info@voaa.us) if you have any questions.  
Date of Board Approval: October 24, 2022

A 'Next' button is located in the bottom right corner of the page.

**"GOLD STANDARD" INCENTIVE CONTACT INFORMATION:**

This step is where you must specify a Contact Person for this City or County. This is the contact information for the person who will complete the application process and provide the requested information on the following steps. You may add a new

Contact Person by selecting the “Invite New User” option and providing their contact information so the system can send them an email to login to the portal or you may add any current contact related to your city or county by selecting the “Add Existing Contact” and then select the appropriate person’s name to be the Fiscal Agent.

The screenshot shows the 'Contact Information' form in the OAA Grant Application system. The form is titled 'Contact Information' and includes a note: 'Asterisk (\*) indicates required field'. The form is divided into several sections:

- Name of City or County:** Two input fields for 'City or County' and 'County'. The 'City or County' field contains 'Bath County'.
- Address Information:**
  - Physical Address Information:** Fields for 'Physical Street Address 1', 'Physical Street Address 2', 'City', 'State' (Virginia), 'Zip/Postal Code', and 'Country' (U.S.A.).
  - Mailing Address Information:** A checkbox 'Same as Physical Address' is unchecked. Fields for 'Mailing Street Address 1', 'Mailing Street Address 2', 'City', 'State' (Virginia), 'Zip/Postal Code', and 'Country' (U.S.A.).
- Contact Person for this Application:** A radio button is selected for 'This should be someone who can answer programmatic and financial questions regarding the application and does not have to be the signer of the application or the city/county executive.' Below this, there are two radio buttons: 'Add Existing Contact' (unselected) and 'Invite New User' (selected).

At the bottom of the form, there are three buttons: 'Exit', 'Previous', and 'Save & Next'.

“Invite New User” option:

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Bath County James DEMO Moore DEMO

← Back to dashboard OAA Gold Standard Incentive | Bath County-2025-GOLD-New-000700 Download Application

Reference Information

Signature

Name or City or County: Bath County County

City or County: County

**Address Information**

**Physical Address Information**

\*Physical Street Address 1: 123 Test St Physical Street Address 2: City: Test City

\*State: Virginia \*Zip/Postal Code: 23456 \*Country: U.S.A

**Mailing Address Information**

Same as Physical Address

Mailing Street Address 1: 123 Test St Mailing Street Address 2: City: Test City

State: Virginia Zip/Postal Code: 23456 Country: U.S.A

**Contact Person for this Application**

This should be someone who can answer programmatic and financial questions regarding the application and does not have to be the signer of the application or the city/county executive.

\*Do you want to add existing contact or want to invite new user?  
Add Existing Contact  Invite New User

\*First Name: Middle Name: \*Last Name:

\*Job Title: Office Phone: Cell Phone:

Suffix: \*Email:

Exit Previous Save & Next

“Add Existing Contact” option:

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Bath County James DEMO Moore DEMO

← Back to dashboard OAA Gold Standard Incentive | Bath County-2025-GOLD-New-000700 Download Application

Signature

**Address Information**

**Physical Address Information**

\*Physical Street Address 1: 123 Test St Physical Street Address 2: City: Test City

\*State: Virginia \*Zip/Postal Code: 23456 \*Country: U.S.A

**Mailing Address Information**

Same as Physical Address

Mailing Street Address 1: 123 Test St Mailing Street Address 2: City: Test City

State: Virginia Zip/Postal Code: 23456 Country: U.S.A

**Contact Person for this Application**

This should be someone who can answer programmatic and financial questions regarding the application and does not have to be the signer of the application or the city/county executive.

\*Do you want to add existing contact or want to invite new user?  
 Add Existing Contact  Invite New User

\*Name: Select an Option

\*First Name: Middle Name: \*Last Name:

\*Job Title: Office Phone: Cell Phone:

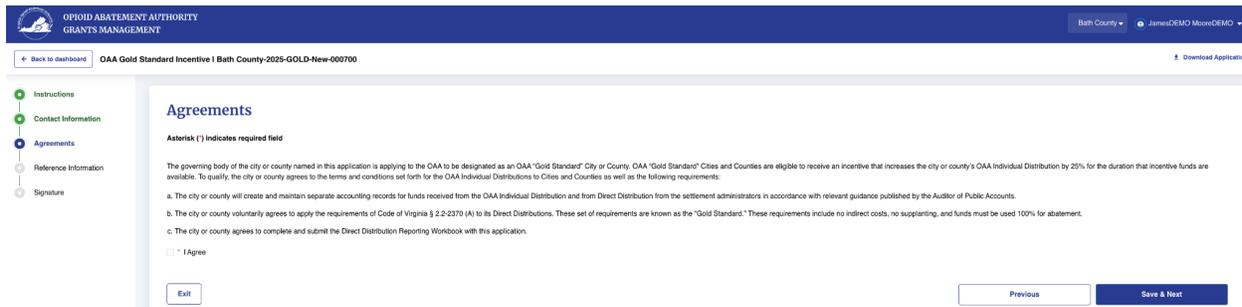
Suffix: \*Email:

Exit Previous Save & Next

After the required information is added, you can use the “Save & Next” button to advance the application to the next step.

**“GOLD STANDARD” INCENTIVE AGREEMENTS:**

This is the step you acknowledge the items listed by checking the “I agree” checkbox.



Next answer the required questions. After the Agreement is completed,, you can use the “Save & Next” button to advance the application to the next step.

Your selected Contact will receive a confirmation email for E-Signature. The email will resemble the one displayed below:

---

**[External Message] Signature requested on "VA OAA - Gold Agreement Clarke County-2025-IDIC-New-000692"**

1 message

---

Opioid Abatement Authority via Adobe Acrobat Sign <adobesign@adobesign.com>

Thu, Sep 12, 2024 at 7:50 AM

Reply-To: Opioid Abatement Authority <cmoisan@voaa.us>

~~adobesign@adobesign.com~~



Opioid Abatement Authority requests your signature  
on  
**VA OAA - Gold Agreement Clarke County-2025-IDIC-  
New-000692**

[Review and sign](#)

---

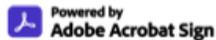
Dear Rusty Grisworld,

You have received a Gold Agreement for E-Signature. Please review and sign the required documentation. If you have any questions, please contact [info@voaa.us](mailto:info@voaa.us).

---

After you sign **VA OAA - Gold Agreement Clarke County-2025-IDIC-New-000692**, all parties will receive a final PDF copy.

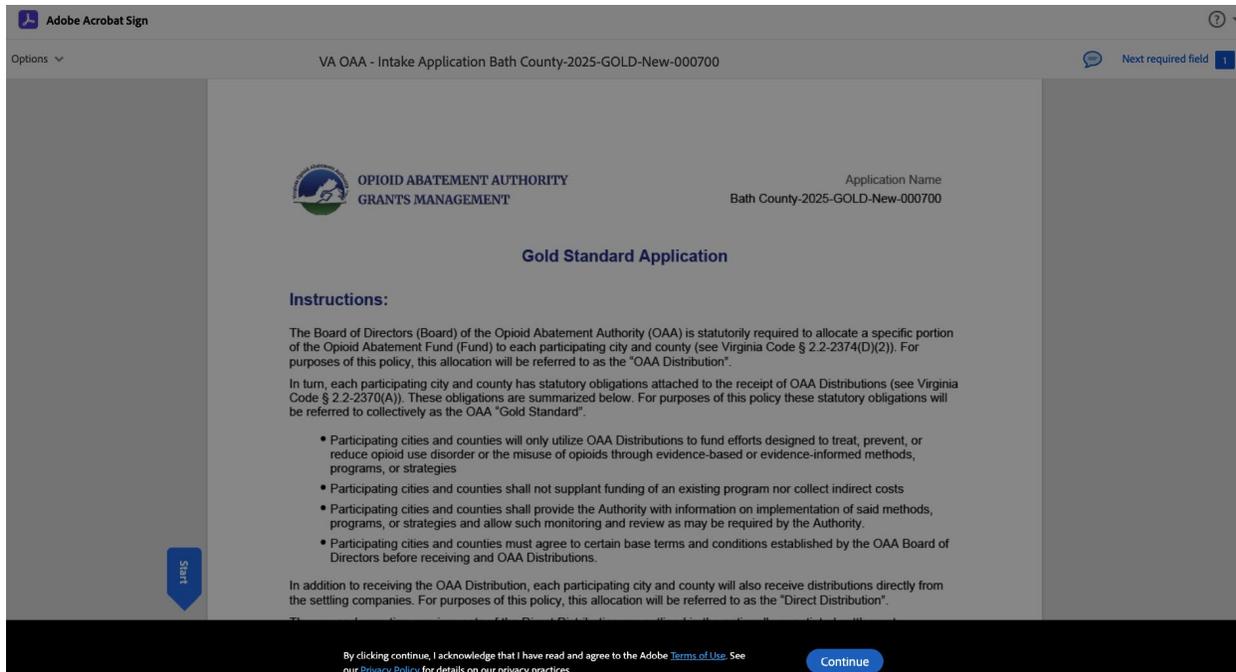
**Don't forward this email:** If you don't want to sign, you can [delegate](#) to someone else.



By proceeding, you agree that this agreement may be signed using electronic or handwritten signatures.

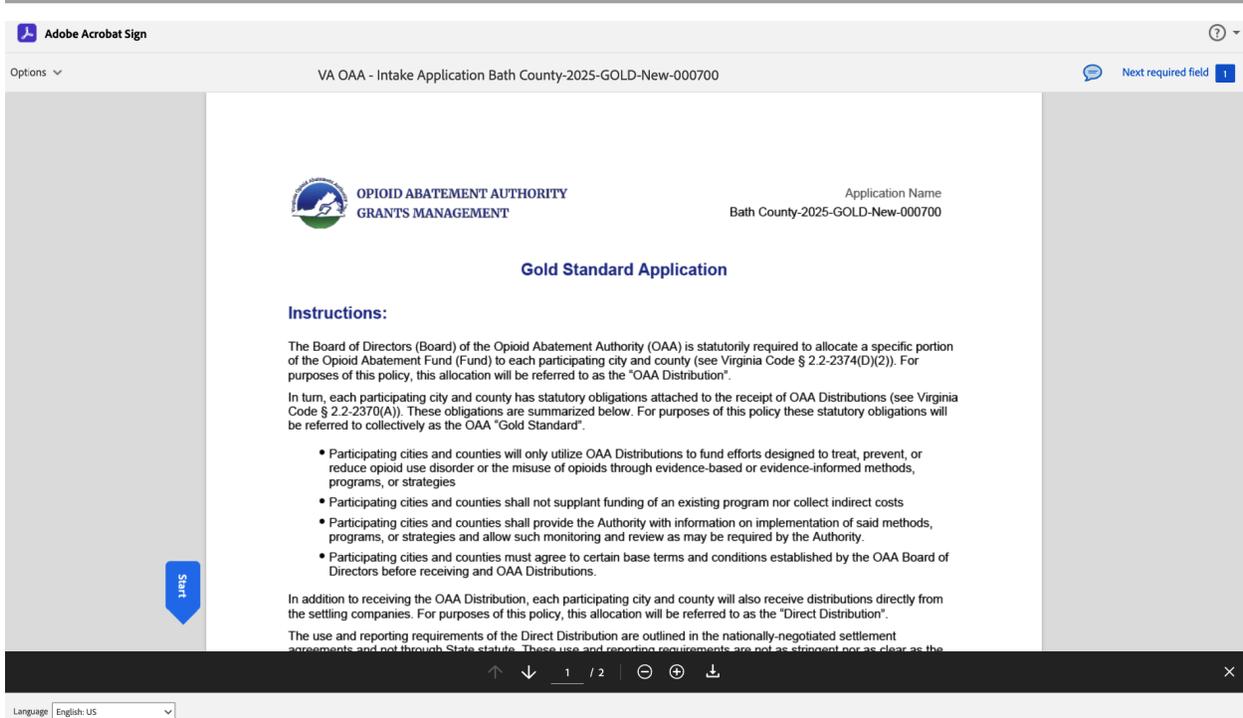
To ensure that you continue receiving our emails, please add [adobesign@adobesign.com](mailto:adobesign@adobesign.com) to your address book or safe list.

You will need to click the “Review and sign” button in order to provide the E-Signature after you select the button another browser window or tab will appear that will look like the image below:

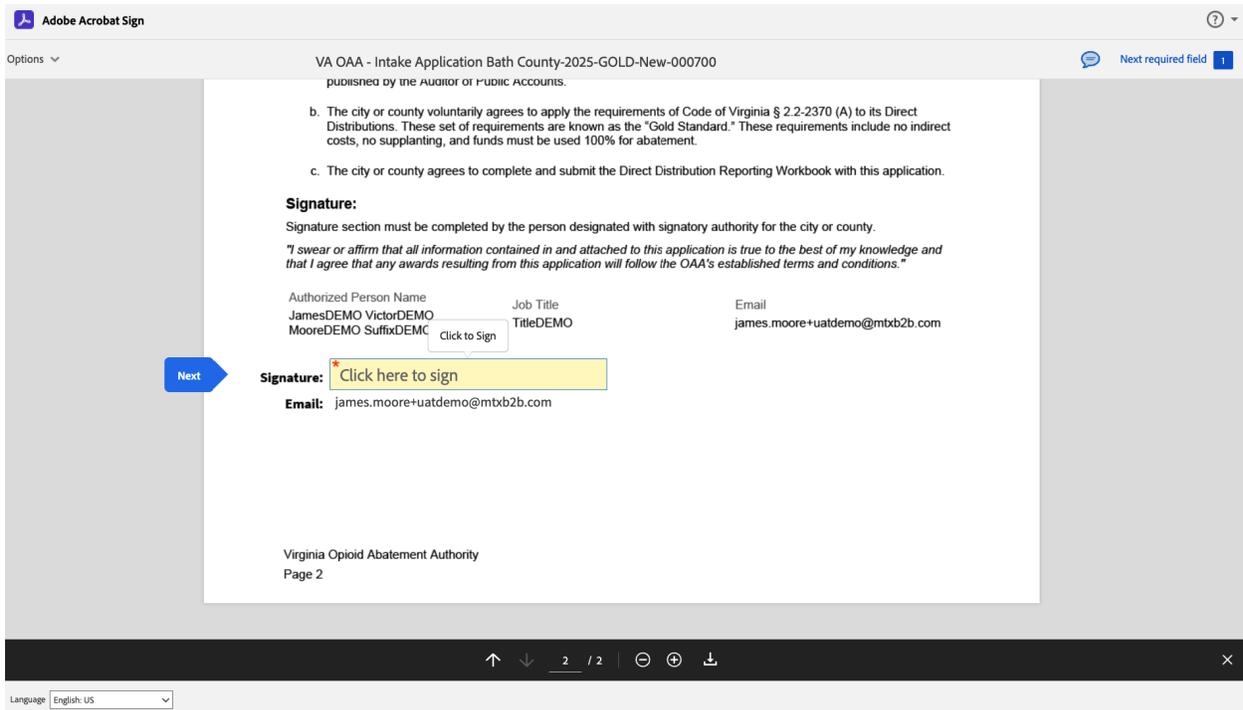


You will need to click the “Continue” button to complete the te E-Signature process:

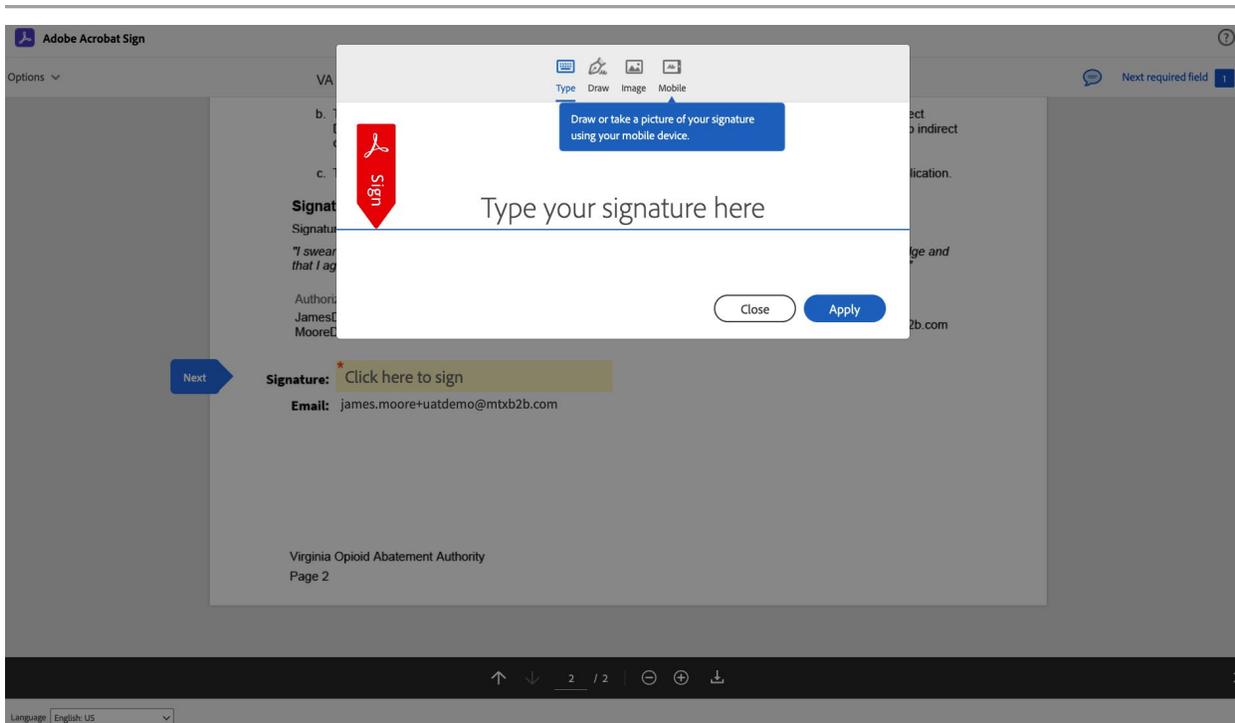
The following page will be displayed, you will want to review the information and the click the “Start” button:



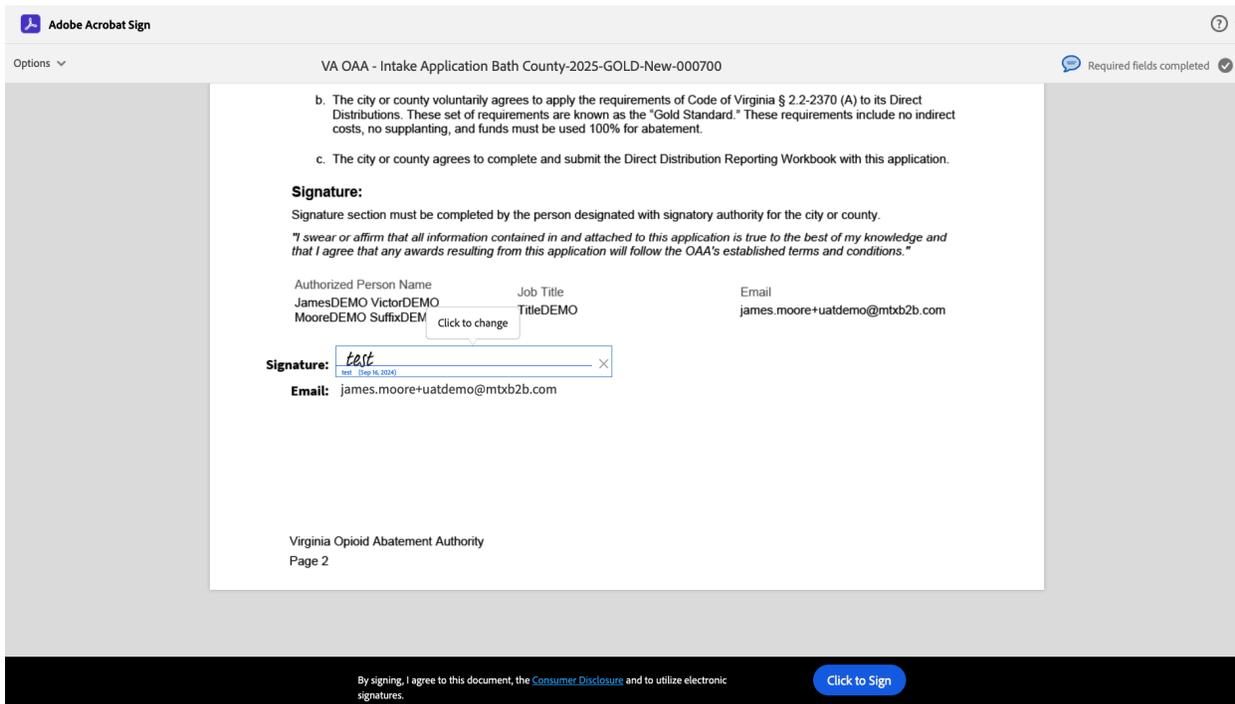
Then the page will scroll to where you need to sign as pictured below:



You will then click the “Click here to sign” field to get the signature pop-up displayed here:



Enter your signature and then click the “Apply” button.



Finally, click the “Click to Sign” button to complete the E-Signature. You will receive an email confirmation and you have the opportunity to download a PDF copy.

Sample E-Signature Completed Email:

**[External Message] You signed: "VA OAA - Intake Application Bath County-2025-GOLD-New-000700"**

1 message

Virginia Opioid Abatement Authority via Adobe Acrobat Sign <adobesign@adobesign.com>  
Reply-To: Opioid Abatement Authority <cmoisan@voaa.us>  
To: Opioid Abatement Authority <cmoisan@voaa.us>, test <james.moore+uatdemo@mtxb2b.com>

Mon, Sep 16, 2024 at 3:02 PM



You're done signing  
**VA OAA - Intake Application Bath County-2025-GOLD-New-000700**

[Open agreement](#)

Attached is the final agreement for your reference. Read it with [Acrobat Reader](#). You can also [open it online](#) to review its activity history.



Need your own documents signed? Adobe Acrobat Sign can help save you time. [Learn more](#).

To ensure that you continue receiving our emails, please add [adobesign@adobesign.com](mailto:adobesign@adobesign.com) to your address book or safe list.

© 2024 Adobe. All rights reserved.

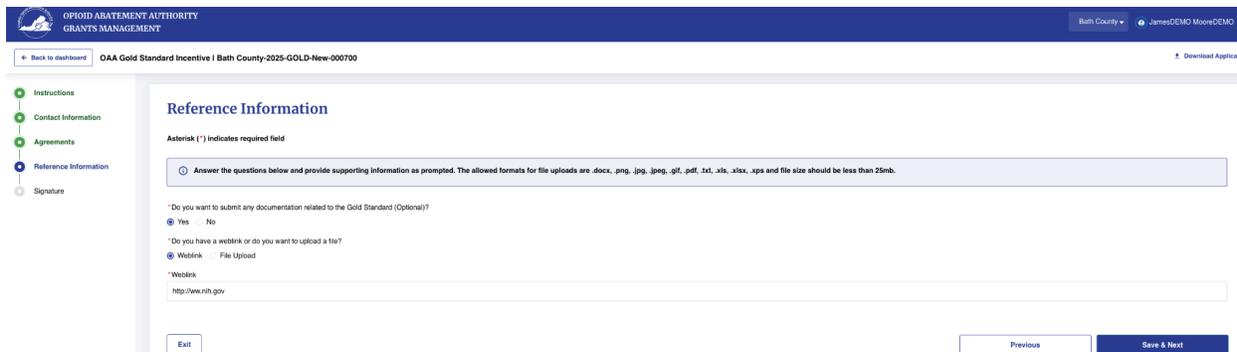
**VA OAA - Intake Application Bath County-2025-GOLD-New-000700 - signed.pdf**  
150K

**"GOLD STANDARD" INCENTIVE REFERENCE INFORMATION:**

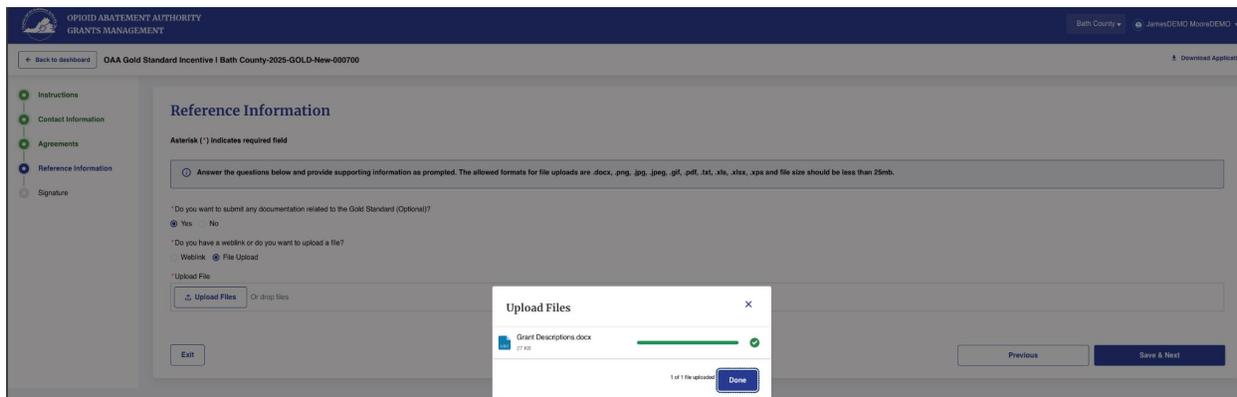
This is the step where you add any optional Reference Information by providing a Web Link or File Upload. After answering the questions please provide a Weblink or File Upload for the "Yes" answers. The allowed formats for file uploads are .docx, .png, .jpg, .jpeg, .gif, .pdf, .txt, .xls, .xlsx, .xps and file size should be less than 25mb..



**Weblink Example:**



**File Upload Example:**



**"GOLD STANDARD" INCENTIVE SIGNATURE:**

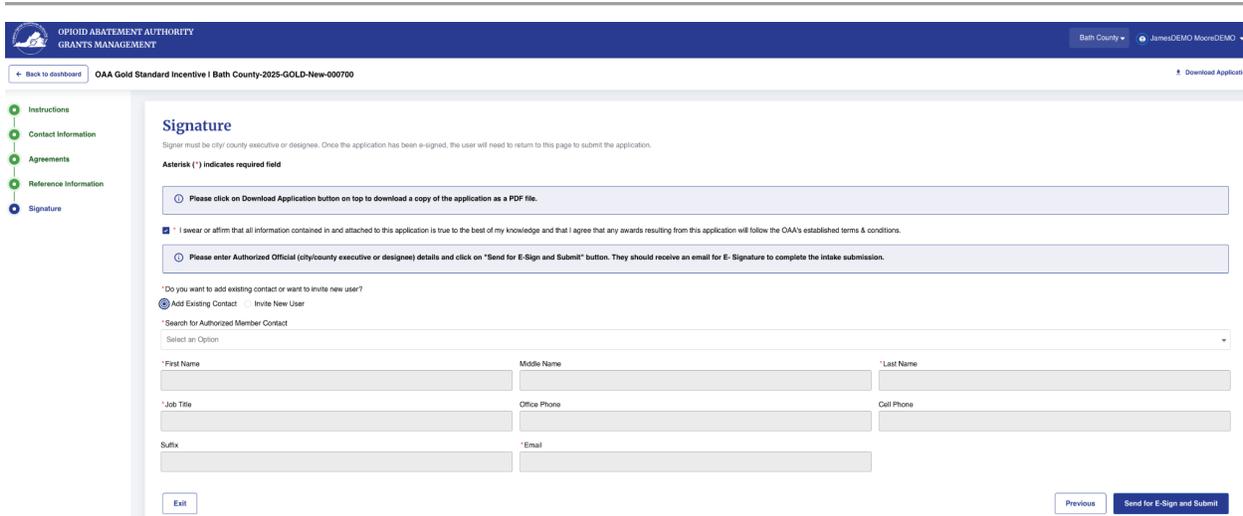
This page is where you can make the submission of your "Gold Standard" Incentive application. Note: You can use the "Download Report" link in the upper right hand corner of the page to retain a copy of your submission.

When you answer the questions (checkbox and then selecting an Authorized contact) then click the "Submit" button.

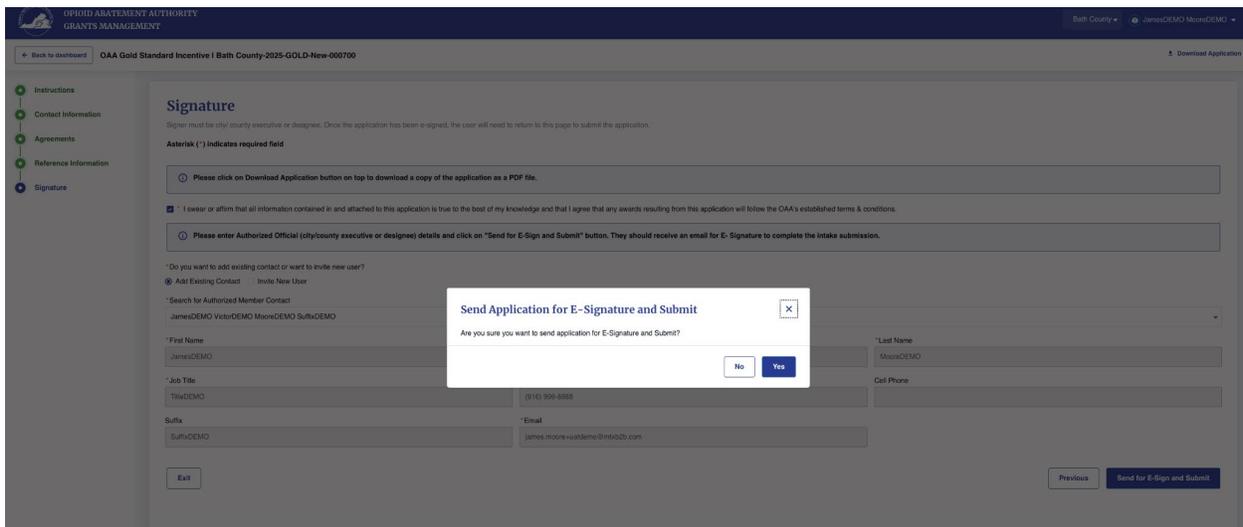
To specify an Authorized Official for the E-Signature use either the Invite New User selection or the Add Existing Contact selection. Then provide the requested information.

"Invite New User" option:

"Add Existing Contact" option:

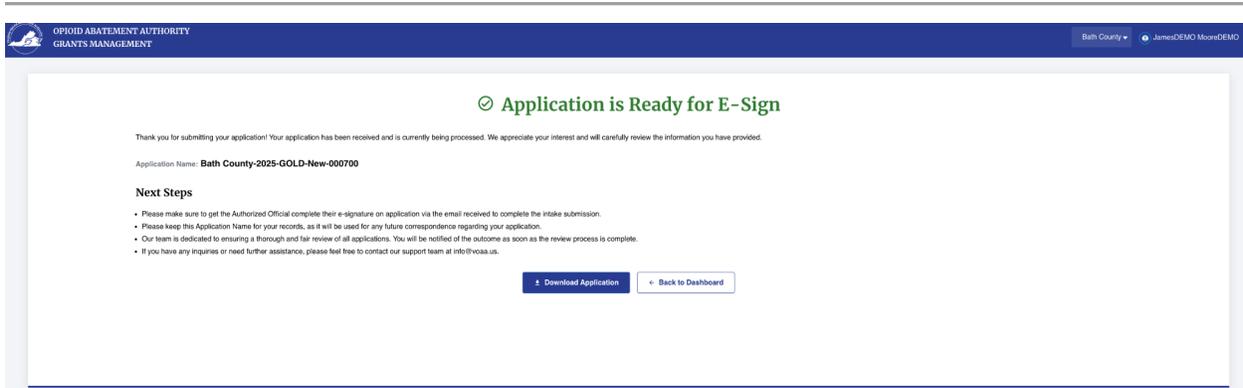


After the “Send for E-Sign and Submit” button was pressed this page will be displayed as shown below:



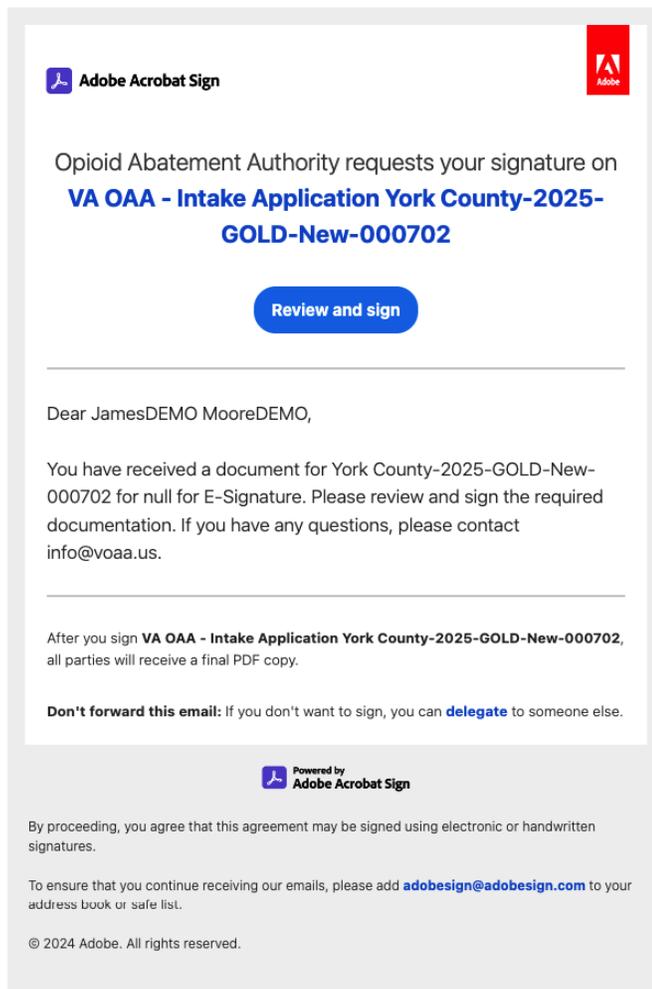
Pressing “No” will return you back to the incomplete “Gold Standard” Incentive Application and pressing “Yes” will send the “Gold Standard” Incentive Application to the contact you specified for E- Signature.

This is the page you will be presented with when that step is completed:

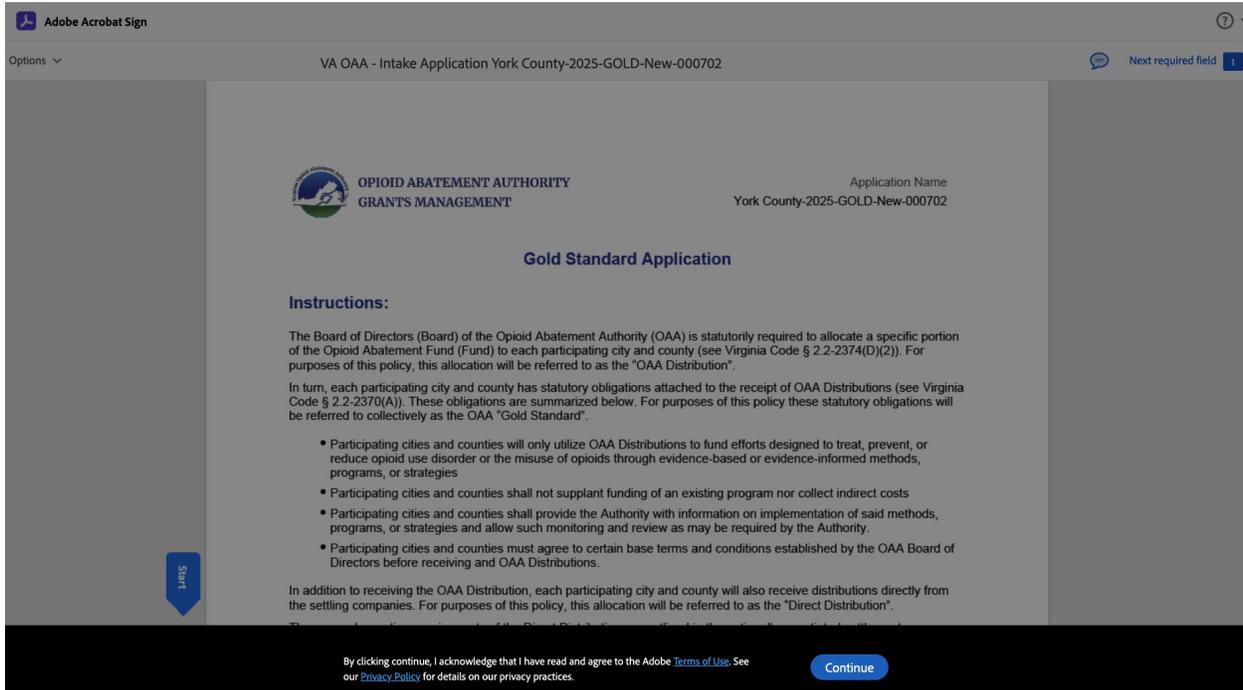


This allows you to click a button to “Download Report” as a PDF for your records.

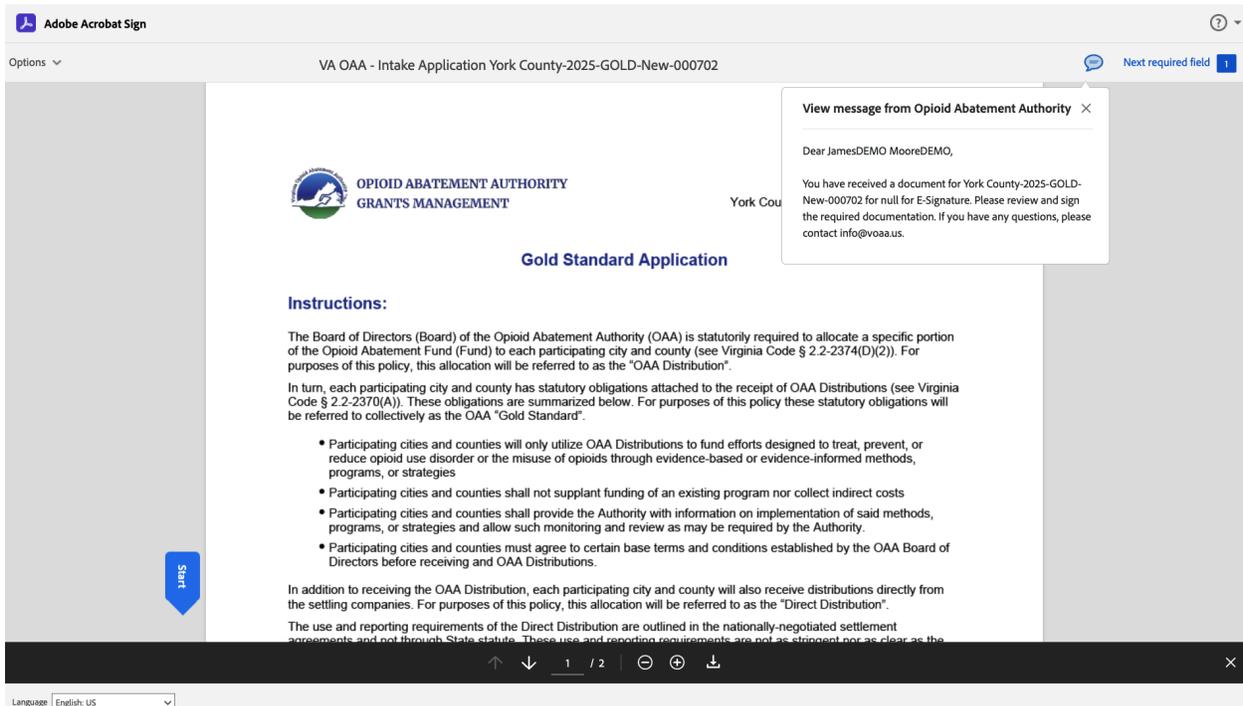
You will receive another Gold Standard Incentive E-Signature email for Submit. The email will resemble this:



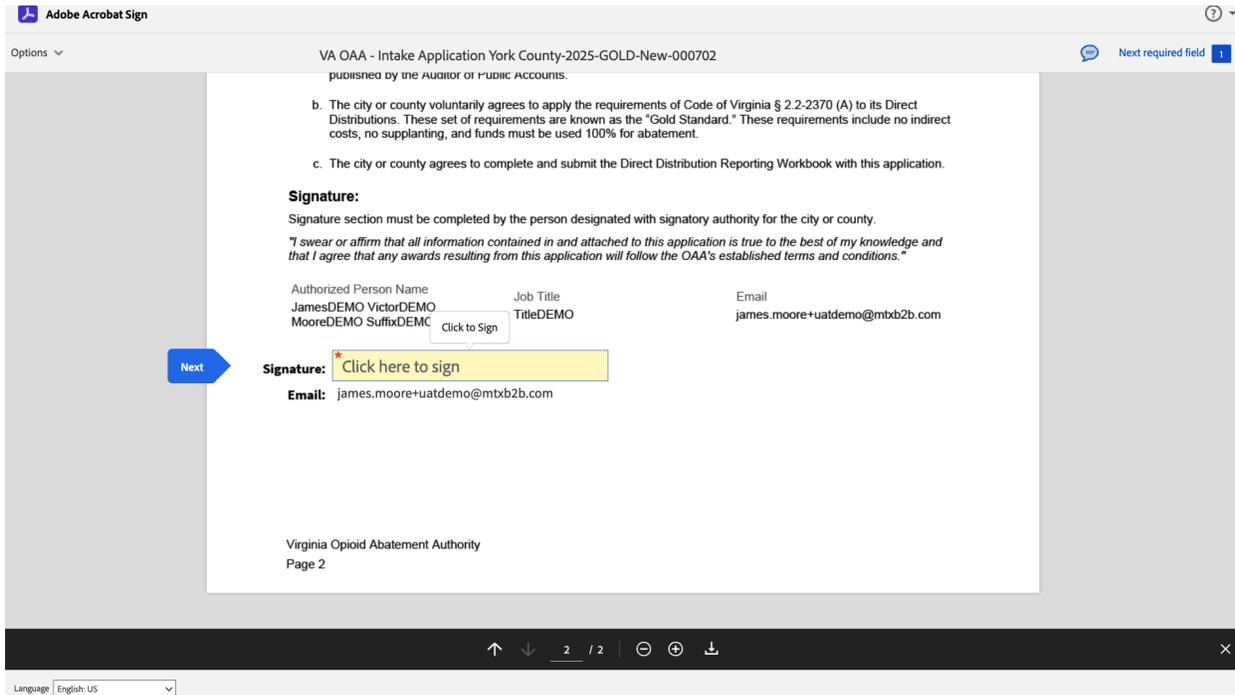
Clicking the Review and sign” button on the email will open this page for the “Gold Standard” Incentive Application Submittal Signature:



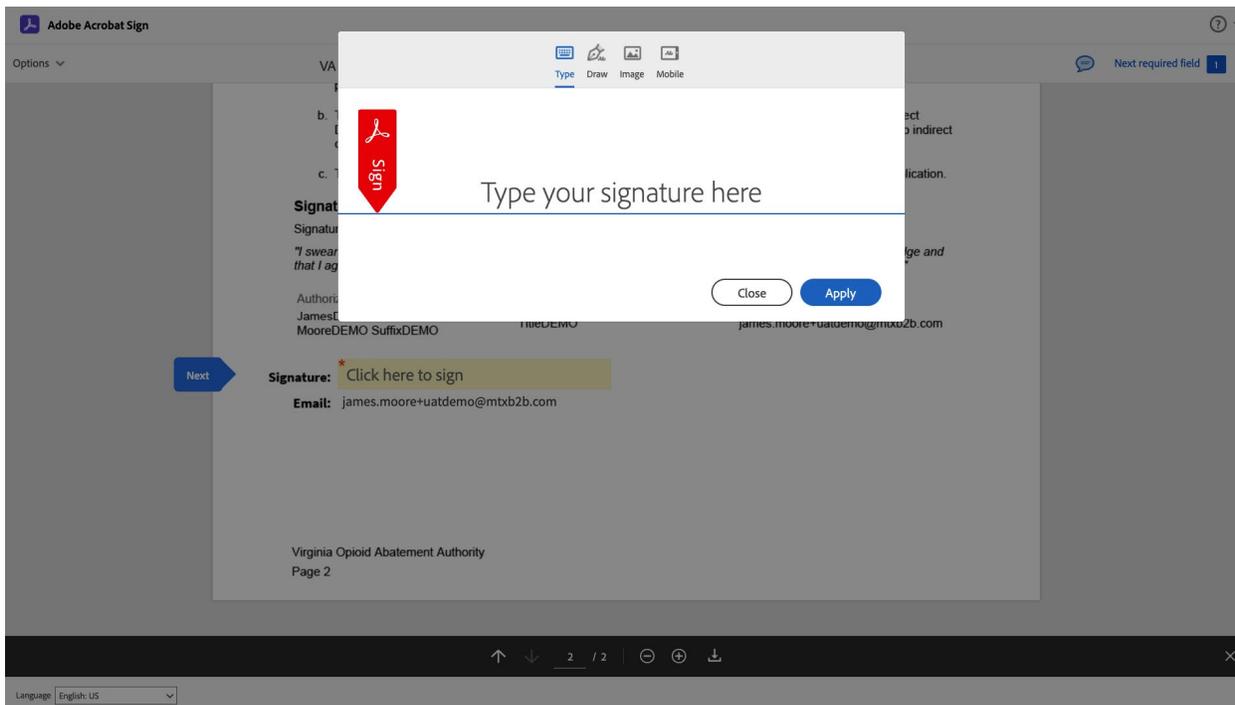
You will need to click the “Continue” button to review the document and the begin the E-Signature process:



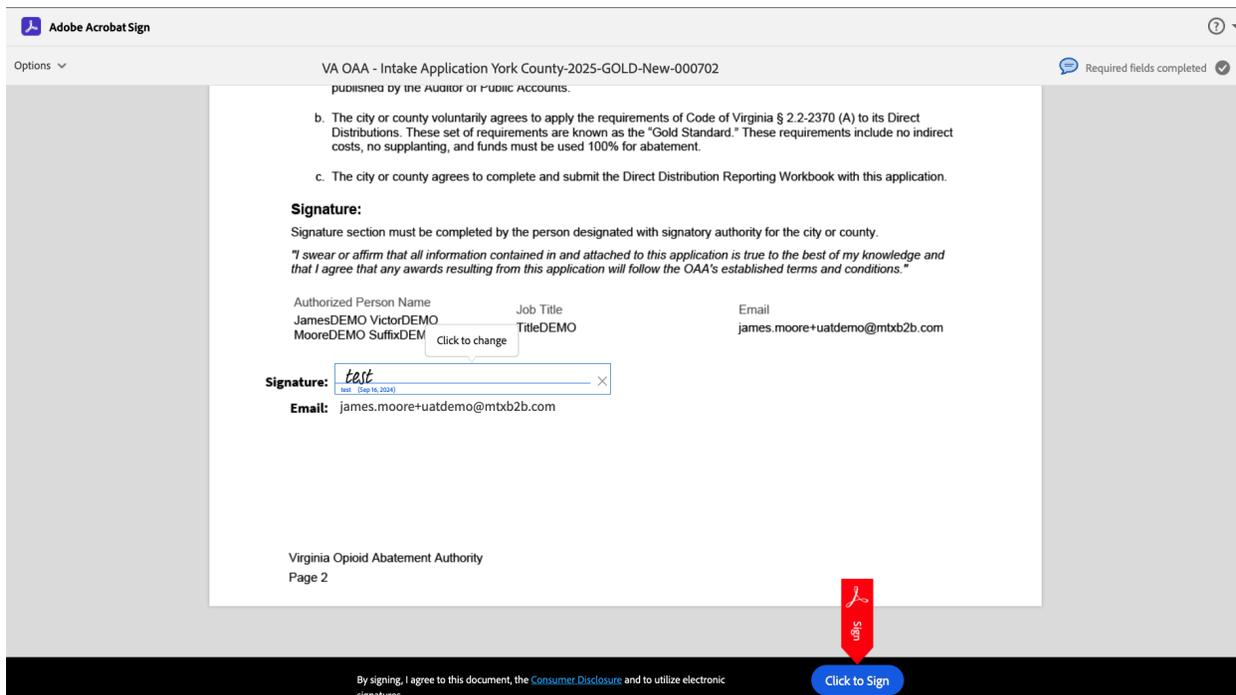
Then you will need to click the “Start” button at the bottom of screen:



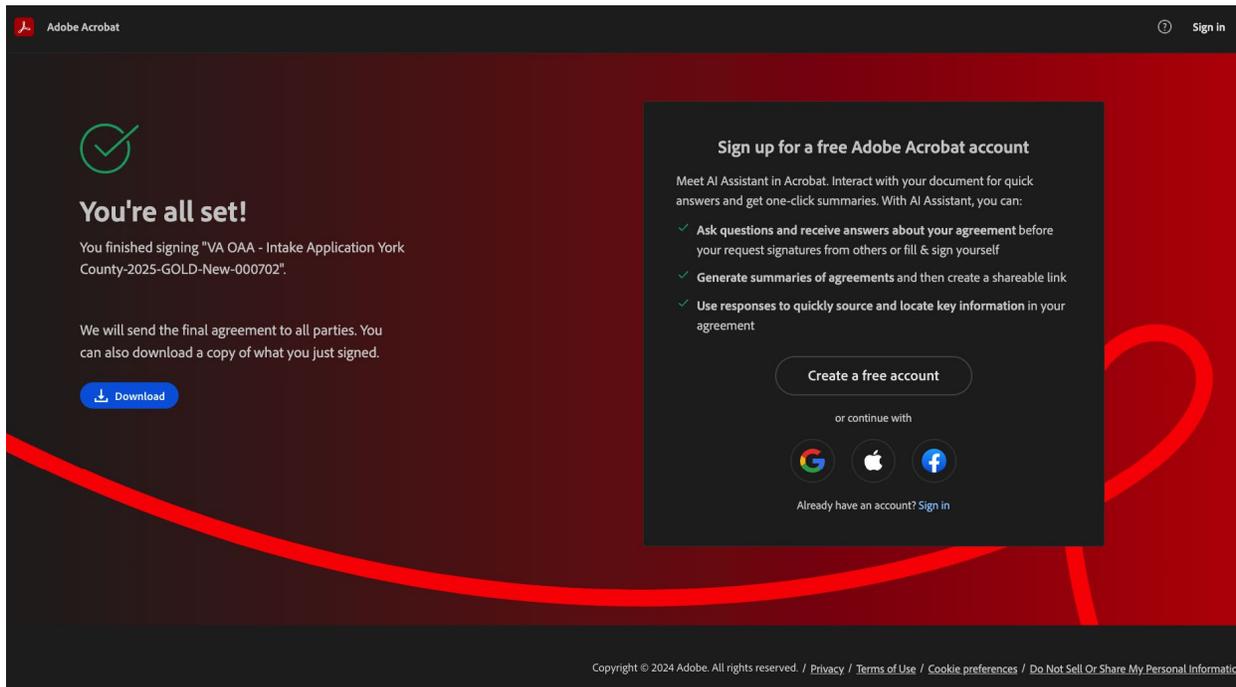
From here you will click the Signature field where it says “Click here to sign” and the following page will appear:



Complete your E-Signature and click the “Apply” button so you can view your signature populated on the document:



Click on the “Click to Sign” button to complete the process. This page will be displayed and you will receive an email confirmation:



There is no need to sign in to Adobe or to create an account. You can click the “Download” button to get a copy of the document as a PDF or you can find the copy attached to the confirmation email.





## INDIVIDUAL GRANT APPLICATION PROCESS

The Individual Grant is specific to a single City and County who applies for an Individual Grant Application. If your City or County are listed in many Individual Grants, you may wish to use the Search with Application Name feature in the upper right hand corner. The table displaying the results will only display matching application names if that feature is used, otherwise all Individual Grant Applications with your Locality as a will be displayed.

### SELECT AN INDIVIDUAL GRANT:

The Individual Grant must be in a period where it is available for application, amendment, or renewal. This is indicated by the dates displayed on the Grant Dashboard for New, Renewal and Amend Applications.

The screenshot shows the OAA Grants Management interface. At the top, it says "OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT" and "Highland County" with a user profile "James DEMO Moore DEMO". A sidebar on the left contains navigation options: Dashboard, Grants Management (selected), Members, Historical Downloads, Estimated Funds Look-Up Tool, and COOP Partner Dashboard. The main content area is titled "Grants Management" and includes a search bar. Two grant cards are visible:

- OAA Individual City/County Distribution Grant - 2025** (Status: Open)
 

Fiscal Year	New Application	Renewal Application	Amend Application	Annual Reporting
2025	Open Date: 8/1/2024 Due Date: 9/30/2024	Open Date: 7/29/2024 Due Date: 10/16/2024	Open Date: 7/30/2024 Due Date: 10/3/2024	Open Date: 7/28/2024 Due Date: 11/1/2024
- OAA Individual City/County Distribution Grant - 2026** (Status: Open)
 

Fiscal Year	New Application	Renewal Application	Amend Application	Annual Reporting
2026	Open Date: 8/18/2024 Due Date: 9/30/2024	Open Date: 8/18/2024 Due Date: 9/30/2024	Open Date: 8/13/2024 Due Date: 9/30/2024	Open Date: 8/13/2024 Due Date: 9/30/2024

Each card includes a "Start Annual Reporting" button and an "Apply" button. A "Purpose" section is provided for each grant, and a "View Details" link is available. Contact information "info@voaa.us" and a "Download Terms & Conditions" link are also present.

After you click the "Apply" button this popup will be displayed. If this is your first time applying for that grant you would need to select the Application Type as "New", if you are updating an existing Grant you would need to select the Application Type as "Amendment" and if you are applying for another year for this grant you would need

to select “[Renew](#)”. Please **note**: Based on the dates displayed on the Grants Management page you might not see all those application type options. Also, there is a requirement to provide an Annual Report which is accessed only by selecting the “[Start Annual Reporting](#)” button on the Grants Management page for your previously awarded Grant.

The screenshot shows the 'Grants Management' interface. A modal window is open for the 'OAA Individual City/County Distribution Grant - 2025'. The modal title is 'OAA Individual City/County Distribution Grant - 2025'. Below the title, it states: 'Asterisk (\*) indicates required field'. The main text reads: 'The Opioid Abatement Authority (OAA) is committed to working with cities, counties, and state agencies to assist in utilizing opioid settlement funds to help save lives in communities across the Commonwealth. Once you have started your application, please review the instructions carefully and if you have any questions, reach out to us at [info@voaa.us](mailto:info@voaa.us) and someone will be glad to assist.' Below this text is the 'Application Type' section with three radio buttons: 'New', 'Amendment', and 'Renew'. The 'Start' button is highlighted in blue. The background shows the 'Grants Management' page with a search bar and a table of grants.

Clicking Start after you select “New”, “Amendment” or “Renewal” will begin the application process.

Navigation:

After the Grant Application loads there will be a number of steps noted below, those steps are listed vertically on the left hand side of the page. At the bottom of the page on the right hand side is a “**Next**” button which will save your information and advance to the next step in the application process. After the initial step there will be another “**Previous**” button that will go back to the previous step, selecting this button will not save any information on the current application step. The “**Next**” button will be replaced by a “**Save & Next**” button with the same functionality. On the bottom left of most pages will be an “**Exit**” button, please note that using this will not save any new information since the last “**Save & Next**”. You will not be able to advance to the next step if there are any required fields that have not been completed or filled out.

**INSTRUCTIONS:**

Please read and review the instructions displayed on the first page of this application.

The screenshot shows the OAA Grants Management portal interface. At the top, there is a header with the Opioid Abatement Authority logo and 'GRANTS MANAGEMENT'. Below this, a navigation bar shows 'Highland County' and a user profile 'JamesDEMO MooreDEMO'. A breadcrumb trail reads 'Back to dashboard > OAA Individual City/County Distribution Grant - 2025 | Highland County-2025-IDIC-New-000691' with a 'Download Application' link. On the left is a vertical sidebar with a list of steps: Instructions (selected), Contact Information, Distribution Information, Gold Standard, Project Proposal, Budget - Personnel Expenditures, Budget - Operating & Capital Expenditures, Budget Overview, Performance Measurement, Objectives, Reference Information, and Signature. The main content area is titled 'Instructions' and contains the following text:

The Virginia Opioid Abatement Authority's (OAA's) Individual Distribution and "Gold Standard" Incentive grant awards for cities and counties come from the Opioid Abatement Fund. The contents of this application are for cities and counties applying for awards for NEW Individual Distribution and "Gold Standard" Incentive projects from the OAA in compliance with the national settlement agreements, Commonwealth's memorandum of understanding (MOU), and Code of Virginia.

OAA awards to cities and counties have a performance period of one year. Reporting is on an annual basis and is due on September 1 following the close of the performance period. Recipients must submit yearly requests to renew and/or make any amendments to the next fiscal year's funding.

Below is a list of items to consider that will be necessary to complete the application. Additional guidance, [terms and conditions](#) for the awards, and [resources](#) can be found on OAA's website.

- Direct Distribution Information (amounts received, used for non-OAA projects, held in reserve)
- Project budget (including matching funds, requesting funds, and expenditures)
- Project objectives and projected start and completion dates
- Project performance measures (a list to performance measures can be found [here](#))
- Contract(s)/MOU(s) with partners/contractors/subrecipients (or drafts or scopes of work)
- Supporting evidence-based documentation/web link
- Supporting evidence-informed documentation/web link
- Supporting documentation if project has received any awards or recognition
- Optional: Gold Standard Incentive application
  - If the city/county has already opted into the Gold Standard, no further action is required.
  - This can also be completed separately by going to the Grants Management section of the OAA Grants Management Portal and selecting Gold Standard Grant
- Optional: Any letters of support, articles, or other items that may assist the OAA Grants Committee in making an award decision for this project.

For any applications the OAA determines do not meet the established requirements, the OAA will assist the applicant to revise the application to facilitate compliance. For any Individual Distribution applications where the OAA Grants Committee recommends denial, the applicant will have the opportunity to present an appeal to the OAA Board of Directors before the final decision is made.

A blue 'Next' button is located at the bottom right of the main content area.

**CONTACT INFORMATION:**

This step is where you must specify a Contact for the Individual Grant Application. This is the contact information for the person who will complete the application process and provide the requested information on the following steps. You may add a new Fiscal Agent by selecting the "Invite New User" option and providing their contact information so the system can send them an email to login to the portal or you may add any current contact related to your city or county by selecting the "Add Existing Contact" and then select the appropriate person's name to be the Fiscal Agent.

Contact Information

Asterisk (\*) indicates required field

Name of City or County: Highland County; City or County: County

Address Information

Physical Address Information

Physical Street Address 1: 1223 test; Physical Street Address 2: ; City: test; State: Virginia; Zip/Postal Code: 65465; Country: U.S.A

Mailing Address Information

Same as Physical Address

Mailing Street Address 1: 1223 test; Mailing Street Address 2: ; City: test; State: Virginia; Zip/Postal Code: 65465; Country: U.S.A

Contact Person for this Application

This should be someone who can answer programmatic and financial questions regarding the application and does not have to be the signer of the application or the city/county executive.

Do you want to add existing contact or want to invite new user?

Add Existing Contact; Invite New User

Exit

Previous

Save & Next

Add Existing Contact option

Contact Person for this Application

This should be someone who can answer programmatic and financial questions regarding the application and does not have to be the signer of the application or the city/county executive.

Do you want to add existing contact or want to invite new user?

Add Existing Contact; Invite New User

Name

Select an Option

First Name; Middle Name; Last Name

Job Title; Office Phone; Cell Phone

Suffix; Email

Exit

Previous

Save & Next

Invite New User option

**Contact Person for this Application**

ⓘ This should be someone who can answer programmatic and financial questions regarding the application and does not have to be the signer of the application or the city/county executive.

\*Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

<small>*First Name</small>	<small>Middle Name</small>	<small>*Last Name</small>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<small>*Job Title</small>	<small>Office Phone</small>	<small>Cell Phone</small>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<small>Suffix</small>	<small>*Email</small>	
<input type="text"/>	<input type="text"/>	

Exit

Previous

Save & Next

After the required information is added, you can use the “Save & Next” button to advance the application to the next step.

**DISTRIBUTION INFORMATIONS:**

This is the step where you add Distribution Information.

You can specify Direct Distribution Information per Fiscal Year and allocate “Amounts Expended towards OAA Projects” and/or “Amounts Expended towards Non-OAA Projects” and/or “Amounts Held in Reserve”. Use the checkbox next to the Fiscal Year you want to update and click the “Edit” button or use the “Add New” button to create a new row for a Fiscal Year, then enter the amounts. You could also use the “Delete” button to remove a row.

You can also specify Direct Distribution for Non-OAA Projects by editing the rows by checkbox next to the Project you want to update and click the “Edit” button or use the “Add New” button to create a new row for a Project, then enter the “Amount Allocated/Spent”, “Starting Date” / “Ending Date” and a “Brief Description of Project” and also specify “Does the project continue into the next year?” by checking a box.. You could also use the “Delete” button to remove a row.

Next answer the required questions. After the information is added, you can use the “Save & Next” button to advance the application to the next step.

**Distribution Information**

Asterisk (\*) indicates required field

**Direct Distribution Information**

[Edit](#) [Delete](#) [+ Add New](#)

Fiscal Year	Received Amount	Expended towards OAA Projects	Expended towards Non-OAA Projects	Amounts Held In Reserve
<input type="checkbox"/> 2025	\$2,304.56	\$2,000.00	\$300.00	\$4.56
<b>Total</b>	<b>\$2,304.56</b>	<b>\$2,000.00</b>	<b>\$300.00</b>	<b>\$4.56</b>

**Direct Distribution – Non OAA Project(s) Overview**

[Edit](#) [Delete](#) [+ Add New](#)

Name of Project	Amount Allocated/Spent	Starting Date	Ending Date	Brief Description of Project	Does this project continue into the next year?
<input type="checkbox"/> test	\$300.00	8/1/2024	8/6/2024	test	<input type="checkbox"/>
<b>Total</b>	<b>\$300.00</b>				

**ⓘ** If you are using Direct Distribution funds for Non-OAA projects, please describe the project(s) below. If you do not have any Non-OAA projects, this table can be skipped. (click "Add New" to view and begin)

\*Does the city or county intend to reserve any portion of its direct distributions from FY2023, FY2024, and/or FY2025 for future year abatement efforts?

Yes  No

\*If yes, the city or county must (1) ensure those future projects meet the terms of the settlement(s), (2) separately account for the direct distribution, the OAA distribution, and the reserved amount (3) publicly publish the projected financial strategy for this reserve fund, and (4) if the city or county is participating in the OAA's "Gold Standard" Incentive program, the reserved funds may only be used in accordance with the "Gold Standard" as described in the OAA's Incentive Policy. Utilize the space below to describe the methodology for the reserve and how this will be publicly posted.

[Exit](#)

[Previous](#)

[Save & Next](#)

**GOLD STANDARD:**

This optional step can be used to apply for the Gold Standard. If your City or County is already eligible for the Gold Standard then you will not see this step. If that is the case then this is what the page will look like:

**Gold Standard**

Asterisk (\*) indicates required field

**ⓘ** Your city/county has already opted into the Gold Standard. Please select Save & Next.

\*Does the city or county intend to apply for the OAA's city or county "Gold Standard" Incentive program?

Yes  No

[Exit](#)

[Previous](#)

[Save & Next](#)

If you have not previously opted into the Gold Standard then this is what the page will look like:

## Gold Standard

Asterisk (\*) indicates required field

**Gold Standard application must be completed and e-signed before continuing the application.**

\* Does the city or county intend to apply for the OAA's city or county "Gold Standard" Incentive program?  
 Yes  No

Exit

Previous

Save & Next

After selecting the "Yes" option you will need to answer additional questions as shown below:

## Gold Standard

Asterisk (\*) indicates required field

**Gold Standard application must be completed and e-signed before continuing the application.**

\* Does the city or county intend to apply for the OAA's city or county "Gold Standard" Incentive program?  
 Yes  No

The governing body of the city or county named in this application is applying to the OAA to be designated as an OAA "Gold Standard" City or County. OAA "Gold Standard" Cities and Counties are eligible to receive an incentive that increases the city or county's OAA Individual Distribution by 25% for the duration that incentive funds are available. To qualify, the city or county agrees to the terms and conditions set forth for the OAA Individual Distributions to Cities and Counties as well as the following requirements:

- a. The city or county will create and maintain separate accounting records for funds received from the OAA Individual Distribution and from Direct Distribution from the settlement administrators in accordance with relevant guidance published by the Auditor of Public Accounts.
- b. The city or county voluntarily agrees to apply the requirements of Code of Virginia § 2.2-2370 (A) to its Direct Distributions. These set of requirements are known as the "Gold Standard." These requirements include no indirect costs, no supplanting, and funds must be used 100% for abatement.
- c. The city or county agrees to complete and submit the Direct Distribution Reporting Workbook with this application.

\* I Agree

**Please enter Authorized Official (city/county executive or designee) details and click on Send Email button. They should receive an email for E-Signature and once completed you'll be able to submit application.**

\* Do you want to add existing contact or want to invite new user?  
 Add Existing Contact  Invite New User

E-Sign Completion Status  
New

Send Email

Exit

Previous

Save & Next

OAA Staff will review your Gold Standard request as part of your application when it is submitted. Note: Alternatively you can select to apply for Gold Standard separately before you create any other Grant Applications.

After you have completed the questions you will need to either select the "Add Existing Contact" option or the "Invite New User" option.

"Add Existing Contact" option (select the Existing User's Name from the list):

Counties as well as the following requirements:

- a. The city or county will create and maintain separate accounting records for funds received from the OAA Individual Distribution and from Direct Distribution from the settlement administrators in accordance with relevant guidance published by the Auditor of Public Accounts.
- b. The city or county voluntarily agrees to apply the requirements of Code of Virginia § 2.2-2370 (A) to its Direct Distributions. These set of requirements are known as the "Gold Standard." These requirements include no indirect costs, no supplanting, and funds must be used 100% for abatement.
- c. The city or county agrees to complete and submit the Direct Distribution Reporting Workbook with this application.

I Agree

**Please enter Authorized Official (city/county executive or designee) details and click on Send Email button. They should receive an email for E-Signature and once completed you'll be able to submit application.**

\* Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

\* Search for Authorized Member Contact

Select an Option ▼

* First Name	Middle Name	* Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
* Job Title	Office Phone	Cell Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>
Suffix	* Email	
<input type="text"/>	<input type="text"/>	

E-Sign Completion Status  
New

Send Email

Exit

Previous

Save & Next

### “Invite New User” option (enter all the required contact field information):

\* Does the city or county intend to apply for the OAA's city or county "Gold Standard" Incentive program?

Yes  No

The governing body of the city or county named in this application is applying to the OAA to be designated as an OAA "Gold Standard" City or County. OAA "Gold Standard" Cities and Counties are eligible to receive an incentive that increases the city or county's OAA Individual Distribution by 25% for the duration that incentive funds are available. To qualify, the city or county agrees to the terms and conditions set forth for the OAA Individual Distributions to Cities and Counties as well as the following requirements:

- a. The city or county will create and maintain separate accounting records for funds received from the OAA Individual Distribution and from Direct Distribution from the settlement administrators in accordance with relevant guidance published by the Auditor of Public Accounts.
- b. The city or county voluntarily agrees to apply the requirements of Code of Virginia § 2.2-2370 (A) to its Direct Distributions. These set of requirements are known as the "Gold Standard." These requirements include no indirect costs, no supplanting, and funds must be used 100% for abatement.
- c. The city or county agrees to complete and submit the Direct Distribution Reporting Workbook with this application.

I Agree

**Please enter Authorized Official (city/county executive or designee) details and click on Send Email button. They should receive an email for E-Signature and once completed you'll be able to submit application.**

\* Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

* First Name	Middle Name	* Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
* Job Title	Office Phone	Cell Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>
Suffix	* Email	
<input type="text"/>	<input type="text"/>	

E-Sign Completion Status  
New

Send Email

Exit

Previous

Save & Next

After you add a new user and select the “Send Email” button the user will receive email notification and you will see the following screen (with the “E-Sign Completion Status Pending”):

\* Does the city or county intend to apply for the OAA's city or county "Gold Standard" Incentive program?

Yes  No

The governing body of the city or county named in this application is applying to the OAA to be designated as an OAA "Gold Standard" City or County. OAA "Gold Standard" Cities and Counties are eligible to receive an incentive that increases the city or county's OAA Individual Distribution by 25% for the duration that incentive funds are available. To qualify, the city or county agrees to the terms and conditions set forth for the OAA Individual Distributions to Cities and Counties as well as the following requirements:

- a. The city or county will create and maintain separate accounting records for funds received from the OAA Individual Distribution and from Direct Distribution from the settlement administrators in accordance with relevant guidance published by the Auditor of Public Accounts.
- b. The city or county voluntarily agrees to apply the requirements of Code of Virginia § 2.2-2370 (A) to its Direct Distributions. These set of requirements are known as the "Gold Standard." These requirements include no indirect costs, no supplanting, and funds must be used 100% for abatement.
- c. The city or county agrees to complete and submit the Direct Distribution Reporting Workbook with this application.

\* I Agree

**Please enter Authorized Official (city/county executive or designee) details and click on Send Email button. They should receive an email for E-Signature and once completed you'll be able to submit application.**

\* Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

\* Search for Authorized Member Contact

Rusty Clarke Grisworld

\* First Name

Rusty

Middle Name

Clarke

\* Last Name

Grisworld

\* Job Title

Lucky

Office Phone

Cell Phone

Suffix

\* Email

james.moore+lucky@mtxb2b.com

E-Sign Completion Status

**Pending**

**Send Email**

Example of E-Signature Email:

---

**[External Message] Signature requested on "VA OAA - Gold Agreement Clarke County-2025-IDIC-New-000692"**

1 message

---

**Opioid Abatement Authority via Adobe Acrobat Sign** <adobesign@adobesign.com>  
Reply-To: Opioid Abatement Authority <cmoisan@voaa.us>  
To: "james.moore+lucky@mtxb2b.com" <james.moore+lucky@mtxb2b.com>

Thu, Sep 12, 2024 at 7:50 AM



Opioid Abatement Authority requests your signature  
on  
**VA OAA - Gold Agreement Clarke County-2025-IDIC-  
New-000692**

[Review and sign](#)

---

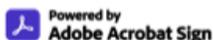
Dear Rusty Grisworld,

You have received a Gold Agreement for E-Signature. Please review and sign the required documentation. If you have any questions, please contact [info@voaa.us](mailto:info@voaa.us).

---

After you sign **VA OAA - Gold Agreement Clarke County-2025-IDIC-New-000692**, all parties will receive a final PDF copy.

**Don't forward this email:** If you don't want to sign, you can [delegate](#) to someone else.



By proceeding, you agree that this agreement may be signed using electronic or handwritten signatures.

To ensure that you continue receiving our emails, please add [adobesign@adobesign.com](mailto:adobesign@adobesign.com) to your address book or safe list.

---

© 2024 Adobe. All rights reserved.

After the Authorized Official user is added and has completed the E-Sign, you can use the "Save & Next" button to advance the application to the next step. Note: You

may need to leave the application and return later to see the E-Sign Completion Status changed based on the amount of time it takes them to complete the application E-Sign for Gold Standard. Completed E-Signature for Gold Standard:

Yes  No

The governing body of the city or county named in this application is applying to the OAA to be designated as an OAA "Gold Standard" City or County. OAA "Gold Standard" Cities and Counties are eligible to receive an incentive that increases the city or county's OAA Individual Distribution by 25% for the duration that incentive funds are available. To qualify, the city or county agrees to the terms and conditions set forth for the OAA Individual Distributions to Cities and Counties as well as the following requirements:

a. The city or county will create and maintain separate accounting records for funds received from the OAA Individual Distribution and from Direct Distribution from the settlement administrators in accordance with relevant guidance published by the Auditor of Public Accounts.

b. The city or county voluntarily agrees to apply the requirements of Code of Virginia § 2.2-2370 (A) to its Direct Distributions. These set of requirements are known as the "Gold Standard." These requirements include no indirect costs, no supplanting, and funds must be used 100% for abatement.

c. The city or county agrees to complete and submit the Direct Distribution Reporting Workbook with this application.

I Agree

**Please enter Authorized Official (city/county executive or designee) details and click on Send Email button. They should receive an email for E-Signature and once completed you'll be able to submit application.**

\* Do you want to add existing contact or want to invite new user?  
 Add Existing Contact  Invite New User

\* Search for Authorized Member Contact

* First Name <input type="text" value="Rusty"/>	Middle Name <input type="text" value="Clarke"/>	* Last Name <input type="text" value="Grisworld"/>
* Job Title <input type="text" value="Lucky"/>	Office Phone <input type="text"/>	Cell Phone <input type="text"/>
Suffix <input type="text"/>	* Email <input type="text" value="james.moore+lucky@mtxb2b.com"/>	

E-Sign Completion Status  
**Completed**

[Send Email](#)

[Exit](#) [Previous](#) [Save & Next](#)

## PROJECT PROPOSAL:

Provide the required information such as the "Project Name" and "Provide a brief narrative description of the proposed project." You will also need to provide a Contact Person, you may "Add Existing Contact" or "Invite New User", this person will be the primary contact for the Individual Grant Application. Finally, provide the requested financial information and describe any other organizations involved in this project.

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Clarke County Rusty Grisworld

← Back to dashboard OAA Individual City/County Distribution Grant - 2025 | Clarke County-2025-IDIC-New-000692 Download Application

- Instructions
- Contact Information
- Distribution Information
- Gold Standard
- Project Proposal**
- Budget - Personnel Expenditures
- Budget - Operating & Capital Expenditures
- Budget Overview
- Performance Measurement
- Objectives
- Reference Information
- Signature

### Project Proposal

Complete the information below for the project the city or county is requesting to be funded.

**Asterisk (\*) indicates required field**

Name of City or County  
Clarke County

\*Project Name  
test

#### Contact Person for this Project

**This should be someone who can answer programmatic and financial questions regarding the project and does not have to be the signer of the application, the city/county executive, or the contact person for the application.**

Do you want to add existing contact or want to invite new user?  
 Add Existing Contact  Invite New User

\*Which of the following criteria does the project meet?  
 A new effort for the agency.  
 A proposed supplement or enhancement to a project or effort that is already in place.  
 A combination of enhancing an existing project/effort with new components.

\*Provide a brief narrative description of the proposed project.

**The following financial questions will be filled automatically based on what is entered in the 'Budget' sections for the first year of the project.**

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Clarke County Rusty Grisworld

← Back to dashboard OAA Individual City/County Distribution Grant - 2025 | Clarke County-2025-IDIC-New-000692 Download Application

**The following financial questions will be filled automatically based on what is entered in the 'Budget' sections for the first year of the project.**

What is the total cost of the proposed project?  
\$0.00

Amount of Individual Distribution Funds requested for the proposed project.  
\$0.00

Amount of "Gold Standard Funds" Incentive requested for the proposed project.  
\$0.00

Amount of any matching funds pledged toward the project:

Fund Source	Amount
Direct Distribution	\$0.00

\*What is the strategy for long-term sustainability once OAA funds are reduced or no longer available?

\*How was the need determined and how does that need relate to abatement?

\*Briefly describe the organization(s), including any sub-recipients or contractors (if known) that will be involved in this project. Attach any contracts and/or memoranda of understanding/agreement. If not fully executed, a draft or a narrative describing the scope of services may suffice.

**If this project does not include any other organizations, sub-recipients, or contractors, select "Add New" and enter "N/A" under organization and description of role, "\$0.00" under amount of funding and "Other" as entity type to continue.**

[Edit](#) [Delete](#) [Add New](#)

You are required to provide at least one organization:

Briefly describe the organization(s), including any sub-recipients or contractors (if known) that will be involved in this project. Attach any contracts and/or memoranda of understanding/agreement. If not fully executed, a draft or a narrative describing the scope of services may suffice.

If this project does not include any other organizations, sub-recipients, or contractors, select "Add New" and enter "N/A" under organization and description of role, "\$0.00" under amount of funding and "Other" as entity type to complete this section.

**Add Organization**

Asterisk (\*) indicates required field

\*Name of Organization: Test Org      \*Amount of Funding: \$100.00      \*Entity Type: Community Service Board

\*Description of Role: test

Document Name

Attach Document

Upload Files Or drop files

✓ 1.5 days now or 2.0 days later.png

Cancel Save

Exit Previous Save & Next

Once all questions are answered and the required information is provided then you can use the **"Save & Next"** button to advance the application to the next step.

### BUDGET – PERSONNEL EXPENDITURES:

On this page you will provide the budget information for Salaried Staff and Hourly Staff. This information will be used in the calculation of the anticipated amounts of expenditures for Personnel. Note: The Salaried Staff allows you to enter the Benefits amounts but the Hourly staff calculates from the Benefits amounts for you based on a 30% standard. The application will calculate the totals and grand totals using the information.

**Budget – Personnel Expenditures**

Asterisk (\*) indicates required field

**New Salaried Staff**

[Edit](#) [Delete](#) [Add New](#)

Position Type/Description	FY 2025				FY 2026				FY 2027				FY 2028				FY 2029			
	# of FTEs	Salary	Benefits	Total	# of FTEs	Salary	Benefits	Total	# of FTEs	Salary	Benefits	Total	# of FTEs	Salary	Benefits	Total	# of FTEs	Salary	Benefits	Total
Total Salaried Staff	0	N/A	N/A	\$0.00																

Include any positions that will be directly funded by the grant for the recipient city or county. (click "Add New" to begin)

**New Hourly/Wage/Part-time Staff**

[Edit](#) [Delete](#) [Add New](#)

Position Type/Description	FY 2025				FY 2026				FY 2027				FY 2028				FY 2029			
	# of Wage or PT	S Rate	# of Hours	Total (Includes FICA)	# of Wage or PT	S Rate	# of Hours	Total (Includes FICA)	# of Wage or PT	S Rate	# of Hours	Total (Includes FICA)	# of Wage or PT	S Rate	# of Hours	Total (Includes FICA)	# of Wage or PT	S Rate	# of Hours	Total (Includes FICA)
Total Hourly/Wage/Part-time Staff	0	N/A	N/A	\$0.00																

Include any wage positions that will be directly funded by the grant for the recipient city or county. (click "Add New" to begin)

**Grand Total**

	FY 2025		FY 2026		FY 2027		FY 2028		FY 2029	
	# of Staff	Grand Total								
Grand Total	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00

[Exit](#)

[Previous](#)

[Save & Next](#)

After entering the required information is provided then you can use the **“Save & Next”** button to advance the application to the next step.

**BUDGET – OPERATING & CAPITAL EXPENDITURES:**

On this page you will provide the budget information for Operating Expenses and Capital Expenses. This information will be used in the calculation of the anticipated amounts of expenditures for Operating & Capital Expenditures.

Note: Operating Expenses should include any administrative expenses, sub-recipients, and contracts. Operating Expenses should not be used to track indirect costs for the recipient city or county. Capital Expenses should only include... get from the client.

Budget – Operating & Capital Expenditures

Asterisk (\*) indicates required field

New Operating Expenses

[Edit](#) [Delete](#) [+ Add New](#)

Item Description	FY 2025			FY 2026			FY 2027			FY 2028			FY 2029		
	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total
Total Operating Expenses	0	N/A	\$0.00												

Include any administrative expenses, sub-recipients, and contracts. Indirect costs are not allowed for the recipient city or county. (click "Add New" to begin)

New Capital Expenses

[Edit](#) [Delete](#) [+ Add New](#)

Item Description	FY 2025			FY 2026			FY 2027			FY 2028			FY 2029		
	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total
Total Capital Expenses	0	N/A	\$0.00												

Capital expenditures should only include:

Grand Total

	FY 2025			FY 2026			FY 2027			FY 2028			FY 2029		
	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total
Grand Total	N/A	N/A	\$0.00												

[Exit](#)

[Previous](#) [Save & Next](#)

After entering the required information is provided then you can use the “Save & Next” button to advance the application to the next step.

**BUDGET OVERVIEW:**

On this page you may enter the Revenue anticipated for this Individual Grants Application. This must be separated into Non-OAA Matching Funds such as Direct Distributions and into OAA Requested Funding Sources (Individual , Individual Distribution, Gold Standard). The system will calculate the Revenue Grand Totals for your application and it will display the totals from the Expenses.

**Budget Overview**

Complete the budget information below for the project that locality (City/County/State Agency) is requesting to be funded.

**Warning!** (\*) indicates required field

**Revenue**

**Non-OAA Matching Funds**

Please enter any matching funds (Direct Distribution - Offset).

[Add](#) [Delete](#) [Add New](#)

\* In order to use Direct Distribution as a matching fund, check the box next to Direct Distributions and select Edit. Additional sources may be added as well using Add New.

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
Non-OAA Matching Funds	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
<input type="checkbox"/> Direct Distribution	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total Non-OAA Funding Sources</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**OAA Requested Funding Sources**

Enter the amount of individual Distributions (and Standard Funds you'd like to request, check the box of the intended fund source and select Edit).

[Add](#)

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
OAA Requested Funding Sources	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
<input type="checkbox"/> Individual Distributions (ID)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<input type="checkbox"/> Grant Standard Distributions	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total OAA Funding Sources</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**Revenue Grand Total**

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
Revenue Grand Total	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**Expenses**

Expenses are profiled from the Budget Expenditure sections, to edit select Previous and edit in the appropriate section.

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
Expenses	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
Personnel-related	\$2.43	\$2.43	\$2.43	\$2.43	\$2.43
<b>Total Expenses</b>	<b>\$2.43</b>	<b>\$2.43</b>	<b>\$2.43</b>	<b>\$2.43</b>	<b>\$2.43</b>

**Total Requested Amount from the OAA**

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
Total Requested Amount from the OAA	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
	\$2.43	\$2.43	\$2.43	\$2.43	\$2.43

[Exit](#)

[Previous](#)

[Save & Next](#)

Please note you will be presented with this error message: "Total Requested Amount must be the exact match of the Total OAA Requested Funding Source." If you see this result you may need to make some adjustments to either your Expenses or your Revenues when both are equal the error message will no longer be displayed. See sample of error message below:

Total Requested Amount must be the exact match of the Total OAA Requested Funding Source.

**PERFORMANCE MEASUREMENT:**

On this page you will be able to enter your performance measurement goals per Fiscal Year (you must enter at least one Performance Measurement for one Fiscal Year):


OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

 Clarke County ▾ Rusty Grisworld ▾

[← Back to dashboard](#)
OAA Individual City/County Distribution Grant - 2025 | Clarke County-2025-IDIC-New-000692

[Download Application](#)

- Instructions
- Contact Information
- Distribution Information
- Gold Standard
- Project Proposal
- Budget - Personnel Expenditures
- Budget - Operating & Capital Expenditures
- Budget Overview
- Performance Measurement
- Objectives
- Reference Information
- Signature

## Performance Measurement

Enter the applicable measures for this project (number of people projected to participate) under the corresponding fiscal year. At least 1 is required for each year that the project is intending to request funding. Additional performance measures that are not pre-populated here can be added at the bottom of this page under "Other".

**Asterisk (\*) indicates required field**

### Prevention/Education/Awareness Efforts

Position Type/Description	FY 25	FY 26	FY 27	FY 28	FY 29
No. of children, infant to 5 years old, participating in prevention/education programming	<input type="text" value="0"/>				
No. children, elementary school age, participating in prevention/education programming	<input type="text" value="0"/>				
No. of children, middle school age, participating in prevention/education programming	<input type="text" value="0"/>				
No. of children, high school age, participating in prevention/education programming	<input type="text" value="0"/>				
No. adults from the general public participating in prevention/education programming	<input type="text" value="0"/>				
No. of pregnant and/or nursing women participating in prevention/education programming	<input type="text" value="0"/>				
No. of teachers participating in prevention/education programming	<input type="text" value="0"/>				
No. of health care professionals participating in prevention/education programming	<input type="text" value="0"/>				
No. of law enforcement officers participating in prevention/education programming	<input type="text" value="0"/>				

**NOTE:** Enter the applicable measures for this project (number of people projected to participate) under the corresponding fiscal year. At least 1 is required for each year that the project is intending to request funding. Additional performance measures that are not pre-populated here can be added at the bottom of this page under "Other".


OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

 Clarke County ▾ Rusty Grisworld ▾

[← Back to dashboard](#)
OAA Individual City/County Distribution Grant - 2025 | Clarke County-2025-IDIC-New-000692

[Download Application](#)

No. of adults connected to a job / employment	<input type="text" value="0"/>				
---	--------------------------------	--------------------------------	--------------------------------	--------------------------------	--------------------------------

### Harm Reduction Efforts

Position Type/Description	FY 25	FY 26	FY 27	FY 28	FY 29
No. of people engaged during harm prevention outreach efforts	<input type="text" value="0"/>				
No. of Naloxone kits distributed to at-risk individuals	<input type="text" value="0"/>				
No. of Fentanyl test kits distributed to at-risk individuals	<input type="text" value="0"/>				
No. of clean syringe exchanges conducted	<input type="text" value="0"/>				
Reported No. of overdoses reversed	<input type="text" value="0"/>				

**Other - Please Describe** 
[Edit](#)
■ Delete
+ Add New

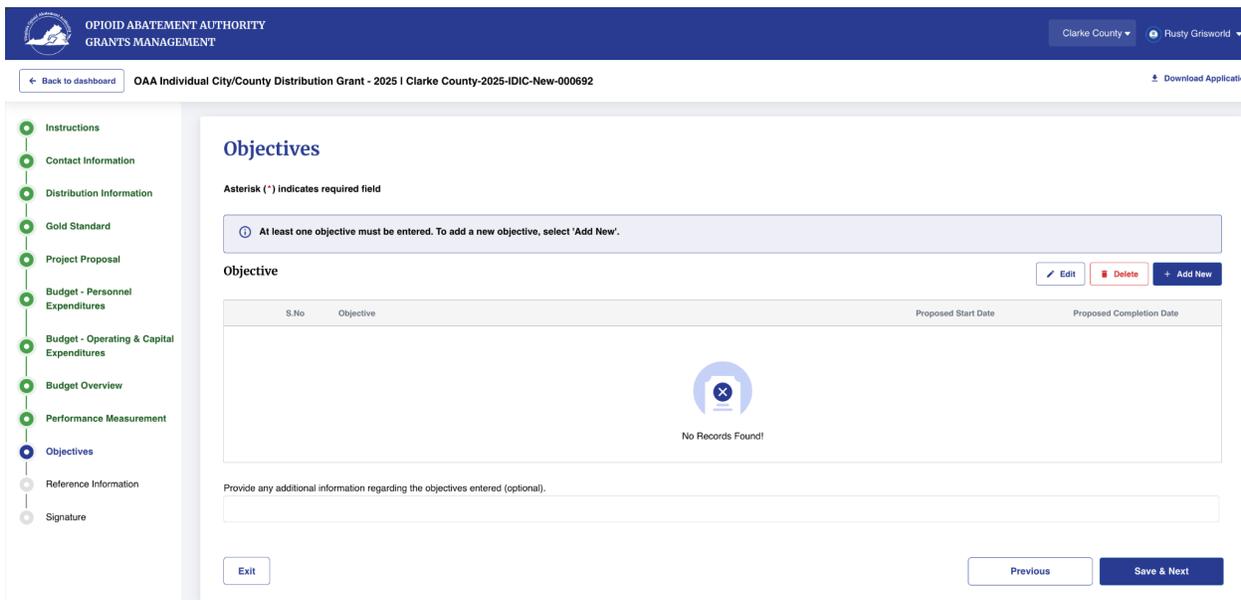
Position Type/Description	FY 25	FY 26	FY 27	FY 28	FY 29
Provide any additional information regarding the measures selected (optional).					

[Exit](#)
[Previous](#)
[Save & Next](#)

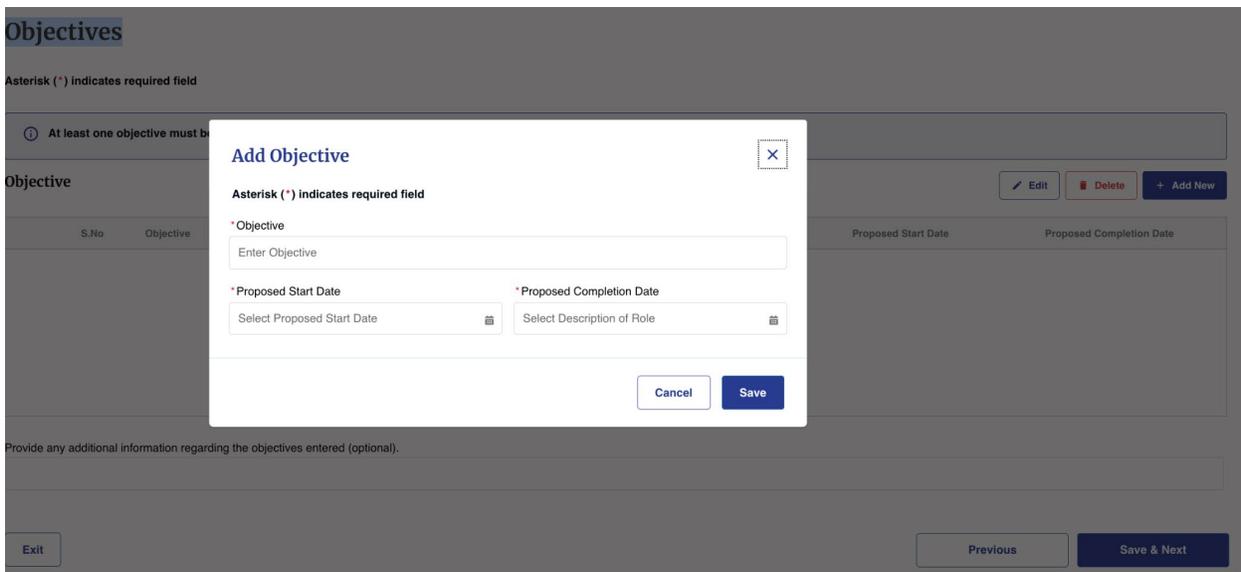
After entering the required information is provided then you can use the “Save & Next” button to advance the application to the next step.

### OBJECTIVES:

On this page, you will provide at least one Objective to proceed.



Use the “Add New” button to create a new Objective with Proposed Start and Completion Dates:



After completing one or more of the Objectives you can advance to the next step of the application:

**Objectives**

Asterisk (\*) indicates required field

At least one objective must be entered. To add a new objective, select 'Add New'.

Objective

S.No	Objective	Proposed Start Date	Proposed Completion Date
<input type="checkbox"/>	1 test 123	8/31/2024	10/30/2025

Provide any additional information regarding the objectives entered (optional).

Exit Previous Save & Next

After entering the required information is provided then you can use the “Save & Next” button to advance the application to the next step.

**REFERENCE INFORMATION:**

After answering the questions please provide a Weblink or File Upload for the “Yes” answers. The allowed formats for file uploads are .docx, .png, .jpg, .jpeg, .gif, .pdf, .txt, .xls, .xlsx, .xps and file size should be less than 25mb.

Weblink example (use the provided field to enter the full address):

### Reference Information

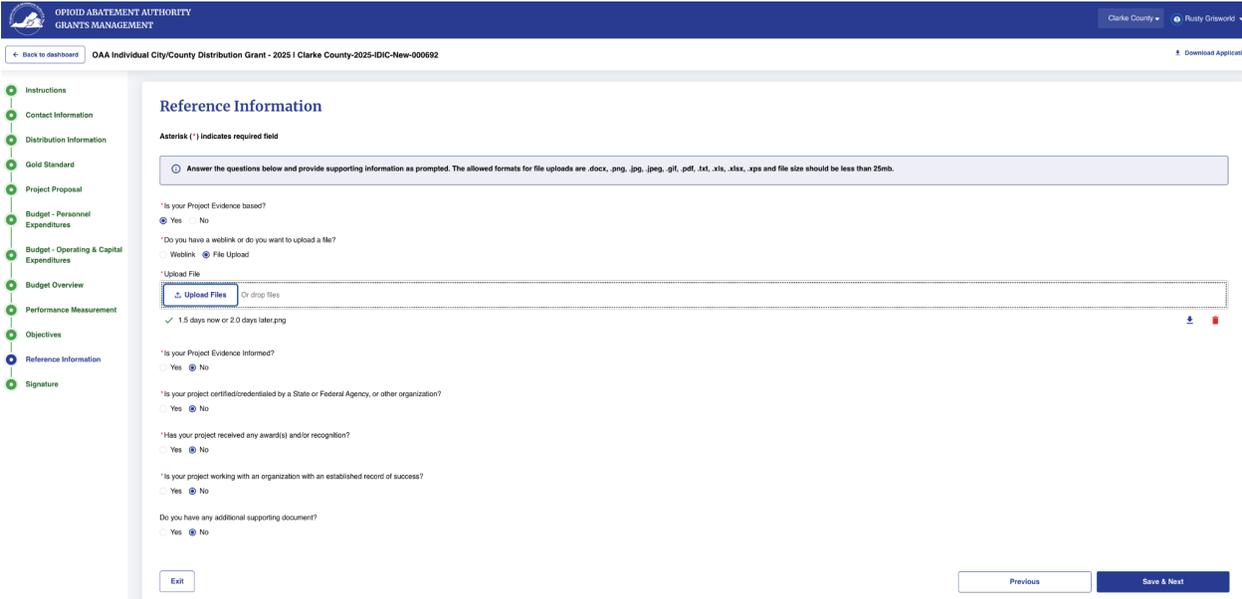
Asterisk (\*) indicates required field

File Upload example (use the “Upload Files” button or drag and drop a file to the box next to it):

### Reference Information

Asterisk (\*) Indicates required field

Then click the “Done” button:



After entering the required information is provided then you can use the “Save & Next” button to advance the application to the next step.

**SIGNATURE:**

On this page, the responsible person must E-sign the application for a grant. NOTE: Signer must be city/ county executive or designee. Once the application has been e-signed, the user will need to return to this page to submit the application.

The screenshot shows the 'Signature' page in the OAA Grants Management system. The header includes the Opioid Abatement Authority logo and the text 'OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT'. The user is logged in as 'Rusty Grisworld' from 'Clarke County'. The breadcrumb trail shows the current application: 'OAA Individual City/County Distribution Grant - 2025 | Clarke County-2025-IDIC-New-000692'. A 'Download Application' button is visible in the top right.

The left navigation menu lists the following steps: Instructions, Contact Information, Distribution Information, Gold Standard, Project Proposal, Budget - Personnel Expenditures, Budget - Operating & Capital Expenditures, Budget Overview, Performance Measurement, Objectives, Reference Information, and Signature (the current step).

The main content area is titled 'Signature' and contains the following text: 'Signer must be city/ county executive or designee. Once the application has been e-signed, the user will need to return to this page to submit the application.' Below this is a note: 'Asterisk (\*) Indicates required field'. There are three main instruction boxes:
 

- 'Please click on Download Application button on top to download a copy of the application as a PDF file.'
- 'I swear or affirm that all information contained in and attached to this application is true to the best of my knowledge and that I agree that any awards resulting from this application will follow the OAA's established terms & conditions.'
- 'Please enter Authorized Official (city/county executive or designee) details and click on "Send for E-Sign and Submit" button. They should receive an email for E- Signature to complete the intake submission.'

 Below these boxes is a question: 'Do you want to add existing contact or want to invite new user?' with radio button options for 'Add Existing Contact' and 'Invite New User'. At the bottom of the form are 'Exit', 'Previous', and 'Send for E-Sign and Submit' buttons.

Select the checkbox next to the “I swear or affirm that all information contained in and attached to this application is true to the best of my knowledge and that I agree that any awards resulting from this application will follow the OAA's established terms & conditions.”

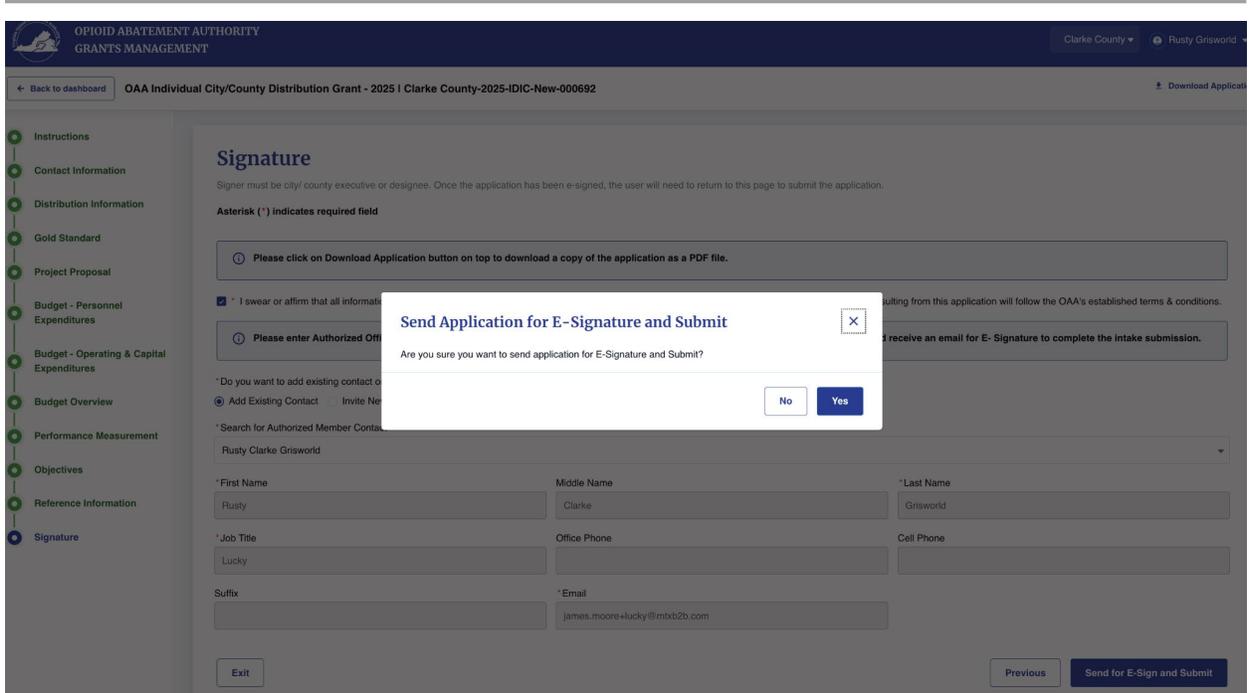
Then answer the following question: “Do you want to add existing contact or want to invite new user?” and then provide the requested information.

Add Existing Contact (Use the “Search for Authorized Member Contact” list to locate an existing contact)

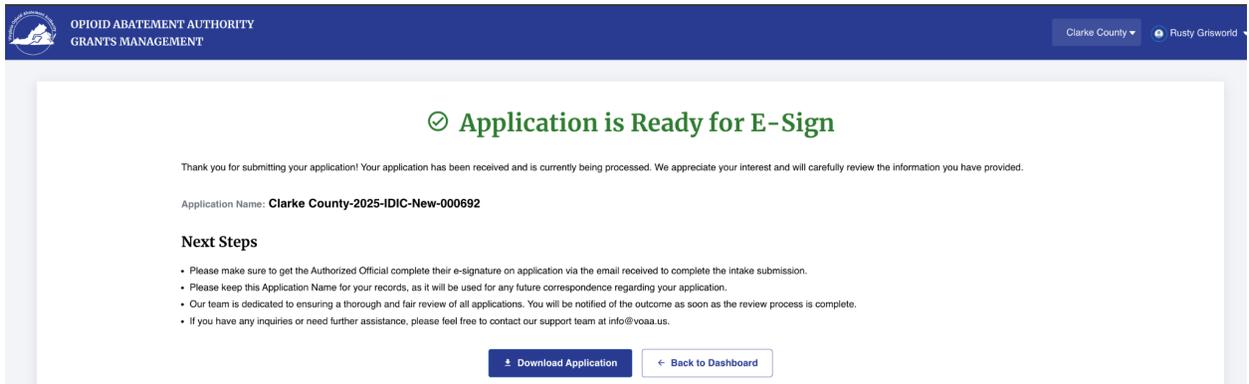
Invite New User (fill in the required information):

After either step is completed then you should use the “Send for E-Sign and Submit” button.

This is what the final submission popup will look like:



Next an email will be sent requesting the E-Signature and the OAA Staff will begin processing the Individual Grant application.



The following page will display, allowing you to choose one of two options by selecting either the “Download Application” button (which will download a PDF of the application you submitted or the “Back to Dashboard” button that will return you to the Dashboard.

OAA Staff may send your application to the “Assigned Back” status to allow you to provide the requested information they need to complete your application processing. This is typically done by uploading additional information in the form of

one or more files. Please note that all processing on your application will stop when this status is displayed on your application dashboard.

OAA Staff may also request additional information in the form of **Contingencies** that must be met in order to receive the award. These are generally...

E-Signature for Individual City/County Grant Application:

You will receive another Individual Distribution E-Signature email for Submit. The email will resemble this:

**[External Message] Signature requested on "VA OAA - Intake Application Clarke County-2025-IDIC-New-000692"**

1 message

Opioid Abatement Authority via Adobe Acrobat Sign <adobesign@adobesign.com>  
Reply-To: Opioid Abatement Authority <cmoisani@voaa.us>  
To: "james.moore+lucky@mtxb2b.com" <james.moore+lucky@mtxb2b.com>

Thu, Sep 12, 2024 at 9:18 AM



Opioid Abatement Authority requests your signature  
on  
**VA OAA - Intake Application Clarke County-2025-IDIC-New-000692**

[Review and sign](#)

Dear Rusty Grisworld,

You have received a document for Clarke County-2025-IDIC-New-000692 for test for E-Signature. Please review and sign the required documentation. If you have any questions, please contact [info@voaa.us](mailto:info@voaa.us).

After you sign **VA OAA - Intake Application Clarke County-2025-IDIC-New-000692**, all parties will receive a final PDF copy.

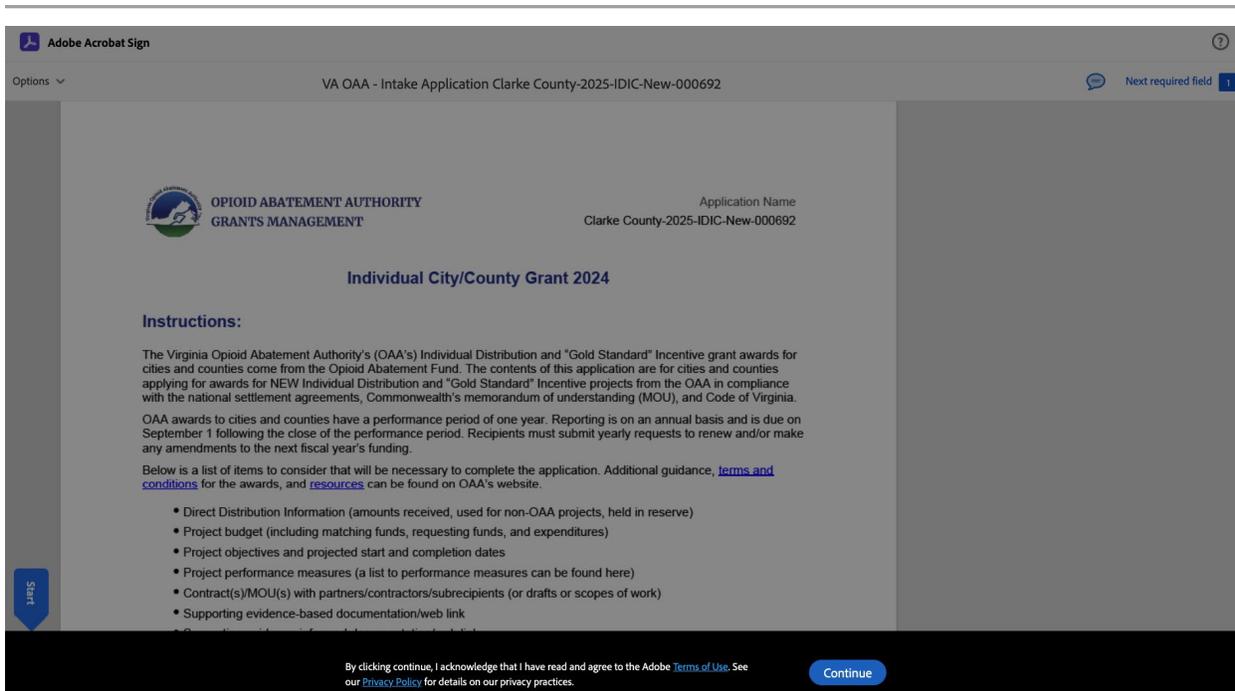
**Don't forward this email:** If you don't want to sign, you can [delegate](#) to someone else.



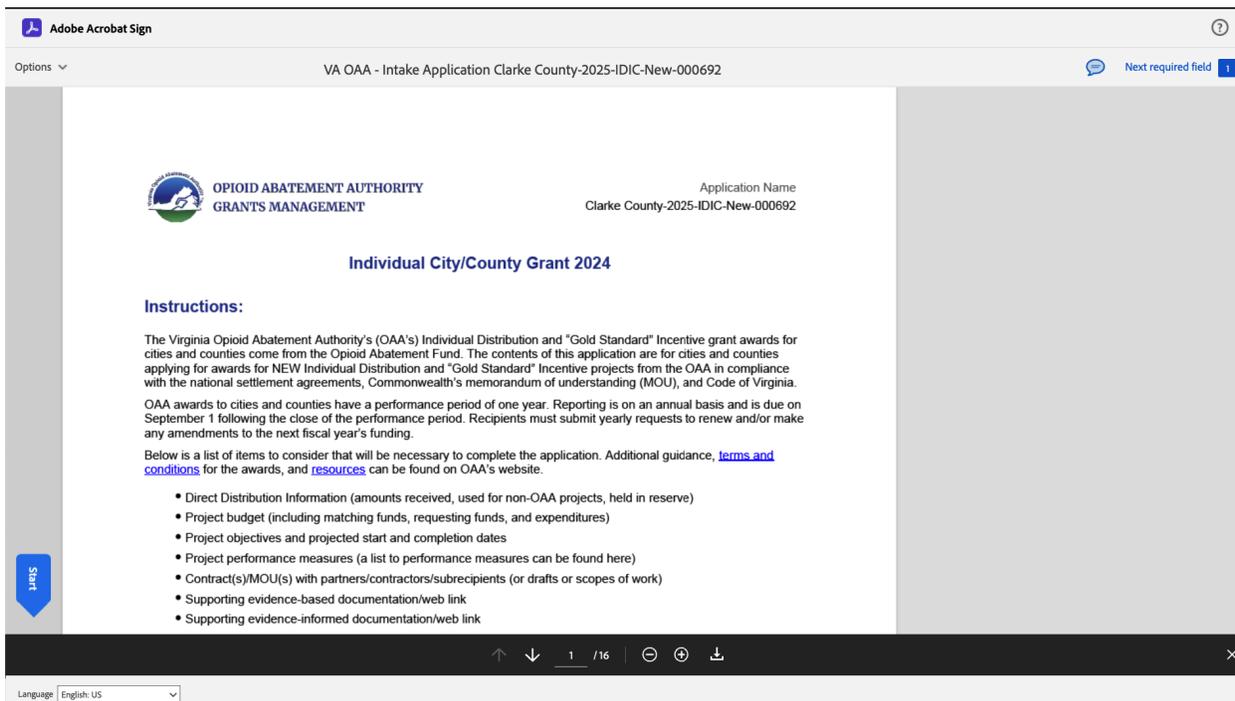
By proceeding, you agree that this agreement may be signed using electronic or handwritten signatures.

To ensure that you continue receiving our emails, please add [adobesign@adobesign.com](mailto:adobesign@adobesign.com) to your address book or safe list.

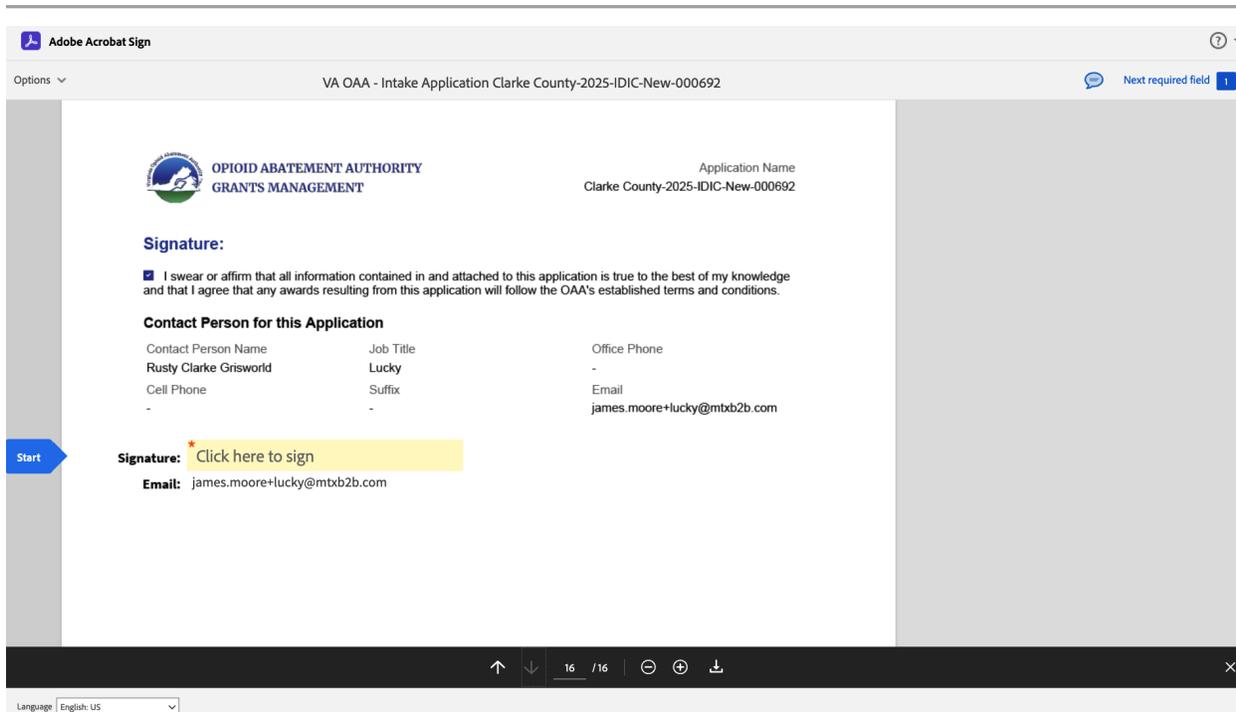
Clicking the "Review and sign" button on the email will open this page for the Individual City/County Grant Application Submittal Signature:



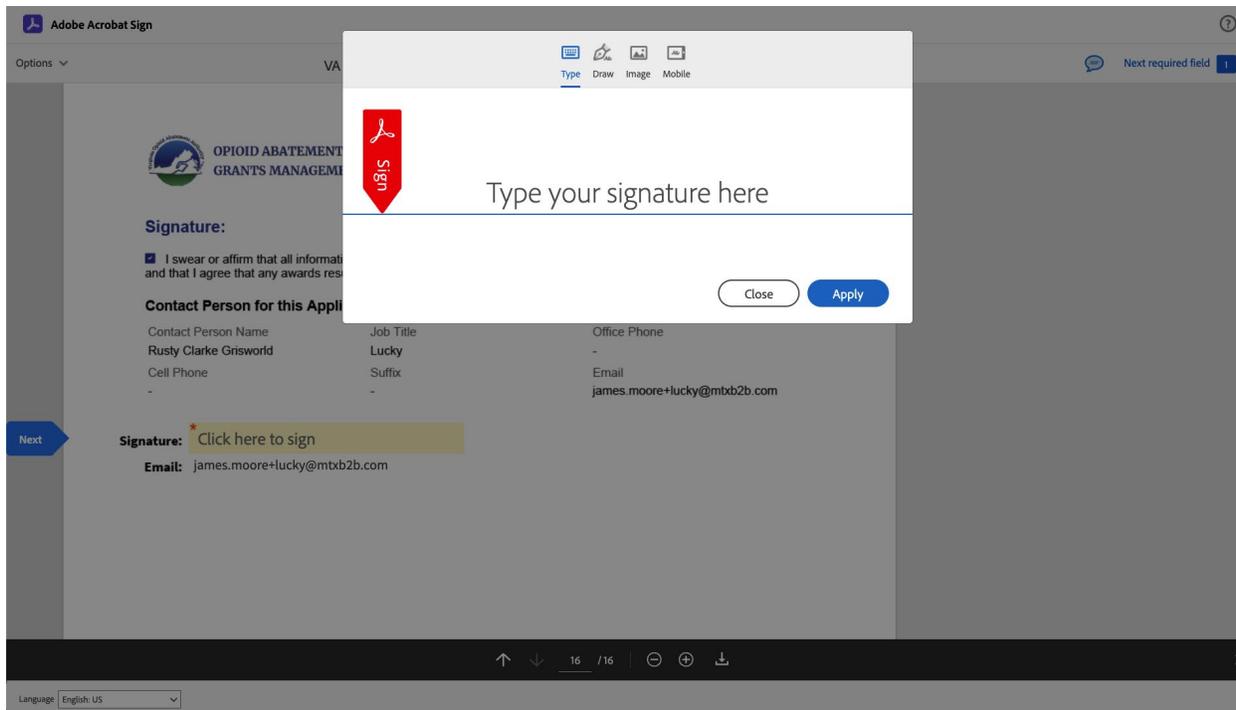
You will need to click the “Continue” button to review the document and the begin the E-Signature process:



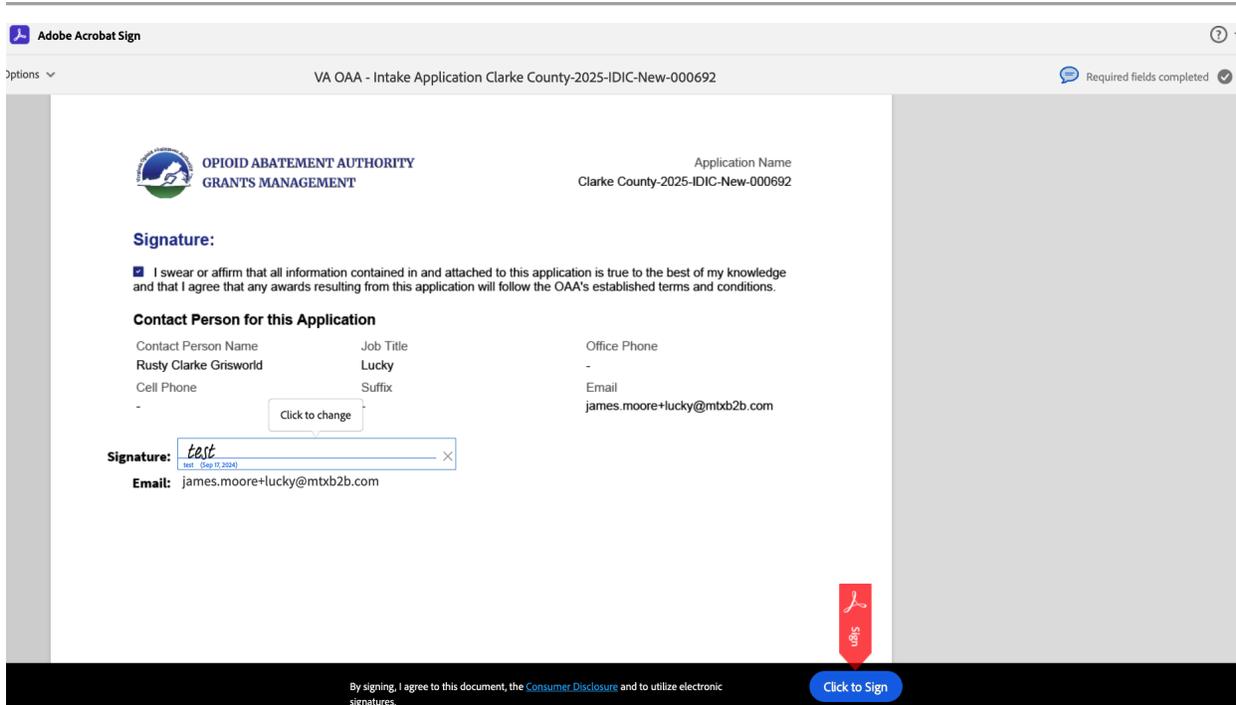
Then you will need to click the “Start” button at the bottom of screen:



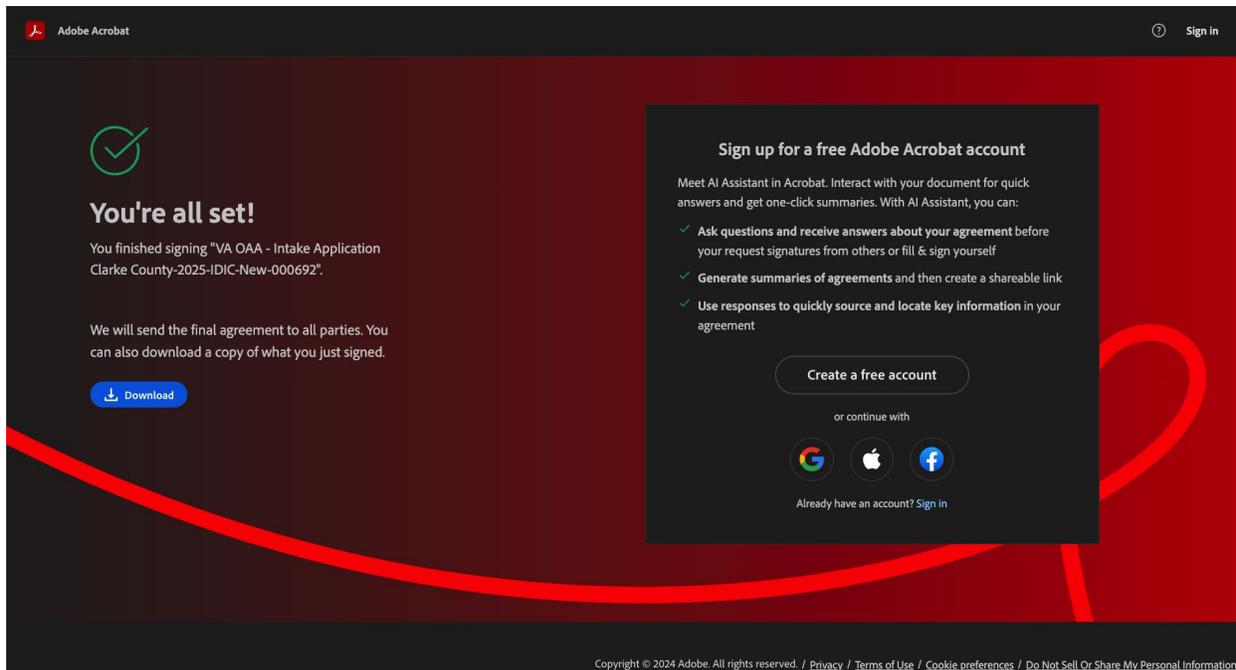
From here you will click the Signature field where it says “Click here to sign” and the following page will appear:



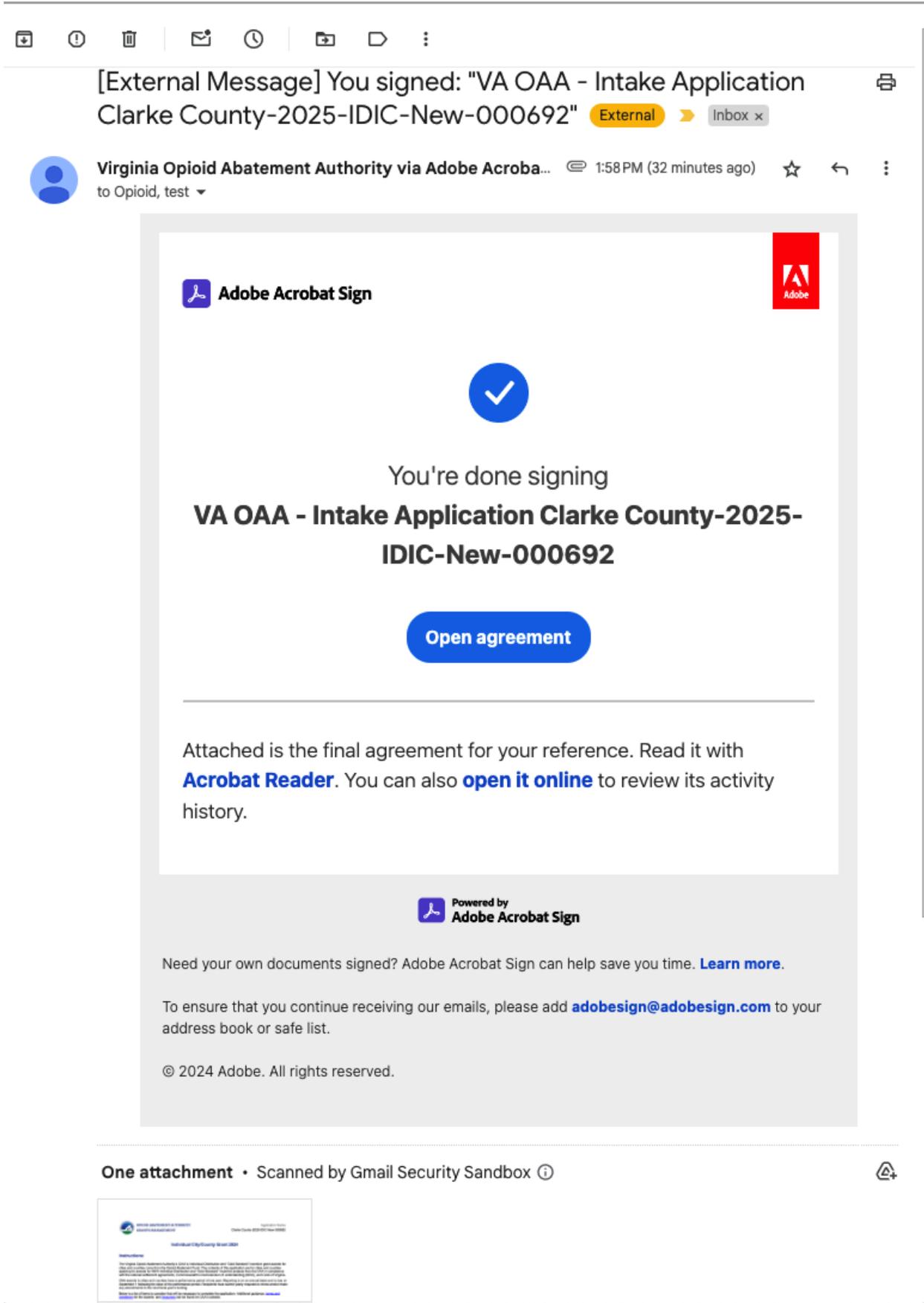
Complete your E-Signature and click the “Apply” button so you can view your signature populated on the document:



Click on the “Click to Sign” button to complete the process. This page will be displayed and you will receive an email confirmation:



There is no need to sign in to Adobe or to create an account. You can click the “Download” button to get a copy of the document as a PDF or you can find the copy attached to the confirmation email.





## COOPERATIVE GRANT APPLICATION PROCESS

This grant type is specific to a Fiscal Agent and one or more Partner Cities and Counties who are part of a Cooperative Grant Application. It lists the Cooperative Grant Applications where your selected City or County is a Partner, this is where you would go to Upload documentation as a file requested by OAA Internal Staff as a part of your Cooperative Grant. If you are a Partner in many Cooperative Grants, you may wish to use the Search with Application Name feature in the upper right hand corner. The table displaying the results will only display matching application names if that feature is used, otherwise all Cooperative Grant Applications with your Locality as a Partner will be displayed.

### SELECT A COOPERATIVE PARTNERSHIP GRANT:

The Cooperative Partnership Grant must be in a period where it is available for application, amendment, or renewal. This is indicated by the dates displayed on the Grant Dash?

Navigation:

After the Grant Application loads there will be a number of steps noted below, those steps are listed vertically on the left hand side of the page. At the bottom of the page on the right hand side is a **“Next”** button which will save your information and advance to the next step in the application process. After the initial step there will be another **“Previous”** button that will go back to the previous step, selecting this button will not save any information on the current application step. The **“Next”** button will be replaced by a **“Save & Next”** button with the same functionality. On the bottom left of most pages will be an **“Exit”** button, please note that using this will not save any new information since the last **“Save & Next”**. You will not be able to advance to the next step if there are any required fields that have not been completed or filled out.

**INSTRUCTIONS:**

Please read and review the instructions displayed on the first page of this application.

The screenshot shows the OAA Grants Management Portal interface. At the top, there is a header with the OAA logo and 'OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT'. Below this, a navigation bar shows 'Highland County' and a user profile 'James DEMO Moore DEMO'. A breadcrumb trail includes 'Back to dashboard' and 'OAA Cooperative Partnership Grant - FY2025 | Highland County-2025-COOP-New-000684'. The main content area is titled 'Instructions' and contains the following text:

The Virginia Opioid Abatement Authority's (OAA's) Cooperative Partnership grant awards for cities and counties come from the Opioid Abatement Fund. The contents of this application are for cities and counties applying for awards for NEW Cooperative Partnership projects from the OAA in compliance with the national settlement agreements, Commonwealth's memorandum of understanding (MOU), and Code of Virginia.

OAA Cooperative Partnership awards to cities and counties have a performance period of one year with up to four optional renewal years. Reporting is on an annual basis and is due on September 1 following the close of the performance period. Recipients must submit yearly requests to renew and/or make any amendments to the next fiscal year's funding.

The Cooperative Partnership grant is a competitive grant and requires that at least two of the cities/counties in the partnership are from the same behavioral health region. The application must be completed and submitted by the city/county designated as the fiscal agent. A Cooperative Partnership Agreement must be completed as part of the application process in the system and must be e-signed by each partner city/county. A sample of the Cooperative Partnership Agreement can be found [here](#).

Below is a list of items to consider that will be necessary to complete the application. Additional guidance, [terms and conditions](#) for the awards, and [resources](#) can be found on our website.

- Direct Distribution Information
  - This must be completed by each partner and can be found by going to the Grants Management section of the OAA Grants Management Portal and selecting Direct Distribution Information
- Signed Cooperative Agreement (will be completed during process, but must be signed before continuing)
- Project budget (including matching funds, requesting funds, and expenditures)
- Project objectives and projected start and completion dates
- Project performance measures (a list to performance measures can be found [here](#))
- Contract(s)/MOU(s) with partners/contractors/subrecipients (or drafts or scopes of work)
- Supporting evidence-based documentation/web link
- Supporting evidence-informed documentation/web link
- Supporting documentation if project has received any awards or recognition
- Optional: Gold Standard Incentive application
  - If a partner city/county has already opted into the Gold Standard, no further action is required.
  - This must be completed separately before Gold Standard funds can be requested. Can be found by going to the Grants Management section of the OAA Grants Management Portal and selecting Gold Standard Grant
- Optional: Any letters of support, articles, or other items that may assist the OAA Grants Committee in making an award decision for this project.

For any applications the OAA determines do not meet the established requirements, the OAA will assist the applicant to revise the application to facilitate compliance. Due to the competitive nature of Cooperative Partnership Grants, assistance from the OAA does not guarantee any final recommendations or approvals.

A 'Next' button is located at the bottom right of the content area.

**FISCAL AGENT:**

This step is where you must specify a Fiscal Agent for the Cooperative Grant Application. This is the contact information for the person who will complete the application process and provide the requested information on the following steps. You may add a new Fiscal Agent by selecting the “Invite New User” option and providing their contact information so the system can send them an email to login to the portal or you may add any current contact related to your city or county by selecting the “Add Existing Contact” and then select the appropriate person’s name to be the Fiscal Agent.

**OPIOID ABATEMENT AUTHORITY**  
**GRANTS MANAGEMENT**

 Highland County ▾ JamesDEMO MooreDEMO ▾

[← Back to dashboard](#)

[Download Application](#)

**OAA Cooperative Partnership Grant - FY2025 | Highland County-2025-COOP-New-000684**

- Instructions
- **Fiscal Agent**
- Partner Contact Information
- Project Proposal
- Budget - Personnel Expenditures
- Budget - Operating & Capital Expenditures
- Budget Overview
- Agreements
- Performance Measurement
- Objectives
- Reference Information
- Signature

### Fiscal Agent

**Asterisk (\*) indicates required field**

One of the participating cities or counties must serve as the fiscal agent for the cooperative project. The fiscal agent will be responsible for ensuring compliance with both financial and programmatic reporting requirements on behalf of the cooperative partnership.

City/County Serving as Fiscal Agent Highland County	City or County County
--	--------------------------

#### Address Information

**Physical Address Information**

*Physical Street Address 1 1223 test	Physical Street Address 2	*City test
*State Virginia	*Zip/Postal Code 65465	*Country U.S.A

**Mailing Address Information**

Same as Physical Address

Mailing Street Address 1 1223 test	Mailing Street Address 2	City test
State Virginia	Zip/Postal Code 65465	Country U.S.A

#### Contact Person for Fiscal Agent

i This should be someone who can answer programmatic and financial questions regarding the application and does not have to be the signer of the application or the city/county executive.

\*Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

[Exit](#)
[Previous](#)
[Save & Next](#)

## Add Existing Contact

### Contact Person for Fiscal Agent

i This should be someone who can answer programmatic and financial questions regarding the application and does not have to be the signer of the application or the city/county executive.

\*Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

\*Name

Select an Option ▾

*First Name	Middle Name	*Last Name
*Job Title	Office Phone	Cell Phone
Suffix	*Email	

[Exit](#)
[Previous](#)
[Save & Next](#)

## Invite New User

### Contact Person for Fiscal Agent

ⓘ This should be someone who can answer programmatic and financial questions regarding the application and does not have to be the signer of the application or the city/county executive.

\* Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

* First Name	Middle Name	* Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
* Job Title	Office Phone	Cell Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>
Suffix	* Email	
<input type="text"/>	<input type="text"/>	

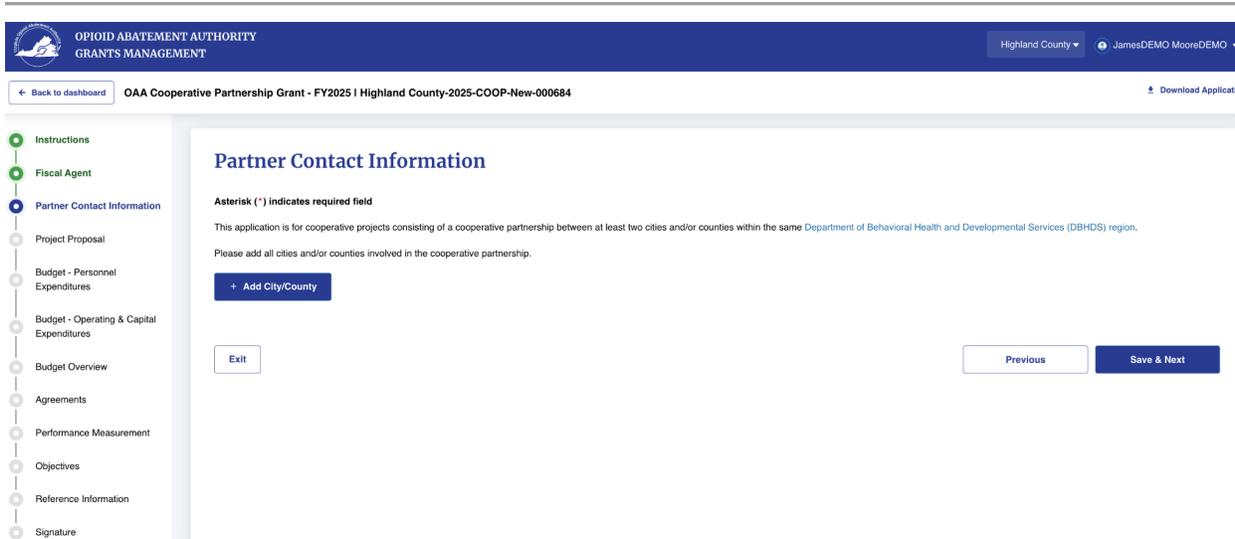
Exit

Previous

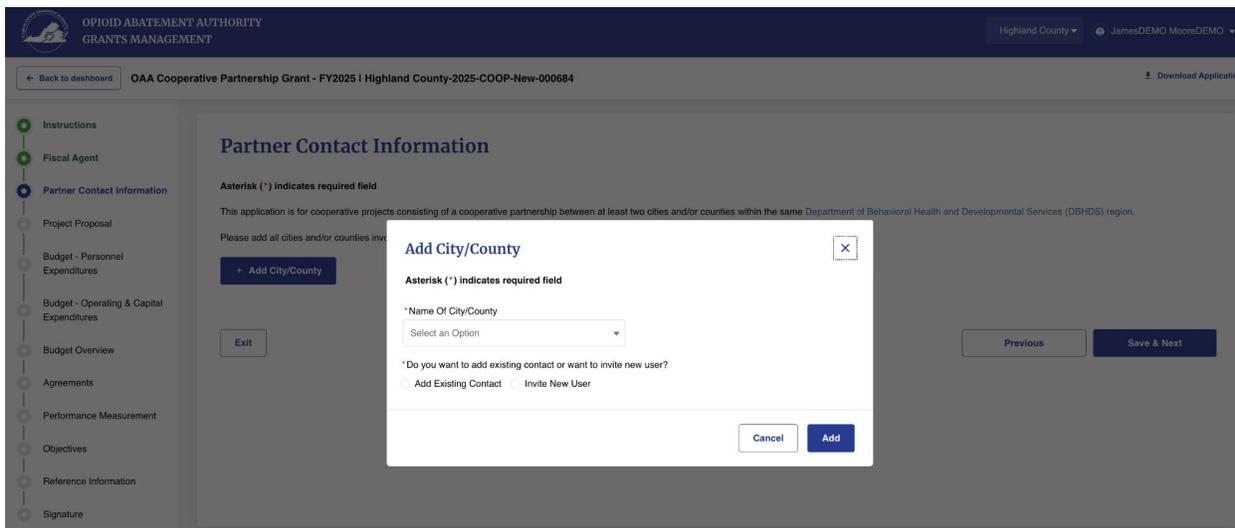
Save & Next

### PARTNER CONTACT INFORMATIONS:

This is the step where you (or the Fiscal Agent) add Additional Cities and/or Counties to participate in the Cooperative Grant application process. These Partners will need to be able to sign for the allocation of funds and agree to the terms and conditions of the Cooperative agreement. Selecting the “**Add City/County**” button will provide you the opportunity to scroll through the list of Cities and Counties and then select one with the option to choose to “Add Existing Contact” or “Invite New User” similar to the previous step.



Use the “+ Add City/County” button to add at least one or more City or County partners. A new window will appear with an alphabetical list of all Cities and Counties on the “\* **Name of City/County**” in a picklist. The City or County you choose for a Partner should be in the same [Department of Behavioral Health and Developmental Services \(DBHDS\) region](#) as your current City or County. You must select a City or County to proceed. You will also need to select if you want to “**Add Existing Contact**” or “**Invite New User**”.



After you select a City or County for the Partner on the Cooperative Grant Application, you will need to invite an user to login and complete certain tasks on the

Cooperative Grant Application. You may add as many new Partners as you have following the process.

“Add Existing Contact” option (select the Existing User’s Name from the list):

## Add City/County ✕

**Asterisk (\*) indicates required field**

\* Name Of City/County

\* Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

\* Name

\* First Name

Middle Name

\* Last Name

\* Job Title

Office Phone

Cell Phone

Suffix

\* Email

“Invite New User” option (enter all the required contact field information):

## Add City/County



Asterisk (\*) indicates required field

\* Name Of City/County

\* Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

\* First Name

Middle Name

\* Last Name

\* Job Title

Office Phone

Cell Phone

Suffix

\* Email

After you add a new user they will receive email notification when ... and you will see the following screen:

The screenshot shows the 'Partner Contact Information' page. On the left is a sidebar with a vertical list of steps: Instructions, Fiscal Agent, Partner Contact Information (highlighted), Project Proposal, Budget - Personnel Expenditures, Budget - Operating & Capital Expenditures, Budget Overview, Agreements, Performance Measurement, Objectives, Reference Information, and Signature. The main content area has a title 'Partner Contact Information' and a note: 'Asterisk (\*) indicates required field'. Below this is a paragraph: 'This application is for cooperative projects consisting of a cooperative partnership between at least two cities and/or counties within the same Department of Behavioral Health and Developmental Services (DBHDS) region. Please add all cities and/or counties involved in the cooperative partnership.' There is a '+ Add City/County' button. Below that is a table with one entry for 'Clarke County'. The table has columns for Name of City/County, Contact Person Name, Job Title, Office Phone, and Cell Phone. The contact information for Clarke County is: Contact Person Name: Kent Grisworld, Job Title: Super, Office Phone: (blank), Cell Phone: (blank), and Email: james.moore+super@mtxb2b.com. There are 'Edit' and 'Delete' buttons for the entry. At the bottom are 'Exit', 'Previous', and 'Save & Next' buttons.

If you want to “Edit” or “Delete” a Partner Contact invitation you can use either button to make those changes.

After all Partners have been added, you can use the “Save & Next” button to advance the application to the next step.

**PROJECT PROPOSAL:**

Provide the required information such as the “Project Name” and “Provide a brief narrative description of the proposed project.” You will also need to provide a Contact Person, you may “Add Existing Contact” or “Invite New User”, this person will be the primary contact for the Cooperative Grant Application. Finally, provide the requested financial information and describe any other organizations involved in this project.


OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

 Highland County ▾ JamesDEMO MooreDEMO ▾

[← Back to dashboard](#)
OAA Cooperative Partnership Grant - FY2025 | Highland County-2025-COOP-New-000684

[Download Application](#)

- Instructions
- Fiscal Agent
- Partner Contact Information
- **Project Proposal**
- Budget - Personnel Expenditures
- Budget - Operating & Capital Expenditures
- Budget Overview
- Agreements
- Performance Measurement
- Objectives
- Reference Information
- Signature

## Project Proposal

Complete the information below for the project the city or county is requesting to be funded.

**Asterisk (\*) indicates required field**

Name of Fiscal Agent City of County  
Highland County

\*Project Name

### Contact Person for this Project

ⓘ This should be someone who can answer programmatic and financial questions regarding the project and does not have to be the signer of the application, the city/county executive, or the contact person for the application.

\* Do you want to add existing contact or want to invite new user?

Add Existing Contact     Invite New User

\* Which of the following criteria does the project meet?

A new effort for the agency.  
 A proposed supplement or enhancement to a project or effort that is already in place.  
 A combination of enhancing an existing project/effort with new components.

\* Provide a brief narrative description of the proposed project.

ⓘ The following financial questions will be filled automatically based on what is entered in the 'Budget' sections for the first year of the project.


OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

 Highland County ▾ JamesDEMO MooreDEMO ▾

[← Back to dashboard](#)
OAA Cooperative Partnership Grant - FY2025 | Highland County-2025-COOP-New-000684

[Download Application](#)

- Instructions
- Fiscal Agent
- Partner Contact Information
- **Project Proposal**
- Budget - Personnel Expenditures
- Budget - Operating & Capital Expenditures
- Budget Overview
- Agreements
- Performance Measurement
- Objectives
- Reference Information
- Signature

What is the total cost of the proposed project?

\$0.00

What is the total amount of cooperative project funds requested from the OAA (not including any matching funds)?

\$0.00

Amount of any matching funds pledged toward the project:

Fund Source	Amount
 No Records Found!	

\*What is the strategy for long-term sustainability once OAA funds are reduced or no longer available?

\*How was the need determined and how does that need relate to abatement?

\*Briefly describe the organization(s), including any sub-recipients or contractors (if known) that will be involved in this project. Attach any contracts and/or memoranda of understanding/agreement. If not fully executed, a draft or a narrative describing the scope of services may suffice.

ⓘ If this project does not include any other organizations, sub-recipients, or contractors, select "Add New" and enter "N/A" under organization and description of role, "\$0.00" under amount of funding and "Other" as entity type to continue.

Edit
Delete
+ Add New

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Highland County | JamesDEMO MooreDEMO

← Back to dashboard OAA Cooperative Partnership Grant - FY2025 | Highland County-2025-COOP-New-000684 Download Application

\*Briefly describe the organization(s), including any sub-recipients or contractors (if known) that will be involved in this project. Attach any contracts and/or memoranda of understanding/agreement. If not fully executed, a draft or a narrative describing the scope of services may suffice.

ⓘ If this project does not include any other organizations, sub-recipients, or contractors, select "Add New" and enter "N/A" under organization and description of role, "\$0.00" under amount of funding and "Other" as entity type to continue.

Edit Delete + Add New

Name of Organization	Amount of Funding	Description of Role	Entity Type
No Records Found!			

\*Describe any specific group(s) of individuals this project is designed to reach, and how many individuals are expected to participate each year.

\*Does this project have components other than opioid-related abatement as defined?  
 No, it is 100% related to opioid treatment.  Yes, there are other substances involved.

\*Provide a budget narrative for the funding strategy of this project

Exit Previous Save & Next

Once all questions are answered and the required information is provided then you can use the “Save & Next” button to advance the application to the next step.

**ALLOW NEWLY ADDED PARTNER ORGANIZATIONS TO A COOP TO BE REMOVED BEFORE FINAL SUBMIT:**

Applicants can update their Partner Organizations to remove any that were not part of any Awarded application.

You can Add Organizations by selecting the dark blue “+ Add New” button. The following popup will request the required information (you may also select status of Addition, Renewal, or Removal):

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Richmond City | Shashank Agarwal

← Back to dashboard VA OAA Cooperativ Download Application

### Add Organization

Asterisk (\*) indicates required field

\* Name of Organization \* Amount of Funding \* Status  
Enter Name of Organization \$ Select Status

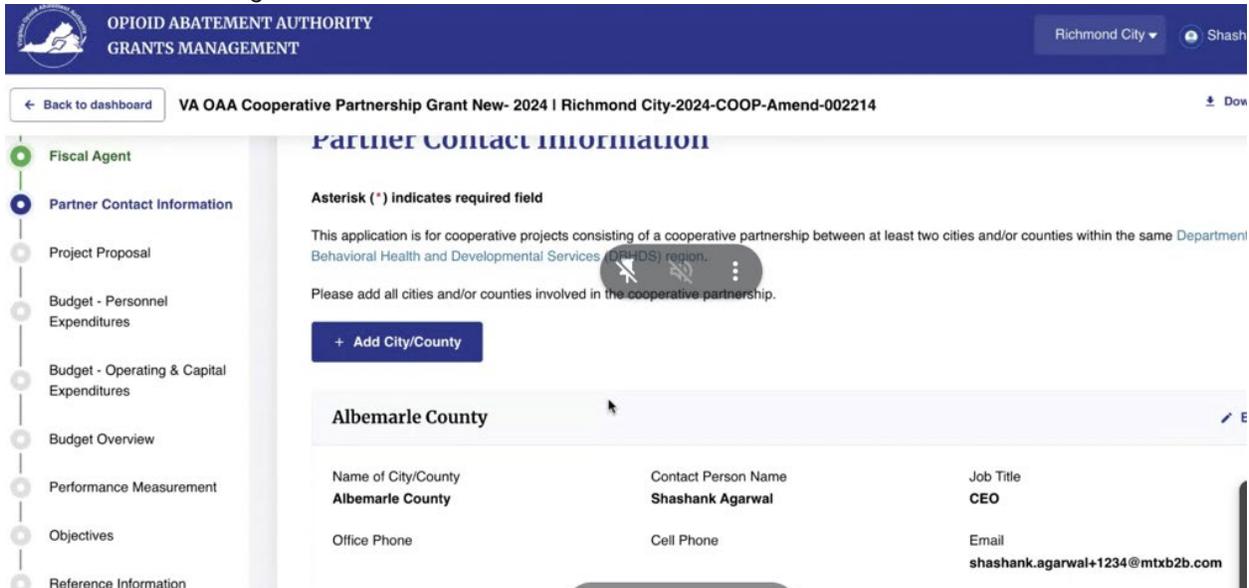
\* Description of Role  
Enter Description of Role

\* Entity Type  
Select Entity Type

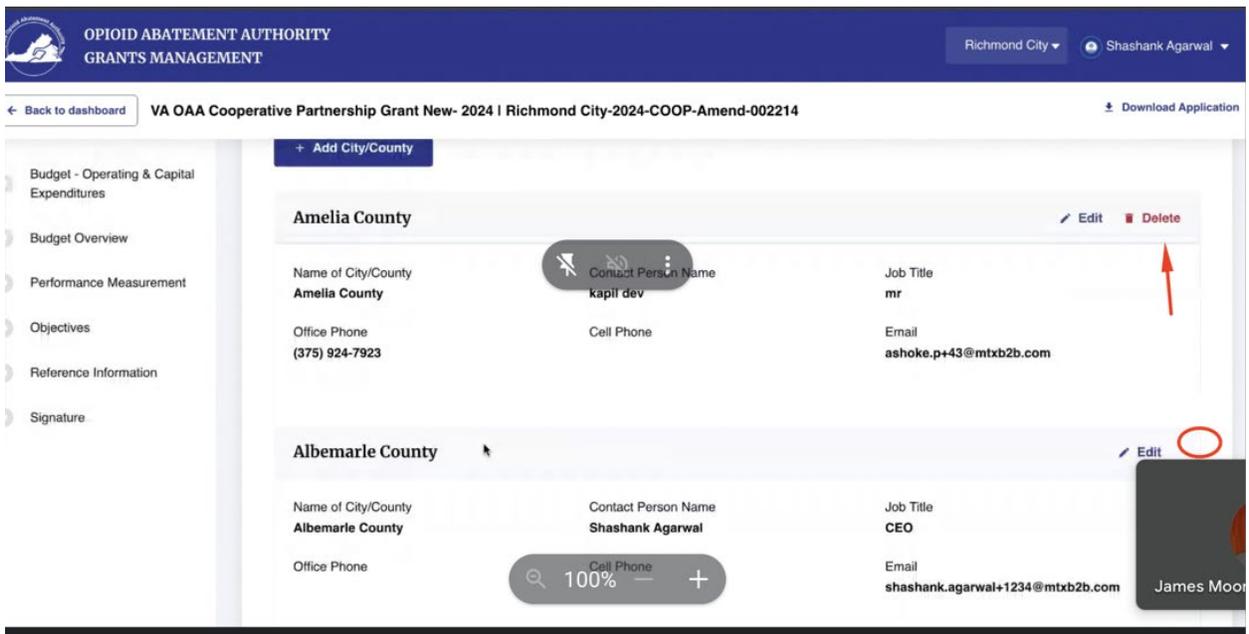
Document Name  
Attach Document  
Upload Files Or drop files

Cancel Save

The list of Partner Organizations is visible below:



NOTE: If a COOP Application was previously awarded, we can't remove existing partners but can add new partners (see image below - the recently added Partner has a red "Delete" button but the originally awarded Partner does not).



**BUDGET – PERSONNEL EXPENDITURES:**

On this page you will provide the budget information for Salaried Staff and Hourly Staff. This information will be used in the calculation of the anticipated amounts of expenditures for Personnel. Note: The Salaried Staff allows you to enter the Benefits amounts but the Hourly staff calculates from the Benefits amounts for you based on a 30% standard. The application will calculate the totals and grand totals using the information.

**Budget - Personnel Expenditures**

Asterisk (\*) indicates required field

**New Salaried Staff**

Position Type/Description	FY 2025				FY 2026				FY 2027				FY 2028				FY 2029			
	# of FTEs	Salary	Benefits	Total	# of FTEs	Salary	Benefits	Total	# of FTEs	Salary	Benefits	Total	# of FTEs	Salary	Benefits	Total	# of FTEs	Salary	Benefits	Total
<input type="checkbox"/> Not salaried	1	\$75,000.00	\$26,250.00	\$101,250.00	1	\$75,000.00	\$26,250.00	\$101,250.00	1	\$75,000.00	\$26,250.00	\$101,250.00	1	\$75,000.00	\$26,250.00	\$101,250.00	1	\$75,000.00	\$26,250.00	\$101,250.00
<b>Total Salaried Staff</b>	<b>1</b>	<b>N/A</b>	<b>N/A</b>	<b>\$101,250.00</b>																

**New Hourly/Wage/Part-time Staff**

Position Type/Description	FY 2025				FY 2026				FY 2027				FY 2028				FY 2029			
	# of Wage or PT	\$ Rate	# of Hours	Total (Includes FICA)	# of Wage or PT	\$ Rate	# of Hours	Total (Includes FICA)	# of Wage or PT	\$ Rate	# of Hours	Total (Includes FICA)	# of Wage or PT	\$ Rate	# of Hours	Total (Includes FICA)	# of Wage or PT	\$ Rate	# of Hours	Total (Includes FICA)
<input type="checkbox"/> Not wage staff	1	\$25.00	20	\$538.25	1	\$25.00	20	\$538.25	1	\$25.00	20	\$538.25	1	\$25.00	20	\$538.25	1	\$25.00	20	\$538.25
<b>Total Hourly/Wage/Part-time Staff</b>	<b>1</b>	<b>N/A</b>	<b>N/A</b>	<b>\$538.25</b>																

**Grand Total**

	FY 2025		FY 2026		FY 2027		FY 2028		FY 2029	
	# of Staff	Grand Total								
<b>Grand Total</b>	<b>2</b>	<b>\$101,788.25</b>								

Buttons: Exit, Previous, Save & Next

After entering the required information is provided then you can use the “Save & Next” button to advance the application to the next step.

**BUDGET – OPERATING & CAPITAL EXPENDITURES:**

On this page you will provide the budget information for Operating Expenses and Capital Expenses. This information will be used in the calculation of the anticipated amounts of expenditures for Operating & Capital Expenditures.

Note: Operating Expenses should include any administrative expenses, sub-recipients, and contracts. Operating Expenses should not be used to track indirect

costs for the recipient city or county. Capital Expenses should only include... get from the client.

**Budget - Operating & Capital Expenditures**

Asterisk (\*) indicates required field

**New Operating Expenses** [Edit] [Delete] [Add New]

Item Description	FY 2025			FY 2026			FY 2027			FY 2028			FY 2029		
	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total
Total Operating Expenses	0	N/A	\$0.00												

Include any administrative expenses, sub-recipients, and contracts. Indirect costs are not allowed for the recipient city or county. (click "Add New" to begin)

**New Capital Expenses** [Edit] [Delete] [Add New]

Item Description	FY 2025			FY 2026			FY 2027			FY 2028			FY 2029		
	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total
Total Capital Expenses	0	N/A	\$0.00												

Capital expenditures should only include:

**Grand Total**

Grand Total	FY 2025			FY 2026			FY 2027			FY 2028			FY 2029		
	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total
Grand Total	N/A	N/A	\$0.00												

[Exit] [Previous] [Save & Next]

After entering the required information is provided then you can use the “Save & Next” button to advance the application to the next step.

**BUDGET OVERVIEW:**

On this page you may enter the Revenue anticipated for this Cooperative Grants Application. This must be separated into Non-OAA Matching Funds such as Direct Distributions and into OAA Requested Funding Sources (Cooperative Partnership, Individual Distribution, Gold Standard). The system will calculate the Revenue Grand Totals for your application and it will display the totals from the Expenses.

**OPIOID ABATEMENT AUTHORITY**  
**GRANTS MANAGEMENT**

 Highland County ▾ | JamesDEMO MooreDEMO ▾

[← Back to dashboard](#)

[Download Application](#)

- [Instructions](#)
- [Fiscal Agent](#)
- [Partner Contact Information](#)
- [Project Proposal](#)
- [Budget - Personnel Expenditures](#)
- [Budget - Operating & Capital Expenditures](#)
- [Budget Overview](#)**
- [Agreements](#)
- [Performance Measurement](#)
- [Objectives](#)

## Budget Overview

Complete the budget information below for the project that locality (City/County/State Agency) is requesting to be funded.

**Asterisk (\*) indicates required field**

### Revenue

#### Non-OAA Matching Funds

[Edit](#)
[Delete](#)
[+ Add New](#)

Please add any Non-OAA matching funds by selecting "Add New". This can include Direct Distribution Funds received from the Settlement Administrator.

Non-OAA Matching Funds	City/County	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
		Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
<input type="checkbox"/> Direct Distribution	Highland County	\$1,000.00	\$1,000.00	\$1,000.00	\$1,000.00	\$1,000.00
<input type="checkbox"/> Direct Distribution	Clarke County	\$1,000.00	\$1,000.00	\$1,000.00	\$1,000.00	\$1,000.00
<b>Total Non-OAA Funding Sources</b>		<b>\$2,000.00</b>	<b>\$2,000.00</b>	<b>\$2,000.00</b>	<b>\$2,000.00</b>	<b>\$2,000.00</b>

**OPIOID ABATEMENT AUTHORITY**  
**GRANTS MANAGEMENT**

 Highland County ▾ | JamesDEMO MooreDEMO ▾

[← Back to dashboard](#)

[Download Application](#)

- [Reference Information](#)
- [Signature](#)

## OAA Requested Funding Sources

[Edit](#)
[Delete](#)
[+ Add New](#)

Please add any OAA Requested funding sources (Cooperative Partnership, Individual Distribution, Gold Standard) by selecting "Add New"

OAA Requested Funding Sources	City/County	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
		Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
<input type="checkbox"/> Cooperative Partnership (COOP)	Highland County	\$99,788.25	\$99,788.25	\$99,788.25	\$99,788.25	\$99,788.25
<b>Total OAA Funding Sources</b>		<b>\$99,788.25</b>	<b>\$99,788.25</b>	<b>\$99,788.25</b>	<b>\$99,788.25</b>	<b>\$99,788.25</b>

### Revenue Grand Total

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
<b>Revenue Grand Total</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>

### Expenses

Expenses are prefilled from the Budget Expenditure sections, to edit select Previous and edit in the appropriate section.

Expenses	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
Personnel-related	\$101,788.25	\$101,788.25	\$101,788.25	\$101,788.25	\$101,788.25
<b>Total Expenses</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>

### Total Requested Amount from the OAA

**OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT**

 Highland County | JamesDEMO MooreDEMO

← Back to dashboard
Download Application

**OAA Cooperative Partnership Grant - FY2025 | Highland County-2025-COOP-New-000684**

---

**Revenue Grand Total**

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
<b>Revenue Grand Total</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>

---

**Expenses**

Expenses are prefilled from the Budget Expenditure sections, to edit select Previous and edit in the appropriate section.

Expenses	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
Personnel-related	\$101,788.25	\$101,788.25	\$101,788.25	\$101,788.25	\$101,788.25
<b>Total Expenses</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>	<b>\$101,788.25</b>

---

**Total Requested Amount from the OAA**

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
<b>Total Requested Amount from the OAA</b>	<b>\$99,788.25</b>	<b>\$99,788.25</b>	<b>\$99,788.25</b>	<b>\$99,788.25</b>	<b>\$99,788.25</b>

Exit
Previous
Save & Next

Please note you will be presented with this error message: “Total Requested Amount must be the exact match of the Total OAA Requested Funding Source.” If you see this result you may need to make some adjustments to either your Expenses or your Revenues when both are equal the error message will no longer be displayed. See sample of error message below:

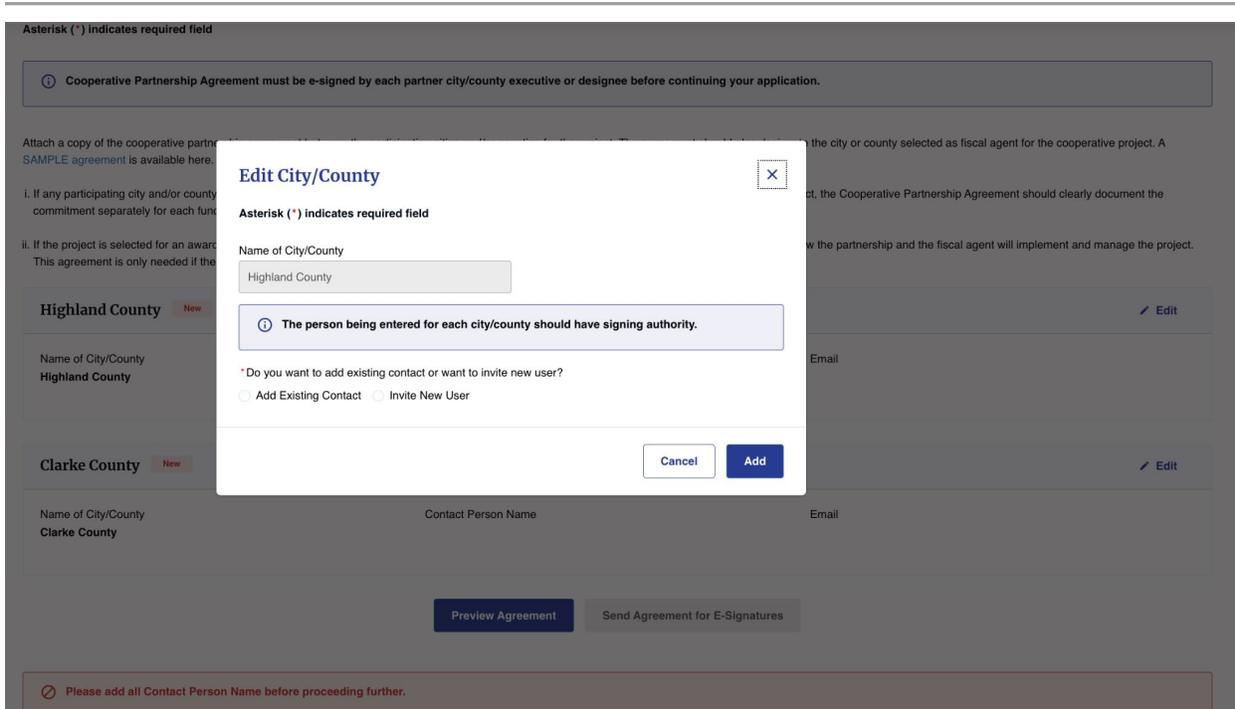
⊘ Total Requested Amount must be the exact match of the Total OAA Requested Funding Source.

**AGREEMENTS:**

On this page, the listed partners in the Cooperative Partnership Agreement must be sent a copy of the Grant Application for their review and approval.

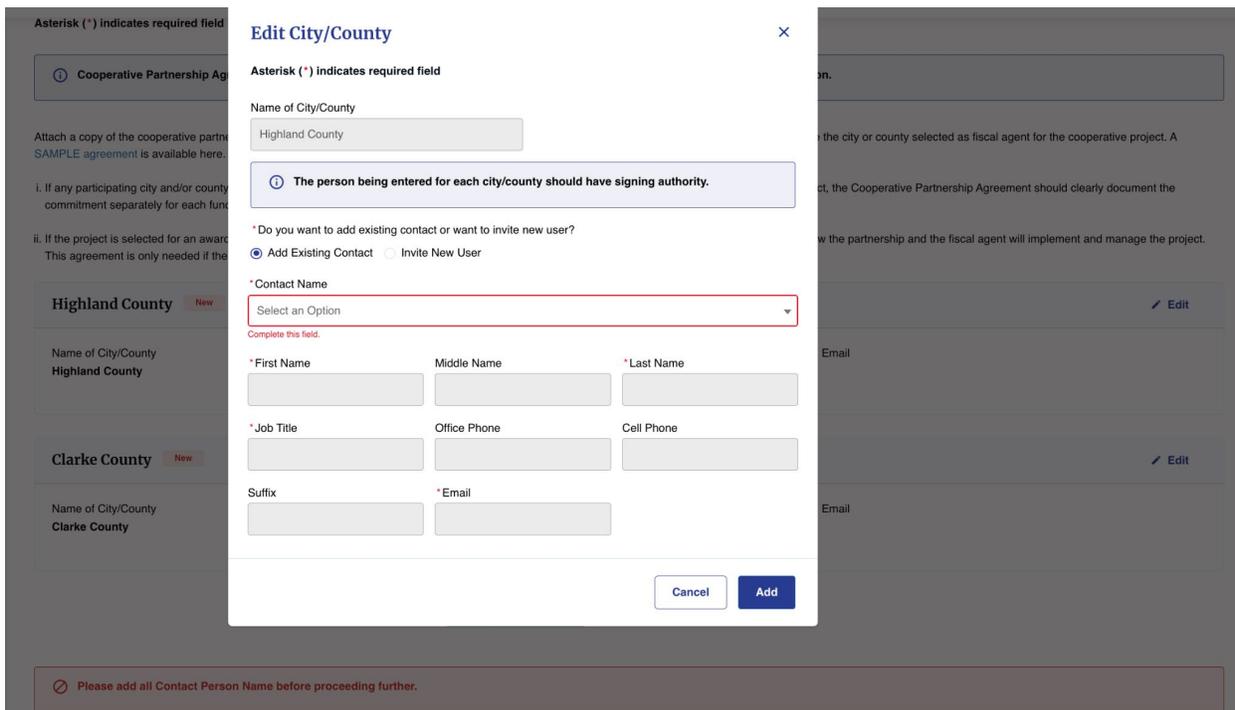
The screenshot shows the 'Agreements' page in the OAA Grants Management system. The header includes the Opioid Abatement Authority logo and the text 'OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT'. The user is logged in as 'JamesDEMO MooreDEMO' for 'Highland County'. The breadcrumb trail shows 'OAA Cooperative Partnership Grant - FY2025 | Highland County-2025-COOP-New-000684'. The left sidebar lists various application steps, with 'Agreements' selected. The main content area has a title 'Agreements' and a note: 'Asterisk (\*) indicates required field'. A warning box states: 'Cooperative Partnership Agreement must be e-signed by each partner city/county executive or designee before continuing your application.' Below this, instructions explain that a copy of the agreement must be attached and that it should designate the fiscal agent. Two instructions (i and ii) detail requirements for fund allocation and operational agreements. A table lists two partners: 'Highland County' and 'Clarke County', each with a 'New' tag and an 'Edit' button. The table columns are 'Name of City/County', 'Contact Person Name', and 'Email'. At the bottom, there are buttons for 'Preview Agreement' and 'Send Agreement for E-Signatures'.

Cooperative Partnership Agreement must be e-signed by each partner city/county executive or designee before continuing your application. The “Preview Agreement” button allows you to review the Agreement before submitting for signature. It will open in a new window or tab as a PDF and will include the amounts pledged per partner for each Distribution type or Fund. You will need to specify the contact information for each person signing the agreement. Please use the “Edit” button to update the information requested. After you use the “Edit” button a new window will pop-up asking you to specify if the person signing for that City or County – you must select if you want that person to be an “Add Existing Contact” or if you want that person to be a “Invite New User”.



In either case, you will need to verify their contact information but Inviting a new user will also cause the system to send an email requesting they create a new password for their user account.

Add Existing Contact will provide a list with the allowed Contact Names:



After you select an Existing Contact you can verify their contact information:

## Agreements

Asterisk (\*) Indicates required field

ⓘ Cooperative Partnership Agreement must be e-signed by each partner city/county executive or designee before continuing your application.

Attach a copy of the cooperative partnership agreement between the participating cities and/or counties for the project. The agreement should also designate the city or county selected as fiscal agent for the cooperative project. A [SAMPLE agreement](#) is available here. This agreement is needed to apply.

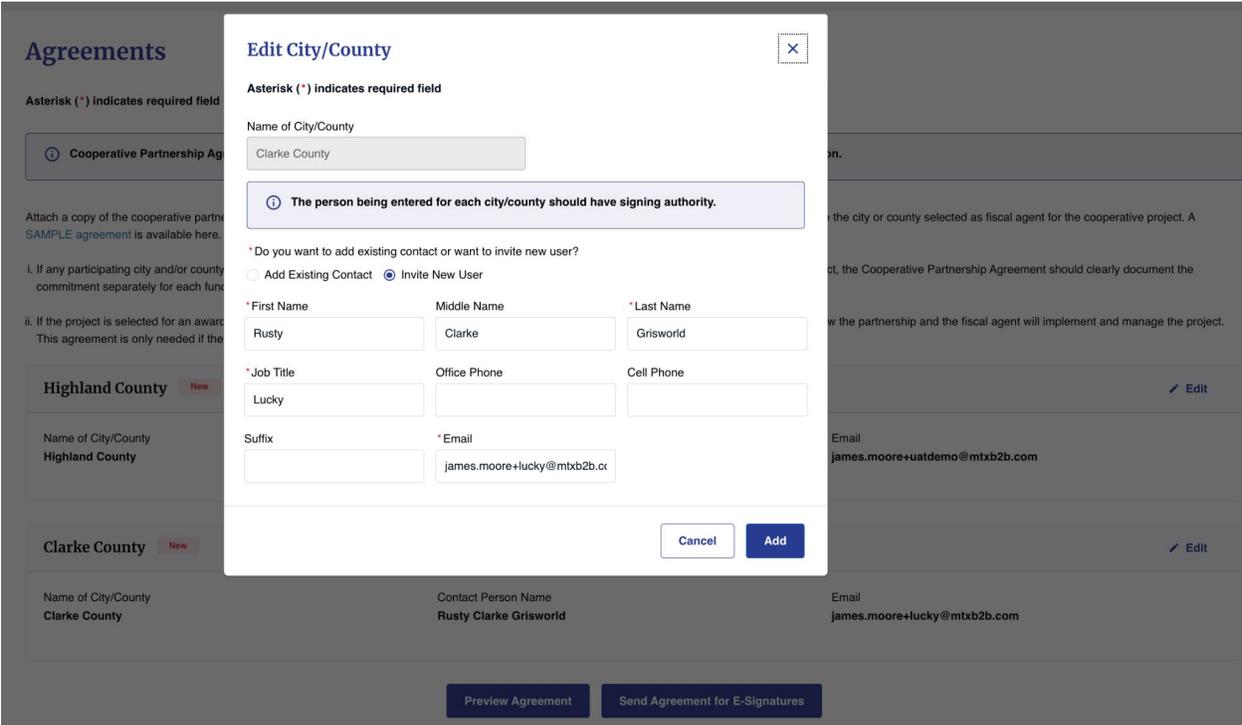
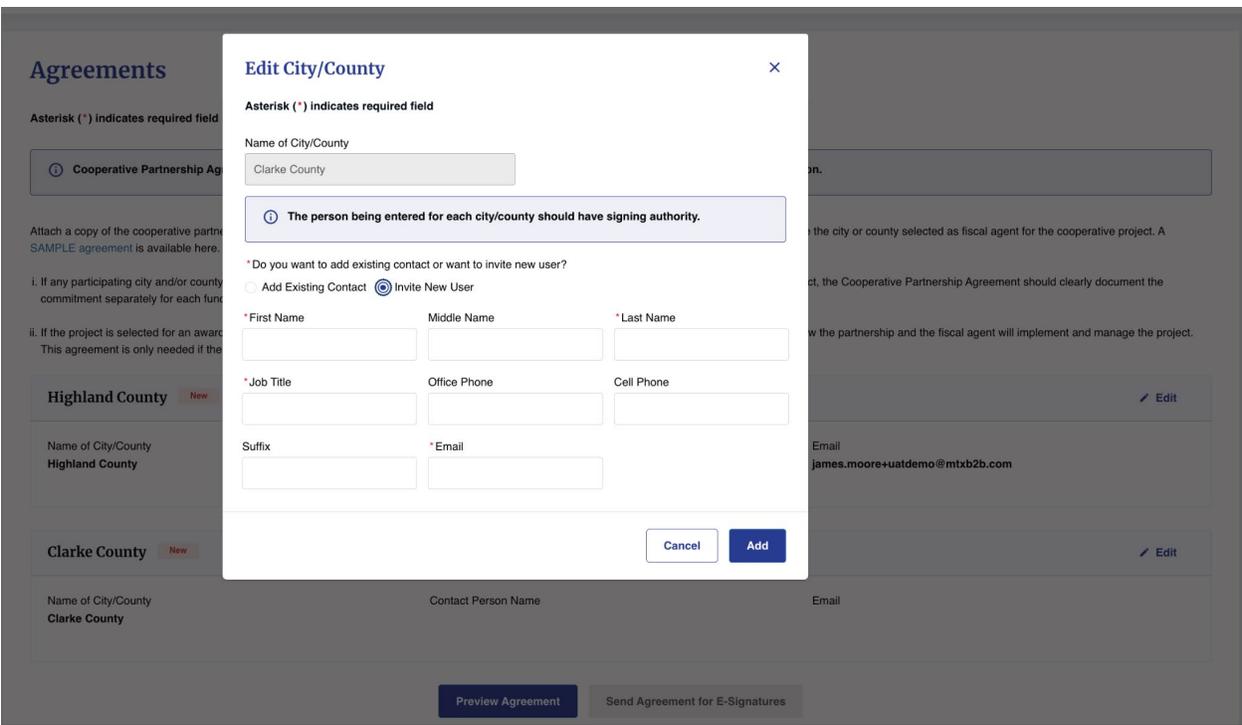
- i. If any participating city and/or county elects to allocate a portion of its Direct Distributions and/or Individual Distributions from the OAA to this regional project, the Cooperative Partnership Agreement should clearly document the commitment separately for each fund and the amount.
- ii. If the project is selected for an award, the partnership will then need to complete an Operational Agreement (sample agreement and exhibit) that details how the partnership and the fiscal agent will implement and manage the project. This agreement is only needed if the project is awarded.

Highland County <span style="color: red;">New</span> <span style="float: right;">Edit</span>		
Name of City/County Highland County	Contact Person Name JamesDEMO VictorDEMO MooreDEMO	Email james.moore+uatdemo@mtx2b.com
Clarke County <span style="color: red;">New</span> <span style="float: right;">Edit</span>		
Name of City/County Clarke County	Contact Person Name	Email

Preview Agreement

Send Agreement for E-Signatures

Invite New User appears similar but you must provide all the required contact information before you can proceed.



### Agreements

Asterisk (\*) indicates required field

Cooperative Partnership Agreement must be e-signed by each partner city/county executive or designee before continuing your application.

Attach a copy of the cooperative partnership agreement between the participating cities and/or counties for the project. The agreement should also designate the city or county selected as fiscal agent for the cooperative project. A SAMPLE agreement is available here. This agreement is needed to apply.

- i. If any participating city and/or county elects to allocate a portion of its Direct Distributions and/or Individual Distributions from the OAA to this regional project, the Cooperative Partnership Agreement should clearly document the commitment separately for each fund and the amount.
- ii. If the project is selected for an award, the partnership will then need to complete an Operational Agreement (sample agreement and exhibit) that details how the partnership and the fiscal agent will implement and manage the project. This agreement is only needed if the project is awarded.

<b>Highland County</b> <span>New</span> <span>Edit</span>		
Name of City/County Highland County	Contact Person Name JamesDEMO VictorDEMO MooreDEMO	Email james.moore+uatdemo@mtxb2b.com

<b>Clarke County</b> <span>New</span> <span>Edit</span>		
Name of City/County Clarke County	Contact Person Name Rusty Clarke Grisworld	Email james.moore+lucky@mtxb2b.com

Preview Agreement    Send Agreement for E-Signatures

After all contacts responsible for signing are entered, you can select the "Send Agreement for E-Signature" button. Each contact person will receive an E-Signature in their email for them to complete and E-Sign.

**Success**  
Successfully sent email for E-Signature.

Highland County | JamesDEMO MooreDEMO

← Back to dashboard | OAA Cooperative Partnership Grant - FY2025 | Highland County-2025-COOP-New-000684 | Download Application

### Agreements

Asterisk (\*) indicates required field

ⓘ Cooperative Partnership Agreement must be e-signed by each partner city/county executive or designee before continuing your application.

Attach a copy of the cooperative partnership agreement between the participating cities and/or counties for the project. The agreement should also designate the city or county selected as fiscal agent for the cooperative project. A [SAMPLE agreement](#) is available here. This agreement is needed to apply.

i. If any participating city and/or county elects to allocate a portion of its Direct Distributions and/or Individual Distributions from the OAA to this regional project, the Cooperative Partnership Agreement should clearly document the commitment separately for each fund and the amount.

ii. If the project is selected for an award, the partnership will then need to complete an Operational Agreement (sample agreement and exhibit) that details how the partnership and the fiscal agent will implement and manage the project. This agreement is only needed if the project is awarded.

Name of City/County	Contact Person Name	Email
<b>Highland County</b> <span>Pending</span>	<b>JamesDEMO VictorDEMO MooreDEMO</b>	<b>james.moore+uatdemo@mtxb2b.com</b>
<b>Clarke County</b> <span>Pending</span>	<b>Rusty Clarke Grisworld</b>	<b>james.moore+lucky@mtxb2b.com</b>

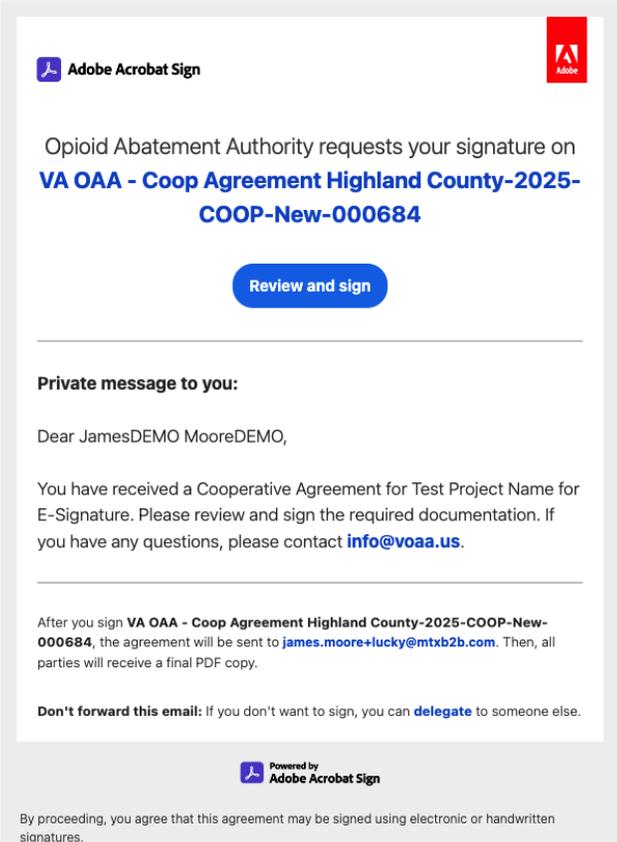
Buttons: Preview Agreement, Send Agreement for E-Signatures

The email for E-Signature will look like this:

[External Message] Signature requested on "VA OAA - Coop Agreement Highland County-2025-COOP-New-000684" External > Inbox x

 Opioid Abatement Authority via Adobe Acrobat Sign <adobesign@adobesign.com>  
to james.moore+uatdemo@mtxb2b.com

9:45AM (16 minutes ago) ☆ ↶ ⋮



**Adobe Acrobat Sign**

Opioid Abatement Authority requests your signature on  
**VA OAA - Coop Agreement Highland County-2025-COOP-New-000684**

[Review and sign](#)

**Private message to you:**

Dear JamesDEMO MooreDEMO,

You have received a Cooperative Agreement for Test Project Name for E-Signature. Please review and sign the required documentation. If you have any questions, please contact [info@voaa.us](mailto:info@voaa.us).

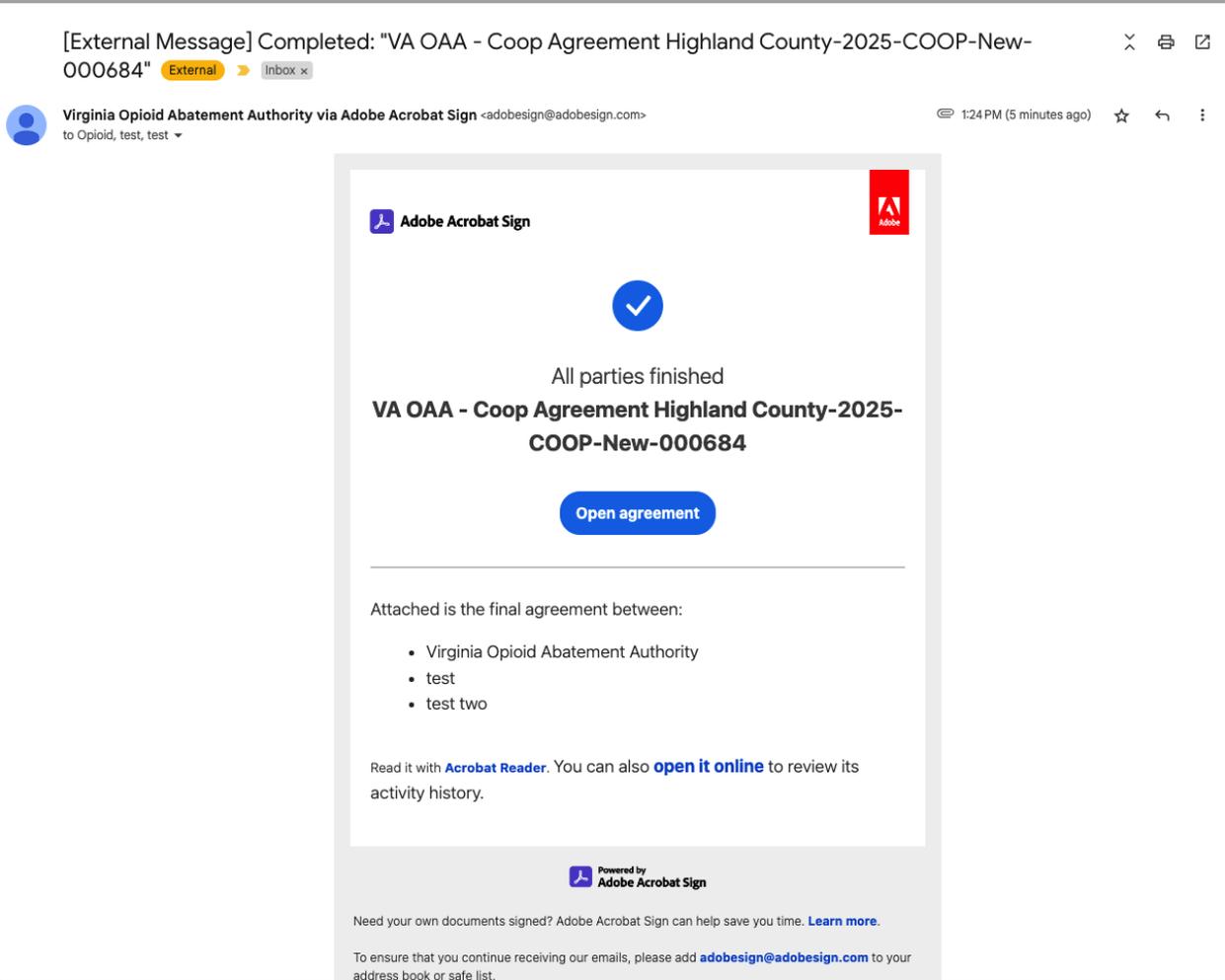
After you sign **VA OAA - Coop Agreement Highland County-2025-COOP-New-000684**, the agreement will be sent to [james.moore+lucky@mtxb2b.com](mailto:james.moore+lucky@mtxb2b.com). Then, all parties will receive a final PDF copy.

**Don't forward this email:** If you don't want to sign, you can [delegate](#) to someone else.

Powered by **Adobe Acrobat Sign**

By proceeding, you agree that this agreement may be signed using electronic or handwritten signatures.

Once all parties have signed there will be another email to the applicant with the copies of the signed agreement.



After entering the required information is provided then you can use the “Save & Next” button to advance the application to the next step.

**PERFORMANCE MEASUREMENT:**

On this page you will be able to enter your performance measurement goals per Fiscal Year:

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Highland County JamesDEMO MooreDEMO

← Back to dashboard OAA Cooperative Partnership Grant - FY2025 | Highland County-2025-COOP-New-000684 Download Application

- Instructions
- Fiscal Agent
- Partner Contact Information
- Project Proposal
- Budget - Personnel Expenditures
- Budget - Operating & Capital Expenditures
- Budget Overview
- Agreements
- Performance Measurement**
- Objectives
- Reference Information
- Signature

### Performance Measurement

Enter the applicable measures for this project (number of people projected to participate) under the corresponding fiscal year. At least 1 is required for each year that the project is intending to request funding. Additional performance measures that are not pre-populated here can be added at the bottom of this page under "Other".

**Asterisk (\*) indicates required field**

#### Prevention/Education/Awareness Efforts

Position Type/Description	FY 25	FY 26	FY 27	FY 28	FY 29
No. of children, infant to 5 years old, participating in prevention/education programming	0	0	0	0	0
No. children, elementary school age, participating in prevention/education programming	0	0	0	0	0
No. of children, middle school age, participating in prevention/education programming	0	0	0	0	0
No. of children, high school age, participating in prevention/education programming	0	0	0	0	0
No. adults from the general public participating in prevention/education programming	0	0	0	0	0
No. of pregnant and/or nursing women participating in prevention/education programming	0	0	0	0	0

**NOTE:** Enter the applicable measures for this project (number of people projected to participate) under the corresponding fiscal year. At least 1 is required for each year that the project is intending to request funding. Additional performance measures that are not pre-populated here can be added at the bottom of this page under "Other".

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Highland County JamesDEMO MooreDEMO

← Back to dashboard OAA Cooperative Partnership Grant - FY2025 | Highland County-2025-COOP-New-000684 Download Application

No. of adults connected to a job / employment	0	0	0	0	0
---	---	---	---	---	---

#### Harm Reduction Efforts

Position Type/Description	FY 25	FY 26	FY 27	FY 28	FY 29
No. of people engaged during harm prevention outreach efforts	0	0	0	0	0
No. of Naloxone kits distributed to at-risk individuals	0	0	0	0	0
No. of Fentanyl test kits distributed to at-risk individuals	0	0	0	0	0
No. of clean syringe exchanges conducted	0	0	0	0	0
Reported No. of overdoses reversed	0	0	0	0	0

**Other - Please Describe** Edit Delete + Add New

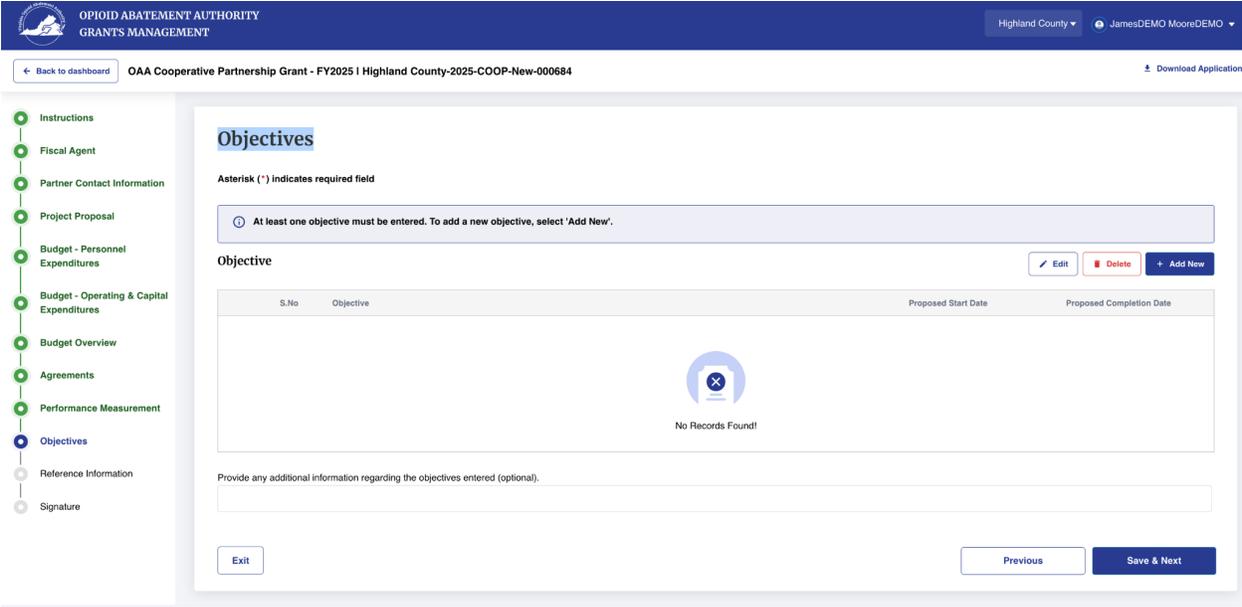
Position Type/Description	FY 25	FY 26	FY 27	FY 28	FY 29
Provide any additional information regarding the measures selected (optional).					

Exit Previous Save & Next

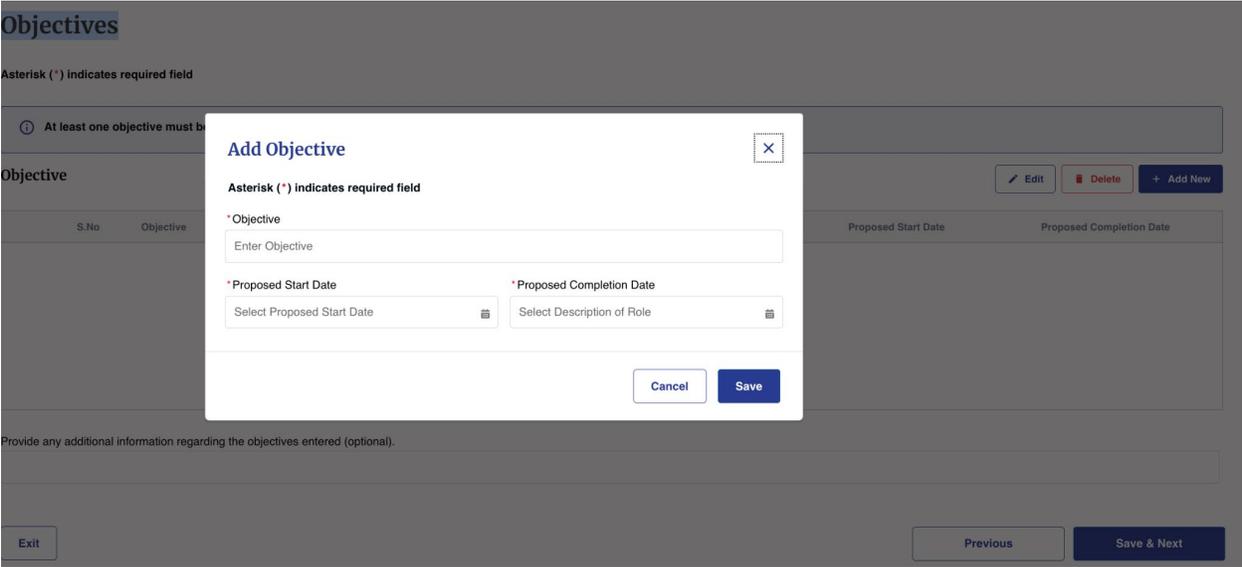
After entering the required information is provided then you can use the **“Save & Next”** button to advance the application to the next step.

**OBJECTIVES:**

On this page, you will provide at least one Objective to proceed.



Use the “Add New” button to create a new Objective with Proposed Start and Completion Dates:



After completing one or more of the Objectives you can advance to the next step of the application:

The screenshot displays the 'Objectives' section of the grant application. At the top, a green notification box states 'Success Successfully created objective.' The sidebar on the left lists various steps, with 'Objectives' highlighted in blue. The main content area features a table with one objective: 'Help People' with a start date of 8/31/2024 and a completion date of 9/30/2024. A 'Save & Next' button is visible at the bottom right of the form area.

After entering the required information is provided then you can use the “Save & Next” button to advance the application to the next step.

**REFERENCE INFORMATION:**

After answering the questions please provide a Weblink or File Upload for the “Yes” answers. The allowed formats for file uploads are .docx, .png, .jpg, .jpeg, .gif, .pdf, .txt, .xls, .xlsx, .xps and file size should be less than 25mb.

Weblink example (use the provided field to enter the full address):

### Reference Information

Asterisk (\*) indicates required field

File Upload example (use the “Upload Files” button or drag and drop a file to the box next to it):

### Reference Information

Asterisk (\*) indicates required field

Answer the questions below and provide supporting information as prompted. The allowed formats for file uploads are .docx, .png, .jpg, .jpeg, .gif, .pdf, .txt, .xls, .xlsx, .xps and file size should be less than 25mb.

\* Is your Project Evidence based?  
 Yes  No

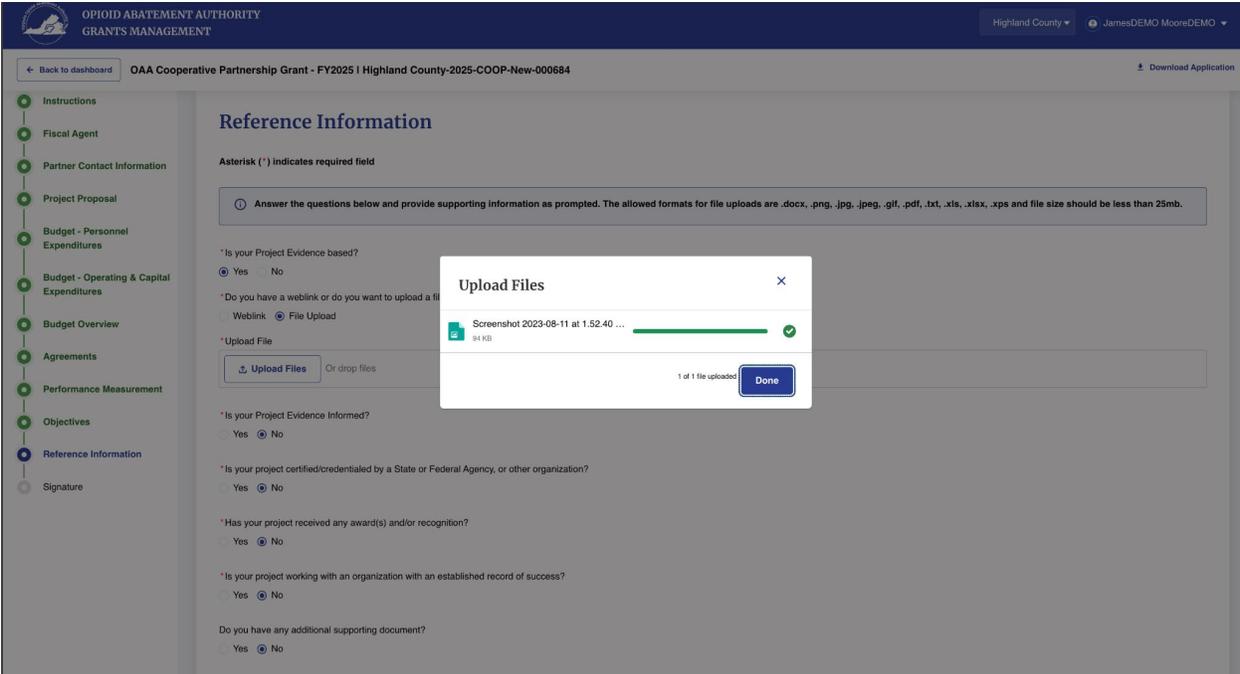
\* Do you have a weblink or do you want to upload a file?  
 Weblink  File Upload

\* Upload File

Or drop files

Complete this field.

Then click the “Done” button:



After entering the required information is provided then you can use the “Save & Next” button to advance the application to the next step.

**SIGNATURE:**

On this page, the responsible person must E-sign the application for a grant. NOTE: Signer must be city/ county executive or designee. Once the application has been e-signed, the user will need to return to this page to submit the application.

The screenshot shows the 'Signature' page of the OAA Grant Application. The header includes the Opioid Abatement Authority logo and 'GRANTS MANAGEMENT'. The breadcrumb trail shows 'OAA Cooperative Partnership Grant - FY2025 | Highland County-2025-COOP-New-000684'. The left sidebar lists various application sections, with 'Signature' selected. The main content area has the following elements:

- Signature** (Section Header)
- Signer must be city/ county executive or designee. Once the application has been e-signed, the user will need to return to this page to submit the application.
- Asterisk (\*) Indicates required field**
- Informational box: Please click on **Download Application** button on top to download a copy of the application as a PDF file.
- Checkbox:  \* I swear or affirm that all information contained in and attached to this application is true to the best of my knowledge and that I agree that any awards resulting from this application will follow the OAA's established terms & conditions.
- Informational box: Please enter **Authorized Official** (city/county executive or designee) details and click on "**Send for E-Sign and Submit**" button. They should receive an email for E- Signature to complete the intake submission.
- Question: \*Do you want to add existing contact or want to invite new user?
  - Add Existing Contact
  - Invite New User
- Buttons: **Exit**, **Previous**, and **Send for E-Sign and Submit**.

Select the checkbox next to the “I swear or affirm that all information contained in and attached to this application is true to the best of my knowledge and that I agree that any awards resulting from this application will follow the OAA's established terms & conditions.”

Then answer the following question: “Do you want to add existing contact or want to invite new user?” and then provide the requested information.

Add Existing Contact (Use the “Search for Authorized Member Contact” list to locate an existing contact)

## Signature

Signer must be city/ county executive or designee. Once the application has been e-signed, the user will need to return to this page to submit the application.

Asterisk (\*) indicates required field

 Please click on Download Application button on top to download a copy of the application as a PDF file.

\* I swear or affirm that all information contained in and attached to this application is true to the best of my knowledge and that I agree that any awards resulting from this application will follow the OAA's established terms & conditions.

 Please enter Authorized Official (city/county executive or designee) details and click on "Send for E-Sign and Submit" button. They should receive an email for E- Signature to complete the intake submission.

\* Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

\* Search for Authorized Member Contact

Complete this field.

* First Name	Middle Name	* Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
* Job Title	Office Phone	Cell Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>
Suffix	* Email	
<input type="text"/>	<input type="text"/>	

Invite New User (fill in the required information):

## Signature

Signer must be city/ county executive or designee. Once the application has been e-signed, the user will need to return to this page to submit the application.

Asterisk (\*) indicates required field

 Please click on Download Application button on top to download a copy of the application as a PDF file.

\* I swear or affirm that all information contained in and attached to this application is true to the best of my knowledge and that I agree that any awards resulting from this application will follow the OAA's established terms & conditions.

 Please enter Authorized Official (city/county executive or designee) details and click on "Send for E-Sign and Submit" button. They should receive an email for E- Signature to complete the intake submission.

\* Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

* First Name	Middle Name	* Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
* Job Title	Office Phone	Cell Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>
Suffix	* Email	
<input type="text"/>	<input type="text"/>	

After either step is completed then you should use the "Send for E-Sign and Submit" button.

If the Signatures for the previous step "Agreements" were not returned you will see this error message displayed:

After all the Partners have E-Signed their Cooperative Agreements then you can finalize the last step of the submission.

This is what the final submission popup will look like:

Next an email will be sent requesting the E-Signature and the OAA Staff will begin processing the Cooperative Grant application.

The following page will display, allowing you to choose one of two options by selecting either the “[Download Application](#)” button (which will download a PDF of the application you submitted or the “[Back to Dashboard](#)” button that will return you to the Dashboard.

OAA Staff may send your application to the “[Assigned Back](#)” status to allow you to provide the requested information they need to complete your application processing. This is typically done by uploading additional information in the form of one or more files. Please note that all processing on your application will stop when this status is displayed on your application dashboard.

## STATE AGENCY GRANT APPLICATION PROCESS

The State Agency Grant is specific to a registered user who represents a State Agency applying for a State Agency Proposal. If your State Agency is eligible to apply for several State Agency Grants, you may wish to use the Search with Application Name feature in the upper right hand corner. The table displaying the results will only display matching application names if that feature is used, otherwise all State Grant Applications will be displayed. Please Note: State Agency Proposals are Competitive and therefore applying for does not imply that it will necessarily be approved by the Grants Committee.

### SELECT A STATE AGENCY PROPOSAL:

The State Grant must be in a period where it is available for application, amendment, or renewal. This is indicated by the dates displayed on the Grant Dashboard for New, Renewal and Amend Applications.

The screenshot shows the 'Grants Management' dashboard for the Opioid Abatement Authority. It features a sidebar with navigation options: Dashboard, Grants Management (selected), Members, and Historical Downloads. The main content area displays two proposals:

- OAA State Agency Proposal - PP2024-2025** (Status: Open)
  - Buttons: Start Annual Reporting, Apply
  - Fiscal Year 2025**

Application Type	Open Date	Due Date
New Application	8/1/2024	9/30/2024
Renewal Application	7/28/2024	9/10/2024
Amend Application	7/28/2024	10/10/2024
Annual Reporting	9/5/2024	9/30/2024
  - Purpose:** The grant is to support the individual city who are working towards prevention of opioids.
  - [View Details](#)
  - Contact: info@voaa.us
- OAA State Agency Proposal - PP2025-2026** (Status: Open)
  - Buttons: Start Annual Reporting, Apply
  - Fiscal Year 2026**

Application Type	Open Date	Due Date
New Application	8/1/2024	9/30/2024
Renewal Application	8/1/2024	9/30/2024
Amend Application	8/1/2024	9/30/2024
Annual Reporting	8/1/2024	9/30/2024
  - Purpose:** The grant is to support the individual city who are working towards prevention of opioids.
  - [View Details](#)
  - Contact: info@voaa.us

After you click the “[Apply](#)” button this popup will be displayed. If this is your first time applying for that grant you would need to select the Application Type as “[New](#)”, if you are updating an existing Grant you would need to select the Application Type as “[Amendment](#)” and if you are applying for another year for this grant you would need to select “[Renew](#)”. Please **note**: Based on the dates displayed on the Grants Management page you might not see all those application type options. Also, there is a requirement to provide an Annual Report which is accessed only by selecting the “[Start Annual Reporting](#)” button on the Grants Management page for your previously awarded Grant.

The screenshot shows the 'Grants Management' interface. A modal dialog is open for the 'OAA State Agency Proposal - PP2024-2025'. The dialog contains the following information:

- Title:** OAA State Agency Proposal - PP2024-2025
- Asterisk (\*) indicates required field**
- Purpose:** The Opioid Abatement Authority (OAA) is committed to working with cities, counties, and state agencies to assist in utilizing opioid settlement funds to help save lives in communities across the Commonwealth. Once you have started your application, please review the instructions carefully and if you have any questions, reach out to us at [info@voaa.us](mailto:info@voaa.us) and someone will be glad to assist.
- Application Type:**
  - New
  - Amendment

Buttons for 'Cancel' and 'Start' are visible at the bottom of the modal. In the background, the 'Grants Management' page shows a search bar, a 'Start Annual Reporting' button, and an 'Apply' button.

Clicking Start after you select “[New](#)”, “[Amendment](#)” or “[Renewal](#)” will begin the application process.

Navigation:

After the Grant Application loads there will be a number of steps noted below, those steps are listed vertically on the left hand side of the page. At the bottom of the page on the right hand side is a “**Next**” button which will save your information and advance to the next step in the application process. After the initial step there will be another “**Previous**” button that will go back to the previous step, selecting this button will not save any information on the current application step. The “**Next**” button will be replaced by a “**Save & Next**” button with the same functionality. On the bottom left of most pages will be an “**Exit**” button, please note that using this will not save any new information since the last “**Save & Next**”. You will not be able to advance to

the next step if there are any required fields that have not been completed or filled out.

**INSTRUCTIONS:**

Please read and review the instructions displayed on the first page of this application.

The screenshot shows the OAA Grants Management application interface. At the top, there is a header with the Opioid Abatement Authority logo and the text 'OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT'. To the right of the header, it says 'Secretary of Health and Human Resources' and 'JamesState MooreState'. Below the header, there is a navigation bar with a 'Back to dashboard' button and the text 'OAA State Agency Proposal - PP2024-2025 | Secretary of Health and Human Resources-2025-STAT-New-000693'. On the right side of the navigation bar, there is a 'Download Application' button. The main content area is titled 'Instructions' and contains the following text:

The Virginia Opioid Abatement Authority's (OAA's) State Agency awards come from the Opioid Abatement Fund. The contents of this proposal are for state agencies seeking awards for NEW projects from the OAA in compliance with the national settlement agreements, Commonwealth's memorandum of understanding (MOU), and Code of Virginia.

OAA awards to state agencies have a performance period of one year with up to four optional renewal years. Reporting is on an annual basis and is due November 1 following the close of the performance period. Recipients must submit yearly requests to renew and/or make any amendments to the next fiscal year's funding.

Below is a list of items to consider that will be necessary to complete the proposal. Additional guidance, [terms and conditions](#) for the awards, and [resources](#) can be found on our website.

- Project budget (including matching funds, requesting funds, and expenditures)
- Project objectives and projected start and completion dates
- Project performance measures (a list to performance measures can be found [here](#))
- Contract(s)/MOU(s) with partners/contractors/subrecipients (or drafts or scopes of work)
- Supporting evidence-based documentation/web link
- Supporting evidence-informed documentation/web link
- Supporting documentation if project has received any awards or recognition
- Optional: Any letters of support, articles, or other items that may assist the OAA Grants Committee in making an award decision for this project.

For any proposals the OAA determines do not meet the established requirements, the OAA will assist the applicant to revise the proposal to facilitate compliance. Due to the competitive nature of State Agency Awards, assistance from the OAA does not guarantee any final recommendations or approvals.

At the bottom right of the main content area, there is a blue 'Next' button.

**AGENCY INFORMATION:**

This step is where you must specify a Contact Person for this Agency. This is the contact information for the person who will complete the application process and provide the requested information on the following steps. You may add a new Contact Person by selecting the “[Invite New User](#)” option and providing their contact information so the system can send them an email to login to the portal or you may add any current contact related to your city or county by selecting the “[Add Existing](#)”

Contact” and then select the appropriate person’s name to be the Fiscal Agent.

The screenshot shows the 'Agency Information' form. The 'Contact Person for this Agency' section has a dropdown menu with 'JamesState MooreState' selected. The 'Add Existing Contact' radio button is selected, and the 'Invite New User' radio button is unselected. The 'Exit', 'Previous', and 'Save & Next' buttons are visible at the bottom.

Add Existing Contact option

The screenshot shows the 'Agency Information' form. The 'Contact Person for this Agency' section has a dropdown menu with 'JamesState MooreState' selected. The 'Add Existing Contact' radio button is selected, and the 'Invite New User' radio button is unselected. The 'Exit', 'Previous', and 'Save & Next' buttons are visible at the bottom.

Invite New User option

**Agency Information**

Asterisk (\*) indicates required field

Name of Agency: Secretary of Health and Human Resources  
Secretariat: Health and Human Resources

**Contact Person for this Agency**

*This should be someone who can answer programmatic and financial questions regarding the application and does not have to be the signer of the application or the agency head.*

\*Do you want to add existing contact or want to invite new user?  
 Add Existing Contact  Invite New User

\*First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ \*Last Name: \_\_\_\_\_  
 \*Job Title: \_\_\_\_\_ Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 Suffix: \_\_\_\_\_ \*Email: \_\_\_\_\_

Exit Previous Save & Next

After the required information is added, you can use the “Save & Next” button to advance the application to the next step.

## PROJECT INFORMATIONS:

This is the step where you add Project Information.

You can specify Direct Distribution Information per Fiscal Year and allocate “Amounts Expended towards OAA Projects” and/or “Amounts Expended towards Non-OAA Projects” and/or “Amounts Held in Reserve”. Use the checkbox next to the Fiscal Year you want to update and click the “Edit” button or use the “Add New” button to create a new row for a Fiscal Year, then enter the amounts. You could also use the “Delete” button to remove a row.

You can also specify Direct Distribution for Non-OAA Projects by editing the rows by checkbox next to the Project you want to update and click the “Edit” button or use the “Add New” button to create a new row for a Project, then enter the “Amount Allocated/Spent”, “Starting Date” / “Ending Date” and a “Brief Description of Project” and also specify “Does the project continue into the next year?” by checking a box.. You could also use the “Delete” button to remove a row.

Next answer the required questions. After the information is added, you can use the “Save & Next” button to advance the application to the next step.

**OPIOID ABATEMENT AUTHORITY**  
**GRANTS MANAGEMENT**

 Secretary of Health and Human Resources ▾ | JamesState MooreState ▾

[← Back to dashboard](#)

[Download Application](#)

- Instructions
- Agency Information
- **Project Information**
- Budget - Personnel Expenditures
- Budget - Operating & Capital Expenditures
- Budget Overview
- Performance Measurement
- Objectives
- Reference Information
- Prepare for E-Signature

## Project Information

Complete the information below for the project the city or county is requesting to be funded.

**Asterisk (\*) indicates required field**

\*Project Name

\*Which of the following criteria does the project meet?  
 A new effort for the agency.  
 A proposed supplement or enhancement to a project or effort that is already in place.  
 A combination of enhancing an existing project/effort with new components.

\*Provide a brief narrative description of the proposed project.

\*Note if this project one-time in nature and if not, describe strategies for long-term sustainability once OAA funds are reduced or no longer available;

\*How was the need determined and how does that need relate to abatement?

\*Describe any specific group(s) of individuals this project is designed to reach, and how many individuals are expected to participate each year.

\*Does this project have components other than opioid-related abatement as defined?  
 No, it is 100% related to opioid treatment.    Yes, there are other substances involved.

\*Provide a budget narrative for the funding strategy of this project

**OPIOID ABATEMENT AUTHORITY**  
**GRANTS MANAGEMENT**

 Secretary of Health and Human Resources ▾ | JamesState MooreState ▾

[← Back to dashboard](#)

[Download Application](#)

- Instructions
- Agency Information
- **Project Information**
- Budget - Personnel Expenditures
- Budget - Operating & Capital Expenditures
- Budget Overview
- Performance Measurement
- Objectives
- Reference Information
- Prepare for E-Signature

\*Provide a budget narrative for the funding strategy of this project

\*Select the prioritized proposal area(s) related to this project (check all that apply)  
 Expand, facilitate, or otherwise provide greater mobile treatment and crisis services;  
 Reduce overdoses;  
 Expand access to effective treatments - i) May include Medications for Opioid Use Disorder (MOUD), including programs providing treatment for criminal justice involved individuals;  
 Support people in recovery - i) May include supports for housing and transportation;  
 Increase treatment and recovery resources for adolescents;  
 Improve information and data sharing related to the opioid crisis in Virginia;  
 Provide proactive outreach, screening, and healthcare connections;  
 Identify and address needs and disparities in access to abatement efforts for people in traditionally disadvantaged communities - i) May include gap analysis on supports needed to reduce stigma and increase engagement with treatment and/or recovery programs in these communities; ii) May include a review of successful, evidence-based programs for opioid abatement to determine necessary modifications to address various cultural and environmental norms, stigma, beliefs, values, etc. that would increase the chance of successful implementation and adoption in these communities; iii) Any proposals in this area should include partnering with experts from these communities from various backgrounds including academic and lived experience;  
 Address workforce needs for providing abatement efforts - i) May include programs providing credit toward certifications and/or degrees for Certified Peer Recovery Specialists (CPRS) based on the time, effort, education, and experience the certification process involves; ii) May include certifications and/or degree programs that fast track CPRS into job pipelines that help abate the opioid epidemic;  
 Development of programs that prevent and/or reduce the impact of opioid use disorder-related incarceration, treatment, and/or recovery within the foster care system;  
 Increase resources for children and caregivers in kinship or fictive kinship care due to opioid use disorder-related incarceration, treatment, and/or recovery, and/or to prevent substance use among children in kinship or fictive kinship care;  
 Other proposals that meet the requirements of Code of Virginia.

Error: Complete this field.

Please visit the following links for requirements of Code of Virginia §2.2-2370 and Exhibit E.

\*Describe how the project relates to the prioritized area(s) selected above (for "Other proposals" describe how the project meets the Code of Virginia and/or Exhibit E requirements).

\*Is the geographic focus of this project statewide or regional?

\*How does the project address equity issues?

The screenshot shows a web application interface for the Opioid Abatement Authority Grants Management. The header includes the logo and name of the authority, the user's role (Secretary of Health and Human Resources), and the user's name (JamesState MooreState). The main content area contains several text input fields for project details, a dropdown menu for geographic focus, and a table for listing organizations. The table has columns for Name of Organization, Amount of Funding, Description of Role, and Entity Type. Below the table, there is a message "No Records Found!" and buttons for "Exit", "Previous", and "Save & Next".

After the required information is added, you can use the “Save & Next” button to advance the application to the next step.

You are not required to provide at least one organization

**BUDGET – PERSONNEL EXPENDITURES:**

On this page you will provide the budget information for Salaried Staff and Hourly Staff. This information will be used in the calculation of the anticipated amounts of expenditures for Personnel. Note: The Salaried Staff allows you to enter the Benefits amounts but the Hourly staff calculates from the Benefits amounts for you based on a 30% standard. The application will calculate the totals and grand totals using the information. Use the “Edit”, “Delete”, “Add New” buttons to update, remove or insert new information.

Budget – Personnel Expenditures

Asterisk (\*) Indicates required field

New Salaried Staff

[Edit](#) [Delete](#) [Add New](#)

Position Type/Description	PP2024-2025				PP2025-2026				PP2026-2027				PP2027-2028				PP2028-2029			
	# of FTEs	Salary	Benefits	Total	# of FTEs	Salary	Benefits	Total	# of FTEs	Salary	Benefits	Total	# of FTEs	Salary	Benefits	Total	# of FTEs	Salary	Benefits	Total
Total Salaried Staff	0	N/A	N/A	\$0.00																

Include any positions proposed to be directly funded by the award. (click "Add New" to begin)

New Hourly/Wage/Part-time Staff

[Edit](#) [Delete](#) [Add New](#)

Position Type/Description	PP2024-2025				PP2025-2026				PP2026-2027				PP2027-2028				PP2028-2029			
	# of Wage or PT	\$ Rate	# of Hours	Total (Includes FICA)	# of Wage or PT	\$ Rate	# of Hours	Total (Includes FICA)	# of Wage or PT	\$ Rate	# of Hours	Total (Includes FICA)	# of Wage or PT	\$ Rate	# of Hours	Total (Includes FICA)	# of Wage or PT	\$ Rate	# of Hours	Total (Includes FICA)
Total Hourly/Wage/Part-Time Staff	0	N/A	N/A	\$0.00																

Include any wage/hourly positions proposed to be directly funded by the award. (click "Add New" to begin)

Grand Total

	PP2024-2025		PP2025-2026		PP2026-2027		PP2027-2028		PP2028-2029	
	# of Staff	Grand Total								
Grand Total	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00

[Exit](#)

[Previous](#) [Save & Next](#)

After entering the required information is provided then you can use the “Save & Next” button to advance the application to the next step.

**BUDGET – OPERATING & CAPITAL EXPENDITURES:**

On this page you will provide the budget information for Operating Expenses and Capital Expenses. This information will be used in the calculation of the anticipated amounts of expenditures for Operating & Capital Expenditures. The application will calculate the totals and grand totals using the information. Use the “Edit”, “Delete”, “Add New” buttons to update, remove or insert new information.

Note: Operating Expenses should include any administrative expenses, sub-recipients, and contracts. Operating Expenses should not be used to track indirect costs for the recipient city or county. Capital Expenses should only include... get from the client.

Budget - Operating & Capital Expenditures

Asterisk (\*) indicates required field

New Operating Expenses

[Edit](#) [Delete](#) [Add New](#)

Item Description	PP2024-2025			PP2025-2026			PP2026-2027			PP2027-2028			PP2028-2029		
	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total
Total Operating Expenses	0	N/A	\$0.00												

Include any operational expenses (administrative, supplies, rent, maintenance, sub-recipients, contracts, etc.). Indirect costs are not allowed for the recipient agency. (click "Add New" to begin)

New Capital Expenses

[Edit](#) [Delete](#) [Add New](#)

Item Description	PP2024-2025			PP2025-2026			PP2026-2027			PP2027-2028			PP2028-2029		
	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total
Total Capital Expenses	0	N/A	\$0.00												

Capital expenditures should only include:

Grand Total

Grand Total	PP2024-2025			PP2025-2026			PP2026-2027			PP2027-2028			PP2028-2029		
	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total	# of Units	Cost per Unit	Total
Grand Total	N/A	N/A	\$0.00												

[Exit](#)

[Previous](#)

[Save & Next](#)

After entering the required information is provided then you can use the **“Save & Next”** button to advance the application to the next step.

**BUDGET OVERVIEW:**

On this page you may enter the Revenue anticipated for this Individual Grants Application. This must be separated into Non-OAA Matching Funds and into OAA Requested Funding Sources (State Agency). The system will calculate the Revenue Grand Totals for your application and it will display the totals from the Expenses. Use the “Edit” button to update State Agency OAA Request information.

**Budget Overview**

Complete the budget information below for the project that locality (City/County/State Agency) is requesting to be funded.

**Warning!** (\*) indicates required field

**Revenue**

**Non-OAA Matching Funds**

Please enter any matching funds (Direct Distribution - if any).

\* In order to use Direct Distribution as a matching fund, check the box next to Direct Distributions and select Edit. Additional sources may be added as well using Add New.

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
Non-OAA Matching Funds	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
<input type="checkbox"/> Direct Distribution	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total Non-OAA Funding Sources</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**OAA Requested Funding Sources**

Is with the amount of Individual Distributions (and Standard Funds you'd like to request, check the box of the intended fund source and select Edit.

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
OAA Requested Funding Sources	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
<input type="checkbox"/> Individual Distributions (ID)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<input type="checkbox"/> Grant Standard Distributions	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total OAA Funding Sources</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**Revenue Grand Total**

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
Revenue Grand Total	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**Expenses**

Expenses are profiled from the Budget Expenditure sections, to edit select Previous and edit in the appropriate section

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
Expenses	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
Personnel-related	\$2.43	\$2.43	\$2.43	\$2.43	\$2.43
<b>Total Expenses</b>	<b>\$2.43</b>	<b>\$2.43</b>	<b>\$2.43</b>	<b>\$2.43</b>	<b>\$2.43</b>

**Total Requested Amount from the OAA**

	FY 2025	FY 2026	FY 2027	FY 2028	FY 2029
Total Requested Amount from the OAA	Requested Amount	Proposed Amount	Proposed Amount	Proposed Amount	Proposed Amount
	\$2.43	\$2.43	\$2.43	\$2.43	\$2.43

Please note you will be presented with this error message: "Total Requested Amount must be the exact match of the Total OAA Requested Funding Source." If you see this result you may need to make some adjustments to either your Expenses or your Revenues when both are equal the error message will no longer be displayed. See sample of error message below:

Total Requested Amount must be the exact match of the Total OAA Requested Funding Source.

**PERFORMANCE MEASUREMENT:**

On this page you will be able to enter your performance measurement goals per Fiscal Year (you must enter at least one Performance Measurement for one Fiscal Year):

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Secretary of Health and Human Resources | JamesState MooreState

← Back to dashboard OAA State Agency Proposal - PP2024-2025 | Secretary of Health and Human Resources-2025-STAT-New-000693 Download Application

- Instructions
- Agency Information
- Project Information
- Budget - Personnel Expenditures
- Budget - Operating & Capital Expenditures
- Budget Overview
- Performance Measurement**
- Objectives
- Reference Information
- Prepare for E-Signature

### Performance Measurement

Enter the applicable measures for this project (number of people projected to participate) under the corresponding fiscal year. At least 1 is required for each year that the project is intending to request funding. Additional performance measures that are not pre-populated here can be added at the bottom of this page under "Other".

**Asterisk (\*) indicates required field**

#### Prevention/Education/Awareness Efforts

Position Type/Description	PP2024-2025	PP2025-2026	PP2026-2027	PP2027-2028	PP2028-2029
No. of children, infant to 5 years old, participating in prevention/education programming	0	0	0	0	0
No. children, elementary school age, participating in prevention/education programming	0	0	0	0	0
No. of children, middle school age, participating in prevention/education programming	0	0	0	0	0
No. of children, high school age, participating in prevention/education programming	0	0	0	0	0
No. adults from the general public participating in prevention/education programming	0	0	0	0	0

**NOTE:** Enter the applicable measures for this project (number of people projected to participate) under the corresponding fiscal year. At least 1 is required for each year that the project is intending to request funding. Additional performance measures that are not pre-populated here can be added at the bottom of this page under "Other".

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Secretary of Health and Human Resources | JamesState MooreState

← Back to dashboard OAA State Agency Proposal - PP2024-2025 | Secretary of Health and Human Resources-2025-STAT-New-000693 Download Application

No. of adults connected to a job / employment	0	0	0	0	0
---	---	---	---	---	---

#### Harm Reduction Efforts

Position Type/Description	PP2024-2025	PP2025-2026	PP2026-2027	PP2027-2028	PP2028-2029
No. of people engaged during harm prevention outreach efforts	0	0	0	0	0
No. of Naloxone kits distributed to at-risk individuals	0	0	0	0	0
No. of Fentanyl test kits distributed to at-risk individuals	0	0	0	0	0
No. of clean syringe exchanges conducted	0	0	0	0	0
Reported No. of overdoses reversed	0	0	0	0	0

**Other - Please Describe** Edit Delete + Add New

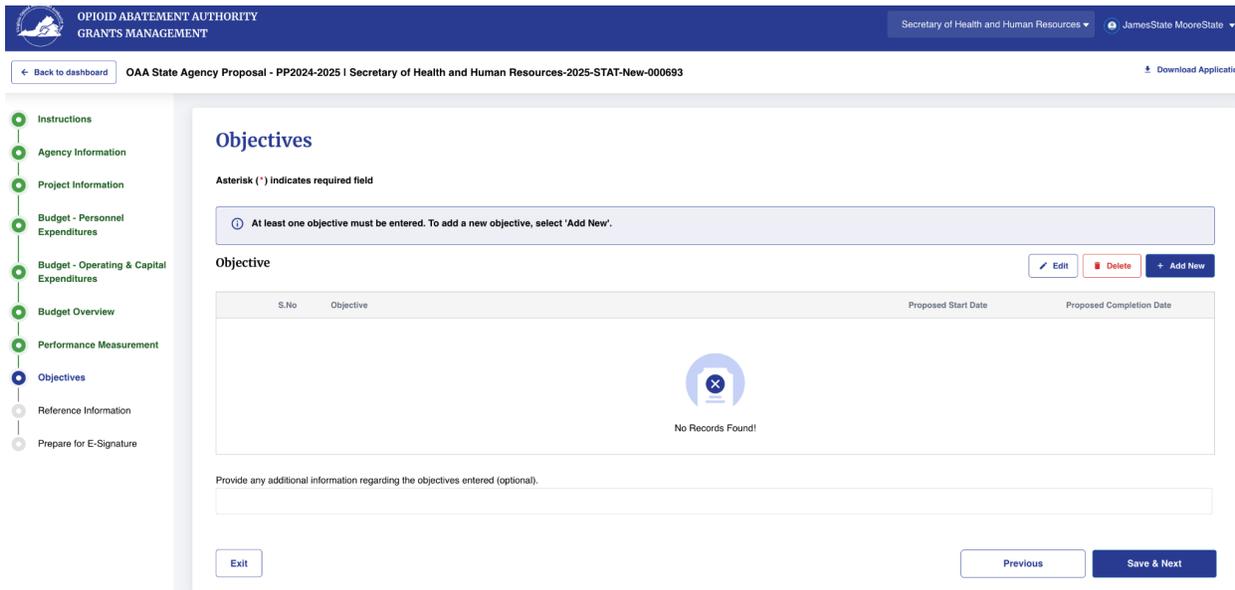
Position Type/Description	PP2024-2025	PP2025-2026	PP2026-2027	PP2027-2028	PP2028-2029
Provide any additional information regarding the measures selected (optional).					

Exit Previous Save & Next

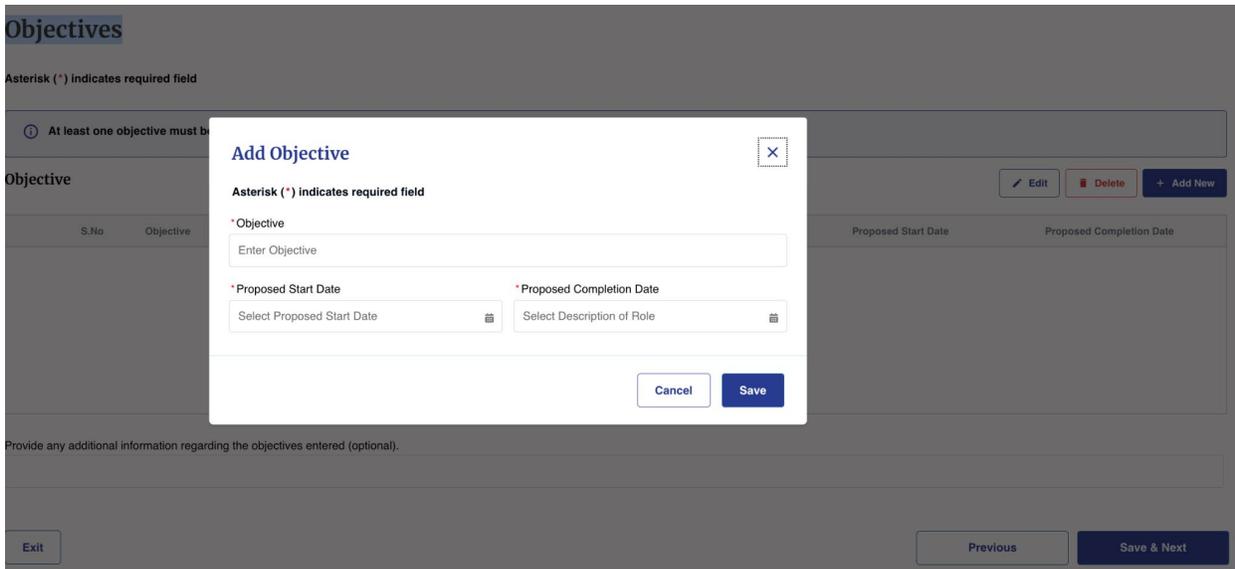
After entering the required information is provided then you can use the “Save & Next” button to advance the application to the next step.

**OBJECTIVES:**

On this page, you will provide at least one Objective to proceed.



Use the “Edit”, “Delete”, “Add New” buttons to update, remove or insert one or more Objectives with Proposed Start and Completion Dates:



After completing one or more of the Objectives you can advance to the next step of the application:

**Objectives**

Asterisk (\*) indicates required field

ⓘ At least one objective must be entered. To add a new objective, select 'Add New'.

Objective Edit Delete + Add New

S.No	Objective	Proposed Start Date	Proposed Completion Date
<input type="checkbox"/>	1 test 123	8/31/2024	10/30/2025

Provide any additional information regarding the objectives entered (optional).

Exit Previous Save & Next

After entering the required information is provided then you can use the “Save & Next” button to advance the application to the next step.

**REFERENCE INFORMATION:**

After answering the questions please provide a Weblink or File Upload for the “Yes” answers. The allowed formats for file uploads are .docx, .png, .jpg, .jpeg, .gif, .pdf, .txt, .xls, .xlsx, .xps and file size should be less than 25mb.

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Secretary of Health and Human Resources | JamesState MooreState

← Back to dashboard OAA State Agency Proposal - PP2024-2025 | Secretary of Health and Human Resources-2025-STAT-New-000693 Download Application

- Instructions
- Agency Information
- Project Information
- Budget - Personnel Expenditures
- Budget - Operating & Capital Expenditures
- Budget Overview
- Performance Measurement
- Objectives
- Reference Information**
- Prepare for E-Signature

### Reference Information

Asterisk (\*) indicates required field

Answer the questions below and provide supporting information as prompted. The allowed formats for file uploads are .docx, .png, .jpg, .jpeg, .gif, .pdf, .txt, .xls, .xlsx, .xps and file size should be less than 25mb.

\*Is your Project Evidence based?  
 Yes  No

\*Is your Project Evidence Informed?  
 Yes  No

\*Is your project certified/credentialed by a State or Federal Agency, or other organization?  
 Yes  No

\*Has your project received any award(s) and/or recognition?  
 Yes  No

\*Is your project working with an organization with an established record of success?  
 Yes  No

Do you have any additional supporting document?  
 Yes  No

Exit Previous Save & Next

Reference Information

Asterisk (\*) indicates required field

Answer the questions below and provide supporting information as prompted. The allowed formats for file uploads are .docx, .png, .jpg, .jpeg, .gif, .pdf, .txt, .xls, .xlsx, .xps and file size should be less than 25mb.

\*Is your Project Evidence based?  
 Yes  No

\*Do you have a weblink or do you want to upload a file?  
 Weblink  File Upload

\*Weblink  
http://www.icam.org

\*Is your Project Evidence Informed?  
 Yes  No

\*Do you have a weblink or do you want to upload a file?  
 Weblink  File Upload

\*Upload File  
Upload Files Or drop files  
✓ 1.5 days now or 2.0 days later.png

\*Is your project certified/credentialed by a State or Federal Agency, or other organization?  
 Yes  No

\*Has your project received any award(s) and/or recognition?  
 Yes  No

\*Is your project working with an organization with an established record of success?  
 Yes  No

Do you have any additional supporting document?  
 Yes  No

Exit Previous Save & Next

Weblink example (use the provided field to enter the full address):

## Reference Information

Asterisk (\*) indicates required field

Answer the questions below and provide supporting information as prompted. The allowed formats for file uploads are .docx, .png, .jpg, .jpeg, .gif, .pdf, .txt, .xls, .xlsx, .xps and file size should be less than 25mb.

\* Is your Project Evidence based?

Yes  No

\* Do you have a weblink or do you want to upload a file?

Weblink  File Upload

\* Weblink

http://www.mtb2b.com

File Upload example (use the “Upload Files” button or drag and drop a file to the box next to it):

## Reference Information

Asterisk (\*) indicates required field

Answer the questions below and provide supporting information as prompted. The allowed formats for file uploads are .docx, .png, .jpg, .jpeg, .gif, .pdf, .txt, .xls, .xlsx, .xps and file size should be less than 25mb.

\* Is your Project Evidence based?

Yes  No

\* Do you have a weblink or do you want to upload a file?

Weblink  File Upload

\* Upload File

Or drop files

Complete this field.

Then click the “Done” button:

## Reference Information

Asterisk (\*) indicates required field

Answer the questions below and provide supporting information as prompted. The allowed formats for file uploads are .docx, .png, .jpg, .jpeg, .gif, .pdf, .txt, .xls, .xlsx, .xps and file size should be less than 25mb.

\* Is your Project Evidence based?

Yes  No

\* Do you have a weblink or do you want to upload a file?

Weblink  File Upload

\* Weblink

http://www.icann.org

\* Is your Project Evidence Informed?

Yes  No

\* Do you have a weblink or do you want to upload a file?

Weblink  File Upload

\* Upload File

Or drop files

✓ 1.5 days now or 2.0 days later.png

\* Is your project certified/credentialled by a State or Federal Agency, or other organization?

Yes  No

\* Has your project received any award(s) and/or recognition?

Yes  No

\* Is your project working with an organization with an established record of success?

Yes  No

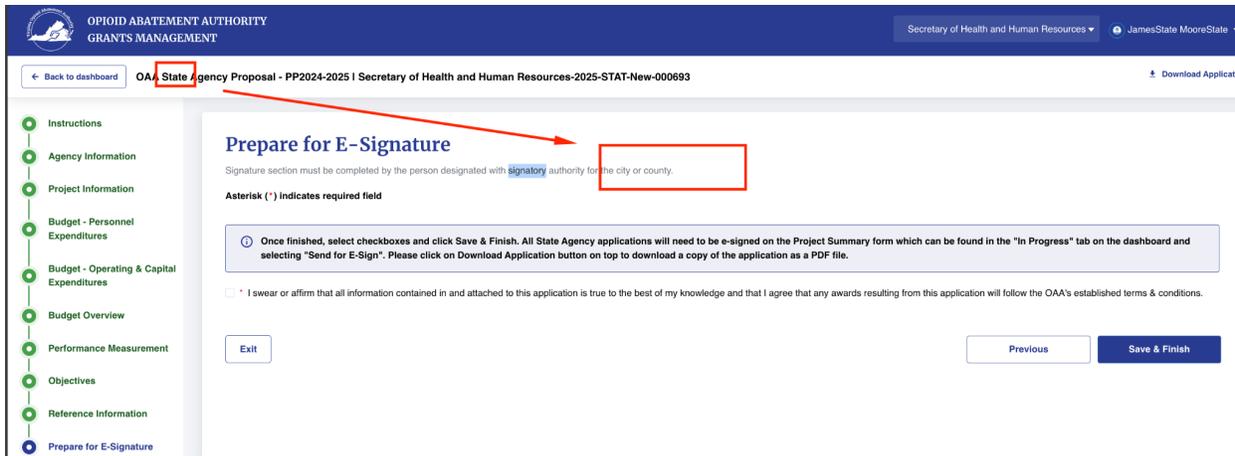
Do you have any additional supporting document?

Yes  No

After entering the required information is provided then you can use the “Save & Next” button to advance the application to the next step. For an “In Progress”, “Draft”, or “Submitted” status application you will be able to select a blue button labeled “View Application” that will generate a PDF of your application in a new tab or window for review and download.

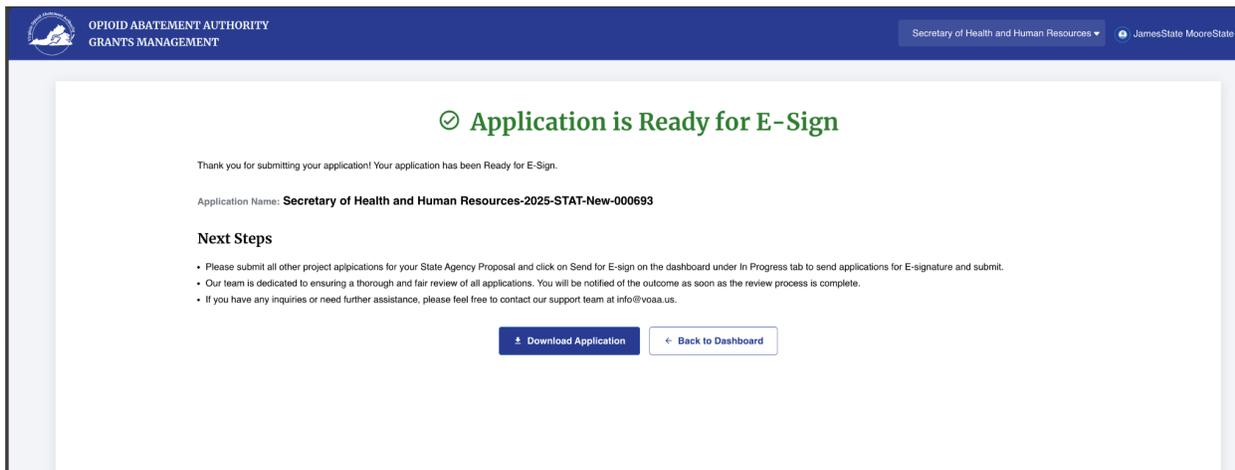
**PREPARE FOR E-SIGNATURE:**

On this page, the responsible person must E-sign the application for a grant. **NOTE:** Signer must be a State Agency person with signatory authority. Once the application has been e-signed, the user will need to return to this page to submit the application.



Select the checkbox next to the “I swear or affirm that all information contained in and attached to this application is true to the best of my knowledge and that I agree that any awards resulting from this application will follow the OAA's established terms & conditions.”

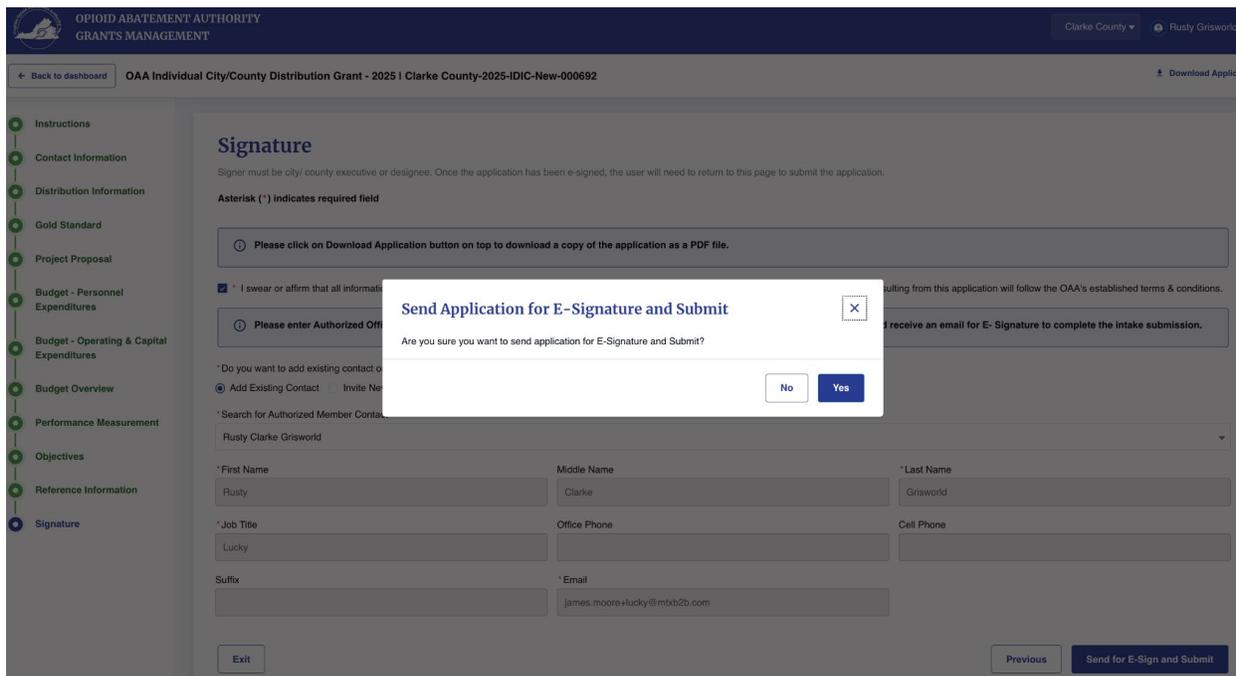
The result will look like this:



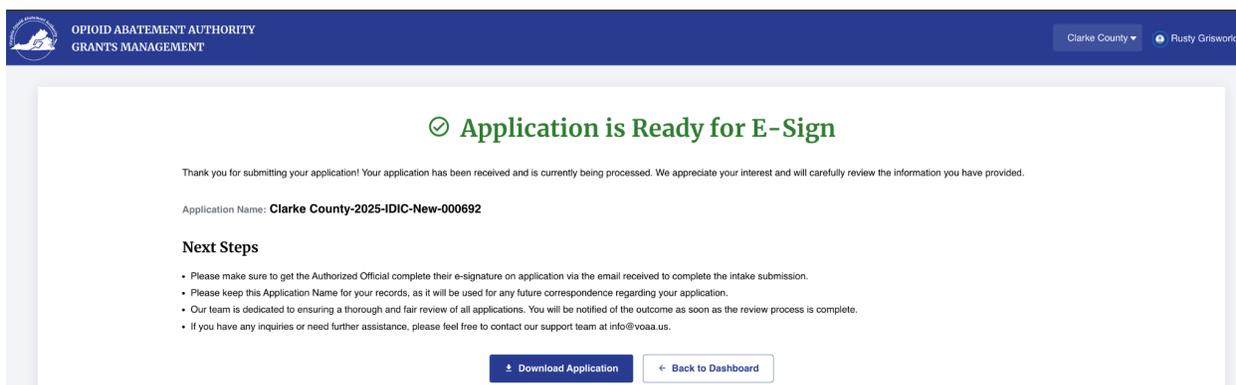
Invite New User (fill in the required information):

After either step is completed then you should use the “Send for E-Sign and Submit” button.

This is what the final submission popup will look like:



Next an email will be sent requesting the E-Signature and the OAA Staff will begin processing the Individual Grant application.



The following page will display, allowing you to choose one of two options by selecting either the “Download Application” button (which will download a PDF of the

application you submitted or the “[Back to Dashboard](#)” button that will return you to the Dashboard.

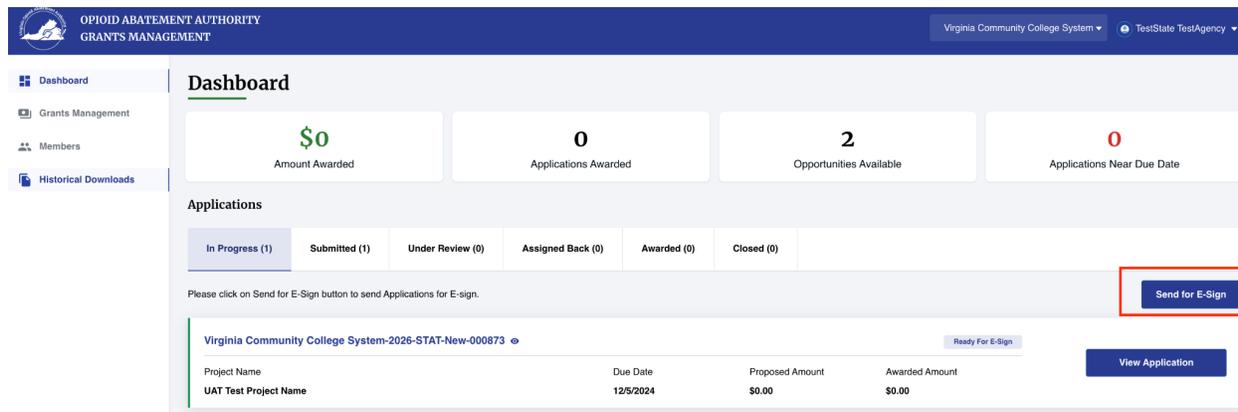
The signed State Agency application will now be in the “[Submitted](#)” status.

OAA Staff may send your application to the “[Assigned Back](#)” status to allow you to provide the requested information they need to complete your application processing. This is typically done by uploading additional information in the form of one or more files. Please note that all processing on your application will stop when this status is displayed on your application dashboard.

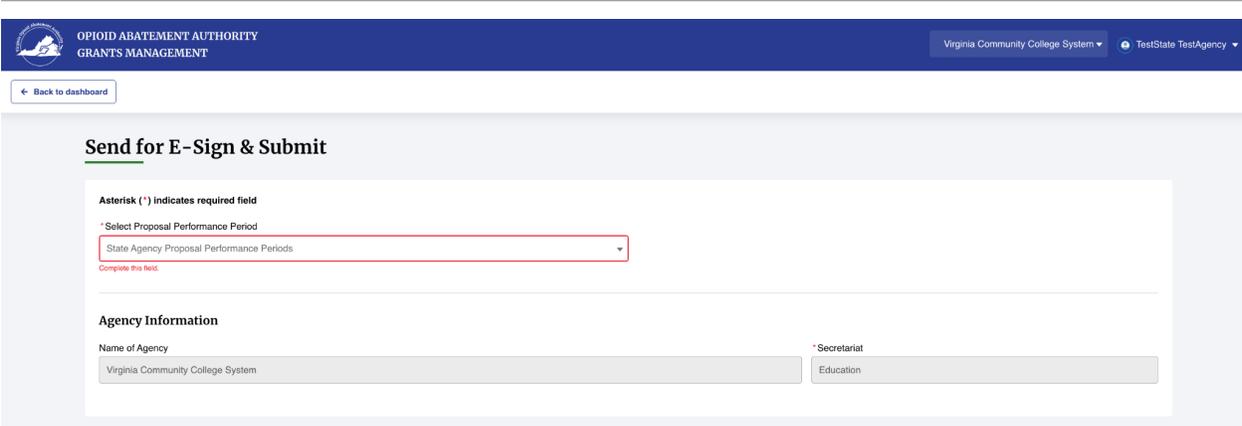
**STATE AGENCY SEND FOR E-SIGN:**

A single State Agency can apply for more than one project and if that is the case then all related projects for a single agency grant must be submitted at the same time by having the same signatory person specified. This is accomplished by using the “Send of E-Sign” button.

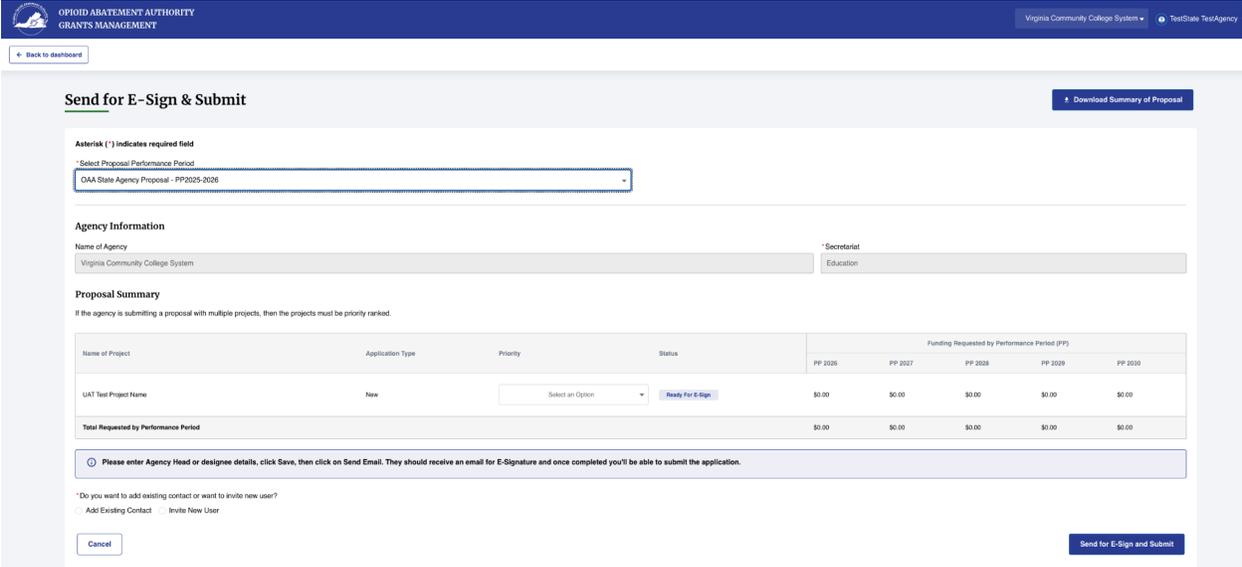
You should be able to click a button under this “[In Progress](#)” tile on top right as the “[Send for E-Sign](#)” button:



This will display the proposals available to be sent in a new screen which allows you to “Select Proposal Performance Periods from the drop down list:



After the Performance Period is selected you can select projects by clicking on checkbox along with Priority against each project and then either “Add Existing Contact” for the Signatory or “Invite New User” for the Signatory. The process for adding or inviting contacts is the same throughout this guide. This will complete the initial submission process for all displayed projects in the list. See image below:



After the Signatory is designated and sent to E-Sign the following screen will appear:

OPPOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Virginia Community College System TestState TestAgency

### ✔ Summary of Proposal is Sent for E-Sign

Thank you for submitting your Summary of Proposal!

State Agency Name: **Virginia Community College System**

**Next Steps**

- Please get your Summary of Proposal e-sign completed by authorized signatory.
- Our team is dedicated to ensuring a thorough and fair review of all applications. You will be notified of the outcome as soon as the review process is complete.
- If you have any inquiries or need further assistance, please feel free to contact our support team at info@voaa.us.

[Download Summary of Proposal](#) [Back to Dashboard](#)

## AWARD PACKAGE, APPEAL, ANNUAL REPORTING, AND CONTINGENCIES

If you receive an Award you will receive a PDF of the Award Package for your review and to retain for your records. If you did not receive an Award for an Individual Grant Application you may be able to appeal that decision (this is a manual process at this time). Note: Cooperative Partnership Grants and State Agency Grants are not able to appeal the Grant Committee’s decisions because these are competitive grants. In the case of Awards, there is a requirement for Annual Reporting. Finally, some grants may be awarded but are required to respond to specific requests for Contingencies by providing documentation. Please refer to sections below for more information about each of these topics.

### AWARD PACKAGE:

When your application is approved by the Grants Committee for an Award the status will change to “Awarded” and you will be able to review the Award Package. This is what the Dashboard will look like:

The screenshot shows the OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT dashboard. The top navigation bar includes the logo, the text "OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT", and user information for "Clarke County" and "Rusty Grisworld".

The main dashboard area features four summary cards:

- Amount Awarded:** \$2
- Applications Awarded:** 1
- Opportunities Available:** 6
- Applications Near Due Date:** 0

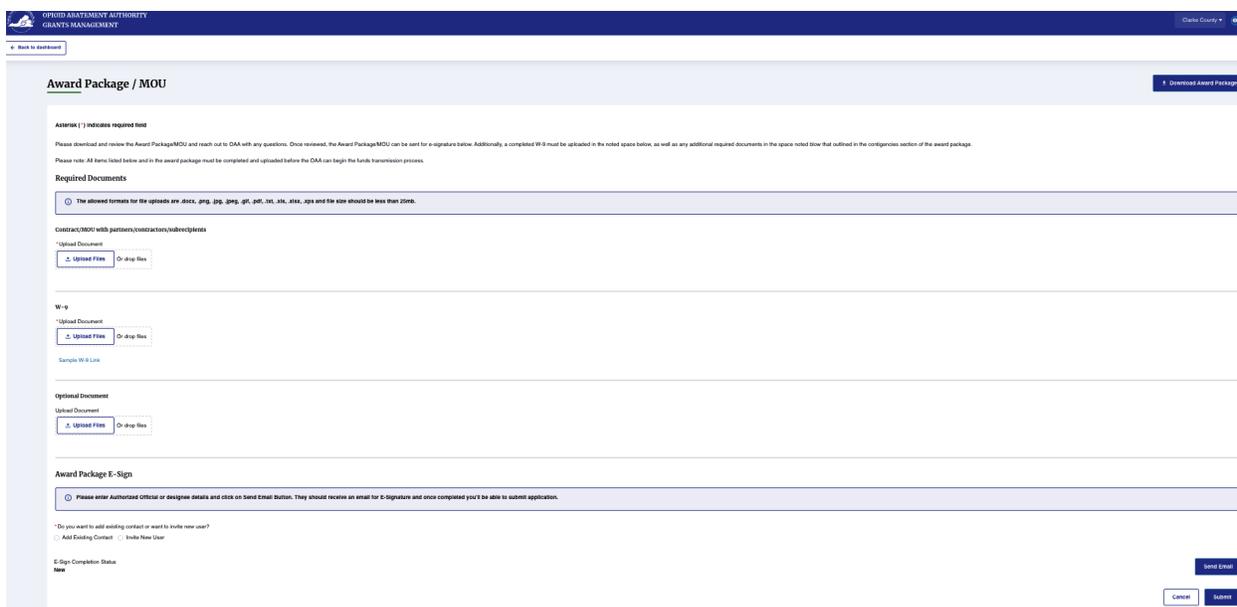
Below these cards is an "Applications" section with a status filter bar showing: In Progress (0), Submitted (0), Under Review (0), Assigned Back (0), **Awarded (1)**, and Closed (0). The "Awarded (1)" filter is selected.

The table below shows the details for the awarded application:

Project Name	Submitted Date	Proposed Amount	Awarded Amount
test	9/17/2024	\$2.43	\$2.43

On the right side of the table, there are three buttons: "Award Package/MOU" (highlighted), "View documents", and "Contingency Documents".

You can access a copy of the PDF file by downloading it from the site by clicking on the “Award Package/MOU” button. The page shown below will be displayed:



From the upper right corner you will see a “[Download Award Package](#)” button clicking this will download or display a PDF file of the Award Package/MOU.

Below that section are 3 buttons to allow you to Upload Files in order to meet the Required Documents:

- Contract/MOU with partners/contractors/subrecipients
- W-9
- Optional Document (not required)

Finally there is a section where you can enter Authorized Official or designee contact information so they can receive the E-Signature email for the Award Package E-Sign. You will need to select an appropriate response to the question “Do you want to add existing contact or want to invite new user?” by clicking either “Add Existing Contact” or “Invite New User” options.

If you select the “Add Existing Contact” you can select the Name from the drop down list:

← Back to dashboard

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Clarke County

\*Upload Document

Upload Document

Optional Document

Upload Document

Award Package E-Sign

Please enter Authorized Official or designee details and click on Send Email Button. They should receive an email for E-Signature and once completed you'll be able to submit application.

Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

Name

Select an Option

\*First Name Middle Name \*Last Name

\*Job Title Office Phone Cell Phone

Suffix \*Email

E-Sign Completion Status  
New

Send Email

Cancel Submit

If you select the “Invite New User” option you will need to provide their contact details:

← Back to dashboard

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Clarke County

\*Upload Document

Upload Document

Optional Document

Upload Document

Award Package E-Sign

Please enter Authorized Official or designee details and click on Send Email Button. They should receive an email for E-Signature and once completed you'll be able to submit application.

Do you want to add existing contact or want to invite new user?

Add Existing Contact  Invite New User

\*First Name Middle Name \*Last Name

\*Job Title Office Phone Cell Phone

Suffix \*Email

E-Sign Completion Status  
New

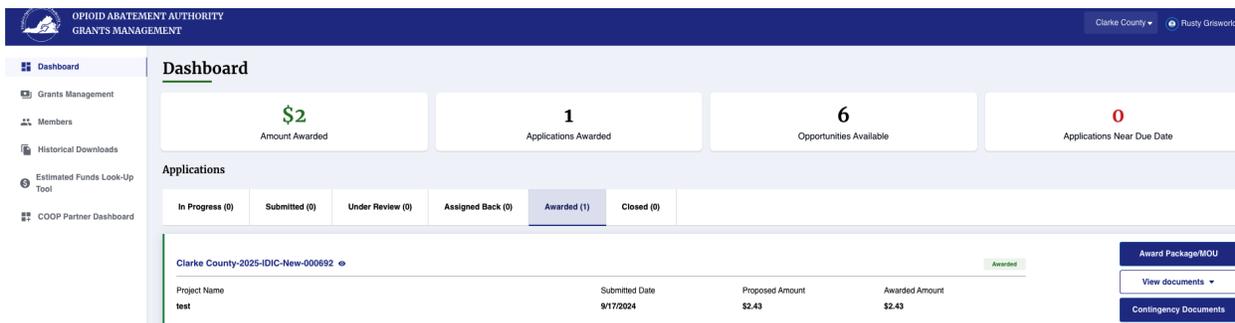
Send Email

Cancel Submit

In either case, you will need to click the “Send Email” button to send the Authorized Official or their designee the E-Sign email.

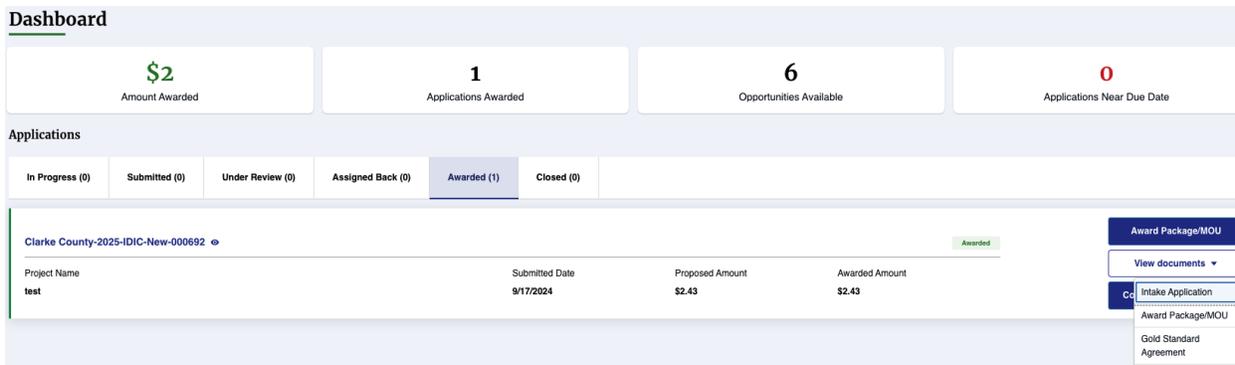
The E-Sign Completion Status will change from “New” to “Pending”. Once the E-Signature is completed, you can select the “Submit” button.

Also, from the Dashboard when the application status is “Awarded” you can use the other two buttons on the screen to “View Documents” or to see any “Contingency Documents” as shown below:



View Documents will allow you to select any of the following:

- PDF Copy of the “Award Package/MOU”
- PDF Copy of the “Intake Application”
- PDF Copy of the “Gold Standard Agreement” (only available if you applied for the Gold Standard Incentive as part of the Application process).



The “Contingency Documents” button will open the following page where you can upload the required documents specific to your application. You may not see all of the required documents displayed. For each document use the “Upload Files” button to provide one or more files. When all have been uploaded you can click the “Submit” document.

OPIOID ABATEMENT AUTHORITY  
GRANTS MANAGEMENT

Clear County

Back to dashboard

### Required Documents

Asterisk (\*) indicates required field

The allowed formats for file uploads are .docx, .png, .jpg, .jpeg, .gif, .pdf, .txt, .xls, .xlsx, .xps and file size should be less than 25mb.

\*Completion of Operational Agreement

Upload Files Or drop files

File Status Pending

\*Completion of Capital Costs Agreement

Upload Files Or drop files

File Status Pending

\*Documentation securing non-OAA matching funds

Upload Files Or drop files

File Status Pending

\*Completion of Progress Reporting Workbook

Upload Files Or drop files

File Status Pending

\*Acknowledgment of Subsequent year Proposed Amount

Upload Files Or drop files

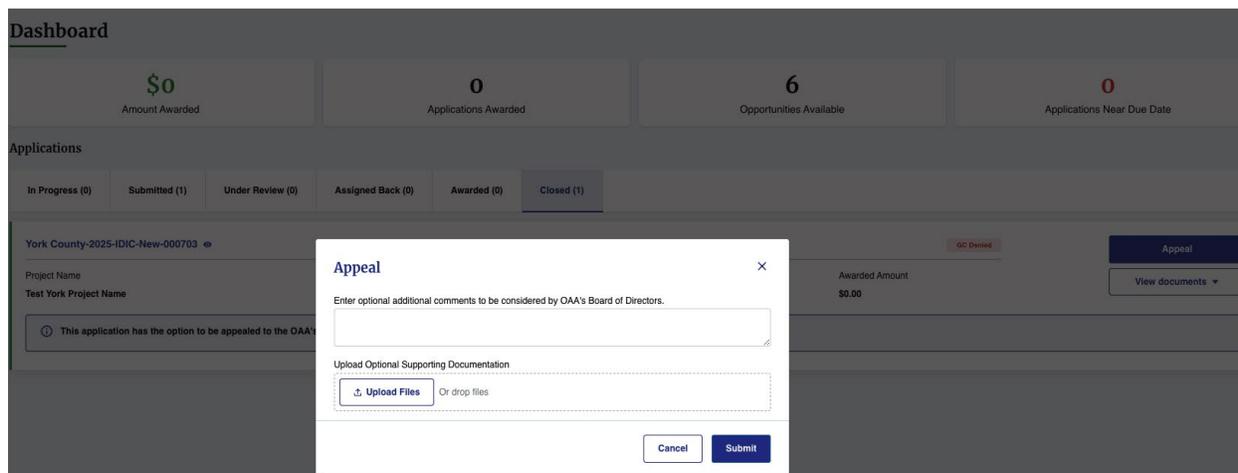
File Status Pending

Cancel Submit

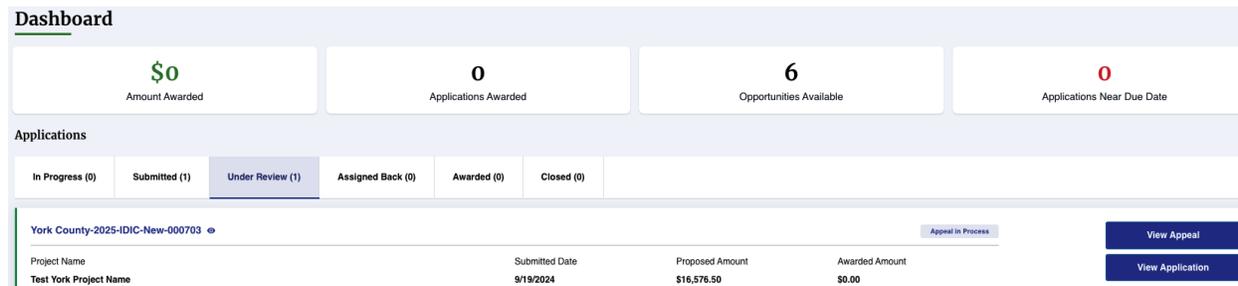
**APPEALS:**

If your Individual distribution application was GC Denied then it will be displayed in the Closed list on the Dashboard. You can use the “[Appeal](#)” button to appeal the decision. You can also use the “[View Documents](#)” to see a PDF copy of the Intake Application. Not all applications for a grant can be appealed. Cooperative Partnership and State Agency grants not able to be appealed.

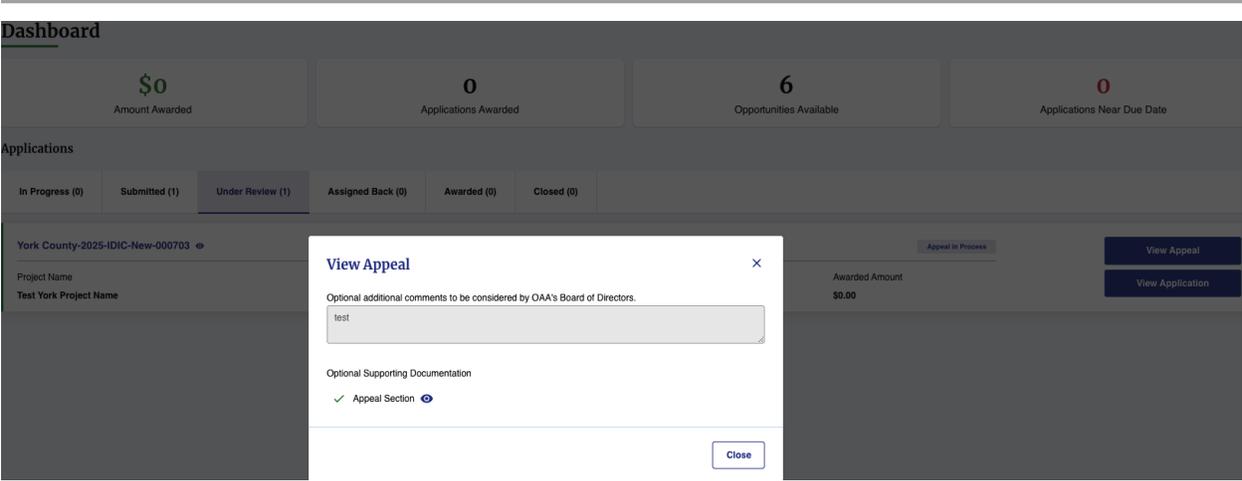
Clicking the “[Appeal](#)” button will open the following pop-up with a field labeled “[Enter optional additional comments to be considered by OAA's Board of Directors.](#)” to explain your reason for appealing. You also may use the “[Upload Files](#)” button to “[Upload Optional Supporting Documentation](#)”.



After you submit your Appeal that application’s status will be “Under Review”. If it is “Appeal in Process” there will be a button “View Appeal” and another button “View Application”.



The “View Appeal” button will open the following read-only screen when clicked:

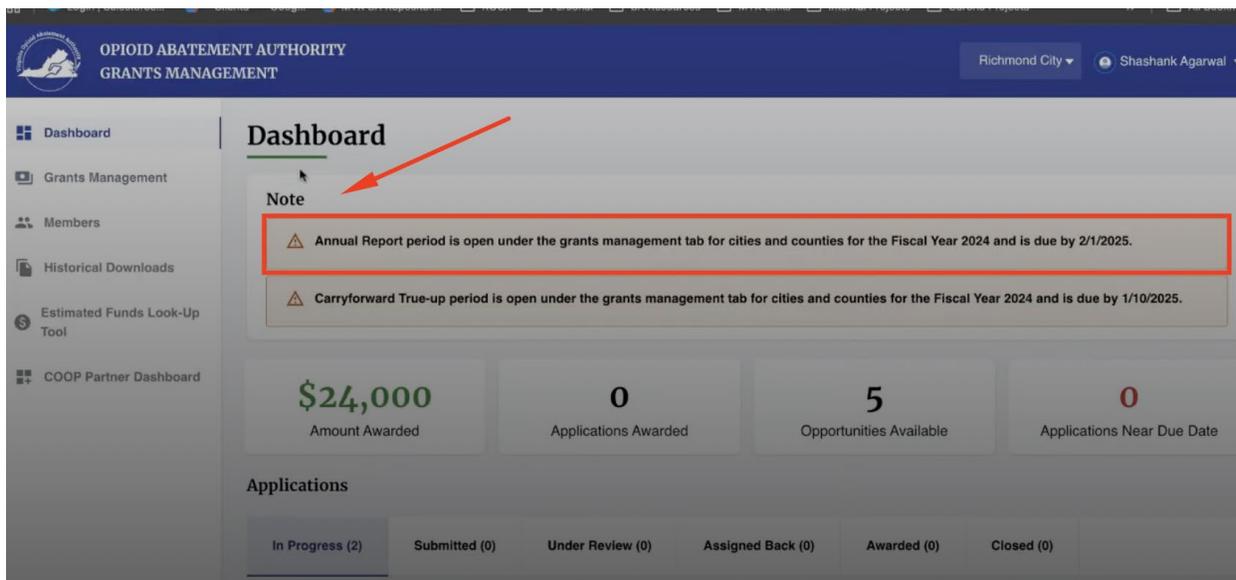


Clicking the “View Application” button will open a PDF copy of the Application.

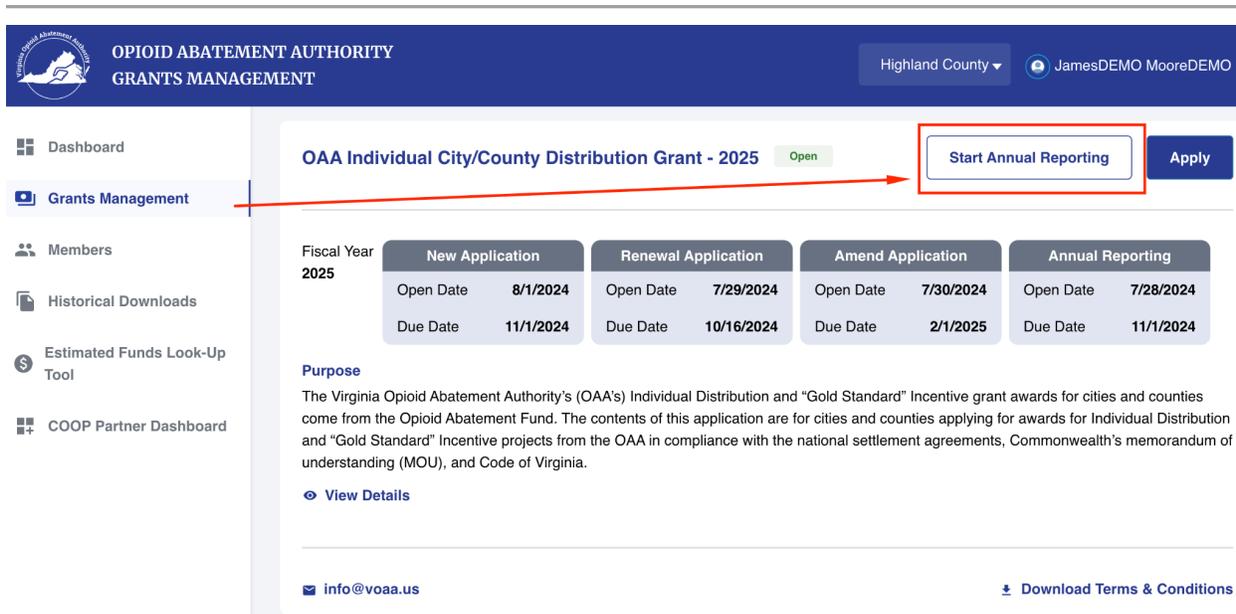
**ANNUAL REPORTING:**

1. If the Application Status is “Payment Processed” then the Applicant can start filing the **Annual Report**.
2. This is done by selecting the “Grants Management” tab, then locating the white “Start Annual Reporting” button.

Note: If your Grant is eligible for Annual Reporting then the following message pictured below will appear on the Dashboard:



This is intended to notify you of the period when you can submit your annual report.



3. A new popup window will display and you will need to select your original project name from the picklist and then select the blue “Start Annual Reporting” button.

## OAA Individual City/County Distribution Grant – 2025 ✕

**Asterisk (\*) indicates required field**

Please select the project and complete the annual reporting for the selected project.



1. The steps to complete the Annual Report are very similar to the application you originally completed. The difference is that you would need to provide the following currency field values: “Expended towards OAA Projects”, “Expended towards Non-OAA Projects” and “Amounts Held in Reserve” for each Distribution.
2. For instance, on the Direct Distribution you will see a popup similar to the one pictured below:

## Direct Distribution – Edit Budget



Asterisk (\*) indicates required field

Fiscal Year <input type="text" value="2025"/>	* Received Amount <input type="text" value="\$1,000.00"/>
* Expended towards OAA Projects <input type="text" value="\$1,000.00"/>	* Expended towards Non-OAA Projects <input type="text" value="\$0.00"/>
* Amounts Held in Reserve <input type="text" value="\$0.00"/>	

Cancel
Save

3. The Budget steps may require updating to explain the amounts “Expended” or “Encumbered” per row and type. On the Budget Overview step you will need to enter the Amounts Approved by “Grants Committee Carry Forward” to account if you haven’t expended or encumbered funds to match the total.

4. Please review the example images below:

OPIOID ABATEMENT AUTHORITY  
 GRANTS MANAGEMENT
 

 Clarke County ▾ Rusty Grisworld ▾

← Back to dashboard    OAA Individual City/County Distribution Grant - 2025 | Clarke County-2025-IDIC-Annual Reporting-000872
 

 Download Rep

- Distribution Information
- Budget - Personnel Expenditures
- Budget - Operating & Capital Expenditures
- Budget Overview
- Performance Measurement
- Objectives Timeline
- Reference Information
- Signature

Asterisk (\*) indicates required field

**Salaried Staff - FY2025**

Position Type/Description	# of FTEs	Awarded	Expended	Total
test 123	<input type="text" value="1"/>	<input type="text" value="1.35"/>	<input type="text" value="1.35"/>	<input type="text" value="0.00"/>
<b>Total Salaried Staff</b>	<b>1</b>	<b>\$1.35</b>	<b>\$1.35</b>	<b>\$0.00</b>

**Wage/Part-Time Staff - FY2025**

Position Type/Description	# of Wage or PT	Awarded	Expended	Total
Test	<input type="text" value="1"/>	<input type="text" value="1.08"/>	<input type="text" value="1.08"/>	<input type="text" value="0.00"/>
<b>Total Wage Staff</b>	<b>1</b>	<b>\$1.08</b>	<b>\$1.08</b>	<b>\$0.00</b>

**Grand Total - FY2025**

Position Type/Description	# of Staff	Awarded	Expended	Total
<b>Totals</b>	<b>2</b>	<b>\$2.43</b>	<b>\$2.43</b>	<b>\$0.00</b>

Exit
Previous
Save & Next

OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT | Clarke County | Rusty Grisworld

← Back to dashboard | OAA Individual City/County Distribution Grant - 2025 | Clarke County-2025-IDIC-Annual Reporting-000872 | Download Report

- Instructions
- Narrative Report
- Distribution Information
- Budget - Personnel Expenditures
- Budget - Operating & Capital Expenditures
- Budget Overview**
- Performance Measurement
- Objectives Timeline
- Reference Information
- Signature

### Budget Overview

Complete the budget information below for the project that locality (City/County/State Agency) is requesting to be funded.

**Asterisk (\*) indicates required field**

#### Revenue

##### Non-OAA Funding Sources

Funding Sources	Pledged	Expended/Encumbered	Balance
Direct Distribution	\$0.00	\$0.00	\$0.00
<b>Total Non-OAA Funding Sources</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

##### OAA Requested Funding Sources

Funding Sources	Pledged	Expended/Encumbered	Balance
Individual Distribution (IDIC)	\$2.43	\$0.00	\$2.43
Gold Standard Distribution	\$0.00	\$0.00	\$0.00
<b>Total OAA Funding Sources</b>	<b>\$2.43</b>	<b>\$0.00</b>	<b>\$2.43</b>

OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT | Clarke County | Rusty Grisworld

← Back to dashboard | OAA Individual City/County Distribution Grant - 2025 | Clarke County-2025-IDIC-Annual Reporting-000872 | Download Report

#### Revenue Grand Total

	Pledged	Expended/Encumbered	Balance
<b>Totals</b>	<b>\$2.43</b>	<b>\$0.00</b>	<b>\$2.43</b>

#### Expenses

Expenses	Pledged	Expended/Encumbered	Balance
Personnel-related	\$2.43	\$2.43	\$0.00
<b>Total Expenses</b>	<b>\$2.43</b>	<b>\$2.43</b>	<b>\$0.00</b>

#### Carry-forward Amounts

Expenses	Awarded
Balance Available for Carry Forward	\$2.43
Amount Approved by Grants Committee for Carry Forward	
Balance to Return to OAA	\$2.43

5. The next step is to update the Performance Measures. Please note that only previously selected Performance Measures will be displayed – see image below:

**Performance Measurement**

Enter the actual FY2025 performance measures achieved for the 7/1/2024-6/30/2025 performance period. In the comment section, provide an explanation on any discrepancies between the approved and the actual performance measures.

**Asterisk (\*) indicates required field**

**Harm Reduction Efforts**

Position Type/Description	FY2025 Awarded	FY2025 Actuals	Comments
Reported No. of overdoses reversed	1	1	

**Other – Please Describe**

Position Type/Description	FY2025 Awarded	FY2025 Actuals	Comments
Provide any additional information regarding the measures selected (optional).			

Buttons: Exit, Previous, Save & Next

6. After that step there will be an opportunity to provide updates on the objectives previously defined during the original application.

**Objectives Timeline**

Complete the information below for the project the city or county is requesting to be funded.

**Asterisk (\*) indicates required field**

**Objective**

Objective	Proposed Start Date	Proposed Completion Date	Actual/Revised Start Date	Actual/Revised Completion Date
test 123	8/31/2024	10/30/2025	MM/DD/YYYY	MM/DD/YYYY

Provide any additional information regarding the objectives entered (optional).

Buttons: Exit, Previous, Save & Next

7. The final step before signature will be where you can “Upload a detailed expenditure report” as a Weblink or as a File Upload and you can optionally provide additional supporting documentation – see image below:

**Reference Information**

**Asterisk (\*) indicates required field**

Complete the items below. The allowed formats for file uploads are .docx, .png, .jpg, .jpeg, .gif, .pdf, .txt, .xls, .xlsx, .xps and file size should be less than 25mb.

\* Upload detailed expenditure report

Weblink  File Upload

Do you have any additional supporting documentation to upload (optional)?

Yes  No

Buttons: Exit, Previous, Save & Next

- Then you can move to the step defining the contact who will complete the E-signature with the option to “Add Existing Contact” or “Invite New User” as the signatory – see image below:

**Signature**

Signature section must be completed by the person designated with signatory authority for the city or county.

Asterisk (\*) indicates required field

Please click on the Download Report button on top to download a copy of the report as a PDF file.

I swear or affirm that all information contained in and attached to this report is true to the best of my knowledge and this award has been carried out in compliance with the OAA's Terms and Conditions.

Please enter Authorized Official (city/county executive or designee) details and click on "Send for E-Sign and Submit" button. They should receive an email for E-Signature to complete the intake submission.

Do you want to add existing contact or want to invite new user?  
 Add Existing Contact  Invite New User

\*Search for Authorized Member Contact  
 Rusty Clarke Grisworld

\*First Name: Rusty, Middle Name: Clarke, \*Last Name: Grisworld  
 \*Job Title: Lucky, Office Phone: , Cell Phone:   
 Suffix: , \*Email: james.moore+lucky@mtxb2b.com

Exit Previous Send for E-Sign and Submit

- Once the Applicant user clicks on the “Send Email and Submit” button there will be a confirmation screen with Yes or No options.
- If you answer Yes, The system will generate a PDF of the entire Annual Report including all the sections in pdf format should be sent to the given email (mentioned in the Email field) – the following page will appear:

**Annual Report is Ready for E-Sign**

Thank you for submitting your Annual Report! Your annual report has been received and is currently being processed. We appreciate your interest and will carefully review the information you have provided.

Annual Report Name: **Clarke County-2025-IDIC-Annual Reporting-000872**

**Next Steps**

- Please make sure to get the Authorized Official complete their e-signature on annual report via the email received to complete the annual report submission.
- Please keep this Annual Report Name for your records, as it will be used for any future correspondence regarding your annual report.
- Our team is dedicated to ensuring a thorough and fair review of all annual reports. You will be notified of the outcome as soon as the review process is complete.
- If you have any inquiries or need further assistance, please feel free to contact our support team at info@voaa.us.

Download Annual Report Back to Dashboard

- The E-Sign Completion Status should display Pending in that scenario.
- When Authorised member clicks on the pdf, the member should be able to put the e-sign using the E-signature functionality at the specified places in the pdf.

13. . Once the Authorised Member completed the signature, then the E-Sign Completion status should automatically changed to Completed.
14. The signed Annual Report should be attached to the Application Record.
15. All the following places should display the signed Award Package in pdf format and available for download:
  - \* Applicant Portal (Annual Reporting Tab)
  - \* Historical Downloads
  - \* Internal Portal (OAA User)/Application Record
  - \* Dashboard-Closed tab- View Document (Drop-Down)
  - \* Submit Screen
16. This functionality is applicable for Individual, Cooperative, State Agency and Direct Distribution type of Application.
17. For Individual, Cooperative & State Agency, this is applicable for New, Renew and Amendment flows as well.

**CONTINGENCIES:**

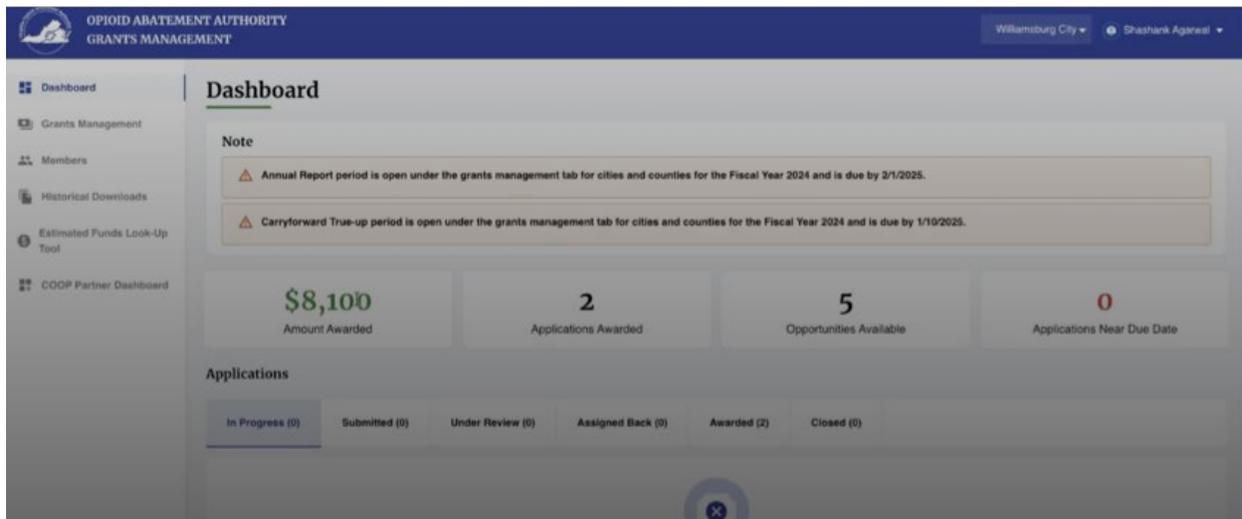
As a part of your Grant Application approval you may be required to provide information related to Grant Requested Contingencies as advised by Staff Recommendations. You will need to provide responses to each Contingency in the form of a file upload for the OAA Staff to release the payments. A list of potential Contingencies are noted below:

- Completion of Operational Agreement
- Completion of Capital Costs Agreement
- Documentation securing non-OAA matching funds
- Completion of Progress Reporting Workbook
- Acknowledgment of Subsequent year Proposed Amount
- Other documentation requested by OAA Staff TBD.

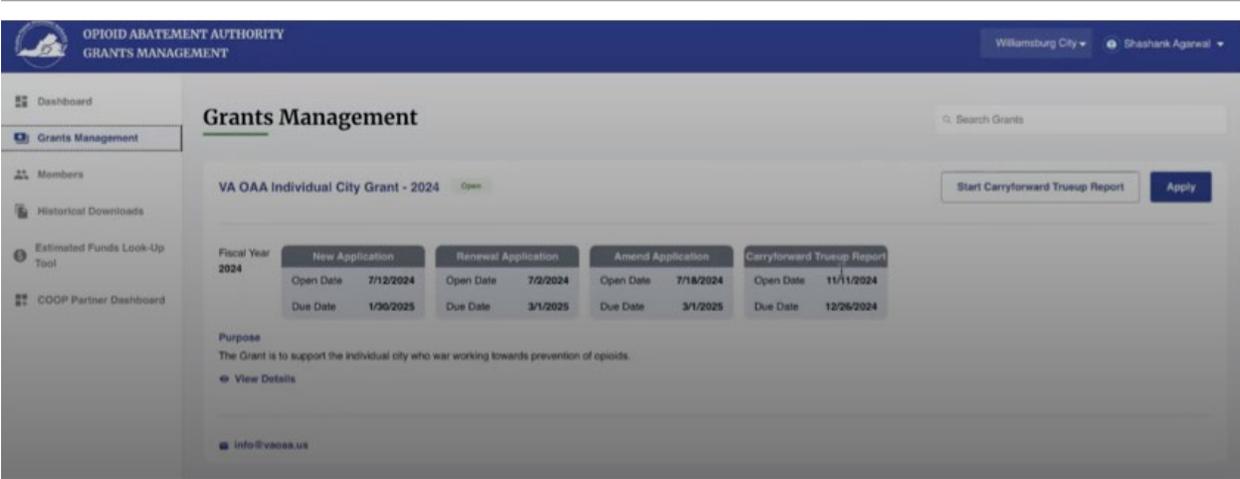
When your Grant Application is approved for award there may be additional required documents (file uploads) required such as a W-9 and any Contract/MOU with partners/contractors/subrecipients, these documents will need to be provided as file uploads prior to payments being made.

**CARRYFORWARD REPORTING:**

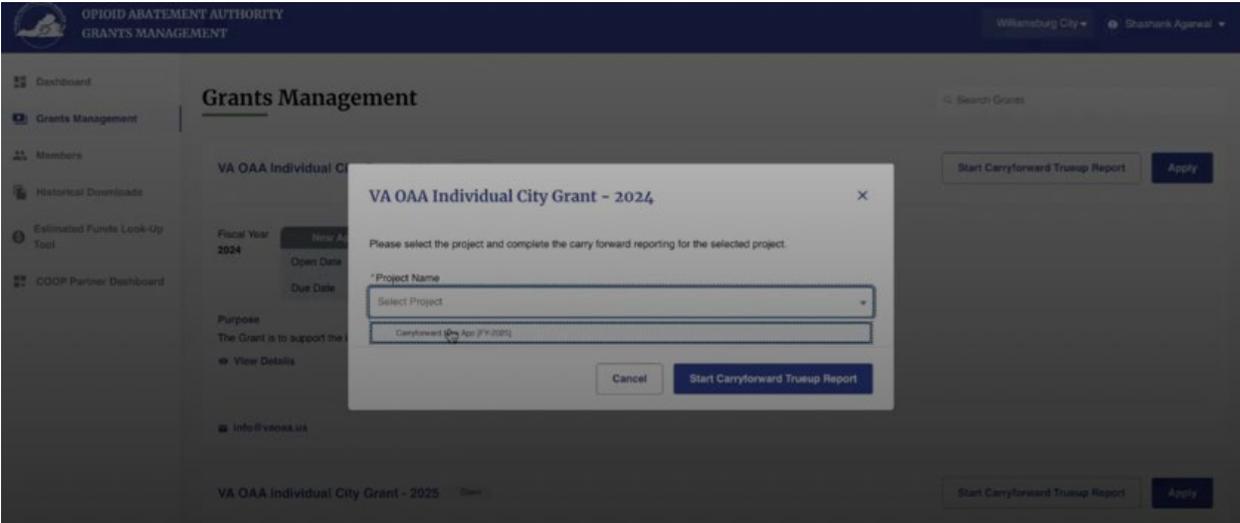
When you have completed the Renewal and are eligible to provide CarryForward Trueup Reporting for the previous Fiscal Year, there will be an on screen message in the Portal Dashboard. From the Portal on the Dashboard the Carryforward Reporting message and dates will display as an on screen message. These are dependent on the time period defined for Annual Reporting or Carry-Forward periods.



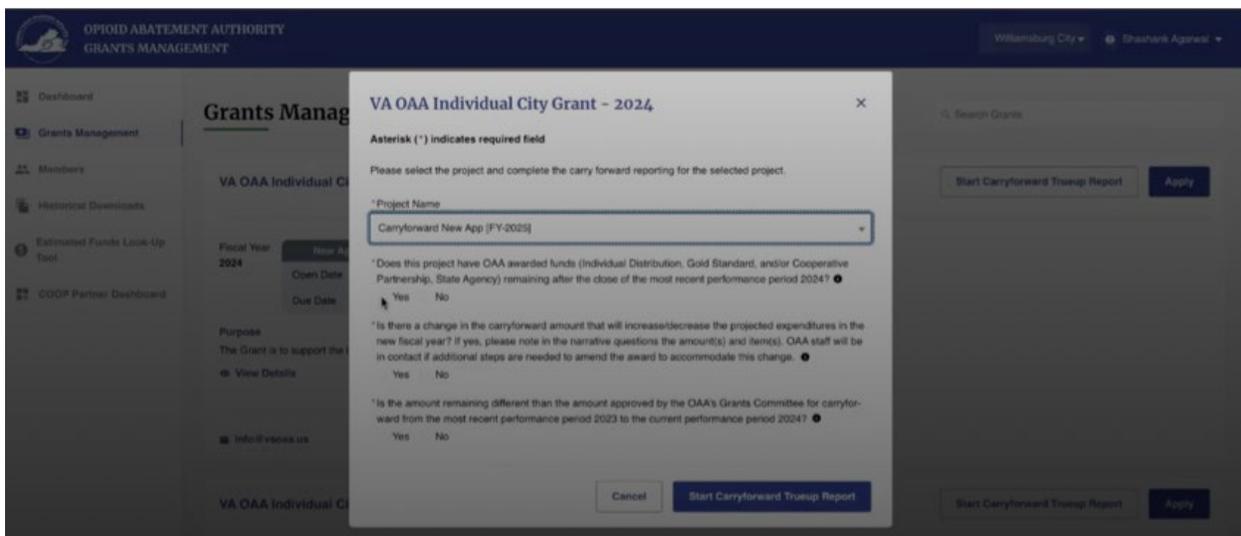
Carryforward Reporting only occurs after Renewal Application is in “Awarded” status (but still not “Payment Processed” status). You must already have an Intake Application with status of “Awarded” and “Payment Processed” with a linked Renewal Application in a status of “Awarded”. The application dates must also fall within the range displayed for Carryforward are allowed to proceed.



Only eligible projects for Carryforward TrueUp Report will show up because the Initial was completed and the Renewal is awarded will be in the list. See image below:

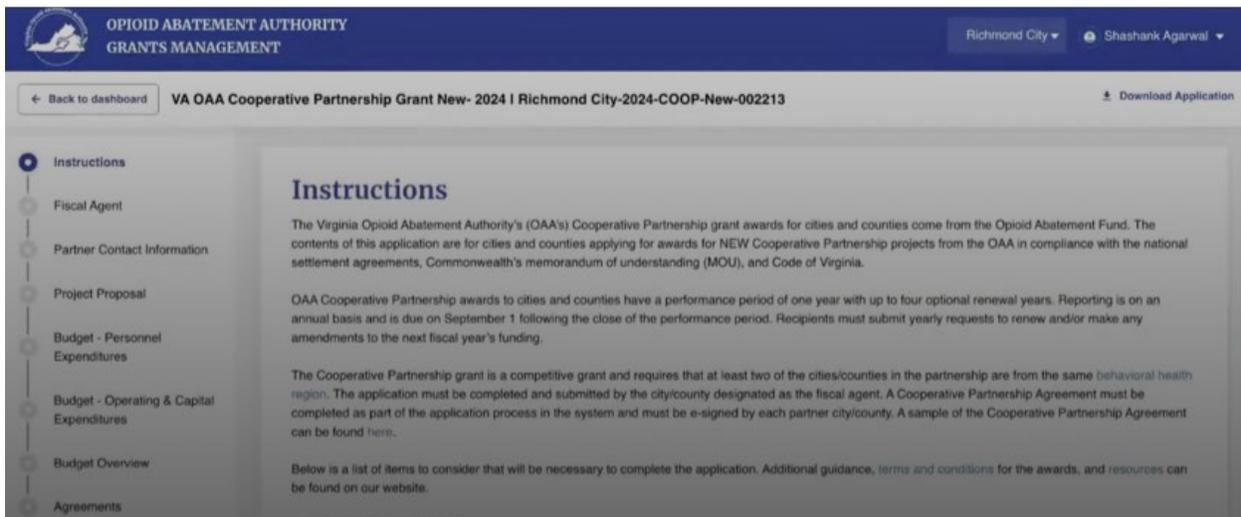


After selecting an eligible project the Popup shown below will ask some Carryforward eligibility questions (use the dark blue circle with the letter "i" to get help text):



Then select the “Start Carryforward TrueUp Report” button to proceed. Note: The second question must be “Yes” or else you will only be allowed to provide an upload only on a “No” response.

The Carryforward Application instructions page will be displayed. The steps are: Carryforward Narrative, Budget overview, Reference Information and Signature. See Instructions screenshot below:



On Carryforward Narrative the first 3 questions are read only, the next 2 questions are mandatory. The “Final FY####” The “Carry-Forward Amount” field is not editable but will be populated based on data entry in the other steps. (NOTE: #### refers to the 4 digit Fiscal Year or Performance Period Year - example: 2024)

Carryforward Narrative Part 1 of 2:

The screenshot shows the 'Carryforward Narrative' form in the OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT system. The header includes the logo and 'VA OAA Individual City Grant - 2024 | Williamsburg City-2024-IDIC-Carryforward Report-002201'. A sidebar on the left lists navigation steps: Instructions, Carryforward Narrative (selected), Budget Overview, Reference Information, and Signature. The main content area contains the following fields and instructions:

- City/County Name:** Williamsburg City
- Grant Type:** Individual Distribution (IDIC)
- \* Project Name:** Carryforward New App
- \* Provide a narrative update regarding status of expenditures for this project.**
- Note any discrepancies between the FY2024 carry-forward amount approved by the OAA Grants Committee (5/23/2024) and the final FY2024 carry-forward amount reported in this workbook.**
- Note any discrepancies between the FY2024 carry-forward amount approved by the OAA Grants Committee (5/23/2024) and the final FY2024 carry-forward amount reported in this workbook.** (Text area)
- \* For the reported final carry-forward amount(s), please describe what generated the amount(s), as well as the expected use of actual carry-forward funds.**
- Final FY2024 OAA Carry-forward Amount** (Text area)

Carryforward Narrative Part 2 of 2:

This screenshot shows the continuation of the 'Carryforward Narrative' form. The sidebar now highlights 'Reference Information' and 'Signature'. The main content area includes:

- City/County Name:** Williamsburg City
- Grant Type:** Individual Distribution (IDIC)
- \* Project Name:** Carryforward New App
- \* Provide a narrative update regarding status of expenditures for this project.**
- Note any discrepancies between the FY2024 carry-forward amount approved by the OAA Grants Committee (5/23/2024) and the final FY2024 carry-forward amount reported in this workbook.**
- Note any discrepancies between the FY2024 carry-forward amount approved by the OAA Grants Committee (5/23/2024) and the final FY2024 carry-forward amount reported in this workbook.** (Text area)
- \* For the reported final carry-forward amount(s), please describe what generated the amount(s), as well as the expected use of actual carry-forward funds.**
- Note any discrepancies between the FY2024 carry-forward amount approved by the OAA Grants Committee (5/23/2024) and the final FY2024 carry-forward amount reported in this workbook.** (Text area)
- Final FY2024 OAA Carry-forward Amount** (Text area)

At the bottom of the form, there are three buttons: 'Exit', 'Previous', and 'Save & Next'.

Save and Next button will display the Budget Overview step Part 1 of 3:

**Budget Overview**

Complete the budget information below for the project that locality (City/County/State Agency) is requesting to be funded.

**Asterisk (\*) indicates required field**

**Revenue**

**Non-OAA Funding Sources**

Funding Sources	Awarded or Pledged as Match	Projected Expenditures from Application	Final FY24 Expenditures	Final FY24 Remaining Funds
Direct Distribution	\$5,000.00	\$3,000.00	\$3,000.00	\$2,000.00
<b>Total Non-OAA Funding Sources</b>	<b>\$5,000.00</b>	<b>\$3,000.00</b>	<b>\$3,000.00</b>	<b>\$2,000.00</b>

**OAA Revenue Funding Sources**

Funding Sources	Awarded or Pledged as Match	Projected Expenditures from Application	Final FY24 Expenditures	Final FY24 Remaining Funds
Individual Distribution (IDIC)	\$4,000.00	\$2,500.00	\$3,000.00	\$1,000.00
Gold Standard Distribution	\$1,000.00	\$600.00	\$700.00	\$300.00
<b>Total OAA Revenue Funding Sources</b>	<b>\$5,000.00</b>	<b>\$3,100.00</b>	<b>\$3,700.00</b>	<b>\$1,300.00</b>

Budget Overview Part 2 of 3:

**Total Non-OAA Funding Sources**    \$5,000.00    \$3,000.00    \$4,000.00    \$1,000.00

**OAA Revenue Funding Sources**

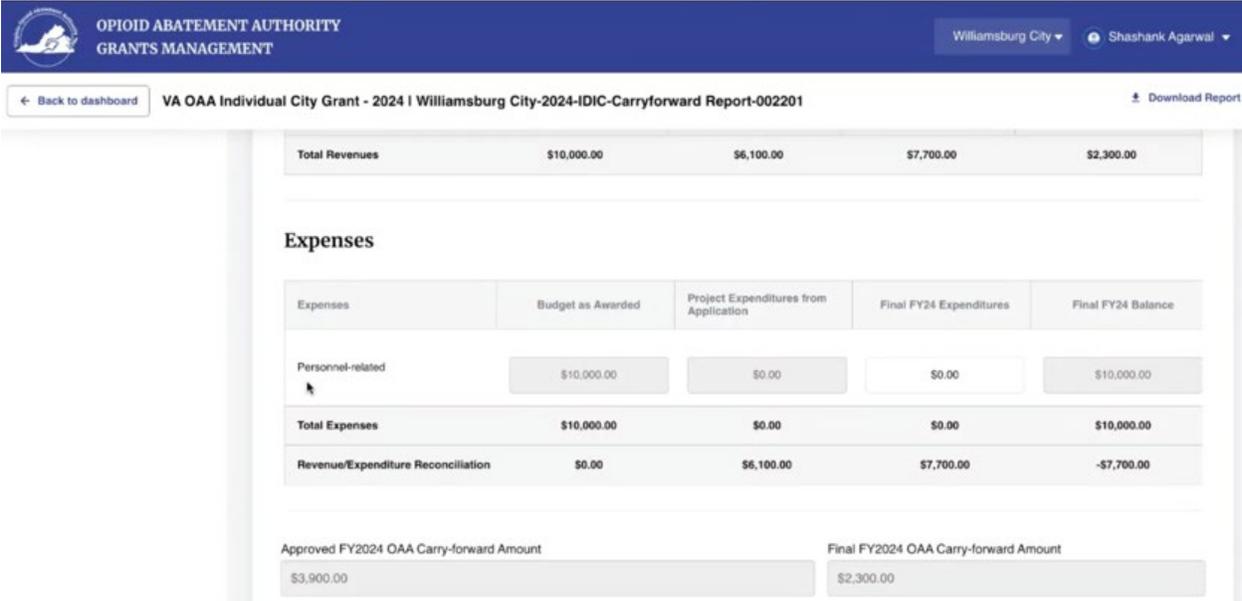
Funding Sources	Awarded or Pledged as Match	Projected Expenditures from Application	Final FY24 Expenditures	Final FY24 Remaining Funds
Individual Distribution (IDIC)	\$4,000.00	\$2,500.00	\$3,000.00	\$1,000.00
Gold Standard Distribution	\$1,000.00	\$600.00	\$700.00	\$300.00
<b>Total OAA Revenue Funding Sources</b>	<b>\$5,000.00</b>	<b>\$3,100.00</b>	<b>\$3,700.00</b>	<b>\$1,300.00</b>

**Revenue Grand Total**

The first part of the Budget Overview step includes the opportunity to enter Revenue for both Non-OAA Funding Sources and OAA Revenue Funding Sources. Here you can enter the Final FY### Expenditures amount as currency for each Funding Source. The Revenue data entry will display the updated value under Revenue Grand Total.

The next part of the Budget Overview includes the opportunity to enter Expenses under the Final FY### Expenses as currency.

Budget Overview step Part 3 of 3:



Expenses	Budget as Awarded	Project Expenditures from Application	Final FY24 Expenditures	Final FY24 Balance
Personnel-related	\$10,000.00	\$0.00	\$0.00	\$10,000.00
<b>Total Expenses</b>	<b>\$10,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$10,000.00</b>
Revenue/Expenditure Reconciliation	\$0.00	\$6,100.00	\$7,700.00	-\$7,700.00

Approved FY2024 OAA Carry-forward Amount	Final FY2024 OAA Carry-forward Amount
\$3,900.00	\$2,300.00

If both Capital / Operating and Personnel Expenses are declared then both would be visible for Final FY## Expenditures data entry as currency.

The system will compare the Revenues and Expenditures amounts, they must match to move forward. You will receive a red error message "Final Expenditures of Revenue and Expenses do not match."

Screenprint of mismatch amounts error message:

The screenshot shows the 'Revenue/Expenditure Reconciliation' report for Williamsburg City. The report includes the following data:

Revenue/Expenditure Reconciliation	\$0.00	\$6,100.00	\$2,700.00	-\$2,700.00
Approved FY2024 OAA Carry-forward Amount	\$3,900.00		Final FY2024 OAA Carry-forward Amount	\$2,300.00
Balance of Approved and Final FY2024 OAA Carry-forward Amount	\$1,600.00		% change between approved and final amounts	41.03%

A red error message is displayed: **Final Expenditures of Revenue and Expenses do not match.**

Navigation buttons: Exit, Previous, Save & Next

After correcting any discrepancies in Revenue and or Expenses, you will be able to move to the next step. The calculated values at the bottom of the page will be displayed.

These read-only calculated values are labeled: “Approved FY#### OAA Carry-forward Amount”, “Final FY#### OAA Carry-forward Amount”, “Balance of Approved and Final FY#### OAA Carry-forward Amount”, and “% change between approved and final amounts”.

(NOTE: #### refers to the 4 digit Fiscal Year or Performance Period Year - example: 2024)

← Back to dashboard VA OAA Individual City Grant - 2024 | Williamsburg City-2024-IDIC-Carryforward Report-002201 Download Report

Personnel-related	\$10,000.00	\$0.00	\$7,700.00	\$2,300.00
<b>Total Expenses</b>	<b>\$10,000.00</b>	<b>\$0.00</b>	<b>\$7,700.00</b>	<b>\$2,300.00</b>
Revenue/Expenditure Reconciliation	\$0.00	\$6,100.00	\$0.00	\$0.00

Approved FY2024 OAA Carry-forward Amount	Final FY2024 OAA Carry-forward Amount
\$3,900.00	\$2,300.00
Balance of Approved and Final FY2024 OAA Carry-forward Amount	% change between approved and final amounts
\$1,600.00	41.03%

Exit Previous Save & Next

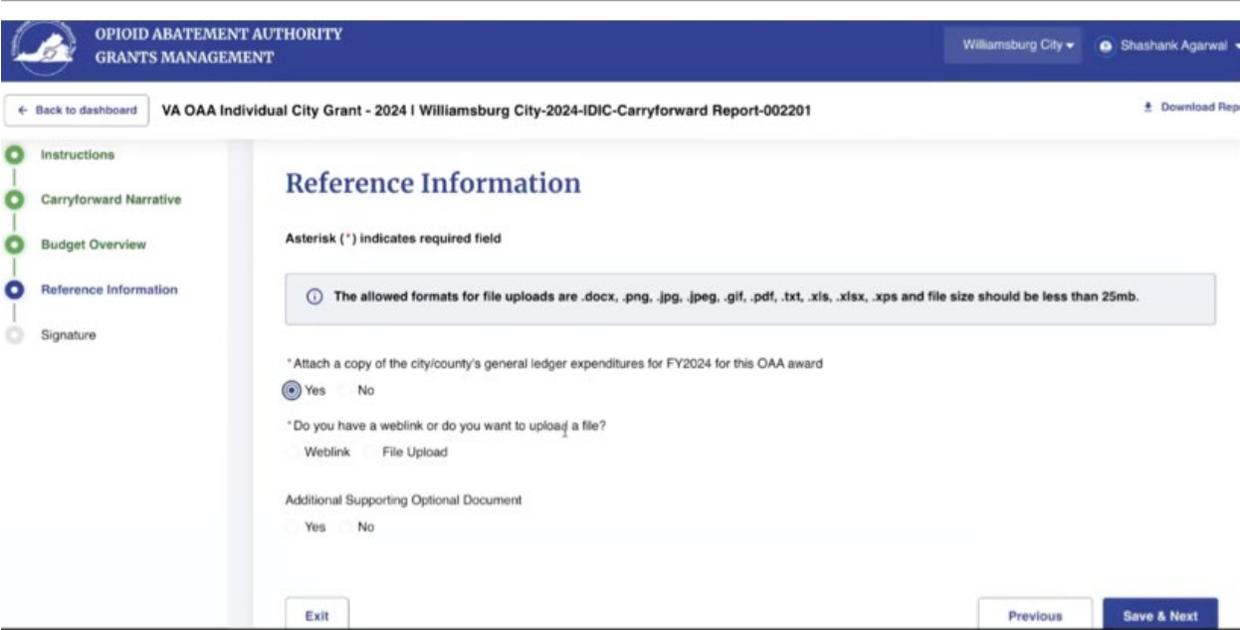
Once you review those fields’ values you can use the Save & Next button to proceed to the Reference Information Step. You may answer “Yes” to be given the opportunity to provide additional information for the following questions:

“Attach a copy of the city/county’s general ledger expenditures for FY#### for this OAA Award.”

“Additional Optional Supporting Document.”

*(NOTE: #### refers to the 4 digit Fiscal Year or Performance Period Year – example: 2024)*

You will have the option to provide information as a File Upload or Weblink for either attachment.

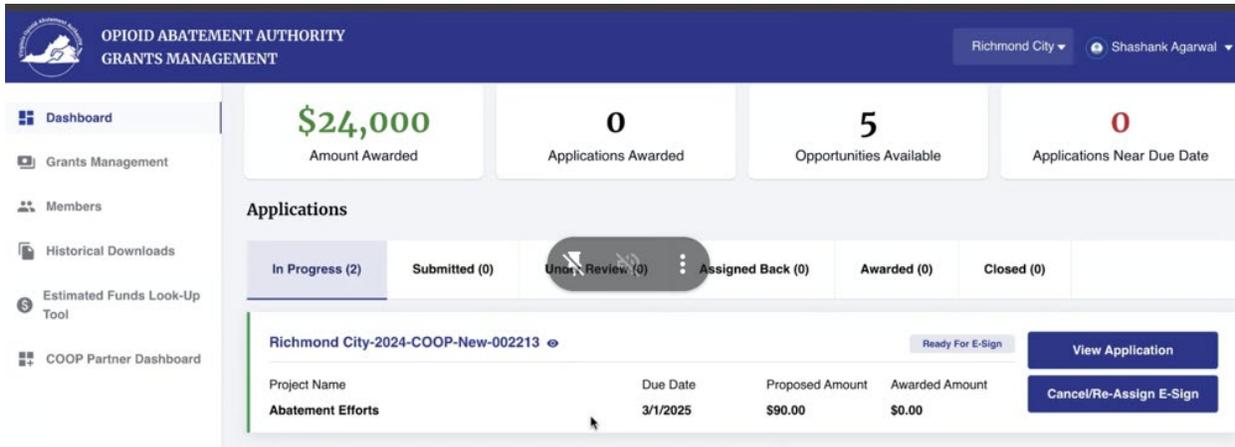


**E-SIGNATURE FOR CARRYFORWARD / TRUEUP:**

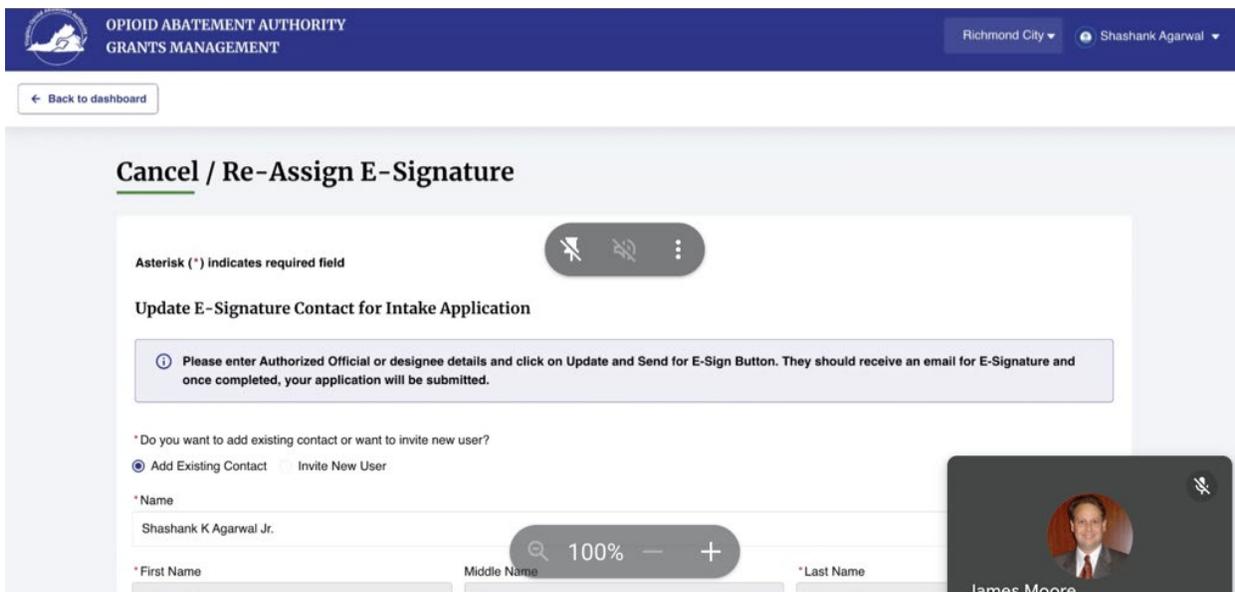
The next and final step is to provide a Signature. The first part of this step is to provide a checkbox declaration and then to specify the contact information for the person who will be completing the electronic signature.



This person could be the current contact and selecting the “Add Existing Contact” option will allow you to search for and verify their contact information or it can be a new contact using the “Invite New User” option which will allow you to specify the contact information for a new person who will complete the signature electronically.



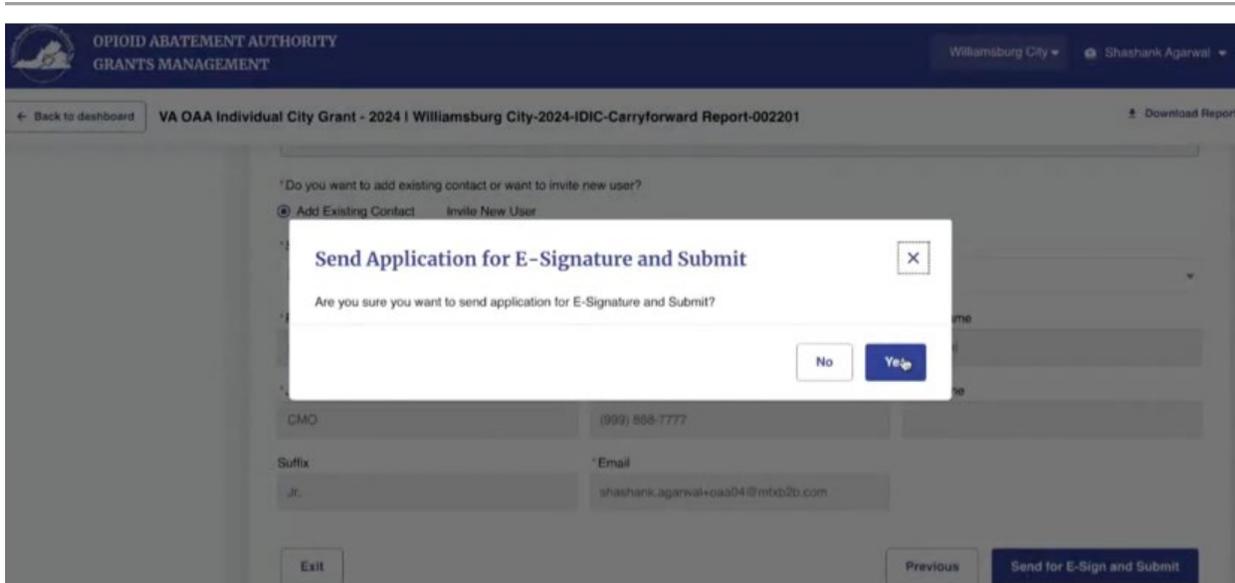
Applies to Submitted applications when the e-sign can be reassigned by the applicant to another signatory. This is only applicable if no e-sign was completed before.



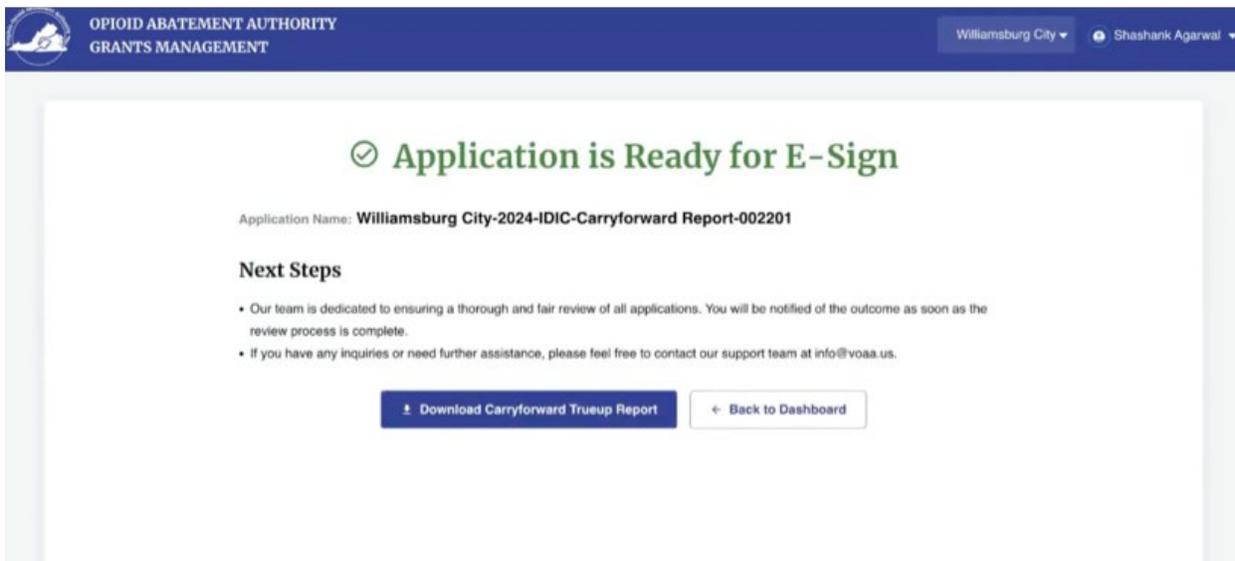
After the signature is applied then the application status will move from Ready for E-Sign to Submitted and the button for Re-Assign E-Sign will no longer be shown for that application.

After selecting the signatory contact then click the button labeled “Send for E-Sign and Submit”.

When the popup message appears select “Yes” if you want to send the application for E-Signature and Submit.



When the system is done saving and sending the E-Signature a success message is displayed.

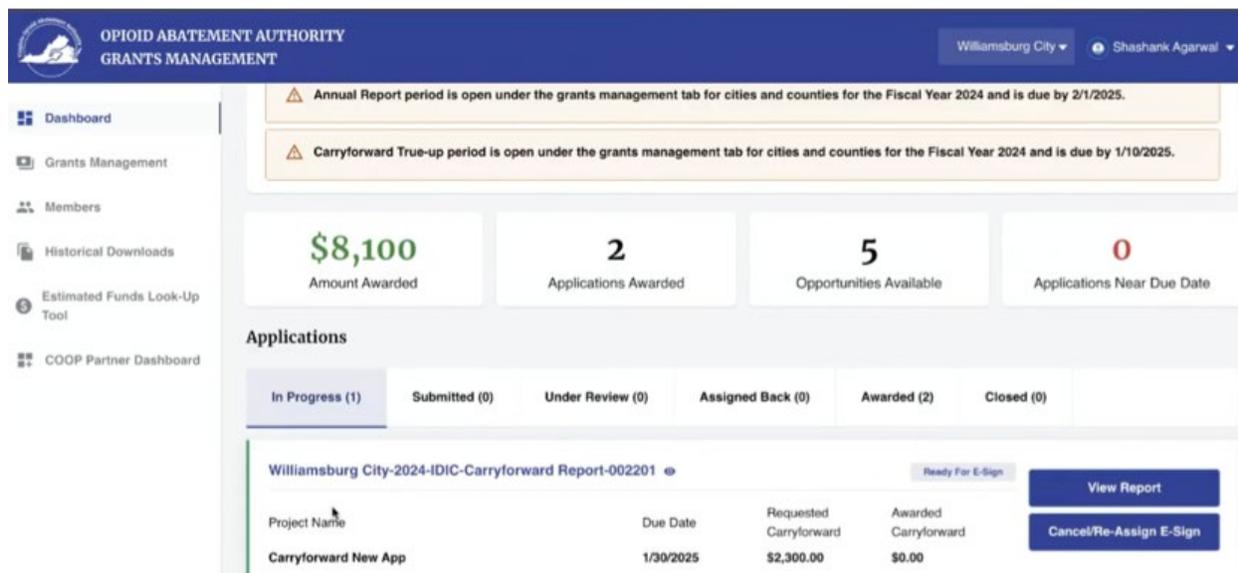


The contact person designated as the Signatory will receive an email from the system with the Adobe E-Sign link and a PDF copy of the report. The Applicant will also receive an email with a PDF copy of the report, which is the same file as the one accessed from the “Download Report” button/link.

Dashboard screen will be displayed next. The status of the Carryforward Report will be “Ready for E-Sign”. The “View Report” button will allow you to view the Submitted Carryforward Report. The “Re-Assign E-Sign” button will allow you to select a new Signatory for the E-Sign process.

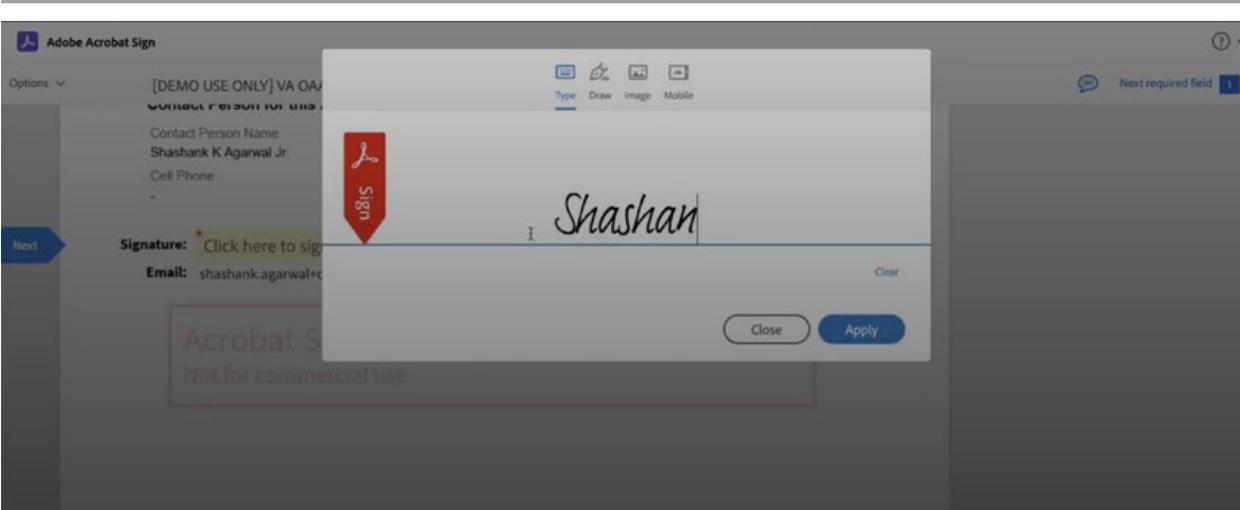
Re-Assign or E-Signature request from one person to another person

There is a special button on the Application dashboard that shows the “Re-Assign E-Sign” please see screenshot below:

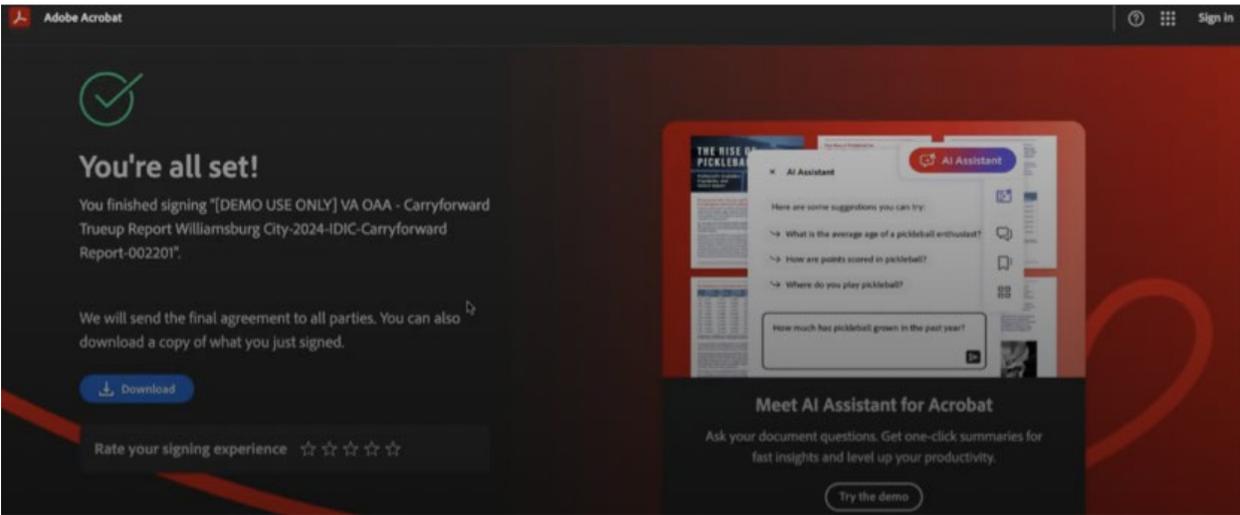


The Signatory will need to open and complete the steps for the E-Sign process included in the email. After you click the email you will receive a new browser window or tab with the E-Sign, the Carryforward Report will be displayed so the Signatory can review the PDF copy of the document before signing.

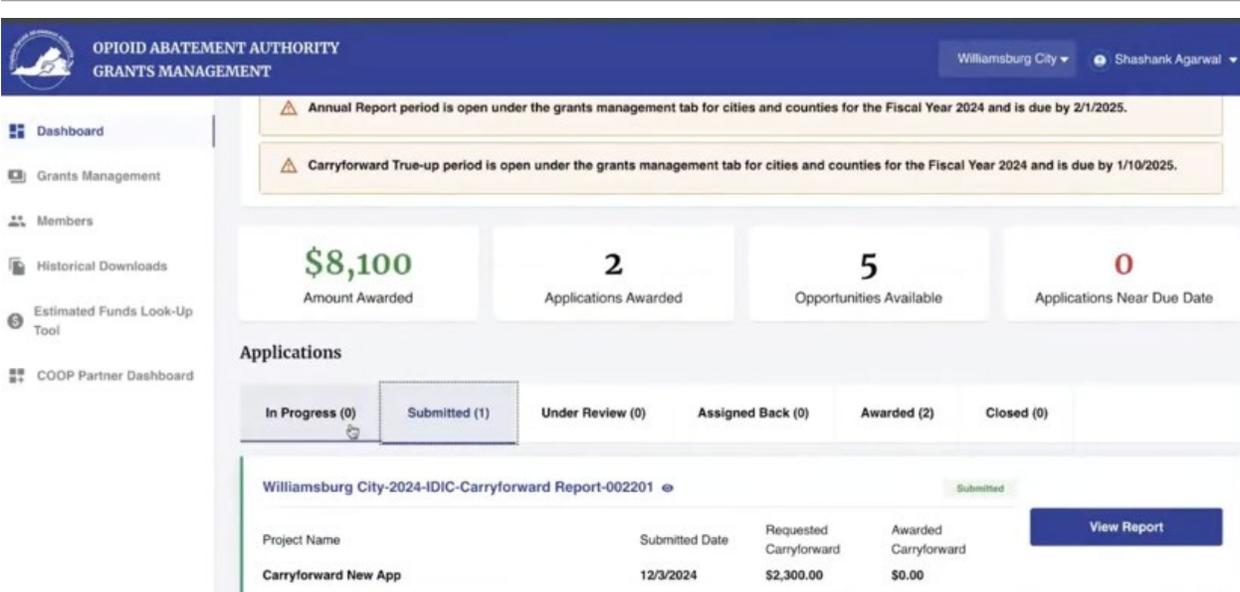
The Signature section will provide you with the Adobe Sign control.



After signing, there will be a blue “Download” button to allow the Signatory to have a copy of the signed document.



After this is completed, the application will change status to “Submitted”.



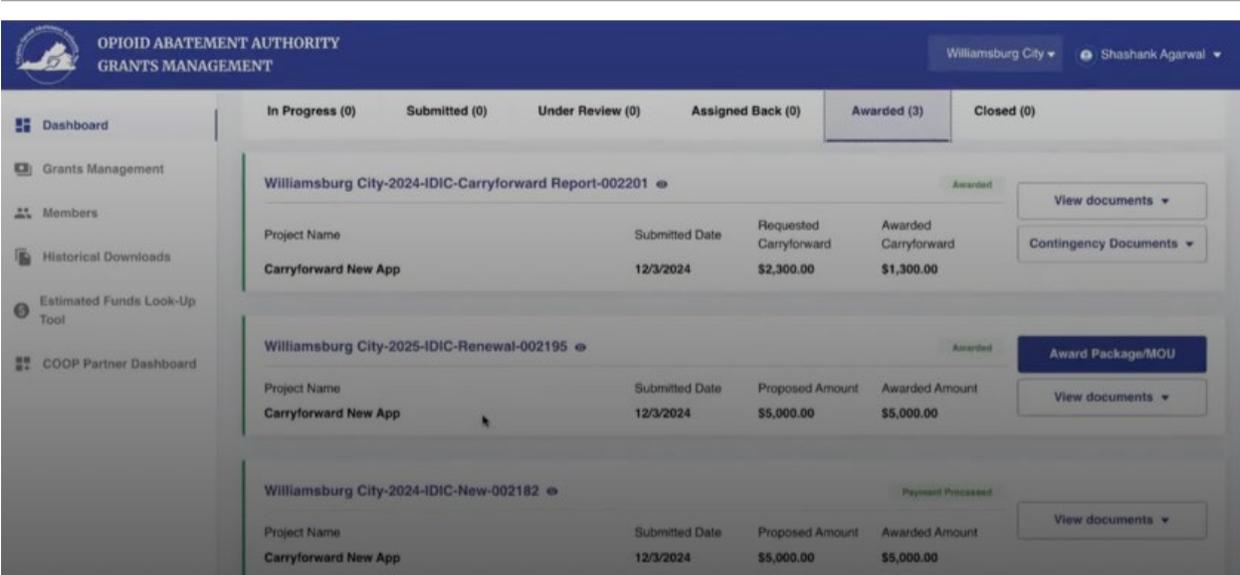
The Re-Assign E-Sign button will no longer be available after the E-Sign is completed because it is no longer applicable. (Phase 2)

Please note:

The Cooperative and State Agency flows are identical to the Individual Carryforward steps.

After the Staff Review and Grants Committee Approvals, the new amounts will be available for Award. Then the Final Carryforward Amount will be part of the completed application and when Awarded an Award Letter for the Carryforward Report will be generated and sent to the Signatory via email. The letter will display the requested and revised approved Carryforward Amounts.

The Carryforward Report will be visible under Awarded. There may be some contingency documents required for uploading the Documentation. This can be accessed from the Contingency Documents button.



The Contingency Documents required are displayed below. Each document must be uploaded.



Staff will review the completed documents. The Contingency Documents button will no longer be available once all uploaded files are submitted.

The screenshot displays the Opioid Abatement Authority Grants Management interface. At the top, the header includes the organization's logo and name, the current location (Williamsburg City), and the user's name (Shashank Agarwal). Below the header, there are four summary cards: Amount Awarded, Applications Awarded, Opportunities Available, and Applications Near Due Date. The main content area is titled 'Applications' and features a filter bar with categories: In Progress (0), Submitted (0), Under Review (0), Assigned Back (0), **Awarded (3)**, and Closed (0). Two application entries are visible, both marked as 'Awarded'. The first entry is 'Williamsburg City-2024-IDIC-Carryforward Report-002201' with a 'View documents' button. The second entry is 'Williamsburg City-2025-IDIC-Renewal-002195' with an 'Award Package/MOU' button and a 'View documents' button.

Project Name	Submitted Date	Requested Carryforward	Awarded Carryforward
Williamsburg City-2024-IDIC-Carryforward Report-002201			
Carryforward New App	12/3/2024	\$2,300.00	\$1,300.00
Williamsburg City-2025-IDIC-Renewal-002195			
Carryforward New App	12/3/2024	\$5,000.00	\$5,000.00

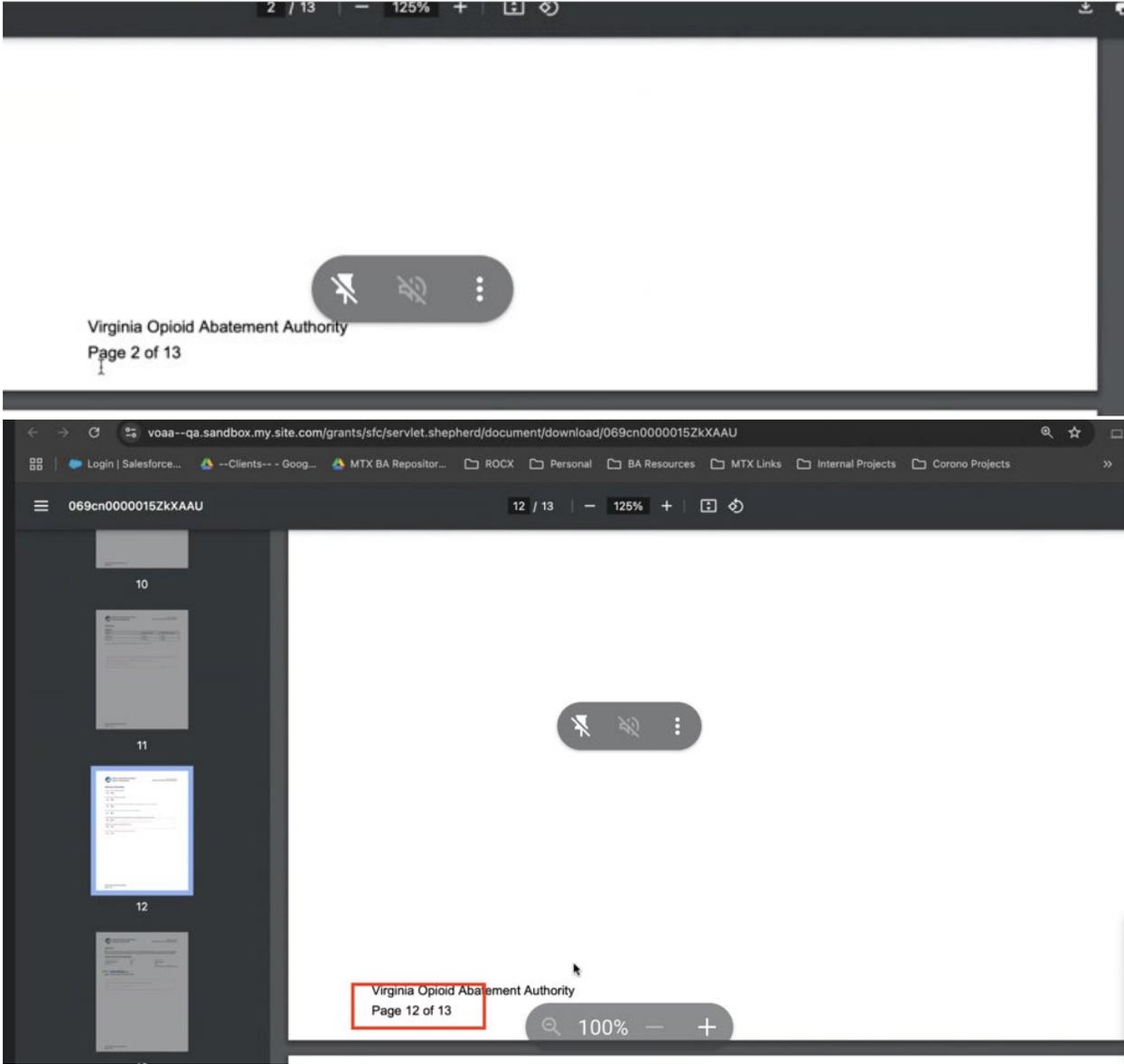
**STAFF REQUESTED UPDATES TO CARRYFORWARD / TRUEUP:**

The Carryforward / get TrueUp application will be reviewed by OAA Staff. They may request additional updates to the Budget sections, this may be an update to the Renewal or Carryforward Application:

The Application status will be updated to “Application Alignment” and the Applicant will be able to see it in the In Progress column on their Dashboard.

**UPDATES TO SYSTEM CREATED PDF DOCUMENTS: :**

The footer of award packages and other system documents will now show "Page X of Y" (ex. Page 1 of 5)



## APPLICATION STATUSES

You can view the Applications in each status on the Dashboard shown below:

The screenshot shows the OPIOID ABATEMENT AUTHORITY GRANTS MANAGEMENT Dashboard. At the top, it displays 'Highland County' and the user 'JamesDEMO MooreDEMO'. The dashboard features four summary cards: Amount Awarded (\$1,824), Applications Awarded (1), Opportunities Available (6), and Applications Near Due Date (0). Below these is an 'Applications' section with a red border, containing filters for In Progress (2), Submitted (1), Under Review (1), Assigned Back (0), Awarded (1), and Closed (0). Two application entries are listed below, both in 'Draft' status with a 'Resume' button.

Project Name	Due Date	Proposed Amount	Awarded Amount
Highland County-2025-COOP-New-000244	1/27/2025	\$0.00	\$0.00
Highland County-2025-GOLD-New-000242	10/1/2024		

The Grant Applicant application status will vary based on different scenarios, as mentioned below:

- **In Progress:** If the application is incomplete or is still a Draft (Un-Submitted), the application status will display as **In Progress**.
- **Submitted:** Upon completing all required information, providing all required uploads and completing all E-Signatures the application’s status will change to **Submitted, Resubmitted or Application Alignment Submitted** when the final Submit button is selected.
- **Under Review:** Initial reviews performed by OAA Internal Staff and Grants Committee. This could take some time based on the Grants Committee schedule so your application could be **Under Review** until the Grants Committee has their next scheduled meeting.
- **Assigned Back:** The system will set the status to **Assigned Back** or **Application Alignment Requested** when any updates or corrections are required on the application. It is your responsibility to provide the missing information or uploads in order to Re-Submit the application for Review.

- **Awarded:** If the application for a grant is approved by the Grants Committee then status will be labeled as **Awarded** followed by **Payment Initiation** and **Payment Processed**.
- **Closed:** In the event of application denial, rejection, or expiration the status will be labeled as **Closed**.