



VIRGINIA OPIOID ABATEMENT AUTHORITY SUMMARY FOR PROPOSALS FROM AGENCIES OF THE COMMONWEALTH FOR 2024-2025

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Agency Information

Name of Agency:	
Secretariat:	
Contact Person*:	
Title:	
Phone Number:	
Email:	

*Contract person should be the main person that OAA contacts for questions and follow up regarding the proposal as a while. Please note that while the agency head or designee must sign off on the proposal, it is not expected that they will be the contact person.

Proposal Summary

If the agency is submitting a proposal with multiple projects, then the projects must be priority ranked.

Project Priority Ranking			Funding Requested by Performance Period (PP)				
#	Category	Name of Project	PP24-25	PP25-26	PP26-27	PP27-28	PP28-29
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total Requested by Performance Period							

Signature

The signature section must be completed by the head of the agency named in this summary or their designee.

"I swear of affirm that all information contained in and attached to this proposal 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."

Signature:	
Printed Name	
Title:	
Date:	