# AHFC SAMPLE RESOLUTION

WHEREAS, (state the gaps or needs your community has identified)

WHEREAS, (state what the proposed project will do to address those needs or gaps in service)

WHEREAS, (mention the agencies or grant program(s) that could fund the proposed project)

NOW, THEREFORE BE IT RESOLVED:

(state that your agency is authorized to request funds from the above mentioned agencies.)

ADOPTED this day of , 20_ by Board of Directors.