



citycounty insurance services
www.cisoregon.org

CIS Public Safety Grant Application for Fiscal Year 2023/24

Date: _____

CIS Member Name: _____

Name of person submitting grant: _____

Position of person submitting grant: _____

Contact information:

Office #: _____

Cell #: _____

Email: _____

Mailing address:

Street/PO Box: _____

City: _____

Zip code: _____

Type of grant requested: **(Check the appropriate box)**

☐ Corrections (reduction of self-harm by AIC)

☐ Law Enforcement (patrol)

☐ Oregon Accreditation Alliance (OAA)

☐ Body Cameras

☐ Lexipol

Total amount of project: _____

Grant amount requested: _____

Any other grant funds being applied to this project? _____

If yes, please explain:

Has your agency received a grant from CIS within the last year? If yes, please describe what the grant was for and if the project was completed.

Please use the space below to explain why your jurisdiction needs grant funding from CIS?

Please explain how the grant funding will reduce risk for your agency and reduce claims?

Member Approval of Grant Request:

Supervisor/manager of submitter: _____

Title of Supervisor/manager: _____

Date approved: _____

*CIS will evaluate your grant request based on available funds as well as the reduction of risk your request will provide to your agency and to the CIS Pool.

Submission of Grants:

Corrections Grant – send your completed application to Sheila Lorange – email: slorange@cisoregon.org or fax to: 503-763-3900 or mail to 15875 Boones Ferry Rd. #1469, Lake Oswego, OR 97035

Law Enforcement Patrol, OAA, Body Cameras and Lexipol Grant – send your completed application to Dan Brown – email: dbrown@cisoregon.org or fax to: 503-763-3900 or mail to 15875 Boones Ferry Rd. #1469, Lake Oswego, OR 97035

CIS Approval of Grant Request:

Date grant request received: _____

Date grant was approved or denied: _____

Reviewer name/title: _____

Grant Requirements:

All CIS grants require pre-approval by the Risk Management Director or his/her designee.

CIS grants are reimbursement grants only.

CIS grants are for the fiscal year being submitted.

All reimbursement requests will be submitted by May 15, 2024, to Joleen Wallace jwallace@cisoregon.org to process for payment by the end of the fiscal year, June 30, 2024.

If the all the reimbursement information is not submitted by May 15, 2024, then grant monies will be forfeited.

To receive payment of the grant funds, CIS will need the following:

- Copy of the grant request
- Copy of the grant approval
- Copy of the invoice(s) from vendor to CIS member (not a purchase order or quote.)
- Copy of the payment from member to vendor or company (**must be a copy of the actual signed check or credit card statement.**)

Please note that CIS has limited grant funds and we may not be able to award the total amount requested.

Once the grant application is received and reviewed, you will receive an email notification providing either the approval or the reason for the denial of the requested grant.

If you have any questions regarding the Grant Program, please contact Mark Jennings, CIS Director of Risk Management at mjennings@cisoregon.org or 503-763-3847.