

Governor's Council on Alcoholism and Drug Abuse  
Fiscal Grant Cycle July 2014-June 2019

**R-15-48**

**RESOLUTION  
HIGHLANDS - GRANT**

**FORM 1B**

**WHEREAS**, the Governor's Council on Alcoholism and Drug Abuse established the Municipal Alliances for the Prevention of Alcoholism and Drug Abuse in 1989 to educate and engage residents, local government and law enforcement officials, schools, nonprofit organizations, the faith community, parents, youth and other allies in efforts to prevent alcoholism and drug abuse in communities throughout New Jersey.

**WHEREAS**, The Borough of Highlands Governing Body, County of Monmouth, State of New Jersey recognizes that the abuse of alcohol and drugs is a serious problem in our society amongst persons of all ages; and therefore has an established Municipal Alliance Committee; and,

**WHEREAS**, the Borough of Highlands Governing Body further recognizes that it is incumbent upon not only public officials but upon the entire community to take action to prevent such abuses in our community; and,

**WHEREAS**, the Borough of Highlands Governing Body applied for funding to the Governor's Council on Alcoholism and Drug Abuse through the County of Monmouth;

**NOW, THEREFORE, BE IT RESOLVED** by the Governing Body of the Borough of Highlands, County of Monmouth, State of New Jersey hereby recognizes the following:

1. The Borough of Highlands Council does hereby authorize submission of a strategic plan for the (name) Municipal Alliance grant for fiscal year July 2014 – June 2019 in the amount of:

DEDR	\$ <u>31,960</u>
Cash Match	\$ <u>3,995</u>
In-Kind	\$ <u>23,970</u>
2. The Governing Body of the Borough of Highlands acknowledges the terms and conditions for administering the Municipal Alliance grant, including the administrative compliance and audit requirements.

APPROVED: \_\_\_\_\_  
(Name), Mayor

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	INTRODUCED	SECONDED	AYE	NAY	ABSTAIN	ABSENT
CARD			x			
KANE			x			
REDMOND		x	x			
RYAN			x			
NOLAN	x		x			
ON CONSENT AGENDA		x	YES		NO	

DATE: February 4, 2015

**CERTIFICATION**

I, \_\_\_\_\_, Municipal Clerk of the Borough of Highlands, County of Monmouth, State of New Jersey, do hereby certify the foregoing to be a true and exact copy of a resolution duly authorized by the Township/Borough/City Council on this (day) day of (month), (year) .

\_\_\_\_\_  
Carolyn Cummins, *Municipal Clerk*