Attachment A-1

State of Georgia – Criminal Justice Coordinating Council Juvenile Justice Incentive Grant

Application Face Sheet

SECTIO	ON 1: APPLICANT AGEN				
	Applicant Agency (Legal	Name): Lowr	ndes County Boar	d of Commissio	ners
	Legal Mailing Address: PO Box 1349				
	City: Valdosta	City: Valdosta County: Lowndes		State: GA	Zip: <u>31603</u>
		Federal Employer I.D. #: <u>58-6000856</u> DUNS #: <u>030055552</u>			
	Executive Officer Name	Bill Slaughter	Title: Chairman		
	Street Address: 327 N As	hley St			_
	City: Valdosta	State: GA	Zip:	31601	<u> </u>
	Telephone: (229) 671-244				
SECTIO	ON 2: FISCAL AGENT				
	Applicant's Fiscal Agent	(Legal Name):			
	Street Address:				
	City: S	tate:	Zip:		<u> </u>
SECTIO	ON 3: FISCAL CONTACT				
	Fiscal Contact Name: St	ephanie Black	Title: Finance	e Director	
	Street Address: 327 N As				
	City: Valdosta		Zip:	31601	
	Telephone: (229) 671-252	⁵ FA	X: (229) 671-2596	Email:	sblack@lowndescounty.com
SECTIO	ON 4: PROGRAM CONTA	ACT			
	Program Contact Name	. Ashley Tye	Title: ^{Emo}	ergency Manageme	nt Director
	Street Address: 250 Douglas St				
	City: Valdosta		State: GA	Zip: 31601	
	Telephone: (229) 671-279				

SECTION 5: GRANT AMOUNT REQUESTED: \$ 330,854