Application Report

Applicant Organization: Shoreline Behavioral Health Services - J200AGC026

Project Name: Shoreline Behavioral Health-FY26-County Plan

Application ID: App-25-721

FundingAnnouncement: SFY26 County Plan for County Alcohol and Drug Abuse Authorities

Requested Amount: $1,139,466.96

Project Summary: Shoreline Behavioral Health Services Plans to address substance use issues in Horry County by providing comprehensive drug and alcohol treatment and prevention services to citizens.

Authorized Certifying Official: Jessie Marlowe jessie@shorelinebhs.org 843-365-8884

Compliance/Fiscal Officer: Pamela Williams pwilliams@shorelinebhs.org -

Section Name: Agency Executive Summary

Sub Section Name: Executive Summary Question

1. Applicant Question: Please list your agency's greatest accomplishments and challenges identified in your SFY25 County Plan.

Describe the agency's accomplishments and challenges faced in SFY25. Demonstrate how your SFY25 County Plan was implemented, what barriers to success were experienced, as well agency accomplishments that were not described in the SFY25 County Plan.

Applicant Response:

Shoreline Behavioral Health Services saw major transitions and changes in SFY25. Changes and accomplishments included a new agency Executive Director, a new Finance Manager, a new Prevention Director, the beginning of construction on an expansion, pulling out of Ohio Valley Physician's Group for MAT services and expanding MAT internally, adjusting to FLSA's new guidelines, applying for SCORF funding to increase services for those with an opioid use disorder, applying for the Partnership for Success grant through SAMHSA, enrolling in Innovalon services and working through getting many insurance carriers approved through the system, transitioning to a new text-reminder system (Practice Edition), implementing a comprehensive marketing campaign with dollars from DAODAS and Partnership for Success, hosting a leadership training for supervisors, closing out the five-year, Partnership for Success grant, and participating in Mobilize Recovery in Myrtle Beach.

The biggest challenge for Shoreline in SFY25 has been a constant struggle with budget cuts and financial losses. Shoreline was initially looking at a deficit in SFY25, but there were many adjustments made for the way that Shoreline does business in order to not see a loss. Shoreline filled the current Nurse Practitioner's schedule to bill for services (this has increasingly been a positive move), moved PRI groups back to in-person instead of virtual so that payments could be made at the time of services, insured peer support were focusing on billable hours, examined and adjusted unnecessary extra expenses which resulted in changing cell phone carrier, printer company, and stamp machine, moved staff members out of positions that were costing us into positions that were vacant under grants (a peer support staff member from the local jail was moved into a position with MUSC and the harm reduction staff member was moved into BG prevention), decreased the amount of supplies being bought, began charging for instant drug screens (the agency had been doing those for free), filled schedules for those clinicians with high no-show rates, sold an older agency vehicle, increased direct service hours for a couple of staff members who could go up, identified losses with four separate contracts and negotiated appropriate reimbursement for all four, left positions vacant if possible when staff left, and changed landscaping vendors to cut costs. While Shoreline has made every effort to adjust internally, it

has been an uphill battle to cut expenses and increase revenues. There have been several financial cuts from funding sources throughout the year, some expected and some unexpected. While the agency has made strides in turning things around, there seems to be an unexpected set-back regularly.

Financially, another major challenge has been dealing with Ambetter. Many clients at Shoreline have Ambetter, yet Ambetter has been reluctant to reimburse for services. They have offered settlements instead of timely or accurate payments, recanted on agreements to pay for services when everyone was on hold, then agreed to pay for services only if certain conditions are met by the agency. Ambetter has also repeatedly conducted "audits", which have taken up substantial amounts of staff time. One month, a staff member spent three full days pulling together "audit" requests from Ambetter. These requests were coming monthly.

In an effort to expand revenue streams, Shoreline's Executive Team began researching labs and will implement their own lab when the physical expansion is complete (upcoming fiscal year). The plan for the lab is two-fold. The first component of the lab will be providing drug screens for clients internally and bill for those services. The second component of the lab will be to become a screening site for i3screen, which will allow Shoreline to partner with companies throughout Horry County and provide drug screening services to the employees at those businesses. Increased revenue from the lab will help cover the costs of other services provided in the agency that are not able to cover their own costs.

One notable success of Shoreline was the marketing campaign that Shoreline was able to take advantage of through a marketing grant from DAODAS. Through this grant, Shoreline was able to advertise services with flyers on the backs of bus seats and billboards placed throughout the county. Both flyers and billboards were in Spanish and English. There were 36 bus seats with the flyers and reached 146,808 riders, while the billboards reached 429,226 individuals with 993,098 weekly impressions.

Many of the treatment and prevention goals were met, and successes and challenges are identified below.

Treatment Challenges and Highlights

- Throughout FY25 admissions continued to be down from the prior year. MAT admissions in particular seemed to decrease, however in the second half of the year numbers began to increase. As of April 2025, admissions are only down slightly from the prior year. Clients entering treatment at Shoreline by way of our “Open Access” model have increased this spring and include those seeking treatment for OUD and MAT.
- In September of 2024, Shoreline officially ended the relationship with OVP Health in the Forestbrook location of Myrtle Beach. The full-time counselor that was in this location transitioned back to Shoreline at Wise Rd. In total, there were around 100 patients receiving medical care from OVP that were absorbed by Shoreline’s onsite provider. Not all patients transitioned to Shoreline to continue their MAT care, due to concerns with location. The clients that chose to seek treatment elsewhere were assisted to help with the transition.
- Early in FY25, the full-time Nurse Practitioner who primarily met with clients for our research collaboration with MUSC resigned, resulting in a large need to fill the second provider position. It has been a challenge to fill the provider position at the Wise Rd. location. Fortunately, there appears to be new promising candidates for this role.

Prevention

Alcohol Strategy Successes

The Prevention Department continues to work effectively in implementing strategies related to alcohol prevention, focusing on information dissemination, environmental strategies, community-based processes, and alternative events. Shoreline’s Prevention Department experienced strong participation in our PREP program, bringing in 198 participants and 37 class this year and advancing our environmental strategy goals. Throughout various community events, Shoreline staff distributed 1,382 brochures, flyers, and other informational materials to the community, successfully completing our information dissemination strategy. Our Alcohol Enforcement Team (AET) Coordinator hosted a two-day training that included sessions on the Alcohol Nuisance Establishment investigation, Alcohol Source Investigation, and party dispersal tactics. The training was attended by 20 law enforcement officers from Horry and Georgetown counties. Using our information dissemination strategy, AET partnered with the "Out of Their Hands" campaign to post a billboard in a high-traffic area, reaching over 6,000 viewers and reminding the community to keep alcohol out of the hands of underage youth. Through our environmental strategy, more than 200 compliance checks were conducted last year. These efforts highlight some of the impactful prevention work we’re doing in the community.

Challenges

One ongoing challenge we face is sustaining attendance at alternative events organized through our CAST Coalition. Despite significant time and financial investment, the number of participants has not met our expectations. With the DFC grant funding ending, there will be limited financial resources, making it crucial to develop more cost-effective strategies for alternative events. Moving forward, our focus will be on meeting youth where they are—engaging them directly in their environments rather than expecting them to travel to hosted events.

Tobacco Strategy Successes

The Prevention Department continues to successfully implement strategies including information dissemination, environmental strategies, community-based processes, and problem identification and referral. Our Tobacco Education Program (TEP) remains our most successful problem identification and referral initiative, with over 50 students attending TEP classes this year.

Additionally, our skilled and knowledgeable staff have played an important role in mentoring and guiding others during Region Three meetings, helping other staff members obtain TEP certification. Another major success has been the growth of our Youth Advisory Board, now with 13 active members—a significant increase over the past two years. These students actively participate in meetings, provide ideas and feedback, and engage in community events. Our ongoing goal is to keep them engaged and encourage their continued participation in the coming year.

Our Alcohol Enforcement Team Coordinator applied the environmental strategy by conducting a Synar study at 18 stores throughout Horry County. All 18 attempted buys resulted in **no sales to minors**, demonstrating strong retailer compliance.

Opioid Strategy Successes

The Prevention Department continues to implement strategies aimed at reducing opioid use across the county by emphasizing information dissemination and community-based processes. Each year, the department assesses community partnerships and seeks to build capacity by joining coalitions, connecting with local stakeholders, and inviting new members to our coalition board. This ensures we stay informed, avoid duplication of services, and strengthen overall community efforts toward opioid prevention.

Substance Strategy Successes

By implementing information dissemination strategies based on community needs, the Prevention Department has built strong collaborations. We work closely with the Solicitor's Office CHANGE Program, providing monthly presentations to over 25 students on various substances.

Additionally, the newly established HOPE Coalition, focused on harm reduction, has seen great success. Through bi-monthly community events, we partner with over eight organizations to deliver information, resources, and support to high-risk areas within the community. This collaborative approach has significantly strengthened our outreach and impact. At each event, we have seen attendance of well over 60 individuals, providing critical items such as hygiene products, Narcan, fentanyl test strips, and other essential resources.

Section Name: Agency Needs Assessment

Sub Section Name: Agency Needs Assessment Questions

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1. Applicant Question: Utilizing quantitative and qualitative data, describe your catchment area's needs.

Describe your agency's needs as they relate to the delivery of Prevention, Treatment, Intervention, and Recovery Support Services in your defined catchment area. Use a combination of quantitative and qualitative data to provide a more comprehensive picture of the needs you face. If your agency serves more than one county in its catchment area, highlight specific needs that may vary from one county to the next.

Applicant Response:

Shoreline Behavioral Health Services saw major transitions and changes in SFY25. Changes and accomplishments included a new agency Executive Director, a new Finance Manager, a new Prevention Director, the beginning of construction on an expansion, pulling out of Ohio Valley Physician's Health for MAT services and expanding MAT internally, adjusting to FLSA's new guidelines, applying for SCORF

funding to increase services for those with an opioid use disorder, applying for the Partnership for Success grant through SAMHSA, enrolling in Innovalon services and working through getting many insurance carriers approved through the system, transitioning to a new text-reminder system (Practice Edition), implementing a comprehensive marketing campaign with dollars from DAODAS and Partnership for Success, hosting a leadership training for supervisors, closing out the five-year, Partnership for Success grant, and participating in Mobilize Recovery in Myrtle Beach.

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2. Applicant Question: Describe your agency's needs that will be addressed by the county Alcohol Excise Tax.

Describe your agency's needs that will be addressed by the Alcohol Excise Tax. Provide information that specifically addresses how your agency plans to utilize the Excise Tax, and how your agency is unable to implement these initiatives without this funding. For an agency with multiple counites, if there are challenges specific to one county, be sure to highlight those barriers.

Applicant Response:

Over the last fiscal year, operating and maintaining the agency has proven increasingly difficult due to inflation and rising costs associated with doing business. Balancing the rising costs with ensuring sufficient revenue is a main concern. Maintaining adequate and quality staffing for all departments of the agency is more challenging than in previous years. Keeping salaries competitive helps retain quality staff, which is necessary to maintain the integrity of our non-profit mission.

Many clients who are not covered by grant funding or have insurance tend to be sent to collections or have unpaid balances. Clinical services are provided to clients regardless of their ability to pay, yet reimbursement for services and/or grant funding does not always cover those services. This leads to a loss for the agency for clinical services provided but not reimbursed.

Administrative staff are necessary to ensure deliverables are being reported on, data is being pulled and utilized for funding agencies (client surveys, GMS data, GPRA, collaborating agency surveys, Trauma Informed Survey, post-discharge surveys), clients are seen for intake, HIV tests are implemented, taking payments, serve walk-ins, answering the over 1,000 phone calls received daily, ensuring billing is completed for services, scheduling, strategic planning and guidance, clean the agency, conduct medical records requests, checking in for drug screens, observing some drug screens, paperwork/billing for federal probation, monitoring/collecting debt set-off, order iAssist vivitrol through specialty pharmacies, monitors MAKO Rx cards for clients discounts at pharmacy, support for clinical and medical staff, ensuring CARF adherence, ensuring compliance to agency, state, federal, and other policies and procedures, creating/monitoring/adjusting budgets for multiple funding/grant streams, serving on certification boards, doing deposits, advocating for clients and the agency, developing and maintaining community relationships/partnerships, implementing marketing campaigns, safety compliance, etc. Administrative staff see every client who comes in, every time they come in, with Shoreline having over 31,000 encounters last year (not including phone calls or non-clinical services).

Utilizing the Alcohol Excise Tax dollars will cover administrative costs that do not generate revenue, and costs throughout the agency and on the clinical side where revenue is not sufficient enough to cover costs.

Section Name: Agency Capacity

Sub Section Name: Agency Capacity Questions

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1. Applicant Question: Describe your agency's internal and external capacity to deliver Prevention, Treatment, Intervention, and Recovery Support Services in your catchment area.

Describe, in detail, your agency's current abilities to deliver Prevention, Treatment, Intervention, and Recovery Support Services in your catchment area. Be sure to include information about your agency's current capacity to address priority populations, priority substances, and service areas from both an internal and external lens. Be sure to address the unmet needs in your catchment area and provide your agency's plan to address these service gaps.

When describing your agency's plan to address the service gaps in your catchment area, address the following:

1. Overview of the agency's current capacity, both internal and external, including staffing, training, and external capacity elements, such as MOAs/MOUs, descriptions of formal/informal partnerships, contractual services in place, and any additional form of outreach.
2. Unmet service needs and gaps not covered by current capabilities, as well as capacity-building requirements to meet the identified needs.
3. Discussion of your agency's current service system's attention to priority populations, priority substances, and the underserved in your area.

Applicant Response:

Treatment Capacity:

Currently we have 11 full-time counselors and 2 part-time assessment clinicians. In addition, there are 3 clinical supervisors who assist with seeing clients, specifically EAP, Gambling, and DOT referrals. One of the full-time clinicians works exclusively with higher risk, co-occurring patients, and provides services primarily via telehealth. This has been a great benefit for the clients that are unable to join in person and need the virtual option. The full-time counselors at Shoreline have a direct service hour requirement of 25 hours per week. The clinical staff are able to meet this requirement on a regular basis, while ensuring documentation is completed within the appropriate time frame as well.

Shoreline currently has two on-site certified peer support specialists, and six additional peers located at partnership locations. In recent months two of the peer support positions on site at Shoreline have been left vacant. Due to concerns about the ability to fund these positions, the decision to hire additional peers has been put on hold for the immediate future. Plans to re-evaluate in the coming months as the budget is completed for the next fiscal year will be a priority. Hiring more part-time assessment counselors has been very helpful in managing the demands of new clients and allowing full-time clinical staff to provide effective treatment services.

The clinical staff have had the opportunity to participate in many conferences and training sessions throughout the past year. Some of the opportunities have included the APSC Annual Conference and Member's Appreciation Training, TREM, MI and CBT Trainings. The ability to allow the clinical staff to participate in training sessions to expand their knowledge is certainly a privilege we hope to continue in the future. Women's Intensive Outpatient was reestablished in FY24 and has been successful for members that need more intensive services. Beginning this fiscal year, the introduction of Adolescent IOP as a treatment option has been beneficial to the high-risk adolescent population we serve. As of April, there are currently 16 in-person groups occurring on site at Shoreline.

Throughout FY25 admissions continued to decrease from the prior year. MAT admissions in particular seemed to decrease, however in the second half of the year numbers began to increase. As of April 2025, admissions are only down slightly from the prior year. Clients entering treatment at Shoreline by way of our "Open Access" model have increased this Spring and include those seeking treatment for OUD and MAT. Year to date, overall admission numbers are down slightly from FY24. However, February and March admissions in 2025 were higher than the previous year and were on track to exceed April's numbers from last year as well. As of April 22nd, 2025, the current active client count is 1,119.

Medical:

Our MAT program serves 487 clients total through a variety of different treatment options. The ability to serve the clients when they are seen for their medical appointment by pairing this visit with counseling has proven successful. For the MAT department it is imperative to have an available counselor for each client that receives medical services. In addition to counseling, peer support specialists need to be available as well. The MAT program has grown considerably and now substantiates having its own system in place to make it the most efficient as possible. Shoreline continues a successful partnership with Dr. Emmel and his team of providers through GFCS, along with employing our own full-time Nurse Practitioner. Shoreline continues to employ a CMA to assist with medical triage for the MAT patients. Dr. John Emmel serves as Shoreline's Medical Director and provides consistent supervision and guidance to our nurse practitioner. With Shoreline's medical expansion scheduled to open in the summer of 2025, there is room for growth and opportunity in this area.

Recovery Services:

The continued use of peer support has consistently yielded positive results in all levels of treatment service. There are currently two full-time peer support specialists who are available to the clients on site at Shoreline. Peer support services continue to provide a huge value to treatment services at Shoreline. They have been instrumental in assisting counselors with managing their high-risk caseloads and helping to re-engage clients that have left treatment AMA. Our peers are very knowledgeable regarding best practices for vulnerable populations and assist with distribution of Narcan and other harm reduction activities. The lead peer support supervisor oversees peer supervision at Shoreline and both hospital sites. The lead peer coordinates regularly with the clinical supervisors and acts in a liaison capacity. The MUST Fast Track ED Project has continued throughout FY25. Peer recovery coaches are in Grand Strand and Tidelands Waccamaw Community Hospital full time and continue to make a large impact. The lead peer position assists with the on the ground supervision of the peers at both hospital locations. This position has helped to ensure the peer recovery coach needs are being met as well as to ensure coverage is maintained for all hospital shifts. A snapshot of peer services provided from October 2024 through April 2025 shows 936 activities that were conducted.

Intervention Services:

From July 1st, 2024, to the end of March 2025, Shoreline BHS distributed 581 boxes of Narcan. This includes patients that received doses, as well as community members. There were 1,046 Fentanyl and Xylazine testing strips that were distributed as well to clients and community members. Shoreline continues to utilize supplies for *Nicotine Replacement Treatment* for qualifying clients that are interested.

Prevention

The department is well-equipped to deliver high-quality prevention services across Horry County. In addition to internal training and program delivery, Shoreline Prevention is actively involved in several local coalitions and boards, which enhance the agency's capacity through collaborative partnerships and resource sharing.

Shoreline plays a leading role in the Horry County CAST Coalition—its strongest community partnership—which includes members from law enforcement, local universities, counselors, and other prevention professionals. The agency is also a member of the Coordinated Effort in Myrtle Beach, a group focused on reducing homelessness and opioid overdoses, and it leads a Harm Reduction Coalition initiated by Shoreline itself.

Additionally, Shoreline established the Overdose Fatality Review Committee in Horry County, which is now coordinated by the Myrtle Beach Police Department and includes representation from law enforcement, Shoreline staff, and the Horry County Coroner's Office. The agency also facilitates a Law Enforcement Subcommittee under the CAST Coalition. This committee collaborates with prevention staff on activities promoting a drug free lifestyle for young people. This committee is composed of multiple law enforcement agencies working together to implement environmental prevention strategies, and Shoreline holds formal agreements with the majority of these partners.

2- A persistent challenge and gap across the country is the ability to provide multi-session, evidence-based educational programming. While Shoreline staff recognize the importance and effectiveness of this approach, they have struggled to secure sufficient buy-in from the school district to implement it at a scale that would drive meaningful change. Even if the school district were fully supportive, the agency currently lacks the capacity to deliver programming at the level required to impact all of Horry County, which serves more than 40,000 students.

3-Shoreline provides prevention services throughout Horry County, with a strong emphasis on reaching underserved populations. A key partner in this effort is SOAR Academy, the county's alternative school, which serves many at-risk students. To reduce barriers such as lack of transportation, Shoreline staff deliver the Tobacco Education Program directly on-site. This is especially important as many students at SOAR have violated the tobacco policy and are unable to travel to Shoreline's main location.

Shoreline staff are committed to ongoing professional development, regularly participating in trainings on cultural diversity and inclusion to better engage with the community. They have also sought additional training to improve services for Spanish-speaking populations. In addition to on-site education, the prevention team offers presentations for students and/or parents to enhance information sharing and raise awareness.

These services are ongoing to ensure that this vulnerable population continues to receive critical prevention support. Shoreline also responds to service requests from a variety of organizations serving underserved communities, including schools, churches, and other community-based groups.

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2. Applicant Question: Describe your agency's current capacity to address individuals with co-occurring disorders.

Provide a detailed discussion of your agency's ability to address patients who presenting with co-occurring disorders. Be sure to provide information that describes your agency's service delivery and/or referral process.

Applicant Response:

Clients continue to seek treatment for various types of issues related to substance use disorder and also related to mental health concerns. From the beginning of the current fiscal year, there have been 52 clients that have presented with primary mental health diagnoses. Currently on staff we have 6 licensed clinical counselors who are able to treat a wide variety of mental health concerns. In addition, there are several counselors beginning their licensure process soon. We strive to train our clinicians with the most current, evidenced based approaches to best serve the clients. There is a need for more training opportunities for evidence-based approaches to work with the mental health population, as well as with children and families. Many clients have complex cases that require specific interventions. In addition, more clients have presented with stimulant use disorders this past fiscal year.

Regardless of the reason for seeking services, we continue to utilize our open access model of treatment. This creates access for those interested in beginning treatment. Appointments for the point of entry and initial assessment are not necessary, instead clients can come in during our walk-in times and be seen that same day. Shoreline's incorporation of Trauma Informed Care remains at the forefront of our agency's philosophy of treatment. Providing a safe and comfortable environment for clients and staff to experience while at the agency is something highly prioritized.

Section Name: Agency Health Equity

Sub Section Name: Agency Health Equity Questions

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1. Applicant Question: Describe your agency's unmet needs, current capacity, and plan to address health disparities in your underserved populations.

Describe, in detail, your agency's unmet needs, current capacity, and plan to address health disparities in your underserved populations. Be sure to provide data that describes the underserved populations and ensuing health disparities in your agency's catchment area. For agencies that serve multiple counties, this data may look different from county to county; provide any county-specific information that relates to your agency's ability to effectively address social determinants of health for your patients.

Applicant Response:

With increasing costs and budget cuts, it has been increasingly difficult to be financially healthy. Just this past year, Shoreline was able to assist clients with high deductibles or high out-of-pocket expenses with covering their costs for services. When ARPA funds were cut, Shoreline was not able to offer that to clients on the level it has been and now are billing them for services. Not being able to cover some services for clients with high deductibles or high out-of-pocket expenses (which were typically $3,000-$5,000 deductibles) has created an unmet need for the agency. These clients have insurance, but are in financial situations where high deductibles or out-of-pocket expenses prove burdensome. 475 clients received the benefit of BG TX payments from ARPA dollars during this fiscal year. There is still some money from the state that will cover that, however, it was a substantial loss for clients.

Included in this category would be minority populations, and groups that receive less than adequate representation. One of the most vulnerable groups we serve would be the homeless population. This particular population is at greater risk for communicable disease, acute medical needs that have not been addressed, as well as co-occurring mental health and substance use disorders. There is much work to be done with this group, especially in the Myrtle Beach area of Horry County. Through the work of several coalitions and coordinated efforts, there is much discussion and outreach being done in this area. Our involvement with several organizations, including our very own HOPE Coalition, helps to illuminate the many resources still needed in our county. Through this committee we have partnered with local organizations to have successful events for community members and provide needed resources.

Additionally, continuing our process as an agency of becoming culturally proficient remains a top priority. We hope by incorporating further training on populations such as LGBTQ+ and education on topics such as gender inclusivity, will have a substantial impact.

Our Cultural Diversity and Trauma Informed Care committees are continuously making strides to ensure the agency is a welcoming place for anyone that we serve. Continuing to utilize our open access model of treatment will maintain ease of access for those interested in beginning treatment. Appointments for the point of entry and initial assessment are not necessary, instead clients can come in during our walk-in times and be seen that same day.

Clients continue to seek treatment for various types of issues related to substance use disorders, as well as mental health concerns. We strive to train our clinicians with the most current, evidenced based approaches to best serve the clients. There is a need for more training opportunities for evidence-based approaches to work with the mental health population, as well as with children and families. Many clients have complex cases that require specific interventions. In addition, more clients have presented with stimulant use disorders. The diagnosis for stimulant use disorder often co-occurs with other substances such as opioids or alcohol. These diagnoses are often secondary or even tertiary.

Section Name: Agency Overall Budget

Sub Section Name: Agency Overall Budget Question

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1. Applicant Question: Attach your Overall Agency Budget Worksheet that is provided in the Attachments section of this application.

Attach your Overall Agency Budget Worksheet that is provided in the Attachments section of this application. Navigate to the Application Announcement, select the "Attachments" tab, and download the Budget Template. Once completed, attach it here.

Applicant Response:

FY 26 County Plan Budget-Submitted.xlsx - EXCEL DOCUMENT

Section Name: Agency Signature Page

Sub Section Name: Agency Signature Page Question

1. Applicant Question: Attach your Agency Signature Page that is provided in the Attachments section of this application.

Attach your Agency Signature Page that is provided in the Attachments section of this application. Navigate to the Application Announcement, select the "Attachments" tab, and download the Signature Page. Once completed, attach it here.

Applicant Response:
Strategic Plan Signature Page.pdf - PDF FILE