



**Franklin**

COUNTY KANSAS

— ] EST. 1855 [ —

**Community Partner Organization  
“Outside Agency”**

# **Funding Request Application**

*Fiscal Years 2026 – 2027 for  
County Funding Requests*

## INTRODUCTION

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Franklin County provides funding opportunities to local community partner organizations through their annual budgeting process. Historically known as “Outside Agencies,” organizations receiving municipal and/or county funds do not operate within the formal structure of city or county governments but depend on support from these organizations to achieve their mission or to fund special projects.

Franklin County Community Partner Organizations generally have a strong presence within the community and provide vital services, products, or activities that improve the community in a variety of ways. Organizations requesting funding have generally fallen under the following three categories:

**Recreational/Arts and Culture:** These organizations exist to promote, sustain and develop recreational, cultural, and leisure activities within the community. They may also sponsor educational events, community events, or celebrations designed to encourage diverse cultural and active lifestyles and promote a strong sense of community.

*Example: Franklin County Historical Society, Franklin County Fair*

**Social Services:** The primary objective of these organizations is to support or engage in activities designed to enhance the wellbeing of individuals and families within the community. They provide a variety of services that primarily focus on basic human needs, access to programs and services designed to maintain human dignity, health and overall welfare of citizens.

*Example: Elizabeth Layton Center, Services for the Elderly, COF Training Services*

**Civic Organizations/Quasi-Governmental:** These organizations have been established within our community to:

- A) Work for overall improvement, advancement, and economic health through civic involvement, economic development initiatives, and through fostering community spirit
- B) Provide services, programs or other opportunities for the betterment of the community through the organization of executive boards or other Quasi-Governmental organizations that work collaboratively with Franklin County on shared goals, concerns, and interests.

*Examples: Prairie Paws Animal Shelter, Lake Region Resource Conservation and Development*

## APPLICATION INSTRUCTIONS

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Please answer questions in the form provided in this document. A fillable PDF application is also available on the Franklin County website, [www.franklincoks.org/cpapplication](http://www.franklincoks.org/cpapplication) or contact Janet Paddock at: [jpaddock@franklincoks.org](mailto:jpaddock@franklincoks.org), or (785) 229-3415 for further assistance or information.

Accessing the fillable application will ensure that your submitted application is legible and can be read easily by the Commissioners and the public.

All requested information must be completed before this application will be considered.

Applications that are incomplete or are missing required materials will not be considered until all missing information or items have been received by the County Administrator's Office.

Applicants must submit multiple copies of the application as follows:

### **County Funding Requests: Please Submit 7 Copies**

5 Copies – County Commissioners

2 Copies – County Administrator & County Clerk



**APPLICATION DEADLINE:**  
*Applications must be submitted to the  
County Clerk's Office no later than  
4 pm on Wednesday, March 11, 2026.*

## CONTACT AND SUBMISSION

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### **Hand Deliver or Mail Completed Applications to:**

Franklin County Clerk's Office in the Historic Courthouse

Mailing Address:  
County Clerk's Office  
Attn: Community Partner Funding  
315 S. Main  
Ottawa, KS 66067

## APPLICATION CHECKLIST

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*This checklist is for applicant use only. Please do not include this in your application submission.*

- Completed Application Form
- (7) Printed Copies of Application Form

### **General Instructions – Please work within these guidelines**

- Each copy should be identical. **Do not** address applications separately to individual commission or staff members.
- Please use only a staple, paperclip or binder clip to secure the application. **Do not** include your application in a folder, comb binder, etc.
- Unless additional attachments (cover letter, brochure, etc) are necessary, include only information that is requested.
- Copy of Organization W-9 Form
- A year-end balance sheet may be attached to satisfy the requirements in Section IV – *Financial Information*.
- Section IV – *Financial Information* and Section V – *Budget Information* require data for every question; do not leave any questions blank. If a category/question is not applicable, answer “N/A” or enter a zero.
- Section V – *Budget Information* – A line-item budget for the revenue and expense section may be attached. Please specify revenue sources clearly.
- Any existing **Contract for Services** that your organization has with Franklin County should be attached. Please make this the final attachment of your application packet.

### **Schedule for Decision-Making Process and Availability of Funds**

**Awarded funds are for the 2026-2027 fiscal season.**

The Board of County Commissioners intend to make funding decision in April 2026. Preliminary decisions will be announced following the scheduled Budget Study sessions and work session in April. Funding decisions for each request will become final upon the adoption of the FY 2027 budget – planned to occur in September 2026. Funds are generally distributed in one lump sum for projects or set up on an individual basis and will be made after January 1<sup>st</sup> of each fiscal year.

# APPLICATION SECTION I: Cover Sheet

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## APPLICANT INFORMATION

|                    |  |
|--------------------|--|
| Organization Name: |  |
| Contact Person:    |  |
| Mailing Address:   |  |
| Phone:             |  |
| E-mail:            |  |
| Web:               |  |

|   |
|---|
| <b>Type of Organization:</b><br><input type="checkbox"/> Recreation / Arts and Culture <input type="checkbox"/> Civic / Quasi-Government<br><input type="checkbox"/> Social Service <input type="checkbox"/> Other: _____ |
|---|

|                                      |          |
|--------------------------------------|----------|
| <b>Requested Amount for FY26/27:</b> | \$ _____ |
|--------------------------------------|----------|

|   |
|---|
| <b>Will this amount be used to leverage additional funds either through grants or other means?</b><br><input type="checkbox"/> Yes <input type="checkbox"/> No<br>If you marked "yes", indicate the amount of additional funds that will be leveraged and note whether these are estimated or actual.<br>\$ _____ <input type="checkbox"/> Estimate <input type="checkbox"/> Actual |
|---|

|  |
|--|
| <b>Description of request:</b> Using the space below, <i>briefly</i> describe how your organization will use these funds and how the proposed program/project will benefit the community. A more detailed description is requested in <u>Section III</u> . |
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## APPLICATION SECTION II: Organization History

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**Organizational History and Mission:** Provide a brief history of your organization in Franklin County, including services provided to area residents and your organization's Mission Statement.

**Organizational Structure:** List your officers and director(s), indicating their term of office.

## APPLICATION SECTION III: Funding Request Justification

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***Briefly*** explain how the funds will be used and why public funds are necessary to accomplish this goal. Some discussion items to cover in this section may include:

- *Has the funding request increased from prior years;*
- *Is this a one-time or ongoing request*
- *Describe any large program or staff expansion occurring in 2026-2027;*
- *Large equipment or other fixed assets that will be purchased in 2026-2027;*
- *How does this project relate to city or county goals or improve the overall quality, character, or health of the community; and*
- *Will this funding be used to leverage additional monies for your organization either through grants or other means?*

## **APPLICATION SECTION IV: Financial Information**

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*A current balance sheet can be submitted to satisfy this requirement.*

### **Balance Sheet as of December 31, 2025:**

| <b>Assets</b>            |  |
|--------------------------|--|
| <b>Current:</b>          |  |
| Cash                     |  |
| Investments – CD’s, Etc. |  |
| Receivables              |  |
|                          |  |
| <b>Fixed:</b>            |  |
| Equipment                |  |
| Building/Property        |  |
| Less Depreciation        |  |

| <b>Liabilities</b> |  |
|--------------------|--|
| Payables           |  |
| Withholding        |  |
| Long-Term          |  |
| Promissory Notes   |  |
| Mortgage           |  |
| Owner’s Equity     |  |
|                    |  |

### **Any other relevant financial information:**

## APPLICATION SECTION V: Budget Information

Please provide detailed information regarding your annual budget.

| <b>Revenue</b>   |                     |                     |                     |
|--|---------------------|---------------------|---------------------|
| <i>*In the boxes marked "other" please specify the revenue sources</i> |                     |                     |                     |
|  | <b>FY 2024-2025</b> | <b>FY 2025-2026</b> | <b>FY 2026-2027</b> |
| Franklin County  |                     |                     |                     |
| United Way or other Non-Profit Organizations                           |                     |                     |                     |
| Contributions  |                     |                     |                     |
| Fundraisers  |                     |                     |                     |
| Interest   |                     |                     |                     |
|  |                     |                     |                     |
|  |                     |                     |                     |
|  |                     |                     |                     |
|  |                     |                     |                     |
| <b>Total</b>   |                     |                     |                     |

| <b>Expenses</b>  |                     |                     |   |
|--|---------------------|---------------------|---|
| <i>*You may submit a copy of your line item budget for expenses for this section</i> |                     |                     |   |
|  | <b>FY 2024-2025</b> | <b>FY 2025-2026</b> | <b>FY 2026-2027</b><br><i>Estimated</i> |
| Salary, Director   |                     |                     |   |
| Salary, Other(s)   |                     |                     |   |
| Benefits   |                     |                     |   |
| Rent   |                     |                     |   |
| Utilities  |                     |                     |   |
| Client Services  |                     |                     |   |
| Client Aid   |                     |                     |   |
| Equipment  |                     |                     |   |
|  |                     |                     |   |
|  |                     |                     |   |
|  |                     |                     |   |
| <b>Total</b>   |                     |                     |   |

## APPLICATION SECTION VI: Progress Report

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Complete this section if your agency was awarded  
Community Partner Funding in Fiscal Year 2025-2026  
or most recent fiscal year just ended.

Amount Awarded? \$ \_\_\_\_\_

Have you used all of the funds awarded?

- Yes
- No

If you have not used all of the funds awarded, please include **remaining amount**  
and **date** by which you intend to use those funds.

\$ \_\_\_\_\_ Date: \_\_\_\_\_

Please explain why previous County allocations have not been expended. Be specific.

**Briefly describe the impact that the FY 2025-2026 award has had on your program, project, or organizational operations within Franklin County. Some discussion items to cover in this section may include:**

- *Number of persons served and demographics of persons served (income level, age, race, etc.)*
- *Describe the overall impact of these funds on your program, project or organization within Franklin County*
- *If your agency has not yet to spent all of the awarded funds, please briefly describe your plans to expend the funds by the end of the fiscal year*
- *Did your agency use Community Partner funding to leverage additional funds, either through grants or other means?*