

REQUEST FOR FUNDS

FROM THE MAYOR & COUNCIL OF THE TOWN OF BOONSBORO

Form must be submitted to the Town Clerk by April 1st to receive funds in the next fiscal year (July 1st - June 30th).
If approved by the Mayor & Council, the grant will be made to the organization by September 1st.

ORGANIZATION NAME Boonsboro Ambulance & Rescue

MAILING ADDRESS P.O. Box 7 Boonsboro, MD 21713

AMOUNT OF GRANT REQUEST \$ 100,000

PLEASE DESCRIBE THE REASON FOR THE REQUEST: Addition to the existing station. The station was built in 1983, we never did any additions since then. We have out grown that station. We need offices, large room we can use as a meeting/training room. The cost is 6 million dollars.

SUBMITTED BY (SIGNATURE) M. J. Blickenstaff

PLEASE PRINT NAME M. J. Blickenstaff

TITLE President

ADDRESS 108 Daid Drive Boonsboro, Md

PHONE NUMBER 301-465-0701

EMAIL ADDRESS mjemt7@aol.com

DATE 2/4/2026

FOR OFFICE USE ONLY

DATE RECEIVED 2/5/2026

HEARING DATE _____

APPROVED DATE _____

DATE GRANT ISSUED _____