

# **Louisiana Library Association Disaster Relief Fund Policy**

**PURPOSE:** The purpose of the Louisiana Library Association Disaster Relief Fund is to make available funds to help Louisiana libraries recover from damages due to recent disasters.

## **FUND REQUEST PROCESS**

1. All libraries are invited to apply for funds. Requests will be submitted to the Disaster Relief Fund Committee for consideration.
2. The Disaster Relief Fund Committee will review the applications within 45 days, and funding will be awarded as approved. Libraries will be notified within 10 days of the Disaster Relief Fund Committee review if funding is not approved.

## **DISTRIBUTION OF FUNDS**

1. If an application is funded, funds will be distributed by check payable to requesting library.
2. Within six months, a report on how money was spent with copies of receipts will be due. Please email report to [lla@amigos.org](mailto:lla@amigos.org).

## **POLICIES AND PROCEDURES**

1. A committee consisting of the Executive Committee (President, 1st Vice President, 2nd Vice President, Past President, Secretary and Parliamentarian) shall be created to review and approve requests for funds.
2. Executive Director will include a monthly accounting of all fund donations and expenditures with other monthly reports.
3. Executive Director will maintain a spreadsheet of donor contact information.
4. In a timely fashion, thank-you notes will be sent to donors.
5. Applications will be evaluated by committee members according to the following criteria:
  - a. Extent of damage sustained
  - b. Impact of damage on service
  - c. Plan for using the funds
  - d. Availability of other funds to assist in recovery
  - e. LLA membership

# LOUISIANA LIBRARY ASSOCIATION: Disaster Relief Program Application for Financial Support

Name of Damaged Library: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Temporary Address (if applicable): \_\_\_\_\_

LLA (Louisiana Library Association) Member? Individual \_\_\_\_\_ Institution \_\_\_\_\_ No \_\_\_\_\_

Type of Library: Academic \_\_\_\_\_ Public \_\_\_\_\_ School \_\_\_\_\_ Special \_\_\_\_\_ Other \_\_\_\_\_

Governing Authority (name of university, public library system, school district, corporation, nonprofit agency, etc.):

\_\_\_\_\_

Address: \_\_\_\_\_

Describe the extent of damage sustained, including what percentage of the collection/building this represents, the impact on library service, and state when the damage occurred.

\_\_\_\_\_

(If additional space is needed, please continue on a separate page and attach it to this form.)

Provide a brief summary of how the funds will be used. Describe the project, the number of people served, and the expected outcomes. Include a line item budget that estimates how funds will be allocated for the project.

\_\_\_\_\_

\_\_\_\_\_

(If additional space is needed, please continue on a separate page and attach it to this form.)

Is your facility covered by insurance? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please describe coverage

provided: \_\_\_\_\_

\_\_\_\_\_

Is your facility receiving disaster relief from other source(s)? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

If I receive funding, LLA may use my library's name in publicity efforts: Yes \_\_\_\_\_ No \_\_\_\_\_

If I receive funding, I agree to submit a report on how the money was spent and provide copies of receipts within six months after I receive the funding.

Authorized Signature: \_\_\_\_\_ Title \_\_\_\_\_ Date: \_\_\_\_\_

Please send this form and attachments (if additional space is needed) to [lla@amigos.org](mailto:lla@amigos.org) with LLA Disaster Relief Fund Application in the subject line or mail to:

**LLA Disaster Relief Fund Application**

**1190 Meramec Station Road, Ste. 207 . Ballwin, MO 63021-6902 . Fax: 636-529-1396**