



## **Applying for Financial Support for Clinic Moving and Expansion**

### **What is financial support for clinic moving and expansion?**

The State WIC Program has historically provided limited financial support for local agencies who are moving or expanding clinics. The State purchases items such as scales, stadiometers, nutrition education materials, and furnishings to complete the moving and expansion project and make the clinic environment more trauma informed. Maximum amount of financial support cannot exceed \$5000. The financial support does not come directly to local agency as a grant adjustment. The State will purchase the items an agency needs for their clinic moving and expansion project. Purchased items will be shipped directly to the local agency.

**PLEASE NOTE:** This funding is not intended for capital improvements. Agencies must submit a separate application for using NSA funds for building/construction work. All capital expenditure applications greater than \$2,500 must be approved by the State and FNS.

### **What is the application process?**

Agencies interested in applying for financial support for clinic moving and expansion must complete an application. In the application, the agency must describe the clinic moving and expansion project and, after the project receives approval from assigned nutrition consultant, complete a Purchase Request Form detailing the items they are requesting the State to purchase.

### **What are the qualifying criteria:**

The local agency must be moving or expanding clinic operations.

## **What is the application process:**

### **Step 1 – Description of Project**

Download and complete Step 1 of the Financial Support for Clinic Moving and Expansion application from the Oregon WIC Coordinator’s webpage. You must describe in detail your clinic moving and expansion project.

Submit **Step 1 - Description of Project** of the application to your assigned nutrition consultant. Application is attached.

### **Step 2 – Purchase Request Form**

Once your Clinic Moving and Expansion Project has been approved by your nutrition consultant and the Nutrition and Local Services Manager, you will be asked to complete and submit a Purchase Request form. This form is an excel spreadsheet. The purchase request form must include the following information:

- Item(s) Description
- Make
- Model
- Vendor
- Item# from Vendor
- Link to Product
- Quantity
- Price
- Delivery Address
- Delivery Instructions

Julia Turner, State Contracts Admin Specialist, will purchase the items you’ve requested. She may reach out to you for more information regarding the items you want purchased. The purchased items will be shipped directly from the vendor to your clinic.

**IMPORTANT:** The State cannot purchase items from Amazon. If you are having trouble finding an item, please reach out to your nutrition consultant for help.

The State is also not able to purchase technology-related equipment (printers, laptops, etc) for these projects.

### **Step 3 – Submit Packing Slips**

When you receive the items you’ve requested, you must scan and email the packing slips to:

Julia Turner, Contracts Admin Specialist

[Julia.Turner@oha.oregon.gov](mailto:Julia.Turner@oha.oregon.gov)

Tel. 971-217-5461



## Application - Financial Support for Clinic Moving/Expansion

### Step 1 - Description of Project

Date of submitted:

Agency:

Request submitted by:

Describe the clinic moving or expansion project for which you are requesting financial support:

\*State Office use only:

Request Reviewed by and date:

Request approved by and date:

Approved:    Yes    No    Reason for denial:



## Application - Financial Support for Clinic Moving/Expansion

### Step 2 – Purchase Request Form – Excel Spreadsheet

Date of submitted:

Agency:

Request submitted by:

Once you've been notified your project description has been approved by your nutrition consultant and the Nutrition and Local Services Manager, you will be sent the Purchase Request Form to complete and submit. You will need to have the following information about each item you want purchased to complete the Purchase Request Form:

- Item Description
- Make
- Model
- Vendor
- Item# from Vendor
- Link to Product
- Quantity
- Price
- Delivery Address
- Delivery Instructions

**Please remember we cannot make purchases from Amazon.** If you are having trouble finding an item, please reach out to your nutrition consultant for help.

The State is also not able to purchase technology-related equipment (printers, laptops, etc) for these projects.

\*State Office use only:

Request Reviewed by and date:

Request approved by and date:

Approved:    Yes    No    Reason for denial: