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William Honsal, Sheriff's Office  
Ron Dawson, Alternate  
Vacant, Alternate

## CITIZENS' ADVISORY COMMITTEE ON MEASURE Z EXPENDITURES

The Humboldt County Citizens' Advisory Committee on *Measure Z* Expenditures is now accepting applications for funding. *Measure Z*, Humboldt County's Public Safety/Essential Services Measure, is a half-cent sales tax, passed by the voters of Humboldt County during the November 2014 general election and renewed in 2018.

*Measure Z* will maintain and improve essential services, such as:

- 911 emergency response, rural ambulance and fire protection;
- Ensuring 24-hour Sheriff's patrols;
- Providing children's mental health services and services to victims of child abuse;
- Emergency communications systems;
- Repairing deteriorating roads; and
- Other essential general services.

**Important Notice:** The Citizens' Advisory Committee will not recommend *Measure Z* funding for new, ongoing county positions, consistent with the adopted stance of the Committee in May 2023. Applications proposing such positions are unlikely to be recommended for funding.

If you believe you provide public safety or essential services for Humboldt County, and would like to apply for *Measure Z* funding, an application for funding may be obtained on the County's website at [www.humboldt.gov.org](http://www.humboldt.gov.org), or by contacting the Humboldt County Administrative Office, (707) 445-7266.

**Applications for funding must be filed with the County Administrative Office BY 5:00 P.M. ON FEBRUARY 13, 2026. Postmarks are not acceptable for meeting this deadline.**

**Tami Trent**  
Chair

**Dylan Feierabend**  
Vice Chair



## CITIZENS' ADVISORY COMMITTEE ON *MEASURE Z* EXPENDITURES

The Advisory Committee meets on each Thursday in March to review applications and its recommendations will go before the Humboldt County Board of Supervisors in April.

### APPLICATION FOR FUNDING

Agency Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

The estimated amount of Measure Z funding available for FY 2026-2027 is \$1.75 million.

**Project Title** \_\_\_\_\_

1. Amount of Measure Z Funding Requested for FY 2026-27: \$ \_\_\_\_\_

**AGENCY PRIORITY:** Agencies are encouraged to submit one project per application. If your agency is submitting more than one application, please rank this application in terms of your agency's priority.

Top Priority    Second    Third    Fourth    Fifth    N/A (only submitting one application)

**Summary of Expenses:**

<b>Item</b>	<b>Amount</b>	<b>% of total</b>
Salaries (Wages)	_____	_____
Benefits	_____	_____
Overhead and Occupancy (Administrative, Rent, Utilities, Phones, etc.)	_____	_____
Equipment/Supplies/Services	_____	_____
Transportation/Travel	_____	_____
Fixed Assets	_____	_____
	_____	100%

2. Entity Type - Please check appropriate box.

Humboldt County Department

Contract Service Provider to Humboldt County

Local Government Entity

Private Service Provider

Non-Profit Service Provider

Other, Describe: \_\_\_\_\_

3. Is this application a renewal or related to a project that has been funded by *Measure Z* in the past? (check one)  Yes  No

*If you checked "yes" please include the following:*

*1: a report detailing results from the most recent year the project was funded, and:*

*2: a completed Staffing Report detailing when the funded positions were filled during the most recent year you received funding for this project.*

*\*See the Required Attachments section on Page 3 of this application for more details*

4. Describe how the scope of your proposal fits the intent of *Measure Z*. Specifically, how will it maintain and improve public safety and essential services, as described on the previous page?

5. Please provide a brief description of the proposal for which you are seeking funding.



10. Will this proposal require new or expanded activity on the part of another entity to be fully functional and effective? If so, name that entity and describe what that participation would look like.

11. Are there recurring expenses associated with this application, such as personnel cost? (check one)  Yes  No If you checked yes, detail those expenses here. Please note, the Citizens' Advisory Committee in May 2023, adopted a stance that it would not recommend funding for new, ongoing county positions.

12. If awarded less than the full amount requested, could the proposed project still be implemented? If yes, please identify the minimum funding amount required for the project to remain feasible and describe any changes to scope or outcomes.

**REQUIRED ATTACHMENTS**

Include the following with your application, making sure to **limit your responses to one page, per section**. Responses longer than the maximum may not be read by committee members or considered as part of your application.

**Prior Year Results:** If your request is a continuation of a program funded with Measure Z in prior fiscal years, please provide the results of implementation. (one page maximum)

**Program Budget:** Please utilize the template provided on the following pages and linked on the [county's website](#). This will need to be updated if your agency is approved for funding.

**Staffing Report:** Please utilize the template provided on the following pages, and linked on the [county's website](#) to report on the months that funded positions were filled during the most recent year you received Measure Z funding.

I declare under penalty of perjury under the laws of the State of California that the above statements and all attachments are true and correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**SUBMIT YOUR COMPLETE APPLICATION TO:**

Humboldt County Citizens' Advisory Committee on *Measure Z* Expenditures  
c/o County Administrative Office  
825 Fifth Street, Suite 112  
Eureka, CA 95501-1153