

LETTER OF INTENT TO APPLY FOR CONTRACT

Under Title III of the Older Americans Act
Fiscal Year July 1, 2025 through June 30, 2026

Summary Sheet

Applicant Agency: _____ Project Director: _____

Mailing Address: _____ Street Address: _____

City, State, Zip: _____ City, State, Zip: _____

E-Mail: _____ E-Mail: _____

Type of Organization:

_____ City _____ County _____ Private Non-Profit _____ Other (specify): _____

Geographic area to be served: _____

List services to be provided:	Estimated # of unduplicated <i>persons</i> to be served during project period for each service type:	Estimated # of unduplicated <i>units</i> of service during project period for each listed service type:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Applicant agrees that the project described in this Letter of Intent will be operational July 1, 2025 through June 30, 2026 and certifies that to the best of my knowledge and belief, the information in this application is true and correct and the attached conditions will be complied with if the contract is awarded.

Type or print person authorized to sign

Signature

Title

Date

Type or print person authorized to sign

Signature

Title

Date

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Under Title III of the Older Americans Act
Fiscal Year July 1, 2025 through June 30, 2026

Project Description Sheet

(Please fill out a ***Project Description Sheet*** for each service provided. Attach additional pages if necessary to complete the following questions.)

1. Service or Project name:
2. Provide a description of how your program will spend the Title III funding.
3. Statement of how your project will coordinate services with other community programs. (Include a description of referral systems.)

4. Statement of how your project will fulfill the mission of the Older Americans Act. (Include a description of criteria for selection of clients, outreach and targeting activities and how the project fulfills the objectives of the Older Americans Act.)
5. If extra funding was available, what would you do to increase services and how would you plan to spend the money?

6. Please provide letters of support from other local community-based and/or institutional programs, agencies or organizations involved with older adults.
7. List wage range of all employees funded in full or in part by this contract: \$ _____ to \$ _____.
8. Is this project covered by liability insurance? _____ How much? _____
8. How many years has this project received Title III funds: _____
10. Please provide a **detailed** estimated budget for this Title III service for the fiscal year 2025-2026 as follows (list appropriate estimated resources):

PLEASE FILL IN THE FORM BELOW, YOU MAY SUBMIT ADDITIONAL SUPPORTING DOCUMENTATION IF NECESSARY.
(Your expenses should equal your resources)

Expenses:

Resources:

Personnel and fringe: _____

Supplies: _____

Raw food/meals: _____

Commodities: _____

Communications: _____

Utilities: _____

Repairs/maintenance: _____

Travel/training: _____

Building space: _____

Insurance: _____

Equipment: _____

Contracted services: _____

Audit: _____

Other: _____

TOTAL: \$ _____

Area IV Funds: _____

Project income: _____

Other Resources: _____

Cash in Lieu: _____

Commodities: _____

Match: _____

Other: _____

Other: _____

TOTAL: \$ _____

Application deadline - The electronic application and 2 copies must be received by Rocky before 4 p.m. Friday, March 28, 2025. Applications received after this deadline date will not be considered for funding.

The contractor presentations will be on Zoom again this year.

The date of the Area IV Board Meeting is May 15, 2025 at 9:00am.



March 21, 2025

Jim Marks
Area IV Agency on Aging
PO Box 1717
Helena, MT 59624

Dear Jim:

I am writing to express my strong support for the Meals on Wheels program serving Gallatin County. As a vital resource in our community, Meals on Wheels plays an essential role in improving the health, well-being, and independence of our senior citizens and homebound neighbors.

This program ensures that some of our most vulnerable residents receive not only nutritious meals but also regular wellness checks and human connection—elements that are just as important as the food itself. For many recipients, the daily visit from a Meals on Wheels volunteer may be the only interaction they have that day, offering reassurance, reducing isolation, and even saving lives in emergency situations.

In a region as dynamic and fast-growing as Gallatin County, the need for supportive services like Meals on Wheels continues to increase. Continued funding and community backing are critical to ensuring that no senior goes hungry or feels forgotten.

I wholeheartedly support the mission and ongoing work of Meals on Wheels in Gallatin County, and I urge others to join in advocating for and investing in this indispensable program. Together, we can help preserve the dignity, health, and independence of our neighbors in need.

Sincerely,

Margaret

Margaret Mason
Chief Development Officer

406.587.4486

hello@thehrdc.org

206 E Griffin Dr
Bozeman, MT 59715



92 E Cameron Ave
Belgrade, MT 59714
406-388-4711
belgradeseniorcenter@gmail.com

March 10, 2025

Jim Marks
Area IV Agency on Aging
PO Box 721
Helena, MT 59624

Dear Jim,

The Meals on Wheels program at the Bozeman Senior Center is a vital service that provides nutritious meals to homebound seniors who may struggle to prepare food for themselves. Operating Monday through Friday, this program ensures that seniors receive balanced meals, including options for diabetic-friendly diets

Beyond delivering meals, the program plays a crucial role in fostering social connections. For many seniors, the volunteers who bring their meals are the only people they interact with daily, helping to combat loneliness and isolation. These visits provide a sense of companionship and allow volunteers to check on the well-being of recipients, ensuring they remain safe and cared for.

The program also addresses food insecurity among the senior population in Bozeman. Approximately 65% of the recipients cannot afford even a small contribution for their meals, highlighting the importance of this service in providing nutritional support to vulnerable community members.

The Bozeman Senior Center's Meals on Wheels program is a lifeline for many, offering food, friendship, and peace of mind as well as setting an example of the importance of caring for our elders.

Sincerely,

Lisa Beedy
Center Manager
Belgrade Senior Center



Befrienders

Enhancing Lives Through Friendship

March 6, 2025

Bozeman Senior Center
807 N Tracy Ave.
Bozeman, MT 59715

To Whom It May Concern,

On behalf of Befrienders, I am writing to express our enthusiastic support for the Bozeman Senior Center's Meals on Wheels program. The Senior Center has long been a critical partner in our shared mission of supporting the well-being and independence of older adults in Gallatin Valley. Through their dedication, Meals on Wheels provides not only essential nutrition but also vital social connection—both of which are at the heart of what we strive to foster at Befrienders.

Many of the seniors we serve face challenges of isolation, mobility limitations, and food insecurity. Meals on Wheels delivers so much more than a meal; it offers comfort, safety checks, and a reminder that our community values and cares for its elders. This program plays a crucial role in ensuring seniors can remain in their homes while maintaining their health and dignity.

Befrienders deeply appreciates our ongoing collaboration with the Bozeman Senior Center. Their commitment to serving older adults aligns seamlessly with our mission to connect seniors with companionship and support. We strongly support the continued growth and sustainability of Meals on Wheels and are grateful for the impact it has on the lives of so many in our community.

Please do not hesitate to reach out if we can be of further support.

With gratitude,

Kristin VanDeWalle
Executive Director
Befrienders
807 N Tracy Ave., 2nd Floor
Bozeman, MT 59715
info@befriendersbozeman.org