



WASHINGTON ASSOCIATION OF CONSERVATION DISTRICTS

RESOLUTION

RESOLUTION TITLE: WACD, SCC, CD's Summer/Fall Legislative Workshops

SPONSORING ENTITY/IES CD(s): PCD

AREA: NW SW NC SC NE SE

RESOLUTION TYPE:

- Policy
- Position Statement
- Recognition
- Study

RESOLUTION ACTION AGENCY (check any option that applies):

- WACD
- WSCC
- OTHER STATE AGENCY \_\_\_\_\_
- NRCS
- NACD (See Page 2)
- NON-STATE/FEDERAL PARTNER \_\_\_\_\_

TYPE OF TEXT OF RESOLUTION (check all boxes that apply):

- Technical (changes address grammar, punctuation, sentence flow and makes **NO** substantive change(s) to the existing policy.
- Substantive change to existing policy. If in doubt, check the box.
- New policy.

BACKGROUND DESCRIBING THE ISSUE/PROBLEM STATEMENT:

Often WACD, SCC, and CD's are not on the same page in terms of Legislative budget requests, and most attempts at getting on page tend to be too late in the year before Legislative sessions.

PROPOSED RESOLUTION LANGUAGE:

SCC, WACD, with CD's invited, will hold at least two Legislative budget workshops between July to Sept. annually, with additional electronic correspondence as needed. All efforts must be completed before SCC submits it's budget request to OFM.

IS THERE A WACD FINANCIAL IMPLICATION TO IMPLEMENT THE POLICY? (Funding **required**, staff time, etc.)

- NO
- YES (briefly explain): Staff hours and resources for several workshops.



WASHINGTON ASSOCIATION OF CONSERVATION DISTRICTS

---

**If the proposed resolution is to be adopted by NACD complete the sections below to the best of your ability. If the resolution is adopted at the state level, please reach out to the NACD National Director for assistance in finalizing this form.**

**PROPOSED RESOLUTION LANGUAGE:**

If this resolution is adopted by NACD and included in the NACD Policy book it must clearly and concisely, using active verbs, state the specific action(s) expected of NACD; must be based on fact, avoiding opinions and beliefs; the statement should make sense even without the background. (THIS IS GENERALLY NOT WHERE A "WHEREAS" STATEMENT WOULD GO)

**SPONSOR(S) ACTIONS TO DATE:** (What has been done to address the issue; which agencies and organizations have addressed it also.)

**IMPACT ON EXISTING NACD POLICY (if any):** (Review NACD Policy Book for existing policies covering this issue.)

**IF APPROPRIATE, POTENTIAL FISCAL IMPACT ON NACD's OR A FEDERAL AGENCY BUDGET:**  
(E.g., travel, training, equipment, etc.)

**MEETING AND DATE ADOPTED BY SPONSORING ENTITY:** (E.g., WACD annual meeting date)

**AUTHORIZED SIGNATURE(S) AND TITLE(S):** (Type name and Title)

WACD National Director (NACD board member)