

Stop the Bleed Supplies for Menomonie Schools

August 2026 Community Impact Grant Cycle

Menomonie Fire Department

Dennis Klass
2417 Wilson Street
Menomonie, WI 54751

mfd@menomonie-wi.gov
O: 715-232-2414

Mr. Matt Poliak

N7795 540th St
Menomonie, WI 54751

mpoliak@menomonie-wi.gov
O: 651-331-6403
M: 651-331-6403

Application Form

Instructions

INSTRUCTIONS

Complete the grant application by responding to the fields below. Note that any fields with an asterisk are required fields and must be completed prior to submitting an application.

As you complete the form, the system will auto-save every 100 characters typed or every time you click out of a field. You may collapse question groups as you go, as an indicator to yourself that you've completed that section and to reduce scrolling.

The system also allows you to Save an application and come back to it before submitting. There is also a Collaborator feature that allows applicants to work together on a single request. https://docs.google.com/document/d/15NsdFgi3lBmBu0_pp1zj2HZ51l4mx8Wryjrx4FYOmdg/edit?usp=sharing Click here to learn about the collaborator feature. Contact the Community Foundation at (715) 232-8019 if you have any questions or problems with the form.

Request Overview

Project Title*

Please provide a descriptive Name/Title for this grant request.

Stop the Bleed Supplies for Menomonie Schools

Amount Requested*

Typical grant amounts range from \$500 to \$5,000 or more.

\$2,200.00

Program Area*

Please check the program area that best categorizes this grant request.

Youth

Geographic Area Served*

Please select which geographic area is primarily being served by this request.

Menomonie Area

Does your organization function within Dunn County?*

Yes

Population Served*

Please select the specific population being served by this request. You can select age and income level in the next section. If the population this grant targets is not listed, please choose "General".

Victims of Disaster

Age Group Served*

Please select the specific age group served by this grant request.

School-aged children and/or adolescents

Income Level Served*

Please select the income level of the target population being served by this request.

All income levels

Non Discrimination Policy*

In accordance with federal regulations, the Community Foundation of Dunn County does not discriminate based on race, color, creed, sex, religion, age, disability, sexual orientation, marital status or national origin. Do the applicant organization's employment and service practices comply with this policy?

Yes

About Your Organization

1. Organization Overview*

Please provide a brief background about your organization, including a short summary of the organization's history, mission, goals, accomplishments, and challenges.

The Menomonie Fire Department has been a symbol of public service since 1885. Our mission has always been to provide the best possible service to our community — whether through emergency response, public assistance, or public education. This request is solely for replacing expired trauma supplies already placed within Menomonie-area schools; no portion of this funding will support Fire Department operations, equipment, or overhead.

The department is comprised of 30 full-time staff cross-trained as Firefighters and EMTs/Paramedics, a Fire Chief, an Executive Assistant, and 20 Paid-On-Call Firefighters who assist on larger fire incidents. The Menomonie Fire Department responds to approximately 4,000 calls for service each year, a number that

continues to grow annually. In addition to the City of Menomonie, we provide fire and EMS service to eight surrounding townships, and we provide Advanced Life Support capabilities via ambulance intercept with our neighboring EMS agencies.

Beyond responding to emergency calls, a significant part of our work centers on Community Risk Reduction — improving people's lives before safety issues have the chance to make an impact. Fire prevention and public education allow us to engage with the public and convey pertinent safety information affecting our area. Annual fire inspections familiarize us with building layouts and the locations of fire safety features, so we're prepared should we ever need to respond, while also allowing us to build positive relationships with businesses, property owners, and tenants. We further strengthen our ties to the community through a robust public education program, including our annual Open House during Fire Prevention Week, school visits to talk with children about fire safety, and public outreach trainings like Stop the Bleed.

As an emergency service, two challenges shape much of our focus: the critical minutes between injury and treatment, and the ongoing difficulty of recruiting the next generation of first responders. It can take as little as three minutes to bleed out from a compromised major artery — often less time than an ambulance response allows — making bystander access to life-saving trauma supplies a matter of life and death. Programs like Stop the Bleed also help address the issue of recruiting indirectly, exposing students and staff to our profession early and helping build interest in emergency service careers.

2. Current Initiatives*

Please describe your current programs, activities, community impact and the community's involvement or support of your organization.

The Menomonie Fire Department is an active, community-engaged organization that goes beyond emergency response to invest directly in public safety education and preparedness. Our Stop the Bleed program alone has trained more than 1,000 community members, including students, staff, and residents, in life-saving hemorrhage control techniques — equipping ordinary bystanders to act effectively in the critical minutes before emergency responders arrive. We founded a Rescue Task Force (RTF) program to improve our capability to respond to complex, high-risk incidents, reflecting our commitment to evolving alongside modern public safety needs. Our Fire Prevention division inspects over 1,100 structures per year to identify and correct fire risks, allowing us to engage directly with local businesses and property owners while demonstrating our ongoing commitment to public safety. Our Public Education division ensures our message reaches community members of all ages through an annual open house, station tours, a ride-along program, and more.

City Management, City Council, and the Mayor have consistently supported our public safety initiatives, ensuring we have the apparatus and equipment vital to carrying out our mission. This community support extends to our school partnerships as well — we have seen sustained success securing funding for school fire prevention materials through the Fire Pup Program, a nationally organized initiative that solicits donations from area businesses on behalf of local fire departments.

Our relationship with Menomonie-area schools is a natural extension of this broader community mission. Fire department personnel regularly engage with students and staff through Stop the Bleed instruction, introducing life-saving skills directly into the school environment and building familiarity with the fire service among the next generation. This existing relationship provides a strong foundation for the proposed school-based trauma supply program, ensuring the equipment will be paired with a trained, engaged school community.

3. Organizational Structure*

Describe the current structure of your organization, including how the organization functions on a daily basis. (CEO, staff, volunteers, etc.)

The Menomonie Fire Department is overseen by Fire Chief Dennis Klass, who works closely with Executive Assistant Nicole Watkins and the on-duty Duty Officer to manage day-to-day operations. The department operates from two fire stations and staffs three rotating crews on a 48/96 schedule — 48 hours on duty followed by 96 hours off — ensuring 24/7 coverage year-round.

Each on-duty crew consists of 10 staff members: a Battalion Chief, a Captain, a Lieutenant, two Motor Pump Operators (senior staff responsible for driving and operating the fire engines), and five Firefighter/EMTs and Paramedics. Staff are assigned specific stations and positions for each shift. In total, the department comprises 30 full-time firefighters, EMTs, and paramedics, one full-time Fire Chief, one full-time Executive Assistant, and 20 Paid On Call (POC) staff who provide additional manpower when needed.

When an emergency call is dispatched, the Duty Officer — typically the on-duty Battalion Chief — assigns units to respond. Between calls, crews remain engaged in station maintenance, training activities, and other operational duties between the hours of 8 AM and 4 PM. For structure fire calls specifically, POC staff are paged to supplement on-duty crews with additional personnel.

About the Grant

What is the community need that this request addresses?*

In the fall of 2024, I identified a critical gap in trauma care resources across every school in the Menomonie area — both the School District of the Menomonie Area (SDMA) and the community's parochial schools, St. Paul's and St. Joseph's. At Menomonie High School, the nurse's office had only a handful of basic bandages and a single tourniquet on hand to respond to a life-threatening bleeding emergency.

This gap exists against a backdrop of rising risk. The FBI designated 223 active shooter incidents nationwide from 2020 to 2024, a 70% increase over the previous five-year period. Wisconsin is not immune to this trend: in December 2024, Abundant Life Christian School in Wisconsin experienced a shooting that killed two people and injured six others, underscoring that no community, including our own, can consider itself exempt from this risk. Beyond active threats, schools also see routine incidents — falls, equipment injuries, workshop and lab accidents — where uncontrolled bleeding can become life-threatening in minutes without immediate intervention.

Every year, about 3,600 students and 500 staff pass through SDMA schools, St. Paul's, and St. Joe's with thousands more community members joining them on evenings and weekends for athletics, concerts, and public events. Yet the community's capacity to respond to a mass-casualty or major bleeding event was, until recently, effectively nonexistent. The absence of accessible, life-saving trauma supplies in the public and private spaces where thousands of children spend the majority of their waking hours was unacceptable.

As the Officer in charge of Community Risk Reduction, I organized a donation drive with area businesses that raised nearly \$12,000 to place wall-mounted Stop the Bleed kits next to every AED in every SDMA school, as well as St. Paul's and St. Joe's, along with supplementary supplies for mass-casualty response in each nurse's office. I also began teaching Stop the Bleed training to incoming freshmen during health classes; three years later, roughly three-quarters of the student body has received this training, and by next year nearly the entire student population will have been trained and familiar with the kits' use.

However, the hemostatic gauze in these kits and caches carries a shelf life of five years, after which its effectiveness in controlling severe bleeding can no longer be guaranteed. Expired materials are not

guaranteed to perform reliably in the exact moment a life depends on them. Given the constrained budgets of the School District as well as St. Paul's and St. Joseph's, there is no internal funding mechanism to replace these supplies on this recurring cycle. This grant would fund the replacement of expiring hemostatic gauze across all 27 kits currently in service across SDMA schools, St. Paul's, and St. Joseph's — extending the operational life of this program for another five years and ensuring it remains fully functional and ready when it matters most.

Project Goals and Activities*

Describe the specific goals and activities of your project and how they will be carried out or accomplished.

The goal of this project is to fully replenish expiring hemostatic gauze across all 27 Stop the Bleed kits and mass casualty caches deployed in SDMA schools, St. Paul's, and St. Joseph's, restoring the kits to full operational readiness and extending the program's functional life by another five years.

Objectives:

- Raise \$2,500 to cover the cost of replacement hemostatic gauze for all 27 kits and mass casualty caches.
- Procure and inspect replacement gauze from North American Rescue, the vetted trauma supply vendor through whom the original kits were purchased, to confirm compliance with current manufacturer and clinical standards.
- Replace expired gauze in every kit and cache across all school locations.
- Verify and document contents post-replacement to confirm all 27 kits / 5 caches are fully stocked and field-ready.

I will personally coordinate procurement of the replacement supplies, working in partnership with Nurse Ramie McMahon, Head of Student Health for the District, to schedule and complete restocking at each school location and verify final kit and cache readiness.

Project Outcomes*

Describe the anticipated outcomes resulting from this grant project, its impact and how the community will be better served.

The most immediate outcome of this project is the restoration of all 27 Stop the Bleed kits and mass casualty caches across SDMA schools, St. Paul's, and St. Joseph's to full operational readiness, with new hemostatic gauze replacing supplies that would otherwise expire. This ensures that in the event of a mass casualty incident, active threat, or routine traumatic injury, staff and trained students have immediate access to supplies proven to control severe bleeding, rather than materials that may fail when they are needed most.

Beyond the physical restocking, this project protects the return on a broader community investment. Nearly 4,100 students and staff, along with thousands of additional community members who use these facilities for athletics, events, and public gatherings, will remain covered by a program that has already trained roughly three-quarters of the student body — a figure expected to approach the entire student population within the next year. Without this funding, that training and the community's confidence in the program's readiness would be undermined by supplies that can no longer be relied upon.

This project also reinforces a sustainable model of community-supported emergency preparedness. By securing replacement funding now, the program extends its operational life for another five years, giving the Menomonie Fire Department, SDMA, and area parochial schools continued lead time to plan for future replenishment cycles rather than facing a sudden gap in coverage.

Ultimately, the impact of this grant is measured not in equipment alone, but in outcomes during the moments that matter most: a functioning kit and a trained bystander are often the difference between life and death in

the first minutes following a traumatic bleeding injury, before EMS can arrive on scene. This project ensures that difference remains available to every student, staff member, and community member who walks through the doors of a Menomonie-area school.

Anticipated Challenges*

Describe any anticipated challenges and how you will meet them.

The primary anticipated challenge with this specific project is securing sufficient funding to acquire and deploy trauma supplies at the scale needed to make a meaningful impact. Beyond funding, we anticipate a few operational challenges.

Kit placement and public awareness present an ongoing challenge — having kits available doesn't mean much if bystanders don't know where they are or how to access them in an emergency. We will address this through clear signage, social media posts, and close coordination with building and facility managers to ensure kits remain installed in visible, high-traffic areas. Presently the kits and supplies are mounted next to every AED and are also located in each school nurse's office.

Training uptake and retention is another consideration. Distributing kits without ensuring the community can confidently use them under stress limits their real-world impact. We will continue to tie Stop the Bleed kits to ongoing training sessions both with the student body and staff. Additionally, we will continue offering the training to community groups and civic organizations within the area, ensuring the general public also receives instruction.

Maintenance and inventory tracking will also require sustained attention, as kits in public locations are subject to tampering, theft, or missing components over time. We will communicate with all of the schools to verify kit integrity and replace any used, missing, or expired supplies.

Sustainability*

Please describe how you will fund and continue to sustain these activities beyond the grant period.

This grant provides an estimated 5 years of supply coverage before replacement funding is needed. To sustain the program beyond that window, we plan to partner with Menomonie High School, engaging student groups such as Student Council and HOSA (Future Health Professionals) to develop and lead annual fundraisers supporting kit replacement and restocking. This approach keeps students and staff actively connected to the training and supplies, building a sense of ownership over the program rather than treating it as a one-time donation. We will supplement student-led fundraising with local business sponsorships similar to what I did in the first year of the program, ensuring continuity even in years where fundraising falls short. Stop the Bleed training will continue to be offered to students twice annually, reinforcing skills and sustaining interest in the program year over year.

Staff - Project Summary*

This grant would fund the replacement of expiring hemostatic gauze across all 27 kits currently in service across SDMA schools, St. Paul's, and St. Joseph's, extending the operational life of this program for another five years and ensuring it remains fully functional and ready when it matters most.

Grant Project Budget

Anticipated Project Income*

Please list out all anticipated sources of income for this specific grant project with amounts and whether the funding is approved or pending.

Ex: Dunn Energy Cooperative: \$1,000 - Approved

Community Foundation Grant: \$2200 - Pending

NOTE: 100% of the requested funds will be allocated to school-based trauma supplies, with no portion directed to Menomonie Fire Department operations, equipment, or overhead.

Total Project Expenses*

What are the total expenses for this particular grant project? This may be more than your grant request amount and helps us to understand if the Foundation is funding a portion of the project or the full cost of the project.

\$2,200.00

Project Expenses Description*

Please itemize the expenses for this grant project, including a short description of each item and the anticipated cost. (Personnel, Materials and Supplies, etc.) If this grant is to cover a portion of the project, please list all expenses of the project and then specify which expenses you anticipate being supported by this CFDC grant.

Quantity: 100

Item: Bleeding Control Dressing - "Quiklot Brand" (Z-Fold) 3" x 4 yards

Price: \$21.98

Total: \$2,198

Notes: These compressed bandages are vital components of Stop the Bleed kits as they have a chemical within the gauze that speeds up the body's ability to form a clot. They can be placed into and over the top of wounds in conjunction with other items in the kit to effectively slow or stop bleeding. In some cases, more than one bandage may be required depending on the severity of the injury. This is the reason that 100 are being ordered, so that each kit has 2 and so that the mass casualty bags (located in the nurse's offices) also have spares.

Project Budget Upload

(Optional) You may upload a separate file of your own, representing this grant request's Project Budget. For help creating the document, you can [click here](#) to download our Grant Project Budget template.

Letter of Support

(Optional) Letters of Support are optional, unless another organization or individual is integral to the purchase or use of the program and/or is a fiscal sponsor. Then it is required.

Additional Supporting Documents

(Optional) You may upload additional supporting documents to your request. If this grant request is to purchase a specific item or equipment, please upload a financial quote or spec sheet about the item here.

Q17563.pdf

Additional Supporting Documents

(Optional) You may upload additional supporting documents to your request. If this grant request is to purchase a specific item or equipment, please upload a financial quote or spec sheet about the item here.

Staff - Project Budget Summary*

Brief sentence about how the grant budget is broken down by item.

Quantity: 100

Item: Bleeding Control Dressing - "Quiklot Brand" (Z-Fold) 3" x 4 yards

Price: \$21.98

entire grant amount goes towards to bleeding supplies.

Required Organization Financials

Current Board of Directors*

Please upload a list of your organization's current Board of Directors.

Board Of Directors.docx

Organizational Budget*

Please upload your organization's most recent Operating Budget with projected revenues and expenses.

20260728142556827.pdf

Audited Financials

Please upload a copy of your organization's current Audited Financial Statement, if you are required to file.

Audit Opt-Out

Under Wis. Stat. § 202.12 | a charitable organization with annual contributions over \$500,000 must file an audited financial statement and include the opinion of an independent CPA. A charitable organization with annual contributions less than \$500,000 and over \$300,000 must file a financial statement reviewed by an independent CPA. If you do not upload an audit or financial statement, please verify that your organization is not required to

based on this state statute.

Our organization is not required to file an audited financial statement

Proof of 990 Filing*

Please upload proof of current IRS 990 Filing. You may upload the first page only; the full 990 document is not required.

W9 City of Menomonie-Signed.pdf

Authorization

Applicant Agreement*

As the applicant submitting this request on behalf of the organization, you certify that:

- The information provided in this application is complete and accurate to the best of your knowledge.
- Falsification of information will result in termination of any award granted.
- You have discussed this project and grant request with the necessary authorized representatives at your organization. They support this request and the proposed allocation of funding.

If awarded a grant, the organization will:

- Carry out the activities and expend grant funds as described in the proposal, to the best of their ability.
- Submit significant changes in the scope or budget of the project to the Foundation for approval.
- Complete and submit written reports as required no later than 12 months from the date the grant is awarded.
- Acknowledge the role of the Community Foundation of Dunn County in supporting the organization in communications with their board and the public.
- Provide copies of all publicity, press releases or promotional materials. If available, provide photos in digital format.

I agree

File Attachment Summary

Applicant File Uploads

- Q17563.pdf
- Board Of Directors.docx
- 20260728142556827.pdf
- W9 City of Menomonie-Signed.pdf

**NORTH AMERICAN RESCUE®**

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QUOTE**Q17563**

Quote Date: 07/24/2026

35 Tedwall Court Greer SC 29650
Phone: (864) 675-9800
Fax: (864) 675-9880

QUOTE

BILL TO: 50295

Menomonie Fire Dept
2417 WILSON ST
MENOMONIE, WI 54751

SHIP TO:**PO #:** POLIAK72426

Menomonie Fire Dept
2417 WILSON ST
MENOMONIE, WI 54751
P: (715) 232-2414

Entered By: Victoria Marquez vmarquez@narescue.com

Date/Time Printed: 07/24/26 17:46

Contact Name	Contact Phone	Contact Email		
Matt Poliak	(715) 232-2414	mpoliak@menomonie-wi.gov		
Shipping Method	FOB Type	Payment Terms	Master #	Exp. Date
970-BESTWAY	ORIGIN	CREDIT CARD	1041217	08/23/2026

Quantity	UOM	Item Number	Item Description	Item Weight	Ext. Weight	Unit Price	Extended Price
100	EA	30-0161	DRESSING, BLEEDING CONTROL - QUIKCLOT (Z-FOLD) 3" x 4yd	0.05	5.00	\$21.98	\$2,198.00

Payment Remittance:		Subtotal	\$2,198.00
North American Rescue, LLC PO Box 360320 Pittsburgh, PA 15251-6320 Account #: 9089953 SWIFT #: IRVTUS3N	North American Rescue, LLC Routing #: 043000261	Discount	\$0.00
		Freight	\$22.00
		Tax	\$109.90
		Total	\$2,329.90

Subject to NAR's Terms & Conditions. For details, please visit: <https://www.narescue.com/legal/terms-and-conditions>.

The ARMOR product is controlled by the Export Administration Regulations (EAR). It may not be exported, sold, transferred, transported, or shipped outside of the U.S., either in its original form or after being incorporated into other items, without first obtaining approval from the U.S. government or as authorized by U.S. law and regulations.

The sale or export, whether directly or indirectly, to the Russian Federation or Belarus, or for use by either, is strictly prohibited.

The Menomonie Fire Department does not have a Board of Directors. The Fire Department is overseen by Fire Chief Dennis Klass, who can be reached via the following:

(715) 232-2414

dklass@menomonie-wi.gov

2417 Wilson St, Menomonie WI 54751

2026 Budget

Account No	Title	Budget
01.11111	GENERAL CITY INVESTMENTS(A)	\$ -
()3912	OTHER ACCTS. REC. - FIRE(A)	\$ -
01.42230	FIRE INS. TAX FROM STATE(R)	\$ (85,000.00)
01.42529	STATE AID/FIREFIGHTER TRAIN(R)	\$ (10,000.00)
01.42625	STATE AID/MEDICAL TRANSPORT(R)	\$ (65,000.00)
01.42892	HAZARDOUS MATERIALS GRANT(R)	\$ (19,000.00)
01.44219	FIRE DEPT DONATIONS/GRANTS(R)	\$ -
01.44220	FIRE DEPARTMENT FEES(R)	\$ (4,100.00)
01.44221	RURAL FIRE DEPARTMENT FEES(R)	\$ (576,000.00)
01.44230	AMBULANCE(R)	\$ (1,650,300.00)
01.44240	AMBULANCE STANDBY RACE TRACK(R)	\$ (6,100.00)
01.51940.231	PROPERTY & LIABILITY INS.(E)	\$ 241,920.00
01.52310.111	SALARIES(E)	\$ 2,745,699.00
01.52310.112	OVERTIME(E)	\$ 125,000.00
01.52310.114	FLSA PAYMENTS(E)	\$ 30,000.00
01.52310.115	EMS PERFORMANCE PAYMENTS(E)	\$ -
01.52310.117	SUBSTITUTE(E)	\$ 230,000.00
01.52310.118	ALERT STATUS(E)	\$ -
01.52310.121	WAGES - FULL TIME(E)	\$ -
01.52310.122	OVERTIME - FULL TIME(E)	\$ -
01.52310.125	WAGES - PART TIME/SEASONAL(E)	\$ 16,000.00
01.52310.136	RETIREMENT SEVERANCE(E)	\$ -
01.52310.211	RECRUIT & PROMOTIONAL EXAMS(E)	\$ 2,000.00
01.52310.216	LAUNDRY/CARPET/CLNG. SERVICE(E)	\$ -
01.52310.221	WATER & SEWER(E)	\$ 4,600.00
01.52310.222	ELECTRICITY(E)	\$ 24,000.00
01.52310.224	GAS/HEATING FUEL(E)	\$ 17,000.00
01.52310.225	TELEPHONE(E)	\$ 19,000.00
01.52310.226	CONTRACTUAL REPAIRS/SERVICES(E)	\$ -
01.52310.241	VEH REPAIR/MAINT/SUPPLY-VNDR(E)	\$ 40,000.00
01.52310.242	RADIO MAINTENANCE CONTRACT(E)	\$ 3,000.00
01.52310.243	OFFICE EQUIP. MAINT CONTRACT(E)	\$ 2,500.00
01.52310.248	OTHER DEPT. LABOR/EQUIPMENT(E)	\$ -
01.52310.249	COMPUTER PROGRAM(E)	\$ 34,015.03
01.52310.268	MEDICAL DIRECTOR(E)	\$ 5,500.00
01.52310.278	AMBULANCE SERV. BILLING(E)	\$ 75,000.00
01.52310.297	GARBAGE SERVICE/LANDFILL FEE(E)	\$ 2,200.00
01.52310.320	GRANT EXPENSES(E)	\$ -
01.52310.410	OFFICE SUPPLIES(E)	\$ 4,100.00
01.52310.411	POSTAGE(E)	\$ -
01.52310.412	CUSTOM OFFICE SUPPLIES(E)	\$ -
01.52310.413	COPIES(E)	\$ -
01.52310.414	MACHINE MAINT./REPAIR(E)	\$ -

01.52310.419	PHOTOGRAPHY SUPPLIES(E)	\$	-
01.52310.422	SUBSCRIPTIONS(E)	\$	250.00
01.52310.423	CODES & MANUALS(E)	\$	1,725.00
01.52310.424	DUES(E)	\$	1,600.00
01.52310.426	ADVERTISING(E)	\$	-
01.52310.430	KITCHEN/LINEN SUPPLIES(E)	\$	-
01.52310.432	VEHICLE ALLOWANCE/MILEAGE(E)	\$	1,000.00
01.52310.433	CELL PHONE ALLOWANCE(E)	\$	480.00
01.52310.439	SCHOOLS & CONFERENCES(E)	\$	15,000.00
01.52310.440	CHIEF CLOTHING ALLOWANCE(E)	\$	300.00
01.52310.442	FIRST AID SUPPLIES(E)	\$	87,000.00
01.52310.446	UNIFORMS/ACC/PROTECTIVE WEAR(E)	\$	30,000.00
01.52310.448	TRAINING MATERIALS(E)	\$	1,500.00
01.52310.449	FIRE PREVENTION MATERIAL(E)	\$	750.00
01.52310.451	VEHICLE FUEL(E)	\$	30,000.00
01.52310.452	VEH REPAIR/MAINT/SUPPLY-MFD(E)	\$	7,000.00
01.52310.453	PARTS & TOOLS SUPPLIES(E)	\$	-
01.52310.454	BUILDING SUPPLIES/MAINT.(E)	\$	25,150.00
01.52310.461	FOAM(E)	\$	750.00
01.52310.463	REGULATORY SIGNS/FORMS/EXP.(E)	\$	-
01.52310.476	MATERIALS/SUPPLIES(E)	\$	-
01.52310.490	MISC SUPPLIES & EXPENSES(E)	\$	1,000.00
01.52310.706	CHAIRS(E)	\$	-
01.52310.709	MATTRESSES(E)	\$	-
01.52310.710	CASSETTES/TAPES/DICTATING EQ(E)	\$	-
01.52310.712	TYPEWRITERS(E)	\$	-
01.52310.714	COMPUTER EQUIPMENT(E)	\$	7,000.00
01.52310.715	PHONE SYSTEM(E)	\$	-
01.52310.716	THERMAL IMAGING CAMERA(E)	\$	-
01.52310.719	COPY MACHINE(E)	\$	-
01.52310.723	PROTECTIVE GEAR(E)	\$	19,000.00
01.52310.724	HAZARDOUS MATERIALS EQUIP.(E)	\$	13,000.00
01.52310.729	LADDERS/ASSEMBLIES(E)	\$	-
01.52310.730	VEHICLES/RADIOS/CHANGE OVER(E)	\$	-
01.52310.740	REFRIGERATOR/FREEZER/STOVE(E)	\$	-
01.52310.752	SAWS(E)	\$	-
01.52310.754	FIRST AID EQUIPMENT(E)	\$	-
01.52310.755	PAGERS(E)	\$	-
01.52310.759	RADIO ANTENNA(E)	\$	-
01.52310.765	HOSE(E)	\$	2,000.00
01.52310.767	RADIOS/PAGER SYSTEM(E)	\$	10,165.20
	Total	\$	3,634,284.23

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) CITY OF MENOMONIE	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate ☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. ☒ Other (see instructions) MUNICIPALITY	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions. ☐	
	5 Address (number, street, and apt. or suite no.). See instructions. 800 WILSON AVENUE	Requester's name and address (optional)
6 City, state, and ZIP code MENOMONIE, WISCONSIN 54751		
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

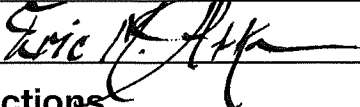
Social security number								
			-					
or								
Employer identification number								
3	9	-	6	0	0	5	5	2 8

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person 	Date July 21, 2025
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they