SOS APA Form 001

Mississippi Secretary of State
125 S. Congress Street, Jackson, MS 39201

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME	CONTACT PERSON	TELEPHONE NUMBER	
Mississippi Development Authority	C. Patrick Roberts	(601) 359-2850	
ADDRESS	CITY	STATE	ZIP
P.O. Box 849	Jackson	MS	39205
EMAIL	SUBMIT DATE	Name or number of rule(s): Title 6: Economic Development, Part 2: Community Foundations COVID-19 Grant Program, Part 2 Chapter 1: Community Foundations COVID-19 Grant Program Rules and Regulations	
proberts@mississippi.org	April 8, 2021		

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: Program is designed for the purpose of reimbursing eligible non-profits, food pantries, and childcare centers of eligible COVID-19 related expenses.
Specific legal authority authorizing the promulgation of rule: Senate Bill 3063, 2020 Regular Legislative Session; Senate Bill 2221, 2021 Regular Legislative Session; Miss. Code Ann. §§ 25-43-3.108 and 25-43-1.104 (Rev. 2006).

List all rules repealed, amended, or suspended by the proposed rule: none

ORAL PROCEEDING:

☐ An oral proceeding is scheduled for this rule on Date: _____ Time: _____ Place: _____

☒ Presently, an oral proceeding is not scheduled on this rule.

If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

ECONOMIC IMPACT STATEMENT:

☒ Economic impact statement not required for this rule. ☐ Concise summary of economic impact statement attached.

TEMPORARY RULES

_____ Original filing
_____ Renewal of effectiveness
To be in effect in _____ days
Effective date:
_____ Immediately upon filing
_____ Other (specify): _____

PROPOSED ACTION ON RULES

Action proposed:
__x__ New rule(s)
_____ Amendment to existing rule(s)
_____ Repeal of existing rule(s)
_____ Adoption by reference
Proposed final effective date:
__x__ 30 days after filing
_____ Other (specify): _____

FINAL ACTION ON RULES

Date Proposed Rule Filed: _____
Action taken:
_____ Adopted with no changes in text
_____ Adopted with changes
_____ Adopted by reference
_____ Withdrawn
_____ Repeal adopted as proposed
Effective date:
_____ 30 days after filing
_____ Other (specify):

Printed name and Title of person authorized to file rules: C. Patrick Roberts, Special Assistance Attorney General
Signature of person authorized to file rules: Patrick Roberts

OFFICIAL FILING STAMP

Accepted for filing by

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FILED
APR 08 2021
MISSISSIPPI
SECRETARY OF STATE

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The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.