

CITY OF DOVER

DOVER PLANNING BOARD – AGENDA

Meeting Type: Special Meeting
Meeting Location: McConnell Center Room 306, 61 Locust St. Dover, NH 03820
Meeting Date: **Tuesday, January 10, 2017**
Meeting Time: **7:30 pm**

1. ELECTION OF OFFICERS

2. CITIZENS' FORUM

3. APPROVAL OF THE PRIOR MINUTES

- December 13, 2016 Regular Meeting Minutes

4. OLD BUSINESS

5. NEW BUSINESS

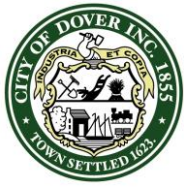
- A. Consideration and acceptance of a Minor Subdivision for Varney Brook Lands, LLC, Assessor's Map K, Lot 19-5, zoned ETP, located at Pointe Place. (One new lot). *(P16-34)
- B. Public Hearing on the CDBG Action Plan for FFY17. All persons wishing to speak on the proposed Action Plan and use of funds are urged to attend.
- C. Discussion of Land Use Amendments/Goal Setting

6. STAFF COMMENTS

7. MEMBER COMMENTS

8. ADJOURNMENT

*Indicates that if the application is accepted for discussion, the public hearing will be held the same evening. Note that some hearings will be continued from one meeting to another and some may be postponed. Since this is only a partial description of the proposal and may change, persons with questions or wishing to see the plans are invited to visit the Planning Office, Monday through Thursday from 8:30 am to 5:30 pm and Friday 8:30 am to 4:00 pm or email Dover-Planning@dover.nh.gov. You may also view materials at www.dover.nh.gov. Follow us on Twitter @DoverNHPlanning and find us on Facebook at <https://www.facebook.com/DoverNHPlanning>.



CITY OF DOVER

DOVER PLANNING BOARD – MINUTES

Meeting Type: Regular Meeting
Meeting Location: Council Chambers – City Hall, 288 Central Avenue
Meeting Date: **Tuesday, December 13, 2016**
Meeting Time: **7:00 pm**

Members Present: Frank Torr (Chair), Kirt Schuman (Vice Chair), Dennis Ciotti (Councilor), Tom Clark, Dave White, Gina Cruikshank, David Landry, Lee Skinner, Catherine Plante, James Burdin (Alternate), Hayley Harmon (Alternate), Tristan Donovan (Alternate)

Members Not Present:

Staff Present: Christopher Parker (Assistant City Manager), Dave Carpenter (Community Development Planner), Tracy Smith (Recording Secretary)

The Chair called the meeting to order at 7:00 p.m. He welcomed Hayley Harmon as an Alternate Planning Board member.

The Chair recognized L.Skinner to sit in for K.Schuman.

C.Parker provided an overview of the rezoning project, and explained the Planning Board process. He explained the public process for the Citizen's forum, and that this meeting was to hear the details about the project. He recommended a public hearing to obtain feedback, and clarified there would be no public hearing tonight for item 4.B, but on January 24, 2017 if the Board voted accordingly.

F.Torr explained the purpose of the Citizens forum was to hear the public speak on an item not listed on the agenda.

1. CITIZENS' FORUM

Citizens Forum Open.

Michael Graves, 17 Wallace Drive, spoke against the rezoning project and stated his concern as listed in the Staff Memo Z13-10 distributed to the Board members (original in file).

Norman Allie, 66 Stocklan Circle, spoke against the project and stated an economic concern to consider what would happen to the development if it goes out of business.

K.Schuman arrived at 7:06 p.m.

Ann Wilson, 15 Sandra's Run, spoke against the project and stated her concern regarding noise pollution and no longer being able to enjoy the outdoors in the evening.

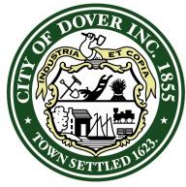
Weston Jost, 37 Wallace Drive, spoke against the project and stated his concerns regarding traffic issues, noise pollution, wildlife, and the loss of the feel of community and disregard for residential development.

James Wolcott, 171 Columbus Avenue, remains open to the project and stated his traffic concern.

Ryan Antonioli, 174 Columbus Avenue, spoke against the project and his agreement with his neighbors.

Mark Woolley, 24 Evergreen Valley Drive, spoke in favor of project in order to increase the City's tax revenue.

Robert Dinaburg, 54 Augusta Way, addressed item 4.A on the agenda, requested the reason for the application, and stated his traffic concerns.



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Stacy Anglace, 23 Wallace Drive, spoke against the project and stated her concerns regarding the loss of the quality of life, effect to her property values, traffic issues, wildlife concerns, and light pollution. She addressed the previously failed rezoning attempt.

Vincent Kasabian, 76 Columbus Avenue, spoke against the project and his agreement with his neighbors. He stated his concern with changing the zone from residential to industrial and how the rezoning project creates a different feel to the location from the area that the residents originally purchased their home.

Francine Ndayisaba, 2 Melody Terrace, spoke against the project and her agreement with her neighbors.

Nathan Riggs, 53 Littleworth Road, spoke against the project and stated his concerns regarding the development of roads next to his home and the effect to his property value. He stated further concerns regarding noise pollution and the effect to their quality of life.

Ted Anglace, 23 Wallace Drive, spoke against the project and distributed a 2015 Master Plan map to the Board members (original in file). He addressed the previous rezoning attempts that failed (referred to February 10, 1999 and January 15, 2003 Meeting Minutes) and the new homes that were built in place of commercial. He addressed the map and stated the project does not fit the master plan. He requested the handouts get posted with the Meeting Minutes.

David Burke, 14 Stocklan Circle, spoke against the project and requested numbers to show a positive impact with the development.

Mike Brimmer, 23 Stocklan Circle, spoke against the project and requested information due to the fact that he's new to the neighborhood.

Michael Brown, 1 Melody Terrace, spoke against the project and stated his concern with the impact the development would bring to the view of his home and the quality of life.

David Scott, 220 Back Road, spoke against the project and asked if the Board members' allegiance is with the homeowners or developers.

Citizens Forum Closed.

2. APPROVAL OF THE PRIOR MINUTES

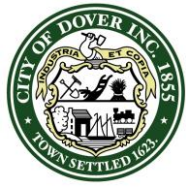
- November 15, 2016 Special Meeting Minutes

Motion: K.Schuman made a motion to approve the November 15, 2016 Special Meeting Minutes. Seconded by G.Cruikshank. Vote U/A

3. OLD BUSINESS

- A. Consideration and possible vote on an amendment to the conditions for a previously approved Site Plan (4/26/16) for Summit Land Development (Owner: Varney Brook Lands, LLC), Map K, Lot 19-5, zoned ETP (RCM Overlay), located at Pointe Place. (Amended condition to change collection date of impact fees to be paid prior to issuance of a certificate of occupancy). (P16-05B)

C.Parker gave an overview of the application.



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Chad Kageleiry, agent for Summit Land Development and Varney Brook Lands, LLC, presented the application and requested the impact fee be applied when the building is occupied.

Discussion ensued regarding changes under the amendment for P16-05A, and the proposed timeline for the project.

Motion: K.Schuman made a motion to approve the amendment subject to staff recommended conditions. Seconded by D.Ciotti. Vote: U/A

C.Parker clarified for C.Plante the construction status of the two buildings, that there is no impact to the community until the residents move in, and the building cannot be used without a Certificate of Occupancy.

4. NEW BUSINESS

- A. Consideration and acceptance of a Minor Lot Line Adjustment for Varney Brook Lands, LLC and the City of Dover, Assessor's Map K, Lots 19 & 18A-10, zoned ETP and R-12, located at Pointe Place and Applevale Drive. (*P16-35)

C.Parker gave an overview of the application.

Kevin McEneaney, McEneaney Survey Associates, Inc, represented the applicant, displayed plans for viewing, and presented the proposed plan.

Motion: K.Schuman made a motion to accept the application. Seconded by L.Skinner. Vote U/A

Public hearing opened.

Gary Schintzius, 16 Applevale Drive, requested information regarding the park due to the change in the property line.

C.Parker explained the proposed project and addressed it on the plan that was displayed for the public. He stated the access would be off Pointe Place and not Applevale Drive and that improvements would be made to the playground.

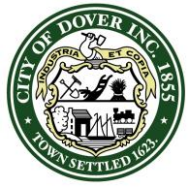
Public Hearing Closed.

STAFF RECOMMENDATION:

The Planning Department recommends that the Planning Board approve the lot line adjustment plat with the following conditions:

Conditions to Be Met Prior to Signing of Plans:

1. The applicant shall provide the Planning Department with a digital version of the final plat.
2. The applicant shall revise the plat to:
 - a. Include the Planning File number P16-35 to the title block
 - b. Indicate building setback lines
 - c. Add surveyor's stamp and signature to the final plat
 - d. Add the owner's signatures to the final plat submitted for signature.



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C.Parker clarified for K.Schuman when the ballfield would be ready to use, the location of the parking, and the concept plan.

Motion: K.Schuman made a motion to approve the Lot Line Adjustment subject to the staff recommended conditions. Seconded by D.Ciotti. Vote U/A

- B. Discussion and possible vote for posting on a Citizen's Petition for a Zoning Amendment for USA Training Centers and Richard & Anna Kay, Assessor's Map G, Lots 19-B, 29, 29-A, 29-B, 29-C, 30-B, located off Littleworth Road, Tolend Road & Columbus Avenue (Rezone 106.45 acres from Assembly and Office (I-4) and Low Density Residential (R-20) to Rural Restricted Industrial District (I-2). (*P16-36)

C.Parker explained the rezoning application process as it pertains to decision options for the Planning Board and the public hearing process. He clarified for K.Schuman the purpose of this meeting to hear the proposed project, and the process if the Board chooses to adopt the petition, the City Council options, and the property owner's rights regarding a protest petition.

F.X. Bruton, Bruton & Berube, represented the applicants, displayed plans for viewing, and presented the proposed project. David Hoyt, USA Training Center and Robert Stowell, Tritech Engineering, were also present. He stated the developer had an informational meeting with the abutters to hear their concerns and to incorporate those concerns into the project.

Discussion ensued regarding the map distributed to the Board members, clarification that the applicant can nominate areas for rezoning and that one nominated property owner was opposed to the rezoning project, clarification of the process to rezone properties as it pertains to the regulations and City Council, the location of the ballfield on the plan, clarification of the lack of the detail on the conceptual plan for the public and that the applicant would not present a full design at this time in case the project were not approved.

L.Skinner addressed the plan displayed for viewing by F.X.Bruton, and that he did not receive that copy.

The Chair announced a recess at 8:36 p.m. in order to print additional copies of the map for the Board members.

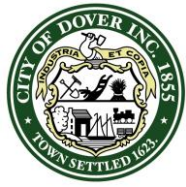
The meeting reconvened at 8:53 p.m.

Copies of the map (original in file) were distributed to the Board members and public.

F.X.Bruton further explained the proposed plan as it was presented in the application.

Discussion ensued regarding clarification of the inclusion of lot B-30 to the rezoning project, the business model and seasonal schedule of the training camp and the traffic impact, and the objective to address traffic issues with this project that would pertain to traffic calming and Department of Transportation review where the opportunity would not be available for a project in the R-20 District.

Discussion continued regarding the noise issues and traffic layout before and after a game at the current facility in Portsmouth, and the need to obtain additional information and have a public hearing to see if the project can work.



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G.Cruikshank addressed the abutter comment by D.Scott regarding Planning Board loyalty and clarified their loyalty is with the City of Dover and the requirement to look at each project based on its own merit.

Motion: K.Schuman made a motion to post the amendment to the January 24, 2017 meeting and a public hearing will be held that evening. Seconded by D.Ciotti. Vote 8/1 Passed

C.Parker confirmed the following:

- for C.Plante that the petitioner pays for the abutter notice.
- the abutter notice process, public hearing and the rights to speak for D.Landry. He explained the 100 ft. parameter used for these notices, and stated any citizen that lives outside this parameter and wants a notice (ie. Lucy Lane and Stocklan Circle) can email him.
- the meeting on January 24, 2017 will have new conceptual plans, and the abutter notice will be sent 12 days prior to the meeting to make it available to the public.
- for T.Clark the City is not opposed to the City owned land being part of the rezoning project, and that he would reach out to the other nominated property owners to get their response to include in the planning packets for the meeting on January 24, 2017.
- for K.Schuman the staff level analysis on January 24, 2017 regarding the yield plan, wetland, and traffic analysis as it pertains to this project or 100 home residents.
- would look to limit applications for the meeting on January 24, 2017, and emails received in advance would be distributed to the Planning Board members in advance for review.

The Chair announced a recess at 9:45 pm.

The meeting reconvened at 9:50 p.m.

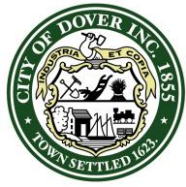
- C. Consideration and acceptance of an Extension Request for a previously approved Open Space Subdivision for Patricia Seaford (Owners: John & Caroline McGlone), Assessor's Map I, Lot 124, zoned R-40, located at 25 Piscataqua Road. Subdivision originally approved January 19, 2012. (*P09-16B)

C.Parker gave an overview of the application.

Patricia Seaford presented the proposed plan, and stated they are in a position to move forward with the project. Caroline McGlone was also present.

P.Seaford answered Board member questions that they are putting the property on the market, they have a realtor with potential buyers/developers, and there would be no problems regarding compliance with the requirements.

D.Ciotti stated his concern regarding approving a project that is not updated to the current regulations.



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C.Parker clarified the developer would have to come back and a Planning Technical Review Committee would be needed to confirm compliance. He stated advice was given to the applicant regarding obtaining the original engineer to address the storm water management regulations, and that any variations would have to come back before the Planning Board.

Discussion ensued regarding the modifications needed to the plan, requirements and options available for the new owner, and that the options were provided to the applicant to avoid the need for another extension one year from now.

Discussion continued regarding the reason gravel was opted for the drive, that the applicant has one year to comply with the conditions, and the applicant would have to return to the Planning Board if a waiver was requested.

Motion: K.Schuman made a motion to accept the application. Seconded by D.Ciotti. Vote U/A

Public hearing opened. Nobody spoke. Public hearing closed.

STAFF RECOMMENDATION:

The Planning Department recommends that the Planning Board re-approve the application with the following conditions:

Conditions to Be Met Prior to the Signing of the Plans:

1. The owner's signature shall be added to the final plan set submitted for signature.
2. The applicant shall provide the Planning Department with a digital version of the final plan.
3. The applicant shall revise the previously amended plan to conform to current land use regulations, including setbacks and road way requirements.

Conditions to Be Met Prior to the Issuance of a Building Permit:

4. Any new dwelling shall pay the impact fees at the time of the building permit application.
5. The applicant shall submit the Strafford County Registry of Deeds recording number, book and page to the Planning Department.

C.Parker stated the time frame as it pertains to the regulations for condition #3 for D.Ciotti.

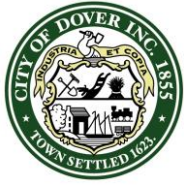
Motion: K.Schuman made a motion to approve the Extension Request subject to staff recommended conditions. Seconded by G.Cruikshank. Vote 8/1 Passed

D. Overview of upcoming FY 18 CDBG application review process.

C.Parker stated there would be changes in the application process which would be addressed at the meeting on January 10, 2017.

D.Carpenter provided the timeline and a brief overview regarding the changes in the application categories, and stated that the Board is to expect to receive the binders containing the new applications for the January 10, 2017 Workshop meeting.

Discussion ensued regarding the loan review program, the fund source based on prior year income for future applicants, and the need to engage those who are not being timely with the funds.



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5. STAFF COMMENTS

C.Parker provided an update regarding the project on Third Street. He stated that the Robbins project expired and was not completed, and to expect upcoming projects for Central Avenue and Third and Grove Street.

He addressed T.McManus concerns from the previous meeting, and stated he reached out to him to discuss the difference between the Gateway and Downtown Gateway districts, adding he would like to recommend changing the names.

He reminded the Board members of the Land Use Meet & Greet on January 10, 2017 which will include a Stewardship of Resources Master Plan presentation and a public hearing for the CDBG applications.

6. MEMBER COMMENTS

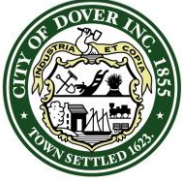
Discussion ensued regarding comments of mixed used projects pertaining to Third Street, Pointe Place and Chinburg at the Mill, and the need to review the regulations regarding Open Space Subdivisions.

The Board members welcomed H.Harmon.

F.Torr thanked the Board for the opportunity to serve as Chair. He stated he will not seek out a second term.

7. ADJOURNMENT

Motion: K.Schuman made a motion to adjourn at 10:38 p.m. Seconded by L.Skinner. Vote U/A



CITY OF DOVER

PLANNING BOARD - STAFF MEMO FILE #P16-34

Application Type: Minor Subdivision
Applicant: Varney Brook Lands, LLC
Owner: Varney Brook Lands, LLC
Location: Pointe Place (Tax Map K, Lot 19-5)
Meeting Date: January 10, 2017

INTENT: To subdivide an existing lot on Pointe Place into two lots. The new lots sizes would be 65,507 s.f. (1.5 acres) and 160,942 s.f. (3.69 acres). The applicant received a variance to permit a lot size of 1.5 acres where a minimum of 3 acres is required.

LOTS/UNITS PROPOSED: One new lot

AGENDA ITEM #: 5-A

ACRES: 1.5 acres and 3.7 acres if approved

ZONING DISTRICT: ETP/RCM Overlay

EXISTING LAND USE: Vacant

SURROUNDING LAND USE: Single family dwellings, commercial and mixed uses approved

PROPOSED LAND USE: Multifamily residential on proposed lot is approved; existing lot also includes approved mixed use buildings.

ZBA ACTION:

Z16-20: One variance was granted on December 15, 2016 to allow a 1.5 acre lot size where a minimum of 3 acres is required.

ATTACHMENTS: Subdivision plan and application

APPLICATION IS COMPLETE: Yes

NOTICES SENT: Abutter notices were sent by certified mail to all abutters

PERMITS REQUIRED: None

WAIVERS REQUESTED: None

Summary of Request and Background

The applicant has submitted a plan for a minor subdivision to subdivide one lot into two. The units would be serviced by municipal water and sewer.

The applicant received a variance on December 15, 2016 as described in the left column.

Consistency with Land Use Regulations

Chapter 155-15 of the Land Subdivision Regulations of the City Code provides for subdivisions of existing lots.

STAFF RECOMMENDATION:

The Planning Department recommends that the Planning Board accept the application, open the public hearing, and approve the minor subdivision with the following conditions:

Conditions to Be Met Prior to Signing of Plans:

1. The owner's signatures shall be added to the final plat submitted for signature to be recorded at the Strafford County Registry of Deeds.
2. The Licensed Land Surveyor stamp and sign final plans.
3. The applicant shall provide the Planning Department with a digital version of the final plat.
4. The applicant shall revise the plat to:
 - a. Add the planning file number (P16-34)
 - b. Add a note that the lot numbers shall be assigned by the Assessing Office and addressing to be assigned by the Fire Department
 - c. Indicate the water and sewer connection
 - d. Indicate Zoning District Boundaries
 - e. Indicate setbacks on both lots
 - f. Provide a second sheet with topographical information

Conditions to Be Met Prior to Issuance of a Building Permit:

5. Any new building shall pay the current impact fees in place at the time of building permit application.
6. Any new building shall be assessed the current water/sewer investment fees in place at the time of application for water/sewer service and pay the fees before water/sewer services are established.

Pointe Place

**Property Information**

Property ID K0019-005000
Location THORNWOOD LN
Owner VARNEY BROOK LANDS LLC



**MAP FOR REFERENCE ONLY
NOT A LEGAL DOCUMENT**

City of Dover, NH makes no claims and no warranties, expressed or implied, concerning the validity or accuracy of the GIS data presented on this map.

Parcels updated 11/15/2016
Properties updated 12/07/2016



City of Dover, New Hampshire SUBDIVISION APPLICATION

RECEIVED
Planning Office
[Revision Date: April 23, 2013]

Office Use Only

Project #:

P16-34

Date Received:

NOV 22 2016

Amount Paid:

Time Received:

Dover, New Hampshire

APPLICANT AND OWNER INFORMATION

Name of Applicant: VARNEY BROOK LANDS, LLC Telephone # 603-749-2800

Address of Applicant: 340 CENTRAL AVE SUITE 202 DOVER NH 03820

Name of Property Owner (if different from applicant): SAME Telephone # _____

Address of Property Owner: _____

E-Mail Address: _____

PROPERTY INFORMATION

Address of Property: POINTE PLACE

Assessor's Map # K Lot(s) # 19-5

Zoning District(s) ETP Overlay District(s) RES/COM MIXED USE

Size of Parcel: 5.20 AC Property Deed: Book 3660 Page: 351

Existing Use of Property: VACANT

SUBDIVISION INFORMATION

Subdivision Type: Major (4 + net new lots): _____ Minor (3 or fewer lots): X Open Space: _____

Existing Number of Lots: 1 Proposed Number of Lots: 2

City Water? X Yes ___ No How far is city water from the property? ON SITE

City Sewer? X Yes ___ No How far is city sewer from the property? ON SITE

Highway Access (check where applicable): X City Street ___ State Highway

Estimated Length of Proposed Roads: 0 feet Public or Private Road? _____

WAIVER REQUESTS

Subdivision Regulations section(s) to be waived: _____

Justification for waiver request(s) (attach additional sheets as needed): _____

SURVEYOR INFORMATION

KEVIN MCENEANEY
Name of Surveyor and Company (Licensed in N.H.) MCENEANEY SURVEY ASSOC. INC
Address 24 CHESTNUT ST DOVER, NH 03820 Telephone #: 603-742-0911
Professional License #: 661 E-mail address: KEVIN@SURVEYNH.COM

ENGINEER INFORMATION

Name of Engineer and Company (Licensed in N.H.) N/A
Address _____ Telephone #: _____
Professional License #: _____ E-mail address: _____

SIGNATURES

I/We hereby submit this application to the City of Dover Planning Board and attest that to the best of my knowledge all of the information on this application form and in the accompanying application materials and documentation is true and accurate. As applicant or as agent, I attest that I am duly authorized to act in this capacity.

Signature of Property Owner: [Signature] Date: 11/21/16
Signature of Applicant (if different from owner): _____ Date: _____
Signature of Agent: _____ Date: _____

AUTHORIZATION TO ENTER SUBJECT PROPERTY

I, and my successors, hereby authorize members of the Dover Planning Board, Planning Department and other pertinent City Departments and boards to enter my property for the purpose of evaluating this application, including performing inspections during the application phase, post-approval phase, construction phase and occupancy phase. It is understood that these individuals must use all reasonable care, courtesy, and diligence when on the property.

Signature of Property Owner: [Signature] Date: 11/21/16

AUTHORIZATION TO COMPLETE THE PROJECT ON SUBJECT PROPERTY

I, and my successors, hereby authorize the City of Dover and its assigns to enter my property for the purpose of completing the site work as required by the approved plan should the letter or credit or other surety be called. It is understood that these individuals must use all reasonable care, courtesy, and diligence when on the property.

Signature of Property Owner: [Signature] Date: 11/21/16
Signature of Applicant (if different from owner): _____ Date: _____

CERTIFICATION OF FEES

I, and my successors, hereby certify that I understand that the City of Dover collects impact fees, utility investment fees and inspection fees for projects developed in Dover. Said fees must be paid before a Certificate of Occupancy can be obtained for a structure, unless a different payment schedule is agreed to by the applicant and the City prior to approvals being issued by the Dover Planning Board. Additionally, should the property be in "Current Use" it will be subject to the Land Use Change Tax.

Signature of Property Owner:  Date: 11/2/16

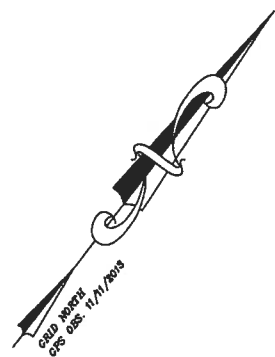
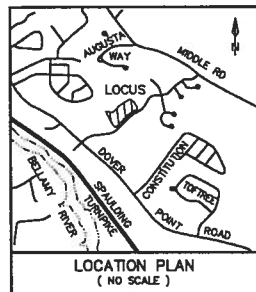
Signature of Applicant (*if different from owner*):  Date: _____

PLANNING BOARD APPLICATION CHECKLIST & FEE SCHEDULE

- A. If you are submitting an application for Site Review or a Major Subdivision the applicant shall meet with the Technical Review Committee (TRC). Eight (8) copies of the application and preliminary plan must be submitted. _____
- B. Prior to the submission deadline for Planning Board, fifteen (15) copies of the application and fifteen (15) sets of plans must be submitted. Four (4) 22" x 34" and eleven (11) 11" x 17" (signed by owner). ✓ _____
- C. TOTAL FEE paid by cash or check made payable to "City of Dover"
1. Application fee for the following:
- ☒ SUBDIVISION \$150.00 x # 1 new lots created = \$ 150.00
 - ☐ LOT LINE ADJUSTMENT \$200.00 (if more than two lots involved, add \$100.00 per lot) = \$ _____
 - ☐ SITE REVIEW - RESIDENTIAL \$100.00 x # _____ per dwelling unit = \$ _____
 - ☐ SITE REVIEW - NON-RESIDENTIAL (not to exceed \$10,000)
 - New construction \$.15 sq. ft. x # _____ sq. ft. = \$ _____
 - Additions (new floor space) \$.10 per sq. ft. x # _____ sq. ft. = \$ _____
 - ☐ IMPERVIOUS PAVED AREA (for new development) OR IMPERVIOUS PARKING LOT ADDITIONS (not to exceed \$10,000) \$.07 sq. ft. x # _____ = \$ _____
 - ☐ MOTEL/HOTEL \$35.00 x # _____ per lodging unit = \$ _____
 - ☐ CHANGE OF USE (not to exceed \$5,000)
 - Existing floor space \$.10 per sq. ft. x # _____ sq. ft. = \$ _____
 - ☐ CONDITIONAL USE PERMIT \$150.00 x # _____ per application = \$ _____
 - ☐ GRAVEL PIT/ EXTRACTION PERMIT
 - Application fee \$50.00 = \$ _____
 - Permit fee \$75.00 = \$ _____
 - ☐ EXTENSIONS OF/AMENDMENTS TO/WAIVERS FOR AN APPROVED PLAN (\$150.00 minimum) \$50.00 x # _____ per hour of review \$ _____
 - ☐ REQUEST FOR REZONING \$150.00 = \$ _____
 - ☐ DRIVEWAY WAIVER - \$100.00 application fee = \$ _____
 - Letter of rejection from Engineering Department, diagram & letter from owner \$ _____
- D. Mailing Labels (Avery 5160) in triplicate including owner, engineer, architect, land surveyor, or soil scientist whose professional seal appears on the plat with names and addresses for notices.
- 1. Certified letters fee: # of abutters 7 X \$8.00 = \$ 56.00
 - 2. Applicant & Owner, engineer, architect, land surveyor or soil scientist
Certified letters fee # 2 of x \$8.00 = \$ 16.00
 - 3. First Class Mail fee (for individual owner of units within a condominium or other collective form of ownership): # of abutters _____ X \$1.00 = \$ —
 - 4. Creating/Printing Abutter Labels fee per sheet _____ x \$10.00 = \$ —
- E. Foster's newspaper public notice fee \$ 80.00
- F. Digital Version of the Plan & Archive Fee \$1.00 x # 1 per sheet of plan set = \$ 1.00
- TOTAL FEE \$ 303.00

11/18/16 Abutters List for Subdivision Application Tax Map K, Lot 19-5

Property ID	Owner 1	Owner 2	Owner Address 1	City	State	Zip	Book/Page
K0019-002000	252 DOVER POINT RD LLC		40 DOVER POINT ROAD	DOVER	NH	03820	3671/136
K0019-000000	VARNEY BROOK LANDS LLC	<i>owner/cpdivant</i>	340 CENTRAL AVENUE STE 202	DOVER	NH	03820	3660/351
K0019-005000							
K0019-004000							
K0019-003000	STABLE HOMES AT POINTE PLACE LLC		20 COTTON ROAD	NASHUA	NH	03063	4352/422
K0019-000302	STEVEN & NOREEN DORIS		5 SIERRA DRIVE	DOVER	NH	03820	4430/682
K0019-000303	HENRY & LINDA BEYER REVOCABLE TRUST	HENRY & LINDA BEYER, TRUSTE	7 SIERRA DRIVE	DOVER	NH	03820	4416/769
K0019-000301	RAY P. CARTER	KENDREE R. PARKER	3 SIERRA DRIVE	DOVER	NH	03820	4409/536
K0019-000306	FRANCIS W. & JUNE W. DOHERTY		15 SIERRA DRIVE	DOVER	NH	03820	4415/760
K0019-000330	VOGEL FAMILY REVOCABLE TRUST	CARL N. & MAURA K. VOGEL, TR	6 SIERRA DRIVE	DOVER	NH	03820	4424/455
SURVEYOR	MCENEANEY SURVEY ASSOCIATES, INC.		24 CHESTNUT STREET	DOVER	NH	03820	



K / 19
VARNEY BROOK LANDS LLC
340 CENTRAL AVENUE SUITE 202
DOVER, NH 03820
3660 / 351; 3690 / 116; 3854 / 986

30' WIDE
UTILITY EASEMENT
14,801 S.F. / 0.34 Ac.
S.C.R.D. 4407 / 571

30' WIDE
UTILITY EASEMENT
4,622 S.F.
S.C.R.D. 4352 / 422

50' WIDE ACCESS
& UTILITY EASEMENT
66,247 S.F.
1.52 Ac.
S.C.R.D. 4352 / 422

K / 19-3
K/19-3-31
STABLE HOMES AT POINTE PLACE, LLC
c/o STABLE PROPERTY MANAGEMENT
20 COTTON ROAD, SUITE 200
NASHUA, NH 03063
4352 / 422

K/19-3-30
THE VOGLE FAMILY REV. TRUST
C. OGLE, III & M. VOGLE, TRS.
6 SIERRA DRIVE
DOVER, NH 03820
4424 / 455

REFERENCE PLANS:

- SUBDIVISION AND LOT LINE ADJUSTMENT PLAN FOR POINTE PLACE & DOVER POINT ROAD 252 LLC, TAX MAP K, LOT Nos. 19, 19-2, 19-3 & 19-4, THORNWOOD LANE, CITY OF DOVER, COUNTY OF STRAFFORD, STATE OF NEW HAMPSHIRE. SCALE: 1" = 150'; DATED: MAY 20, 2015, REVISED THROUGH 8/3/15; BY THIS OFFICE. RECORDED S.C.R.D. PLANS 110-23, 110-24, 110-25 & 110-26.
- AMENDED SITE PLAN OF THE VILLAGE AT POINTE PLACE CONDOMINIUM TAX MAP K, LOT No. 19-3 THORNWOOD LANE & SIERRA DRIVE CITY OF DOVER COUNTY OF STRAFFORD STATE OF NEW HAMPSHIRE. SCALE: 1" = 50'; DATED: JUNE 17, 2016; BY THIS OFFICE. RECORDED S.C.R.D. PLAN 111-82.
- PLAN OF LAND PREPARED FOR VARNEY BROOK LANDS LLC, TAX MAP K, LOT No. 19-5, POINTE PLACE & SIERRA DRIVE, CITY OF DOVER, COUNTY OF STRAFFORD, STATE OF NEW HAMPSHIRE. SCALE: 1" = ; DATED: BY THIS OFFICE. RECORDED S.C.R.D. PLAN 111-77.

NOTES:

- OWNER OF RECORD:
VARNEY BROOK LANDS LLC
340 CENTRAL AVENUE, SUITE 202
DOVER, NEW HAMPSHIRE 03820
S.C.R.D. VOLUME 3660, PAGE 351
- K / 19-6** - DENOTES TAX MAP AND PARCEL NUMBER.
- PARCEL AREA = 226,449 S.F. / 5.20 Ac.
- ZONING DISTRICT IS ETP & RCM (RESIDENTIAL COMMERCIAL MIXED USE) OVERLAY. ALLOWED BY APPROVED CONDITIONAL USE PERMIT.
- THE SUBJECT PARCEL IS LOCATED OUTSIDE THE 0.2 PERCENT ANNUAL CHANCE FLOODPLAIN AS SHOWN ON FLOOD INSURANCE RATE MAP COMMUNITY NUMBER 330145; PANEL 0340; SUFFIX E; MAP NUMBER 33017C0340E; EFFECTIVE DATE SEPT. 30, 2015.
- BASIS OF BEARING IS NH STATE PLANE (NAD83) BASED ON GPS OBSERVATION DATED NOVEMBER 11, 2013. VERTICAL DATUM IS NGVD29 BASED ON BENCHMARK FOUND ON THORNWOOD COMMONS PROJECT.
- THE INTENT OF THIS PLAN IS TO SUBDIVIDE THE SUBJECT PARCEL INTO TWO (2) LOTS AS SHOWN. THIS PLAN ALSO INTENDS TO DESCRIBE A PROPOSED TWENTY-FIVE FOOT (25') WIDE ACCESS & UTILITY EASEMENT LOCATED ON PARCEL K/19-5 WHICH WILL BENEFIT PROPOSED PARCEL K/19-7.

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NOV 22 2016

Dover, New Hampshire

LEGEND
R.O.W. - RIGHT OF WAY
TYP. - TYPICAL
O.I.R. (TBS) - IRON ROD TO BE SET
G.B. (TBS) - GRANITE BOUND TO BE SET
S.C.R.D. - STRAFFORD COUNTY
REGISTRY OF DEEDS
S.F. - SQUARE FEET
Ac. - ACRE

NO.	DATE	DESCRIPTION	BY	CHK
REVISIONS				
15-2041	SUBDIV	16-2	1-15	
PROJECT NO	TYPE	FIELDBOOK	PAGES	

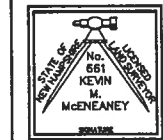
No.	Bearing	Distance
L1	N76°32'19"E	65.75'
L2	N81°37'50"E	65.24'
L3	S30°06'48"E	45.77'
L4	S30°06'48"E	9.76'
L5	S30°06'48"E	26.92'
L6	S76°32'19"W	65.75'
L7	N28°42'13"W	25.16'

No.	Central Angle	Radius	Arc Length	Chord Length	Chord Bearing
C1	17°34'34"	630.00	193.26	192.50	S51°05'55"W
C2	09°05'41"	250.00	39.68	39.64	N71°59'29"E
C3	34°13'42"	108.00	64.52	63.56	N59°25'28"E
C4	13°28'44"	370.00	87.04	86.84	N49°03'00"E
C5	25°50'28"	150.00	67.65	67.08	N68°42'36"E
C6	90°00'00"	30.00	47.12	42.43	S14°53'12"W
C7	25°50'28"	125.00	56.38	55.90	S68°42'36"W
C8	13°28'44"	345.00	81.16	80.98	S49°03'00"W
C9	34°13'42"	133.00	79.45	78.28	S59°25'28"W
C10	08°24'31"	225.00	33.02	32.99	S72°20'04"W

"I HEREBY CERTIFY THAT THIS PLAN IS BASED ON AN ACTUAL GROUND SURVEY PERFORMED WITH A TOTAL STATION, BY ME OR THOSE UNDER MY DIRECT SUPERVISION AND THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, SAID SURVEY MEETS OR EXCEEDS THE MINIMUM PRECISION REQUIREMENTS FOR SURVEY CLASSIFICATION "U" AS SET FORTH IN TABLE 500.1 OF THE NEW HAMPSHIRE CODE OF ADMINISTRATIVE RULES OF THE BOARD OF LICENSURE FOR LAND SURVEYORS."

SUBDIVISION PLAN OF LAND
PREPARED FOR
VARNEY BROOK LANDS LLC
TAX MAP K, LOT No. 19-5
POINTE PLACE & SIERRA DRIVE
CITY OF DOVER
COUNTY OF STRAFFORD
STATE OF NEW HAMPSHIRE

DOVER PLANNING FILE No. P 16-
DRAWN BY: RJM FILE: VR CP\2041\2041 K-19-5
SCALE: 1" = 50' DATE: NOV. 15, 2016



McEneaney
Survey
Associates, inc.

P.O. Box 681 - 24 CHESTNUT STREET
DOVER, NH 03820 (603) 742-0911

SURVEYING - PLANNING - CONSULTING

Community Development Block Grant Funds

Index

CDBG Program Description _____	1
Outline of Available Funds _____	2
Applicant Summary Sheet _____	3
Requests from Agencies for Funding _____	4

CDBG PROGRAM DESCRIPTION

The City of Dover is designated as an Entitlement Community by HUD. That means that each year, the City receives funds directly from HUD rather than having to apply to the State for CDBG funds.

These funds may only be used to address one of HUD's three National Objectives:

1. Benefit low and moderate income persons.
2. Prevent or eliminate blight.
3. Meet other community development needs having a particular urgency because existing conditions pose a serious and immediate threat to the health or welfare of the community, and other financial resources are not available to meet such needs.

The City of Dover has traditionally used CDBG funding to address the first National Objective listed above.

CONSOLIDATED PLAN

In 2015, the City adopted a 5-year Consolidated Plan as mandated by HUD requirements. This Plan serves as a strategic plan for addressing issues such as of homelessness, housing, public services, community and development needs and expanding economic opportunities for very low, low and moderate income persons within the community. The Consolidated Plan includes the Goal and Specific Objectives provided below. Funded activities must meet the Goal and one of the Specific Objectives.

Goal Statement

The City of Dover has articulated a goal of creating a viable urban environment through the improvement of housing and employment opportunities for low and very low income people and through improving and/or expanding public facilities and services.

Specific Objectives:

1. To provide increased opportunities to residents of the City who require education, health, recreation, housing and related human services.
2. To weatherize and improve the older housing stock of the City, especially for persons of low and very low income.
3. To plan and construct public improvements in areas populated by or used predominately by low and very low income persons.
4. To provide increased employment opportunities for low and very low income persons, with a focus on access to transportation.
5. Removal of architectural barriers to allow increased handicapped accessibility.

ACTION PLAN

To implement the Consolidated Plan, the community must annually adopt an Action Plan that identifies activities and projects that the community has decided to fund with CDBG funds. The Action Plan serves as a means to assure that the Goal and Objectives of the Consolidated Plan are being addressed. As part of the Action Plan process, citizens must be allowed an opportunity to provide comments on the Plan during the review process and after it has been approved by the City. After approval by the City and a subsequent 30-day public comment period, the Action Plan must be sent to HUD for their review and approval.

ELIGIBLE ACTIVITIES

Examples of eligible activities include:

Acquisition: Acquisition of real property for any public purpose.

Disposition: Disposition of real property acquired with CDBG funds.

Public Services. Provision of public services including labor, supplies, and materials. The amount shall not exceed 15 percent of the grant plus 15 percent of program income from the previous year.

Public Facilities and Improvements: Acquisition, construction, reconstruction, rehabilitation or installation of public facilities and improvements.

Clearance and Remediation Activities: Clearance, demolition, and removal of buildings and improvements.

Loss of Rental Income: Payments to owners for losses of rental income during relocation of individuals or families displaced by Community Development program activities.

Housing Rehabilitation: Single family, multi-family, low income public housing or other publicly owned residential buildings.

Economic Development: Direct economic development assistance to for profit entities. For example, the Dover Economic Loan Program.

Planning: Planning activities, data gathering, studies and analysis.

Administration and Planning: Payment of administrative costs and carrying charges related to the general planning and execution of Community Development program. The amount shall not exceed 20 percent of the grant plus 20 percent of the current year's estimated program income.

Activity Delivery Costs (ADC): Separate from general administration and planning activities, these are costs associated with administering specific grant awards. These costs include activities such as contract provision monitoring, Davis Bacon related activities and performing environmental reviews for each recipient. There are three ADC categories: Public Service ADC, Public Facility ADC and Weatherization ADC.

City of Dover
Community Development Block Grant
Fiscal Year 2018
Funding Formulas and Available Funds

Funding Formulas

There are three funding requirements that must be followed when allocating CDBG Program Funds.

1. General Administration & Planning: The maximum amount of program funds that can be used for general administration and planning purposes in FY18 is twenty percent (20%) of the FY18 grant amount plus twenty percent (20%) of the FY18 estimated program income. Therefore, for FY18, the maximum amount that can be allocated for administration and planning is: **\$60,758**

2. Public Services: The maximum amount of program funds that can be used for public services in FY18 is fifteen percent (15%) of the FY18 grant amount plus fifteen percent (15%) of the FY16 program income. Therefore, for FY18, the maximum amount that can be allocated for public services is: **\$47,417**

3. Dover Economic Loan Program (DELP): The estimated program income from the Dover Economic Loan Program (DELP) is required to be returned to the economic loan pool and can only be used for activities within that category. As such, it cannot be used for activities within the Public Services, Public Facilities and Administration & Planning categories. Note: The City can add additional funds to the loan pool but must, at a minimum, return the estimated FY17 DELP program income to the loan pool. The estimated FY17 DELP program income is: **\$15,864**

Program Funds

List of Program Fund figures for FY 18 funding calculations:

FY18 Estimated CDBG Entitlement Grant	\$268,665
FY17 Estimated Dover Economic Loan (DELP) Program Income	\$15,864
FY17 Estimated School St. Parking Lot Program Income	\$4,260
FY17 Estimated Housing Loan Program Income	\$15,000
FY16 Program Income	\$47,450

Planning and Administration Proposals

In addition to the proposals submitted by the applicants, the Planning Department wishes to make the following proposals:

Administration of Program: \$60,758

General Administration of the CDBG program such as updating of the Consolidated Plan; development of the Action Plan; annual performance reporting to HUD (CAPER); quarterly and semi-annual reporting to HUD; training; legal notices and citizen participation. The proposed amount includes program expenses, salary and fringe benefits for the Community Development Planner.

Activity Delivery Costs

Separate from general administration activities, these are costs associated with administering specific grant awards. These costs include activities such as contract provision monitoring, Davis Bacon related activities and performing environmental reviews for each recipient.

Following are the three categories of Activity Deliveries:

Public Service Activity Delivery: \$5,303

Public Facility Activity Delivery: \$1,183

Weatherization Activity Delivery: \$7,197

Dover Economic Loan Program (DELP): \$15,864

Return of loan funds (payments and interest received) to the loan pool for future lending to local businesses creating jobs in Dover or for related technical assistance. Note: minimum required amount to be returned to Economic Loan Pool per CDBG regulations for FY18 = \$15,864

Dover Economic Loan Program (DELP) Administration: \$30,063

The administration of DELP including activities such as meeting with prospective applicants, marketing of the program, development of materials, project evaluation, loan underwriting, performance monitoring and technical assistance.

FUNDING REQUESTS

Following are the names of applicants with the amount requested and a very brief description of proposed use of funds. See application for a description of the program and expanded discussion regarding use of funds.

PUBLIC SERVICES

Aids Response Seacoast \$15,000

Partially Support the salaries and benefits of Case Management Department staff consisting of a Program Manager, Medical Case Managers and a Financial Administrator.

Community Partners: \$9,000

Funding to provide security deposits and/or first month's rent to homeless individuals and families in Dover with mental illness or a developmental disability.

Cross Roads House: \$12,000

Funding to provide emergency shelter and supportive services to homeless families and individuals.

Dover Welfare: \$8,500

Funding to help people move into apartments that they can afford or to place them into motels until shelter space is available.

HAVEN: \$5,000

Funding to help domestic violence victims fleeing abuse with temporary shelter and services until they are ready to transition into safe, permanent housing.

Homeless Center for Strafford County: \$11,118.20

Funding to help support the overall operations of an emergency shelter for homeless women and families.

My Friend's Place: \$16,000

Funds will be used for overall operations of the year round emergency homeless shelter

PUBLIC FACILITIES

Community Action Partnership of Strafford County: \$25,000

Funding to support the Weatherization Program that provides weatherization measures intended to conserve energy for low-income residents.

Annie E Woodman Institute: \$47,425

Funding to provide ADA compliant external access to the main floor of three buildings and to upgrade an existing bathroom to ADA standards.

City Hall 1st Floor Bathroom ADA Project: \$63,579

ADA related improvements to City Hall first floor bathrooms.

Program Funding

Source (1)	Amount
Federal Grant	\$268,665
Economic Loan P/I	\$15,864
School St Parking Lot P/I	\$4,260
Housing Loan P/I	\$15,000
Total Program Funding	\$303,789

ALLOCATION

Organization	Priority Ranking (2)	Amount Requested	Previous Year Funding		
Administration					\$67,244
General Administration (3)	H	\$60,758	\$71,386		
Public Service ADC	H	\$5,303	(5)		
Public Facility ADC	H	\$1,183	(5)		
total		\$67,244	\$71,386		
Public Services					
15% of FY18 Grant and FY16 PI					\$47,417
<i>Organization</i>					
AIDS Response	H	\$15,000	\$7,900		
Community Partners	H	\$9,000	\$7,500		
Cross Roads House	H	\$12,000	\$9,500		
Dover Welfare Sec Deposit	H	\$8,500	\$7,565		
HAVEN (A Safe Place)	H	\$5,000	\$3,000		
Homeless Cntr for St Cty	H	\$11,118	\$7,500		
My Friends Place (MFP)	H	\$16,000	\$11,500		
total		\$76,618	\$54,465		
Economic Development					
Economic Loan Pool (4)	H	\$15,864	\$79,852		\$45,927
Economic Loan Pool Admin	H	\$30,063	\$30,063		
total		\$45,927	\$109,915		
Public Facilities/Economic Development					
Remainder of income					\$143,201
<i>Organization/Activity</i>					
CAP (Weatherization)	H	\$25,000	\$25,000		
Weatherization ADC	H	\$7,197	(5)		
Annie E Woodman Inst (6)	M	\$47,425	\$0		
City Hall Bathroom ADA	H	\$63,579	\$0		
Additional Economic Loan Pool	H	\$0	\$0		
total		\$143,201	\$25,000		
Grand Total		\$332,990			\$303,789

Total Request of CDBG Funds: \$332,990

Total Allocation of CDBG Funds: \$303,789

(1) =Anticipated

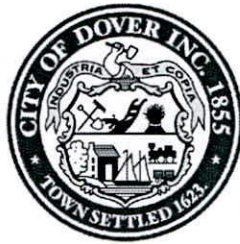
(2) = Per Strategic Plan Chapter of the Consolidated Plan

(3) = 20% of total fund pool

(4) = Minimum allotment per CDBG funding requirement = \$15,864

(5) = Included in FY 17 General Administration Total

(6) = Received \$45,000 in FY 16 Action Plan



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Dover, New Hampshire

CDBG APPLICATION

**CITY OF DOVER, NH
COMMUNITY DEVELOPMENT BLOCK GRANT
FY2018**

APPLICANT INFORMATION										
Organization AIDS Response Seacoast	Tax ID 22-2884488									
Name of Program Medical Case Management										
Name of Executive Director Richard B. Wagner										
Mailing Address 7 Junkins Avenue Physical Address Portsmouth, NH 03801										
Contact Person Richard Wagner	Phone 603-433-5377									
E-Mail rwagner@aidsresponse.org	Website aidsresponse.org									
Please Identify the Type of Organization Applying for Funds (Note: More than one may apply) <table border="0"><tr><td>☒ 501(c)(3)</td><td>☐ For-profit authorized under 570.201(o)</td><td>☐ Unit of Government</td></tr><tr><td>☐ Faith-based Organization</td><td>☐ Institution of Higher Education</td><td></td></tr><tr><td colspan="3">☐ Other (Explain):</td></tr></table>		☒ 501(c)(3)	☐ For-profit authorized under 570.201(o)	☐ Unit of Government	☐ Faith-based Organization	☐ Institution of Higher Education		☐ Other (Explain):		
☒ 501(c)(3)	☐ For-profit authorized under 570.201(o)	☐ Unit of Government								
☐ Faith-based Organization	☐ Institution of Higher Education									
☐ Other (Explain):										
Tax ID # 22-2884488										
*DUNS # 78-013-3013	*SAM Expiration Date 10/26/17									

* *Important notice regarding new mandatory federal reporting requirements:* The Federal Funding Accountability and Transparency Act requires sub-recipients receiving federal funds to register with Dunn and Bradstreet to obtain a DUNS number and complete or renew their registration in the System for Award Management (SAM). For information on how to obtain a DUNS number and register in SAM please visit <https://fedgov.dnb.com/webform> and <https://www.sam.gov/portal/SAM/##11>. Completing these registration processes is free, but may take up to 15 days to complete. The city will not commit funds without this information.

ACTIVITY or PROJECT INFORMATION

ACTIVITY OR PROJECT INFORMATION
Amount of Dover CDBG funds requested for activity/project: \$ 15,000.00
Provide a <u>very brief</u> summary of the activity or project for which the funds are requested. Keep responses to one or two sentences (i.e. After School Care for K-4 th grade students. Repair of homeless shelter roof. Etc.) Funding will be utilized to partially support the salaries and benefits of the Case Management Department staff, consisting of a Program Manager, Medical Case Managers, and a Financial Administrator.
Identify the Dover Consolidated Plan "Specific Objective" that will be met by the proposed activity/project (see page 3 of CDBG Application: Overview & Scoring: Goal and Objectives) Specific Objective (i.e. Removal of architectural barriers to allow increased handicapped accessibility) To provide increased opportunities to residents of Dover who require education, health, housing and related human services.

PROJECT LOCATION
Location(s) where services will be provided or physical improvements will be made. 7 Junkins Avenue, Portsmouth, NH 03801

PROPOSED SCHEDULE OF PROJECT IMPLEMENTATION – PUBLIC FACILITIES ONLY (Construction Projects/Physical Improvements)	
For this section please identify the major tasks and dates that they will be achieved.	
TASK	DATE
N/A	

BENEFICIARIES
Beneficiaries: For FY2018 (7/1/17 – 6/30/18) please provide the <i>estimated</i> number of unduplicated Dover beneficiaries that will benefit from this CDBG funded activity or project, not necessarily your entire client population (Note: these numbers will be monitored during the funding year): 18 For FY2016 (7/1/15 – 6/30/16) please provide the number of unduplicated Dover beneficiaries that benefited from this activity or program, not necessarily your entire client population: 18 Were Dover CDBG funds used to fund this activity or program in FY2017 (7/1/16 – 6/30/17): Yes If so, how much? \$7,900
Beneficiary type: ☐ Elderly ☐ Family ☐ Disabled ☐ Homeless ☒ Persons living with AIDS ☐ Other (specify):

ACTIVITY/PROJECT NARRATIVE

Please provide a detailed description for the proposed activity/project. (*note: not the organization*) This section should describe the use of funds and explain why the funds are needed. Please relate how the CDBG funds will ultimately benefit Dover low-moderate income individuals.

The Department of Client Services provides client-centered **Medical Case Management** for people living with HIV/AIDS who live in Rockingham and Strafford Counties of New Hampshire. Case managers at ARS provide direct face to face meetings for initial assessments, reassessments and informal 'check-in' meetings, phone support and medical and social referrals as indicated. Within this process, a client's needs and goals are assessed and an individual service plan (ISP) is developed in collaboration with the client to attain his/her goals. A case manager coordinates this process by providing information, advocacy and referrals linking clients to primary and specialty health care, dental, mental health/substance abuse counseling, Medicaid, Medicare, fuel assistance, Section 8 Housing and the AIDS Drug Assistance Programs (ADAP) administered by the New Hampshire Department of Health and Human Services CARE Program.

CDBG funds will be used to partially cover the salaries and benefits of the Medical Case Managers, program director and financial administrator. The services provided by ARS Client Services Department directly benefit Dover residents, of which 89% are at low or very low incomes, receive the medical care necessary for them to maintain their health and obtain HIV viral suppression.

Please indicate who prepared the overall cost estimate for the activity or project. Executive Director & Director of Finance

For this application, written quotes are required for proposed purchase of items exceeding \$3,000.00 or for physical improvements (i.e. building expansion, new roof, replacement of windows, etc.). Please attach quotes you have obtained.

PERFORMANCE OUTCOME MEASURES

Provide the outcomes proposed and the method of measurement. You may list multiple outcomes.

Outcome

Measurement

Ex. Decrease in number of "latch-key kids"
Ex. Decreased dependence on emergency care facilities for non-emergency care of low/mod adults

Ex. # of children who participate in afterschool program
Ex. Increase in number of low/mod income residents that seek care from health program.

1) 95% of clients maintain stable and satisfactory housing

1) Number of clients in stable and satisfactory housing divided by total number of clients

2) 90% of clients have HIV medical visit in last 6 months

2) Number of clients with medical visit in last 6 months divided by total number of clients

ORGANIZATION

DESCRIPTION OF ORGANIZATION

Please provide a description for the Organization that is undertaking the activity/project.

AIDS Response Seacoast (ARS) is a non-profit, community based HIV/AIDS Service Organization dedicated to providing direct assistance, education and advocacy for persons living with and affected by HIV/AIDS. ARS provides services to clients at all stages of HIV infection that live in Rockingham and Strafford counties in New Hampshire as well as providing educational programs throughout New Hampshire. It is the mission of ARS to support and assist those infected and affected by HIV/AIDS in maintaining a high quality of life through direct assistance and advocacy and to prevent the spread of new infections by promoting safer practices and education for local and regional communities.

--

AUDIT AND EVALUATION

Does your organization have an annual CPA Audit? Yes

If yes, please submit most recent Audit.

Is your organization evaluated by outside agencies or programs? Yes

If yes, please note the agency/program and how often the evaluation occurs.

- New Hampshire Department of Health and Human Services, Bureau of Infectious Disease Control – Program and fiscal audit done Annually
- Boston Public Health Commission, HIV/AIDS Services Division (administering agency for Ryan White CARE Act, Part A for the Boston Emerging Metropolitan Area) – Program and fiscal audit Annually

BOARD OF DIRECTORS

Name	Residence (city/town)
Raymond Ouellette	Rollinsford, NH
Tyra Bauguess	Somersworth, NH
Art Nicholson	Portsmouth, NH
Betsy J. Melanson	Portsmouth, NH
Zacharie Harmon	Somersworth, NH
Kathy Jerram	Hampton, NH

BUDGET – SEE PAGE 5 ATTACHED

Use box A or B below to provide a budget for the proposed *Public Service (A.)* or *Public Facility (B.)*. Include all proposed expenses.

A. Public Services (Non-Construction Projects)			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Office Supplies			
Utilities			
Repairs/Maintenance			
Travel			
Salaries (List relevant positions)			
Other:			
TOTAL PROPOSED BUDGET:			

B. Public Facilities: Construction Projects/Physical Improvements			
	A	B	A + B
N/A	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Hard Costs <u>Note:</u> Federal wage rates may apply for some construction projects. Applicants are encouraged to obtain estimates that reflect wage rates estimates.			
Construction			
Other (list)			
<i>Total Hard Costs</i>			
Soft Costs			
Acquisition			
Appraisals			
Design/Engineering			
Other(list):			
<i>Total Soft Costs</i>			
TOTAL PROPOSED BUDGET:			

AIDS Response Seacoast
Client Services Department - Program Budget
FY 2018

<u>LINE ITEM DESCRIPTION:</u>	<u>DOVER FUNDS REQUESTED</u>	<u>OTHER FUNDING</u>	<u>TOTAL</u>
Client Services Dept. Staff Salaries	\$ 10,823.00	\$ 152,563.00	\$ 163,386.00
Program Manager			
Medical Case Manager 1			
Medical Case Manager 2			
Financial Administrator			
Fringe Benefits & Payroll Taxes	\$ 2,814.00	\$ 37,698.00	\$ 40,512.00
Clinical Supervision	\$ -	\$ 3,600.00	\$ 3,600.00
Direct Financial Assistance to Clients			
Shelter Assistance	\$ -	\$ 20,000.00	\$ 20,000.00
Food & Nutrition	\$ -	\$ 26,517.00	\$ 26,517.00
Client Transportation	\$ -	\$ 3,000.00	\$ 3,000.00
Other Client Support	\$ -	\$ 24,800.00	\$ 24,800.00
Supplies - Office and PC	\$ -	\$ 3,000.00	\$ 3,000.00
Copying & Printing	\$ -	\$ 2,300.00	\$ 2,300.00
Postage	\$ -	\$ 736.00	\$ 736.00
Audit & Professional Fees	\$ -	\$ 4,500.00	\$ 4,500.00
Insurance	\$ -	\$ 3,488.00	\$ 3,488.00
Telephone & Internet	\$ -	\$ 3,325.00	\$ 3,325.00
Equipment Maintenance & Repairs	\$ -	\$ 500.00	\$ 500.00
Training and Conferences	\$ -	\$ 350.00	\$ 350.00
Case Managers Travel - Home Visits	\$ -	\$ 1,100.00	\$ 1,100.00
Rent	\$ -	\$ 16,800.00	\$ 16,800.00
Direct Department Overhead	\$ 1,363.00	\$ 20,723.00	\$ 22,086.00
Total	<u>\$ 15,000.00</u>	<u>\$ 325,000.00</u>	<u>\$ 340,000.00</u>

Additional Housing Support -

In addition to the support shown above, AIDS Response Seacoast coordinates through a program titled "Housing Opportunities for People With AIDS" (HOPWA) for approximately \$50,000 annually in direct housing and utilities assistance for our clients. These funds are administered directly and are not part of our financial statements. (See Note 5 of Audited Financials)

FUNDING SOURCES – SEE PAGE 6 ATTACHED

Other Funding Sources - please indicate the source and amount of other funding committed, pending or proposed for this project, if any. *Do not include Dover CDBG amount requested.*

Funding Source: (Name(s) of funding source(s))	Total Amount (\$):	Committed, Pending or Proposed Amount (\$):	
Federal:		Committed Pending Proposed	
State:		Committed Pending Proposed	
Local:		Committed Pending Proposed	
Private:		Committed Pending Proposed	
Portsmouth CDBG:		Committed Pending Proposed	
Rochester CDBG:		Committed Pending Proposed	
Other:		Committed Pending Proposed	
Total:		Committed Pending Proposed	

Organizational Commitment: For Public Facility Projects (building addition, new roof, replacement windows, etc.) – indicate the amount of funds that the organization will be contributing to the project.

Funding Source: (Name of Parent Organization)	Total Amount (\$) to be Contributed by Parent Organization	Committed or Proposed Amount (\$)	
		Committed Proposed	
Total:			

**AIDS RESPONSE SEACOAST
PROJECTED FUNDING SOURCES - CLIENT SERVICES DEPARTMENT PROGRAM
FOR FISCAL YEAR ENDING JUNE 30 2018
All Pending**

FEDERAL GRANTS

Boston Public Health Ryan White Funding	\$ 126,697	
UW EFSP - Rockingham	\$ 1,250	
UW EFSP - Strafford	\$ 1,779	
HOPWA - Housing Opportunities for People With Disabilities	\$ 25,653	
Portsmouth CDBG	\$ 9,000	
Dover CDBG <i>(Not Included)</i>	\$ -	
		\$ 164,379

STATE GRANTS & MUNICIPALITIES

Taskforce - NH DHHS Client Services	\$ 89,832	
Local Municipalities	\$ 17,900	
		\$ 107,732

FOUNDATIONS : Restricted

Broadway Cares	\$ 5,000	
Other - Rotary, etc.	\$ 500	
		\$ 5,500

DONATIONS -Restricted

In Kind Donation Food	\$ 18,000	
In Kind - Other Client Support	\$ 4,000	
		\$ 22,000

<u>RESTRICTED FUNDS AVAILABLE</u>	\$ 25,389
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<u>TOTALS</u>	<u>\$ 325,000</u>
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NOTE:

Does not include funds that would be requested from Dover CDBG

AGENCY BUDGET – SEE PAGE 7 ATTACHED

Please provide a breakdown of your organization's overall annual budget. Please indicate the dates of your budget period, i.e. July 1 to June 30 or January 1 to December 31.

Budget Period: from	to	Current Year	Next Year (projected)
REVENUES			
Federal Funds			
State Funds			
Foundations/Private Contributions			
United Way			
Fundraising or other income			
Other (describe)			
Community Dev. Block Grant (include anticipated request)			
TOTAL REVENUE			
EXPENSES			
Salaries			
Fringe Benefits			
Supplies (include printing/copying)			
Travel			
Training			
Communications			
Audit			
Property Maintenance			
Service Contracts			
Construction Supplies/Materials			
Other (describe)			
TOTAL EXPENSES			
NET (Income - Expenses)			

**AIDS RESPONSE SEACOAST
ANNUAL BUDGET
PERIOD JULY 1 TO JUNE 30**

Revenue Sources	CURRENT YEAR ENDED June 30, 2017	PROJECTED ENDED June 30, 2018
Federal Grants	\$ 178,136	\$ 178,136
State Grants & Municipalities	\$ 107,532	\$ 107,532
Foundations	\$ 18,000	\$ 18,000
Special Events	\$ 17,400	\$ 17,400
Charitable Donations	\$ 53,500	\$ 53,500
Restricted Funds Available	\$ 25,388	\$ 25,388
Interest Income	\$ 44	\$ 44
Total	\$ 400,000	\$ 400,000

Expenses	June 30, 2017	June 30, 2018
Salaries	\$ 208,896	\$ 208,896
Payroll Taxes & Fringe Benefits	\$ 53,487	\$ 53,487
Clinical Supervision	\$ 3,600	\$ 3,600
Direct Financial Assistance		
Shelter Assistance	\$ 20,000	\$ 20,000
Food and Nutritional Suppliments	\$ 26,517	\$ 26,517
Client Transportation	\$ 3,000	\$ 3,000
Other Client Support	\$ 24,800	\$ 24,800
Speaker Honorariums/ Educ.Programing	\$ 1,300	\$ 1,300
Supplies - Office	\$ 3,500	\$ 3,500
Copying and Printing	\$ 3,000	\$ 3,000
Telephone and Internet	\$ 4,500	\$ 4,500
Training and Conferences	\$ 1,000	\$ 1,000
Travel	\$ 1,500	\$ 1,500
Insurance	\$ 4,500	\$ 4,500
Equipment Expense		
Equipment Rentals	\$ 300	\$ 300
Equipment Purchase and Repairs - Office	\$ 2,000	\$ 2,000
Postage	\$ 1,500	\$ 1,500
Rent	\$ 21,100	\$ 21,100
Advertising	\$ 300	\$ 300
Dues and Subscriptions	\$ 1,000	\$ 1,000
Professional Fees/Consultants	\$ 8,600	\$ 8,600
Bank Charges	\$ 100	\$ 100
Miscellaneous	\$ 1,000	\$ 1,000
Fundraising Event Costs	\$ 4,500	\$ 4,500
Agency Overhead	\$ -	\$ -
Total	\$ 400,000	\$ 400,000

By signing below, the Authorized Official affirms: The organization's commitment to implement the proposed activity/project; that all information presented is true and accurate to the best of their knowledge; and he/she is authorized to submit this application;

Submitted by:


Authorized Official - signature

Date

11/15/16

RICHARD B. WAGNER
Print Name

EXECUTIVE DIRECTOR
Print Title

AIDS RESPONSE - SEACOAST

FINANCIAL REPORT

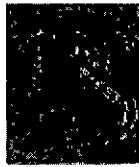
JUNE 30, 2016

AIDS RESPONSE - SEACOAST

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INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
AIDS Response - Seacoast
Portsmouth, New Hampshire

We have audited the accompanying financial statements of AIDS Response - Seacoast (a non-stock nonprofit corporation), which comprise the statements of financial position as of June 30, 2016 and 2015, and the related statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of AIDS Response - Seacoast as of June 30, 2016 and 2015, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

September 12, 2016

*Plodzik & Sanderson
Professional Association*

PLODZIK & SANDERSON
Professional Association / Accountants & Auditors

*AIDS RESPONSE - SEACOAST
STATEMENTS OF FINANCIAL POSITION -
JUNE 30, 2016 AND 2015*

ASSETS

	2016	2015
CURRENT ASSETS		
Cash and cash equivalents	\$ 128,095	\$ 112,121
Grants receivable	27,121	32,884
Prepaid expenses	3,292	1,099
Inventory - food pantry	4,000	4,000
Total current assets	<u>\$ 162,508</u>	<u>\$ 150,104</u>
PROPERTY AND EQUIPMENT		
Office equipment and computers	\$ 53,182	\$ 53,182
Furniture and fixtures	12,025	12,025
Leasehold improvements	1,626	1,626
	<u>\$ 66,833</u>	<u>\$ 66,833</u>
Less accumulated depreciation	66,833	66,833
	<u>\$ -</u>	<u>\$ -</u>
TOTAL ASSETS	<u><u>\$ 162,508</u></u>	<u><u>\$ 150,104</u></u>

LIABILITIES AND NET ASSETS

CURRENT LIABILITIES		
Accrued expenses	<u>\$ 13,406</u>	<u>\$ 11,370</u>
NET ASSETS		
Unrestricted		
Net investment in property and equipment	\$ -	\$ -
Designated	-	1,200
Undesignated	123,714	108,292
	<u>\$ 123,714</u>	<u>\$ 109,492</u>
Temporarily restricted	25,388	29,242
Total net assets	<u>\$ 149,102</u>	<u>\$ 138,734</u>
TOTAL LIABILITIES AND NET ASSETS	<u><u>\$ 162,508</u></u>	<u><u>\$ 150,104</u></u>

The notes to financial statements are an integral part of these statements.

AIDS RESPONSE - SEACOAST
STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS
FOR THE YEARS ENDED JUNE 30, 2016 AND 2015

	<u>2016</u>	<u>2015</u>
UNRESTRICTED NET ASSETS		
REVENUE		
Grant revenue	\$ 279,400	\$ 288,295
Event revenue	20,105	33,420
Municipal revenue	16,765	18,840
	<u>\$ 316,270</u>	<u>\$ 340,555</u>
SUPPORT		
Cash donations	\$ 24,717	\$ 23,057
Donated materials and services	24,640	25,909
	<u>\$ 49,357</u>	<u>\$ 48,966</u>
INVESTMENT INCOME		
Interest	\$ 21	\$ 28
NET ASSETS RELEASED FROM RESTRICTIONS		
Satisfaction of program restrictions	\$ 9,514	\$ 7,482
TOTAL UNRESTRICTED REVENUE, SUPPORT AND OTHER GAINS	<u>\$ 375,162</u>	<u>\$ 397,031</u>
EXPENSES		
Program services:		
Client services	\$ 317,020	\$ 330,583
Education	8,297	7,839
Total program services	\$ 325,317	\$ 338,422
Fundraising	11,142	14,134
Management and general	24,481	24,230
TOTAL EXPENSES	<u>\$ 360,940</u>	<u>\$ 376,786</u>
INCREASE IN UNRESTRICTED NET ASSETS	<u>\$ 14,222</u>	<u>\$ 20,245</u>
TEMPORARILY RESTRICTED NET ASSETS		
Donations	\$ 5,660	\$ 8,900
Net assets released from restrictions	<u>(9,514)</u>	<u>(7,482)</u>
INCREASE (DECREASE) IN TEMPORARILY RESTRICTED NET ASSETS	<u>\$ (3,854)</u>	<u>\$ 1,418</u>
INCREASE IN NET ASSETS	<u>\$ 10,368</u>	<u>\$ 21,663</u>
NET ASSETS - BEGINNING	<u>\$ 138,734</u>	<u>\$ 117,071</u>
NET ASSETS - ENDING	<u><u>\$ 149,102</u></u>	<u><u>\$ 138,734</u></u>

The notes to financial statements are an integral part of these statements.

AIDS RESPONSE - SEACOAST
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2016

	Program Services		Total		Management	
	Client		Program		and	
	Services	Education	Services	Fundraising	General	Total
Salaries	\$ 193,673	\$ 4,703	\$ 198,376	\$ 3,523	\$ 7,288	\$ 209,187
Payroll tax expense	17,056	431	17,487	305	610	18,402
Fringe benefits	21,367	57	21,424	-	11,008	32,432
<u>Contracted services</u>						
Contracted educational services	3,600	-	3,600	-	-	3,600
<u>Direct financial assistance</u>						
Shelter assistance	13,391	-	13,391	-	-	13,391
Food	22,855	-	22,855	-	-	22,855
Client transportation expense	2,107	-	2,107	-	-	2,107
Other client support	5,877	-	5,877	-	-	5,877
Client social activities	25	-	25	-	-	25
Honorariums	-	910	910	-	-	910
Supplies	2,710	113	2,823	113	226	3,162
Copying and printing	2,300	112	2,412	112	225	2,749
Telephone and internet	2,965	178	3,143	178	381	3,702
Training and conferences	267	-	267	-	125	392
Travel	891	181	1,072	-	-	1,072
General insurance	3,439	215	3,654	215	422	4,291
<u>Equipment expense</u>						
Equipment rentals	-	-	-	-	120	120
Equipment purchase and repairs	777	-	777	-	-	777
Postage	737	30	767	30	65	862
Rent	16,581	1,036	17,617	1,036	2,073	20,726
Advertising	-	-	-	-	104	104
Dues and subscriptions	100	-	100	-	716	816
Professional fees	6,302	331	6,633	273	969	7,875
Bank Charges	-	-	-	-	60	60
Miscellaneous	-	-	-	-	89	89
Fundraising event costs	-	-	-	5,357	-	5,357
<u>Totals</u>	<u>\$ 317,020</u>	<u>\$ 8,297</u>	<u>\$ 325,317</u>	<u>\$ 11,142</u>	<u>\$ 24,481</u>	<u>\$ 360,940</u>

The notes to financial statements are an integral part of these statements.

AIDS RESPONSE - SEACOAST
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2015

	<u>Program Services</u>		<u>Total</u>		<u>Management and</u>	
	<u>Client</u>		<u>Program</u>		<u>General</u>	<u>Total</u>
	<u>Services</u>	<u>Education</u>	<u>Services</u>	<u>Fundraising</u>		
Salaries	\$ 183,728	\$ 4,332	\$ 188,060	\$ 3,309	\$ 6,618	\$ 197,987
Payroll tax expense	16,055	413	16,468	287	578	17,333
Fringe benefits	20,337	51	20,388	-	11,517	31,905
<u>Contracted services</u>						
Contracted educational services	3,500	-	3,500	-	-	3,500
<u>Direct financial assistance</u>						
Shelter assistance	29,562	-	29,562	-	-	29,562
Food	30,047	-	30,047	-	-	30,047
Client transportation expense	3,900	-	3,900	-	-	3,900
Other client support	4,148	-	4,148	-	-	4,148
Client social activities	300	-	300	-	-	300
Honorariums	-	930	930	-	-	930
Supplies	3,304	87	3,391	87	192	3,670
Copying and printing	2,332	110	2,442	110	220	2,772
Telephone and internet	3,281	197	3,478	197	418	4,093
Training and conferences	517	-	517	-	-	517
Travel	1,261	148	1,409	-	-	1,409
General insurance	3,438	215	3,653	215	430	4,298
<u>Equipment expense</u>						
Equipment rentals	-	-	-	-	108	108
Equipment purchase and repairs	1,436	-	1,436	-	-	1,436
Postage	1,406	31	1,437	31	60	1,528
Rent	15,820	989	16,809	989	1,977	19,775
Advertising	-	-	-	-	103	103
Dues and subscriptions	100	-	100	-	833	933
Professional fees	6,111	336	6,447	280	996	7,723
Bank charges	-	-	-	-	80	80
Miscellaneous	-	-	-	-	100	100
Fundraising event costs	-	-	-	8,629	-	8,629
<u>Totals</u>	<u>\$ 330,583</u>	<u>\$ 7,839</u>	<u>\$ 338,422</u>	<u>\$ 14,134</u>	<u>\$ 24,230</u>	<u>\$ 376,786</u>

The notes to financial statements are an integral part of these statements.

*AIDS RESPONSE - SEACOAST
STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED JUNE 30, 2016 AND 2015*

	<u>2016</u>	<u>2015</u>
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	\$ 10,368	\$ 21,663
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	-	-
Changes in assets and liabilities:		
(Increase) decrease in grants receivable	5,763	2,767
(Increase) decrease in prepaid expenses	(2,193)	(281)
(Increase) decrease in inventory	-	-
Increase (decrease) in accrued expenses	<u>2,036</u>	<u>1,795</u>
Net cash provided by operating activities	\$ 15,974	\$ 25,944
Cash and cash equivalents:		
Beginning	<u>112,121</u>	<u>86,177</u>
Ending	<u>\$ 128,095</u>	<u>\$ 112,121</u>

The notes to financial statements are an integral part of these statements.

*AIDS RESPONSE - SEACOAST
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED JUNE 30, 2016 AND 2015*

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization

AIDS Response - Seacoast (The Organization) is a non-stock, nonprofit corporation and is exempt for federal income tax purposes under Section 501(c) (3) of the Internal Revenue Code. The Organization has also been classified as an entity that is not a private foundation within the meaning of Section 509(a) and qualifies for deductible contributions as provided in Section 17(b) (1) (A) (VI).

Activities and Program Services

The Organization was formed to provide education, advocacy, referral, and other services to people whose lives are affected by the human immunodeficiency virus (HIV) at its various stages. Its service area encompasses the greater metropolitan area of Rockingham and Strafford Counties in New Hampshire and Southern York County in Maine. A description of the Organization's major classes of programs is as follows:

Client Services - To provide direct assistance and coordination of benefits by third parties to people both infected and/or affected by HIV/AIDS.

Education - To prevent new infections by offering educational programs and materials to the community.

Accounting Method

Assets, liabilities, revenue, and expenses are reported on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America includes the use of estimates that affect the financial statements. Accordingly, actual results could differ from those estimates.

Basis of Presentation

Net assets of the Organization and changes therein are classified and reported as follows:

Unrestricted net assets - Net assets that are not subject to donor-imposed stipulations.

Temporarily restricted net assets - Net assets subject to donor-imposed stipulations that will be met either by actions of the Organization and/or the passage of time.

Permanently restricted net assets - Net assets subject to donor-imposed stipulations that they be maintained permanently by the Organization. Generally, the donors of these assets permit the Organization to use all or part of the income earned on related investments for general or specific purposes.

Functional Allocation of Expenses

The costs of providing the various programs and other activities have been summarized on a functional basis in the statements of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited. Expenses are also charged to each program based on direct expenses incurred or estimated usage.

Cash and Cash Equivalents

For purposes of reporting the statement of cash flows, the Organization considers all cash accounts and all highly liquid debt instruments purchased with a maturity of three months or less to be cash equivalents. As of June 30, 2016 and 2015, the Organization maintained cash equivalents of \$128,095 and \$112,121, respectively.

*AIDS RESPONSE - SEACOAST
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED JUNE 30, 2016 AND 2015*

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Property and Equipment

Property and equipment are recorded at cost when purchased and fair market value when donated. Equipment purchases at a cost greater than \$1,500 are capitalized, and equipment purchases at a cost less than \$1,500 are expensed in the year of purchase. Depreciation is calculated using the straight-line method over the following estimated useful lives:

	<u>Years</u>
Office equipment and computers	3 - 7
Furniture and fixtures	3 - 5
Leasehold improvements	2 - 39
Vehicle	5

Revenue Recognition and Restricted Grant Revenues

The Organization reports gifts of cash and other assets as restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. The Organization reports gifts of land, buildings, and equipment as unrestricted support unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations about how long those long-lived assets must be maintained, the Organization reports expirations of donor restrictions when the donated or acquired long-lived assets are placed in service.

The Organization considers restricted grant revenues whose restrictions have been met in the same reporting period to be unrestricted revenue. The Organization has numerous reimbursement grants. The revenue on these grants is recognized as the costs are incurred.

Donated Services

Numerous volunteers have donated significant amounts of time to the Organization's program services and fundraising efforts. The fair value of these services has not been recognized as revenue in the financial statements because they did not meet the criteria for recognition.

Advertising Costs

The Organization expenses all advertising costs as incurred in accordance with the American Institute of Certified Public Accountants Statement of Position 93-7, *Reporting on Advertising Costs*.

Accounting for Income Taxes

The Organization considers the provisions of Financial Accounting Standards Board (FASB) Accounting Standards Codification Topic (ASC) 740-10 *Accounting for Uncertainty in Income Taxes*. The purpose of this topic is to clarify whether non-profit organizations may include tax benefits from uncertain tax positions in their financial statements. The Organization records a liability for uncertain tax positions when it is probable that a loss has been incurred and the amount can be reasonably estimated. The Organization recognizes interest accrued related to unrecognized tax benefits in interest expense and penalties in operating expenses. The Organization is no longer subject to U.S. federal and state informational return examinations by tax authorities for years before 2013. The Organization has evaluated its tax positions and concludes that there are no tax positions it has taken which if challenged would result in a material effect on the financial statements.

*AIDS RESPONSE - SEACOAST
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED JUNE 30, 2016 AND 2015*

NOTE 2 - INVENTORY — FOOD PANTRY

The Organization maintains a food pantry for the benefit of its clients. Inventory is recorded at cost for items purchased and fair value for items donated. Inventory as of June 30, 2016 and 2015, is valued at \$4,000 and \$4,000, respectively.

NOTE 3 - LINE OF CREDIT

The Organization has a \$35,000 line of credit with Citizens Bank which matures December 31, 2016. Amounts borrowed under this agreement bear interest at 1.0% above the Wall Street Journal Prime Rate (3.5% at June 30, 2016). At June 30, 2016 and 2015, the Organization had no amounts outstanding on the line of credit. The line is secured by cash held in an account at the same financial institution. Funds in that account totaled \$100,004 and \$90,260 at June 30, 2016 and 2015, respectively.

NOTE 4 - OPERATING LEASES

The Organization leases space from the City of Portsmouth under an agreement dated November 13, 1998, which terminates on September 30, 2018. The Organization renegotiated this lease on August 8, 2012. The lease currently requires annual rent of \$21,051. Rent is due in monthly installments of \$1,754. Total rent expense in these financial statements under this lease amounts to \$20,726 and \$19,775 for the years ended June 30, 2016 and 2015, respectively. The lease may be terminated with 30 days prior written notice. Annual rent is renegotiated each September 1 and is calculated on a formula based on the lessor's operating costs of the building, and square footage utilized by the Organization.

The Organization leases a copier machine at \$188 per month for 60 months. The term of the lease is August 1, 2011 through July 31, 2016. Total equipment rental expense in these financial statements amounts to \$2,257 and \$2,257 for the years ended June 30, 2016 and 2015, respectively, and is included under the expense caption "Copying and printing." The Organization signed a new five year lease effective August 1, 2016 requiring payments of \$146 per month through July 31, 2021.

The Organization leases a postage meter at \$32 per month for 36 months. The term of the lease is January 25, 2015 through January 25, 2018. Total postal meter rental expense in these financial statements amounts to \$380 and \$401 for the years ended June 30, 2016 and 2015, respectively, and is included under the expense caption "Postage."

Future minimum lease payments under these leases, assuming future calculations of the office space lease remain constant and the office space will be utilized for the full term of the lease, are as follows:

For the year ending June 30.	
2017	\$ 23,239
2018	23,013
2019	7,015
2020	1,746
2021	1,746
Thereafter	146
<u>Total</u>	<u>\$ 56,905</u>

NOTE 5 - ADDITIONAL HOUSING SUPPORT

AIDS Response - Seacoast coordinates for its clients with Merrimack Valley Assistance Program (MVAP) in Concord, New Hampshire, for direct housing support for their clients. Total support for the years ended June 30, 2016 and 2015 was \$47,437 and \$54,490, respectively. Funds are provided by the Department of Housing and Urban Development (HUD) through a program titled "Housing Opportunities for People with AIDS" (HOPWA). These funds are not reflected in the financial statements of the organization.

*AIDS RESPONSE - SEACOAST
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED JUNE 30, 2016 AND 2015*

NOTE 6 – CURRENT VULNERABILITY DUE TO CONCENTRATIONS AND CONTINGENCIES

Concentration

AIDS Response – Seacoast receives a substantial amount of its support in the form of grant revenues from the State of New Hampshire and the Federal government under the Ryan White Care Act, Part A, and other programs. It is reasonably possible that in the near term these contracts could cease, which would cause a severe impact on the Organization and its ability to continue in its present capacity.

Grant Contingency

Amounts received or receivable from grantor agencies are subject to audit and adjustment by such grantor agencies, principally the federal government. Any disallowed claims, including amounts already collected, may constitute a liability of the applicable funds. The amount of expenses which may be disallowed by the grantor cannot be determined at this time, although the Organization expects such amounts, if any, to be immaterial.

NOTE 7 - DESIGNATED NET ASSETS

As of June 30, 2002, the Organization had designated a portion of unrestricted net assets to establish a memorial fund for clients that have passed away. Effective June 30, 2016, the Organization voted to release these funds to unrestricted general funds. As of June 30, 2016 and 2015, designated net assets amounted to \$-0- and \$1,200, respectively.

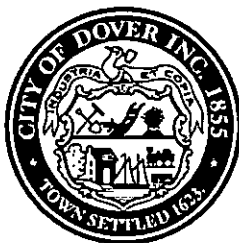
NOTE 8 - TEMPORARILY RESTRICTED NET ASSETS

Temporarily restricted net assets are comprised of the following:

	June 30	
	2016	2015
Broadway Cares	\$ 22,096	\$ 25,950
Rotary	2,437	2,437
Guild	355	355
Phrma	500	500
	<u>\$ 25,388</u>	<u>\$ 29,242</u>

NOTE 9 – SUBSEQUENT EVENTS

The Organization has evaluated subsequent events through September 12, 2016, the date the financial statements were available to be issued, and have not evaluated events after that date. No subsequent events were identified that would require disclosure in the financial statements for the year ended June 30, 2016.



CDBG APPLICATION

CITY OF DOVER, NH COMMUNITY DEVELOPMENT BLOCK GRANT FY2018

APPLICANT INFORMATION

Organization Behavioral Health & Developmental Services of Strafford County dba Community Partners		Tax ID 02-0366120									
Name of Program Security Deposit/ First month's Rent Assistance for Homeless Individuals and Families with Mental Illness of Developmental Disability											
Name of Executive Director Brian Collins											
Mailing Address 113 Crosby Road Dover NH 03280 Physical Address 113 Crosby Road Dover, NH 03820, 50 Chestnut St Dover, NH 03920, 25 Old Dover Road Rochester, NH 03867											
Contact Person Pamela Thyng		Phone 603-516-9300									
E-Mail pthyng@communitypartnersnh.org		Website www.communitypartnersnh.org									
Please Identify the Type of Organization Applying for Funds (Note: More than one may apply) <table border="0"><tr><td>☒ 501(c)(3)</td><td>☐ For-profit authorized under 570.201(o)</td><td>☐ Unit of Government</td></tr><tr><td>☐ Faith-based Organization</td><td>☐ Institution of Higher Education</td><td></td></tr><tr><td colspan="3">☐ Other (Explain):</td></tr></table>			☒ 501(c)(3)	☐ For-profit authorized under 570.201(o)	☐ Unit of Government	☐ Faith-based Organization	☐ Institution of Higher Education		☐ Other (Explain):		
☒ 501(c)(3)	☐ For-profit authorized under 570.201(o)	☐ Unit of Government									
☐ Faith-based Organization	☐ Institution of Higher Education										
☐ Other (Explain):											
Tax ID # 02-0366120											
*DUNS # 149406691		*SAM Expiration Date 5/11/2017									

* *Important notice regarding new mandatory federal reporting requirements:* The Federal Funding Accountability and Transparency Act requires sub-recipients receiving federal funds to register with Dunn and Bradstreet to obtain a DUNS number and complete or renew their registration in the System for Award Management (SAM). For information on how to obtain a DUNS number and register in SAM please visit <https://fedgov.dnb.com/webform> and <https://www.sam.gov/portal/SAM/##11>. Completing these registration processes is free, but may take up to 15 days to complete. The city will not commit funds without this information.

ACTIVITY or PROJECT INFORMATION

ACTIVITY OR PROJECT INFORMATION
Amount of Dover CDBG funds requested for activity/project: \$ 9,000
Provide a very brief summary of the activity or project for which the funds are requested. Keep responses to one or two sentences (i.e. After School Care for K-4th grade students. Repair of homeless shelter roof. Etc.) Community Partners is requesting CDBG funds to provide security deposits and/or first month's rent to homeless individuals and families in Dover with mental illness or a developmental disability. The goal of this program is to aid the target population in obtaining, and maintaining, permanent housing in Dover.
Identify the Dover Consolidated Plan "Specific Objective" that will be met by the proposed activity/project (see page 3 of CDBG Application: Overview & Scoring: Goal and Objectives) Community Partners' CDBG program will enable homeless individuals and those at risk of homelessness who have a mental illness and/or developmental disability to achieve stability and remain in permanent housing. This will reduce the number of requests to the City of Dover Welfare Department and will eliminate the number of homeless individuals who cycle through the system and return to the overburdened shelters.

PROJECT LOCATION
Location(s) where services will be provided or physical improvements will be made. Dover and Rochester, NH offices of Community Partners

PROPOSED SCHEDULE OF PROJECT IMPLEMENTATION – PUBLIC FACILITIES ONLY (Construction Projects/Physical Improvements)	
For this section please identify the major tasks and dates that they will be achieved.	
TASK	DATE

BENEFICIARIES
Beneficiaries: For FY2018 (7/1/17 – 6/30/18) please provide the <i>estimated</i> number of unduplicated Dover beneficiaries that will benefit from this CDBG funded activity or project, not necessarily your entire client population (Note: these numbers will be monitored during the funding year): 18 For FY2016 (7/1/15 – 6/30/16) please provide the number of unduplicated Dover beneficiaries that benefited from this activity or program, not necessarily your entire client population: 12 to date Were Dover CDBG funds used to fund this activity or program in FY2017 (7/1/16 – 6/30/17): Yes If so, how much? \$6484.00 to date

Beneficiary type: ☐ Elderly ☒ Family ☒ Disabled ☐ Homeless ☐ Persons living with AIDS
☐ Other (specify):

ACTIVITY/PROJECT NARRATIVE

Please provide a detailed description for the proposed activity/project. (note: not the organization) This section should describe the use of funds and explain why the funds are needed. Please relate how the CDBG funds will ultimately benefit Dover low-moderate income individuals. Community Partners' CDBG program will enable homeless individuals and those at risk of homelessness who have a mental illness and/or developmental disability to achieve stability and remain in permanent housing. After a client has received CDBG funds to help them obtain housing, Community Partners will continue to provide supportive services and/or case management, helping them to remain in permanent housing. This will reduce the number of requests to the City of Dover Welfare Department and will eliminate the number of homeless individuals who cycle through the system and return to the overburdened shelters.

CDBG funds will be administered through the Behavioral Health Adult Services and Developmental Services Case Management. The former works with individuals with severe and persistent mental illness who may need assistance in managing their daily lives. Services provided in this program include budgeting and financial management, including Representative Payee services if needed, nutrition planning and grocery shopping, vocational services and supports, social skills, supportive counseling, medication monitoring, home care and other life skills, and benefits planning.

Many of the clients in Behavioral Health Adult Services receive assistance with housing-related issues, including help with negotiation and communication with landlords, help with arranging seasonal payment plans to offset utility increases during the winter months, or education and guidance on appropriate tenant behavior (such as making timely rent payments and keeping the apartment clean).

The Developmental Services Case Management program works with adults with developmental disabilities, helping them to manage and coordinate benefits, residential and day programs and activities, and connecting them to mainstream resources. For individuals living independently, Case Managers will advocate for Community Support Services, which assist them with cleaning, shopping, budgeting, and other independent living skills.

All program participants will receive vocational assessments. If employment is a viable option, they will work with vocational staff and Vocational Rehabilitation, to find and secure a job. Vocational staff will assist with job development, job placement, and job coaching, and individuals with mental illness will utilize Supported Employment, an evidence-based practice currently in use at community mental health centers throughout the state.

In addition to employment, program participants will be required to apply for benefits. Their case manager will assist them with determining what benefits they are eligible to receive and will facilitate the application process. These resources may include, but are not limited to, Section 8, Fuel Assistance, Social Security Disability, Medicaid, TANF, and food stamps. Community Partners regularly makes coordinated referrals to the Dover Adult Learning Center, Community Action Partnership of Strafford County, and Goodwin Community Health Center, and can make referrals for education, child-care/parenting, and health programs.

Community Partners is a grantee for two HUD-funded permanent supportive housing programs. Agency staff has a positive relationship with the area homeless shelters and city welfare offices, and there is open communication regarding clients who may benefit from CDBG funds. The program continues to be a valuable source of financial support for people who need assistance in obtaining permanent housing. When one lacks safe and affordable housing, the experience has a significant impact on their mental and emotional health. Community Partners' Dover CDBG program helps to ensure that a vulnerable population will be at less risk.

Community Partners is grateful for the long-standing CDBG support of its Dover program, dating back to 2003. With CDBG funding, Community Partners has been able to effect great positive change for our homeless consumers and those at risk of homelessness in Dover. Over the past 13 years, our Dover CDBG program has impacted nearly 337 individuals, aiding them in securing permanent and affordable housing. We hope that we will be able to continue this important work in FY2018 with CDBG support.

Description of Need: CDBG dollars are critical in financing Community Partners' rental assistance services. The majority of our consumers are in the low to very low-income bracket, and many struggle to find decent, affordable housing for themselves or their family. The need for more affordable housing in Strafford County and Dover, NH is well documented. The 2015 New Hampshire Housing Finance Authority Residential Rental Cost Survey found that the median rent for a two-bedroom apartment, necessary for a

family, was \$1,083. According to the Cost Survey data, between 2011 and 2016, there has been an 11.3% increase in the median gross rent for a two-bedroom apartment in Strafford County. Less than 3% of two-bedroom units in Strafford County are considered affordable to the median income renter household. Increased rental rates, coupled with the poor status of the economy, have converged to make affordable housing nearly impossible for vulnerable populations in our community.

When affordable housing is not available, many are forced into homelessness. According to the New Hampshire Coalition to End Homelessness, the overall number of homeless people in Strafford County has decreased since 2013; the numbers have increased slightly since last year's report. Within this general increase are a slight decrease in chronic homelessness, 1.85% increase in homeless individuals in families, a 66.67% decrease in homeless veterans, and a 50% decrease in people who are homeless and unsheltered / not living in emergency housing.

Even in a better economic climate, the affordability of permanent housing is a constant struggle for the clients served by Community Partners. The vast majority of these individuals are reliant on Social Security Disability benefits as many are unable to work due to their disability. In early 2015, the average monthly disability benefit was \$1,028; this is barely enough to keep an individual above the poverty level (Social Security Administration) and not enough to cover only the rent portion of their expenses. The ever-increasing and staggering costs of an apartment can, oftentimes, exacerbate symptoms of mental illness and lead to further distress for people with disabilities. Providing a specialized funding stream for the populations that Community Partners serves alleviates the burden on City Welfare, leaving those funds for the general public, more of whom are finding they need assistance.

Community Partners' CDBG program will work to ensure that our Dover consumers are placed in sustainable, long-term housing. Consumers will work with Case Managers to establish realistic housing goals, and secure placement in affordable housing. In addition, program participants will utilize CDBG funded security deposits and/or first month's rental payments to help establish themselves in their new residence. Consumers at risk of homelessness will be given the support needed to prevent eviction.

Please indicate who prepared the overall cost estimate for the activity or project. Suzanne Bagdasarian

For this application, written quotes are required for proposed purchase of items exceeding \$3,000.00 or for physical improvements (i.e. building expansion, new roof, replacement of windows, etc.). Please attach quotes you have obtained.

PERFORMANCE OUTCOME MEASURES

Provide the outcomes proposed and the method of measurement. You may list multiple outcomes.

Outcome	Measurement
Ex. Decrease in number of "latch-key kids" Ex. Decreased dependence on emergency care facilities for non-emergency care of low/mod adults	Ex. # of children who participate in afterschool program Ex. Increase in number of low/mod income residents that seek care from health program.
Provide rental and security deposit assistance for people at risk for homelessness.	Assistance will be provided to approximately 6 units for a range of 6-18 people.

ORGANIZATION

DESCRIPTION OF ORGANIZATION

- Please provide a description for the Organization that is undertaking the activity/project.**

Mission: Community Partners mission is to connect our clients and their families to the opportunities and possibilities for full participation in their communities.

Vision: We serve those who experience emotional distress, mental illnesses, substance use disorders, developmental disabilities, chronic health needs, acquired brain disorder, as well as those who are in need of information and referral to access long-term supports and services. We strive to be an organization that

consistently delivers outstanding services and supports that are person-focused and dedicated to full participation in communities. We will take leadership roles in educating our community network, families, and the public to reduce stigma and to increase self-determination and personal empowerment. We are committed to evidence-based and outcome-driven practices. We will invest in our staff to further professional development and foster an environment of innovation.

Community Partners is designated by the State of New Hampshire as the Community Mental Health Center and Area Agency for Developmental Services (DS) in Strafford County and the ServiceLink location for Strafford County.

Behavioral Health (BH) Services include 24/7 crisis intervention services, group, individual and family therapy, youth and family services, community support programs for persons with severe and persistent mental illness, psychiatry, and medication monitoring.

Developmental Services (DS) include case management, adult residential and day programs, community support services, family support, including respite and transition planning, vocational supports, and nursing. Family-Centered Early Supports and Services are also available for children from birth to age three with a developmental disability or delay and their families. Partners in Health is available for children with a chronic health condition.

Community Partners served over 4,300 individuals and families in Fiscal Year 2016; of this total, 1,135 (26%) were Dover residents. The agency's mission is to promote respect, wellness, full inclusion, and empowerment of individuals and their families who experience mental illness, emotional distress, developmental disability, chronic health need, or acquired brain disorder. Community Partners' strategic goals are to ensure responsive and effective services to consumers and families, evolve as a teaching and learning organization, and demonstrate continuous quality improvement and compliance.

Community Partners is overseen by the Board of Directors and executive officers with directors and managers in each department. The agency is now one year into a five year strategic plan with the intention of increasing the efficient delivery and quality of its programming. This agency wide examination has already proved to be valuable in developing innovative programming to our clients and their families.

AUDIT AND EVALUATION

Does your organization have an annual CPA Audit? Yes

If yes, please submit most recent Audit. See attached.

Is your organization evaluated by outside agencies or programs? Yes

If yes, please note the agency/program and how often the evaluation occurs. Community Partners is evaluated by the New Hampshire Bureau of Behavioral Health through quarterly billing reports, annual work plan submission, contractual outcomes and a formal re-approval process every five years, scheduled for 2017. The New Hampshire Bureau of Developmental Services requires monthly billing and attendance reports, strategic plan submission, and a formal re-designation process. In the past, this process occurred every five years, but it has recently shifted to an annual procedure. We are also required to achieve client outcomes for each funded program.

BOARD OF DIRECTORS	
Name	Residence (city/town)
Chris Roundy	Dover, NH
Kathleen Boisclair	E. Rochester, NH
Anthony Demers	Newfields, NH
Ann Landry	Dover, NH
Ken Muske	Portsmouth, NH
John Guy	Dover, NH
Kristine Baber	Dover, NH
John Lowy	Durham, NH
Daniel Cappiello	Barrington, NH
Wayne Goss	Dover, NH
Kerri Larkin	Dover, NH
Bryant Hardwick	Dover, NH
Tracy Hayes	Dover, NH
Sharon Reynolds	Dover, NH

BUDGET

Use box A or B below to provide a budget for the proposed *Public Service (A.)* or *Public Facility (B.)*. Include all proposed expenses.

A. Public Services (Non-Construction Projects)			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Office Supplies			
Utilities			
Repairs/Maintenance			
Travel			
Salaries (List relevant positions)			
Other: Rental and security deposits	9,000		9,000
TOTAL PROPOSED BUDGET:	9,000	0	9,000

B. Public Facilities: Construction Projects/Physical Improvements			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Hard Costs <u>Note:</u> Federal wage rates may apply for some construction projects. Applicants are encouraged to obtain estimates that reflect wage rates estimates.			
Construction			
Other (list)			
Total Hard Costs			
Soft Costs			
Acquisition			
Appraisals			
Design/Engineering			
Other(list):			
Total Soft Costs			
TOTAL PROPOSED BUDGET:			

FUNDING SOURCES

Other Funding Sources - please indicate the source and amount of other funding committed, pending or proposed for this project, if any. *Do not include Dover CDBG amount requested.*

Funding Source: (Name(s) of funding source(s))	Total Amount (\$):	Committed, Pending or Proposed Amount (\$):	
Federal:	0	Committed	0
		Pending	0
		Proposed	0
State:	0	Committed	0
		Pending	0
		Proposed	0
Local:	0	Committed	0
		Pending	0
		Proposed	0
Private:	0	Committed	0
		Pending	0
		Proposed	0
Portsmouth CDBG:	0	Committed	0
		Pending	0
		Proposed	0
Rochester CDBG:	0	Committed	0
		Pending	0
		Proposed	0
Other: In Kind	0	Committed	0
		Pending	0
		Proposed	0
Total: 0	0	Committed	0
		Pending	0
		Proposed	0

Organizational Commitment: For Public Facility Projects (building addition, new roof, replacement windows, etc.) – indicate the amount of funds that the organization will be contributing to the project.

Funding Source: (Name of Parent Organization)	Total Amount (\$) to be Contributed by Parent Organization	Committed or Proposed Amount (\$)	
		Committed	
		Proposed	
Total:	0		0

AGENCY BUDGET

Please provide a breakdown of your organization's overall annual budget. Please indicate the dates of your budget period, i.e. July 1 to June 30 or January 1 to December 31.

Budget Period: from 7/1/2016 to 6/30/2017	Current Year	Next Year (projected)
REVENUES		
Federal Funds	190,946	190,946
State Funds	26,054,955	26,054,955
Foundations/Private Contributions	28,333	28,333
United Way	22,341	22,341
Fundraising or other income	5,000	5,000
Other (describe) local govt, program fees, Part C/DCYF	2,210,533	2,210,533
Community Dev. Block Grant (include anticipated request)	9,000	9,000
TOTAL REVENUE	28,521,108	28,521,108
EXPENSES		
Salaries	11,917,618	11,917,618
Fringe Benefits	3,086,402	3,086,402
Supplies (include printing/copying)	122,000	122,000
Travel	565,500	565,500
Training	85,900	85,900
Communications	204,400	204,400
Audit	76,000	76,000
Property Maintenance	120,000	120,000
Service Contracts	4,330,433	4,330,433
Construction Supplies/Materials	57,950	57,950
Other (describe) Legal, Professional, Occupancy, Insurance	7,954,905	7,954,905
TOTAL EXPENSES	28,521,108	28,521,108
NET (Income - Expenses)	0	0

By signing below, the Authorized Official affirms: The organization's commitment to implement the proposed activity/project; that all information presented is true and accurate to the best of their knowledge; and he/she is authorized to submit this application;

Submitted by: Brian Collins 11-30-16
Authorized Official - signature Date

Brian Collins
Print Name

Executive Director
Print Title



CONSOLIDATED FINANCIAL STATEMENTS

and

SUPPLEMENTARY INFORMATION

June 30, 2016 and 2015

With Independent Auditor's Report





INDEPENDENT AUDITOR'S REPORT

Board of Directors
Behavioral Health & Developmental Services of Strafford County, Inc.
d/b/a Community Partners and Subsidiaries

We have audited the accompanying consolidated financial statements of Behavioral Health & Developmental Services of Strafford County, Inc. d/b/a Community Partners and Subsidiaries (the Organization), which comprise the consolidated statements of financial position as of June 30, 2016 and 2015, and the related consolidated statements of activities, functional revenue and expenses and cash flows for the years then ended, and the related notes to the consolidated financial statements.

Management's Responsibility for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with U.S. generally accepted accounting principles; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with U.S. generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of the Organization, as of June 30, 2016 and 2015, and the changes in their net assets and their cash flows for the years then ended in accordance with U.S. generally accepted accounting principles.

Other Matter

Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The consolidating statements of financial position and consolidating statements of activities are presented for purposes of additional analysis, rather than to present the financial position and changes in net assets of the individual entities, and are not a required part of the consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audits of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with U.S. generally accepted auditing standards. In our opinion, the information is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

Berry Dunn McNeil & Parker, LLC

Manchester, New Hampshire
November 2, 2016

**BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A
COMMUNITY PARTNERS AND SUBSIDIARIES**

Consolidated Statements of Financial Position

June 30, 2016 and 2015

	<u>2016</u>	<u>2015</u>
ASSETS		
Cash and cash equivalents	\$ 1,880,722	\$ 1,086,881
Restricted cash	102,657	120,640
Accounts receivable, net of allowance for doubtful accounts	1,529,747	2,061,351
Grants receivable	250,836	99,915
Prepaid expenses	192,015	142,263
Property and equipment, net	<u>2,017,475</u>	<u>2,179,021</u>
 Total assets	 <u><u>\$ 5,973,452</u></u>	 <u><u>\$ 5,690,071</u></u>
LIABILITIES AND NET ASSETS		
Liabilities		
Accounts payable and accrued expenses	\$ 2,032,650	\$ 1,989,421
Estimated third-party liability	381,472	249,517
Loan fund	89,204	89,115
Notes payable	<u>1,129,241</u>	<u>1,240,491</u>
 Total liabilities	 <u><u>3,632,567</u></u>	 <u><u>3,568,544</u></u>
Net assets		
Unrestricted	2,340,559	2,103,636
Temporarily restricted	<u>326</u>	<u>17,891</u>
 Total net assets	 <u><u>2,340,885</u></u>	 <u><u>2,121,527</u></u>
 Total liabilities and net assets	 <u><u>\$ 5,973,452</u></u>	 <u><u>\$ 5,690,071</u></u>

The accompanying notes are an integral part of these consolidated financial statements.

**BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A
COMMUNITY PARTNERS AND SUBSIDIARIES**

Consolidated Statements of Activities

Years Ended June 30, 2016 and 2015

	<u>2016</u>	<u>2015</u>
Changes in unrestricted net assets		
Public support and revenue		
Medicaid revenue	\$ 23,221,683	\$ 23,479,303
Medicare revenue	233,703	196,145
Client resources	1,512,323	1,481,753
Contract revenue	1,317,071	1,077,744
Grant income	729,354	674,320
Interest income	414	49
Other program revenue	145,867	105,846
Public support	115,856	67,734
Other revenue	<u>208,987</u>	<u>490,728</u>
Total public support and revenue	27,485,258	27,573,622
Net assets released from restrictions	<u>26,935</u>	<u>31,573</u>
Total public support, revenue, and releases	<u>27,512,193</u>	<u>27,605,195</u>
Expenses		
Program services		
Case management	872,909	943,225
Day programs and community support	4,173,872	4,405,287
Early support services and youth and family	3,212,331	3,412,749
Family support	575,952	579,621
Residential services	5,213,432	5,023,498
Combined residential, day and consolidated services	6,451,472	6,972,601
Adult services	2,705,789	3,716,191
Emergency services	467,770	620,806
Other	<u>940,101</u>	<u>842,840</u>
Total program expenses	24,613,628	26,516,818
Supporting services		
General management	<u>2,661,643</u>	<u>2,686,004</u>
Total expenses	<u>27,275,271</u>	<u>29,202,822</u>
Change in unrestricted net assets	<u>236,922</u>	<u>(1,597,627)</u>
Changes in temporarily restricted net assets		
United Way allocation	9,371	5,364
Net assets released from restrictions	<u>(26,935)</u>	<u>(31,573)</u>
Change in temporarily restricted net assets	<u>(17,564)</u>	<u>(26,209)</u>
Change in net assets	219,358	(1,623,836)
Net assets, beginning of year	<u>2,121,527</u>	<u>3,745,363</u>
Net assets, end of year	\$ <u>2,340,885</u>	\$ <u>2,121,527</u>

The accompanying notes are an integral part of these consolidated financial statements.

BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A COMMUNITY PARTNERS AND SUBSIDIARIES

Consolidated Statement of Functional Revenue and Expenses

Year Ended June 30, 2016

	Case Management	Day Programs and Community Support	Early Support Services and Youth and Family	Family Support	Residential Services	Combined Residential, Day and Consolidated Services	Adult Services	Emergency Services	Other	Total Program	General Management	Total
Public support and revenue												
Medicaid revenue	\$ 853,657	\$ 3,770,000	\$ 3,663,028	\$ 218,963	\$ 5,216,976	\$ 6,983,290	\$ 2,394,701	\$ 80,825	\$ 40,443	\$ 23,221,683	\$ -	\$ 23,221,683
Medicare revenue	-	43,983	(4,132)	-	-	-	208,655	(15,803)	-	233,703	-	233,703
Client resources	26,518	29,358	318,535	(682)	666,612	308,642	134,095	28,943	-	1,512,023	300	1,512,323
Contract revenue	40,502	293,723	303,776	38,565	-	30,635	60,310	103,598	162,079	1,033,188	283,883	1,317,071
Grant income	-	20,288	115,549	4,462	-	15,595	61,148	-	507,312	724,354	5,000	729,354
Interest income	-	-	-	-	-	-	-	-	-	-	414	414
Other program revenue	-	68,895	998	-	8,776	48,758	-	-	300	127,527	18,340	145,867
Public support	13,180	9,322	10,106	41,038	-	-	25	-	37,882	111,553	4,303	115,856
Other revenue	599	21,758	2,325	95	11,157	5,533	20,783	-	127,163	189,414	19,573	208,987
Total functional public support and revenue	934,456	4,257,129	4,410,186	302,441	5,903,521	7,392,453	2,880,717	197,363	875,179	27,153,445	331,813	27,485,258
Net assets released from restrictions	4,800	-	4,571	-	-	-	-	-	17,564	26,935	-	26,935
Total public support, revenue and releases	939,256	4,257,129	4,414,757	302,441	5,903,521	7,392,453	2,880,717	197,363	892,743	27,180,380	331,813	27,512,193
Expenses												
Salaries and wages	539,414	2,224,652	2,156,753	141,831	647,496	1,680,037	1,575,073	326,476	473,703	9,765,435	1,700,706	11,466,141
Employee benefits	128,623	541,750	431,718	47,548	165,840	293,106	545,259	82,088	168,150	2,405,082	264,665	2,669,747
Payroll taxes	39,167	169,398	152,590	10,508	48,012	123,820	109,214	23,277	49,066	725,050	87,571	812,621
Contracted substitute staff	998	7,338	8,250	333	1,219	2,217	6,783	1,120	271	26,529	69,632	98,161
Client treatment services	-	9,654	624	217,924	3,121,465	1,386,959	9,276	-	18,625	4,764,527	500	4,765,027
Client therapies	25,575	1,966	91,842	2,165	23,021	21,932	54,212	-	-	220,713	1,803	222,516
Professional fees and consultants	52,641	44,662	47,966	10,949	21,809	41,143	50,929	8,976	9,939	289,014	108,440	397,454
Subcontractors	-	480,118	-	-	1,043,611	2,429,652	1,991	-	-	3,955,372	-	3,955,372
Staff development/training	1,209	3,416	13,222	2,263	971	9,088	11,639	581	1,975	44,364	33,977	78,341
Rent	-	64,405	44,107	-	2,450	2,450	68,087	-	18,560	200,059	37,191	237,250
Utilities	2,704	34,248	12,474	2,704	10,853	29,596	10,611	-	17,106	120,396	12,753	133,149
Building maintenance and repairs	1,094	22,833	9,980	1,049	15,145	27,338	10,128	540	6,091	94,196	12,244	106,440
Other occupancy costs	1,721	27,726	11,961	1,721	5,094	28,302	15,851	-	19,633	112,009	10,797	122,806
Office	1,227	15,829	8,784	875	3,489	6,089	4,083	667	7,903	48,946	51,281	100,227
Building/household	642	15,439	5,215	228	3,521	7,214	5,567	507	1,272	39,603	11,065	50,668
Client consumables	1,572	24,613	2,970	6,025	10,315	58,067	3,100	94	1,620	108,376	3,046	111,422
Medical	-	263	274	-	2,742	80	330	25	4	3,718	463	4,181
Equipment maintenance	5,421	25,010	23,767	2,623	8,795	16,973	29,255	4,485	5,110	121,439	27,300	148,739
Depreciation	22,943	81,576	52,957	7,648	28,042	50,985	50,139	7,690	3,648	305,628	76,717	382,345
Advertising	-	-	-	-	-	-	-	-	417	417	2,577	2,994
Printing	34	239	4,535	11	86	166	161	26	8	5,266	(16)	5,250
Telephone/communications	1,818	32,929	24,086	401	14,563	25,374	24,842	1,521	30,873	156,407	26,170	182,577
Postage/shipping	823	3,360	4,338	266	975	1,772	5,065	620	1,732	18,951	3,709	22,660
Transportation	20,146	243,510	42,121	2,750	16,705	139,079	54,613	1,120	7,189	527,233	12,320	539,553
Assistance to individuals	9,917	37,947	600	107,013	-	38,723	-	-	25,884	220,084	621	220,705
Insurance	11,984	54,994	55,031	3,994	14,647	26,631	51,876	7,069	22,930	249,156	34,781	283,937
Membership dues	249	948	2,639	83	304	552	2,505	204	57	7,539	64,282	71,821
Interest	2,947	4,716	5,371	2,388	2,113	4,039	4,009	653	10,928	37,164	5,651	42,815
Other	40	337	156	2,654	49	90	191	31	37,407	40,955	1,397	42,352
Total expenses	872,909	4,173,872	3,212,331	575,952	5,213,432	6,451,472	2,705,789	467,770	940,101	24,613,628	2,661,643	27,275,271
Increase (decrease) in unrestricted net assets	\$ 66,347	\$ 83,257	\$ 1,202,426	\$ (273,511)	\$ 690,089	\$ 940,981	\$ 174,928	\$ (270,407)	\$ (47,358)	\$ 2,566,752	\$ (2,329,830)	\$ 236,922

The accompanying notes are an integral part of these consolidated financial statements.

BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A COMMUNITY PARTNERS AND SUBSIDIARIES

Consolidated Statement of Functional Revenue and Expenses

Year Ended June 30, 2015

	Case Management	Day Programs and Community Support	Early Support Services and Youth and Family	Family Support	Residential Services	Combined Residential, Day and Consolidated Services	Adult Services	Emergency Services	Other	Total Program	General Management	Total
Public support and revenue												
Medicaid revenue	\$ 794,617	\$ 3,191,487	\$ 3,578,586	\$ 211,819	\$ 5,539,379	\$ 6,510,476	\$ 3,533,900	\$ 86,352	\$ 32,667	\$ 23,479,303	\$ -	\$ 23,479,303
Medicare revenue	-	10,336	5,226	-	-	-	190,776	-	-	196,145	-	196,145
Client resources	30,614	42,595	268,879	8,945	672,490	331,941	58,066	88,354	(131)	1,481,753	-	1,481,753
Contract revenue	-	297,674	56,080	116,077	-	-	121,690	99,265	113,998	804,784	272,960	1,077,744
Grant income	35	12,772	116,700	27,152	77	4,405	46,983	-	405,180	613,304	61,016	674,320
Interest income	-	-	-	-	-	-	-	-	-	-	49	49
Other program revenue	-	63,790	4,838	-	-	31,218	-	-	-	99,846	5,000	105,846
Public support	13,782	11,036	3,742	8,465	-	-	1,080	-	25,181	63,286	4,448	67,734
Other revenue	623	18,802	61,680	1,500	10,377	45,980	35,221	-	117,697	291,880	198,848	490,728
Total functional public support and revenue	839,671	3,648,492	4,095,731	373,958	6,222,323	6,924,020	3,987,716	243,778	694,612	27,030,301	543,321	27,573,622
Net assets released from restrictions	5,364	-	-	-	-	-	-	-	26,209	31,573	-	31,573
Total public support, revenue and releases	845,035	3,648,492	4,095,731	373,958	6,222,323	6,924,020	3,987,716	243,778	720,821	27,061,874	543,321	27,605,195
Expenses												
Salaries and wages	540,967	2,341,280	2,131,188	185,630	620,773	1,565,706	2,296,944	450,457	441,460	10,574,405	1,494,729	12,069,134
Employee benefits	154,098	571,288	489,520	52,532	189,886	342,794	560,037	88,770	154,475	2,603,400	356,266	2,959,666
Payroll taxes	39,380	171,674	154,797	13,562	45,278	116,227	176,376	31,821	38,288	787,403	86,097	873,500
Contracted substitute staff	45	6,754	1,327	15	55	100	1,366	35	10	9,707	52,227	61,934
Client treatment services	5,300	11,214	2,647	184,715	3,105,264	1,430,430	16,120	-	30,416	4,786,106	499	4,786,605
Client therapies	26,598	2,118	37,819	3,331	27,098	19,572	46,127	-	-	162,663	1,058	163,721
Professional fees and consultants	78,842	55,195	183,413	11,942	34,140	36,386	141,290	20,004	10,297	571,509	148,113	719,622
Subcontractors	-	498,847	-	-	816,504	3,020,420	1,567	-	-	4,337,338	-	4,337,338
Staff development/training	3,818	50,510	51,530	1,615	2,976	10,105	22,303	2,407	2,412	147,677	26,023	173,700
Rent	-	60,390	53,843	-	2,860	10,521	78,054	-	22,568	229,236	76,014	305,250
Utilities	3,283	39,724	13,069	3,283	14,763	31,737	15,125	-	15,853	136,837	24,847	161,684
Building maintenance and repairs	1,235	21,879	8,689	1,233	35,016	19,269	9,328	502	2,691	99,842	16,575	116,417
Other occupancy costs	1,721	28,964	11,712	1,721	6,925	20,771	29,422	-	13,952	115,188	22,926	138,114
Office	3,064	19,747	11,246	1,362	4,449	13,421	13,303	1,840	5,297	73,729	58,673	132,402
Building/household	973	16,811	4,047	831	3,888	6,221	4,199	156	2,863	39,989	9,999	49,988
Client consumables	1,792	29,963	5,956	6,267	30,000	57,408	12,337	45	105	143,873	3,754	147,627
Medical	-	96	287	-	3,696	2,842	828	19	3	7,771	663	8,434
Equipment maintenance	5,099	25,188	22,858	2,525	8,650	16,319	27,783	4,250	4,168	116,840	35,847	152,687
Depreciation	22,436	78,771	56,144	7,479	27,421	49,857	56,179	8,740	3,742	311,769	88,587	400,356
Advertising	139	554	481	54	187	326	554	89	1,600	3,984	1,188	5,172
Printing	16	138	4,478	5	287	199	(51)	96	98	5,266	2,078	7,344
Telephone/communications	1,956	34,878	23,153	415	12,511	31,041	25,787	1,891	22,032	153,664	50,609	204,273
Postage/shipping	552	2,781	3,174	184	425	2,727	3,816	499	512	14,670	6,062	20,732
Transportation	24,462	272,475	46,852	3,168	18,282	132,430	117,838	1,758	7,767	625,032	(381)	624,651
Assistance to individuals	14,850	25,891	-	89,947	-	9,925	400	-	29,529	170,542	170,812	170,812
Insurance	8,509	30,254	36,163	2,836	10,400	18,908	48,800	6,618	1,890	164,378	41,816	206,196
Membership dues	286	1,292	1,862	95	424	636	4,224	222	113	9,154	66,096	75,250
Interest	2,767	4,642	6,167	2,286	1,125	5,756	4,761	561	8,194	36,259	9,555	45,814
Other	1,037	968	50,327	2,587	215	547	374	26	22,505	78,587	5,810	84,397
Total expenses	943,225	4,405,287	3,412,749	579,621	5,023,498	6,972,601	3,716,191	620,806	842,840	26,516,818	2,688,004	29,202,822
(Decrease) increase in unrestricted net assets	<u>\$ (98,190)</u>	<u>\$ (756,795)</u>	<u>\$ 682,982</u>	<u>\$ (205,663)</u>	<u>\$ 1,198,825</u>	<u>\$ (48,581)</u>	<u>\$ 271,525</u>	<u>\$ (377,028)</u>	<u>\$ (122,019)</u>	<u>\$ 545,056</u>	<u>\$ (2,142,683)</u>	<u>\$ (1,597,627)</u>

The accompanying notes are an integral part of these consolidated financial statements.

**BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A
COMMUNITY PARTNERS AND SUBSIDIARIES**

Consolidated Statements of Cash Flows

Years Ended June 30, 2016 and 2015

	<u>2016</u>	<u>2015</u>
Cash flows from operating activities		
Change in net assets	\$ 219,358	\$ (1,623,836)
Adjustments to reconcile change in net assets to net cash provided (used) by operating activities		
Depreciation	382,345	400,356
Change in allowance for doubtful accounts	86,100	311,888
Decrease (increase) in		
Restricted cash	17,983	40,546
Accounts receivable, trade	445,504	621,558
Grants receivable	(150,921)	6,594
Prepaid expenses	(49,752)	91,384
Increase (decrease) in		
Accounts payable and accrued expenses	9,977	(170,926)
Estimated third-party liability	131,955	(538,387)
Loan fund	<u>89</u>	<u>119</u>
Net cash provided (used) by operating activities	<u>1,092,638</u>	<u>(860,704)</u>
Cash flows from investing activities		
Acquisition of equipment	<u>(111,427)</u>	<u>(138,355)</u>
Cash flows from financing activities		
Proceeds from long-term borrowings	-	550,000
Principal payments on long-term borrowings	<u>(187,370)</u>	<u>(152,293)</u>
Net cash (used) provided by financing activities	<u>(187,370)</u>	<u>397,707</u>
Net increase (decrease) in cash and cash equivalents	793,841	(601,352)
Cash and cash equivalents, beginning of year	<u>1,086,881</u>	<u>1,688,233</u>
Cash and cash equivalents, end of year	<u>\$ 1,880,722</u>	<u>\$ 1,086,881</u>
Supplemental disclosures		
Acquisition of property and equipment with long-term borrowings	\$ <u>76,120</u>	\$ <u>-</u>
Acquisition of property and equipment with accounts payable	\$ <u>33,252</u>	\$ <u>-</u>
Noncash transaction - Refinancing of long-term debt	\$ <u>355,000</u>	\$ <u>-</u>

The accompanying notes are an integral part of these consolidated financial statements.

**BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A
COMMUNITY PARTNERS AND SUBSIDIARIES**

Notes to Consolidated Financial Statements

June 30, 2016 and 2015

Nature of Activities

Behavioral Health & Developmental Services of Strafford County, Inc. d/b/a Community Partners (Community Partners) is a New Hampshire nonprofit corporation providing a wide range of community-based services (see consolidated statement of functional revenue and expenses for various programs offered) for individuals, and their families, with developmental disabilities and/or mental illness. Community Partners also supports families with children who have chronic health needs. Community Partners is currently operating as two divisions: Developmental Services and Behavioral Health Services.

Community Partners is the sole shareholder of Lighthouse Management Services, Inc., which was organized to perform accounting and management functions for other not-for-profit entities.

Community Partners is the sole beneficiary of the Community Partners Foundation (the Foundation), which was established exclusively for the benefit and support of Community Partners. To that end, the Foundation receives and accepts gifts and funds.

The Foundation received and disbursed the following funds:

	<u>2016</u>	<u>2015</u>
Funds received	\$ 36,782	\$ 23,601
Funds disbursed	<u>31,916</u>	<u>17,224</u>
	<u>\$ 4,866</u>	<u>\$ 6,377</u>

The Foundation has received and disbursed the following funds since its inception in 2007:

Funds received	\$ 315,550
Funds disbursed	<u>234,493</u>
	<u>\$ 81,057</u>

1. Summary of Significant Accounting Policies

Principles of Consolidation

The consolidated financial statements include the accounts of Community Partners, Lighthouse Management Services, Inc., and the Foundation (collectively, the Organization). All material intercompany balances and transactions have been eliminated in consolidation.

The Organization prepares its consolidated financial statements in accordance with U.S. generally accepted accounting principles (U.S. GAAP) established by the Financial Accounting Standards Board (FASB). References to U.S. GAAP in these footnotes are to the FASB Accounting Standards Codification (ASC).

**BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A
COMMUNITY PARTNERS AND SUBSIDIARIES**

Notes to Consolidated Financial Statements

June 30, 2016 and 2015

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Basis of Presentation

Net assets and revenues, expenses, gains, and losses are classified as follows based on the existence or absence of donor-imposed restrictions:

Unrestricted net assets - Net assets that are not subject to donor-imposed stipulations.

Temporarily restricted net assets - Net assets subject to donor-imposed stipulations that may be or will be met by actions of the Organization and/or the passage of time. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the consolidated statement of activities as net assets released from restrictions.

Permanently restricted net assets - Net assets subject to donor-imposed stipulations that they be maintained permanently by the Organization. As of June 30, 2016 and 2015, the Organization had no permanently restricted net assets.

Contributions

Contributions are considered to be available for unrestricted use unless specifically restricted by the donor. Amounts received that are designated for future periods or restricted by the donor for a specific purpose are reported as increases in temporarily or permanently restricted net assets, depending on the nature of the restrictions. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. The Organization records donor-restricted contributions whose restrictions are met in the same reporting period as unrestricted support in the year of the gift.

Income Taxes

The Organization is exempt from federal income taxes under Section 501(c)(3) of the U.S. Internal Revenue Code to operate as a not-for-profit organization.

FASB ASC Topic 740, *Income Taxes*, establishes financial accounting and disclosure requirements for recognition and measurement of tax positions taken or expected to be taken. Management has reviewed the tax provisions for the Organization under FASB ASC Topic 740 and determined it did not have a material impact on the Organization's consolidated financial statements.

**BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A
COMMUNITY PARTNERS AND SUBSIDIARIES**

Notes to Consolidated Financial Statements

June 30, 2016 and 2015

Cash and Cash Equivalents

The Organization considers all highly liquid investments with an original maturity date of less than three months to be cash equivalents. The cash equivalents represent repurchase agreements as of June 30, 2016 and 2015.

The Organization maintains its cash in bank deposit accounts which, at times, may exceed federally-insured limits. It has not experienced any losses in such accounts. Management believes it is not exposed to any significant risk on cash and cash equivalents.

Accounts Receivable

Accounts receivable are stated at the amount management expects to collect from balances outstanding at year-end. Management provides for probable uncollectible accounts after considering each category of receivable individually, and estimates an allowance according to the nature of the receivable. Allowances are estimated from historical performance and projected trends. Balances that are still outstanding after management has used reasonable collection efforts are written off through a charge to the valuation allowance and a credit to trade accounts receivable. As of June 30, 2016 and 2015, allowances were recorded in the amount of \$551,100 and \$465,000, respectively.

Property and Equipment

Property and equipment are recorded at cost, while donations of property and equipment are recorded as support at their estimated fair value at the date of donation. Expenditures for repairs and maintenance are charged against operations. Renewals and betterments which materially extend the life of the assets are capitalized. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used to acquire property and equipment are reported as restricted contributions. Absent donor stipulations regarding how long those donated assets must be maintained, the Organization reports expirations of donor restrictions when the donated or acquired assets are placed in service. The Organization reclassifies temporarily restricted net assets to unrestricted net assets at that time. Depreciation is provided on the straight-line method in amounts designed to amortize the costs of the assets over their estimated lives as follows:

Buildings and improvements	15-39 years
Equipment and furniture	3-7 years
Vehicles	5 years

Estimated Third-Party Liability

The Organization's estimated third-party liability consist of funds received in advance for services to be performed at a later date, amounts due to Medicaid and estimated amounts due to Medicaid from eligibility, certification and other audits, and certain pass-through funds.

**BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A
COMMUNITY PARTNERS AND SUBSIDIARIES**

Notes to Consolidated Financial Statements

June 30, 2016 and 2015

Functional Allocation of Expenses

The costs of providing various programs and activities are summarized on a functional basis in the consolidated statements of activities and functional revenue and expenses. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

2. Restricted Cash

The Organization serves as a pass-through entity for the Council for Children and Adolescents with Chronic Health Conditions Loan Guaranty Program. This program is operated and administered by a New Hampshire bank. As of June 30, 2016 and 2015, the Organization held cash totaling \$89,204 and \$89,115, respectively, which was restricted for this program. A corresponding amount has been recorded as a liability.

Additionally, the Organization administers the Council for Children and Adolescents with Chronic Health Conditions Program. As of June 30, 2016 and 2015, the Organization held cash totaling \$13,453 and \$29,815, respectively, which was restricted for this program. A corresponding amount has been recorded as a liability.

In 2015, The Organization had a self-funded insurance policy and, correspondingly, a health reimbursement account to pay for a portion of employee medical expenses. As of June 30, 2015, total cash restricted for this use was \$1,710. There was no restricted cash balance as of June 30, 2016.

3. Property and Equipment

Property and equipment consisted of the following:

	<u>2016</u>	<u>2015</u>
Land and buildings	\$ 1,859,893	\$ 1,859,893
Building improvements	1,569,604	1,562,119
Vehicles	718,116	710,696
Equipment and furniture	<u>2,929,831</u>	<u>2,784,032</u>
	7,077,444	6,916,740
Less accumulated depreciation	<u>5,059,969</u>	<u>4,737,719</u>
	<u>\$ 2,017,475</u>	<u>\$ 2,179,021</u>

4. Line of Credit

The Organization has a revolving line of credit agreement with a bank amounting to \$1,500,000, collateralized by a security interest in all business assets. Monthly interest payments on the unpaid principal balance are required at the rate of 1% over the bank's stated index, which was 4.50% at June 30, 2016 and 2015. The Organization is required to annually observe 30 consecutive days without an outstanding balance. At June 30, 2016 and 2015, there was no outstanding balance on the line.

**BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A
COMMUNITY PARTNERS AND SUBSIDIARIES**

Notes to Consolidated Financial Statements

June 30, 2016 and 2015

5. Notes Payable

Notes payable consisted of the following:

	<u>2016</u>	<u>2015</u>
Note payable to a bank, payable in monthly installments of \$1,117, including interest at 4.15%, through April 2016 with one final payment of all unpaid principal and interest due at maturity; collateralized by certain real estate. The note is a participating loan with New Hampshire Health and Education Facilities Authority (NHHEFA). This note was refinanced during 2016.	\$ -	\$ 116,549
Note payable to a bank, payable in monthly installments of \$2,272, including interest at 4.15%, through July 2017 with one payment of all unpaid principal and interest due at maturity; collateralized by certain real estate. The note is a participating loan with NHHEFA.	238,038	256,784
Note payable to a bank, payable in monthly installments of \$3,167, including interest at 3.24%, through April 2019; collateralized by certain equipment.	102,707	136,695
Note payable to a bank, payable in monthly installments of \$2,464, including interest at 4.15%, through April 2016 with one final payment of all unpaid principal and interest due at maturity; collateralized by certain real estate and an assignment of certain leases and rents. The note is a participating loan with NHHEFA. This note was refinanced during 2016.	-	257,123
Note payable to a bank, payable in monthly installments of \$9,985, including interest at 3.37%, through September 2019 with one final payment which shall be the unpaid balance at maturity; collateralized by certain equipment.	368,150	473,340
Note payable to NHHEFA, payable in monthly installments of \$3,419, including interest at 1.00%, through April 2021 with one final payment of all unpaid principal and interest due at maturity; collateralized by certain real estate.	193,554	-
Mortgage note payable to a bank, payable in monthly installments of \$1,580, including interest at 4.12%, through April 2026 with one final payment which shall be the unpaid balance at maturity; collateralized by certain real estate.	152,896	-

**BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A
COMMUNITY PARTNERS AND SUBSIDIARIES**

Notes to Consolidated Financial Statements

June 30, 2016 and 2015

Four loans payable to a bank, payable in monthly installments totaling \$1,436, including interest at 4.89%, through April 2021 with one final monthly payment which shall be the unpaid balance at maturity; collateralized by vehicles.

<u>73,896</u>	<u>-</u>
<u>\$ 1,129,241</u>	<u>\$ 1,240,491</u>

The scheduled maturities of long-term debt are as follows:

2017	\$ 228,000
2018	436,000
2019	217,000
2020	101,000
2021	62,000
Thereafter	<u>85,241</u>
	<u>\$ 1,129,241</u>

Cash paid for interest approximates interest expense.

6. Temporarily Restricted Net Assets

At June 30, 2016 and 2015, temporarily restricted net assets were \$326 and \$17,891, respectively. The Organization's restricted assets consist of vehicles contributed to the Organization from the State of New Hampshire under grant programs. These contributed vehicles are to be used for the transportation of the Organization's clients.

7. Commitments and Contingencies

Operating Leases

The Organization leases various office facilities and equipment under operating lease agreements. Expiration dates range from November 2016 through August 2018. Total rent expense charged to operations was \$237,250 in 2016 and \$305,250 in 2015.

Future minimum operating lease payments are as follows:

2017	\$ 263,172
2018	165,316
2019	<u>778</u>
	<u>\$ 429,266</u>

**BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A
COMMUNITY PARTNERS AND SUBSIDIARIES**

Notes to Consolidated Financial Statements

June 30, 2016 and 2015

Self-Insurance

In 2015, the Organization had a self-insured healthcare plan for substantially all of its employees. The Organization obtained reinsurance coverage to limit its exposure associated with this plan individually of \$30,000 with an aggregate limit of 125% of the expected claims. At June 30, 2015, the Organization had accrued approximately \$296,000 under the self-insurance contract. During 2016, the Organization terminated its self-insured healthcare plan and reverted back to a fully-funded healthcare plan for its employees. At June 30, 2016, the Organization maintained an accrual on claims under its self-insured healthcare plan of \$150,000 for claims incurred before the termination of the self-insured healthcare plan but not yet reported.

Litigation

The Organization is involved in litigation arising in the normal course of business. After consultation with legal counsel, management estimates these matters will be resolved without a material adverse effect on the Organization's future financial position or results of operations.

8. Concentrations

For the years ended June 30, 2016 and 2015, approximately 84% and 85%, respectively, of the support and revenue of the Organization was derived from Medicaid. The future existence of the Organization is dependent upon continued support from Medicaid.

The accounts receivable due from Medicaid were as follows:

	<u>2016</u>	<u>2015</u>
Developmental Services	\$ 1,097,832	\$ 1,310,859
Behavioral Health Services	<u>312,439</u>	<u>353,377</u>
	<u>\$ 1,410,271</u>	<u>\$ 1,664,236</u>

In order for the Developmental Services division of the Organization to receive this support, it must be formally approved by the State of New Hampshire, Bureau of Developmental Service, as the provider of services for developmentally disabled individuals for Strafford County in New Hampshire. This designation is received by the Organization every five years. The current designation expires in September 2016.

In order for the Behavioral Health Services division of the Organization to receive this support, it must be formally approved by the State of New Hampshire, Bureau of Behavioral Health, as the community mental health provider for Strafford County in New Hampshire. This designation is received by the Organization every five years. The current designation expires in August 2021.

**BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A
COMMUNITY PARTNERS AND SUBSIDIARIES**

Notes to Consolidated Financial Statements

June 30, 2016 and 2015

9. Retirement Plan

The Organization maintains a tax-sheltered annuity plan that is offered to all eligible employees. The plan includes an employer contribution equal to 3% of each eligible employee's salary. There was no employer discretionary contribution for the year ended June 30, 2016. Total costs incurred for the plan during the year ended June 30, 2015 were \$266,313. The total expense for the year ended June 30, 2015 for the Developmental Services division was \$136,560, and for the Behavioral Health Services division was \$129,753.

10. Subsequent Events

For purposes of the preparation of these consolidated financial statements in conformity with U.S. GAAP, management has considered transactions or events occurring through November 2, 2016, which is the date that the consolidated financial statements were available to be issued.

SUPPLEMENTARY INFORMATION

BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A COMMUNITY PARTNERS AND SUBSIDIARIES

Consolidating Statements of Financial Position

June 30, 2016 and 2015

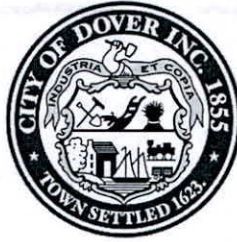
	2016						2015					
	Developmental Services	Behavioral Health Services	Lighthouse Management Services	Community Partners Foundation	Eliminations	Consolidated Totals	Developmental Services	Behavioral Health Services	Lighthouse Management Services	Community Partners Foundation	Eliminations	Consolidated Totals
ASSETS												
Cash and cash equivalents	\$ 1,121,076	\$ 669,291	\$ 9,298	\$ 81,057	\$ -	\$ 1,880,722	\$ 358,074	\$ 642,605	\$ 10,011	\$ 76,191	\$ -	\$ 1,086,881
Restricted cash	102,657	-	-	-	-	102,657	119,785	855	-	-	-	120,640
Accounts receivable, net of allowance for doubtful accounts	1,162,577	1,358,577	59	-	(981,466)	1,529,747	1,513,590	1,302,006	35	-	(754,280)	2,061,351
Grants receivable	21,060	229,776	-	-	-	250,836	10,037	89,878	-	-	-	99,915
Prepaid expenses	92,729	99,286	-	-	-	192,015	71,133	71,130	-	-	-	142,263
Interest in net assets of subsidiaries	81,000	-	-	-	(81,000)	-	75,576	-	-	-	(75,576)	-
Property and equipment, net	1,576,374	441,101	-	-	-	2,017,475	1,718,327	460,694	-	-	-	2,179,021
Total assets	<u>\$ 4,147,473</u>	<u>\$ 2,798,031</u>	<u>\$ 9,357</u>	<u>\$ 81,057</u>	<u>\$ (1,062,466)</u>	<u>\$ 5,973,452</u>	<u>\$ 3,866,522</u>	<u>\$ 2,567,168</u>	<u>\$ 10,046</u>	<u>\$ 76,191</u>	<u>\$ (829,856)</u>	<u>\$ 5,690,071</u>
LIABILITIES AND NET ASSETS (DEFICIT)												
Liabilities												
Accounts payable and accrued expenses	\$ 2,509,565	\$ 495,137	\$ 9,414	\$ -	\$ (981,466)	\$ 2,032,650	\$ 2,250,456	\$ 482,585	\$ 10,660	\$ -	\$ (754,280)	\$ 1,989,421
Refundable advances	250,274	131,198	-	-	-	381,472	161,165	88,352	-	-	-	249,517
Loan fund	89,204	-	-	-	-	89,204	89,115	-	-	-	-	89,115
Notes payable	936,286	192,955	-	-	-	1,129,241	983,368	257,123	-	-	-	1,240,491
Total liabilities	<u>3,785,329</u>	<u>819,290</u>	<u>9,414</u>	<u>-</u>	<u>(981,466)</u>	<u>3,632,567</u>	<u>3,484,104</u>	<u>828,060</u>	<u>10,660</u>	<u>-</u>	<u>(754,280)</u>	<u>3,568,544</u>
Net assets (deficit)												
Unrestricted	361,818	1,978,741	(57)	81,057	(81,000)	2,340,559	364,527	1,739,108	(614)	76,191	(75,576)	2,103,636
Temporarily restricted	326	-	-	-	-	326	17,891	-	-	-	-	17,891
Total net assets (deficit)	<u>362,144</u>	<u>1,978,741</u>	<u>(57)</u>	<u>81,057</u>	<u>(81,000)</u>	<u>2,340,885</u>	<u>382,418</u>	<u>1,739,108</u>	<u>(614)</u>	<u>76,191</u>	<u>(75,576)</u>	<u>2,121,527</u>
Total liabilities and net assets (deficit)	<u>\$ 4,147,473</u>	<u>\$ 2,798,031</u>	<u>\$ 9,357</u>	<u>\$ 81,057</u>	<u>\$ (1,062,466)</u>	<u>\$ 5,973,452</u>	<u>\$ 3,866,522</u>	<u>\$ 2,567,168</u>	<u>\$ 10,046</u>	<u>\$ 76,191</u>	<u>\$ (829,856)</u>	<u>\$ 5,690,071</u>

BEHAVIORAL HEALTH & DEVELOPMENTAL SERVICES OF STRAFFORD COUNTY, INC. D/B/A COMMUNITY PARTNERS AND SUBSIDIARIES

Consolidating Statements of Activities

Years Ended June 30, 2016 and 2015

	2016						2015					
	Developmental Services	Behavioral Health Services	Lighthouse Management Services	Community Partners Foundation	Eliminations	Consolidated Totals	Developmental Services	Behavioral Health Services	Lighthouse Management Services	Community Partners Foundation	Eliminations	Consolidated Totals
Changes in unrestricted net assets (deficit)												
Public support and revenue												
Medicaid revenue	\$ 16,951,030	\$ 6,270,653	\$ -	\$ -	\$ -	\$ 23,221,683	\$ 16,796,823	\$ 6,682,480	\$ -	\$ -	\$ -	\$ 23,479,303
Medicare revenue	-	233,703	-	-	-	233,703	-	196,145	-	-	-	196,145
Client resources	1,125,328	386,995	-	-	-	1,512,323	1,146,464	335,289	-	-	-	1,481,753
Contract revenue	521,758	795,313	-	-	-	1,317,071	310,837	766,907	-	-	-	1,077,744
Grant income	144,394	584,960	-	-	-	729,354	148,856	525,464	-	-	-	674,320
Interest income	-	414	-	-	-	414	-	49	-	-	-	49
Other program income	145,867	-	-	-	-	145,867	105,846	-	-	-	-	105,846
Public support	74,877	4,197	-	36,782	-	115,856	41,142	2,991	-	23,601	-	67,734
Other revenue	164,810	49,044	112,131	-	(116,998)	208,987	277,287	219,817	92,990	-	(99,366)	490,728
Total public support and revenue	19,128,064	8,325,279	112,131	36,782	(116,998)	27,485,258	18,827,255	8,729,142	92,990	23,601	(99,366)	27,573,622
Net assets released from restrictions	24,932	2,003	-	-	-	26,935	31,573	-	-	-	-	31,573
Total public support, revenue and reclassifications	19,152,996	8,327,282	112,131	36,782	(116,998)	27,512,193	18,858,828	8,729,142	92,990	23,601	(99,366)	27,605,195
Expenses												
Program services												
Case management	872,909	-	-	-	-	872,909	943,225	-	-	-	-	943,225
Day programs and community support	3,478,273	695,599	-	-	-	4,173,872	4,069,355	335,932	-	-	-	4,405,287
Early support services and youth and family	901,916	2,310,415	-	-	-	3,212,331	1,109,341	2,303,408	-	-	-	3,412,749
Family support	575,952	-	-	-	-	575,952	579,621	-	-	-	-	579,621
Residential services	5,213,427	5	-	-	-	5,213,432	5,023,498	-	-	-	-	5,023,498
Combined residential, day and consolidated services	6,451,472	-	-	-	-	6,451,472	6,972,601	-	-	-	-	6,972,601
Medical services	-	-	-	-	-	-	-	-	-	-	-	-
Adult services	176,214	2,529,575	-	-	-	2,705,789	309,285	3,406,906	-	-	-	3,716,191
Emergency services	-	467,770	-	-	-	467,770	-	620,806	-	-	-	620,806
Other	273,611	634,574	111,574	31,916	(111,574)	940,101	268,439	557,177	92,609	17,224	(92,609)	842,840
Total program expenses	17,943,774	6,637,938	111,574	31,916	(111,574)	24,613,628	19,275,365	7,224,229	92,609	17,224	(92,609)	26,516,818
Supporting services												
General management	1,211,932	1,449,711	-	-	-	2,661,643	1,240,485	1,445,519	-	-	-	2,686,004
Total expenses	19,155,706	8,087,649	111,574	31,916	(111,574)	27,275,271	20,515,850	8,669,748	92,609	17,224	(92,609)	29,202,822
Change in unrestricted net assets (deficit)	(2,710)	239,633	557	4,866	(5,424)	236,922	(1,657,022)	59,394	381	6,377	(6,757)	(1,597,627)
Changes in temporarily restricted net assets												
United Way allocation	7,368	2,003	-	-	-	9,371	5,364	-	-	-	-	5,364
Net assets released from restrictions	(24,932)	(2,003)	-	-	-	(26,935)	(31,573)	-	-	-	-	(31,573)
Change in temporarily restricted net assets	(17,564)	-	-	-	-	(17,564)	(26,209)	-	-	-	-	(26,209)
Change in net assets (deficit)	(20,274)	239,633	557	4,866	(5,424)	219,358	(1,683,231)	59,394	381	6,377	(6,757)	(1,623,836)
Net assets (deficit), beginning of year	382,418	1,739,108	(614)	76,191	(75,576)	2,121,527	2,065,649	1,679,714	(995)	69,814	(68,819)	3,745,363
Net assets (deficit), end of year	\$ 362,144	\$ 1,978,741	\$ (57)	\$ 81,057	\$ (81,000)	\$ 2,340,885	\$ 382,418	\$ 1,739,108	\$ (614)	\$ 76,191	\$ (75,576)	\$ 2,121,527



RECEIVED
Planning Office

NOV 16 2016

Dover, New Hampshire

CDBG APPLICATION

**CITY OF DOVER, NH
COMMUNITY DEVELOPMENT BLOCK GRANT
FY2018**

APPLICANT INFORMATION	
Organization Cross Roads House, Inc.	22-2549963
Name of Program Cross Roads House	
Name of Executive Director Martha Stone	
Mailing Address 600 Lafayette Rd., Portsmouth, NH 03801	
Physical Address same	
Contact Person Martha Stone	Phone 603-436-2218
E-Mail Martha@crossroadshouse.org	Website www.crossroadshouse.org
Please Identify the Type of Organization Applying for Funds (Note: More than one may apply) ☒ 501(c)(3) ☐ For-profit authorized under 570.201(o) ☐ Unit of Government ☐ Faith-based Organization ☐ Institution of Higher Education ☐ Other (Explain):	
Tax ID # 22-2549963	
*DUNS # 171774979	*SAM Expiration Date in process

* Important notice regarding new mandatory federal reporting requirements: The Federal Funding Accountability and Transparency Act requires sub-recipients receiving federal funds to register with Dunn and Bradstreet to obtain a DUNS number and complete or renew their registration in the System for Award Management (SAM). For information on how to obtain a DUNS number and register in SAM please visit <https://fedgov.dnb.com/webform> and <https://www.sam.gov/portal/SAM/##11>. Completing these registration processes is free, but may take up to 15 days to complete. The city will not commit funds without this information.

ACTIVITY or PROJECT INFORMATION

ACTIVITY OR PROJECT INFORMATION
Amount of Dover CDBG funds requested for activity/project: \$ 12,000
Provide a <u>very brief</u> summary of the activity or project for which the funds are requested. Keep responses to one or two sentences (i.e. After School Care for K-4 th grade students. Repair of homeless shelter roof. Etc.) To provide emergency shelter and supportive services to homeless families and individuals.
Identify the Dover Consolidated Plan "Specific Objective" that will be met by the proposed activity/project (see page 3 of CDBG Application: Overview & Scoring: Goal and Objectives) Specific Objective (i.e. Removal of architectural barriers to allow increased handicapped accessibility) To provide increased opportunities to residents of the City who require education, health, recreation, housing and related human services.

PROJECT LOCATION
Location(s) where services will be provided or physical improvements will be made. Portsmouth, NH

PROPOSED SCHEDULE OF PROJECT IMPLEMENTATION – PUBLIC FACILITIES ONLY (Construction Projects/Physical Improvements)	
For this section please identify the major tasks and dates that they will be achieved.	
TASK	DATE

BENEFICIARIES
Beneficiaries: For FY2018 (7/1/17 – 6/30/18) please provide the <i>estimated</i> number of unduplicated Dover beneficiaries that will benefit from this CDBG funded activity or project, not necessarily your entire client population (Note: these numbers will be monitored during the funding year): 45 For FY2016 (7/1/15 – 6/30/16) please provide the number of unduplicated Dover beneficiaries that benefited from this activity or program, not necessarily your entire client population: 45 Were Dover CDBG funds used to fund this activity or program in FY2017 (7/1/16 – 6/30/17): yes If so, how much? \$9,500.00

Beneficiary type: ☐ Elderly ☐ Family ☐ Disabled ☒ Homeless ☐ Persons living with AIDS
☐ Other (specify):

ACTIVITY/PROJECT NARRATIVE

Please provide a detailed description for the proposed activity/project. (*note: not the organization*) This section should describe the use of funds and explain why the funds are needed. Please relate how the CDBG funds will ultimately benefit Dover low-moderate income individuals.

Cross Roads House is seeking funding to support the delivery of our emergency and transitional shelter programs accomplished in part by our Direct Care Staff who work 27/7/365 at our shelter and in conjunction with our Social Work Team. Cross Roads House is funded by a patchwork of public and private sources, and other funds come from a variety of fundraising activities. Roughly 19% of our revenue is federal funds, via HUD, FEMA, USDA and CDBG. The State of NH provides funding through State-Grant-in-Aid, and municipalities in the region who make annual grants along with town warrant appropriations total 15%. The local United Way provides less than 1%. Fundraising events, private grants and donations from local individuals, businesses, foundations, and civic groups cover the remainder of our costs representing 65%. Given the substantial amount that we need to raise from private fundraising efforts, CDBG funds from the City of Dover (and other cities) remain a valuable source of revenue.

Magnitude of Need: Last year we served 515 people, including 30 families with 57 children and we provided 32,241 bed nights of shelter. Among those, **45 were residents of Dover who stayed for 2,109 bed nights.** Last month (October 2016), the Coordinated Entry (CE) Program (the centralized intake program that assigns shelter beds to those in need) received 452 unique calls per day from people seeking shelter or who were at risk of losing their housing. While Cross Roads House does not use waiting lists, Coordinated Entry currently has a waiting list of 20 individual men and women and 9 families who are seeking shelter but who cannot currently be placed because all area shelters are full. The State of New Hampshire conducts a one-day count of homeless persons each year, and in January 2016, found 176 people in shelters, unsheltered, or doubled-up in Rockingham County. In Strafford County, the total was 77 people.

The homeless have always been a difficult population to quantify, but our shelter operating at or over capacity virtually year-round speaks to the demand for services. **Last year our emergency shelter program for single adults operated over capacity 87% of the year.** This meant that all of our emergency shelter beds for single adults were full and to accommodate those who needed emergency shelter, we placed mattresses on the floor in rooms other than our designated bedrooms. Since the beginning of 2016, we have seen a surge in demand for shelter and have had "overflow" counts (above our capacity) of between 10 – 20 people per night.

Dover low-moderate income individuals will benefit from CDBG funds granted to Cross Roads House through the availability of the programs described below. If shelter beds were not available to meet the needs of Dover residents experiencing homelessness, the City Welfare office could end needing to place city residents in motel rooms. While this may serve as a temporary housing solution, it can be very expensive, and families in motels are typically not receiving the multitude of supportive services and assistance finding permanent housing that are offered at Cross Roads House.

The overall goals of our programs are to provide emergency and transitional shelter and assist our residents in learning to make choices that lessen the likelihood of them becoming homeless in the future.

Our **Emergency Shelter program** is accessible 24 hours per day, seven days a week. Residents are provided with a place to sleep, store their belongings, use a telephone and laundry facilities, etc. Early in one's stay at the shelter, each resident has a comprehensive needs assessment performed by a case manager. This assessment focuses on basic survival needs and then addresses long-range goals. Topics covered in the assessment include:

- Housing and Employment History
- Safety Net Benefits
- Legal History and Outstanding Problems
- Sources of Income
- Educational and Employment Goals
- Personal Support Network
- Children's Health, Education, and Emotional Needs
- Substance Abuse, Mental Illness, or Health Problems

Our **Transitional Shelter program** is available to anyone in the emergency shelter who is working and living drug & alcohol free. Participants in the transitional program stay in more private quarters and receive intensive case management support. The staff helps individuals and families to identify the patterns and choices which may have contributed to their becoming homeless, assists them in identifying their strengths, and provides guidance to make choices that will enhance their well-being. After completing the Transitional Program, most who have fully participated feel ready to return to independent living in the community. Last year, 73% of residents in our transitional program moved to permanent housing.

Case management is provided for all residents (in both programs) by our Social Worker and Case Managers and the UNH graduate and undergraduate interns that make up our Social Work Team. The team, working closely with direct care staff and other providers, help our residents move to safe, decent, and permanent housing in the most timely and successful way possible. The approach for each resident is customized. The goals, supportive services, and housing targets are based upon the resident's skills, needs, assets, and preferences. Our team uses clinical expertise and experience to create effective, collaborative action plans which provide the level of intensity of service needed by each individual or family. In addition to the team's work in the shelter, this year we have added a Housing Stability Case Manager to provide more intensive post-shelter support to prevent recidivism.

Residents in both our Emergency and Transitional programs participate in "Rent Ready", a day-long class that prepares individuals and families to move from the shelter to stable housing by providing the financial and legal guidance and tools they need. Topics such as budgeting, credit repair, conflict resolution, and tenant's rights are presented by a team of professionals including our MSW Case Managers, and representatives from local banks, Rockingham Community Action Partnership, Portsmouth Housing Authority, and NH Legal Assistance.

In addition, residents attend "Ready to Work," a three session course focused on seeking out and securing

employment. Topics such as barriers to employment, determination of skills, resume writing, and interview techniques are presented by a team of professionals including our MSW Case Managers, a bank representative, and a financial advisor.

The combination of a healthy shelter environment, individualized service provision, and close collaboration with a wide variety of partners and services shows in the outcomes for our residents. The average length of stay for all residents (singles and families) over the last two fiscal years was 62 days, a 22% decrease from the prior year. The percentage of residents who left to go into permanent housing, including the large number who stayed one or two nights, was 37%, an 83% increase over the year before. For those residents who stayed longer and received case management services, 60% overall, and 76% of families left to go to permanent housing.

Please indicate who prepared the overall cost estimate for the activity or project. Susan Duchesney, Finance Director

For this application, written quotes are required for proposed purchase of items exceeding \$3,000.00 or for physical improvements (i.e. building expansion, new roof, replacement of windows, etc.). Please attach quotes you have obtained.

PERFORMANCE OUTCOME MEASURES

Provide the outcomes proposed and the method of measurement. You may list multiple outcomes.

Outcome	Measurement
Ex. Decrease in number of "latch-key kids"	Ex. # of children who participate in afterschool program
Ex. Decreased dependence on emergency care facilities for non-emergency care of low/mod adults	Ex. Increase in number of low/mod income residents that seek care from health program.
Decrease in amount of time individuals and families remain in homelessness	Decrease in average length of stay at shelter and increase in percentage of residents who exit to permanent housing

ORGANIZATION

DESCRIPTION OF ORGANIZATION

Please provide a description for the Organization that is undertaking the activity/project. Agency Mission:

At Cross Roads House:

- We protect men, women and children of the Greater Seacoast area experiencing homelessness from exposure and hunger.
- We provide secure, transitional shelter for those seeking to break the cycle of homelessness.
- We support individuals and families by providing them with the opportunity to move with dignity and purpose to stable and decent housing.

Agency Background:

History: In response to the growing problems facing the homeless of the Seacoast area, a group of citizens established Cross Roads House in the winter of 1982 to provide emergency shelter. As recognition of the difficulties facing the homeless has grown, Cross Roads House and the services offered have also grown. In 1987, the program was restructured to offer both emergency and transitional shelter for individuals and families. In 2015 we repurposed one of our two Men's Transitional units to create a "Recovery Support" Transitional Program for our male residents who are working to maintain their sobriety.

Cross Roads House, open 24/7/365, is one of the largest shelters in New Hampshire. Last year alone, Cross Roads House sheltered 515 people. Virtually all persons served by Cross Roads House have either very low or no income. The primary criteria for admission to the emergency shelter are that the individual adult or family have an immediate need for shelter, and no other options.

Beyond providing for the immediate needs of shelter and food, we assist people in linking with community based resources such as employment, benefits, substance abuse treatment, mental health counseling and housing. Services are available to anyone in need and include men, women and children. Our primary service area is Eastern Rockingham County, Strafford County and Southern York County

Those experiencing homelessness typically have needs beyond shelter. If they are to successfully find and remain in permanent housing, they will likely need new skills or supportive services. In addition to food and shelter, Cross Roads House's greatest value to those we serve is connecting them with resources available from other providers and partner agencies.

Provided on-site:

-Dental care	(Health Care for the Homeless/Families First)
-Mental health counseling	(Seacoast Mental Health Center)
-Substance abuse counseling	(Health Care for the Homeless/Families First)
-Primary and preventive medical care	(Health Care for the Homeless/Families First)
-Veteran's Administration Outreach	(VA)
-Substance abuse support groups	(AA & NA)
-Transportation	(COAST)
-Yoga classes	(Seacoast Area Teachers of Yoga in Action)
-Social work, & Marriage and Family Counseling –Interns	(UNH)

Our staff is also well-versed in the following programs, and we work closely with them to connect our residents to services:

- Municipal welfare
- Public Housing / Section 8
- TANF/Food stamps
- WIC
- Social Security/SSDI
- DCYF, Adult & Elderly Services

Does your organization have an annual CPA Audit? yes

If yes, please submit most recent Audit.

Is your organization evaluated by outside agencies or programs? yes

If yes, please note the agency/program and how often the evaluation occurs. The State of New Hampshire, through the Dept. of Health and Human Services, audits our program for regulatory and financial compliance. The United Way of the Greater Seacoast conducts organizational and financial reviews twice during each grant cycle. Also, the Planning Departments of the cities of Dover, Rochester, and Portsmouth perform annual reviews for CDBG funds.

BOARD OF DIRECTORS	
Name	Residence (city/town)
Michael Adams	Greenland
Richard Ade	Portsmouth
Tim Allison	Portsmouth
Suzanne Bresette	North Hampton
Bob Brown	North Hampton
Jude Blake	Portsmouth
Eric Campbell	York, ME
Denis Cloutier	New Castle
Ken Cohen	Kensington
Denis Dillon	Rye
Kathryn Drew	Rye
Richard Hayden	Rye
Vivan Martindale	Hampton
Vanda Moore	Rye
Lex Scourby	Portsmouth
Charles Silva	Portsmouth
Benoit St. Jean	Portsmouth
Joe St. Martin	Exeter
David Van Patten	Stratham
Mary Lee Worboys	Durham

BUDGET

Use box A or B below to provide a budget for the proposed *Public Service (A.)* or *Public Facility (B.)*. Include all proposed expenses.

A. Public Services (Non-Construction Projects)			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Office Supplies	0	43215	43215
Utilities	0	91716	91716
Repairs/Maintenance	0	49750	49750
Travel	0	15607	15607
Salaries (List relevant positions)			
Direct Care	12000	404573	416573
Admin	0	296331	296331
Maintenance	0	35050	35050
Kitchen	0	34546	34546
Other: occupancy, supplies, resident services, audit, fundraising, payroll taxes and benefits, building capital reserve	0	599342	599342
TOTAL PROPOSED BUDGET:	12000	1570175	1582175

B. Public Facilities: Construction Projects/Physical Improvements			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Hard Costs <i>Note:</i> Federal wage rates may apply for some construction projects. Applicants are encouraged to obtain estimates that reflect wage rates estimates.			
Construction			
Other (list)			
<i>Total Hard Costs</i>			
Soft Costs			
Acquisition			
Appraisals			
Design/Engineering			
Other(list):			
<i>Total Soft Costs</i>			
TOTAL PROPOSED BUDGET:			

FUNDING SOURCES

Other Funding Sources - please indicate the source and amount of other funding committed, pending or proposed for this project, if any. *Do not include Dover CDBG amount requested.*

Funding Source: (Name(s) of funding source(s))		Total Amount (\$):	Committed, Pending or Proposed Amount (\$):	
Federal:	HUD Permanent Supportive Housing First Program, USDA, FEMA	269,430	Committed Pending Proposed	269,430
State:	State Grant in Aid	178,596	Committed Pending Proposed	178,596
Local:	Municipal welfare (various towns)	42,881	Committed Pending Proposed	42,881
Private:	Hundreds of private individual and business/corporate donations and grants	684,615	Committed Pending Proposed	684,615
Portsmouth CDBG:	Note: In addition to CDBG Funds, Portsmouth also provides funding through welfare/social services budget	10,000	Committed Pending Proposed	10,000
Rochester CDBG:		5,000	Committed Pending Proposed	5,000
Other:	United Way, Fundraising event, Housing Stability Case Management private grants and Rapid Rehousing	379,655	Committed Pending Proposed	379,655
Total:		1,570,175	Committed Pending Proposed	1,570,175

Organizational Commitment: For Public Facility Projects (building addition, new roof, replacement windows, etc.) – indicate the amount of funds that the organization will be contributing to the project.

Funding Source: (Name of Parent Organization)	Total Amount (\$) to be Contributed by Parent Organization	Committed or Proposed Amount (\$)	
		Committed	Proposed
Total:			

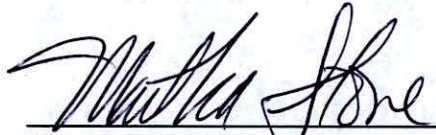
AGENCY BUDGET

Please provide a breakdown of your organization's overall annual budget. Please indicate the dates of your budget period, i.e. July 1 to June 30 or January 1 to December 31.

Budget Period: from July 1 to June 30				Current Year	Next Year (projected)
REVENUES					
Federal Funds				268030	269430
State Funds				178596	178596
Foundations/Private Contributions				629660	684615
United Way				12403	12403
Fundraising or other income				306000	325000
Other (describe) Municipal, Endowment distribution, Housing Stability Grants				83631	85131
Community Dev. Block Grant (include anticipated request)				24500	27000
TOTAL REVENUE				1502820	1582175
EXPENSES					
Salaries				716382	770000
Fringe Benefits				168192	183686
Supplies (include printing/copying)				42715	43215
Travel				15607	15607
Training				4000	40000
Communications				6250	6250
Audit				12300	13500
Property Maintenance				12300	13500
Service Contracts					
Construction Supplies/Materials				23000	23000
Other (describe) Insurance, volunteers, occupancy, resident services, utilities, amortization, fundraising, building capital expense				467756	470167
TOTAL EXPENSES				1502820	1582175
NET (Income - Expenses)				0	0

By signing below, the Authorized Official affirms: The organization's commitment to implement the proposed activity/project; that all information presented is true and accurate to the best of their knowledge; and he/she is authorized to submit this application;

Submitted by:


Authorized Official - signature

11/16/16
Date

Martha Stone
Print Name

Executive Director
Print Title



September 13, 2016

Board of Directors
Cross Roads House, Inc.
600 Lafayette Road
Portsmouth, NH 03801

We have audited the financial statements of Cross Roads House, Inc. for the year ended June 30, 2016, and have issued our report thereon dated September 13, 2016 and September 30, 2016. Professional standards require that we provide you with information about our responsibilities under generally accepted auditing standards as well as certain information related to the planned scope and timing of our audit. We have communicated such information in our letter to you dated July 28, 2016. Professional standards also require that we communicate to you the following information related to our audit.

Significant Audit Findings - Qualitative Aspects of Accounting Practices

Management is responsible for the selection and use of appropriate accounting policies. The significant accounting policies used by Cross Roads House are described in Note A to the financial statements. No new accounting policies were adopted and the application of existing policies was not changed during fiscal year 2015. We noted no transactions entered into by Cross Roads House during the year for which there is a lack of authoritative guidance or consensus. All significant transactions have been recognized in the financial statements in the proper period.

Accounting estimates are an integral part of the financial statements prepared by management and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ significantly from those expected.

The financial statement disclosures are neutral, consistent, and clear.

Difficulties Encountered in Performing the Audit - We encountered no significant difficulties in dealing with management in performing and completing our audit.

Management Representations - We have requested certain representations from management that are included in the management representation letter dated September 13, 2016 and September 30, 2016.

This information is intended solely for the use of management of Cross Roads House, Inc. and is not intended to be, and should not be, used by anyone other than these specified parties.

Very truly yours,

A handwritten signature in cursive script that reads "Sanders & Karcher".

Sanders & Karcher
Certified Public Accountants

CROSS ROADS HOUSE, INC.

FINANCIAL STATEMENTS

Year Ended June 30, 2016
with Summarized Financial Information
for the Year Ended June 30, 2015

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Sanders & Karcher
Certified Public Accountants

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Cross Roads House, Inc.

Report on the Financial Statements

We have audited the accompanying financial statements of Cross Roads House, Inc. (a nonprofit organization) as of June 30, 2016 which comprise the statement of financial position and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Board of Directors
Cross Roads House, Inc.
Page 2

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Cross Roads House, Inc. as of June 30, 2016, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited Cross Roads House, Inc.'s financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated September 2, 2015. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2015, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Sanders & Karcher

Sanders & Karcher
Portsmouth, NH

September 13, 2016, except for Note A, Subsequent Events, as to which the date is
September 30, 2016

CROSS ROADS HOUSE, INC.
STATEMENTS OF FINANCIAL POSITION
June 30,

	<u>2016</u>	<u>2015</u>
<u>ASSETS</u>		
<u>CURRENT ASSETS</u>		
Cash	\$ 400,288	\$ 233,615
Grants receivable	11,053	107,994
Unconditional promises to give	104,750	49,525
Prepaid expenses	46,249	22,250
Total current assets	<u>562,340</u>	<u>413,384</u>
PROPERTY & EQUIPMENT, net of accumulated depreciation of \$1,227,791 & \$1,072,389, respectively	4,695,296	4,831,739
<u>OTHER ASSETS</u>		
Closing costs, net of accumulated amortization of \$1,071 & \$846, respectively	282	507
Unconditional promises to give, long-term	171,000	193,791
Cash and marketable securities, long-term reserve	602,113	554,014
Beneficial interest in assets held by others	120,344	130,607
Cash and cash equivalents, operating reserve	125,069	116,798
Total other assets	<u>1,018,808</u>	<u>995,717</u>
TOTAL ASSETS	\$ <u>6,276,444</u>	\$ <u>6,240,840</u>
<u>LIABILITIES AND NET ASSETS</u>		
<u>CURRENT LIABILITIES</u>		
Accounts payable	\$ 40,781	\$ 15,499
Deferred income	55,185	7,500
Long-term debt, current portion	13,842	13,403
Accrued payroll items	43,678	31,351
Total current liabilities	<u>153,486</u>	<u>67,753</u>
LONG-TERM DEBT, net of current portion	<u>212,158</u>	<u>225,848</u>
Total liabilities	365,644	293,601
<u>NET ASSETS</u>		
Unrestricted		
Designated	727,182	670,812
Undesignated	4,867,274	4,927,030
Temporarily restricted	196,000	218,790
Permanently restricted	120,344	130,607
Total net assets	<u>5,910,800</u>	<u>5,947,239</u>
TOTAL LIABILITIES AND NET ASSETS	\$ <u>6,276,444</u>	\$ <u>6,240,840</u>

The accompanying notes are an integral part of these financial statements.

CROSS ROADS HOUSE, INC.
STATEMENTS OF ACTIVITIES
Years ended June 30,

	2016	2015
PUBLIC SUPPORT AND REVENUES:		
PUBLIC SUPPORT		
Government grants	\$ 324,695	\$ 272,776
Donations	533,859	518,425
Fund raising, net of direct expenses of \$60,985 and \$45,159, respectively	<u>353,494</u>	<u>257,010</u>
Total public support	1,212,048	1,048,211
REVENUES		
Use of facilities	3,500	6,200
Investment return	<u>19,665</u>	<u>12,553</u>
Total revenues	<u>23,165</u>	<u>18,753</u>
Total public support and revenues	1,235,213	1,066,964
EXPENSES		
Program services	856,359	759,542
General and administrative	189,230	169,665
Fundraising	<u>60,173</u>	<u>80,889</u>
Total expenses	<u>1,105,762</u>	<u>1,010,096</u>
CHANGE IN OPERATING NET ASSETS BEFORE DEPRECIATION	129,451	56,868
Less depreciation and amortization	155,627	150,298
DECREASE IN OPERATING NET ASSETS	(<u>26,176</u>)	(<u>93,430</u>)
BUILDING SUPPORT, net of change in discount	<u>22,790</u>	<u>49,500</u>
DECREASE IN UNRESTRICTED NET ASSETS	(3,386)	(43,930)
TEMPORARILY RESTRICTED NET ASSETS		
Public support	335,186	188,454
Restrictions satisfied by use	(<u>357,976</u>)	(<u>237,954</u>)
DECREASE IN TEMPORARILY RESTRICTED NET ASSETS	(<u>22,790</u>)	(<u>49,500</u>)
PERMANENTLY RESTRICTED ASSETS		
Investment income (loss)	(5,097)	1,215
Distributions	(<u>5,166</u>)	(<u>5,055</u>)
DECREASE IN PERMANENTLY RESTRICTED NET ASSETS	(<u>10,263</u>)	(<u>3,840</u>)
DECREASE IN NET ASSETS	(36,439)	(97,270)
NET ASSETS, Beginning of year	<u>5,947,239</u>	<u>6,044,509</u>
NET ASSETS, End of year	\$ <u>5,910,800</u>	\$ <u>5,947,239</u>

The accompanying notes are an integral part of these financial statements.

CROSS ROADS HOUSE, INC.
STATEMENT OF FUNCTIONAL EXPENSES
Year Ended June 30,

	2016				2015
	Program Services	General and Admin	Fund- Raising	Total	Total
Management salaries	\$ 103,201	\$ 100,383	\$ 24,459	\$ 228,043	\$ 155,892
Salaries and wages	412,884	15,913	11,673	440,470	461,099
Employee benefits	55,651	25,544	6,494	87,689	75,245
Payroll taxes	41,860	9,769	1,670	53,299	47,045
Professional fees	-	22,224	-	22,224	15,384
Investment fees	-	-	-	-	839
Advertising and promotion	-	-	4,754	4,754	3,605
Office and administration	25,098	1,282	1,281	27,661	29,496
Heat	13,655	759	759	15,173	23,301
Electricity	27,403	1,522	1,522	30,447	28,532
Water and sewer	20,128	1,118	1,118	22,364	26,567
Repairs and maintenance	76,599	4,255	4,255	85,109	61,368
Interest	8,004	445	445	8,894	9,293
Insurance	25,228	1,402	1,402	28,032	28,041
Food	21,873	-	-	21,873	24,496
Direct services	16,811	-	-	16,811	8,760
Telephone	5,264	293	293	5,850	4,877
Volunteer development	-	1,621	-	1,621	3,618
Staff and program development	2,700	2,700	48	5,448	2,638
TOTALS BEFORE DEPREC & AMORT	856,359	189,230	60,173	1,105,762	1,010,096
Depreciation & amortization	139,862	7,995	7,770	155,627	150,298
TOTALS	\$ <u>996,221</u>	\$ <u>197,225</u>	\$ <u>67,943</u>	\$ <u>1,261,389</u>	\$ <u>1,160,394</u>

The accompanying notes are an integral part of these financial statements.

CROSS ROADS HOUSE, INC.
STATEMENTS OF CASH FLOWS
Years Ended June 30,

	<u>2016</u>	<u>2015</u>
CASH FLOWS FROM OPERATING ACTIVITIES		
Cash received from support	\$ 1,116,417	\$ 994,169
Cash received from interest and dividends	9,402	14,986
Cash received from use of facilities	3,500	6,200
Cash paid to employees and suppliers	(912,526)	(991,288)
Cash paid for interest	(8,894)	(9,293)
Net cash provided by operating activities	<u>207,899</u>	<u>14,774</u>
CASH FLOWS FROM INVESTING ACTIVITIES		
Net unrealized investment loss	(9,016)	(6,273)
Cash paid for property and equipment	(18,959)	(25,366)
Net cash used by investing activities	<u>(27,975)</u>	<u>(31,639)</u>
CASH FLOWS FROM FINANCING ACTIVITIES		
Cash paid for debt reduction	(13,251)	(12,851)
Net increase (decrease) in cash	166,673	(29,716)
Cash at beginning of year	<u>233,615</u>	<u>263,331</u>
CASH AT END OF YEAR	\$ <u>400,288</u>	\$ <u>233,615</u>
RECONCILIATION OF CHANGE IN NET ASSETS TO NET CASH PROVIDED BY OPERATING ACTIVITIES		
Decrease in net assets	\$ (36,439)	\$ (97,270)
Adjustments to reconcile change in net assets to net cash from operating activities:		
Net unrealized investment loss	9,016	6,273
Depreciation expense	155,402	150,072
Amortization expense	225	226
(Increase) decrease in:		
Grants receivable	96,941	(79,028)
Unconditional promises to give	(32,434)	56,874
Prepaid expenses	(23,999)	21,646
Beneficial interest in assets held by others	10,263	3,840
Cash and cash equivalents, operating reserve	(8,271)	63,958
Cash and marketable securities, long-term reserve	(48,099)	(98,786)
Increase (decrease) in:		
Accounts payable	25,282	(3,619)
Deferred income	47,685	(900)
Accrued payroll items	12,327	(8,512)
Total adjustments	<u>244,338</u>	<u>112,044</u>
NET CASH PROVIDED BY OPERATING ACTIVITIES	\$ <u>207,899</u>	\$ <u>14,774</u>

The accompanying notes are an integral part of these financial statements.

CROSS ROADS HOUSE, INC.
NOTES TO FINANCIAL STATEMENTS
For the Year Ended June 30, 2016

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization

Cross Roads House, Inc. (Cross Roads House), was organized March 24, 1982, but was essentially activated January 1, 1984. The purpose of the organization is to provide safe and supportive emergency and transitional shelter to individuals and families experiencing homelessness in southeastern New Hampshire.

Basis of Accounting

Income and expenses are reported on the accrual basis, which means that income is recognized as it is earned and expenses are recognized as they are incurred whether or not cash is received or paid out at that time.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Income Taxes

Cross Roads House received a letter of determination dated July 28, 1986 from the Internal Revenue Service advising it that it qualified as a non-profit organization under Section 501(c)(3) of the Internal Revenue Code and, therefore, it is not subject to income tax. Cross Roads House is classified as other than a private foundation.

Financial Statement Presentation

Cross Roads House presents its financial statements in accordance with Accounting Standards Codification No. 958-210, "Financial Statements of Not-for-Profit Organizations". Under ASC No. 958-210, Cross Roads House is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. In addition, Cross Roads House is required to present a statement of cash flows.

Cash and Cash Equivalents

For purposes of these financial statements all non-custodial highly liquid investments with an initial maturity of less than three months or investments with a per share value constant at one dollar are considered to be cash equivalents. Cash equivalents were \$246,196 and \$249,720 as of June 30, 2016 and 2015.

Accounts Receivable

Accounts receivable consist primarily of amounts due from the State in support of homeless operations. An allowance for doubtful accounts is established based on historical experience and management's evaluation of outstanding accounts receivable at the end of each year. As of June 30, 2016 and 2015 management considers accounts receivable to be fully collectible; accordingly, no allowance for doubtful accounts is required.

CROSS ROADS HOUSE, INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
For the Year Ended June 30, 2016

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Subsequent Events

Subsequent events have been evaluated through September 13, 2016 the date the financial statements were available to be issued. Due to receipt of a restated pledge confirmation of \$146,000 received on September 30, 2016 from the donor, management has elected to adjust the financial statements to include this pledged amount.

Promises to Give/Contributions

Contributions are recognized when the donor makes a promise to give to Cross Roads House that is, in substance, unconditional. Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the fiscal year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets depending on the nature of the restrictions. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets.

An allowance for uncollectible unconditional promises is established based on historical experience and management's evaluation of outstanding unconditional pledges at the end of each year. As of June 30, 2016, management considers all pledges to be fully collectible.

Unconditional promises to give consisted of the following as of June 30,

	2016	2015
Capital campaign	\$ 196,000	\$ 221,000
Wentworth Gala event	<u>79,750</u>	<u>24,525</u>
TOTALS	\$ <u>275,750</u>	\$ <u>245,525</u>

As of June 30, 2016, amounts were due in:

Less than one year	\$ 129,750
One to two years	<u>146,000</u>
TOTAL	\$ <u>275,750</u>

Investment Valuation and Income Recognition

The Organization's investments as of June 30, 2016 are stated at fair value. Shares of the separate investment accounts are valued at quoted market prices, which represent the net value of shares held by the Organization at year-end. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. As of June 30, 2016, investments have a market value of \$727,182, cost basis of \$720,312 and unrealized gains of \$6,870.

CROSS ROADS HOUSE, INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
For the Year Ended June 30, 2016

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Property and Equipment

Property and equipment are recorded at cost for those items which have been purchased, and at estimated fair market value for those items which have been donated. The cost of buildings and improvements is recovered using the straight-line method over estimated useful lives of 10 to 33 years. The cost of furniture, fixtures and equipment is recovered using the straight-line method over estimated useful lives of 2 to 7 years. Property and equipment as of June 30, 2016 consisted of the following:

Land and improvements	\$ 217,266
Buildings and improvements	5,607,573
Furniture and equipment	98,248
Total property and equipment	5,923,087
Less accumulated depreciation	1,227,791
Property and equipment, net	\$ <u>4,695,296</u>

Contributions

Cross Roads House records its contributions as unrestricted, temporarily restricted, or permanently restricted support depending on the existence or nature of any donor restrictions.

Donated Services

Contributions of services are recognized in the financial statements if the services enhance or create nonfinancial assets or require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation. For the years ended June 30, 2016 and 2015, there were no amounts for donated services.

Donated Materials

Donated marketable securities and property and equipment are valued at fair market value. Marketable securities are immediately sold and are included in the statement of activities as donations. Donated securities were received and valued as follows during the years ended June 30,

	2016	2015
Marketable securities	\$ 41,918	\$ 28,213

Functional Allocation of Expenses

The costs of the various programs and other activities have been summarized on a functional basis. Accordingly, costs have been allocated among the programs and supporting services benefited.

CROSS ROADS HOUSE, INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
For the Year Ended June 30, 2016

NOTE B - BENEFICIAL INTEREST IN ASSETS HELD BY OTHERS

Cross Roads House is a beneficiary of an agency endowment fund at The New Hampshire Charitable Foundation. Pursuant to the terms of the resolution establishing this fund, property contributed to The New Hampshire Charitable Foundation is held as a separate fund designated for the benefit of Cross Roads House. In accordance with its spending policy, the Foundation makes distributions from the fund to Cross Roads House. The distributions are 4.03% of the market value of the fund per year.

Activity in this endowment fund consisted of the following for the years ended June 30,

	2016	2015
Beginning, fair value, 7/1	\$ 130,607	\$ 134,447
Total return	(4,237)	2,054
Foundation fee	(860)	(839)
Distributions	(5,166)	(5,055)
Ending, fair value, 6/30	\$ <u>120,344</u>	\$ <u>130,607</u>

Distributions represent amounts distributed to Cross Roads House and are shown as unrestricted dividends.

NOTE C - INVESTMENTS AT FAIR VALUE

Cross Roads House records its marketable securities with readily determinable fair values and all investments in debt securities at their fair values in the statement of financial position. Unrealized gains and losses are included in the change in net assets, in the statement of activities.

Following is a description of the valuation methodologies used for assets measured at fair value.

Common stocks, corporate bonds and U.S. government securities: Valued at the closing price reported on the active market on which the individual securities are traded.

Mutual funds: Valued at the net asset value of shares held by the plan at year end.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Organization believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

CROSS ROADS HOUSE, INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
For the Year Ended June 30, 2016

NOTE C - INVESTMENTS AT FAIR VALUE (continued)

The Organization reports under the Fair Value Measurements, which established a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs of valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurement) and the lowest priority to unobservable inputs (level 3 measurements).

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Investments, all at level 1, at fair value as of June 30, 2016, consisted of the following:

Cash & equivalents	\$ 246,196
Domestic equities	269,949
Domestic fixed income	169,899
International fixed income	41,138
TOTALS	\$ <u>727,182</u>

NOTE D - LONG-TERM DEBT

	<u>Current</u>	<u>Long-term</u>	<u>Total</u>
Note payable, People's United Bank, monthly payment is \$1,403, 3.92% interest; secured by property and equipment; note matures June 2033.	\$ 8,836	\$ 199,641	\$ 208,477
Note payable, NH Community Development Authority, monthly payment is \$443, 2.00% interest; secured by property; note matures November 2019.	<u>5,006</u>	<u>12,517</u>	<u>17,523</u>
Total long-term debt	\$ <u>13,842</u>	\$ <u>212,158</u>	\$ <u>226,000</u>

Future principal loan payments are as follows for the years ended,

June 30,	2017.	\$ 13,842
	2018.	14,294
	2019.	14,765
	2020.	12,189
	2021.	10,350
	Thereafter. . .	160,560

CROSS ROADS HOUSE, INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
For the Year Ended June 30, 2016

NOTE E - ACCRUED PAYROLL ITEMS

Accrued payroll items consisted of the following as of the years ended June 30,

	2016	2015
Payroll and payroll taxes	\$ 12,810	\$ 6,047
Earned time	<u>30,868</u>	<u>25,304</u>
Totals	\$ <u>43,678</u>	\$ <u>31,351</u>

NOTE F - UNRESTRICTED BOARD DESIGNATED NET ASSETS

The Board of Directors of Cross Roads House has approved the following designations of net assets as of June 30,

	2016	2015
Long-term reserve	\$ 602,113	\$ 554,014
Operating reserve	<u>125,069</u>	<u>116,798</u>
Totals	\$ <u>727,182</u>	\$ <u>670,812</u>

Board designated long-term reserve represents amounts held to enhance the capitalization of Cross Roads House. Unrestricted board designated net assets may not be liquidated or expended without the approval of the Board of Directors.

NOTE G - TEMPORARILY RESTRICTED NET ASSETS

Temporarily restricted net assets total \$196,000, all of which is available for the capital campaign.

NOTE H - CONCENTRATION OF CREDIT RISK

As of June 30, 2016 and 2015, Cross Roads House has a cash balance held by a bank that was in excess of the amount insured by the Federal Deposit Insurance Corporation. The uninsured amount was \$169,370 and \$8,027, respectively.

Cross Roads House has a cash balance held by an investment brokerage firm that is insured by the Securities Investor Protection Corporation. There were no uninsured amounts as of June 30, 2016 and 2015.

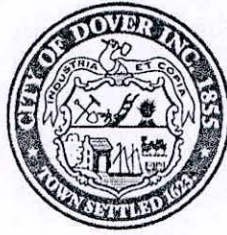
Cross Roads House derived approximately twenty-six per cent of its operating revenue from government agencies.

CROSS ROADS HOUSE, INC.
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
For the Year Ended June 30, 2016

NOTE I - COMMITMENTS AND CONTINGENCIES

Cross Roads House receives money under various state and federal grants. Under the terms of these grants, Cross Roads House is required to use the money within the grant period for purposes specified in the grant proposal. If expenditures of the grant were found not to have been made in compliance with the proposal, Cross Roads House may be required to repay the grantor's funds.

A discrimination claim, filed in February 2015 with the New Hampshire Commission for Human Rights by a former resident has been closed with a finding of no probable cause on November 6, 2015.



CDBG APPLICATION

CITY OF DOVER, NH
COMMUNITY DEVELOPMENT BLOCK GRANT
FY2018

APPLICANT INFORMATION	
Organization Dover Welfare	Tax ID
Name of Program Security Deposit and Homeless Housing	
Name of Executive Director Lena C. Nichols	
Mailing Address 61 Locust St, Dover NH 03820	
Physical Address same	
Contact Person Lena C. Nichols	Phone 603-516-6500
E-Mail l.nichols@dover.nh.gov	Website
Please Identify the Type of Organization Applying for Funds (Note: More than one may apply)	
☐ 501(c)(3)	☐ For-profit authorized under 570.201(o) ☒ Unit of Government
☐ Faith-based Organization	☐ Institution of Higher Education
☐ Other (Explain):	
Tax ID #	
*DUNS #	*SAM Expiration Date

* Important notice regarding new mandatory federal reporting requirements: The Federal Funding Accountability and Transparency Act requires sub-recipients receiving federal funds to register with Dunn and Bradstreet to obtain a DUNS number and complete or renew their registration in the System for Award Management (SAM). For information on how to obtain a DUNS number and register in SAM please visit <https://fedgov.dnb.com/webform> and <https://www.sam.gov/portal/SAM/HH11>. Completing these registration processes is free, but may take up to 15 days to complete. The city will not commit funds without this information.

ACTIVITY or PROJECT INFORMATION

ACTIVITY OR PROJECT INFORMATION
Amount of Dover CDBG funds requested for activity/project: \$ 8500
Provide a <u>very brief</u> summary of the activity or project for which the funds are requested. Keep responses to one or two sentences (i.e. After School Care for K-4 th grade students. Repair of homeless shelter roof. Etc.) To help people move into apartments that they can afford or to place them into motels until shelter space is available.
Identify the Dover Consolidated Plan "Specific Objective" that will be met by the proposed activity/project (see page 3 of CDBG Application: Overview & Scoring: Goal and Objectives) Goal 1
Specific Objective (i.e. Removal of architectural barriers to allow increased handicapped accessibility)

PROJECT LOCATION
Location(s) where services will be provided or physical improvements will be made. Apartments within Dover or motel space were available in the Greater Dover area

PROPOSED SCHEDULE OF PROJECT IMPLEMENTATION – PUBLIC FACILITIES ONLY (Construction Projects/Physical Improvements)	
For this section please identify the major tasks and dates that they will be achieved.	
TASK	DATE
Security Deposit to a number of people	Throughout the year
Place homeless families and singles in motels	Throughout the year.

BENEFICIARIES
Beneficiaries: For FY2018 (7/1/17 – 6/30/18) please provide the <i>estimated</i> number of unduplicated Dover beneficiaries that will benefit from this CDBG funded activity or project, not necessarily your entire client population (Note: these numbers will be monitored during the funding year): 20 For FY2016 (7/1/15 – 6/30/16) please provide the number of unduplicated Dover beneficiaries that benefited from this activity or program, not necessarily your entire client population: Were Dover CDBG funds used to fund this activity or program in FY2017 (7/1/16 – 6/30/17): yea If so, how much? \$8000
Beneficiary type: ☒ Elderly ☒ Family ☒ Disabled ☒ Homeless ☐ Persons living with AIDS ☐ Other (specify):

ACTIVITY/PROJECT NARRATIVE

Please provide a detailed description for the proposed activity/project. (*note: not the organization*) This section should describe the use of funds and explain why the funds are needed. Please relate how the CDBG funds will ultimately benefit Dover low-moderate income individuals. This money would allow us to help people move into apartments in Dover that they can afford in the future. This is often into Section 8 apartments or into Dover Housing. This year we would also like to extend this to help people that find themselves homeless with no shelter space available. These people often do not have income and cannot move into a room or apartment.

Please indicate who prepared the overall cost estimate for the activity or project.

For this application, written quotes are required for proposed purchase of items exceeding \$3,000.00 or for physical improvements (i.e. building expansion, new roof, replacement of windows, etc.). Please attach quotes you have obtained.

PERFORMANCE OUTCOME MEASURES

Provide the outcomes proposed and the method of measurement. You may list multiple outcomes.

Outcome	Measurement
Ex. Decrease in number of "latch-key kids"	Ex. # of children who participate in afterschool program
Ex. Decreased dependence on emergency care facilities for non-emergency care of low/mod adults	Ex. Increase in number of low/mod income residents that seek care from health program.
Decrease the number of people in shelters or couch surfing because they cannot afford both the first month's rent and a security deposit.	Number or shelter spaces that open up.
Decrease the number of people and families that are living in their cars or unsafe places	See the number of people that are getting services that move them into shelters or permanent housing.

ORGANIZATION

DESCRIPTION OF ORGANIZATION

Please provide a description for the Organization that is undertaking the activity/project. Dover City Welfare

AUDIT AND EVALUATION

Does your organization have an annual CPA Audit? Yes

If yes, please submit most recent Audit.

Is your organization evaluated by outside agencies or programs? Yes

If yes, please note the agency/program and how often the evaluation occurs.

BOARD OF DIRECTORS

Name	Residence (city/town)

BUDGET

Use box A or B below to provide a budget for the proposed *Public Service (A.)* or *Public Facility (B.)*. Include all proposed expenses.

A. Public Services (Non-Construction Projects)			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Office Supplies	0	City of Dover	
Utilities	0	City of Dover	
Repairs/Maintenance	0	City of Dover	
Travel	0	City of Dover	
Salaries (List relevant positions)	0		
Other:			
TOTAL PROPOSED BUDGET:			

B. Public Facilities: Construction Projects/Physical Improvements			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Hard Costs <u>Note:</u> Federal wage rates may apply for some construction projects. Applicants are encouraged to obtain estimates that reflect wage rates estimates.			
Construction			
Other (list)			
<i>Total Hard Costs</i>			
Soft Costs			
Acquisition			
Appraisals			
Design/Engineering			
Other(list):			

<i>Total Soft Costs</i>			
TOTAL PROPOSED BUDGET:			

FUNDING SOURCES

Other Funding Sources - please indicate the source and amount of other funding committed, pending or proposed for this project, if any. *Do not include Dover CDBG amount requested.*

Funding Source: (Name(s) of funding source(s))	Total Amount (\$):	Committed, Pending or Proposed Amount (\$):	
Federal:		Committed Pending Proposed	
State:		Committed Pending Proposed	
Local:		Committed Pending Proposed	
Private:		Committed Pending Proposed	
Portsmouth CDBG:		Committed Pending Proposed	
Rochester CDBG:		Committed Pending Proposed	
Other:		Committed Pending Proposed	
Total:		Committed Pending Proposed	

Organizational Commitment: For Public Facility Projects (building addition, new roof, replacement windows, etc.) – indicate the amount of funds that the organization will be contributing to the project.

Funding Source: (Name of Parent Organization)	Total Amount (\$) to be Contributed by Parent Organization	Committed or Proposed Amount (\$)	
		Committed	Proposed
Total:			

AGENCY BUDGET

Please provide a breakdown of your organization's overall annual budget. Please indicate the dates of your budget period, i.e. July 1 to June 30 or January 1 to December 31.

Budget Period: from	to	Current Year	Next Year (projected)
REVENUES			
Federal Funds			
State Funds			
Foundations/Private Contributions			
United Way			
Fundraising or other income			
Other (describe)		7500	10000
Community Dev. Block Grant (include anticipated request)			
TOTAL REVENUE		7500	10000
EXPENSES			
Salaries		0	0
Fringe Benefits		0	0
Supplies (include printing/copying)		0	0
Travel		0	0
Training		0	0
communications		0	0
Audit		0	0
Property Maintenance		0	0
Service Contracts		0	0
Construction Supplies/Materials		0	0
Other (describe)		0	0
TOTAL EXPENSES		0	0
NET (Income - Expenses)			

By signing below, the Authorized Official affirms: The organization's commitment to implement the proposed activity/project; that all information presented is true and accurate to the best of their knowledge; and he/she is authorized to submit this application;

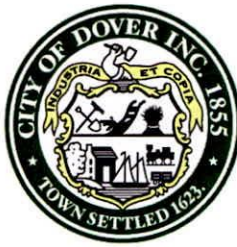
Submitted by:


Authorized Official - signature

12/13/16
Date

LENA NICHOLS
Print Name

DIRECTOR OF WELFARE
Print Title



RECEIVED
Planning Office

NOV 16 2016

Dover, New Hampshire

CDBG APPLICATION

**CITY OF DOVER, NH
COMMUNITY DEVELOPMENT BLOCK GRANT
FY2018**

APPLICANT INFORMATION

Organization HAVEN	Tax ID 02-0337620									
Name of Program Emergency Shelter Services for Domestic Violence Victims										
Name of Executive Director Kathy Beebe										
Mailing Address 20 International Drive, Suite 300 Portsmouth, NH 03801										
Physical Address same										
Contact Person Kathy Beebe	Phone 603-436-4107 x 105									
E-Mail kbeebe@havennh.org	Website www.havennh.org									
Please Identify the Type of Organization Applying for Funds (Note: More than one may apply) <table border="0"><tr><td>☒ 501(c)(3)</td><td>☐ For-profit authorized under 570.201(o)</td><td>☐ Unit of Government</td></tr><tr><td>☐ Faith-based Organization</td><td>☐ Institution of Higher Education</td><td></td></tr><tr><td>☐ Other (Explain):</td><td></td><td></td></tr></table>		☒ 501(c)(3)	☐ For-profit authorized under 570.201(o)	☐ Unit of Government	☐ Faith-based Organization	☐ Institution of Higher Education		☐ Other (Explain):		
☒ 501(c)(3)	☐ For-profit authorized under 570.201(o)	☐ Unit of Government								
☐ Faith-based Organization	☐ Institution of Higher Education									
☐ Other (Explain):										
Tax ID # 02-0337620										
*DUNS # 070801589	*SAM Expiration Date 2/28/2017									

* *Important notice regarding new mandatory federal reporting requirements:* The Federal Funding Accountability and Transparency Act requires sub-recipients receiving federal funds to register with Dunn and Bradstreet to obtain a DUNS number and complete or renew their registration in the System for Award Management (SAM). For information on how to obtain a DUNS number and register in SAM please visit <https://fedgov.dnb.com/webform> and <https://www.sam.gov/portal/SAM/##11>. Completing these registration processes is free, but may take up to 15 days to complete. The city will not commit funds without this information.

ACTIVITY or PROJECT INFORMATION

ACTIVITY OR PROJECT INFORMATION
Amount of Dover CDBG funds requested for activity/project: \$ 5,000
Provide a <u>very brief</u> summary of the activity or project for which the funds are requested. Keep responses to one or two sentences (i.e. After School Care for K-4th grade students. Repair of homeless shelter roof. Etc.) To assist domestic violence victims fleeing abuse with temporary shelter and services until they are ready to transition into safe, permanent housing. Identify the Dover Consolidated Plan "Specific Objective" that will be met by the proposed activity/project (see page 3 of CDBG Application: Overview & Scoring: Goal and Objectives) Specific Objective: To provide increased opportunities to residents of the City who require education, health, recreation, housing and related human services.

PROJECT LOCATION
Location(s) where services will be provided or physical improvements will be made. HAVEN's confidential emergency shelter and office in Portsmouth (20 International Drive at Pease Tradeport) and Rochester (150 Wakefield Street).

PROPOSED SCHEDULE OF PROJECT IMPLEMENTATION – PUBLIC FACILITIES ONLY (Construction Projects/Physical Improvements)	
For this section please identify the major tasks and dates that they will be achieved.	
TASK	DATE

BENEFICIARIES
Beneficiaries: For FY2018 (7/1/17 – 6/30/18) please provide the <i>estimated</i> number of unduplicated Dover beneficiaries that will benefit from this CDBG funded activity or project, not necessarily your entire client population (Note: these numbers will be monitored during the funding year): 40 Dover residents will benefit from our emergency shelter and safety planning services for victims fleeing from abuse. For FY2016 (7/1/15 – 6/30/16) please provide the number of unduplicated Dover beneficiaries that benefited from this activity or program, not necessarily your entire client population: 208 (but these included Dover domestic violence victims accessing shelter and/or all of HAVEN's 24 hour support services, including safety planning, assistance obtaining restraining orders and hospital and police accompaniments. Were Dover CDBG funds used to fund this activity or program in FY2017 (7/1/16 – 6/30/17): Yes If so, how much? \$3,000 Beneficiary type: ☐ Elderly ☐ Family ☐ Disabled ☒ Homeless ☐ Persons living with AIDS ☒ Other (specify): domestic violence victims

ACTIVITY/PROJECT NARRATIVE

Please provide a detailed description for the proposed activity/project. (*note: not the organization*) This section should describe the use of funds and explain why the funds are needed. Please relate how the CDBG funds will ultimately benefit Dover low-moderate income individuals.

Funding is being requested to assist HAVEN in providing emergency shelter and support services for Dover residents who are fleeing from domestic violence. HAVEN would utilize Dover CDBG funding for a portion (3%) of the total costs associated with our emergency shelter and support program that HAVEN provides to individuals and families seeking safety from domestic abuse. The goal at HAVEN is to help transition every domestic violence victim/survivor into safe, affordable, permanent housing. For individuals staying in the shelter and those fleeing abuse that do not end up staying in shelter, HAVEN utilizes community resources and creates a comprehensive support system with peer counseling, support groups, financial empowerment and advocacy tailored to each survivor's individual and long-term needs. HAVEN also maintains relationships with area housing organizations, community action programs and other homeless shelter agencies to assist survivors in locating permanent housing. HAVEN does not place any restrictions on how long a survivor can stay with us, but work with each survivor on understanding the need to be actively searching for permanent housing and focus on their individual needs to insure progress toward their goals of safety and self-sufficiency. HAVEN utilizes the empowerment model and works with each survivor to determine their individual or family long-term needs. By utilizing this framework, where survivors are considered experts in their own lives, HAVEN strives to reduce the length of stay in our shelter as well as move more survivors into permanent housing.

Dover residents make up a large group of clients HAVEN serves, representing approximately 8% of the clientele served in our client services program. HAVEN responds immediately to requests for hotline, safety planning and crisis services 24 hours a day, 365 days a year and there is no waiting list. The shelter is almost always full and it is rare that there is an open room for more than a day. If there is no availability in our shelter, HAVEN works with clients to find other available space through one of the other domestic violence shelters in New Hampshire. Because domestic and sexual violence are serious public health issues, the services HAVEN provides are critical to Dover low-moderate income individuals as they seek safety and self-sufficiency in the aftermath of domestic abuse.

Please indicate who prepared the overall cost estimate for the activity or project.

The Executive Director and Finance Manager prepared the shelter budget. Please note that the budget is for shelter services only and does not include the other 24-hour client services that are also provided to Dover residents seeking help and safety from domestic and sexual violence.

For this application, written quotes are required for proposed purchase of items exceeding \$3,000.00 or for physical improvements (i.e. building expansion, new roof, replacement of windows, etc.). Please attach quotes you have obtained.

PERFORMANCE OUTCOME MEASURES

Provide the outcomes proposed and the method of measurement. You may list multiple outcomes.

Outcome	Measurement
Ex. Decrease in number of "latch-key kids" Ex. Decreased dependence on emergency care facilities for non-emergency care of low/mod adults	Ex. # of children who participate in afterschool program Ex. Increase in number of low/mod income residents that seek care from health program.
Increase access to safety planning and services for domestic violence victims in imminent danger and trying to overcome barriers to fleeing abuse.	Number of Dover domestic violence victims that seek assistance from HAVEN 24-hour services or stay in our emergency shelter.
Increase number of Dover domestic violence victims who are safe and free from abuse	Number of Individuals leaving the shelter into safe and permanent housing.

ORGANIZATION

DESCRIPTION OF ORGANIZATION

Please provide a description for the Organization that is undertaking the activity/project.

For more than 35 years, A Safe Place provided services to individuals impacted by domestic violence and Sexual Assault Support Services (SASS) assisting those impacted by sexual violence. On July 1, 2015, these two nonprofit organizations officially and legally merged into HAVEN whose mission is to prevent sexual assault and domestic violence and to empower women, men, youth and families to heal from abuse and rebuild their lives. HAVEN is the largest domestic and sexual violence support and prevention agency in NH providing services to 48 cities and towns throughout Southeastern New Hampshire. In the first year as a merged organization, HAVEN provided crisis intervention to 3500 individuals and families (up more than 400 from prior to the merger). In addition, HAVEN reached over 11,000 children and youth with our *Safe Kids Strong Teens* violence prevention program that aims to prevent sexual abuse, bullying and teen dating violence. Preventing domestic violence and sexual abuse and providing support for those impacted can lead to healthier and more secure children and adults.

HAVEN provides the following services and programs:

- Emergency shelter
- 24-hour confidential crisis and support hotline 1-603-994-SAFE (7233)
- 24-hour accompaniment to police stations and hospital emergency rooms
- Accompaniment to courts and assistance obtaining restraining orders
- Safety planning
- Support and accompaniment for families at the Rockingham and Strafford County Child Advocacy Centers
- Support groups for survivors of domestic violence, sexual assault, and parents.
- K-12 Safe Kids Strong Teens violence prevention education program

The shelter program at HAVEN provides temporary emergency housing until a domestic violence victim is ready to transition into safe permanent housing. Survivors work with the shelter staff in identifying additional support systems, basic needs, and potential barriers related to the survivor's health and well-being, including transportation and permanent housing. HAVEN staff work with other community agencies in order to respond to the array of identified needs. The amount of additional support, resources and the coping skills that each shelter guest has determines the pace at which they are able to attain their personal goals. While staying at the shelter, survivors meet with the shelter staff for daily check-ins and additional support as they work on their goals for safety and self-sufficiency.

HAVEN has a strong history of producing positive results with programs and services as seen in the following excerpts:

"For the first time in my life I am able to say that I am free, I can breathe, I am strong and that I am SAFE!"

~ Sara, a mom staying in the Emergency Shelter with her 6 year-old daughter.

"I feel so much better. My belly aches are all gone. No more secrets."

~ Emily 8 year-old to HAVEN advocate while at the Child Advocacy Center

AUDIT AND EVALUATION

Does your organization have an annual CPA Audit? Yes

If yes, please submit most recent Audit.

Is your organization evaluated by outside agencies or programs? Yes

If yes, please note the agency/program and how often the evaluation occurs. NH Coalition Against Domestic and Sexual Violence (NHCADSV) monitors HAVEN for compliance with member program standards and federal grants that are administered through NHCADSV to HAVEN.

BOARD OF DIRECTORS	
Name	Residence (city/town)
Andrea Lewy, Chair	Nottingham
Sidney Bennett, Vice Chair	Dover
Mary Downes, Secretary	Durham
Karen Wimer, Treasurer	Portsmouth
Helen Rizza, At Large Member	Hampton
Taraneh Azar	Rye
Kate Belavitch	Portsmouth
Bob Frechette	Strafford
Kim Gibson	Barrington
Kristina Goumas	Portsmouth
Jessica Koukis	Rye
Bill MCQuillen	Portsmouth
Beth Moreau	Portsmouth
Leslie Pasternack	Durham
Maureen Pecora	Exeter

BUDGET

Use box A or B below to provide a budget for the proposed *Public Service (A.)* or *Public Facility (B.)*. Include all proposed expenses.

A. Public Services (Non-Construction Projects) HAVEN Emergency Shelter services			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Office Supplies		4640	4640
Utilities		6460	6460
Repairs/Maintenance		5100	5100
Travel		1000	1000
Salaries (List relevant positions)			
Shelter Manager	5000	37000	42000
3-11pm Shelter Advocate		32240	32240
Per diem weekend shelter advocates		12000	12000
Fringe Benefits		23945	23945
Other: insurance, travel, client needs		14100	14100
Shelter AmeriCorps Match		6000	6000
Hotel nights when shelter is full		1200	1200
Mortgage/Interest		3540	3540
TOTAL PROPOSED BUDGET:	5000	147225	152225

B. Public Facilities: Construction Projects/Physical Improvements			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Hard Costs <i>Note: Federal wage rates may apply for some construction projects. Applicants are encouraged to obtain estimates that reflect wage rates estimates.</i>			
Construction			
Other (list)			
<i>Total Hard Costs</i>			
Soft Costs			
Acquisition			
TOTAL PROPOSED BUDGET:			

FUNDING SOURCES

Other Funding Sources - please indicate the source and amount of other funding committed, pending or proposed for this project, if any. *Do not include Dover CDBG amount requested.*

Funding Source: (Name(s) of funding source(s))		Total Amount (\$):	Committed, Pending or Proposed Amount (\$):	
Federal:	Victim of Crime Assistance VOCA State Grant in Aid (HUD)	98185	Committed Pending Proposed	98185
State:	Domestic Violence Prevention Program (DVPP)	10000	Committed Pending Proposed	10000
Local:	Municipalities	11040	Committed Pending Proposed	11040
Private:	Individual donations	16000	Committed Pending Proposed	16000
Portsmouth CDBG:		10000	Committed Pending Proposed	10000
Rochester CDBG:	Rochester provides in-kind client service office space, so we do not apply	0	Committed Pending Proposed	
Other:	Inkind Gift cards for gas, food, and other client needs	2000	Committed Pending Proposed	2000
Total:		147225	Committed Pending	145225 2000

		Proposed	
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Organizational Commitment: For Public Facility Projects (building addition, new roof, replacement windows, etc.) – indicate the amount of funds that the organization will be contributing to the project.

Funding Source: (Name of Parent Organization)	Total Amount (\$) to be Contributed by Parent Organization	Committed or Proposed Amount (\$)	
		Committed	
		Proposed	
Total:			

AGENCY BUDGET

Please provide a breakdown of your organization's overall annual budget.

Budget Period: from July 1, 2016 to June 30, 2017		Current Year	Next Year (projected)
REVENUES			
Federal Funds		537784	500000
State Funds		134007	135000
Foundations/Private Contributions		427500	515000
United Way		0	0
Fundraising or other income		108500	100000
Other (describe) program honoraria		31409	35000
Community Dev. Block Grant (include anticipated request)		13000	15000
TOTAL REVENUE		1252200	1300000
EXPENSES			
Salaries		767320	825000
Fringe Benefits		162477	175000
Supplies (include printing/copying)		21700	25000
Travel		20000	23000
Training		9200	5000
Communications			
Audit		9000	15000
Property Maintenance, Rent and Mortgage		84740	85000
Service Contracts		60380	55000
Construction Supplies/Materials			
Other (describe) Telephone, Answering service, utilities, insurance		117383	92000
TOTAL EXPENSES		1252200	1300000
NET (Income - Expenses)			

By signing below, the Authorized Official affirms: The organization's commitment to implement the proposed activity/project; that all information presented is true and accurate to the best of their knowledge; and he/she is authorized to submit this application;

Submitted by:


Authorized Official - signature

11-15-16
Date

Kathy Beebe
Print Name

Executive Director
Print Title

**HAVEN - VIOLENCE PREVENTION
AND SUPPORT SERVICES
d/b/a HAVEN**

FINANCIAL STATEMENTS

**FROM JULY 1, 2015
(DATE OF INCEPTION) TO JUNE 30, 2016**

OUELLETTE & ASSOCIATES, P.A.

CERTIFIED PUBLIC ACCOUNTANTS

Keith H. Allen, C.P.A., M.S.T.
Mark R. Carrier, C.P.A.
Michael R. Dunn, C.P.A.

Steven R. Lamontagne, C.P.A.
Gary A. Wigant, C.P.A.
C. Joseph Wolverton, C.P.A.

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of
HAVEN

We have audited the accompanying financial statements of HAVEN - Violence Prevention and Support Services, d/b/a HAVEN (a nonprofit organization), which comprise the statement of financial position as of June 30, 2016, and the related statements of activities, functional expenses, and cash flows for the period from inception (July 1, 2015) to June 30, 2016, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of HAVEN as of June 30, 2016, and the changes in its net assets and its cash flows for the initial period then ended in accordance with accounting principles generally accepted in the United States of America.

Ouellette & Associates, P.A.

Certified Public Accountants

November 8, 2016
Lewiston, Maine

HAVEN

STATEMENT OF FINANCIAL POSITION

JUNE 30, 2016

ASSETS

ASSETS

Cash	\$ 157,447
Grants Receivable	230,602
Prepaid Expenses	7,603
Deposits	5,227
Investments	141,771
Beneficial Interest in Funds Held by Others	12,687
Property and Equipment, Net of Accumulated Depreciation of \$246,171	<u>193,494</u>

TOTAL ASSETS	\$ <u>748,831</u>
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LIABILITIES AND NET ASSETS

LIABILITIES

Accounts Payable	\$ 2,835
Accrued Expenses	31,310
Mortgage Note Payable	<u>9,895</u>

TOTAL LIABILITIES	<u>44,040</u>
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NET ASSETS

Unrestricted	<u>704,791</u>
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TOTAL NET ASSETS	<u>704,791</u>
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TOTAL LIABILITIES AND NET ASSETS	\$ <u>748,831</u>
---	--------------------------

See Independent Auditor's Report and Accompanying Notes to the Financial Statements.

HAVEN

STATEMENT OF ACTIVITIES

FROM JULY 1, 2015 (DATE OF INCEPTION) TO JUNE 30, 2016

UNRESTRICTED NET ASSETS

Unrestricted Revenue and Support

Municipal Grants	\$ 110,311
Donations	309,902
Special Events, Net of Direct Costs of \$14,357	20,912
Honararia	22,632
Investment Income	514
Miscellaneous Revenue	538
	<u>464,809</u>
Net Assets Released from Restrictions	880,591
Total Unrestricted Revenue, Support and Gains	<u>1,345,400</u>

Expenses and Losses

Program Services	985,213
Management and General	232,394
Fundraising	106,562
Total Expenses	<u>1,324,169</u>
Loss from Investments, Net of Fees	6,451
Loss from Return of Unspent Restricted Funds	14,303
Total Losses	<u>20,754</u>
Total Expenses and Losses	<u>1,344,923</u>
Change in Unrestricted Net Assets	<u>477</u>

TEMPORARILY RESTRICTED NET ASSETS

Contributions and Foundation Grants

Federal and State Grants	718,103
Community Development Block Grants	33,901
Other Grants and Contributions	20,000
	<u>772,004</u>

Net Assets Released from Restrictions	<u>(880,591)</u>
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Change in Temporarily Restricted Net Assets	<u>(108,587)</u>
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CHANGE IN NET ASSETS	(108,110)
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NET ASSETS AT BEGINNING OF YEAR	<u>812,901</u>
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NET ASSETS AT END OF YEAR	<u>\$ 704,791</u>
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See Independent Auditor's Report and Accompanying Notes to the Financial Statements.

HAVEN

STATEMENT OF FUNCTIONAL EXPENSES

FROM JULY 1, 2015 (DATE OF INCEPTION) TO JUNE 30, 2016

	<i>Program Services</i>	<i>Management and General</i>	<i>Fundraising</i>	<i>Total</i>
Salaries and Wages	\$ 623,355	\$ 83,212	\$ 73,764	\$ 780,331
Payroll Taxes, Benefits and Fees	<u>122,994</u>	<u>16,783</u>	<u>18,694</u>	<u>158,471</u>
Total Personnel Expenses	746,349	99,995	92,458	938,802
Banking and Credit Card Fees	-	667	222	889
Contract Services	19,004	22,326	7,200	48,530
Depreciation	14,566	14,565	-	29,131
Dues and Subscriptions	2,195	737	-	2,932
Equipment Maintenance and Rental	12,774	16,896	-	29,670
Equipment and Supplies	12,675	6,700	310	19,685
Insurance	23,398	13,954	-	37,352
Interest	387	-	-	387
Occupancy	58,115	23,148	-	81,263
Postage	455	2,091	585	3,131
Printing and Outreach Material	25,513	905	5,787	32,205
Professional Fees	-	21,320	-	21,320
Staff Development	1,896	385	-	2,281
Utilities	34,873	6,365	-	41,238
Travel	22,153	279	-	22,432
Victim Assistance	8,791	-	-	8,791
Other	<u>2,069</u>	<u>2,061</u>	<u>-</u>	<u>4,130</u>
TOTAL EXPENSES	<u>\$ 985,213</u>	<u>\$ 232,394</u>	<u>\$ 106,562</u>	<u>\$ 1,324,169</u>

See Independent Auditor's Report and Accompanying Notes to the Financial Statements.

HAVEN

STATEMENT OF CASH FLOWS

FROM JULY 1, 2015 (DATE OF INCEPTION) TO JUNE 30, 2016

CASH FLOWS FROM OPERATING ACTIVITIES

Change in Net Assets	\$ (108,110)
<i>Adjustments to Reconcile Change in Net Assets to</i>	
<i>Net Cash from Operating Activities:</i>	
Unrealized Loss on Investments and Beneficial Interest in Funds Held by Others	6,451
Depreciation	29,131
<i>(Increase) Decrease in Operating Assets:</i>	
Grants Receivable	(37,434)
Prepaid Expenses	342
Deposits	9,585
<i>Increase (Decrease) in Operating Liabilities:</i>	
Accounts Payable	1,956
Accrued Expenses	(30,576)

NET CASH FROM OPERATING ACTIVITIES (128,655)

CASH FLOWS FROM INVESTING ACTIVITIES

Purchase of Property and Equipment (27,219)

CASH FLOWS FROM FINANCING ACTIVITIES

Principal Payments on Mortgage Note Payable (3,121)

CHANGE IN CASH (158,995)

CASH AT BEGINNING OF YEAR 316,442

CASH AT END OF YEAR \$ 157,447

Supplemental Disclosures of Cash Flows Information:

Cash Paid for Interest: \$ 387

See Independent Auditor's Report and Accompanying Notes to the Financial Statements.

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2016

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**Nature of Organization**

HAVEN (the Organization) is a New Hampshire nonprofit corporation formed as a result of a merger between Seacoast Task Force on Family Violence, dba A Safe Place, and Sexual Assault Support Services as of July 1, 2015. The Organization's mission is to prevent sexual assault, domestic violence and stalking and to support and empower women, men, youth, and families to heal from abuse and rebuild their lives. HAVEN achieves its mission through a twenty-four hour crisis hotline, the provision of support groups and direct victims assistance, education through training and consultation, and outreach via community events. The Organization serves Rockingham and Strafford Counties in New Hampshire.

The Organization is supported primarily through donor contributions and grants.

Basis of Presentation

The Organization's net assets and revenues, expenses, gains and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets of the Organization and changes therein are classified and reported as follows:

Unrestricted Net Assets - Net assets that are not subject to donor-imposed stipulations.

Temporarily Restricted Net Assets - Net assets subject to donor-imposed stipulations that may or will be met, either by actions of the Organization and/or the passage of time. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. The Organization has no temporarily restricted net assets at June 30, 2016.

Permanently Restricted Net Assets - Net assets subject to donor-imposed stipulations that they be maintained permanently by the Organization. Generally, the donors of these assets permit the Organization to use all or part of the income earned on related investments for general or specific purposes. The Organization currently has no permanently restricted net assets at June 30, 2016.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles in the United States of America requires management to make estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenue and expenses during the reporting period. Accordingly, actual results could differ from those estimates.

Cash and Cash Equivalents

For purposes of the statement of cash flows, the Organization considers all highly liquid debt instruments purchased with an original maturity of three months or less to be cash equivalents. There were no cash equivalents as of June 30, 2016.

NOTES TO FINANCIAL STATEMENTS
(Continued)JUNE 30, 2016

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)**Promises to Give (Grants Revenue and Support)**

Conditional promises to give are not recognized in the financial statements until the conditions are substantially met. Unconditional promises to give that are expected to be collected within one year are recorded at net realizable value. Unconditional promises to give that are expected to be collected in more than one year are recorded at fair value, which is measured at the present value of their future cash flows. The discounts on those amounts are computed using risk-adjusted interest rates applicable to the years in which the promises are received. Amortization of the discounts is included in contribution revenue. In the absence of donor stipulations to the contrary, promises with payments due in future periods are restricted to use after the due date. Promises that remain uncollected more than one year after their due dates are written off unless the donors indicate that payment is merely postponed.

All grants have been recorded at net realizable value as the Organization did not have any grants that were expected to be collected in more than one year and no discounts have been computed at June 30, 2016.

Investments

The Organization carries investments in marketable securities with readily determinable fair values in the statements of financial position. Unrealized gains and losses are included in the change in net assets in the accompanying statements of activities.

Property and Equipment

The Organization capitalizes all expenditures for property and equipment in excess of \$1,000. Purchased property and equipment are recorded at cost, and donated property and equipment are carried at the approximate fair value at the date of donation. Major additions and renewals are capitalized, while repairs and maintenance are expensed as incurred. Depreciation is calculated using the straight-line basis over the estimated useful lives of the assets. Depreciation expense for June 30, 2016 was \$29,131.

In-Kind Donations

The Organization relies on volunteers to provide various services that are not considered specialized. The value of contributed services consisting of on-call services valued at \$4 per hour and client service volunteer/interns valued at \$15 per hour for the year ended June 30, 2016 was estimated to be \$202,120 and is not included in the statement of activities.

The Organization received donated facilities at its Rochester location with a fair value of \$13,200 in 2016.

NOTES TO FINANCIAL STATEMENTS
(Continued)

JUNE 30, 2016

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Functional Allocation of Expenses

The costs of providing the various program services have been summarized on a functional basis in the statements of functional expenses. Costs are charged to program services, management and general expenses, and fundraising activities on a combination of specific identification and allocation by management.

Income Taxes

The Organization is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue (IRS) Code. However, income from certain activities not directly related to the Organization's tax-exempt purpose would be subject to taxation as unrelated business income (UBI). Management of the Organization does not believe it is subject to UBI tax and, accordingly, no provision for income taxes is required.

Management has determined that the Organization does not have any uncertain tax positions and associated unrecognized benefits or liabilities that materially impact the financial statements or related disclosures. Since matters are subject to some degree of uncertainty, there can be no assurance that the Organization's tax returns will not be challenged by the taxing authorities and that the Organization will not be subject to additional tax, penalties and interest as a result of such challenge. Generally, the Organization's tax returns are subject to examination by the IRS for three years after they were filed.

Evaluation of Subsequent Events

Management has made an evaluation of subsequent events to and including November 8, 2016, the date of the auditor's report, which was the date the financial statements were available to be issued, and determined that any subsequent events that would require recognition or disclosure have been considered in the preparation of the financial statements.

NOTE 2: GRANTS RECEIVABLE

At June 30, 2016, grants receivable consist of the following:

Community Development Block Grants	\$ 3,750
Federal and State Grants	214,452
Strafford County – HOC	4,900
Rockingham County	<u>7,500</u>
	<u>\$ 230,602</u>

HAVEN

NOTES TO FINANCIAL STATEMENTS (Continued)

JUNE 30, 2016

NOTE 3: INVESTMENTS

Investments consist of mutual funds and are currently available to fund operations and are carried at fair value. Cost and fair value as of June 30, 2016 are summarized as follows:

Fair Value of Mutual Funds	\$ <u>141,771</u>
Aggregate Cost	\$ <u>130,732</u>

The following schedule summarizes the investment return and its classification in the statement of activities for the years ended June 30, 2016:

Investment Income	\$ 514
Net Unrealized Losses	(5,861)
Investment Fees and Expenses	<u>(590)</u>
Total Investment Return	\$ <u>(5,937)</u>

NOTE 4: PROPERTY AND EQUIPMENT

The following is a summary of property and equipment as of June 30, 2016:

Land	\$ 31,747
Buildings and Building Improvements	321,578
Leasehold Improvements	48,679
Office and Computer Equipment	<u>37,661</u>
	439,665
Less Accumulated Depreciation	<u>246,171</u>
Net	\$ <u>193,494</u>

NOTE 5: MORTGAGE NOTE PAYABLE

The mortgage note with People's United Bank is secured by a building that serves as the Organization's principal shelter. The note bears interest at a rate of 3% and matures in May 2019. The monthly principal and interest payment is \$295. Interest expense was \$387 for the year ended June 30, 2016.

Principal maturities of the mortgage for the fiscal years are as follows:

2017	\$ 3,285
2018	3,385
2019	<u>3,224</u>
Total	\$ <u>9,894</u>

HAVEN

NOTES TO FINANCIAL STATEMENTS
(Continued)

JUNE 30, 2016

NOTE 6: COMMITMENTS

The Organization has entered into a lease commitment as a sublessee for space in Portsmouth, New Hampshire with an original term of five years beginning June 1, 2015. The lease provides for escalating annual rentals based on property taxes and common area cleaning charges.

Future minimum lease payments under this lease for the next five years are as follows:

2017	\$ 34,488
2018	38,320
2019	39,470
2020	<u>40,657</u>
Total	<u>\$ 152,935</u>

Prior to June 1, 2015, the Organization leased space in Portsmouth, NH with an original term of 5 years with escalating annual rentals based on the lessor's annual operating cost of the building and square footage used by the Organization. As provided within the lease, the Organization was also responsible for utility costs, property taxes, and common area cleaning charges as well as interior repairs and maintenance.

HAVEN is a tenant at will in its premises in Rochester and Salem, NH.

Rent expense totaled \$42,476 in 2016 and is included within occupancy on the Statement of Functional Expenses.

NOTE 7: BENEFICIAL INTEREST IN FUNDS HELD BY OTHERS

HAVEN is a beneficiary of a designated fund held by the New Hampshire Charitable Foundation. Pursuant to the terms of the resolution establishing this fund, property contributed to The New Hampshire Charitable Foundation is held as a separate fund designated for the benefit of the Organization. In accordance with its spending policy, the Foundation makes distributions from the fund to HAVEN. The distributions are generally approximately 4.03% of the market value of the fund per year. At June 30, 2016, the fund has a fair value of \$12,687, which is reported in the statement of financial position as a beneficial interest in assets held by others.

NOTE 8: CONCENTRATIONS OF CREDIT RISK

The Organization maintains cash accounts in various financial institutions. Accounts are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. There were no uninsured balances held in these accounts as of June 30, 2016.

HAVEN

NOTES TO FINANCIAL STATEMENTS
(Continued)

JUNE 30, 2016

NOTE 9: FAIR VALUE MEASUREMENTS

Financial Instruments

The following methods and assumptions were used by HAVEN in estimating its fair value disclosures for financial instruments:

Cash, cash equivalents, short-term unconditional promises to give: The carrying amounts reported in the statement of financial position approximate fair values because of the short maturities of those instruments.

Long-term and endowment investments: The fair values of investments are based on quoted market prices for those or similar investments.

At June 30, 2016	<u>Fair Value</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
Financial Assets:				
Mutual Funds	\$141,771	\$141,771	\$ -	\$ -
Beneficial Interest in Funds Held by Others	<u>12,687</u>	<u>-</u>	<u>-</u>	<u>12,687</u>
	<u>\$154,458</u>	<u>\$141,771</u>	<u>\$ -</u>	<u>\$ 12,687</u>

Fair Value Measurements

Level 1: Quoted prices in active markets for identical assets.

Level 2: Significant other observable inputs.

Level 3: Significant unobservable inputs.

Beneficial Interest in Funds Held by Others

Fair value for the beneficial interest in assets held by others is determined from information obtained from the New Hampshire Charitable Foundation based on their value of the underlying investments.

The table below presents information about the changes in the beneficial interest held by others for the years ended June 30, 2016:

Beginning Balance	\$ 13,780
Change in Value	(503)
Program Expenses and Fees	<u>(590)</u>
Ending Balance	<u>\$ 12,687</u>

HAVEN

NOTES TO FINANCIAL STATEMENTS
(Continued)

JUNE 30, 2016

NOTE 10: MERGER OF OPERATIONS

On July 1, 2015, A Safe Place (ASP) and Sexual Assault Support Services (SASS) completed a merger of their operations. ASP provided immediate safety and support to victims of domestic violence and their children through the shelter, peer counseling, and a twenty-four hour hotline. SASS provided hotline crisis intervention and support services to victims and survivors of sexual assault and childhood sexual abuse and their non-offending parents, partners and friends. As a result of the merger, the combined organization has been named HAVEN - Violence Prevention and Support Services. Through their merger, the Organizations seek to unify the prevention of sexual assault and domestic violence and create synergies through integrating their services.

As of July 1, 2015, the major classes of assets, liabilities, and net assets of ASP and SASS follow:

	<u>SASS</u>	<u>ASP</u>	<u>Total HAVEN</u>
Assets:			
Cash	\$ 5,717	\$310,725	\$ 316,442
Grants Receivable	73,819	119,349	193,168
Prepaid Expenses	3,133	4,812	7,945
Deposits	4,812	10,000	14,812
Merger Related Deposits	248,402	-	248,402
Beneficial Interest in Assets Held by Others	-	13,780	13,780
Investments	-	147,129	147,129
Property and Equipment, net	<u>48,034</u>	<u>147,372</u>	<u>195,406</u>
Total Assets	<u>\$383,917</u>	<u>\$753,167</u>	<u>\$1,137,084</u>
Liabilities:			
Accounts Payable and Accrued Expenses	\$ 50,850	\$ 11,915	\$ 62,765
Merger Related Advances	-	248,402	248,402
Mortgage Note Payable	<u>-</u>	<u>13,016</u>	<u>13,016</u>
Total Liabilities	<u>\$ 50,850</u>	<u>\$273,333</u>	<u>\$ 324,183</u>
Net Assets:			
Unrestricted	\$233,266	\$471,048	\$ 704,314
Temporarily Restricted	<u>99,801</u>	<u>8,786</u>	<u>108,587</u>
Total Net Assets	<u>\$333,067</u>	<u>\$479,834</u>	<u>\$ 812,901</u>
Total Liabilities and Net Assets	<u>\$383,917</u>	<u>\$753,167</u>	<u>\$1,137,084</u>

There were no material adjustments to conform the accounting policies of the combining organizations prior to the merger.

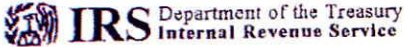
HAVEN

NOTES TO FINANCIAL STATEMENTS
(Continued)

JUNE 30, 2016

NOTE 10: MERGER OF OPERATIONS (Continued)

On the date of the merger, ASP had unspent restricted grant funds of \$14,303 to fund services in partnership with another program, the Family Justice Center (FJC). The management of HAVEN determined that the restriction would be met solely by the FJC and not HAVEN and turned the funds over directly to the FJC.



OGDEN UT 84201-0046

In reply refer to: 0423223404
June 27, 2016 LTR 252C 0
03-0337620 000000 00
Input Op: 0423223404 00005484
BODC: TE

HAVEN-VIOLENCE PREVENTION AND
SUPPORT SERVICES
A SAFE PLACE
20 INTERNATIONAL DR STE 300
PORTSMOUTH NH 03801

059170

Taxpayer Identification Number: 02-0337620

Dear Taxpayer:

Thank you for your Form 8822-B.

We have changed the name on your account as requested. The number shown above is valid for use on all tax documents.

If you need forms, schedules, or publications, you may get them by visiting the IRS website at www.irs.gov or by calling toll-free at 1-800-TAX-FORM (1-800-829-3676).

If you have any questions, please call us toll free at 1-877-829-5500.

If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number () _____ Hours _____

Sincerely yours,

A handwritten signature in black ink that reads "Brett S. Bemenderfer".

Brett S. Bemenderfer
Dept. Manager, Code & Edit/Entity 3

Enclosure(s):
Copy of this letter



RECEIVED
Planning Office
NOV 15 2016
Dover, New Hampshire

CDBG APPLICATION
CITY OF DOVER, NH
COMMUNITY DEVELOPMENT BLOCK GRANT
FY2018

APPLICANT INFORMATION

Organization Homeless Center for Strafford County	Tax ID 02-0519859									
Name of Program Homeless Center for Strafford County - Emergency Shelter										
Name of Executive Director Sally B. Struble, JD										
Mailing Address P.O. Box 7306, 9 Isinglas Drive, Rochester, NH 03839										
Physical Address 9 Isinglas Drive, Rochester, NH 03839										
Contact Person Sally B. Struble	Phone (603) 332-3065									
E-Mail sstruble@homelesscenter.net	Website www.homelesscenterforstraffco.org									
Please Identify the Type of Organization Applying for Funds (Note: More than one may apply) <table><tr><td>☒ 501(c)(3)</td><td>☐ For-profit authorized under 570.201(o)</td><td>☐ Unit of Government</td></tr><tr><td>☐ Faith-based Organization</td><td>☐ Institution of Higher Education</td><td></td></tr><tr><td colspan="3">☐ Other (Explain):</td></tr></table>		☒ 501(c)(3)	☐ For-profit authorized under 570.201(o)	☐ Unit of Government	☐ Faith-based Organization	☐ Institution of Higher Education		☐ Other (Explain):		
☒ 501(c)(3)	☐ For-profit authorized under 570.201(o)	☐ Unit of Government								
☐ Faith-based Organization	☐ Institution of Higher Education									
☐ Other (Explain):										
Tax ID # 02-0519859										
*DUNS # 961601346	*SAM Expiration Date									

* Important notice regarding new mandatory federal reporting requirements: The Federal Funding Accountability and Transparency Act requires sub-recipients receiving federal funds to register with Dunn and Bradstreet to obtain a DUNS number and complete or renew their registration in the System for Award Management (SAM). For information on how to obtain a DUNS number and register in SAM please visit <https://fedgov.dnb.com/webform> and <https://www.sam.gov/portal/SAM/##11>. Completing these registration processes is free, but may take up to 15 days to complete. The city will not commit funds without this information.

ACTIVITY or PROJECT INFORMATION

ACTIVITY OR PROJECT INFORMATION
Amount of Dover CDBG funds requested for activity/project: \$ 11,118.20
Provide a very brief summary of the activity or project for which the funds are requested. Keep responses to one or two sentences (i.e. After School Care for K-4 th grade students. Repair of homeless shelter roof. Etc.) Overall operations of an emergency shelter for homeless women and families from Strafford County, eastern Rockingham County, and southern York County, Maine. Open this year from October 3, 2016 - May 1, 2017.
Identify the Dover Consolidated Plan "Specific Objective" that will be met by the proposed activity/project (see page 3 of CDBG Application: Overview & Scoring: Goal and Objectives) Specific Objective (i.e. Removal of architectural barriers to allow increased handicapped accessibility) To provide increased opportunities to residents of the City who require education, health, recreation, housing, and related human services.

PROJECT LOCATION
Location(s) where services will be provided or physical improvements will be made. 9 Isinglas Drive, Rochester, NH 03839

PROPOSED SCHEDULE OF PROJECT IMPLEMENTATION – PUBLIC FACILITIES ONLY (Construction Projects/Physical Improvements)	
For this section please identify the major tasks and dates that they will be achieved.	
TASK	DATE
N/A	

BENEFICIARIES
Beneficiaries: For FY2018 (7/1/17 – 6/30/18) please provide the <i>estimated</i> number of unduplicated Dover beneficiaries that will benefit from this CDBG funded activity or project, not necessarily your entire client population (Note: these numbers will be monitored during the funding year): 35 adults and children For FY2016 (7/1/15 – 6/30/16) please provide the number of unduplicated Dover beneficiaries that benefited from this activity or program, not necessarily your entire client population: 23 people (7 family units, comprised of 9 adults and 14 children) (from Oct. 3, 2016 - Nov. 15, 2016. We were closed from July 1, 2016 - October 2, 2016.) Were Dover CDBG funds used to fund this activity or program in FY2017 (7/1/16 – 6/30/17): Yes If so, how much? \$7,500.00 for all of our program year (October 3, 2016 - May 1, 2017) ☒ Beneficiary type: X Elderly X Family X Disabled X Homeless X Persons living with AIDS X Other (specify): We serve women and families, regardless of age, gender, disability, mental health status, immigration status, gender identity, health status, or sexual orientation, among other factors.

ACTIVITY/PROJECT NARRATIVE

Please provide a detailed description for the proposed activity/project. (note: not the organization) This section should describe the use of funds and explain why the funds are needed. Please relate how the CDBG funds will ultimately benefit Dover low-moderate income individuals. Provision of safe, emergency shelter for homeless women and families from Strafford County, eastern Rockingham County, and southern York County, Maine. In addition to shelter, the Homeless Center provides case management services to meet health, mental health, transportation, housing, and employment needs, and a variety of groups/classes on topics including nutrition, parenting, resume writing, and job interviewing skills. The Center also has three transitional housing units, where residents can live for a period of 18-24 months. The requested funds will be used to pay for line items to support the operation of the shelter, including electric, shelter maintenance costs, pest control, computer supplies & repair, office supplies, and resident transportation.

In FY 2015-2016, the Homeless Center served 23 Dover residents (7 family units, comprised of 9 adults and 14 children). To date during the current fiscal year, the Homeless Center has served 20 Dover residents (9 adults and 11 children), from our opening on October 3, 2016 until November 14, 2016. At this rate, the shelter is estimated to serve more Dover residents this fiscal year than it did in FY 2015-2016. All of the Dover residents served have been low-income individuals. The funds requested will assist Dover residents by providing much needed support to keep the shelter operating.

Please indicate who prepared the overall cost estimate for the activity or project. Sally B. Struble, Executive Director, and Brian Therrien, the Treasurer of the Board of Trustees.

For this application, written quotes are required for proposed purchase of items exceeding \$3,000.00 or for physical improvements (i.e. building expansion, new roof, replacement of windows, etc.). Please attach quotes you have obtained.

PERFORMANCE OUTCOME MEASURES

Provide the outcomes proposed and the method of measurement. You may list multiple outcomes.

Outcome	Measurement
Ex. Decrease in number of "latch-key kids" Ex. Decreased dependence on emergency care facilities for non-emergency care of low/mod adults	Ex. # of children who participate in afterschool program Ex. Increase in number of low/mod income residents that seek care from health program.
1. Provide shelter and related support services to 35 Dover residents. 2. Assist residents in being ready for their next step within four months of coming into the shelter.	1. Number of Dover residents served in FY 2017 - 2018. 2. Average number of months people from Dover reside at the shelter during FY 2017 - 2018.

ORGANIZATION

DESCRIPTION OF ORGANIZATION

Please provide a description for the Organization that is undertaking the activity/project. The Homeless Center for Strafford County has been operating since 1998 in Rochester, New Hampshire. The organization started out by offering shelter in the Salvation Army. In 2001, Waste Management of New Hampshire donated the use of a ranch style home on its property, formerly used as offices, as an emergency shelter. The organization has operated its shelter at that location since then. During FY 2016-2017, the shelter is open from October 3, 2016 - May 1, 2017. The organization employs six mainly part time staff people, including the Executive Director & Case Manager (both full time positions during the program year, and 15 hours per week during the summer, when the shelter is closed), Program Assistant (15 hours per week during the program year), and three part time overnight staff people, who work 10:00 p.m. - 6:00 a.m., 7 days per week during the program year. The shelter is staffed 24 hours per day, 7 days per

week during the program year. Approximately 45-50 volunteers provide the bulk of this shelter coverage each year. In addition to providing safe, emergency shelter and support services, the Homeless Center has three transitional housing units in its Transitional Housing Program, where residents can live for a period of 18-24 months until they get on their feet.

AUDIT AND EVALUATION

Does your organization have an annual CPA Audit? No

If yes, please submit most recent Audit.

Is your organization evaluated by outside agencies or programs? No

If yes, please note the agency/program and how often the evaluation occurs. N/A

BOARD OF DIRECTORS

Name	Residence (city/town)
Kathy Ford, President	Rochester
Jonathan Atwood, Vice President	Rochester
Brian Therrien, Treasurer	Dover
Ruth Henderson, Secretary	Barrington
Rob Bujeaud	Barrington
Rachel Gilman	Rochester
Mike Hagan	Somersworth
Tracy Hayes	Wolfeboro
Derek Peters	Rochester
Ernie Shipman	New Durham

BUDGET

Use box A or B below to provide a budget for the proposed *Public Service (A.)* or *Public Facility (B.)*. Include all proposed expenses.

A. Public Services (Non-Construction Projects)			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Office Supplies	1,000.00		1,000.00
Utilities	2,818.20		2,818.20
Repairs/Maintenance	1,000.00		1,000.00
Travel	1,500.00		1,500.00
Salaries (List relevant positions)			
N/A			
Other:			
Criminal background checks	400.00		400.00
Supplies - operations	1,500.00		1,500.00
Pest control	250.00		250.00
Computer supplies & repair	150.00		150.00
Resident transportation	2,500.00		2,500.00
TOTAL PROPOSED BUDGET:	11,118.20		11,118.20

B. Public Facilities: Construction Projects/Physical Improvements			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
N/A			
Hard Costs <u>Note:</u> Federal wage rates may apply for some construction projects. Applicants are encouraged to obtain estimates that reflect wage rates estimates.			
Construction			
Other (list)			
<i>Total Hard Costs</i>			
Soft Costs			
Acquisition			
Appraisals			
Design/Engineering			
Other(list):			
<i>Total Soft Costs</i>			
TOTAL PROPOSED BUDGET:			

FUNDING SOURCES

Other Funding Sources - please indicate the source and amount of other funding committed, pending or proposed for this project, if any. *Do not include Dover CDBG amount requested.*

Please see attached organizational budget for specific income line items.

Funding Source: (Name(s) of funding source(s))	Total Amount (\$):	Committed, Pending or Proposed Amount (\$):	
Federal:		Committed Pending Proposed	
State:		Committed Pending Proposed	
Local:		Committed Pending Proposed	
Private:		Committed Pending Proposed	
Portsmouth CDBG:		Committed Pending Proposed	
Rochester CDBG:		Committed Pending Proposed	
Other:		Committed Pending Proposed	
Total:		Committed Pending Proposed	

Organizational Commitment: For Public Facility Projects (building addition, new roof, replacement windows, etc.) – indicate the amount of funds that the organization will be contributing to the project.

Funding Source: (Name of Parent Organization)	Total Amount (\$) to be Contributed by Parent Organization	Committed or Proposed Amount (\$)	
N/A		Committed Proposed	
Total:			

AGENCY BUDGET

Please provide a breakdown of your organization's overall annual budget. Please indicate the dates of your budget period, i.e. July 1 to June 30 or January 1 to December 31.

Please see attached organizational budget.

Budget Period: from 7/1/16 to 6/30/17	Current Year	Next Year (projected)
REVENUES		
Federal Funds		
State Funds		
Foundations/Private Contributions		
United Way		
Fundraising or other income		
Other (describe)		
Community Dev. Block Grant (include anticipated request)		
TOTAL REVENUE		
EXPENSES		
Salaries		
Fringe Benefits		
Supplies (include printing/copying)		
Travel		
Training		
Communications		
Audit		
Property Maintenance		
Service Contracts		
Construction Supplies/Materials		
Other (describe)		
TOTAL EXPENSES		
NET (Income - Expenses)		

By signing below, the Authorized Official affirms: The organization's commitment to implement the proposed activity/project; that all information presented is true and accurate to the best of their knowledge; and he/she is authorized to submit this application;

Submitted by:


Authorized Official - signature

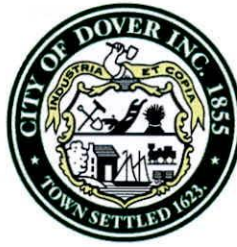
November 14, 2016
Date

Sally B. Struble, JD
Print Name

Executive Director
Print Title

The Homeless Center for Strafford County Budget						FY 2017 Budget
Income						
CDBG Income						
Dover						\$ 7,500.00
Rochester-Operating						8,658.00
Rochester-Generator						16,000.00
Total CDBG Income						\$ 32,158.00
Foundation and Trust Grants						\$ 3,000.00
Direct Public Support						
Annual Appeal						\$ 6,000.00
Corporate Contributions						35,000.00
Faith Based Org Donations						7,000.00
Indiv Contributions						5,000.00
Municipality Donations						2,000.00
Total Direct Support						\$ 55,000.00
Fundraising -Board						
Appreciation Dinner						2,100.00
Spring Fling						25,000.00
Total Fundraising Board						\$ 27,100.00
United Way						
EFSP Funding						\$ 5,000.00
Grants						16,720.00
Individual Contributions						2,500.00
Total Grants						\$ 24,220.00
Interest Income						\$ 150.00
Holiday Gifts						\$ -
Rental Income						
Individuals						\$ 4,000.00
Fofeited Security Deposites						-
Municipalities						2,000.00
Pleasant St. Unit #1						5,000.00
Pleasant St. Unit #2						2,000.00
Rochester Neck						8,000.00
Total Rental Income						\$ 21,000.00
Misc. Income						
Total Income						\$ 162,628.00
Expenses:						
Accounting						\$ 4,140.00
Legal						150.00
Depreciation						8,882.00
Alarm						10.00
Grounds Maintenance						600.00
Insurance - Property						-
Janitorial & Pest Control						250.00
Water & Sewer						-
Repairs & Maint. - Shelter						1,000.00
Repairs & Maint. - Transitional						1,500.00
Supples - General						-
Cable/Internet						838.20
Heat & Gas						-
Total Common Expenses						\$ 17,370.20

The Homeless Center for Strafford County Budget					FY 2017 Budget
Transitional Unit Expenses:					
Snow Removal					\$ 500.00
Electric					600.00
Gas - Pleasant St					2,000.00
Water & Sewer - Pleasant					500.00
Heat - Rochester Neck					2,000.00
					\$ 5,600.00
Operations:					
Advertising					\$ 150.00
Books & Subscriptions					150.00
Computer Supplies & Repair					150.00
Dues					850.00
Food					500.00
Holiday Gifts					-
Parenting Class					-
Volunteer Appreciation					2,100.00
Other Gifts					200.00
Licenses & Fees					27.00
Lunches - Rotary Club					200.00
Office Supplies & Expense					1,000.00
Postage					650.00
Printing					250.00
Resident - Child Care					-
Resident - Transportation					2,500.00
Bank Service Charges					-
Paypal Fees					50.00
Supplies - Operations					1,500.00
Telephone					1,980.00
Website Maint					250.00
Business Registration Fees					75.00
Criminal Background Checks					400.00
Insurance - Employee Health					3,276.00
Insurance - D&O & W.C.					8,000.00
Resident Expenses					500.00
Total Operational Expense					\$ 24,758.00
Payroll Expenses:					
Salaries					\$ 91,076.00
Employer FICA					7,014.50
SUTA/FUTA					1,500.00
Payroll Processing Fees					220.00
Total Payroll & Expense					\$ 99,810.50
Travel:					
Tolls & Parking					\$ -
Conference Expenses					500.00
Mileage					1,500.00
Total Travel					\$ 2,000.00
Generator Expense					\$ 16,000.00
Total Expense					\$ 165,538.70
Net Income/(Loss)					\$ (2,910.70)



RECEIVED
Planning Office

NOV 14 2016

Dover, New Hampshire

CDBG APPLICATION

**CITY OF DOVER, NH
COMMUNITY DEVELOPMENT BLOCK GRANT
FY2018**

APPLICANT INFORMATION	
Organization My Friend's Place	Tax ID 02-0407497
Name of Program My Friend's Place Emergency Shelter	
Name of Executive Director Susan M. Ford	
Mailing Address 368 Washington Street, Dover, NH 03820	
Physical Address 368 Washington Street, Dover, NH 03820	
Contact Person Susan M. Ford	Phone 603-749-3017
E-Mail sford@myfriendsplacenh.org	Website www.myfriendsplacenh.org
Please Identify the Type of Organization Applying for Funds (Note: More than one may apply)	
☒ 501(c)(3)	☐ For-profit authorized under 570.201(o)
☐ Faith-based Organization	☐ Unit of Government
☐ Other (Explain):	☐ Institution of Higher Education
Tax ID # 02-0407497	
*DUNS # 017249801	*SAM Expiration Date 3/21/17

* *Important notice regarding new mandatory federal reporting requirements:* The Federal Funding Accountability and Transparency Act requires sub-recipients receiving federal funds to register with Dunn and Bradstreet to obtain a DUNS number and complete or renew their registration in the System for Award Management (SAM). For information on how to obtain a DUNS number and register in SAM please visit <https://fedgov.dnb.com/webform> and <https://www.sam.gov/portal/SAM/##11>. Completing these registration processes is free, but may take up to 15 days to complete. The city will not commit funds without this information.

ACTIVITY or PROJECT INFORMATION

ACTIVITY OR PROJECT INFORMATION
Amount of Dover CDBG funds requested for activity/project: \$ 16,000
Provide a <u>very brief</u> summary of the activity or project for which the funds are requested. Keep responses to one or two sentences (i.e. After School Care for K-4 th grade students. Repair of homeless shelter roof. Etc.) Funds will be used for overall operations of My Friend's Place emergency homeless shelter. The shelter services single men, women and families year round.
Identify the Dover Consolidated Plan "Specific Objective" that will be met by the proposed activity/project (see page 3 of CDBG Application: Overview & Scoring: Goal and Objectives) Specific Objective (i.e. Removal of architectural barriers to allow increased handicapped accessibility) My Friend's Place Emergency Shelter addresses the needs of the homeless in Dover and surrounding communities, by providing shelter and basic necessities as well as case management. My Friend's Place Transitional Housing Program provides longer term shelter at a significantly lower rent than fair market to families (18 - 24 months) so that they may work on greater barriers to self sufficiency that emergency shelter allows. The portion of the plan that this service applies to is "To provide opportunities for those who need access to services"

PROJECT LOCATION
Location(s) where services will be provided or physical improvements will be made. Emergency Shelter is located at 368 Washington Street, Dover, NH 03820 2 units of Transitional housing is located at 25 East Concord Street, Dover and 2 units are located at 21/23 Hough Street, Dover

PROPOSED SCHEDULE OF PROJECT IMPLEMENTATION – PUBLIC FACILITIES ONLY (Construction Projects/Physical Improvements)	
For this section please identify the major tasks and dates that they will be achieved.	
TASK	DATE

BENEFICIARIES
Beneficiaries: For FY2018 (7/1/17 – 6/30/18) please provide the <i>estimated</i> number of unduplicated Dover beneficiaries that will benefit from this CDBG funded activity or project, not necessarily your entire client population (Note: these numbers will be monitored during the funding year): 50 For FY2016 (7/1/15 – 6/30/16) please provide the number of unduplicated Dover beneficiaries that benefited from this activity or program, not necessarily your entire client population: 58 Were Dover CDBG funds used to fund this activity or program in FY2017 (7/1/16 – 6/30/17): Yes If so, how much? \$11,500

Beneficiary type: ☐ Elderly ☒ Family ☐ Disabled ☒ Homeless ☐ Persons living with AIDS
☐ Other (specify):

ACTIVITY/PROJECT NARRATIVE

Please provide a detailed description for the proposed activity/project. (*note: not the organization*) This section should describe the use of funds and explain why the funds are needed. Please relate how the CDBG funds will ultimately benefit Dover low-moderate income individuals. Funds will be applied to general operating cost to run both the Emergency Shelter and the Transitional Housing programs. Historically My Friend's Place sees a great number of Dover residents, the funding off sets monies that would typically be charged to the clients City Welfare office. Last year alone we served 9 families, 8 single females, 10 single males or 58 individuals who spent a total of who spent a total of 3760 bed nights and a total of 1626 billable (family unit)bed nights, even at a low of \$16.00 per bed night for the family unit comes to over \$26,000.

My Friend's Place offers a safe, warm place for a family or individual to stay, as well as basic necessities such as access to our emergency food pantry, bath/showers, etc. We also provide case management for every admitted client. Clients through cae management will set out goals and steps to obtain those goals. Depending on the individual this plan may be to job search or housing search but it may also be to be connected to DHHS for food stamps or Medicaid, setting up medical appointments for either physical or mental health problems that have not been address or treatment has lapsed. Access to a telephone and online computer to assist them with connecting to a multitude of services, job searching, housing searching, making necessary appointments, etc.

For every client that City Welfare has to put up in a motel, not only does this cost the city more money than that of a shelter the City is now burdened with attempting to case manage the client from off site. This is very difficult to do even under the best of circumstances.

Every individual who enters My Friend's Place emergency shelter is below the low income threshold and most have significant barriers to obtaining permanent affordable housing. My Friend's Place not only takes a monetary burden off the City Welfare Department for these individuals it also provides the necessary case management services that your City Welfare Department would then have to provide to ensure that clients are doing the things they need to do to progress towards permanent housing. Our transitional housing program offers this service as well, giving the client more time to work on larger barriers. In some cases it may just be the wait time for pubic assisted housing, currently this is 16 months to 2 years.

Please indicate who prepared the overall cost estimate for the activity or project. Susan M. Ford

For this application, written quotes are required for proposed purchase of items exceeding \$3,000.00 or for physical improvements (i.e. building expansion, new roof, replacement of windows, etc.). Please attach quotes you have obtained.

PERFORMANCE OUTCOME MEASURES

Provide the outcomes proposed and the method of measurement. You may list multiple outcomes.

Outcome	Measurement
Decrease the amount of families/individuals Dover City Welfare would have to put up in a motel.	# of Dover Families/Individuals admitted to shelter

ORGANIZATION

DESCRIPTION OF ORGANIZATION

Please provide a description for the Organization that is undertaking the activity/project. My Friend's Place provides short term emergency shelter for homeless individuals and families. The average stay for a single person is 45 days while families stays are 60 to 90 days. The transitional housing program provides longer term stays for families who have serious obstacles to obtaining permanent housing. Families may stay in this program for up to 2 years.

AUDIT AND EVALUATION

Does your organization have an annual CPA Audit? Yes

If yes, please submit most recent Audit. See attached. The Audit for this past fiscal year is not yet complete I can provide at a later date if needed.

Is your organization evaluated by outside agencies or programs? Yes,

If yes, please note the agency/program and how often the evaluation occurs.

*HUD/BoSCoC - The APR or Annual Performance Report that is submitted yearly. This report is run for both the Emergency Shelter by the BoSCoC (Balance of State Continuum of Care and the Transitional Program submitted directly to HUD.

*United Way - BiAnnually

BOARD OF DIRECTORS

Name	Residence (city/town)
FX Bruton, President	Dover, NH
Stanley Robins, vice President	Dover, NH
Rob Fuller, Treasurer	Dover, NH
Janet Insolia, Secretary	Nottingham, NH
John Guy	Dover, NH
Phyllis LaPointe	Barrington, NH
Heidi Cluff	Lebanon, ME
April Mailhot	Barrington, NH
Estelle Lewis	Dover, NH
Lohn Lewis	Durham, NH
Martin Jaffee	Dover, NH

BUDGET

Use box A or B below to provide a budget for the proposed *Public Service (A.)* or *Public Facility (B.)*. Include all proposed expenses.

A. Public Services (Non-Construction Projects)			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Office Supplies	\$0	\$2,400	\$2,400
Utilities	\$2,000	\$17,090	\$19,090
Repairs/Maintenance	\$0	\$10,000	\$10,000
Travel	\$0	\$1,600	\$1,600
Salaries (List relevant positions)			
Program Assistant	\$2,334	\$23,106	\$25,440
Resident Managers	\$11,666	\$56,700	\$68,366
Case Manager	\$0	\$34,280	\$34,280
Other:			
TOTAL PROPOSED BUDGET:	\$16,000	\$145,176	\$161,176

B. Public Facilities: Construction Projects/Physical Improvements			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Hard Costs <u>Note:</u> Federal wage rates may apply for some construction projects. Applicants are encouraged to obtain estimates that reflect wage rates estimates.			
Construction			
Other (list)			
<i>Total Hard Costs</i>			
Soft Costs			
Acquisition			
Appraisals			
Design/Engineering			
Other(list):			
<i>Total Soft Costs</i>			
TOTAL PROPOSED BUDGET:			

Other Funding Sources - please indicate the source and amount of other funding committed, pending or proposed for this project, if any. *Do not include Dover CDBG amount requested.*

Funding Source: (Name(s) of funding source(s))		Total Amount (\$):	Committed, Pending or Proposed Amount (\$):	
Federal:	HUD and FEMA-	\$61,510	Committed Pending Proposed	\$61,510
State:	SGIA	\$95,912	Committed Pending Proposed	\$95,912
Local:	Cities and Town Funding outside of CDBG	\$3,000	Committed Pending Proposed	\$3,000
Private:	Donations/Rent/Small Grants and Trusts	\$61,200	Committed Pending Proposed	\$61,200
United Way	Supportive Services Grant	\$17,500	Committed Pending Proposed	\$17,500
Rochester CDBG:	Rochester CDBG	\$6,000	Committed Pending Proposed	\$6,000
Other:	Fundraising efforts (bingo, Holiday Appeal, special events)	\$102,500	Committed Pending Proposed	\$102,500
Total:		\$344,922	Committed Pending Proposed	\$180,922 \$102,500 \$61,200

Organizational Commitment: For Public Facility Projects (building addition, new roof, replacement windows, etc.) – indicate the amount of funds that the organization will be contributing to the project.

Funding Source: (Name of Parent Organization)	Total Amount (\$) to be Contributed by Parent Organization	Committed or Proposed Amount (\$)	
		Committed Proposed	
Total:			

Please provide a breakdown of your organization's overall annual budget. Please indicate the dates of your budget period, i.e. July 1 to June 30 or January 1 to December 31.

Budget Period: from July 1 to June 30	Current Year	Next Year (projected)
REVENUES		
Federal Funds	\$65,510	\$65,510
State Funds	\$95,912	\$95,912
Foundations/Private Contributions	\$43,700	\$44,700
United Way	\$17,500	\$17,500
Fundraising or other income	\$102,500	\$103,500
Other (describe) Rent & Interest	\$18,250	\$18,250
Community Dev. Block Grant (include anticipated request)	\$18,000	\$18,000
TOTAL REVENUE	\$357,372	\$359,372
EXPENSES		
Salaries	\$206,219	\$210,343
Fringe Benefits	\$32,824	\$33,798
Supplies (include printing/copying)	\$14,000	\$14,000
Travel	\$1,600	\$1,700
Training	\$300	\$300
Communications	\$3,540	\$3,540
Audit	\$0 (donated)	\$0 (donated)
Property Maintenance	\$12,400	\$12,400
Service Contracts(dumpster, cable, internet, water, heat)	\$38,990	\$39,000
Construction Supplies/Materials	\$0	\$0
Other (describe) Insurance	\$14,235	\$14,519
Other Misc. Advertising, subscriptions, resident support services, fundraising expenses, etc	\$14,204	\$14,500
TOTAL EXPENSES	\$338,312	\$344,300
NET (Income - Expenses)	\$19,060	\$15,072

By signing below, the Authorized Official affirms: The organization's commitment to implement the proposed activity/project; that all information presented is true and accurate to the best of their knowledge; and he/she is authorized to submit this application;

Submitted by:



Authorized Official - signature

11/2/16

Date

Susan M. Ford

Print Name

Executive Director

Print Title

My Friend's Place
FY 2017/18 Revenue - DRAFT

G/L

Acct Revenue Source

4110 State Grant in Aid (SGIA	\$ 95,912.00	
4113 Hud Supportive Services	\$ 19,749.00	
4114 HUD Operating	\$ 33,908.00	
4116 HUD Administration	\$ 2,853.00	
4120 City of dover CDBG	\$ 9,000.00	
4220 United Way	\$ 17,500.00	
4115 FEMA Grant	\$ 5,000.00	
4145 City of Rochester CDBG	\$ 6,000.00	
Firm Revenue Total		\$ 189,922.00

4010 Special Events	\$ 22,500.00	
4425 Bingo Fundraiser	\$ 65,000.00	
4055 Interest	\$ 750.00	
4125 Town of Lee	\$ 500.00	
4130 Town of Madbury	\$ 200.00	
4145 Town of Durham	\$ 1,500.00	
4155 Misc - Cities & towns	\$ 800.00	
4160 Donations	\$ 40,000.00	
4200 Thanksgiving Appeal	\$ 15,000.00	
4207 NH Charitable Trust	\$ 700.00	
4227 Trusts & Foundations	\$ 3,000.00	
4235 Honorarium	\$ -	
4240 Memorials	\$ -	
4245 Miscellaneous	\$ -	
4300 Shelter Rent	\$ 7,500.00	
4400 25 E Concord Street Rent	\$ 5,000.00	
4403 21/23 Hough Street Rent	\$ 5,000.00	
Variable Revenue Total		\$ 167,450.00

Firm and Variable Revenue	\$ 357,372.00
Stabilization fund	\$ -

Total Revenue	\$ 357,372.00
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Total expences	\$ 361,762.08
Less Non Cash - Depreciation	\$ (23,450.00)

Adjusted Total Expences	\$ 338,312.08
-------------------------	---------------

My Friend's Plaxe
FY 2016/17 Budget - Draft

G/L Acct	Expences	FY 2014/15 Approved Budget	FY 2015/16 Approved Budget	FY 2016/17 Proposed Budget
5150	Salary & Benefits	\$ 182,082	\$ 187,813	\$ 181,398
5015	FICA	\$ 13,929	\$ 13,716	\$ 13,877
5025	SUTA	\$ 4,672	\$ 3,749	\$ 2,851
	FUTA			\$ 356
5012	Retirement	\$ 6,462	\$ 6,430	\$ 5,338
5010	Benefits			\$ 5,418
5022	Health insurance	\$ 37,628	\$ 40,250	\$ 22,068
5021	Wkrs Comp \$3.45 p/100	\$ 7,645	\$ 6,617	\$ 7,738
	Sub total Salary & Fringe	\$ 252,418	\$ 258,575	\$ 239,043
	Operating Costs			
5031	Advertising	\$ 200	\$ 200	\$ 200
5033	Newspapers Subscriptions	\$ 500	\$ 500	\$ 500
5034	Insurance	\$ 14,235	\$ 14,235	\$ 14,235
5035	Household Supplies	\$ 8,774	\$ 2,200	\$ 8,580
5036	Bank Servie Charges	\$ -	\$ 100	\$ -
5036	Copy & Printing	\$ 200	\$ 1,200	\$ 1,200
5037	Copy & Printing - Equipment Lease	\$ 1,824	\$ 1,824	\$ 1,824
	Morgtage Interest	\$ 4,272	\$ 4,272	\$ 600
5038	Mortgage Principle	\$ 5,160	\$ 5,160	\$ -
5039	Office Supplies	\$ 2,400	\$ 2,400	\$ 2,400
5040	Postage	\$ 1,400	\$ 1,400	\$ 1,400
5041	Training	\$ 300	\$ 300	\$ 300
5042	Public Relations	\$ 900	\$ 900	\$ 900
5043	License & Registrations	\$ 100	\$ 100	\$ 100
5044	Maintenance & Repair	\$ 10,000	\$ 9,000	\$ 10,000
5046	Resident Suport Services	\$ 2,200	\$ 2,200	\$ 2,200
5047	Telephone	\$ 3,540	\$ 3,400	\$ 3,540
5048	Miscellaneous	\$ 200	\$ 200	\$ 200
	Professional Fees - Accountin &			
5050	Payroll	\$ -	\$ -	\$ 6,000
5051	Fundraising Expencse	\$ 3,000	\$ 1,800	\$ 1,800
5052	Utilities	\$ 2,800	\$ 17,300	\$ 19,090
5056	Staff Milage	\$ 1,600	\$ 1,600	\$ 1,600
5057	Depreciation	\$ 19,090	\$ 23,450	\$ 23,450
5070	25 E Concord repairs	\$ 19,814	\$ 500	\$ 1,200
5071	25 E Concord Utilities 1 unit	\$ 1,200	\$ 6,000	\$ 7,500
5072	25 E Concord Utilities 2 unit	\$ 7,500	\$ 2,000	\$ 2,500
5075	21 Hough Street Uilities	\$ 2,500	\$ 6,000	\$ 7,500
5076	23 hough Street Utilities	\$ 7,500	\$ 2,000	\$ 2,400
5078	HUD Support Services	\$ 2,400	\$ 300	\$ 300
5085	21/23 Hough Street Repairs	\$ 1,500	\$ 1,200	\$ 1,200
	Sub Total Expenses	\$ 125,109	\$ 111,741	\$ 122,719
	Total Salary & expenses	\$ 377,527	\$ 370,316	\$ 361,762
	Noncash expense - Depreciation	\$ 19,090	\$ 23,450	\$ 23,450
	Adjusted Expenses	\$ 358,437	\$ 346,866	\$ 338,312

MFP 2016 - 2017 Draft Payroll budget

Position	Name	Weekly Hrs	Annual hours	Salary	Hourly	Total	MFP Allocation	FICA 7.65%	SUTA	FUTA	Benefits	Health Ins	Wkrs Comp	Retirement	Total Salary & Fringe
									2.5% of the first \$14,000	.6% of the first \$7,000					
Executive Director	S Ford	40	2080	\$50,000.00		\$ 50,000.00	\$ 50,000.00	\$ 3,825.00	\$ 350.00	\$ 42.00		\$ 7,356.00	\$ 2,105.00	\$ 2,500.00	\$ 66,178.00
Case Manager	L Routhier	40	2120		\$ 16.17	\$ 34,280.40	\$ 34,280.40	\$ 2,622.45	\$ 350.00	\$ 42.00	\$ 3,493.00	\$ 7,356.00	\$ 1,443.00	\$ 1,714.00	\$ 51,300.85
Case Manager			0												
Resident Manager PT	E. Nasino	24	1272		\$ 10.00	\$ 12,720.00	\$ 12,720.00	\$ 973.08	\$ 350.00	\$ 42.00			\$ 948.00		\$ 15,033.08
Resident Manager PT	J. Spurr	16	848		\$ 10.00	\$ 8,480.00	\$ 8,480.00	\$ 648.72	\$ 350.00	\$ 42.00					
Resident Manager PT	K Braman	32	1696		\$ 10.31	\$ 17,485.76	\$ 17,485.76	\$ 1,337.66	\$ 350.00	\$ 42.00			\$ 736.00		\$ 19,951.42
Over Night Awake Crew	C Willey	32	1696		\$ 10.00	\$ 16,960.00	\$ 16,960.00	\$ 1,297.44	\$ 350.00	\$ 42.00			\$ 715.00		\$ 19,364.44
Resident Manager FT	N Routhier	40	2120	\$ 10.94	\$ 12.00	\$ 25,440.00	\$ 25,440.00	\$ 1,946.16	\$ 350.00	\$ 42.00	\$ 1,925.00	\$ 7,356.00	\$ 976.00	\$ 1,124.00	\$ 39,159.16
Overnight Awake Crew	D Sellers	24	1272		\$ 10.00	\$ 12,720.00	\$ 12,720.00	\$ 973.08	\$ 318.00	\$ 42.00			\$ 536.00		\$ 14,589.08
Over time	Over Time	4	208		\$ 15.92	\$ 3,311.36	\$ 3,311.36	\$ 253.32	\$ 82.78	\$ 19.87			\$ 279.00		\$ 3,946.33
Totals		252	13312			\$181,397.52	\$181,397.52	\$ 13,876.91	\$ 2,850.78	\$ 355.87	\$ 5,418.00	\$ 22,068.00	\$ 7,738.00	\$ 5,338.00	\$ 229,522.36
Salary	\$ 181,397.52														
FICA	\$ 13,876.91							Hours	# of F/T Staff		Total benefit hrs				
SUTA/Unemployment	\$ 2,850.78	Full time	Benefits:	7 Paid holidays per year				56	3		168				
FUTA	\$ 355.87			2 Weeks Vacation increase after 5 years				80	3		240				
Retirement	\$ 5,338.00			10 Sick days per year				80	3		240				
Benefits	\$ 5,418.00			Total hours				216			648				
Health Ins	\$ 22,068.00			Currently MFP pays 100% of health insurance premium for Single NH Plan											
Wkrs Comp	\$ 7,738.00	Part Time	Benefits:	1.5 X hourly rate for working on a holiday											
Total Salary & Benefits	\$ 239,043.08														

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11/02/16

Accrual Basis

My Friends Place Balance Sheet As of June 30, 2016

Jun 30, 16

ASSETS**Current Assets****Checking/Savings**

10001 · Citizens Bank operating account	14,782.68
10002 · Citizens Bank -Debit Card	998.00
10010 · Citizens Bank Bingo	26,738.51
10015 · TD Bank North Bingo Carry-Over	2,054.13
10020 · TD Bank North Sta. Fund	67,395.60

Total Checking/Savings	111,968.92
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Accounts Receivable

11000 · Accounts Receivable	23,978.00
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Total Accounts Receivable	23,978.00
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Total Current Assets

135,946.92

Fixed Assets**15000 · Furniture and Equipment**

15005 · Furniture - Hough Street	10,047.34
15015 · Equipment - Hough St	379.00
15030 · Equipment - 368 Washington	10,244.19
15035 · Furniture - 368 Washington	30,350.03

Total 15000 · Furniture and Equipment	51,020.56
--	------------------

15100 · Building and Improvements

15105 · Building - Hough St	144,083.77
15110 · Building - 25 E. Concord	107,943.86
15100 · Building and Improvements - Other	564,557.85

Total 15100 · Building and Improvements	816,585.48
--	-------------------

15200 · Land

87,150.00

15900 · Accumulated Depreciation

-414,601.99

Total Fixed Assets

540,154.05

Other Assets

18100 · Citizens Bank PayPal	1,135.00
18300 · Security Deposit Payable	1,043.00
18600 · Other Assets	3,159.12
18610 · Ticket Inventory-Bingo	1,625.00
18630 · Edward Jones Account	941.39

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11/02/16
Accrual Basis

**My Friends Place
Balance Sheet
As of June 30, 2016**

	Jun 30, 16
18635 · Endowment Fund	9,177.30
18700 · Security Deposits Asset	665.50
Total Other Assets	17,746.31
TOTAL ASSETS	693,847.28
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
24000 · Payroll Liabilities	1,220.18
24100 · Accrued Wages	2,729.23
24200 · Accrued Earned Time	6,872.87
24500 · Accrued Payroll Taxes	279.87
26800 · Liability for Bingo Prizes	4,900.00
Total Other Current Liabilities	16,002.15
Total Current Liabilities	16,002.15
Long Term Liabilities	
27200 · Other Liabilities	11,270.79
27500 · Mortgage Payable Citizens	13,328.56
Total Long Term Liabilities	24,599.35
Total Liabilities	40,601.50
Equity	
31300 · Perm. Restricted Net Assets	9,177.30
32000 · Unrestricted Net Assets	610,526.29
Net Income	33,542.19
Total Equity	653,245.78
TOTAL LIABILITIES & EQUITY	693,847.28

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11/02/16
Accrual Basis

My Friends Place
Profit & Loss
July 2015 through June 2016

		Jul '15 - Jun 16
Ordinary Income/Expense		
Income		
42000 · State of New Hampshire-ESG		71,754.00
42010 · State of New Hamp-McKinney		33,658.00
43400 · Direct Public Support		
43410 · Corporate Contributions		22,457.00
43450 · Individ, Business Contributions		44,977.13
43460 · Thanksgiving Appeal		11,960.00
43400 · Direct Public Support - Other		8,083.60
Total 43400 · Direct Public Support		87,477.73
43401 · City Of Dover		8,086.00
43402 · City Of Rochester		3,000.00
43403 · Other Cities and Towns		1,407.00
44000 · MFP Rent		3,988.00
44010 · 21 Hough Street Rent		489.00
44020 · 23 Hough Street Rent		879.00
44030 · 25A East Concord Street Rent		2,497.00
44040 · 25B E Concord Street Rent		2,523.50
44800 · Indirect Public Support		
44820 · United Way, CFC Contributions		11,231.97
44830 · FEMA		2,664.00
Total 44800 · Indirect Public Support		13,895.97
45000 · Investments		
45030 · Interest-Savings, Short-term CD		66.96
45000 · Investments - Other		-12.08
Total 45000 · Investments		54.88
46400 · Other Types of Income		
46430 · Miscellaneous Revenue		17,845.94
46440 · Special Events		35,717.79
46400 · Other Types of Income - Other		0.89
Total 46400 · Other Types of Income		53,564.62
46450 · Bingo income (Net)		48,657.11
48000 · HUD Operating		30,337.33
48010 · Hud Social Services		15,177.86
48020 · Hud Administrative		11,757.56
Total Income		389,204.56
Expense		
transfer		80.00

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Accrual Basis

My Friends Place
Profit & Loss
July 2015 through June 2016

	Jul '15 - Jun 16
61000 · Citizens Bank	
61010 · Bank Service charges	
61011 · Bank Service Charges	42.00
61010 · Bank Service charges - Other	252.60
Total 61010 · Bank Service charges	294.60
61020 · Citizens Bank Commercial Loan	2,392.13
61030 · returned ck fee	20.00
Total 61000 · Citizens Bank	2,706.73
62100 · Contract Services	
62150 · Outside Contract Services	25.46
62160 · Public Relations	1,055.48
Total 62100 · Contract Services	1,080.94
62800 · Facilities and Equipment	
62840 · Equip Rental and Maintenance	1,412.23
62890 · Rent, Parking, Utilities	8,513.94
62800 · Facilities and Equipment - Other	1,271.98
Total 62800 · Facilities and Equipment	11,198.15
62900 · Furnishings & Equipment	129.24
63000 · Repairs & Maintenance	
63010 · 23 Hough Street Repairs	454.61
63020 · 21 Hough Street Repairs	1,444.81
63030 · 25 E Concord Repairs	82.11
63000 · Repairs & Maintenance - Other	16,154.42
Total 63000 · Repairs & Maintenance	18,135.95
64000 · Utilities	
64010 · Washington St Utilities	1,381.12
64020 · 25 E Concord Street Utilities	1,662.11
64030 · 25 B East Concord Utilities	1,376.38
64040 · 21 Hough Street Utilities	5,686.64
64050 · 23 Hough Street Utilities	1,126.07
64000 · Utilities - Other	7,645.74
Total 64000 · Utilities	18,878.06

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Accrual Basis

My Friends Place
Profit & Loss
July 2015 through June 2016

	Jul '15 - Jun 16
65000 · Operations	
65010 · Books, Subscriptions, Reference	422.28
65011 · Household Supplies	8,041.13
65015 · Miscellaneous	526.10
65017 · Fund Raising	4,348.68
65020 · Postage, Mailing Service	1,362.36
65022 · Food & Clothing	181.91
65030 · Printing and Copying	113.90
65040 · Supplies	3,366.47
65050 · Telephone, Telecommunications	5,335.28
65060 · Advertisement	
65061 · Advertisement	797.50
Total 65060 · Advertisement	797.50
Total 65000 · Operations	24,495.61
65100 · Other Types of Expenses	
65130 · Staff Mileage	772.88
65162 · License, Permit & Registration	75.00
Total 65100 · Other Types of Expenses	847.88
65131 · Staff Support Services	506.04
65200 · Insurance	
65210 · Health Insurance, Employee	24,589.02
65220 · Insurance - Liability, D and O	11,754.10
65230 · Property Insurance	752.18
Total 65200 · Insurance	37,095.30
65300 · Interest Expense	
65310 · Mortgage Interest	62.46
65315 · finance charge	0.88
65300 · Interest Expense - Other	37.05
Total 65300 · Interest Expense	100.39
66000 · Payroll Expenses	
66002 · Cost of Payroll	840.65
66005 · Workers Compensation	6,497.00
66006 · Employer Quarterly Tax	1,061.58
66000 · Payroll Expenses - Other	223,266.40
Total 66000 · Payroll Expenses	231,665.63
66003 · Retirement	2,735.00
66900 · Reconciliation Discrepancies	-684.12

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Accrual Basis

My Friends Place
Profit & Loss
July 2015 through June 2016

	Jul '15 - Jun 16
67000 · Bingo Unrestricted	
67004 · Bingo Advertising	793.29
67012 · Bingo Licenses	300.00
67050 · Bingo Telephone/Internet	
67051 · Comcast (Bingo)	712.40
Total 67050 · Bingo Telephone/Internet	712.40
Total 67000 · Bingo Unrestricted	1,805.69
68300 · Travel and Meetings -Staff	
68310 · Conference, Convention, Meeting	50.00
Total 68300 · Travel and Meetings -Staff	50.00
70100 · Resident Support Services	
70120 · Hud Support Services	228.36
70100 · Resident Support Services - Other	4,267.01
Total 70100 · Resident Support Services	4,495.37
Total Expense	355,321.86
Net Ordinary Income	33,882.70
Other Income/Expense	
Other Expense	
80000 · Ask My Accountant	340.51
Total Other Expense	340.51
Net Other Income	-340.51
Net Income	<u>33,542.19</u>

MY FRIEND'S PLACE

FINANCIAL STATEMENTS

Years Ended June 30, 2015 and 2014

TABLE OF CONTENTS

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Statements of Functional Expenses	5
Statements of Cash Flows	7
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INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees
My Friend's Place
Dover, New Hampshire

We have audited the accompanying financial statements of My Friend's Place (a New Hampshire Non-Profit Organization), which comprise the statements of financial position as of June 30, 2015 and 2014, and the related statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

(continued)

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of My Friend's Place as of June 30, 2015 and 2014, and the results of its operations and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Hodgdon, Wilson & Griffin

Hodgdon, Wilson & Griffin
Portsmouth, New Hampshire

May 27, 2016

MY FRIEND'S PLACE
STATEMENTS OF FINANCIAL POSITION
June 30,

	2015	2014
	<u>ASSETS</u>	
CURRENT ASSETS		
Cash and cash equivalents	\$ 83,490	\$ 108,106
Grants receivable	31,020	18,698
Investments	953	920
Inventory	1,625	1,314
Prepaid expenses	4,868	4,772
Total current assets	<u>121,956</u>	<u>133,810</u>
PROPERTY, PLANT AND EQUIPMENT		
Land	87,150	87,150
Buildings and improvements	807,822	803,372
Furniture and fixtures	40,397	40,397
Equipment	9,158	6,187
Total property and equipment	<u>944,527</u>	<u>937,106</u>
Less accumulated depreciation	<u>414,602</u>	<u>392,121</u>
Property and equipment, net	<u>529,925</u>	<u>544,985</u>
ENDOWMENT INVESTMENTS	<u>9,177</u>	<u>10,090</u>
NET ASSETS	<u>\$ 661,058</u>	<u>\$ 688,885</u>
	<u>LIABILITIES & NET ASSETS</u>	
CURRENT LIABILITIES		
Accounts payable	\$ 3,163	\$ 1,218
Accrued payroll and payroll taxes	4,188	6,664
Accrued earned time	15,236	12,857
Note payable, current portion	8,912	8,576
Total current liabilities	<u>31,499</u>	<u>29,315</u>
NOTE PAYABLE, net of current portion	<u>9,857</u>	<u>19,483</u>
Total liabilities	<u>41,356</u>	<u>48,798</u>
NET ASSETS		
Unrestricted	610,525	626,997
Temporarily restricted	-	3,000
Permanently restricted	9,177	10,090
Total net assets	<u>619,702</u>	<u>640,087</u>
TOTAL LIABILITIES AND NET ASSETS	<u>\$ 661,058</u>	<u>\$ 688,885</u>

The accompanying notes are an integral part of these financial statements

MY FRIEND'S PLACE
STATEMENTS OF ACTIVITIES
For the Years Ended June 30,

	2015	2014
UNRESTRICTED NET ASSETS		
Public support and revenue:		
Public support		
Grants	\$ 174,802	\$ 219,359
Donations	81,428	84,222
United Way	19,522	20,298
Total public support	<u>275,752</u>	<u>323,879</u>
OTHER REVENUE		
Gaming revenue, net	61,489	73,317
Rent and miscellaneous	14,625	11,433
Interest income	131	203
Unrealized gain (loss) on investments	(4)	36
Total other revenue	<u>76,241</u>	<u>84,989</u>
Total public support revenue	<u>351,993</u>	<u>408,868</u>
FUNCTIONAL EXPENSES		
Program services	300,087	294,607
Management and general	54,820	61,883
Fundraising	13,558	15,646
Total functional expenses	<u>368,465</u>	<u>372,136</u>
INCREASE (DECREASE) IN UNRESTRICTED NET ASSETS	(16,472)	36,732
INCREASE IN TEMPORARILY RESTRICTED NET ASSETS	(3,000)	3,000
INCREASE (DECREASE) IN PERMANENTLY RESTRICTED NET ASSETS	(913)	778
INCREASE (DECREASE) IN NET ASSETS	(20,385)	40,510
NET ASSETS, Beginning	<u>640,087</u>	<u>599,577</u>
NET ASSETS, Ending	<u>\$ 619,702</u>	<u>\$ 640,087</u>

The accompanying notes are an integral part of these financial statements.

MY FRIEND'S PLACE
STATEMENT OF FUNCTIONAL EXPENSES
For the Year Ended June 30, 2015

	Program	Management and General	Fundraising	Total
Classified advertising and public relations	\$ -	\$ 408	\$ -	\$ 408
Depreciation expense	21,757	726	-	22,483
Employee benefits	35,111	5,923	1,269	42,303
Insurance	6,494	9,740	-	16,234
Interest expense	883	119	-	1,002
Maintenance and repairs	12,425	440	-	12,865
Miscellaneous	2,990	330	902	4,222
Office expense	120	913	3,670	4,703
Resident support services	1,363	-	-	1,363
Salaries and wages	162,084	28,377	6,128	196,589
Supplies	6,853	4,468	1,117	12,438
Taxes, payroll	13,051	2,202	472	15,725
Telephone	5,837	307	-	6,144
Training	643	-	-	643
Transportation expense	744	-	-	744
Utilities	29,732	867	-	30,599
TOTAL EXPENSES	\$ <u>300,087</u>	\$ <u>54,820</u>	\$ <u>13,558</u>	\$ <u>368,465</u>

The accompanying notes are an integral part of these financial statements.

MY FRIEND'S PLACE
STATEMENT OF FUNCTIONAL EXPENSES
For the Year Ended June 30, 2014

	Program	Management and General	Fundraising	Total
Classified advertising and public relations	\$ -	\$ 1,286	\$ -	\$ 1,286
Depreciation expense	19,325	651	-	19,976
Employee benefits	34,311	6,863	1,715	42,889
Insurance	6,228	9,342	-	15,570
Interest expense	1,225	190	-	1,415
Maintenance and repairs	14,602	715	-	15,317
Miscellaneous	1,735	177	35	1,947
Office expense	203	980	4,143	5,326
Professional fees	-	1,500	-	1,500
Resident support services	2,545	-	-	2,545
Salaries and wages	149,807	30,582	7,646	188,035
Supplies	8,108	5,868	1,467	15,443
Taxes, payroll	12,780	2,556	640	15,976
Telephone	4,455	234	-	4,689
Training	529	-	-	529
Transportation expense	1,324	-	-	1,324
Utilities	37,430	939	-	38,369
TOTAL EXPENSES	\$ <u>294,607</u>	\$ <u>61,883</u>	\$ <u>15,646</u>	\$ <u>372,136</u>

The accompanying notes are an integral part of these financial statements.

MY FRIEND'S PLACE
STATEMENTS OF CASH FLOWS
Years Ended June 30,

	2015	2014
CASH FLOWS FROM OPERATING ACTIVITIES		
Increase (decrease) in net assets	\$ (20,385)	\$ 40,510
Adjustments to reconcile change in net assets to net cash provided (used) by operating activities:		
Unrealized (gain) loss on investments	4	(36)
Investment (income) loss	913	(778)
Depreciation	22,483	19,976
(Increase) decrease in:		
Grants receivable	(12,322)	(10,948)
Inventory	(311)	551
Prepaid expenses	(96)	(504)
Increase (decrease) in:		
Accounts payable	1,945	1,218
Accrued payroll and payroll taxes	(2,476)	1,252
Accrued earned time	2,379	3,728
Total adjustments	12,519	14,459
Net cash provided (used) by operating activities	(7,866)	54,969
CASH FLOWS FROM INVESTING ACTIVITIES		
Acquisition of property, plant and equipment	(7,421)	(36,029)
Acquisition of investments	(39)	(61)
Net cash provided (used) by investing activities	(7,460)	(36,090)
CASH FLOWS FROM FINANCING ACTIVITIES		
Principal reduction of long-term debt	(9,290)	(8,144)
Net increase (decrease) in cash	(24,616)	10,735
Cash at beginning of year	108,106	97,371
CASH AT END OF YEAR	\$ <u>83,490</u>	\$ <u>108,106</u>
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION		
Cash paid during the year for interest	\$ <u>1,002</u>	\$ <u>1,415</u>

The accompanying notes are an integral part of these financial statements.

MY FRIEND'S PLACE
NOTES TO FINANCIAL STATEMENTS

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization

My Friend's Place was organized February 3, 1987. The purpose of the organization is to provide safe and supportive emergency and transitional shelter to individuals and families experiencing homelessness in Strafford County, New Hampshire.

Basis of Accounting

Income and expenses are reported on the accrual basis, which means that income is recognized as it is earned and expenses are recognized as they are incurred whether or not cash is received or paid out at that time.

Financial Statement Presentation

My Friend's Place reports information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. In addition, My Friend's Place is required to present a statement of cash flows.

Cash and Cash Equivalents

For purposes of the statement of cash flows, My Friend's Place considers all highly liquid investments available for current use with an initial maturity of three months or less to be cash equivalents.

My Friend's Place maintains a repurchasing account with a banking institution. Repurchase agreements are short-term investments, typically sold by banks as alternatives to certificates of deposit. Transfers to and from the account are made daily to cover checks clearing in operating accounts. The repurchase account held by My Friend's Place is collateralized by a pool of U.S. Government agencies or U.S. Treasury notes.

Cash does not include \$24,938 and \$27,387 held by the Organization as of June 30, 2015 and 2014, respectively. As required by State of New Hampshire regulations, this amount was held by the Organization in a separate account to be used as prizes for Bingo games. This cash is not available for any other purpose.

Grants Receivable

Grants receivable represents amounts due from Federal, State and local governments for grant revenue which has been earned.

Marketable Securities

Investments in marketable securities with readily determinable fair values and all investments in debt securities are reported at their fair values in the statement of financial position. Unrealized gains and losses are included in the change in net assets.

MY FRIEND'S PLACE
NOTES TO FINANCIAL STATEMENTS (CONTINUED)

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Promises to Give

Contributions are recognized when the donor makes a promise to give to My Friend's Place that is, in substance, unconditional. Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the fiscal year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets depending on the nature of the restrictions. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets. An allowance for uncollectible unconditional promises to give is established based on historical experience and management's evaluation of outstanding unconditional promises to give at the end of each year. As of June 30, 2015 and 2014, the balance of Promises to Give was \$0 and \$0, respectively.

Fair Value of Financial Instruments

Unless otherwise indicated, the fair values of all reported assets and liabilities which represent financial instruments, none of which are held for trading purposes, approximate the carrying values of such amounts.

Inventory

Inventory of Bingo materials and supplies are recorded at the lower of cost (first in, first out basis) or market.

Property, Plant and Equipment

Property and equipment are recorded at cost for those items which have been purchased, and at estimated fair values for those items which have been donated. The cost basis of the land and buildings acquired by My Friend's Place is allocated based on real estate tax valuation. The cost of buildings and improvements is recovered using the straight-line method over estimated useful lives of 10 to 40 years. The cost of furniture, fixtures and equipment is recovered using the straight-line method over estimated useful lives of 5 to 15 years.

Contributions

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on the existence or nature of any donor restrictions.

Donated Services

Contributions of services are recognized in the financial statements if the services enhance or create nonfinancial assets or require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation. My Friend's Place typically receives contributed services to assist with general administrative and maintenance tasks. For the years ended June 30, 2015 and 2014, no amounts for contributions of services were recognized in the financial statements.

MY FRIEND'S PLACE
NOTES TO FINANCIAL STATEMENTS (CONTINUED)

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Donated Materials

My Friend's Place records donated materials at fair value. Donations of food, personal care items and household supply items for the use of residents are not recorded in the financial statements because of the difficulty in determining fair value.

Functional Allocation of Expenses

The costs of the various programs and other activities have been summarized on a functional basis. Accordingly, costs have been allocated among the programs and supporting services benefited.

Income Taxes

My Friend's Place has received a letter of determination dated June 20, 1988 from the Internal Revenue Service advising it that it qualifies as a non-profit organization under Section 501(c)(3) of the Internal Revenue Code and, therefore, it is not subject to income tax. My Friend's Place is classified as other than a private foundation.

The Federal and State tax-exempt returns for the years ended June 30, 2015, 2014, and 2013 are subject to examination by the taxing authorities, generally for three years after they were filed.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Subsequent Events

Management has evaluated subsequent events through May 27, 2016, the date that the financial statements were available to be issued.

MY FRIEND'S PLACE
NOTES TO FINANCIAL STATEMENTS (CONTINUED)

NOTE B - ENDOWMENT INVESTMENTS

My Friend's Place is a beneficiary of an agency endowment fund at The New Hampshire Charitable Foundation. Pursuant to the terms of the resolution establishing this fund, property contributed to The New Hampshire Charitable Foundation is held as a separate fund designated for the benefit of My Friend's Place. In accordance with its spending policy, the Foundation makes distributions from the funds to My Friend's Place. The distributions are approximately five percent of the market value of the fund per year. The estimated value of the future distributions from the fund is included in these financial statements, however, all property in the fund was contributed to The New Hampshire Charitable Foundation to be held and administered for the benefit of My Friend's Place.

NOTE C - ACCRUED EARNED TIME

Accrued earned time consists of a liability for future compensated leave time that is vested with the employees.

NOTE D - NOTE PAYABLE

	<u>Current Portion</u>	<u>Long-term Portion</u>	<u>Total</u>
Mortgage payable, secured by land and building at 368 Washington Street in Dover, NH; monthly payments of principal and interest at 3.55%; maturity date is July, 2017.	\$ 8,912	\$ 9,857	\$ 18,769

Maturity of long-term debt over the next five years is as follows for years ending June 30,

2016.....	\$ 8,912
2017.....	9,073
2018.....	784
2019.....	-
2020.....	-
TOTAL.....	\$ 18,769

MY FRIEND'S PLACE
NOTES TO FINANCIAL STATEMENTS (CONTINUED)

NOTE E - RESTRICTIONS ON NET ASSETS

As of June 30, 2015 and 2014, temporarily restricted net assets was \$0 and \$3,000, respectively. The amount as of June 30, 2014 was restricted by the donor for use in establishing a computer station for residents.

As of June 30, 2015 and 2014, My Friend's Place has permanently restricted net assets of \$9,177 and \$10,090, respectively, invested with The New Hampshire Charitable Foundation.

NOTE F - GAMING REVENUE, NET

Gaming revenue, net primarily represents amounts from weekly Bingo nights. Expenses consist of prizes and awards, hall rental, state taxes, licenses and supplies.

For the year ended June 30, 2015, gaming revenue, net of \$61,489 consisted of gaming revenue of \$705,983 less expenses of \$644,494.

For the year ended June 30, 2014, gaming revenue, net of \$73,317 consisted of gaming revenue of \$732,780 less expenses of \$659,463.

NOTE G - RETIREMENT PLAN

My Friend's Place has adopted a 403(b) retirement plan. Under the plan, employees who meet certain age and length of service requirements may elect to defer a percentage of their salary, subject to Internal Revenue Service limits. My Friend's Place matches the employee deferral up to 5% of the employee's salary. For the years ended June 30, 2015 and 2014, retirement expense was \$3,285 and \$2,070, respectively.

NOTE H - LEASING ARRANGEMENTS

My Friend's Place rents property under cancelable leasing arrangements.

NOTE I - CREDIT RISK CONCENTRATION

As of June 30, 2015 and 2014, My Friend's Place had \$65,331 and \$70,237, respectively, in a repurchase account which is included in the cash balance. This amount is collateralized by a pool of U.S. Government agencies or U.S. Treasury notes. These amounts are considered cash equivalents. They are not insured by the Federal Deposit Insurance Corporation.

MY FRIEND'S PLACE
NOTES TO FINANCIAL STATEMENTS (CONTINUED)

NOTE J - ECONOMIC DEPENDENCY

My Friend's Place contracts are generally with government agencies and, therefore, the majority of its receivables and a significant amount of its revenue are derived from that source.

In addition, My Friend's Place has received a significant amount of its fundraising revenue from the operation of bingo games.

NOTE K - COMMITMENTS AND CONTINGENCIES

During the year ended June 30, 1998, My Friend's Place received a grant from the United States Department of Housing and Urban Development (HUD). The \$99,566 grant was used towards the acquisition of a transitional housing facility located at 21-23 Hough Street in Dover, New Hampshire. Under the terms of the grant, My Friend's Place would have to receive authorization from HUD in order to convert the transitional housing facility to another use. Failure to receive authorization from HUD would result in repayment of the grant to HUD.

My Friend's Place received money under various state and federal grants. Under the terms of these grants, My Friend's Place was required to use the money within the grant period for purposes specified in the grant proposal. If expenditures of the grant were found not to have been made in compliance with the proposals, My Friend's Place might be required to repay the grantor's funds.



RECEIVED
Planning Office

NOV 16 2016

Dover, New Hampshire

November 14, 2016

City of Dover
Planning & Community Development
City of Dover
288 Central Avenue
Dover, NH 03820

Dear: Mr. Carpenter,

The Community Action Partnership of Strafford County appreciates the opportunity to submit an application for funding assistance for PY18.

Our CDBG application requests \$25,000 in support of weatherizing homes for Dover residents.

I look forward to meeting with the Planning Board. If you have any questions in the meantime please feel free to contact Jean Tewksbury Self-Sufficiency Manager at 603-435-2500 ex 8151.

Sincerely,

A handwritten signature in blue ink, appearing to read "Betsey Andrews-Parker".

Betsey Andrews-Parker
Executive Director
Community Action Partnership of Strafford County

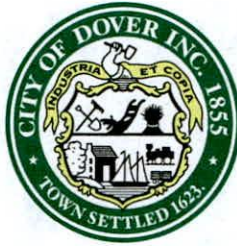
Community Action Partnership of Strafford County
Administrative Office, 642 Central Ave, Dover, NH 603-435-2500
Mailing address: P.O. Box 160, Dover, NH 03821-0160
www.StraffordCap.org

Outreach Offices:

61 Locust Street, Dover 603-460-4237
527 Main Street, Farmington 603-460-4313

Head Start Centers:

62A Whittier Street, Dover 603-285-9460
120 Main Street, Farmington 603-755-2883
55 Industrial Drive, Milton 603-652-0990
150 Wakefield Street, Rochester 603-285-9461
184 Maple Street, Somersworth 603-817-5458



CDBG APPLICATION

CITY OF DOVER, NH COMMUNITY DEVELOPMENT BLOCK GRANT FY2018

APPLICANT INFORMATION		
Organization Community Action Partnership of Strafford County	Tax ID 02-0268636	
Name of Program : Weatherization Program		
Name of Executive Director Betsey Andrews Parker		
Mailing Address P.O.Box 160 Dover, NH 03820		
Physical Address Suite 240 Dover, NH 03820		
Contact Person Jean Tewksbury	Phone (603)-435-2500 ex 8151	
E-Mail jtewksbury@straffordcap.org	Website www.straffordcap.org	
Please Identify the Type of Organization Applying for Funds (Note: More than one may apply)		
☒ 501(c)(3)	☐ For-profit authorized under 570.201(o)	☐ Unit of Government
☐ Faith-based Organization	☐ Institution of Higher Education	
☐ Other (Explain):		
Tax ID # 02-0268636		
*DUNS # 099-356-586	*SAM Expiration Date	

* *Important notice regarding new mandatory federal reporting requirements:* The Federal Funding Accountability and Transparency Act requires sub-recipients receiving federal funds to register with Dunn and Bradstreet to obtain a DUNS number and complete or renew their registration in the System for Award Management (SAM). For information on how to obtain a DUNS number and register in SAM please visit <https://fedgov.dnb.com/webform> and <https://www.sam.gov/portal/SAM/##11>. Completing these registration processes is free, but may take up to 15 days to complete. The city will not commit funds without this information.

ACTIVITY or PROJECT INFORMATION

ACTIVITY OR PROJECT INFORMATION
Amount of Dover CDBG funds requested for activity/project: \$ 25,000
Provide a very brief summary of the activity or project for which the funds are requested. Keep responses to one or two sentences (i.e. After School Care for K-4th grade students. Repair of homeless shelter roof. Etc.) Community Action Partnership of Strafford County is requesting funding to supplement our Weatherization Programs that provide cost effective weatherization measures intended to conserve energy for low-income residents. Identify the Dover Consolidated Plan "Specific Objective" that will be met by the proposed activity/project (see page 3 of CDBG Application: Overview & Scoring: Goal and Objectives) Specific Objective (i.e. Removal of architectural barriers to allow increased handicapped accessibility) Specific Objective #2: CAPSC will weatherize and improve the older housing stock for the city of Dover, especially for persons of low and very low income by, The CDBG funding benefits the Dover Residents by allowing Community Action Partnership of Strafford County to make improvements to the buildings systems and structures to provide cost effective weatherization measures intended to lower utility cost and improve the health and safety of the residents. The CAPSC Weatherization Auditor will use tests and procedures developed with or approved by Eversource, and the U.S. Department of Energy (i.e. blower door and combustion safety testing, CO testing, ventilation and moisture testing of the building envelope) to determine the combination of measures that are appropriate for the home. Measures include installations, furnace repair/replacement, storm window and door repair or replacement, low flow faucets and shower heads, caulking, weather stripping, pipe installation, refrigerator replacement and energy efficient lighting.

PROJECT LOCATION

Location(s) where services will be provided or physical improvements will be made. Throughout Dover
--

PROPOSED SCHEDULE OF PROJECT IMPLEMENTATION – PUBLIC FACILITIES ONLY (Construction Projects/Physical Improvements)

For this section please identify the major tasks and dates that they will be achieved.

TASK	DATE
CAPSC is projecting to complete 8 Weatherization Jobs using CDBG funding.	Starting August 2017 and no later than April 2018
Projects are identified by using the Weatherization prioritizing model which includes, energy usage, amount of years they	Starting July 2017 and no later than April 2018

have been a part of LIHEAP(fuel assistance) and household occupants over the age of 60 or under the age of 18.	

BENEFICIARIES

Beneficiaries:

For FY2018 (7/1/17 – 6/30/18) please provide the *estimated* number of unduplicated Dover beneficiaries that will benefit from this CDBG funded activity or project, not necessarily your entire client population (Note: these numbers will be monitored during the funding year): Community Action Partnership will Weatherize 8 Households.

For FY2016 (7/1/15 – 6/30/16) please provide the number of unduplicated Dover beneficiaries that benefited from this activity or program, not necessarily your entire client population:

Community Action Partnership of Strafford County Weatherization Program assisted 2 households a total of 15 people (residents) in 2015-2016. Please note that the program completions 2014-2015 monies were used, however the jobs were completed in 2015-2016 fiscal year.

We are currently spending 2015-2016 monies. Presently CAPSC Weatherization Program has 9 WAP jobs using CDBG monies totaling \$50,000.

Were Dover CDBG funds used to fund this activity or program in FY2017 (7/1/16 – 6/30/17): yes

If so, how much? \$25,000

Beneficiary type: ☒ Elderly ☒ Family ☒ Disabled ☐ Homeless ☐ Persons living with AIDS
☒ Other (specify): **Group Homes**

ACTIVITY/PROJECT NARRATIVE

Please provide a detailed description for the proposed activity/project. (note: not the organization) This section should describe the use of funds and explain why the funds are needed. Please relate how the CDBG funds will ultimately benefit Dover low-moderate income individuals.

The CDBG funding benefits Dover residents in several ways by allowing us to make improvements to building systems and structure (e.g. health and safety issues and incidental repairs).

The CDBG funding is used for Community Action Partnership of Strafford County Weatherization Program (WAP). WAP will benefit Dover residents by reducing household energy use and cost in the homes of low-income persons throughout Dover by installing energy efficiency improvements. The funding will allow us to:

- Make improvement to building systems and structures (e.g. health and safety issues and incidental repairs) that cannot be repaired using our other funding sources but must be repaired for the structure to

be eligible for weatherization funding.

- Allow Dover projects to comply with leveraging requirements mandated by weatherization funding.
- Address emergency issues not requiring whole-home weatherization.
- Allow us to provide assistance during times of the year when other funding sources are not available.

Please indicate who prepared the overall cost estimate for the activity or project.

Jean Tewksbury Self-Sufficiency Manager of Community Action Partnership of Strafford County submitted an overall budget of \$25,000. Dover CDBG dollar leverages an estimated \$2.93 from other funding sources.

CAPSC Auditor Zach McDonald conducts an audit to assess the condition of the home and develops a work-scope of the most cost effective energy saving measures. Once this Work-Scope is completed it is given to the Contractor hired by CAPSC to complete the job at the estimated cost on the Work-Scope provided.

CAPSC is projecting that we will complete eight Dover Weatherization Jobs for 2017-2018 funding year. Due to the nature of the program we do not have prepared cost estimates for each project; projects are selected each year according to the State of New Hampshire Weatherization Guidelines. The guidelines are a system of questions that have numerical point value, each household that is on the Weatherization list is evaluated according to the guidelines then put on the Weatherization list according to their score. The Weatherization Team then looks at the list and determines what Weatherization Jobs will be completed for the year.

For this application, written quotes are required for proposed purchase of items exceeding \$3,000.00 or for physical improvements (i.e. building expansion, new roof, replacement of windows, etc.). Please attach quotes you have obtained.

PER-OUTCOME MEASURES	
Provide the outcomes proposed and the method of measurement. You may list multiple outcomes.	
Outcome	Measurement
Ex. Decrease in number of "latch-key kids" Ex. Decreased dependence on emergency care facilities for non-emergency care of low/mod adults	Ex. # of children who participate in afterschool program Ex. Increase in number of low/mod income residents that seek care from health program.
Reduce household energy usage and costs in the homes of low-income persons throughout Dover by installing energy efficiency improvements.	➤ 8 households energy usage will be reduced ➤ An Average of 8 households will reduce benefit dependency by having lower energy usage.

ORGANIZATION

DESCRIPTION OF ORGANIZATION

Please provide a description for the Organization that is undertaking the activity/project.

Community Action Partnership is a 501(c)(3) private non-profit organization established under the provisions of the Equal Opportunity Act of 1964 and established in Strafford County in May of 1965. We work with community, state and federal partners to assist more than 10,000 people each year, and the majority of program participant have extremely low incomes (below 755 of the federal poverty threshold)

- **Our Mission:** To educate, advocate and assist people in Strafford County to help meet their basic needs and promote self-sufficiency.
- **Our Vision:** To eliminate poverty in Strafford County.
- **Our Values:** Compassion, Education, Self-sufficiency, Transparency, Accountability, Teamwork, Client Focus and Professionalism.

Without the services provided by our agency for the past 50 years, many local residents would be without a means to provide for their basic needs, including food, education, child care, utilities assistance, transportation, housing, emergency shelter, assistance with obtaining and retaining housing and referrals to other agencies. In addition to our administrative office being located in Dover, CAPSC maintains our outreach capacity by operating two Outreach Offices in Dover and Farmington and Head Start Centers in Dover, Farmington, Milton, Rochester and Somersworth. Additionally we operate emergency food pantries in Dover, and Farmington, and provide meals to over 10,000 individuals annually.

Our agency provided more than \$2 million in federal fuel assistance to over 3,000 qualified households in Strafford County during the 2015-2016 heating season. Over 700 of the 3,000 qualified households were in Dover. Additionally over 600 households in Dover received a monthly discount on their electrical bill through the Electrical Assistance Program.

Our Senior Transportation bus provides low-cost rides to anyone age 60 and over to shops, grocery stores and pharmacies four days a week, including over 3,808 rides for Dover residents.

Our food panty in Dover served over 3,000 household and our Summer Meals Program served 7,225 meals to school age children.

Our Dover Heads Start and Early Head Start Program served a Total of 63 children.



2017 Board of Directors

Carrie DiGeorge, Chair
Becky Sherburne, Vice Chair
Alan Brown, Treasurer
Jean Miccolo, Secretary
David Terlemezian
Colene Arnold
Joe Bailey
Alison Dorow
Dorothea (Dot) Hooper
Chris Lawrence
Penney Mabey
Hope Morrow Flynn
Jeni Mosca
Jason Shute
Sunmayyab (Maya) Wylder
Marci Theriault

Community Action Partnership of Strafford County
Administrative & Weatherization Office, 642 Central Avenue, Dover, NH 603-435-2500
Mailing address: P.O. Box 160, Dover, NH 03821-0160

Outreach Offices:

61 Locust Street, Dover 603-460-4237
527 Main Street, Farmington 603-460-4313

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62A Whittier Street, Dover 603-285-9460
120 Main Street, Farmington 603-755-2883
55 Industrial Drive, Milton 603-652-0990
150 Wakefield Street, Rochester 603-285-9461
184 Maple St. Ext., Somersworth 603-817-5458

AUDIT AND EVALUATION
Does your organization have an annual CPA Audit? Yes
If yes, please submit most recent Audit.
Is your organization evaluated by outside agencies or programs? Yes
If yes, please note the agency/program and how often the evaluation occurs. Office of Energy and Planning/Yearly

BOARD OF DIRECTORS	
Name	Residence (city/town)

BUDGET:

Use box A or B below to provide a budget for the proposed *Public Service (A.)* or *Public Facility (B.)*. Include all proposed expenses.

A. Public Services (Non-Construction Projects)			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Office Supplies			
Utilities			
Repairs/Maintenance			
Travel			
Salaries (List relevant positions)			
Other:			
TOTAL PROPOSED BUDGET:			

B. Public Facilities: Construction Projects/Physical Improvements			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
See attached budget			
Hard Costs <u>Note:</u> Federal wage rates may apply for some construction projects. Applicants are encouraged to obtain estimates that reflect wage rates estimates.			
Weatherization Work	\$25,000		
Other (list)			
<i>Total Hard Costs</i>			
Soft Costs			
Acquisition			
Appraisals			
Design/Engineering			
Other(list):			

Contract period: 8/1/15 - 9/30/16

Program Year 16

Agency: Community Action Partnership of Strafford County

HRRP

8.0. Administrative:

	Amounts
Admin 5% of Total Budget	\$2,606.00
	\$0.00
	\$0.00
	\$0.00
	\$0.00

Sub Total
\$2,606.00

8.1 Personnel:

# Of Persons	Position/Title	Annual Salary		# Of Months	% Of Time	Amounts
1	Self-Sufficiency Manag	\$47,000.00		12	6.0%	\$2,820
1	Auditor	\$41,995.20		12	20.00%	\$16,798
1	Energy and Service speicalist	\$36,004.80		12	10.0%	\$3,600
						\$0
						\$0
						\$0
						\$0
						\$0
						Sub Total
						\$23,218.56

8.2 Fringe benefits (List By Type & Amount) Note: Include All Fringe Benefits

FICA	Amounts
	\$1,219.00

Health	\$379.00
Dental	\$103.00
Workers Comp/Unemployment Comp	\$1,000.00
Life/Disability	\$513.00
Pension	\$300.00
Total Fringe:----- 26.36%	Sub Total
	\$3,514.00

\$0

8.3 HRRP Vehicle Operation-----	Amounts
	\$0.00
	\$0.00
	\$0.00
	\$0.00
	Sub Total
	\$0.00

8.4 HRRP Supplies -----	Amounts
Electric space heaters to provide to clients while heating system is being repaired or replaced	\$800.00
	\$0.00
	Sub Total
	\$800.00

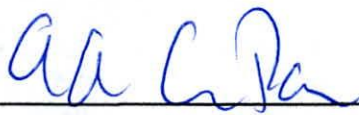
8.5 HRRP Materials -----	Amounts
CO and Smoke detectors to be installed by auditor	\$1,000.00
	\$0.00
	\$0.00
	Sub Total
	\$1,000.00

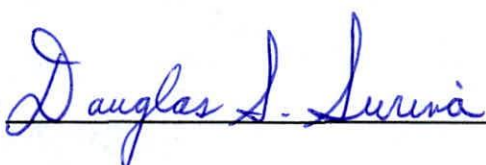
8.6 HRRP Paid Labor:

Part time employees not eligible for fringe benefits

# Of Persons	Position/Title	Annual Salary		# Of Months	% Of Time	Amounts
						\$0.00
						\$0.00
						\$0.00
						\$0.00
						\$0.00
						\$0.00
						\$0.00
						\$0.00
						\$0.00
						Sub Total
						\$0.00
8.7 HRRP Contracted Labor-----						\$20,971.44
8. TOTAL HRRP-----						\$52,110.00

9. SUMMARY	
9.1 HRRP UNITS	22
9.2 AVG COST PER HRRP UNIT	\$2,482.68

Executive Director Signature:  Date: 11/14/18
Elizabeth A. Andrews Parker

Weatherization Director Signature:  Date: 11/16/18
Douglas Surina

DOE Wxn Budget Support Sheet

Wxn Program Year (PY15) 7/1/16- - 6/30/17

Sub grantee: Community Action Partnership of Strafford County
PO Box 160, Dover, NH 03821-0160

1. Administrative:

	Admin @ 10% of Budget*	\$11,707.00
*According to US DOE, agencies receiving less than \$350,000.00 have the authority, upon approval		\$0.00
from OEP, to increase their Administrative budget by reallocating up to 5% of their Health & Safety		\$0.00
and Program Activity budgets		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00

Sub Total
\$11,707.00

2.1 Personnel:

# Of Persons	Position/Title	Annual Salary	# Of Months	% Of Time	Amounts
1	Jean Tewksbury	\$48,000.00	12	6%	\$ 2,880.00
1	Terri Magoon	\$33,885.00	12	30%	\$ 10,165.50
1	Auditor	\$38,000.00	12	80%	\$ 30,400.00
1	Contractual and Data Special	\$45,760.00	12	5%	\$ 2,288.00

Sub Total
\$45,733.50

2.2 Fringe benefits (List By Type & Amount) Note: Include All Fringe Benefits

	Amounts
FICA	\$3,572.36
W/C	\$4,314.37
NHUC	\$1,279.53
Insurances	\$7,438.51
Pension	\$701.00
0.378404671	

Total Fringe:----- Sub Total
\$17,305.77

2.3 Travel

In State	# Of Miles	Rate	Amount
			\$0.00
Out Of State (List Trip & Amounts)			Amounts
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00

Total Travel (In state + Out of state)----- Sub Total
\$0.00

GO TO PAGE TWO

2.4 Tools & Equipment maintenance-----page 2-----		Amounts
Replace or upgrade as needed. No major purchases planned.		\$0.00
		\$0.00
		\$0.00
		\$0.00
	Sub Total	\$0.00
2.5 Tools & Equipment Purchase-----		Amounts
		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
	Sub Total	\$0.00
2.6 Supplies-----		Amounts
Batteries, Personal Protective Equipment, etc.		\$449.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
	Sub Total	\$449.00
2.7 Office Expenses-----		Amounts
Equipment – Lease, Rent, Building Repairs & Maintenance, Electricity, Heat, Interr		\$3,000.00
Snow Plowing/Lawn Care, Trash Removal, Security Services, Postage, Printing		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
	Sub Total	\$3,000.00
2.8 Vehicle Operation-----		Amounts
Mileage, insurance, registration, motor pool @ \$.37 a mile		\$700.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
		\$0.00
	Sub Total	\$700.00

GO TO PAGE THREE

2.9 Storage-----page 3-----	Amounts
	\$0.00
	\$0.00
	\$0.00
	\$0.00
	\$0.00
	Sub Total
	\$0.00
Total Non-Admin. Support-----	\$67,188.27

2.10 Wxn Paid Labor (Crew members or other CAA staff installing measures)

Salaries:

# Of Persons	Position/Title	Annual Salary	# Of Months	% Of Time	Amounts
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					Sub Total
					\$0.00

2.11 Wxn Contracted Work (includes contractor labor & material but NOT H&S) **\$20,677.92**

2. Total Program Support **\$87,866.19**

3. Total Wxn Materials (if installed by crew or CAA staff only) **\$ 100.00**

4. Liability Insurance **\$ 2,000.00**

5. Financial Audit **\$ 300.00**

6.1 Personnel *QCI training - auditors time **\$ 2,177.00**

6.2 Fringe Other staff time at conferences **\$ 823.00**

6.3 Supplies

6.4 Information Services

6.5 Travel **\$ 2,904.81**

6.6 Training Tier 1 - QCI training costs **\$ 3,760.00**

Tier 2 - NECAP, National WX confer, mold safety, healthy homes

6.7 Tools/Equipment

6. Total T&TA Expenses **\$9,664.81**

7. Total Health & Safety (includes material & labor) **\$ -**

7. Total Health & Safety (includes material & labor) **\$3,000.00**

8. Total Budget Expenditures **\$114,638.00**

9. Total Planned Units (Including Rewx'd pre 9/93) **16**

10. Wxn Job Average (H&S not included) **\$5,497.89**

11. Health & Safety Average **\$187.50**

12. TOTAL JOB AVERAGE (includes H&S) **\$5,685.39**

Community Action Partnership of Strafford County Weatherization Budget FY2018

B: Public Facilities: Construction Projects:

Fund	PY-Cycle	Funding	D-CDBG Leveraging	% of FAP Clients in Dover	Adjusted CDBG Leveraging	Total funding for Dover
Eversource	January-December	\$75,000.00	\$75,000.00	18%	\$13,500.00	\$13,500.00
Unitil	January-December	\$45,000.00	\$45,000.00	18%	\$8,100.00	\$8,100.00
HRRP	October-September	\$52,110.00	\$52,110.00	18%	\$9,379.80	\$9,379.80
WAP	July-June	\$114,638.00	\$114,638.00	18%	\$20,634.84	\$20,634.84
R-CDBG	July-June	\$50,000.00				
D-CDBG	July-June	\$25,000.00	\$25,000.00	100%	\$25,000.00	\$25,000.00
		\$361,748.00	\$311,748.00		\$76,614.64	\$76,614.64

PY Cycle= Grant Period. The above funding for the Weatherization Program is anticipated and remains steady for the next year. Therefore the level funding shown above should be the funding level expected for the duration of the requested CDBG Grant.

<i>Total Soft Costs</i>			
TOTAL PROPOSED BUDGET:			

FUNDING SOURCES

Other Funding Sources - please indicate the source and amount of other funding committed, pending or proposed for this project, if any. *Do not include Dover CDBG amount requested.*

Funding Source: (Name(s) of funding source(s))	Total Amount (\$):	Committed, Pending or Proposed Amount (\$):	
Federal: 1. HRRP 2. Weatherization Program(DOE)	 1. \$52,110 2. \$114,639	Committed Pending Proposed	 \$166,748
State:		Committed Pending Proposed	
Local: 1. Eversource 2. Unital	 1. \$75,000 2. 45,000	Committed Pending Proposed	 \$120,000
Private:		Committed Pending Proposed	
Portsmouth CDBG:		Committed Pending Proposed	
Rochester CDBG:	\$50,000	Committed Pending Proposed	 \$50,000
Other:		Committed Pending Proposed	
Total:		Committed Pending Proposed	

Organizational Commitment: For Public Facility Projects (building addition, new roof, replacement windows, etc.) – indicate the amount of funds that the organization will be contributing to the project.

Funding Source: (Name of Parent Organization)	Total Amount (\$) to be Contributed by Parent Organization	Committed or Proposed Amount (\$)
---	---	--

		Committed	
		Proposed	
Total:			

AGENCY BUDGET

Please provide a breakdown of your organization's overall annual budget. Please indicate the dates of your budget period, i.e. July 1 to June 30 or January 1 to December 31.

Budget Period: from	to	Current Year	Next Year (projected)
REVENUES			
Federal Funds			
State Funds			
Foundations/Private Contributions			
United Way			
Fundraising or other income			
Other (describe)			
Community Dev. Block Grant (include anticipated request)			
TOTAL REVENUE			
EXPENSES			
Salaries			
Fringe Benefits			
Supplies (include printing/copying)			
Travel			
Training			
Communications			
Audit			
Property Maintenance			
Service Contracts			
Construction Supplies/Materials			
Other (describe)			
TOTAL EXPENSES			
NET (Income - Expenses)			

Income Statement

Unaudited

CAPSC Budget January 1, 2017 - Decemebr 31, 2017

	Program	GAAP	Total YTD
REVENUE:			
Revenue from Direct Contributions:	\$55,782.84	\$0.00	\$55,782.84
Revenue from Donated Goods and Services:	\$841,970.00	\$0.00	\$841,970.00
Revenue from Non-Government Grants:	\$246,925.00	\$0.00	\$246,925.00
Revenue from Split-Interest Agreements:	\$30,000.00	\$0.00	\$30,000.00
Revenue from Indirect Contributions:	\$117,513.25	\$0.00	\$117,513.25
Revenue from Government Grants:	\$7,080,066.23	\$0.00	\$7,080,066.23
Revenue from Government Agencies:	\$354,456.36	\$0.00	\$354,456.36
Revenue from Program-Related Sales & Fees:	\$218,650.91	\$0.00	\$218,650.91
Revenue from Dues:	\$0.00	\$0.00	\$0.00
Revenue from Investments:	\$11,389.90	\$156.00	\$11,545.90
Revenue from Other Sources:	\$0.00	\$0.00	\$0.00
Special Events:	\$30,650.00	\$0.00	\$30,650.00
Unrealized Gain (loss):	\$0.00	\$0.00	\$0.00
Net Assets released from restriction:	\$0.00	\$75,000.00	\$75,000.00
TOTAL REVENUE:	\$8,987,404.49	\$75,156.00	\$9,062,560.49
EXPENSE:			
Grants, Contracts & Direct Assistance:	\$2,908,736.30	\$0.00	\$2,908,736.30
Salaries & Related Expense:	\$4,281,891.66	\$0.00	\$4,281,891.66
Contract Service Expenses:	\$650,972.18	\$0.00	\$650,972.18
Nonpersonnel Expenses:	\$325,130.17	\$0.00	\$325,130.17
Facilities & Equipment Expenses:	\$382,148.57	\$43,903.85	\$426,052.42
Travel & Meeting Expenses:	\$220,724.75	\$0.00	\$220,724.75
Other Expenses:	\$136,365.57	\$0.00	\$136,365.57
Business Expenses:	(\$50,612.06)	\$0.00	(\$50,612.06)
Fixed Asset Purchases:	\$4,847.60	\$0.00	\$4,847.60
TOTAL EXPENSE:	\$8,860,204.74	\$43,903.85	\$8,904,108.59
NET SURPLUS/(DEFICIT)	\$127,199.75	\$31,252.15	\$158,451.90

By signing below, the Authorized Official affirms: The organization's commitment to implement the proposed activity/project; that all information presented is true and accurate to the best of their knowledge; and he/she is authorized to submit this application;

Submitted by:

Betsy Andrews Parker
Authorized Official - signature

11/16/18
Date

Betsy Andrews Parker

Chief Executive Officer

Financial Statements

COMMUNITY ACTION PARTNERSHIP OF
STRAFFORD COUNTY

FOR THE YEARS ENDED
DECEMBER 31, 2015 AND 2014
AND
INDEPENDENT AUDITORS' REPORTS

*Leone,
McDonnell
& Roberts*
PROFESSIONAL ASSOCIATION

CERTIFIED PUBLIC ACCOUNTANTS

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

DECEMBER 31, 2015 AND 2014

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To the Board of Directors of
Community Action Partnership of Strafford County
Dover, New Hampshire

INDEPENDENT AUDITORS' REPORT

Report on the Financial Statements

We have audited the accompanying financial statements of Community Action Partnership of Strafford County (a New Hampshire nonprofit organization), which comprise the statements of financial position as of December 31, 2015 and 2014, and the related statements of cash flows, and notes to the financial statements for the years then ended, and the related statements of activities and functional expenses for the year ended December 31, 2015.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Community Action Partnership of Strafford County as of December 31, 2015 and 2014, and its cash flows for the years then ended, and the changes in its net assets for the year ended December 31, 2015 in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited Community Action Partnership of Strafford County's 2014 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated June 10, 2015. In our opinion, the summarized comparative information presented herein as of and for the year ended December 31, 2014, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Other Matters

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, and schedule of revenues and expenditures – Electrical Assistance Program are presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated June 1, 2016, on our consideration of Community Action Partnership of Strafford County's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Community Action Partnership of Strafford County's internal control over financial reporting and compliance.

*Leone, McDonnell & Roberts,
Professional Association*

June 1, 2016
Wolfeboro, New Hampshire

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

**STATEMENTS OF FINANCIAL POSITION
DECEMBER 31, 2015 AND 2014**

	<u>2015</u>	<u>2014</u>
<u>ASSETS</u>		
CURRENT ASSETS		
Cash and cash equivalents	\$ 713,900	\$ 744,514
Accounts receivable	714,329	770,066
Inventory	8,724	8,754
Prepaid expenses	<u>1,300</u>	<u>11,586</u>
Total current assets	<u>1,438,253</u>	<u>1,534,920</u>
NONCURRENT ASSETS		
Security deposits	24,667	19,201
Property, net of accumulated depreciation	478,424	435,446
Other noncurrent assets	<u>12,500</u>	<u>12,500</u>
Total noncurrent assets	<u>515,591</u>	<u>467,147</u>
TOTAL ASSETS	<u>\$ 1,953,844</u>	<u>\$ 2,002,067</u>
<u>LIABILITIES AND NET ASSETS</u>		
CURRENT LIABILITIES		
Demand note payable	\$ 73,401	\$ 80,735
Accounts payable	82,925	126,063
Accrued payroll and related taxes	121,014	120,172
Accrued compensated absences	81,878	78,154
Refundable advances	467,356	491,134
Other current liabilities	<u>24,399</u>	<u>137</u>
Total liabilities	<u>850,973</u>	<u>896,395</u>
NET ASSETS		
Unrestricted		
Undesignated	686,961	669,373
Board designated	<u>307,315</u>	<u>307,002</u>
Total unrestricted	994,276	976,375
Temporarily restricted	<u>108,595</u>	<u>129,297</u>
Total net assets	<u>1,102,871</u>	<u>1,105,672</u>
TOTAL LIABILITIES AND NET ASSETS	<u>\$ 1,953,844</u>	<u>\$ 2,002,067</u>

See Notes to Financial Statements

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

**STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED DECEMBER 31, 2015
WITH PRIOR YEAR SUMMARIZED COMPARATIVE INFORMATION**

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>2015 Total</u>	<u>2014 Total</u>
CHANGE IN NET ASSETS				
REVENUES AND OTHER SUPPORT				
Grant revenue	\$ 7,098,408	\$ -	\$ 7,098,408	\$ 7,545,723
Fees for service	334,257	-	334,257	424,089
Rent revenue	11,005	-	11,005	24,353
Public support	150,971	60,838	211,809	432,328
In-kind donations	649,898	-	649,898	439,830
Interest	128	-	128	301
Fundraising	56,979	-	56,979	31,299
Total revenues and support	<u>8,301,646</u>	<u>60,838</u>	<u>8,362,484</u>	<u>8,897,923</u>
NET ASSETS RELEASED FROM RESTRICTIONS	<u>81,540</u>	<u>(81,540)</u>	<u>-</u>	<u>-</u>
Total revenues, support, and net assets released from restrictions	<u>8,383,186</u>	<u>(20,702)</u>	<u>8,362,484</u>	<u>8,897,923</u>
EXPENSES				
Program services				
Child services	3,693,205	-	3,693,205	3,374,862
Community services	712,557	-	712,557	831,155
Energy assistance	2,120,534	-	2,120,534	2,975,261
Housing	347,367	-	347,367	189,080
Weatherization	286,121	-	286,121	133,564
Workforce development	264,408	-	264,408	258,219
Total program services	<u>7,424,192</u>	<u>-</u>	<u>7,424,192</u>	<u>7,762,141</u>
Supporting activities				
Management and general	846,980	-	846,980	1,031,611
Fundraising	57,682	-	57,682	23,644
Total expenses	<u>8,328,854</u>	<u>-</u>	<u>8,328,854</u>	<u>8,817,396</u>
CHANGE IN NET ASSETS BEFORE LOSS ON SALE OF ASSETS	<u>54,332</u>	<u>(20,702)</u>	<u>33,630</u>	<u>80,527</u>
LOSS ON SALE OF ASSETS	<u>(36,431)</u>	<u>-</u>	<u>(36,431)</u>	<u>(110,559)</u>
CHANGE IN NET ASSETS	<u>17,901</u>	<u>(20,702)</u>	<u>(2,801)</u>	<u>(30,032)</u>
NET ASSETS, BEGINNING OF YEAR	<u>976,375</u>	<u>129,297</u>	<u>1,105,672</u>	<u>1,135,704</u>
NET ASSETS, END OF YEAR	<u>\$ 994,276</u>	<u>\$ 108,595</u>	<u>\$ 1,102,871</u>	<u>\$ 1,105,672</u>

See Notes to Financial Statements

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

**STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014**

	<u>2015</u>	<u>2014</u>
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	\$ (2,801)	\$ (30,032)
Adjustment to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	43,903	69,333
Loss on sale of assets	36,431	110,559
(Increase) decrease in assets:		
Accounts receivable	55,737	(113,132)
Inventory	30	6,553
Prepaid expenses	10,286	67,697
Security deposits	(5,466)	(60)
Other noncurrent assets	-	(2,500)
Increase (decrease) in liabilities:		
Accounts payable	(43,138)	58,278
Accrued payroll and related taxes	842	27,498
Accrued compensated absences	3,724	(2,438)
Refundable advances	(23,778)	(51,760)
Other current liabilities	<u>24,262</u>	<u>(55,781)</u>
NET CASH PROVIDED BY OPERATING ACTIVITIES	<u>100,032</u>	<u>84,215</u>
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchases of property and equipment	(130,646)	(77,022)
Proceeds from sale of property and equipment	<u>7,334</u>	<u>129,471</u>
NET CASH (USED IN) PROVIDED BY INVESTING ACTIVITIES	<u>(123,312)</u>	<u>52,449</u>
CASH FLOWS FROM FINANCING ACTIVITIES		
Repayment of demand note payable	<u>(7,334)</u>	<u>(6,443)</u>
NET CASH USED IN FINANCING ACTIVITIES	<u>(7,334)</u>	<u>(6,443)</u>
NET (DECREASE) INCREASE IN CASH AND CASH EQUIVALENTS	(30,614)	130,221
CASH AND CASH EQUIVALENTS, BEGINNING OF YEAR	<u>744,514</u>	<u>614,293</u>
CASH AND CASH EQUIVALENTS, END OF YEAR	<u>\$ 713,900</u>	<u>\$ 744,514</u>
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION		
Cash paid during the year for interest	<u>\$ 3,448</u>	<u>\$ 3,252</u>

See Notes to Financial Statements

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

**STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2015
WITH PRIOR YEAR SUMMARIZED COMPARATIVE INFORMATION**

	<u>Child Services</u>	<u>Community Services</u>	<u>Energy Assistance</u>	<u>Housing</u>	<u>Weatherization</u>	<u>Workforce Development</u>	<u>Total Program Services</u>	<u>Management And General</u>	<u>Fundraising</u>	<u>2015 Total</u>	<u>2014 Total</u>
Payroll	\$ 2,058,413	\$ 183,228	\$ 255,149	\$ 67,134	\$ 37,292	\$ 170,757	\$ 2,771,973	\$ 502,520	\$ 17,761	\$ 3,292,254	\$ 3,310,098
Payroll taxes	203,101	16,442	22,678	6,690	3,049	15,950	267,910	43,943	1,974	313,827	340,843
Fringe benefits	189,204	24,301	39,584	6,395	3,610	14,098	277,192	36,615	22	313,829	323,866
Weatherization material, fuel and client assistance	57,805	57,164	1,716,873	168,334	186,690	9,231	2,196,097	1,035	-	2,197,132	2,873,617
In-kind expenses	423,519	170,974	-	14,619	36,361	-	645,473	-	4,425	649,898	439,831
Consumable supplies	161,559	27,392	6,837	2,279	615	1,920	200,602	6,825	32	207,459	195,360
Indirect costs	-	-	-	-	-	-	-	133,274	-	133,274	190,950
Insurance	124,132	6,503	2,822	4,998	3,660	4,729	146,844	6,013	134	152,991	168,916
Equipment and computer	38,785	(14,261)	7,786	1,256	770	2,279	36,615	11,221	123	47,959	157,109
Rent	76,728	10,143	19,024	1,819	1,885	27,895	137,494	13,769	890	152,153	149,437
Utilities	91,455	7,489	11,555	16,454	2,822	4,898	134,673	12,662	567	147,902	129,280
Consultants and contract labor	142,393	31,972	6,209	54,168	624	1,009	236,375	34,776	7,069	278,220	104,984
Repairs and maintenance	79,871	14,505	20,893	11,871	1,107	2,727	130,974	15,877	7,219	154,070	101,120
Travel	55,543	6,268	1,868	1,009	3,268	4,987	72,943	22,441	149	95,533	98,152
Meetings, events and training	68,465	3,947	1,921	261	2,083	783	77,460	14,678	569	92,707	93,647
Depreciation	18,695	18,020	-	3,733	1,135	2,320	43,903	-	-	43,903	69,333
Copying & postage	14,877	2,333	6,588	201	965	322	25,286	8,953	346	34,585	31,013
Retirement	9,395	633	409	74	185	503	11,199	1,776	72	13,047	16,997
Property taxes	-	493	-	2,412	-	-	2,905	-	-	2,905	3,516
Interest expense	-	3,448	-	-	-	-	3,448	-	-	3,448	3,252
Other program support	(120,735)	141,563	338	(16,340)	-	-	4,826	(19,398)	16,330	1,758	15,075
Total expenses	\$ 3,693,205	\$ 712,557	\$ 2,120,534	\$ 347,367	\$ 286,121	\$ 264,408	\$ 7,424,192	\$ 846,980	\$ 57,682	\$ 8,328,854	\$ 8,817,396

See Notes to Financial Statements

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

NOTES TO FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014

NOTE 1. ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Organization

Community Action Partnership of Strafford County (the Agency) is a 501(c)(3) private New Hampshire non-profit organization established under the provisions of the Equal Opportunity Act of 1964. Without services provided by the Agency, many local residents would be without a means to provide for their basic needs, including food, education, child care, utilities assistance, transportation, housing, emergency shelter and access to other services. The mission of the Agency is to educate, advocate and assist people in Strafford County to help meet their basic needs and promote self-sufficiency. The vision of the Agency is to eliminate poverty in Strafford County through compassion, education, self-sufficiency, transparency, accountability, team work, client focus and professionalism.

In addition to its administrative office located in Dover, the Agency maintains its outreach capacity by operating program offices in Farmington, Milton, Rochester, Dover and Somersworth. The Agency is funded by Federal, state, county and local funds, as well as United Way grants, public utilities, foundation and charitable grant funds, fees for service, private business donations, and donations from individuals. The Agency is governed by a tripartite board of directors made up of elected officials, community leaders from for-profit and non-profit organizations and residents who are low income. The board is responsible for assuring that the Agency continues to assess and respond to the causes and conditions of poverty in its community, achieve anticipated family and community outcomes, and remain administratively and fiscally sound. The Agency administers a wide range of coordinated programs to more than 15,000 people annually, and the programs are designed to have a measureable impact on poverty and health status among the most vulnerable residents: those under the age of 6, the elderly and those living in poverty. This coordinated approach is accomplished by providing a broad array of services that are locally defined, planned and managed with community agencies.

Basis of Accounting

The financial statements have been prepared using the accrual basis of accounting in accordance with Generally Accepted Accounting Principles (GAAP) of the United States.

Financial Statement Presentation

The financial statement presentation follows the recommendations of the Accounting Standard Codification No. 958-210, *Financial Statements of Not-For-Profit Organizations*. Under FASB ASC No. 958-210, the Agency is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets

and permanently restricted net assets. The classes of net assets are determined by the presence or absence of donor restrictions.

Unrestricted: Net assets that are not subject to donor-imposed stipulations. Unrestricted net assets may be designated for specific purposes by action of the Board of Directors.

Temporarily Restricted: Net assets whose use is limited by donor imposed stipulations that will either expire with the passage of time or be fulfilled or removed by actions of the Agency.

Permanently Restricted: Net assets reflecting the historical cost of gifts (and in certain circumstances, the earnings from those gifts), subject to donor-imposed stipulations, which require the corpus to be invested in perpetuity to produce income for general or specific purposes.

At December 31, 2015 and 2014 the Agency had unrestricted and temporarily restricted net assets.

Refundable Advances

Grants received in advance are recorded as refundable advances and recognized as revenue in the period in which the related services are performed or expenditures are incurred.

Contributions

All contributions are considered to be available for unrestricted use unless specifically restricted by donor. Amounts received that are restricted by the donor for future periods or for specific purposes are reported as temporarily restricted or permanently restricted support, depending on the nature of the restriction. However, if a restriction is fulfilled in the same period in which the contribution is received, the Agency reports the support as unrestricted.

Contributed Services

Donated services are recognized as contributions in accordance with FASB ASC No. 958, *Accounting for Contributions Received and Contributions Made*, if the services (a) create or enhance non-financial assets or (b) require specialized skills, and would otherwise be purchased by the Agency.

Volunteers provided various services throughout the year that are not recognized as contributions in the financial statements since the recognition criteria under FASB ASC No. 958 were not met.

Fair Value of Financial Instruments

Accounting Standard Codification No. 825, "Financial Instruments", requires the Agency to disclose estimated fair value for its financial instruments. The carrying amounts of cash, investments, accounts receivable, prepaid expenses, inventory, accounts payable, accrued expenses, and refundable advances approximate fair value because of the short maturity of those instruments.

Inventory

Inventory materials are fixtures for installation and recorded at cost or contributed value, using the first-in, first-out method.

Property and Depreciation

Property and equipment, which have a cost greater than \$5,000, are capitalized at cost or, if donated, at the approximate fair value at the date of donation. Specific grants and awards may have a threshold lower than this amount and that program will abide by those guidelines. Assets are depreciated over their estimated useful lives using the straight-line method as follows:

Buildings and improvements	15 - 40 years
Furniture, equipment and machinery	3 - 10 years
Vehicles	5 - 7 years

Depreciation expense aggregated \$43,903 and \$69,333 for the years ended December 31, 2015 and 2014, respectively.

Accrued Earned Time

The Agency has accrued a liability of \$81,878 and \$78,154 at December 31, 2015 and 2014, respectively, for future compensated leave time that its employees have earned and which is vested with the employee.

Income Taxes

The Agency is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. The Internal Revenue Service has determined the Agency to be other than a private foundation. The Agency is also exempt from the New Hampshire Business Enterprise Tax.

Accounting Standard Codification No. 740, "Accounting for Income Taxes", establishes the minimum threshold for recognizing, and a system for measuring, the benefits of tax return positions in financial statements. Management has analyzed the Agency's tax position taken on its information returns for the years (2012 through 2015), for the purposes of implementation, and has concluded that no additional provision for income taxes is necessary in the Agency's financial statements.

Cash and Cash Equivalents

The Agency considers all highly liquid financial instruments with original maturities of three months or less to be cash equivalents.

Use of Estimates

The presentation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Advertising Expenses

The Agency expenses advertising costs as they are incurred. Total advertising costs for the years ended December 31, 2015 and 2014 amounted to \$15,799 and \$12,641, respectively.

In-kind Donations

The Agency pays below-market rent for the use of certain facilities. In accordance with generally accepted accounting principles, the difference between amounts paid for the use of the facilities and the fair market value of the rental space has been recorded as an in-kind donation and as an in-kind expense in the accompanying financial statements. The estimated fair value of the donation was determined to be \$268,238 and \$199,684 for the years ended December 31, 2015 and 2014, respectively.

The Agency also receives contributed professional services that are required to be recorded in accordance with FASB ASC No. 958. The estimated fair value of these services was determined to be \$131,488 and \$82,809 for the years ended December 31, 2015 and 2014, respectively.

The Agency also receives contributed food commodities and other goods that are required to be recorded in accordance with FASB ASC No. 958. The estimated fair value of these food commodities and goods was determined to be \$136,081 and \$96,644, respectively, for the year ended December 31, 2015. For the year ended December 31, 2014, the estimated fair value of these food commodities and goods was determined to be \$132,268 and \$25,070, respectively.

Functional Allocation of Expenses

The costs of providing the various programs and other activities have been summarized on a functional basis. Accordingly, costs have been allocated among the program services and supporting activities benefited.

Subsequent Events

Subsequent events are events or transactions that occur after the statement of financial position date, but before financial statements are available to be issued. Recognized subsequent events are events or transactions that provide additional evidence about conditions that existed at the statement of financial position date, including the estimates inherent in the process of preparing financial statements. Nonrecognized subsequent events are events that provide evidence about conditions that did not exist at the statement of financial position date, but arose after that date. Management has evaluated subsequent events through June 1, 2016, the date the December 31, 2015 financial statements were available for issuance.

NOTE 2. PROPERTY

As of December 31, 2015 and 2014, property consisted of the following:

	<u>2015</u>	<u>2014</u>
Land, buildings and improvements	\$ 430,128	\$ 416,435
Furniture, equipment and machinery	522,213	507,304
Vehicles	<u>249,779</u>	<u>302,466</u>
Total	1,202,120	1,226,205
Less accumulated depreciation	<u>723,696</u>	<u>790,759</u>
Net property	<u>\$ 478,424</u>	<u>\$ 435,446</u>

NOTE 3. ACCOUNTS RECEIVABLE

Accounts receivable are stated at the amount management expects to collect from balances outstanding at year end. Balances that are still outstanding after management has used reasonable collection efforts are written off through a charge to the valuation allowance and a credit to accounts receivable. The allowance for uncollectible accounts was estimated to be zero at December 31, 2015 and 2014. The Agency has no policy for charging interest on overdue accounts.

NOTE 4. PLEDGED ASSETS

As described in Note 5, all assets of the Agency are pledged as collateral under the Agency's demand note payable agreement.

NOTE 5. DEMAND NOTE PAYABLE

The Agency has available a revolving line of credit with a bank in the amount of \$250,000. The note is payable upon demand, but in the absence of demand, is due on November 30, 2016. Interest is stated at the prime rate plus 1% which result in an interest rate of 4.50% and 4.25% at December 31, 2015 and 2014, respectively. The note is collateralized by all the assets of the Agency.

NOTE 6. TEMPORARILY RESTRICTED NET ASSETS

At December 31, 2015 and 2014, the Agency had \$108,595 and \$129,297 in net assets temporarily restricted by donor-imposed use restrictions, respectively.

NOTE 7. LEASE COMMITMENTS

Facilities occupied by the Agency for its community service programs are rented under the terms of various operating leases. For the years ended December 31, 2015 and 2014, the annual lease/rent expense for the leased facilities was \$169,849 and \$163,615, respectively. Certain equipment is leased by the Agency under the terms of various operating leases.

The approximate future minimum lease payments on the above leases are as follows:

<u>Year Ended</u> <u>December 31</u>	<u>Amount</u>
2016	\$ 120,523
2017	34,071
2018	8,730
2019	2,022
2020	<u>204</u>
Total	<u>\$ 165,550</u>

NOTE 8. RETIREMENT PLAN

The Agency maintains a 403(b) Plan and Trust (the Plan) covering substantially all employees. Employee contributions to the Plan are made at predetermined rates elected by employees. Additionally the Agency provides a matching contribution equal to 25% of the first 5% of an employee's contribution. Effective April 1, 2016, the Agency instituted an auto enrollment feature mandating a minimum 1% employee contribution; however employees reserve the right to decline the auto enrollment. Employer matching contributions for the years ended December 31, 2015 and 2014 totaled \$13,047 and \$15,988, respectively.

NOTE 9. CONCENTRATION OF RISK

A large percentage of the Agency's total revenue was received from two contractors, the Federal Government and the State of New Hampshire. It is always considered to be at least reasonably possible that either contractor could be lost in the near term; however, Management feels this risk is of no particular concern at this time.

NOTE 10. CONCENTRATION OF CREDIT RISK

The Agency maintains its cash balances at several financial institutions in New Hampshire. The balances are insured by the Federal Deposit Insurance Corporation up to \$250,000. The Agency maintains an agreement with its primary financial institution to collateralize the balances in excess of \$250,000. At December 31, 2015, the Agency had uninsured cash balances of approximately \$51,000. At December 31, 2014, there were no uninsured cash balances.

NOTE 11. CONTINGENCIES

The Agency receives grant funding from various sources. Under the terms of these agreements, the Agency is required to use the funds within a certain period and for purposes specified by the governing laws and regulations. If expenditures were found not to have been made in compliance with the laws and regulations, the Agency might be required to repay the funds. No provisions have been made for this contingency because specific amounts, if any, have not been determined or assessed as of December 31, 2015 and 2014.

SUPPLEMENTARY INFORMATION

(See Independent Auditors' Report)

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED DECEMBER 31, 2015**

FEDERAL GRANTOR/ PASS-THROUGH GRANTOR/PROGRAM TITLE	FEDERAL CFDA NUMBER	PASS-THROUGH GRANTOR'S NAME	PASS-THROUGH GRANTOR'S NUMBER	FEDERAL EXPENDITURE
<u>U.S. Department of Agriculture</u>				
Child and Adult Care Food Program	10.558	State of New Hampshire Department of Education	4300-ZZZ	\$ 137,773
Summer Food Service Program for Children	10.559	State of New Hampshire Department of Education	4300-ZZZ	61,971
Emergency Food Assistance Program (Food Commodities)	10.569	Belknap-Merrimack Community Action Partnership	Unknown	136,081
Total U.S. Department of Agriculture				<u>\$ 335,825</u>
<u>U.S. Department of Housing and Urban Development</u>				
Supportive Housing for the Elderly	14.157	New Hampshire Housing Authority	Unknown	\$ 24,336
Community Development Block Grants / Entitlement Grants	14.218	City of Dover, New Hampshire	Unknown	4,115
Community Development Block Grants / Entitlement Grants	14.218	City of Rochester, New Hampshire	Unknown	47,878
Emergency Solutions Grant Program	14.231	State of New Hampshire Department of Health and Human Services	102-500731	163,145
Supportive Housing Program	14.235	State of New Hampshire Department of Health and Human Services	010-092-7176-102-0415	43,037
Supportive Housing Program	14.235	Community Partners / Behavioral Health / Services	Unknown	24,643
Total U.S. Department of Housing and Urban Development				<u>\$ 307,154</u>
<u>U.S. Department of Labor</u>				
WIA Cluster				
WIA Adult Program	17.258	Southern New Hampshire Services, Inc.	1018853	\$ 79,376
WIA Dislocated Worker Formula Grants	17.278	Southern New Hampshire Services, Inc.	1018853	73,226
Total U.S. Department of Labor/WIA Cluster				<u>\$ 152,602</u>
<u>U.S. Department of Transportation</u>				
Enhanced Mobility of Seniors and Individuals with Disabilities	20.513	State of New Hampshire Department of Transportation	512-500352	\$ 42,613
Total U.S. Department of Transportation				<u>\$ 42,613</u>
<u>U.S. Department of Energy</u>				
Weatherization Assistance for Low-Income Persons	81.042	State of New Hampshire Governor's Office of Energy & Community Services	01-02-02-024010-7706-074-500587	\$ 159,298
Total U.S. Department of Energy				<u>\$ 159,298</u>
<u>U.S. Department of Education</u>				
Twenty-First Century Community Learning Centers	84.287	State of New Hampshire Department of Education	Unknown	\$ 127,160
Total U.S. Department of Education				<u>\$ 127,160</u>
<u>U.S. Department of Health & Human Services</u>				
Special Programs for the Aging - Title III, Part B - Grants for				
Supportive Services and Senior Centers	93.044	State of New Hampshire Division of Elderly and Adult services	010-048-7872-512-0352	\$ 2,520
Drug-Free Communities Support Program Grants	93.276		N/A	9,900
Affordable Care Act (ACA) Maternal, Infant, and Early		State of New Hampshire Department of Health and Human Services, DPH,		
Childhood Home Visiting Program	93.505	BPHCS, Maternal & Health Section	05-95-90-902010-5896	158,863
Promoting Safe and Stable Families	93.556	State of New Hampshire, DHHS, Division for Children, Youth and Families	102-500734	18,616
Temporary Assistance for Needy Families	93.558	State of New Hampshire, DHHS, Division for Children, Youth and Families	502-500891	32,839
Temporary Assistance for Needy Families	93.558	Southern New Hampshire Services, Inc.	010-045-6146-090-0415, 1024239	134,955
Low-Income Home Energy Assistance	93.568	State of New Hampshire Governor's Office of Energy & Planning	01-02-02-024010-77050000-074-500587	2,027,009
Community Services Block Grant	93.569	State of New Hampshire, DHHS, DFA	010-045-7148-093-0415	439,170
Head Start	93.600		N/A	2,852,689
Stephanie Tubbs Jones Child Welfare Program	93.645	State of New Hampshire, DHHS, Division for Children, Youth and Families	102-500734	737
Social Services Block Grant	93.667	State of New Hampshire, DHHS, Division for Children, Youth and Families	102-500734	69,830
State and Local Public Health Actions to Prevent Obesity,		State of New Hampshire, Keene State College, DHHS, Center for Disease		
Diabetes, Heart Disease and Stroke (PPHF)	93.757	Control & Prevention, NH Division of Public Health Services	Unknown	3,000
Maternal and Child Health Services Block Grant to the States	93.994	State of New Hampshire, DHHS, Division for Children, Youth and Families	102-500731	4,965
Total U.S. Department of Health & Human Services				<u>\$ 5,755,093</u>
TOTAL				<u>\$ 6,879,745</u>

See Notes to Schedule of Expenditures of Federal Awards

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

**NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED DECEMBER 31, 2015**

NOTE 1 BASIS OF PRESENTATION

The accompanying schedule of expenditures of Federal Awards (the Schedule) includes the federal grant activity of Community Action Partnership of Strafford County under programs of the federal government for the year ended December 31, 2015. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of Community Action Partnership of Strafford County, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the Agency.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Pass-through entity identifying numbers are presented where available. Community Action Partnership of Strafford County as elected not to use the ten percent de minimis indirect cost rate allowed under the Uniform Guidance.

NOTE 3 FOOD DONATION

Nonmonetary assistance is reported in the Schedule at the fair value of the commodities received and disbursed.

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

**SCHEDULE OF REVENUES AND EXPENDITURES
FOR THE ELECTRICAL ASSISTANCE PROGRAM
FOR THE YEAR ENDED DECEMBER 31, 2015**

Revenues	\$ 174,932
Expenditures	
Payroll	\$ 95,079
Payroll taxes	8,443
Fringe benefits	15,323
Weatherization material, fuel and client assistance	61
Consumable supplies	2,831
Indirect costs	25,332
Insurance	1,056
Equipment and computer	4,487
Rent	6,156
Utilities	3,985
Consultants and contract labor	513
Repairs and maintenance	9,080
Travel	302
Meetings, events and training	295
Copying & postage	1,817
Retirement	172
	\$ 174,932

Note:

For the year ended December 31, 2015, the Electric Assistance Program, which is funded through the New Hampshire Public Utilities Commission with funds from the utility companies operating in the State of New Hampshire, was tested for compliance with the requirements of laws and regulations applicable to the contract with the Public Utilities Commission. In our opinion, Community Action Partnership of Strafford County complied, in all material respects, with the requirements outlined in the contract for the year ended December 31, 2015.

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

**INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL
REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON
AN AUDIT OF FINANCIAL STATEMENTS PERFORMED
IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS**

To the Board of Directors of
Community Action Partnership of Strafford County
Dover, New Hampshire

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Community Action Partnership of Strafford County (a New Hampshire nonprofit organization), which comprise the statements of financial position as of December 31, 2015 and 2014, and the related statements of cash flows for the years then ended, and the related notes to the financial statements, and the related statements of activities and functional expenses for the year ended December 31, 2015 and have issued our report thereon dated June 1, 2016.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered Community Action Partnership of Strafford County's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Community Action Partnership of Strafford County's internal control. Accordingly, we do not express an opinion on the effectiveness of Community Action Partnership of Strafford County's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether Community Action Partnership of Strafford County's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

*Leone, McDonnell & Roberts,
Professional Association*

June 1, 2016
Wolfeboro, New Hampshire

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

**INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR
EACH MAJOR PROGRAM AND ON INTERNAL CONTROL
OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE**

To the Board of Directors of
Community Action Partnership of Strafford County
Dover, New Hampshire

Report on Compliance for Each Major Federal Program

We have audited Community Action Partnership of Strafford County's compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of Community Action Partnership of Strafford County's major federal programs for the year ended December 31, 2015. Community Action Partnership of Strafford County's major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

Auditors' Responsibility

Our responsibility is to express an opinion on compliance for each of Community Action Partnership of Strafford County's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about Community Action Partnership of Strafford County's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of Community Action Partnership of Strafford County's compliance.

Opinion on Each Major Federal Program

In our opinion, Community Action Partnership of Strafford County complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended December 31, 2015.

Report on Internal Control Over Compliance

Management of Community Action Partnership of Strafford County is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered Community Action Partnership of Strafford County's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of Community Action Partnership of Strafford County's internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

June 1, 2016
Wolfeboro, New Hampshire

*Leone, McDonnell & Roberts,
Professional Association*

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

SCHEDULE OF FINDINGS AND QUESTIONED COSTS
FOR THE YEAR ENDED DECEMBER 31, 2015

A. SUMMARY OF AUDITORS' RESULTS

1. The auditors' report expresses an unmodified opinion on whether the financial statements of Community Action Partnership of Strafford County were prepared in accordance with Generally Accepted Accounting Principles.
2. No significant deficiencies disclosed during the audit of the financial statements are reported in the *Independent Auditors' Report on Internal Control over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with Government Auditing Standards*. No material weaknesses are reported.
3. No instances of noncompliance material to the financial statements of Community Action Partnership of Strafford County, which would be required to be reported in accordance with *Government Auditing Standards*, were disclosed during the audit.
4. No significant deficiencies in internal control over major federal award programs are reported in the *Independent Auditors' Report on Compliance for Each Major Program and on Internal Control Over Compliance Required by the Uniform Guidance*. No material weaknesses are reported.
5. The auditors' report on compliance for the major federal award programs for Community Action Partnership of Strafford County expresses an unmodified opinion on all major programs.
6. There were no audit findings that are required to be reported in accordance with 2 CFR section 200.516(a).
7. The program tested as major was: Department of Health and Human Services, Head Start, CFDA 93.600.
8. The threshold used for distinguishing Type A and B programs was \$750,000.
9. Community Action Partnership of Strafford County was determined to be a low-risk auditee.

B. FINDINGS – FINANCIAL STATEMENTS AUDIT

None

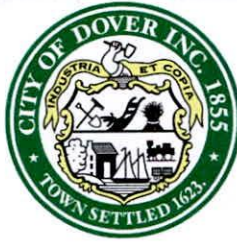
C. FINDINGS AND QUESTIONED COSTS – MAJOR FEDERAL AWARD PROGRAMS AUDIT

None

COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY

**SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS
FOR THE YEAR ENDED DECEMBER 31, 2014**

There were no findings or questioned costs that were required to be reported in the Schedule of Findings and Questioned Costs for the year ended December 31, 2014.



CDBG APPLICATION

CITY OF DOVER, NH COMMUNITY DEVELOPMENT BLOCK GRANT FY2018

APPLICANT INFORMATION	
Organization Annie E Woodman Institute, dba Woodman Museum	Tax ID 02-0223356
Name of Program ADA Accessibility Improvements to Woodman Hale and Garrison buildings	
Name of Executive Director Elizabeth R. Fischer	
Mailing Address PO Box 1916	
Physical Address 182 Central Ave Dover, NH 03820	
Contact Person Elizabeth R. Fischer	Phone Office 603-742-1038; Cell 603-970-0227
E-Mail director@woodmanmuseum.org	Website www.woodmanmuseum.org
Please Identify the Type of Organization Applying for Funds (Note: More than one may apply)	
☒ 501(c)(3)	☐ For-profit authorized under 570.201(o) ☐ Unit of Government
☐ Faith-based Organization	☐ Institution of Higher Education
☐ Other (Explain):	
Tax ID # 02-0223356	
*DUNS # 171674245	*SAM Expiration 11/11/17

* *Important notice regarding new mandatory federal reporting requirements:* The Federal Funding Accountability and Transparency Act requires sub-recipients receiving federal funds to register with Dunn and Bradstreet to obtain a DUNS number and complete or renew their registration in the System for Award Management (SAM). For information on how to obtain a DUNS number and register in SAM please visit <https://fedgov.dnb.com/webform> and <https://www.sam.gov/portal/SAM/##11>. Completing these registration processes is free, but may take up to 15 days to complete. The city will not commit funds without this information.

ACTIVITY or PROJECT INFORMATION

ACTIVITY OR PROJECT INFORMATION
Amount of Dover CDBG funds requested for activity/project: 65,241
Provide a <u>very brief</u> summary of the activity or project for which the funds are requested. Keep responses to one or two sentences (i.e. After School Care for K-4 th grade students. Repair of homeless shelter roof. Etc.) ADA designed barrier removal, ramp construction, bathroom renovation wheelchair access improvements through building interiors.
Identify the Dover Consolidated Plan "Specific Objective" that will be met by the proposed activity/project (see page 3 of CDBG Application: Overview & Scoring: Goal and Objectives) Specific Objective: Removal of architectural barriers to allow increased handicapped accessibility. Specific Objective: To provide increased opportunities to residents of the City who require education, health, recreation . . . and related human services.

PROJECT LOCATION
Location(s) where services will be provided or physical improvements will be made. Hale House, 180 Central Ave Dover, NH 03820; Dame Garrison Structure behind Hale House on property; Woodman House, 182 Central Avenue, Dover, NH.

PROPOSED SCHEDULE OF PROJECT IMPLEMENTATION – PUBLIC FACILITIES ONLY (Construction Projects/Physical Improvements)	
For this section please identify the major tasks and dates that they will be achieved.	
TASK	DATE
Bathroom renovation to ADA standards, Woodman House	Winter 2017
Access ramp to Woodman House rear door near bathroom	Summer 2017
Access ramp to Dame Garrison new side door	Summer 2017
Access ramp to Hale House rear door	Summer 2017
Paved walkways to access new ramps Garrison, Woodman, and Hale Houses	Summer 2017
Removal & re-installation of exhibits in Woodman and Hale Houses and Garrison Pavilion for ADA access and circulation	Winter 2017

BENEFICIARIES
Beneficiaries: For FY2018 (7/1/17 – 6/30/18) please provide the <i>estimated</i> number of unduplicated Dover beneficiaries that will benefit from this CDBG funded activity or project, not necessarily your entire client population (Note: these numbers will be monitored during the funding year): 5,000 For FY2016 (7/1/15 – 6/30/16) please provide the number of unduplicated Dover beneficiaries that benefited from this activity or program, not necessarily your entire client population: 3600 Were Dover CDBG funds used to fund this activity or program in FY2017 (7/1/16 – 6/30/17): The Woodman was awarded CDBG funds to begin the renovation process. If so, how much? \$45,000

Beneficiary type: ☒ Elderly ☒ Family ☒ Disabled ☐ Homeless ☒ Persons living with AIDS
☐ Other (specify):

ACTIVITY/PROJECT NARRATIVE

Please provide a detailed description for the proposed activity/project. (*note: not the organization*) This section should describe the use of funds and explain why the funds are needed. Please relate how the CDBG funds will ultimately benefit Dover low-moderate income individuals. The Woodman Museum proposes to amend the project that was approved by the Dover Planning Committee and City Council last year to more fully address and satisfy the proposal's goals. In modifying the project as originally proposed, we dug deeper, thought smarter and planned better. For instance, we have deferred plans for the Keefe House for the time being. With this change, and with augmented funds this year, will be able to address much more fully the aspirations that we verbalized and described a year ago, only more efficiently; to wit, address the access issues that a campus comprised of 100-year-old-plus houses presents. Some of this will be implemented through physical changes to the houses and campus.

Once the projects are complete, all residents of Dover, including low-to-moderate income individuals, will benefit greatly from exposure to our shared material culture and history, whether they visit on the museum's 'Dover Free Days' or on other occasions such as exhibit openings, school trips, or other programmed opportunities. Studies demonstrate, as the Children's Museum of New Hampshire and other museums have shown, that cultural context can be a behavior modifier if we make ourselves relevant to groups such as low-moderate income families, physically- and mentally-challenged individuals, Alzheimer patients and their families, and other under-served populations. Our physical setting, our volunteer docents, and our anticipated technology innovations can all be put in the service of underserved and/or marginalized individuals and families as well as the general public.

Please indicate who prepared the overall cost estimate for the activity or project. Cost estimates have been prepared by qualified individuals: architects, engineers, developers, and other professionals in the appropriate field, and museum staff and volunteers.

For this application, written quotes are required for proposed purchase of items exceeding \$3,000.00 or for physical improvements (i.e. building expansion, new roof, replacement of windows, etc.). Please attach quotes you have obtained.

PERFORMANCE OUTCOME MEASURES

Provide the outcomes proposed and the method of measurement. You may list multiple outcomes.

Outcome	Measurement
Ex. Decrease in number of "latch-key kids" Ex. Decreased dependence on emergency care facilities for non-emergency care of low/mod adults	Ex. # of children who participate in afterschool program Ex. Increase in number of low/mod income residents that seek care from health program.
A fully ADA-compliant bathroom in our busiest House (Woodman). Full access to the first floor of the Woodman House, the Hale House, and the Pavilion platform on which the 1675 Garrison House sits.	Number of visitors who visit newly created access to facilities and exhibits.

ORGANIZATION

DESCRIPTION OF ORGANIZATION

Please provide a description for the Organization that is undertaking the activity/project. The Woodman Institute Museum was founded in 1916 by a Trust set up by Annie E Woodman to "Engage minds. Ignite curiosity. Provoke thought. Educate, excite and

inspire current and future generations about Dover, New Hampshire's role in a changing nation by preserving and exhibiting objects of historic significance, decorative and fine art, and natural science that connect Dover and its citizens to local, national, and world events."

The programs which will use the improvements are all of the visitor and outreach programs of the Museum. There are several thousand persons who visit the grounds each year (this year's attendance figures may well top 5,000 – compared to last year's 3,600) to visit the displays and/or attend special programs for veterans, antique car lovers, history buffs, art enthusiasts, decorative arts and natural science visitors. In addition, school groups from the surrounding communities routinely visit the museum as part of their history curricula; for instance, the Woodman hosts visits from every third-grader in Dover schools. Additionally, we are in our second year of an interdisciplinary middle school project relating history, language arts, and art. All of these groups have the potential for including individuals with access limitations.

AUDIT AND EVALUATION

Does your organization have an annual CPA Audit? no

If yes, please submit most recent Audit.

Is your organization evaluated by outside agencies or programs? yes

If yes, please note the agency/program and how often the evaluation occurs. The Museum was created by a Trust from Annie E Woodman. The Probate Court of Strafford County still administers the Trust and annually oversees and approves all major decisions of the Board.

BOARD OF DIRECTORS

Name	Residence (city/town)
David Dupont, Chair	Dover
Dennis Ciotti	Dover
Donna Ciotti	Dover
Anthony McManus	Dover
Grover Tasker	Dover
David Landry	Dover
Mark Leno	Dover

BUDGET

Use box A or B below to provide a budget for the proposed *Public Service (A.)* or *Public Facility (B.)*. Include all proposed expenses.

A. Public Services (Non-Construction Projects)			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Office Supplies			0
Utilities	n/a		n/a
Repairs/Maintenance	n/a		n/a
Travel	n/a		n/a
Salaries (List relevant positions)			
	n/a		n/a
Other:			
TOTAL PROPOSED BUDGET:			

B. Public Facilities: Construction Projects/Physical Improvements			
	A	B	A + B
	Dover CDBG Funds Requested	Other Funding	Total Proposed Budget
Hard Costs Note: Federal wage rates may apply for some construction projects. Applicants are encouraged to obtain estimates that reflect wage rates estimates.			
See attached Excel Spreadsheet			

Federal:	n/a		Committed Pending Proposed	
State:	n/a		Committed Pending Proposed	
Local:	n/a		Committed Pending Proposed	
Private:	n/a		Committed Pending Proposed	
Portsmouth CDBG:	n/a		Committed Pending Proposed	
Rochester CDBG:	n/a		Committed Pending Proposed	
Other:	n/a		Committed Pending Proposed	
Total:	n/a		Committed Pending Proposed	

Organizational Commitment: For Public Facility Projects (building addition, new roof, replacement windows, etc.) – indicate the amount of funds that the organization will be contributing to the project.

Funding Source: (Name of Parent Organization)	Total Amount (\$) to be Contributed by Parent Organization	Committed or Proposed Amount (\$)	
Woodman Museum	7573	Committed Proposed	7573
Total:	7573		7573

AGENCY BUDGET

Please provide a breakdown of your organization's overall annual budget. Please indicate the dates of your budget period, i.e. July 1 to June 30 or January 1 to December 31.

Budget Period: from January 1 to December 31		Current Year 2016	Next Year (projected) 2017
REVENUES			
Federal Funds			
State Funds			
Foundations/Private Contributions			
United Way			
Fundraising or other income		117533	95514
Other (describe) Trust Income		85000	75000
Community Dev. Block Grant (include anticipated request)		45000	65241
TOTAL REVENUE		247533	235755
EXPENSES			
Salaries		125,617	97120
Fringe Benefits			
Supplies (include printing/copying)		2700	2471
Travel		525	500
Training			
Communications		3000	2508
Audit			
Property Maintenance		25000	26063
Service Contracts		15000	16713
Construction Supplies/Materials			
Other (describe) Professional Exp/Accountant, Gift Shop Inventory. Artifact Display & Pres., Special Events/Programs, Non-personnel expense, Other Exp/Insurance		63347	43940
TOTAL EXPENSES		235189	189315
NET (Income - Expenses)		12344	46440

By signing below, the Authorized Official affirms: The organization's commitment to implement the proposed activity/project; that all information presented is true and accurate to the best of their knowledge; and he/she is authorized to submit this application;

Submitted by:



Authorized Official - signature

11/15/2016

Date

David P. Dupont

Print Name

Head Trustee

Print Title

Woodman Museum ADA project Task list and cost estimates

rev 12 27 2016

Woodman Expense

Woodman Building

Bath	Dave Haney	6750		
Railings	Custom Welding	2537		
Ramp & site work into back left door	Gary Lloyd	13826		
Footings/ frost wall	Walter	2000		
Door installation M&L	Dave Haney	850		
Door with glass & swing clear hinges	Middleton Lumber	849		
Thresholds	Dave Haney	500		
Replace glass on display cases	PE Glass			1441
Prep area, move cases, dismantle and reassemble exhibits, demo etc.	Staff			2500
Dumpster	Waste mgmt			632
Paddles & door closers	Door control	1515		
electrician labor	Roland Cyr	1280		
Paving	RCH Paving	4000		
Landscaping	TBD			500
M&L Total		34107		
Clerk of the Works		10%	3410	
Contingency		15%		

Total Woodman

37517 37517

Garrison

Ramp & site work into side door	Gary Lloyd	4000		
Fabricate & install door M&L	Randy Smith	5000		
landscaping	TBD	500		
Paddles & door closers	Door control	1515		
electrician labor	Roland Cyr	1920		
Paving	RCH Paving	4000		
Prep area, move cases, dismantle and reassemble exhibits, demo etc.	Staff			2500
M&L Total		16935		
Contingency		15%		
Clerk of the Works		10%	1693	
Total Garrison		18628		18628

Hale House

Railings	Custom Welding	8225		
Paving	RCH Paving	4000		
ramp & site work into rear door	Gary Lloyd	4927		
Moving interior cases for circulation	Staff			2500
landscaping	TBD			500
Paddles & door closers	Door control	1515		
Install door M&L		850		
Door with glass & swing clear hinges		849		
Footings/ frost wall	Walter	1500		
Electrician labor	Roland Cyr	1280		
M&L Total		23146		
Clerk of the Works		10%	2314	

Total Hale House

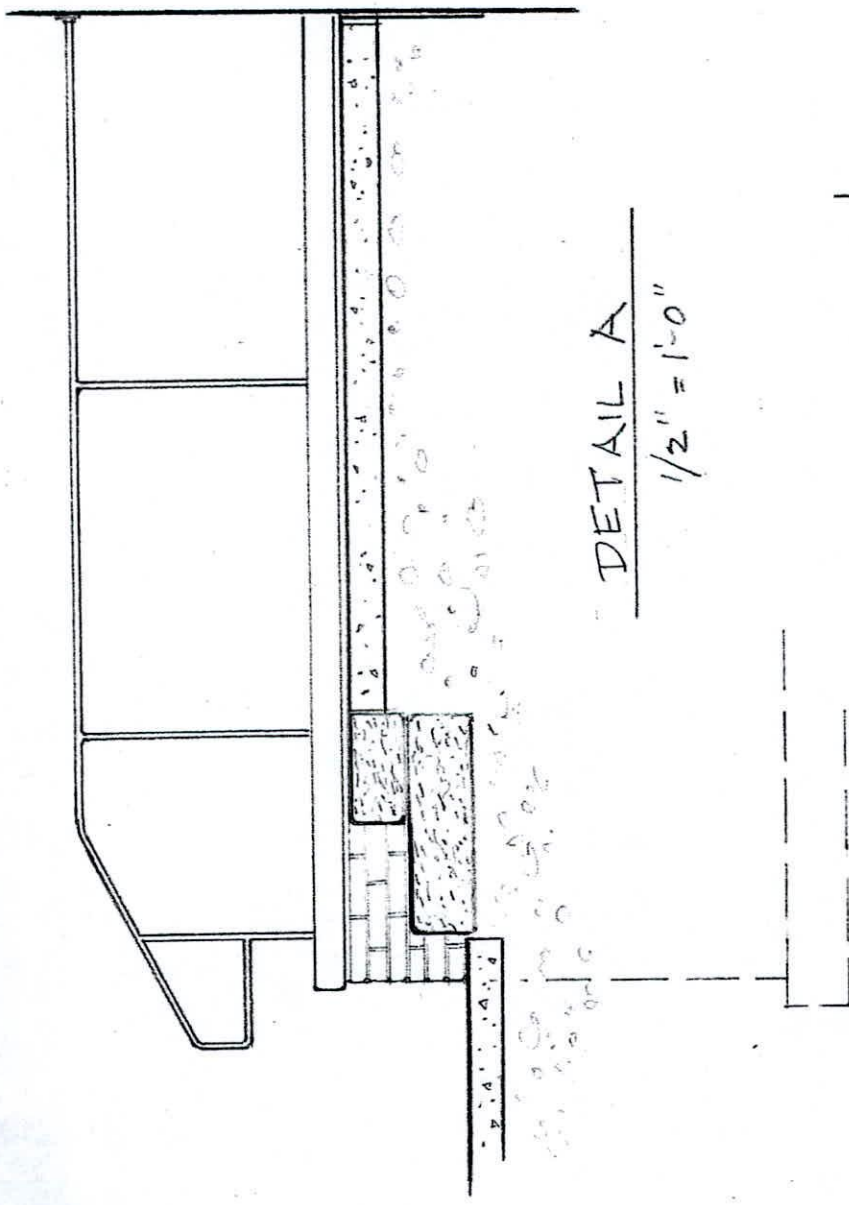
25460 25460 \$7,573

General

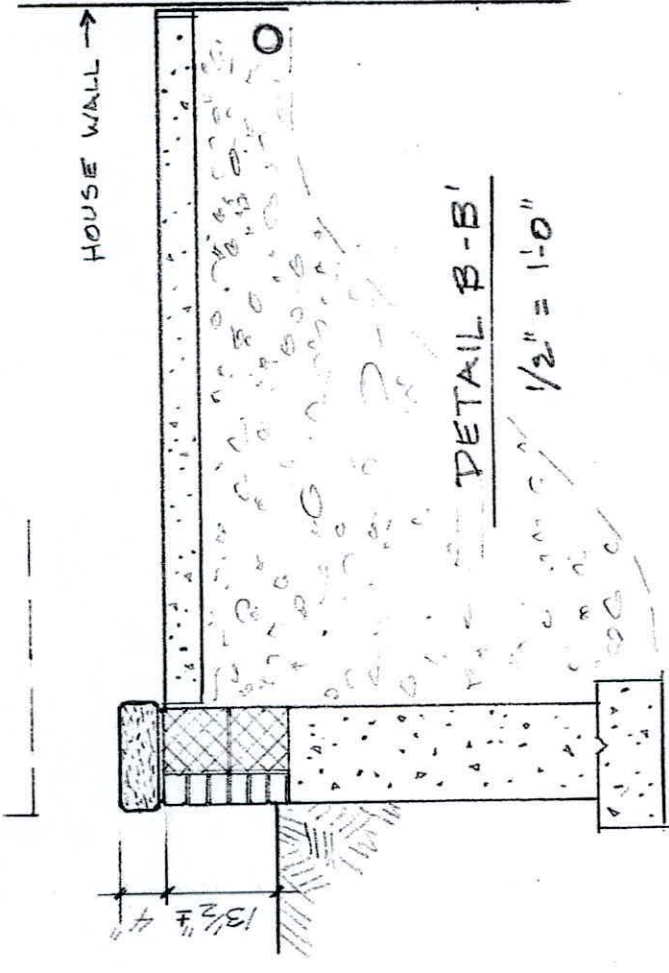
Design/Engineering	Walter Rous	7820		81605
Technical Assistance to comply with Historic	Various			7820
Register issues	consultants	2000		2000
Permits		1000		1000
		92425		92425
	Woodman Contribution			92425
	Total Project Cost			92425
	2016 CDBG			-\$45,000
	2018 CDBG request			47425



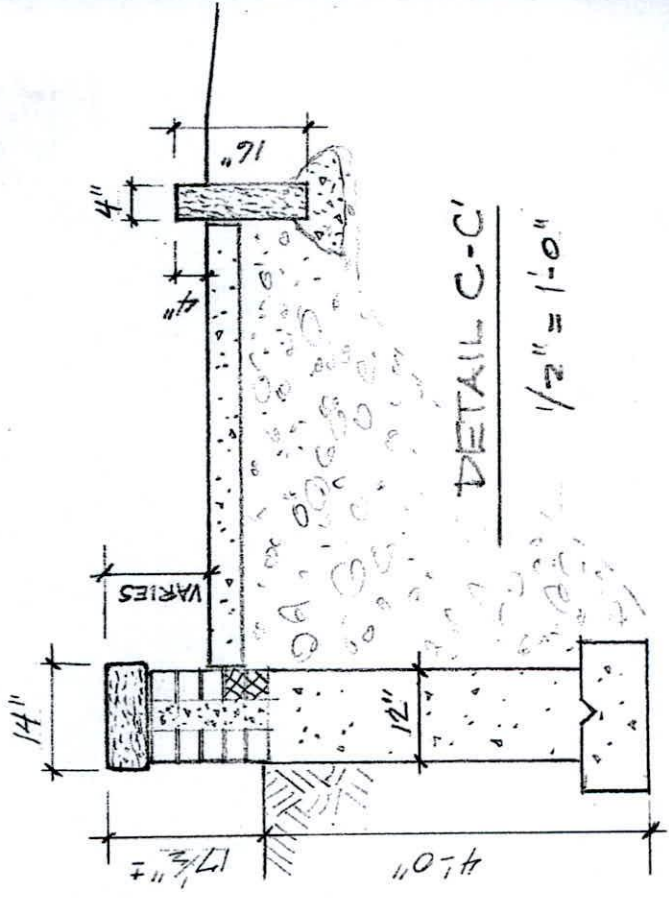
ADA ACCESS - WOODMAN



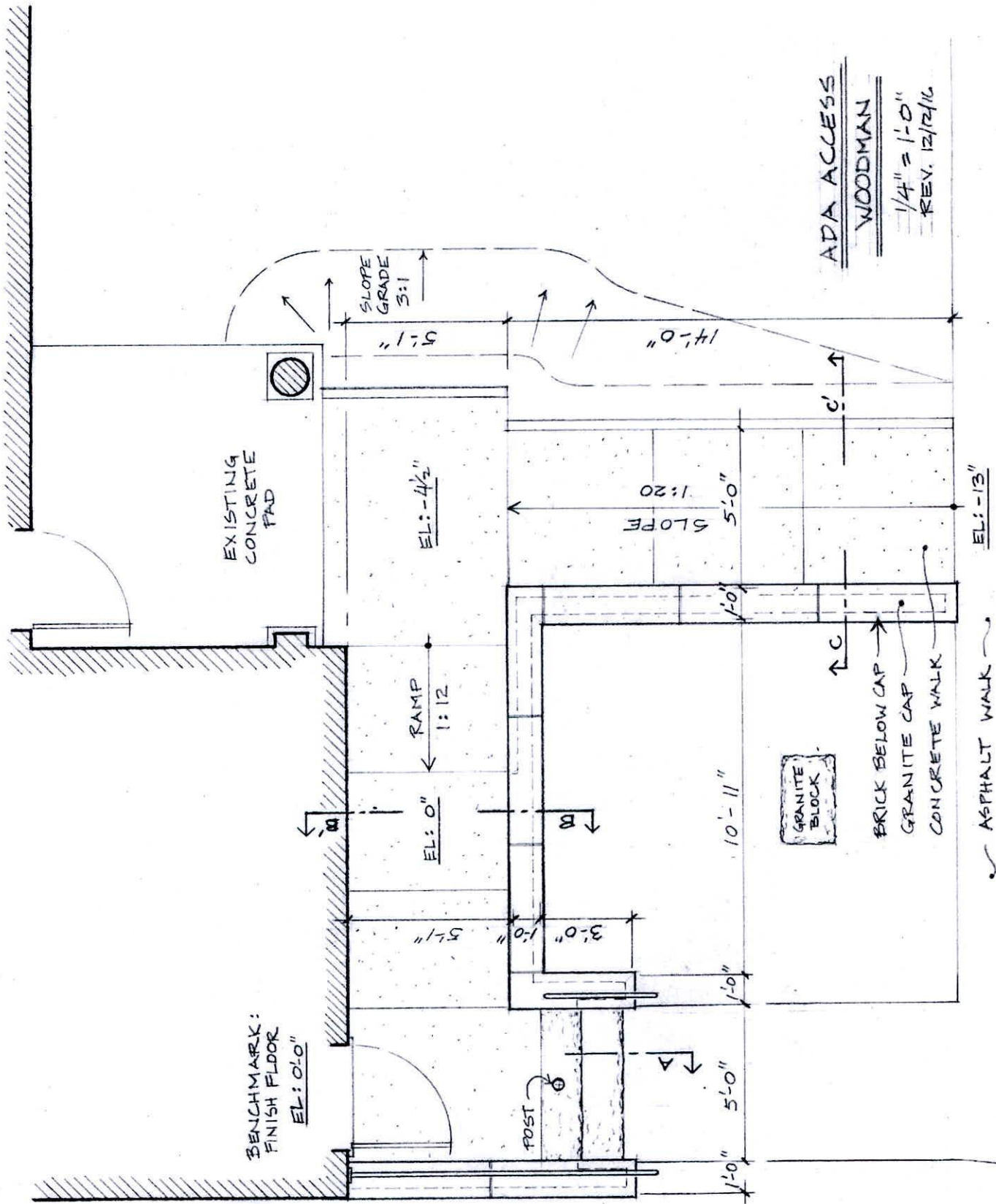
DETAIL A
1/2" = 1'-0"



DETAIL B-B'
1/2" = 1'-0"



DETAIL C-C'
1/2" = 1'-0"

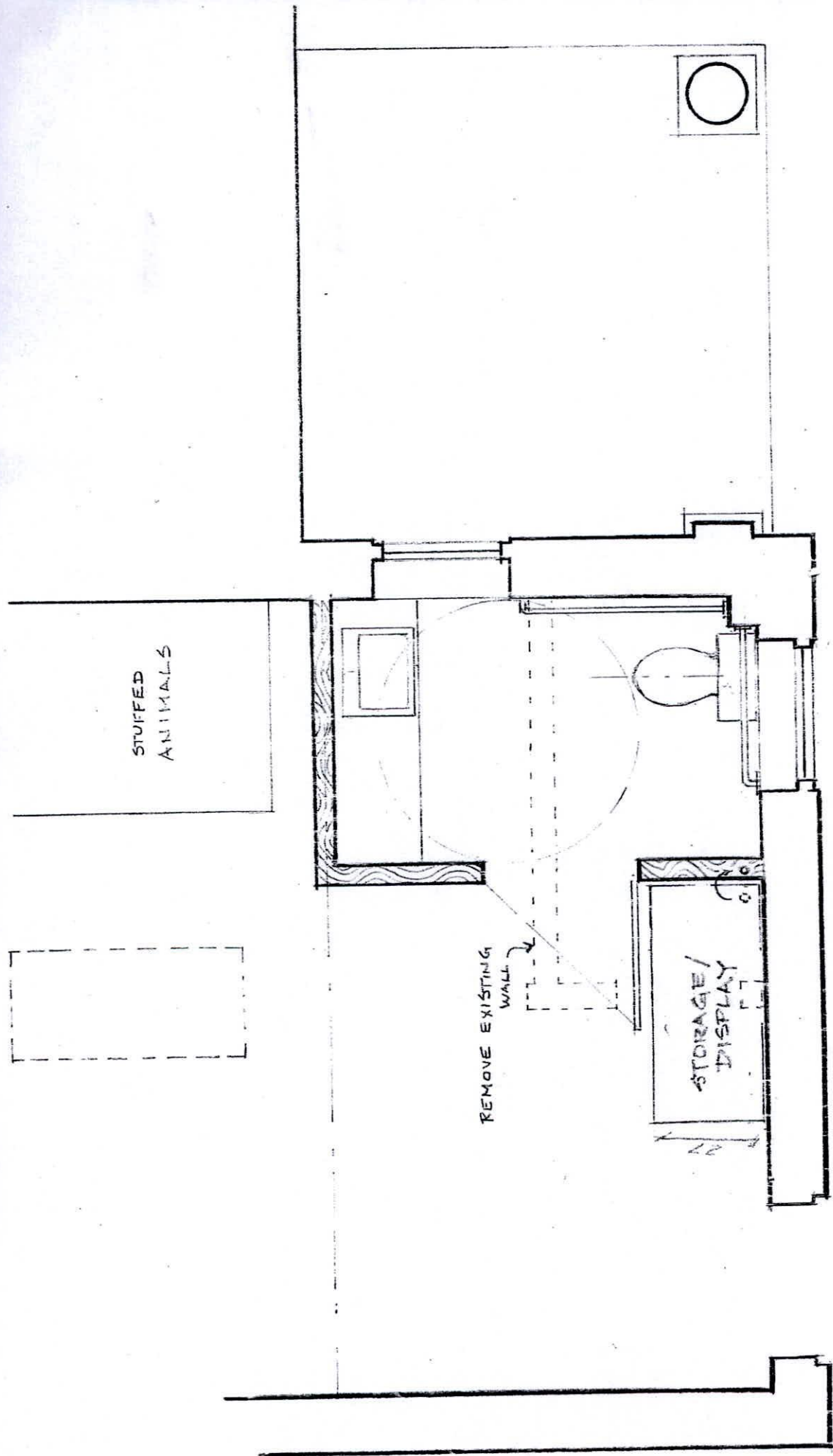


ADA ACCESS

WOODMAN

1/4" = 1'-0"

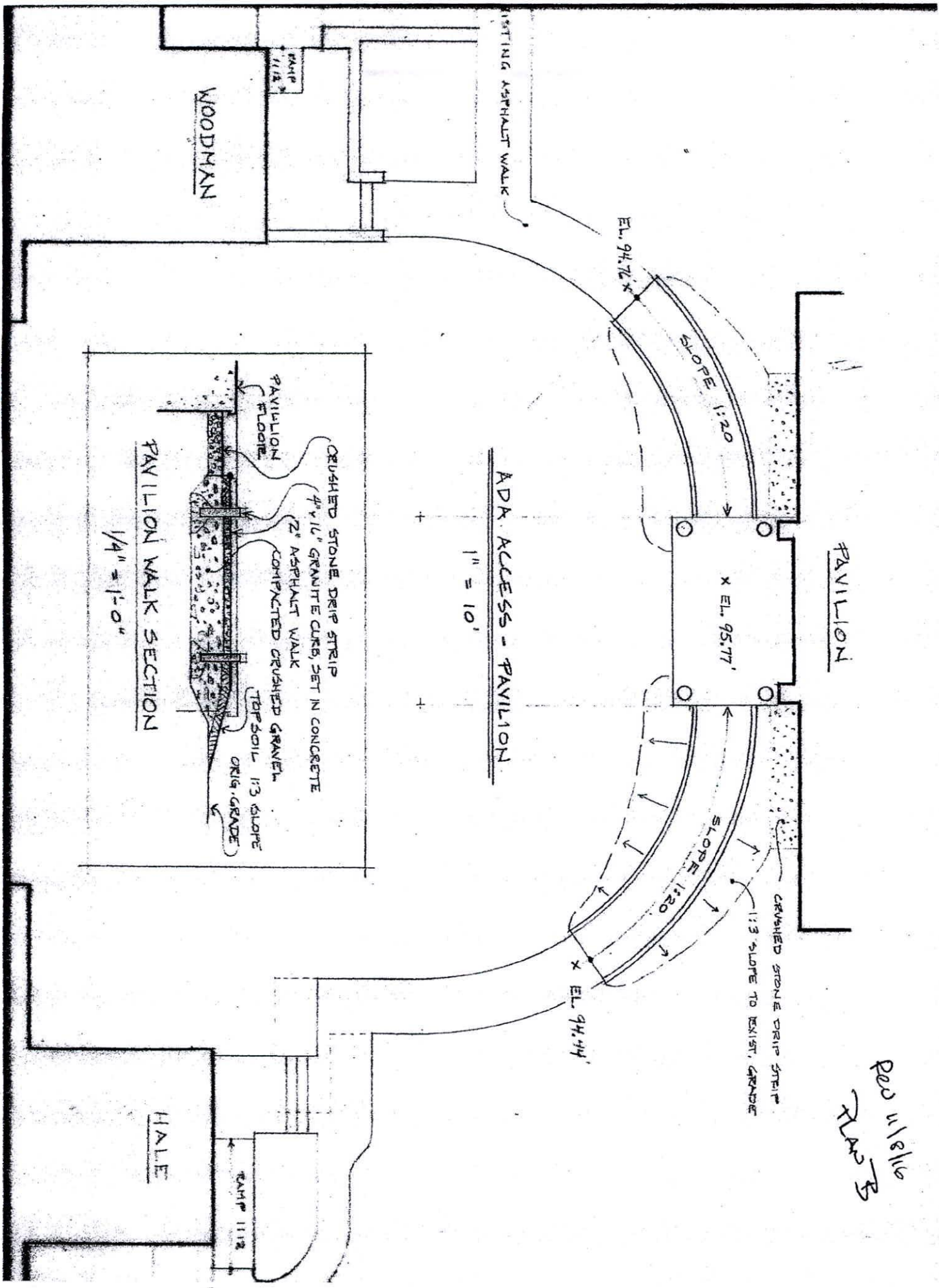
REV. 12/2/16



WOODMAN ACCESSIBLE BATH

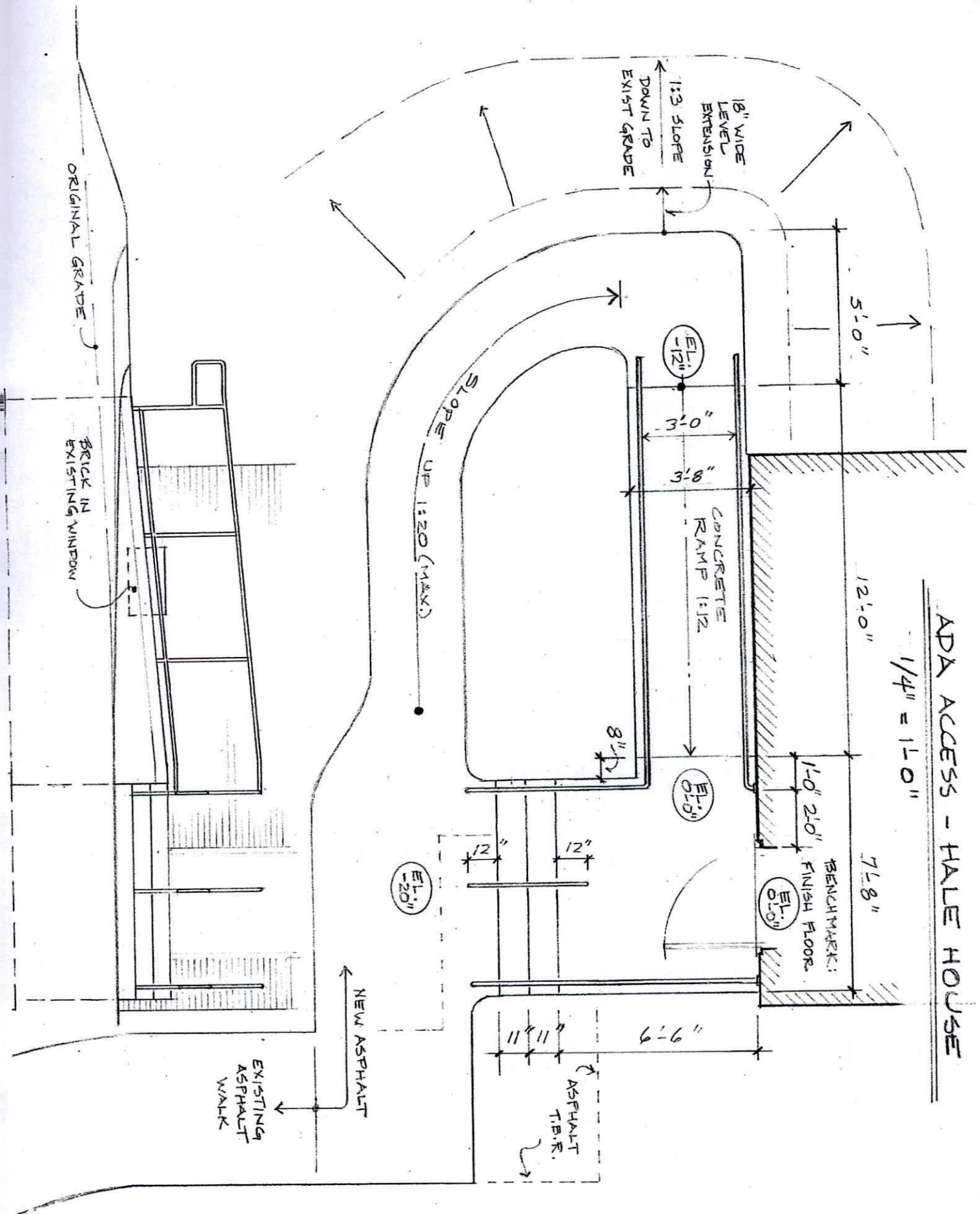
$\frac{3}{8}'' = 1'-0''$

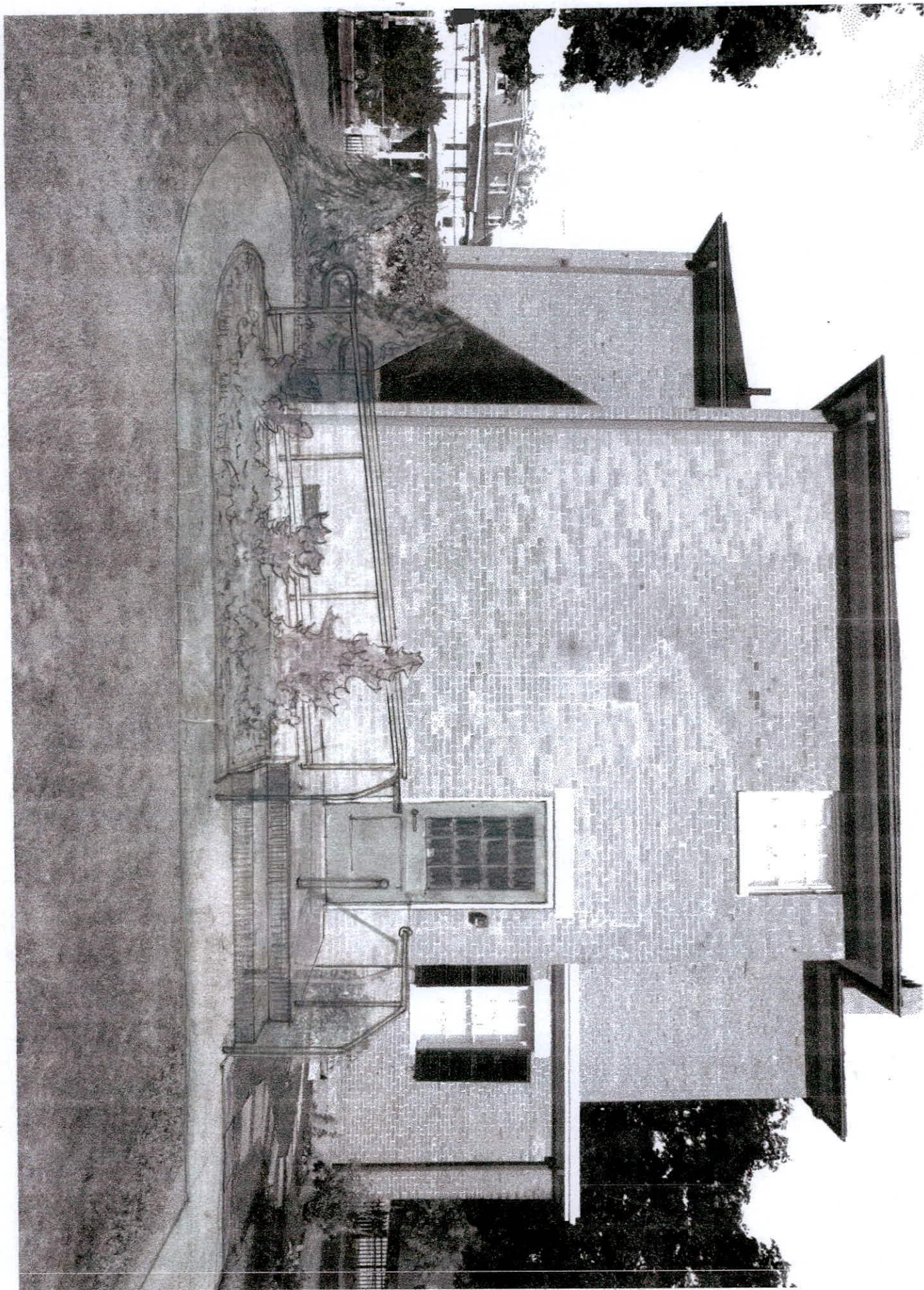
Rev 11/8/16
RMB



ADA ACCESS - HALE HOUSE

1/4" = 1'-0"





Serving NH Since 1988

RCH Pavement Maintenance

"A leader in progressive pavement maintenance"

CRACK SEALING

Sealcoating • Line Striping • Asphalt Patchwork
Commercial Paving • Catch Basin Repair

(603) 742-0053

(800) 698-0059 NH

(603) 231-3752 Cell

(603) 742-0065 Fax

Richard Hiltunen

P.O. Box 554
Dover, NH 03820

300 ft
4' / 10

1200 sq ft

Estimate

\$ 12,000

11/12/10



Elizabeth Fischer

From: wmonline@wm.com
Sent: Monday, November 14, 2016 8:32 AM
To: Elizabeth_Fischer@comcast.net
Subject: Business Quote Request Confirmation for construction-and-demolition-debris-collection-and-recycling Dover,NH



*Diane @ WM
908-549-5689*

WM.com | My Account | Customer Service

THINK GREEN.™

Please think about the environment before you print this email.



Hello Elizabeth,

Thank you for requesting a quote for construction-and-demolition-debris-collection-and-recycling. The details of your request are listed below.

Service Request Details
Date submitted 11/14/2016 07:32
Confirmation # 1705731

Contact Information

Service Information

Name Elizabeth Fischer

Service address 182 Central Ave

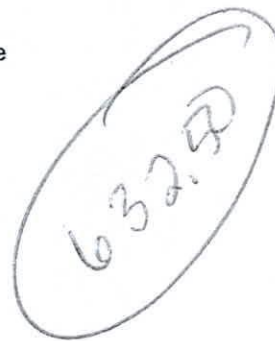
Company Name Woodman Museum

City and state Dover,NH

Day phone (603)817-1843

ZIP code 03820

Email address Elizabeth_Fischer@comcast.net
Comments



30 yard / month

\$ 75 delivery

\$ 475/haul

5 ton

over 5 ton

\$2/ton

Fuel charge 15%



DOOR CONTROL, INC.
8 Delta Drive, Unit D
Londonderry, NH 03053
Tel (800) 258-9742 Fax (800) 594-8352
Web Site: www.doorcontrolne.com



Proposal Submitted To:

11/11/16

Contact: Beth Fischer
Customer: Woodman Museum
186 Central Ave.
PO Box 1916
Dover, NH 03821

Phone: 603-817-1843
Job Name: Woodman Museum HC Upgrade
Location: 186 Central Ave.
City: Dover, NH 03820
Fax/ Email: **elizabeth_fischer@comcast.net**

We hereby submit specifications and estimates for:

QUOTE # MB216556

- 3 Horton 7100 series surface mount low energy swing door operators furnished and installed on swing doors provided by others
- 3 MC-25 Interface for electric strikes provided by others
- 6 BEA PBS451 Press wall switch (hard wired)

Finish: Clear or Dark Bronze Anodized

NOTES:

EXCLUSIONS: Electrical Wiring,

Other:

We Propose hereby to furnish material and labor- complete in accordance with above specifications, for the sum of: **\$4,544.00**

Four Thousand Five Hundred Forty Four Dollars and No Cents

Payment to be made as follows:

UPON COMPLETION

Sales Tax: **N/A**

Net 30 days for materials stored in warehouse or delivered to job site and / or labor performed. Interest will be charged at 1 1/2% per month on all past due invoices. All legal and collection fees incurred for the collection of this contract will be paid by customer

All material is guaranteed to be as specified. All work is guaranteed to be as specified.

Work is guaranteed to be as specified. All work is guaranteed to be as specified.

Authorized

Signature:

Mark Bickmore

Mark Bickmore/ SALES
mbickmore@doorcontrolne.com

Note: This proposal may be withdrawn by us if not accepted within 30 days.



Door Control, Inc.

8 Delta Drive • Unit D • Londonderry, NH 03053

Mark Bickmore
Sales

Email: mbickmore@doorcontrolne.com • www.doorcontrolne.com

Phone: 800-258-9742 x112 • Fax: 800-594-8352
Cell: 207-754-1159

Rochester Office: 603-822-1001



ifications and
thorized to do

Signature: _____

Title: _____

Date: _____

PROPOSAL

FROM: ROLAND J. CYR
RJC ELECTRICAL SERVICES LLC.
PO BOX 451
BERWICK, ME 03901

DATE: 11-7-16

PROPOSAL SUBMITTED TO: ELIZABETH FISCHER
RE: WOODMAN INSTITUTE MUSEUM HANDICAP DOOR OPENERS

WE HEREBY PROPOSE TO FURNISH ALL THE MATERIAL AND PROVIDE THE LABOR NECESSARY FOR THE COMPLETION OF : INSTALLING 3 HANDICAPP DOOR OPENERS AND HANDICAP SWITCHES FOR THE HALE HOUSE, GARRISON CABIN ENCLOSURE AND THE MAIN WOODMAN INSTITUTE MUSEUM.

1. JAM MOUNT ELECTRIC DOOR OPENERS WITH A PAIR OF HANDICAPP ENSCRIBED PUSH BUTTON SWITCHES FOR EACH BUILDING, WITH THE OUTSIDE SWITCH BEING A WEATHER RATED SWITCH ENCLOSURE. COST OF OPENERS \$2800.00 EACH- \$ 8,400.00
2. MATERIAL AND LABOR AS FOLLOWS:
 - A. WOODMAN BUILDING ESTIMATED MATERIAL \$100.00, LABOR \$ 1,280.00
 - B. HALE HOUSE ESTIMATED MATERIAL \$100.00 LABOR \$ 1,280.00
 - C. GARRISON CABIN ESTIMATED MATERIAL \$ 260.00 LABOR \$ 1,920.00 ✓
 - D. MISC EXPENDITURES PERMITS AND SHIPPING \$ 160.00

*** NOTE: BEFORE ORDER IS PLACED, WILL NEED MORE INFORMATION ON DIRECTION OF DOOR OPENING

*** NOTE: DOOR ENCLOSURE IN GARRISON HOUSE WILL NEED BOX FOR WEATHER PROTECTION.

ALL MATERIAL IS GUARANTEED TO BE AS SPECIFIED, AND THE ABOVE WORK TO BE PERFORMED IN ACCORDANCE WITH THE NATIONAL ELECTRICAL CODE 2014. AND COMPLETED IN A SUBSTANTIAL WORKMANLIKE MANNER FOR THE SUM OF :

THIRTEEN THOUSAND FIVE HUNDRED (\$ 13,500.00) DOLLARS

WITH PAYMENT AS FOLLOWS: ONE HALF (1 / 2) TO START, WITH FINAL PAYMENT, 30 DAYS UPON COMPLETION.

ANY ALTERATIONS OR DEVIATIONS FROM ABOVE SPECIFICATIONS INVOLVING EXTRA COSTS, WILL EXECUTED ONLY UPON WRITTEN ORDERS, AND WILL BE BECOME AN EXTRA CHARGE OVER AND ABOVE THE ESTIMATE. ALL AGREEMENTS CONTINGENT UPON STRIKES, ACCIDENTS, OR DELAYS BEYOND OUR CONTROL. OWNER TO CARRY FIRE, TORNADO, FLOOD, AND NECESSARY INSURANCE UPON ABOVE WORK. PUBLIC LIABILITY INSURANCE ON ABOVE WORK TO BE TAKEN OUT BY: RJC ELECTRICAL SERVICES LLC..

RESPECTFULLY SUBMITTED
ROLAND J. CYR
PER RJC ELECTRICAL SERVICES LLC

NOTE: THIS PROPOSAL MAY BE WITHDRAWN BY US IF NOT ACCEPTED WITHIN 30 DAYS!
2 % FINANCE CHARGE PER MONTH ON UNPAID BALANCES EXCEEDING 30 DAYS

GARY Lloyd & Son
MASON CONTRACTOR
743-6944

Contractors Invoice

WORK PERFORMED AT:

TO:

Woodman Museum
Dover N.H.

DATE

YOUR WORK ORDER NO.

OUR BID NO.

DESCRIPTION OF WORK PERFORMED

Hall House

Remove concrete step & Soil
Replace with CRUSHED GRAVEL
Pour Concrete steps with Ramp Down side
with wire mesh 6x6x10 4000lb Concrete 4927.00

Pavilion

Remove concrete steps Both sides
Replace with CRUSHED GRAVEL
GRAND CURB both sides of walkway 4x16x?
Pour concrete walk with wire mesh 6x6x10
4000lb concrete Remove all hot top 10830.00

Side entry
Ramp
4000

MAIN ENTRANCE

Remove concrete steps & Soil Replace with CRUSHED
GRAVEL BRICK WALKER with gravel cap
step on north side with Ramp South side
with GRAND CURB on Right Side
Concrete 4000lb with wire mesh 6x6x10 13,826

Total 29,583.00

All Material is guaranteed to be as specified, and the above work was performed in accordance with the drawings and specifications provided for the
above work and was completed in a substantial workmanlike manner for the agreed sum of _____

Dollars (\$ _____).

This is a ☐ Partial ☐ Full invoice due and payable by: _____ Month _____ Day _____ Year _____

in accordance with our ☐ Agreement ☐ Proposal No. _____ Dated _____ Month _____ Day _____ Year _____ 11-12

P.E. GLASS
497 Portland Avenue
ROLLINSFORD, NH 03869-5907

(603) 742-1261

INVOICE NO.	INVOICE DATE
Quote	11/2/16

SOLD TO: Beth Fischer
Woodman Institute

estimate

PURCHASE ORDER NUMBER	DATE ORDERED	PAYMENT DATE	SALESPERSON
TERMS		NOTES	

REFERENCE	DESCRIPTION	AMOUNT
3 1	1/4" tempered glass with wood frames Apprx. 38" x 72" 36" x 36"	

MESSAGE:

*Replace glass lower level display
Woodman House*

SUBTOTAL
SALES TAX

SHIPPING

TOTAL

\$1,441.00

Middleton Building Supply, Inc.

5 Kings Highway
Middleton, NH 03887
(603) 473-2314
FAX: (603) 473-8531

Middleton
BUILDING SUPPLY, INC.

Middleton Building Supply, Inc.

58 Old Rochester Road
Dover, NH 03820
(603) 742-8200
(800) 333-0969
FAX: (603) 742-5528

Customer <i>Woodman - Beth Fischer</i>	Date <i>11-14-16</i>
--	----------------------

Job Name / PO Number	Sold By <i>Jim S</i>	Delivery Date
----------------------	----------------------	---------------

Address / Directions *Elizabeth Fischer @ Comcast.net*

Home Phone *817-1843* Work / Job Phone

Quantity	SKU / Description	Price / Per	Total
<i>2</i>	<i>3/4 6/8 Runga Valley 4982-V Fir w/ Beated V Groove Panel Door Only</i>	<i>749.00</i>	<i>1498.00</i>
	<i>Misc Item</i>		<i>200</i>
	<i>4/5 Day Leadtime</i>		
	<i>Thanks Jim</i>	<i>749.00</i>	

25% deposit required on special orders. All claims and returned goods must be accompanied by receipt. Prices subject to change without notice.

DELIVERY / SPECIAL ORDER

10/15/16

The following is a proposal for design and construction drawings for various aspects of the accessibility project at Woodman Institute.

The hourly figures are my best guess at the time required. I propose to bill at \$80/hour, with the cost for each project not to exceed the estimated amount.

Bathroom in Woodman	8 hr.	@ \$80/hr	—	\$640
Hale ramp	12 hr.	"	—	960
Woodman ramp	12 hr.	"	—	960
Pavilion ramp and door	10 hr.	"	—	800
site check, meetings	9 hr.	"	—	720
time spent to date:	40 hr.	"	—	3,200
				\$7,280

Walter Rous



Haney's Remodeling
154 Green St Somersworth NH 03878
Dave Haney
Cell 767-6980
Davidwhaney@comcast.net

Estimate

11/03/16
Woodman Museum
(Beth Fischer)

Re-build bathroom to make handicap accessible

- Remove existing bathroom walls and fixtures
- Frame new walls making the bathroom larger with 36" door with level handle
- Sheetrock, mud, tape, sand, and paint walls
- Install counter and sink, open beneath to allow for accessibility
- Install grab bars
- Install flooring
- Install toilet

Allowances

Toilet	\$ 250.00
Sink	\$ 150.00
Countertop	\$ 200.00
Plumbing	\$ 1,000.00
Electrical	\$ 500.00
Door	\$ 350.00

Materials and labor \$ 6,750.00

- Deposit \$ 3,000.00 required prior to start

VERBAL quote

Door installation

*then home material 10 hrs @ 75/hr 750
100
850*

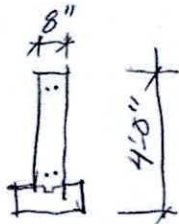
Woodman

*10 hrs @ 750/hr 7500
100
7600*

11/12/16

Estimates

Concrete frost walls for the ADA ramps and patios at Woodman Institute

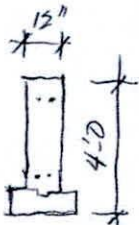


HALE HOUSE

Concrete: $3.16 \text{ sf} \times 38 \text{ LF} = 120 \text{ cuft.} = 4.5 \text{ yd.} @ \$120/\text{yd} = \$534$

Labor: $\$17/\text{LF} \times 38 \text{ LF}$

646
\$1,180



WOODMAN

Concrete: $4.5 \text{ sf} \times 42 \text{ LF} = 189 \text{ cuft.} = 7 \text{ yd.} @ \$120/\text{yd} = \$840$

Labor: $\$17/\text{LF} \times 42 \text{ LF}$

714
\$1,554

Because this is a small, complex job, the figures should be increased:

Hale: \$1,500

Woodman: \$2,000

Total: \$3,500

Walter Rous

Elizabeth Fischer

From: Elizabeth Fischer <Elizabeth_Fischer@comcast.net>
Sent: Tuesday, November 15, 2016 9:22 AM
To: Elizabeth Fischer Comcast
Subject: Woodman Institute railings

----- Forwarded Message -----

From: Custom Welding & <pparenteau@comcast.net>
To: Elizabeth Fischer <Elizabeth_Fischer@comcast.net>
Sent: Tue, 15 Nov 2016 12:13:34 -0000 (UTC)
Subject: RE: Fwd: Woodman Institute railings

Hello Elizabeth,

The \$175.00 per linear foot is complete system, including uprights and both rails. Please be aware if we do get the job we will need some prints/drawings of the actual rails to be fabricated, including both rail lengths/heights/return lengths and any requirements need to be met.

Best regards,
Cami

Custom Welding & Fabrication, Inc.
Po Box 105
127 Old Turnpike Road (Route 4)
West Nottingham, NH 03291
ph: (603) 942-5170
f: (603) 942-7850
pparenteau@comcast.net
www.customweldinginc.com

Hackett House

47 LF @ 175 = 8225

Woodman

14 1/2 LF @ 175 = 2537 -

----- Original Message -----

From: Elizabeth Fischer <Elizabeth_Fischer@comcast.net>
To: 'Custom Welding &' <pparenteau@comcast.net>
Sent: Mon, 14 Nov 2016 22:56:04 -0000 (UTC)
Subject: RE: Fwd: Woodman Institute railings

Thank you. Is this a linear foot price for the complete system, including uprights and railing near the ground, or is it per actual foot of steel pipe?

Beth

-----Original Message-----

From: Custom Welding & [mailto:pparenteau@comcast.net]
Sent: Monday, November 14, 2016 2:48 PM
To: Elizabeth_Fischer <elizabeth_fischer@comcast.net>
Subject: Re: Fwd: Woodman Institute railings

Nov. 12, 2016

Estimate

For work to be done at the pavillion at Woodman Institute

Disassemble and alter one lattice panel.

Reframe with a 3' wide doorway.

Build 3'0" x $\approx$ 7'10" door with lattice inserts.

Hang door with lever handle and rugged sweep.

Paint.

Reinstall hardware cloth rodent guard.

materials - mahogany throughout

\$1,000-

labor

\$3,200-

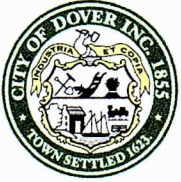
paint allowance

\$800-

total

\$5,000-

Randy Smith Woodwork
Greensboro NC
664-5828



CITY OF DOVER

ZONING BOARD OF ADJUSTMENT – STAFF MEMO (Z13-10)

Application Type:	Variance
Applicant:	Robert F. Fisher
Owner:	Anne E Tucker Revocable Trust
Location:	49 Littleworth Road (Tax Map G, Lot 29C)

INTENT: Applicant proposes to operate a lunch cart on the subject property. A variance is required to permit the lunch cart which is not a permitted use in the zoning district in which the property is located (R-20).

LOTS/UNITS PROPOSED: n/a

AGENDA ITEM #: 3D

ZONING DISTRICT: R-20

EXISTING LAND USE: Residential

PROPOSED LAND USE:
Residential and Commercial

SURROUNDING LAND USE: Single-family residential, industrial and commercial

PREVIOUS ZBA ACTION:

- Variance sought to permit an eating and drinking establishment in a residential zoning district (Case Z00-9). Variance denied per Notice of Decision dated April 20, 2000.
- Variance sought to permit a lunch cart on the property where lunch carts are not a permitted use in the R-20 District (Case Z12-09). Variance denied on November 14, 2012. Request for rehearing granted on April 18, 2013.

PLANNING BOARD APPROVAL REQUIRED: No

APPLICATION IS COMPLETE: Yes

NOTICES AS REQUIRED: Yes

STAFF RECOMMENDATION:

The Planning Department does not support the variance request.

Summary of Request and Background

The subject property is located at 49 Littleworth Road and is improved with a multi-family dwelling unit. The applicant has requested a variance to operate a “lunch truck” on the property which is a non-permitted commercial use of the property. A similar variance request for a “mobile lunch truck” was made in 2000 (Case Z00-9), at which time the property was located in the R-40 District. The variance request was denied by the ZBA.

For your reference, below is a timeline of events related to this application:

- 2000 – variance denied for an eating and drinking establishment (lunch truck)
- May 29, 2012 – application submitted by applicant for variance to permit a lunch truck (Case Z12-09)
- November 15, 2012 – hearing on Case Z12-09, request denied
- December 6, 2012 – request for re-hearing submitted by applicant
- April 18, 2013 – request for re-hearing granted
- June 20, 2013 – hearing for Case Z13-10, case continued to permit property to be posted

Reason for Staff Recommendation

Staff believes that there are no special conditions of the property that distinguishes it from any other property similarly zoned. The property is already being used for a multi-family residence, and there are several other uses permitted in the R-20 District that the property could be used for, if desired. A similar request was made to the ZBA in 2000 and was denied where the ZBA concluded that the application failed to meet all five (5) of the variance criteria.

Recommendation

The Planning Department recommends the Board hold the public hearing, and deny the variance.

ATTACHMENTS:

- Tax Map
- Draft Findings of Fact and Conclusions of Law
- Application for Case Z12-09
- Aerial photo submitted at 11/14/12 hearing for Case Z12-09
- Case Z12-09 Notice of Decision
- Case Z 12-09 Re-Hearing Request (12/6/12 letter from applicant)
- Case Z00-9 Application

CASE Z13-10

FINDINGS OF FACT

1. The subject property is located at 49 Littleworth Road, identified as Tax Map G, Lot 29C, and is located in the Low Density Residential (R-20) District.
2. The property is improved with a multi-family structure which is currently occupied.
3. The applicant proposed to operate a "lunch truck" on the property.
4. A lunch truck would be considered an "eating and drinking establishment" under Chapter 170 of the Code of the City of Dover ("Zoning Ordinance").
5. An eating and drinking establishment is not a permitted use in the R-20 District and therefore a variance is required from Section 170-12.A and the R-20 District Table of Use to permit the proposed lunch truck to be operated on this property.
6. The property is surrounded on three sides by other properties located in the R-20 District, as depicted on the City of Dover Zoning Map. Across Littleworth Road, the properties are located in the Rural Restricted Industrial (I-2) District. Eating and drinking establishments are permitted in the I-2 District.
7. The uses in the immediate vicinity include residential, low density industrial, and a lawyer's office across the street. The nearest retail is the Dover Paint & Varnish located at 25 Littleworth Road, located approximately one-half mile from the subject property.
8. A similar variance was sought in 2000 to permit an eating and drinking establishment in a residential zoning district (Case Z00-9). The variance was denied per Notice of Decision dated April 20, 2000.

CONCLUSIONS OF LAW

1. THE VARIANCE WILL BE CONTRARY TO THE PUBLIC INTEREST AND THE SPIRIT OF THE ORDINANCE WILL NOT BE OBSERVED. The surrounding neighborhood consists of primarily residential and industrial uses, with the nearest retail located approximately one-half mile away. The introduction of an eating and drinking establishment is fundamentally out of character with the surrounding neighborhood and, therefore, would alter its essential character. Indeed, the separation of distinct categories of uses into separate zoning districts (e.g. commercial, residential, and industrial) is one of the most basic and core components of traditional Euclidean zoning. As a result, the proposal does not meet the spirit and intent of the ordinance and public interest criteria.

2. THE VALUES OF THE SURROUNDING RESIDENTIAL PROPERTIES WILL BE DIMINISHED. No evidence was presented by the applicant that demonstrates the value of the surrounding properties will not be diminished by the proposed use, other than the applicant affirming that no such diminution will take place. Since the grant of this variance would result in a severe deviation from not only what is permitted by the Zoning Ordinance but also from what the actual surrounding uses consist of, it is not clear that the operation of a lunch truck on this property will have no effect on the property values of the abutting residential uses.

3. SUBSTANTIAL JUSTICE WILL NOT BE DONE. Under New Hampshire case law, any loss to the individual which is not outweighed by a gain to the general public is an injustice. Also, the court will examine whether the proposed development is consistent with the area's present use. New Hampshire Office of Energy and Planning Zoning Board of Adjustment Handbook, October 2012, p. II-11, *citing Malachy Glen Assoc. v. Chichester*, 155 N.H. 102 (2007). Here, the property is already being used in a manner entirely consistent with what the Zoning Ordinance permits and with the actual use of the surrounding residential properties. Therefore, there is no "loss" to the applicant by not permitting a commercial use of the property which bears no relationship to any permitted use in the R-20 District and is wholly inconsistent with the existing surrounding uses. It is important to note that the grant of the variance would permit a commercial use *in addition* to the existing multi-family residential use of the property. The variance would, in other words, permit a "bonus" use of the property for no other reason than the fact that the applicant wishes it.

4. LITERAL ENFORCEMENT OF THE PROVISIONS OF THE ORDINANCE WOULD NOT RESULT IN AN UNNECESSARY HARDSHIP. There are no special conditions of the property that distinguish it from other properties in the area that are similarly zoned. The property is zoned for residential use and that is how it is used, as are the other surrounding properties located in the R-20 District. There is nothing special or unique about this property that would justify granting a variance for a completely unpermitted use, or which would create a hardship were the variance to be denied. The proposed use is unreasonable in that the property is already being utilized with a permitted residential use, there are no other similar uses in the area, and there would be no hardship suffered were the ~~variance to be denied~~

