

# Carson City, a Consolidated Municipality

# Application for

# Community Support Services Funding Fiscal Year 2011-2012

Name of Organization: <u>CASA OF CARSON CITY</u>

Amount Requested: \$25,000

Contact Person: CHRIS BAYER

Mailing Address: 1545 E. 5th St.

City: CARSON CITY State: NV Zip Code: 89701

Phone Number: 775 882-6776 E-mail: casaofcc@earthlink.net

501(c)3 Taxpayer I.D. Number: <u>31-1624090</u>

Date Submitted: 7.623 2011

Please mail completed application and attachments to:
Carson City Executive Offices
201 N. Carson Street, Suite 2
Carson City, NV 89701

# Carson City Community Support Services APPLICATION FOR GRANT FUNDS

Fiscal Year 2011-2012

# **Organization Information**

1.	What is the overall purpose or goal of your organization?
vo an	The mission of CASA of Carson City is to support and promote court-appointed lunteer advocacy so that every abused or neglected child can be safe, establish permanence d have the opportunity to thrive.
2.	How long has your organization been in existence? 23 Years 4 Months
	How long has your organization been in Carson City? 23 Years 4 Months
3.	Describe in general the activities or services of your organization:
gı di	CASA of Carson City provides Carson City courts with child advocates who serve as a lardian ad litem in child abuse/neglect cases and provide information in high conflict vorce/separation disputes.
4.	How many people do you intend to serve during this Fiscal Year 2011-2012?
	# of Youth <u>125</u> # of Adults # of Seniors
5.	How many people served this Fiscal Year 2011-2012 will be Carson City residents?
	# of Youth <u>125</u> # of Adults # of Seniors
6	. How many paid employees/volunteers does your organization employ?
p	# of full-time employees $\underline{0}$ # of part-time employees $\underline{2}$ (.75 and .25) lus two part time contract
7	Percentage of organizational funds to be utilized for administrative costs (i.e., salaries,

Describe how your organization is managed and governed (i.e., Board of Directors). 8. Executive Director under a Board of Directors

Please provide information on your Executive Board members or contact person: 9. Phone Title Name

travel, training, etc):

68%

### CASA OF CARSON CITY BOARD OF DIRECTORS

Caren Jenkins Esq.—President-720-1181

Attorney

Daniel Gonzales—Secretary-887-2020

Detective, Carson City Sheriff's Dept.

Vicki Preston--Treasurer-883-0109

**CPA** 

Ron Knecht, MS, JD & PE (CA)-882-2935

UNR Board of Regents, Senior Economist at Nevada's Public Utilities

Commission

Amy Clemens-841.4033

District Manager, Waddel and Reed Financial Advisors

Bob White--291-0014

Captain, Carson City Sheriff's Dept.

### Program/Proposal Information

- 10. Amount of funds requested? \$ 25,000
- 11. <u>Purpose of Program/Proposal</u>: Describe the program/proposal, target population, number to be served, what the grant will specifically fund. Explain your organization's qualifications to deal with the issue.

Under Nevada law, NRS 432b.500, every child removed from the home in a child welfare case is required to have appointed by the Court an unpaid guardian ad litem to advocate for their best interest. CASA of Carson City provides these volunteers to the Carson City Juvenile Court. In Nevada, the wealthier counties--Clark, Washoe and Douglas--do this through CASA organizations that are county agencies. Four rural Nevada counties do this through CASA organizations that are non-profit organizations-including Carson City. Placing CASA in a non-profit organization represents a considerable cost saving to these counties. The presence of a CASA volunteer in a child welfare case translates into increased safety and services for the child.

This grant helps fund the recruitment, training, supervision and support of CASA volunteers. During fiscal year 2010-2011 (not yet complete) CASA of Carson City has advocated for 97 Carson City children (to date). This compares to 80 children served during 2008-09 and 105 children served during 2009-2010. We predict advocating for a total of 125 children during this fiscal year. This represents both child welfare and high conflict divorce cases. Typically, we have 25 volunteers advocating for about 50 children at any one time.

CASA of Carson City has provided this service to CASA of Carson City since 1987 and has benefitted from stable staffing since 1998. As an affiliate of the National CASA Association and the Nevada CASA Association, CASA of Csrson City conforms to recognized guidelines and standards.

12. Goals, Objectives & Measurable Outcomes: The events and/or services must assist the City to fulfill its vision statement and accomplish one or more of the City's Goals. Please indicate which goal(s) will be met. Clearly state measurable outcomes of the project. Tell how you propose to achieve the outcomes of the project in terms of specific activities, including a timetable (proposed starting date and duration of the project):

Measureable outcomes lie in: assigned advocates to all cases as requested by the Court and advocate Court reports to all hearings. This is accomplished by conducting three or four 30-hour trainings per year--training 12 to 15 new advocates each year, conducting interviews and background checks on all trainees, supporting advocates through staff review of all court reports and staff attendance at all hearings, providing advocates with written guidelines, providing advocates with 24/7 access to staff and holding bi-monthly volunteer meetings.

A new outcome for CASA of Carson City lies in implementing online case note hearing tracking at every hearing--case managers placing hearing notes into an on-line secure data base where they may be recalled easily by staff and volunteers.

13. Indicate who will benefit from the use of these funds, and how they will benefit. If this is an ongoing event, please state how you intend to fund the program in future years.

Carson City children benefit from these funds. CASA involvement increases the safety of children. CASA involvement improves services to children across a wide range--educational, health, legal, etc..

CASA of Carson City's strategy for sustainable funding is to split the cost burden between the City, the Court and the State with additional funding through community donations. Last year, the City provided \$20,000 and the Court contributed \$25,000 to the organization's budget. The State of Nevada is the only state in the West that does not currently provide funding at a state level to CASA. CASA of Carson City has spearheaded efforts to bring the state CASA organization and all of Nevada's CASA organizations to a legislative day Feb. 18. This session, the goal is informational—there is no expectation for the State fund to CASA during this session. Event fund raising and donations yield \$4000 to \$8000 per year in Carson City. The NV Law Foundation has again contributed funding this calendar year—though it has reduced the amount from last calendar year as IOLTA funds have declined due to interest rates.

14. Are you aware of any other private sector/nonprofit/governmental/agencies in the area providing the same services as your program/proposal? If yes, please explain how your project will compliment other existing programs?

No other organization in Carson City provides these services to Carson City children and courts.

15. Please include a detailed budget for this program/event, and detailed list of intended expenditures and revenues.

ALSO SEE ATTACHED YEAR END REPORT WITH TOTALS FROM CURRENT FISCAL YEAR AND OTHER INFORMATION

PROPOSED BUDGET FISCAL YEAR 2011-2012--much the same as in the current fiscal year.

SALARIES	\$50,665	(two part time+fringe+and workers comp)
CONTRACT	\$9,120	(twodata entry/events person, outreach)
SUPPLIES/EQUIP	\$6,000	
PHONE/WEB	\$3,500	
PUBLIC INFO/TRAINING	\$2,500	
LIABILITY INSURANCE	\$3,300	
TOTAL	\$75,085	

#### Planned Income

City	\$25,000
Court	\$25,000

NV	Law Found \$15,000
	ENTS \$2,500
Dor	nations \$7,585
	ΓAL \$75,085
NO	TE: Carson City provides CASA of Carson City with office space at the Juvenile Court building at no cost.
16.	Has your organization been funded by Carson City previously? X Yes  \text{No}  \text{No}  \text{If yes, please list:}
	Year Amount Program/Event
	08-09 \$14,500 Child Advocacy
	09-10 \$20,000 Child Advocacy
	10-11 \$20,000 Child Advocacy
Rec	quired Attachments:
П	A copy of your 501(c)3 Designation Letter from the IRS. For branches of a larger
	organization (i.e., local troop of Boy Scouts of America), please provide the letter for your
TT	umbrella organization.
П	A copy of your most recent audited financial statement. For smaller organizations, or
	branches, a more simple budget showing income and expenses is acceptable. Also include an IRS form 990.
TT	Previous Grantees: If your organization received grant funding in Fiscal Year 2010-
Ц	2011 you must complete and submit an Annual Report form detailing how those funds
	were spent. Applications for former grantees will not be considered if an Annual
	Report has not been included.
Ħ	Signed Guidelines for Grants (please keep a copy for your files).
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Carson City, a Consolidated Municipality

EXECUTIVE OFFICES

FEB 23 2011 CARSON CITY

# Annual Report For Community Support Services Funding Fiscal Year 2010-2011

Name of Organization: Also CASA of CARSON CITY

Program/Project: GUARDIAN AD LITEM/CHILD ADVOCACY

Amount of Funds Received \$20,000

Contact Person: CHRIS BAYER Mailing Address: 1545 E. 5<sup>th</sup> St.

Zip Code: 89701 City: CARSON CITY State: NV

Phone Number: 882 6776 E-mail: casaofcc@earthlink.net

Date Submitted: Feb Z3 2011

Please attach a final financial income and expense statement that specifically explains 1. how grant funds were used, including a comparison between your budgeted and your actual incomes and expenses. arrached

Evaluate your achievement of the measurable outcomes listed in your application: 2.

A total of 105 children served during fiscal year 2009-2010. Eight new CASA volunteers trained to date--9 currently in training and will finish during this fiscal year. (CASA of Carson City has has roughly 25 active CASA volunteers at any one time.) Advocacy for 97 children in child welfare and high conflict divorce cases, estimated to be 125 by the end of the fiscal year.

Approximately how many people benefitted from your project? How many of those 3. people were Carson City residents? What were some of the individual benefits?

Advocacy for 97 children in child welfare and high conflict divorce cases, estimated to be 125 by the end of the fiscal year. All children were Carson City residents or from Storey County--one child from Storey County. CASA of Carson City helped to ensure that children remained safe and that they received appropriate and timely servicesincluding health, education and social. This ranges from newborns for whom CASA volunteers have advocated to receive developmental assessments to 17 years old for whom CASA volunteers have advocated to receive mental health therapy. And everything in-between. CASA monitors child safety--sometimes make reports to CPS.

4. What specific community benefit did your project provide Carson City?

CASA involvement increases safety for children. CASA involvement improves services to children. CASA involvement means the children don't fall through the cracks. These are very specific. We work collaboratively with CPS. We call them when needed. We help identify therapists, mentors, treatment placements and other services for children. We keep our eye on the clock--meaning: we call the Attorney General's office and ask if Termination of Parental Rights paperwork has arrived on time or we go to Court and help a Judge feel secure in closing a case because we know the parents are doing great and don't need to have their case extended.

All of this means that hurt children can move on. Abused and neglected children are among the most at-risk children. They have frequently been exposed in-utero to substance abuse grown up in the midst of chaotic and inattentive parenting, witnessed violence of all kinds and/or been subjected to violence. But these things don't need to be a life-sentence. The cycle of abuse and neglect can be broken.

The community benefits morally and economically by addressing the needs of these children pro-actively. Having a community based organization involved with these children-embedded in a state run child welfare system that for the most part is completely hidden from public view-ensures that community values enter the system and that what happens to these children both before and after they are taken into state care percolates back into the awareness of the community as a whole.

The phrase "abused and neglected" is perhaps not sufficient to define the children we serve. An additional title might be, "healing children". This is a good thing to do for children and good thing to be part of. Carson City can take pride in its history of support for CASA and a range of programs that make a tangible difference for children and families.

5. Will this program/project be reoccurring? How do you anticipate funding the project in the future?

This program will continue into the future as long as the City, the Court, the churchs, the service groups and the citizens continue to support it and as long as there is child abuse or neglect. Funding for CASA of Carson City will continue to be pieced together from a variety of sources. The estimate below is based on the current fiscal year.

# Planned Income

\$25,000
\$25,000
\$15,000
\$2,500
\$7,585
\$75,085

### 6. Describe any challenges that impacted your program.

We face rising numbers of children in care. With the Governor talking about assessing the counties directly for the cost of child welfare, Carson City may increasingly be concerned to understand both the causes for children coming into care and what ensues. So, I'm taking the liberty of writing a longer response here.

Over time, inadequate treatment capacity (both substance abuse and mental health), gaps in intervention and broad cultural conditions that promote or condone violence (like the ripple effect from violent drug cartels in Mexico) can result in rising numbers of parents who abuse or neglect children. The recession increases stress on everyone. Substance abusers and people with mental illness can be very vulnerable to this, experiencing stress as chronic and hence destructive. With this background in mind...the two primary situations leading to removal of children are young adults living in drug houses and/or parents of any age with inadequately addressed mental illness.

(Note that CPS--the intervention unit at the front end of the Division Of Child And Family Services--is often a referral service and does not control or manage most of the services to which it refers. Those services reside largely in the community at the lower level--Ron Wood Family Resource Center, Community Counseling Center, etc.--and in other state agencies at the higher level, particularly mental health. The City might consider whether it should create ongoing policy level assessment of that referral process and services.)

The rising number of children coming into care is one factor in our rising caseload. The next is the length of time children then remain in care once removed from the home. When children have been removed by child welfare and are in care, delayed services, inadequate communication or lack of focus within the system can lead to children staying too long in care. The Nevada Division of Child and Family Services' Program Improvement Plan with the federal government has, as one of five goals, addressing the length of time children are in care. Rural counties, including Carson City, have challenges in this area. (p. 10, Nevada Program Improvement Plan, Oct. 2010.)

The part of this equation CASA can impact lies in the latter situation--the length of time children are in care. For us the problem is not just the cost. One of our mantras (a best practice social work standard) is that children should not be a long time in the system. This year CASA of Carson City has made substantial investments in computers, data base technology and contract labor to improve our efficiency and help as Nevada's child welfare system tries to shorten the time that children are in care. It is a complex system. CASA efforts alone will not be the answer, but we are trying to do our part.

# ATTACHED FINANCIAL—current fiscal year to date.

1.	CATEGORY	BUDGET	SPEN	T R	EMAINS
2.					
3.	DIRECTOR	\$33	,000.00	\$19,681.00	\$13,319.00
4.	HEALTH CARE DIR	\$3	,000.00	\$3,000.00	\$0.00
5.	ASSIST CASE MAN	\$13	2,950.00	\$5,139.00	\$7,811.00
6.	IRS $7.65\%$ x Dir + Assist 0	CM \$3	,515.18	\$1,635.00	\$1,880.18
7.	OUTREACH COORDINA	TOR \$3	,000.00	\$1,815.00	\$1,185.00
8.	DATA ENTRY/EVENTS	COORD \$6	,120.00	\$1,447.00	\$4,673.00
9.	EMP COMP	\$1,	200.00	\$812.00	\$388.00
10.	EQUIP/SUPPLIES	<b>\$</b> 7,	00.000	\$6,049.00	\$951.00
11.	PHONE/WEB	\$3,8	00.00	\$2,828.00	\$972.00
12.	PUBLIC INFO/TRAINING	G \$2,5	00.00	\$1,497.00	\$1,003.00
13.	LIABILITY INSURANCE	\$3	,300.00	\$0.00	\$3,300.00
14.	TOTALS TO DATE	9	579,385	\$43,903	\$35,482

INCOME SOURCE	PLAN	RECEIVED
The state of the s	and the first of t	waste with the second second
PCC	\$7,100.00	\$7,100.00
A Court	\$25,000.00	\$25,000.00
City	\$20,000.00	\$20,000.00
<b>COBCADMIN</b>	\$1,000.00	<b>92</b> 50.00
NV LAW FOUND	\$16,500.00	\$16,500.00
: EXEMPLYS	+; <b>\$2:500</b> .00	rat of sales
DONATIONS	\$0.00	\$0.00
The second secon		
TOTAL	\$72,100	\$68,850

# Form **990-EZ**

Department of the Treasury Internal Revenue Service

A For the 2008 calendar year, or tax year beginning

# **Short Form**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form. ► The organization may have to use a copy of this return to satisfy state reporting requirements.

, 2008, and ending

July 1

OMB No. 1545-1150

Open to Public Inspection

, 20 09

			ar year	, or tax year beginning	July 1	, 2008, and	ending	June 3	30	, 20 09
В		applicable:	Please	C Name of organization				D Employe	r ide	ntification number
H	Address	- 1	use IRS label or	CASA OF CARSON CITY	(			31		1624090
H	Name cl	•	print or	Number and street (or P.O. bo	ox, if mail is not deli	vered to street address	s) Room/suite	E Telephor	ne ni	umber
H	Terminal		type. See	1545 EAST 5TH STREET	,			(775)		883-6776
$\Box$	Amende		Specific Instruc-	City or town, state or country,	, and ZIP + 4		<del></del>	F Group E		
	Applicati	ion pending	tions.	CARSON CITY, NV 8970				Number		•
	• Sect	tion 501(c)(3) c	organiz	ations and 4947(a)(1) nonexe	mnt charitable t	ruste must attach	G Acco			☑ Cash ☐ Accrual
			а соп	npleted Schedule A (Form 99	30 or 990-EZ).	i uoto illuot attacii		r (specify) ▶	J <b>u</b> .	W Cash  Accida
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ī	Websi	ite: > www	.casao	ofcc.org						organization is not
				nly one) — 🔽 501(c) ( 3 ) <b>∢</b> (ir	200t 20\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	347(-)(4)	- requi	red to attach EZ, or 990-Pi		nedule B (Form 990,
•	nat rea	wired but if the	anizatio Porgani	on is not a section 509(a)(3) sur ization chooses to file a return,	porting organizat	tion and its gross rec	eipts are nor	mally <b>not</b> mo	ere th	nan \$25,000, A return is
Ī.	Add line	es 5b 6b and 7	7h to lin	ne 9 to determine gross receipts	if \$1 000 000 or	more file Form 000 in	-t-ad of Care	- 000 57 - 6		
P	art I	Revenue	Evne	nees and Changes in	Not Accete or	Eural Dalamas	Stead of Form	1990-EZ	• \$	
-				nses, and Changes in I		runa Balance	s (See the			
	1			s, grants, and similar amount					1	82,077
	2	Program se	ervice r	evenue including governme	ent fees and co	ntracts			2	
	3	Membershi	p dues	and assessments				🗀	3	
	4	Investment.						🚅	4	2,295
	5a	Gross amoi	unt fro	m sale of assets other than	n inventory .	<u>5a</u>				
	Ь	Less: cost	or othe	er basis and sales experise	s	<u>5b</u>				
a	C	Gain or (loss	s) from:	sale of assets other than inve	entory (Subtract I	line 5b from line 5a	) (attach sch	edule) . 5	ic	
2	6	Special events	and activ	vities (complete applicable parts of S	Schedule G). If any a	mount is from gaming.	check here ▶	· 🗆		
Revenue	a			ot including \$						
ž		reported on	line 1	)		6a		4,140		
	b	Less: direct	exper	nses other than fundraising	expenses .	6b		1,000		
	C	Net income	or (los	ss) from special events and	activities (Sub	tract line 6b from	line 6a)	6	c	3,140
	7a			entory, less returns and all						· · · · · · · · · · · · · · · · · · ·
	b	Less: cost of				[ I				
	С			ss) from sales of inventory	(Subtract line 7			7	С	
	8	Other reven	ue (de	scribe >		o morn into raj			3	···
	9	Total reven	iue. Ac	dd lines 1, 2, 3, 4, 5c, 6c, 7	7c, and 8			,	9	87,512
	10			r amounts paid (attach sch					0	07,012
	11	Benefits pai	id to o	r for members	. , .			· · ·   1		
S	12	Salaries, oth	her cor	mpensation, and employee	henefite			· · ·   4		36,683
Expenses	13	Professiona	l fees	and other payments to inde	enendent contr	otore		1		00,000
8	14	Occupancy	rent	utilities, and maintenance	spendent contra	actors , , ,		1		
Ω	15	Printing, pul	blicatio	ons, postage, and shipping	• • • • • •			1	·	
	16	Other exper	nses (d	lescribe  See sch	edule attached			· · ·   • • • • • • • • • • • • • • • •		18,787
	17						·			55,470
S	18			for the year (Subtract line	17 from line (1)		<u> </u>	1		32,042
Net Assets	19	Net accete	or fun	d balances at beginning a	francisco),					32,042
AS	10	end-of-vear	figure	d balances at beginning or reported on prior year's re	Tyear (from line	e 27, column (A))	(must agre	e with		70 400
7	20	Other chance	ngulo nes in r	net assets or fund balance	s (attach explor	nation)			-	78,499
Z	21	Net assets	or fund	balances at end of year.	Combine lines 1	8 through 20		> 2		440 544
Pa	rt II	Balance S	heets	. If Total assets on line 25,	column (B) are	\$2.500,000 or m	ore file For	m 990 insta	<u> </u>	110,541
			(Se	ee the instructions for Part	11.)	Ψ2,000,000 OF 111		inning of year	au	
22	Cack	n, savings, ar			•		<del></del>	<del></del>	100	(B) End of year
23								72,357		104,399
23 24	O+h-	r seento (do-	yo , ariba *					6,142		
	Tota	o assets (UES	SCHOE I			)		70 100	24	
25 26		il assets .				· · · · · ·		78,499	-	110,541
26 27	Net:	l liabilities (d assets or fu	escribe	e ►	2) must same :	vith line Ot)		, 70 10-	26	
	Privac	v Act and Den	Anust	Reduction Act Notice, see	the Instruction	viun line 21)		78,499	27	110,541
V		, not and rep	rei WUIR	Chaudelion Act Motice, 500	ure instruction fo	or <b>Form 990.</b>	Cat. No.	106421		Form <b>990-EZ</b> (2008)

					·	, age .
	art III Statement of Program Service Accord			111.)	<b>.</b> .	Expenses
W	nat is the organization's primary exempt purpose?	Court appointed special a	advocates		(Red	quired for 501(c)(3) (4) organizations
De de	scribe what was achieved in carrying out the organi scribe the services provided, the number of persons b	zation's exempt purposes.	In a clear and con	cise manner,	and	4947(a)(1) trusts; onal for others.)
	Recruit and train volunteers to represent childr				Opti	l la lor otriers.)
20	neglect. To advocate for the best interests of c	hildren in high conflict ou	estady sacra	or		
	Approximately 75 children served on an annual	haaia				
	(Grants \$ ) If this amount inc		k here	▶ □	28a	56,470
29					EUG.	30,47
	(Grants \$ ) If this amount inc		k here	▶ □	29a	
30						
				******		
	(Grants \$ ) If this amount inc	ludes foreign grants, chec	k here	. ▶ □	30a	
31	Other program services (attach schedule)					
	(Grants \$ ) If this amount inc	ludes foreign grants, chec	<u>k here</u>	. ▶ □	31a	
32	Total program service expenses (add lines 28a t	hrough 31a)	· · · · · ·	>	32	
P	art IV List of Officers, Directors, Trustees, and Key			ed. (See the ins	tructio	ns for Part IV.)
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) Contributio employee benefit		(e) Expense account and
		devoted to position	enter -0)	deferred comper		other allowances
	See schedule attached	-				
	See schedule attached					
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rá	Other Information (Note the statement requirements in the instructions for Part VI.)		
	· ·	Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	3	1
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	1	1
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	а	1
b	If "Yes," has it filed a tax return on Form 990-T for this year?	b	1
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	3	1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions.		
392	Did the organization file Form 1120-POL for this year?	D	
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	а	✓
39	If "Yes," complete Schedule L, Part II and enter the total amount involved		
-	Initiation fees and capital contributions included on line 9		
	Gross receipts, included on line 9, for public use of club facilities		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶		
b	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	ь	<b>✓</b>
С	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	Enter amount of tax on line 40c reimbursed by the organization		
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	e	<b>√</b>
41.	List the states with which a copy of this return is filed. ► None		
42a	A sector of the ARAR E 6th Ctroop Common City, ANA	883-67 1-5023	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country:  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Yes	No ✓
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country:		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		
	and enter the amount of tax-exempt interest received or accrued during the tax year		<b>-</b> -
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	Yes	No /
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		

Part VI	Section 501(c)(3) organizations only and complete the tables for lines 50 a	. All section 501(c)(3) nd 51.	organization	s must	answer quest	ions 40	5 <b>–49</b>
<b>46</b> Did t	he organization engage in direct or indirect p	political campaign activit	ies on behalf o	of or in c	pposition to		Yes No
	idates for public office? If "Yes," complete S					46	1
<b>47</b> Did t	he organization engage in lobbying activities	? If "Yes," complete Sch	nedule C, Part	li		47	1
48 Is the	e organization operating a school as describe	ed in section 170(b)(1)(A)	(ii)? If "Yes," c	omplete	Schedule E .	48	<b>1</b>
49a Did t	he organization make any transfers to an exe	empt non-charitable rela	ted organization	n? .		49a	<b>✓</b>
	es," was the related organization(s) a section					49b	<u> </u>
50 Com each	plete this table for the five highest compensative received more than \$100,000 of compensation	ated employees (other the confrom the organization	nan officers, di	rectors, one, ente	trustees and key er "None."	y emplo	yees) who
(a) f	Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compens	em	(d) Contributions to ployee benefit plans & eferred compensation	acco	Expense ount and allowances
	NONE						
~~~~~							
							<del></del>
Total numb	per of other employees paid over \$100,000						
comp	pensation from the organization. If there is no (a) Name and address of each independent contractor p			<b>(b)</b> Type (	of service	(c) Com	pensation
	NONE						
					-		
		***************************************					
otal numb	per of other independent contractors each re	ceiving over \$100,000	>				· · · · · · · · · · · · · · · · · · ·
	Under penalties of perjury, I declare that I have examin and belief, it is true, correct, and complete. Declaration	ed this return, including accor on of preparer (other than office	npanying schedule er) is based on al	s and stat informati	tements, and to the l on of which prepare	pest of m or has any	y knowledge y knowledge.
Sign Here	Signature of officer			Date		<u></u>	
	Type or print name and title.						
aid reparer's	Preparer's signature	Date	Chec self- emple	cif oyed ▶ □	Preparer's Identifying	Number (S	ee instructions)
ise Only	Firm's name (or yours if self-employed), address, and ZIP + 4		Terribu	EIN	<b>&gt;</b> ;		
May the IR	S discuss this return with the preparer show	n above? See instruction	ne	Phor	ne no. ▶ ( )	П.	
<del>*</del>		assis. oso monucio		· · ·	<u> </u>	Ye	-FZ (2008)

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

**Public Charity Status and Public Support** 

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number **CASA OF CARSON CITY** 1624090 Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ An organization that normally receives: (1) more than 33⅓ % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33/9 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. b 🗌 Type II c Type III-Functionally integrated d ☐ Type III-Other e 🗌 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) No and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the organizations the organization supports. h (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9) in col. (i) listed in your the organization in organization in colsupport above or IRC section governing document? col. (i) of your (i) organized in the (see instructions)) support? U.S.? Yes No Yes NONE Total

-	(Complete only if you chec	ked the box	on line 5-7	Sections 1/	U(D)(1)(A)(IV) `	and 170(b)(1	)(A)(vi)
	ction A. Public Support		311 11110 0, 7, 1	or our art i.	<u> </u>		****
С	alendar year (or fiscal year beginning in) 🕨	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	44,814	25,283	29,751	89,037	82,077	270,962
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1-3	44,814	25,283	29,751	89,037	82,077	270,962
5 6	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).  Public support. Subtract line 5 from line 4.						0
	tion B. Total Support						270,962
Ca	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(4) 2007	(-) 0000 I	
7 .	Amounts from line 4	44,814	25,283	29,751	(d) 2007 89,037	(e) 2008	(f) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	576	821		,	82,077	270,962
9	Net income from unrelated business activities, whether or not the business is regularly carried on		021	884	1,275	2,295	5,851
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	3,300	4,015	7,697	5,204	3,140	23,356
11	Total support. Add lines 7 through 10 .						300,169
12	Gross receipts from related activities, etc.	(see instruction	s)			12	
13	First five years. If the Form 990 is for to organization, check this box and stop her	<b>e</b>		d, third, fourth,			501(c)(3)
14	tion C. Computation of Public Sup	port Percent	tage				
15	Public support percentage for 2008 (line 6	, column (f) divi	ded by line 11,	column (f))		14	90.26 %
	Public support percentage from 2007 Sch 33% % support test—2008. If the organiz and stop here. The organization qualifies 33% % support test—2007. If the approximation of the support test—2007.	ation did not ch	eck the boy or	line 13, and line	<u>[</u> ne 14 is 33% %	or more, chec	k this box
b	331/3 % support test—2007. If the organization qualities and stop here. The organization qualities and size and	ation did not ch	eck a box on li	ne 13 or 16a a	nd line 15 ic 2	214.04 or more	
	10%-facts-and-circumstances test—200 more, and if the organization meets the "facts-and-circums organization meets the "facts-and-circums"	<b>8.</b> If the organiz cts-and-circums	ation did not ch stances" test icl	eck a box on lir	ne 13, 16a, or <sup>.</sup>	16b, and line 14	is 10% or
b	10%-facts-and-circumstances test—2007. more, and if the organization meets the "facts-and-circumstan Private foundation. If the organization did research."	If the organization of the control o	n did not check ances" test, ch ganization quali	a box on line 1. eck this box an	3, 16a, 16b, or od stop here. E	17a, and line 15 Explain in Part N	is 10% or / how the

	rt III Support Schedule for Organ (Complete only if you checke				1)(2)			
	tion A. Public Support							
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
	furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge				Na	ANTIMETER STATE OF THE STATE OF		
6	Total. Add lines 1-5		<del> </del>					
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000							
С	Add lines 7a and 7b							
8	Public support (Subtract line 7c from							
Soc	line 6.)							
	alendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total	
		(8) 2004	(1) 2003	(6) 2000	(a) 2007	(0) 2008	(i) Total	
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	÷						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
11	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				Madrida			
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)			·				
14	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here							
Sec	tion C. Computation of Public Sup		ntage					
15	Public support percentage for 2008 (line	e 8, column (f	) divided by lin	ne 13, column	(f))	15	%	
16	Public support percentage from 2007 S	chedule A, Pa	art IV-A, line 2	7g		16	<del></del>	
Sec	tion D. Computation of Investmen	t Income P	ercentage	· <del></del>	· · · · · · · · · · · · · · · · · · ·	<u></u>	/0	
17	Investment income percentage for 2008	line 10c. co	lumn (f) divide	d by line 13. co	olumn (fi)	17	%	
18	Investment income percentage from 20	2007 Schedule A. Part IV-A. line 27h						
19a	331/3 % support tests - 2008. If the orga	inization did n	ot check the b	ox on line 14, a	and line 15 is n	nore than 331/3	%, and line	
	17 is not more than 33% %, check this bo	ox and <b>stop h</b> e	ere. The organi	ization qualifies	as a publicly	supported orga	anization >	
b	33½ % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33½ %, and line 18 is not more than 33½ %, check this box and stop here. The organization qualifies as a publicly supported organization							
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ □							

# **CASA of Carson City**

Form 990-EZ 31-1624090 Year ended June 30, 2009

## Page 1, part I, line 16 - Other Expenses

Advertising and marketing	\$	490
Appreciation awards	·	290
Contract labor		1,050
Dues and subscriptions		375
Filing fees		25
Fundraising expenses		1,366
Internet connection expenses		729
Kids activites expenses		11
Liability insurance		1,871
Marketing supplies		1,675
Meals and volunteer appreciation		1,844
Office supplies and expenses		1,684
Payroll taxes		1,878
Postage		259
Printing and reproduction		162
Telephone		3,058
Training, seminars and conventions		1,441
Worker's compensation insurance	•	579
	\$	18,787
	<u> </u>	10,707

Page 2, Part IV - List of Officers, Directors, Trustees, and Key Employees

Name and address Don Johnson 1545 E. 5th Street Carson City, NV 89701	<u>Title and average hours</u> President	5	Compensation 0	Contrib to plans 0	
Vicki Preston 1545 E. 5th Street Carson City, NV 89701	Treasurer	5	0	0	0
Barbara Bordok 1545 E. 5th Street Carson City, NV 89701	Secretary	5	0	0	0
Ron Knecht 1545 E. 5th Street Carson City, NV 89701	Board Member	2	0	0	0
Bob White 1545 E. 5th Street Carson City, NV 89701	Board Member	2	0	0	0
Monte Fast 1545 E. 5th Street Carson City, NV 89701	Board Member	2	0	0	0
Stephanie Gardner 1545 E. 5th Street Carson City, NV 89701	Board Member	2	0	0	0
Amy Clemens 1545 E. 5th Street Carson City, NV 89701	Board Member	2	0	0	0
Chris Bayer 1545 E. 5th Street Carson City, NV 89701	Director	25	\$ 28,535	0	0

INTERNAL REVENUE SERVICE DISTRICT DIRECTOR P. O. BOX 2508 CINCINNATI, OH 45201

Date: MAR 15 1999

CASA OF CARSON CITY INC 111 N CURRY ST CARSON CITY, NV 89703

Employer Identification Number: 31-1624090 DLN: 17053318763028 Contact Person: THOMAS E O'BRIEN ID# 31187 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Foundation Status Classification: 509(a)(1) Advance Ruling Period Begins: December 3, 1997 Advance Ruling Period Ends: December 31, 2001 Addendum Applies:

Dear Applicant:

Based on information you supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably expect to be a publicly supported organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, during an advance ruling period you will be treated as a publicly supported organization, and not as a private foundation. This advance ruling period begins and ends on the dates shown above.

Within 90 days after the end of your advance ruling period, you must send us the information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, we will classify you as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, we will classify you as a private foundation for future periods. Also, if we classify you as a private foundation, we will treat you as a private foundation from your beginning date for purposes of section 507(d) and 4940.

Grantors and contributors may rely on our determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you send us the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until we make a final determination of your foundation status.

If we publish a notice in the Internal Revenue Bulletin stating that we

Letter 1045 (DO/CG)

### CASA OF CARSON CITY INC

will no longer treat you as a publicly supported organization, grantors and contributors may not rely on this determination after the date we publish the notice. In addition, if you lose your status as a publicly supported organization, and a grantor or contributor was responsible for, or was aware of, the act or failure to act, that resulted in your loss of such status, that person may not rely on this determination from the date of the act or failure to act. Also, if a grantor or contributor learned that we had given notice that you would be removed from classification as a publicly supported organization, then that person may not rely on this determination as of the date he or she acquired such knowledge.

If you change your sources of support, your purposes, character, or method of operation, please let us know so we can consider the effect of the change on your exempt status and foundation status. If you amend your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, let us know all changes in your name or address.

As of January 1, 1984, you are liable for social security taxes under the Federal Insurance Contributions Act on amounts of \$100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the private foundation excise taxes under Chapter 42 of the Internal Revenue Code. However, you are not automatically exempt from other federal excise taxes. If you have any questions about excise, employment, or other federal taxes, please let us know.

Donors may deduct contributions to you as provided in section 170 of the Internal Revenue Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Donors may deduct contributions to you only to the extent that their contributions are gifts, with no consideration received. Ticket purchases and similar payments in conjunction with fundraising events may not necessarily qualify as deductible contributions, depending on the circumstances. Revenue Ruling 67-246, published in Cumulative Bulletin 1967-2, on page 104, gives guidelines regarding when taxpayers may deduct payments for admission to, or other participation in, fundraising activities for charity.

You are not required to file Form 990, Return of Organization Exempt From Income Tax, if your gross receipts each year are normally \$25,000 or less. If you receive a Form 990 package in the mail, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally \$25,000 or less, and sign the return. Because you will be treated as a public charity for return filing purposes during your entire advance ruling period, you should file Form 990 for each year in your advance ruling period that you exceed the \$25,000 filing threshold even if your sources of support do not satisfy the public support test specified in the heading of this letter.

## CASA OF CARSON CITY INC

If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. A penalty of \$20 a day is charged when a return is filed late, unless there is reasonable cause for the delay. However, the maximum penalty charged cannot exceed \$10,000 or 5 percent of your gross receipts for the year, whichever is less. For organizations with gross receipts exceeding \$1,000,000 in any year, the penalty is \$100 per day per return, unless there is reasonable cause for the delay. The maximum penalty for an organization with gross receipts exceeding \$1,000,000 shall not exceed \$50,000. This penalty may also be charged if a return is not complete. So, please be sure your return is complete before you file it.

You are not required to file federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You are required to make your annual return available for public inspection for three years after the return is due. You are also required to make available a copy of your exemption application, any supporting documents, and this exemption letter. Failure to make these documents available for public inspection may subject you to a penalty of \$20 per day for each day there is a failure to comply (up to a maximum of \$10,000 in the case of an annual return).

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, we will assign a number to you and advise you of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

If we said in the heading of this letter that an addendum applies, the addendum enclosed is an integral part of this letter.

Because this letter could help us resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

## CASA OF CARSON CITY INC

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,

District Director

Enclosure(s): Form 872-C

### **Guidelines for Grants**

Fiscal Year 2011-2012

### Vision

A leader among cities as an inviting, prosperous community where people live, work and play!

### Mission

Preserve and enhance the quality of life and heritage of Carson City for present and future generations of residents, workers and visitors.

### City's Goals

A Safe and Secure Community
A Healthy Community
An Active and Engaged Community
A Clean and Healthy Environment
A Vibrant, Diverse and Sustainable Economy
A Community Rich in History, Culture and the Arts
A Community Dedicated to Excellence in Education
A Physically and Socially Connected Community
A Community Where Information is Available to All

- 1. The competitive grant review process seeks to identify and fund those projects and programs with the greatest potential for furthering the City's goals while benefitting the community.
- 2. Funding is provided on a year to year basis only. Funding is strictly limited by the availability of funds.
- 3. Upon approval by the Board of Supervisors of the request, the grant money will be included in the next succeeding year's budget and will be dispensed by the City Manager's Office without further hearing. However, the Board shall continue to retain the prerogative and authority to deny any payment, if in the opinion of the Board, the applicant is not making a "good faith" effort in meeting the obligations and commitments outlined by said applicant within the application process. All grants approved shall be subject to funding availability.
- 4. The Board of Supervisors may in any event decide by majority vote to conduct a subsequent hearing concerning the application and, if so, the applicant will be notified as to the date of the subsequent hearing.
- 5. The applicant will utilize the grant monies solely for the general benefit of Carson City and the purpose set forth in the grant application.
- 6. These guidelines shall not prevent the City from entering into a contract to provide grant money for a term of years.
- 7. These guidelines shall not control any grants of money provided by any other public or private entity.

- 8. Approval of each request for funds and/or other forms of consideration shall have a condition that the applicant must complete an Annual Report form detailing all funds utilized, measurable outcomes and benefit to the citizens of Carson City. The completed Annual Report must be submitted to the City Manager's Office no later than March 1, 2011.
- Any and all individuals and/or entities desiring a grant from the City must complete and execute an "Application for Grant Funds" form and include the required attachments as listed in the application.
- 10. The <u>original and nine (9) copies</u> of the application packet must be submitted to the City Manager's Office no later than 5:00 p.m. on February 23, 2011. An electronic pdf version may also be e-mailed to cceo@carson.org.

I have read and understand the Guidelines for Grants. The information that is included within this application and its attachments are true to my knowledge.

Name of Program

Project Director Signature

Carson City Executive Offices 201 N. Carson Street, Suite 2 Carson City, NV 89701 775-887-2100 775-887-2286 (fax) cceo@carson.org www.carson.org



# CASA OF CARSON CITY COMMUNITY SUPPORT SERVICES GRANT 2011-2012

Signed Guidelines Annual Report 2010-2011 Application Form 990 IRS Letter

Thank you,

Chris Bayer

Director, cell 291-7014