Carson City
Grants Program Application
Fiscal Year 2013–2014

An electronic version of this document is available at carson.org/cdbg

APPLICATIONS ARE DUE*: **JANUARY 18, 2013, 4:00 P.M.**

PLEASE SUBMIT 9 COPIES TO: **CARSON CITY PLANNING DIVISION**
108 E. PROCTOR ST.
CARSON CITY, NV 89701

*The deadline established is **firm** Any proposal received **after** the deadline **will not** be considered for funding. **Applications must be unstapled. See attached instructions pg 15.**

GRANT APPLYING FOR: (check all that apply)

x Community Development Block Grant (CDBG)

x Community Support Services Grant (CSSG)

Total funding requested: $71,160

1. Agency Name: Carson City Community Counseling Center
2. Agency Mailing Address: 205 S Pratt Ave Carson City NV 89701
3. Project/Program Name: Evidence Based Substance Abuse Treatment and Practices
4. Project/Program Address/location: Same
5. Agency Director: Mary K Bryan
6. Board Chairperson: Robert J. Fliegler, MD
7. Contact person: Donya Jenkins/Susan Centanni
   Phone number: 775.882.3945 E-Mail: meadowmary@aol.com
   Fax: 775.882.6126 Website (if applicable)cccofcarsoncity.org
8. How long has your organization been in existence? 27 years In Carson City? 27 years
9. What is the overall mission of your organization?
   To provide high quality substance abuse treament of all levels from intake and assessment through outpatient, residential, and transitional care; to low and no income substance users/abusers/addicts and their families.
10. Type of funding requested (CDBG ONLY) (Check One):
    X Public Service
    ___ Public Facility/Improvement
    ___ Economic Development
    ___ Housing

BRIEF PROJECT DESCRIPTION:

Please provide a short description of your project/program (not your organization).

CCC will continue to meet the expanding need for services for alcohol and drug dependent youth, young adults(18-22), adults and families to meet the urgent need listed in the 5 year plan (2009-13) to provide substance abuse counseling and youth and family services including expanded and appropriate transitional housing in a new location.

I. PROJECT ELIGIBILITY

A. **Check <u>all</u> statements that describe HOW this project/program meets one of Carson City's goals:**

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

B. **For CDBG ONLY. This project/program meets at least ONE of the HUD national objectives listed below** (please check all that apply)

X______ 1. Benefits low/moderate income individuals/households
_______ 2. Addresses the prevention or elimination of slums or blight
X______ 3. Meets a particularly urgent community development need

C. **For CDBG ONLY. Check <u>all</u> statements that describe HOW this project/program meets one of the National Objectives above:**

X___ ***L/M Area Benefit***: the project meets the identified needs of L/M income persons residing in an area where at least 51% of those residents are L/M income persons. The benefits of this type of activity are available to all persons in the area regardless of income. ***Examples:*** street improvements, water/sewer lines, neighborhood facilities, façade improvements in neighborhood commercial districts.

X___ ***L/M Limited Clientele:*** the project benefits a specific group of people (rather than all the residents in a particular area), at least 51% of whom are L/M income persons. The following groups are presumed to be L/M: abused children, elderly persons, battered spouses, homeless, handicapped, illiterate persons. ***Examples:*** construction of a senior center, public services for the homeless, meals on wheels for elderly, construction of job training facilities for the handicapped.

____ ***L/M Housing:*** the project adds or improves permanent residential structures that will be occupied by L.M income households upon completion. Housing can be either owner or renter occupied units in either one family or multi-family structures. Rental units for L/M income persons must be occupied at affordable rents. Examples: acquisition of property for permanent housing, rehabilitation of permanent housing, conversion of non-residential structures into permanent housing.

____ ***L/M Jobs:*** the project creates or retains permanent jobs, at least 51% of which are taken by L/M income persons or considered to be available to L/M income persons. ***Examples:*** loans to pay for the expansion of a factory, assistance to a business which has publicly announced its intention to close with resultant loss of jobs, a majority of which are held by L/M persons.

____ ***Microenterprise Assistance:*** the project assists in the establishment of a microenterprise or assists persons developing a microenterprise. (A microenterprise is defined as having five or fewer employees, one or more of whom owns the business.) This activity must benefit low/moderate income persons, area or jobs as defined in previous sections.

____ ***Slum or Blighted Area:*** the project is in a designated slum/blight area and the result of this project addresses one or more of the conditions that qualified the area.

____ ***Spot Blight:*** the project will prevent or eliminate specific conditions of blight or physical decay outside a slum area. Activities are limited to clearance, historic preservation, rehabilitation of buildings, but only to the extent necessary to eliminate conditions detrimental to public health and safety. ***Examples:*** historic preservation of a public facility threatening public safety, demolition of a deteriorated, abandoned building.

C. Project/Program Category (check one):

X____ Public Service (i.e., a new service or an **increase** in the level of service

____ Public Facilities and Improvements (i.e., homeless shelter, water and sewer facilities, flood and drainage improvements, fire protection facilities/equipment, community, senior and health centers, parking, streets, curbs, gutters and sidewalks, parks and playgrounds).

____ Acquisition of Real Property

____ Disposition of Real Property (sale, lease or donation)

____ Privately-Owned Utilities

____ Relocation Payments and Assistance to Displaced Persons

____ Removal of Architectural Barriers, Handicapped Accessibility

____ Housing Rehabilitation

____ Historic Preservation

____ Commercial or Industrial Rehabilitation, including façade improvements and correction of code violations

____ Special Economic Development or assistance to microenterprises

II. PROJECT DESCRIPTION

The Five-year Consolidated Plan identifies priority community development needs for Carson City (see Appendix II). The need for your proposed project will be determined by identifying how the project impacts upon the adopted Consolidated Plan Priority Needs. Greater consideration will be given to projects/programs that provide a clear description of the project/program with supporting data and methodology of how the project will meet these needs.

1. Describe the proposed project/program, including how the project/program will address the National Objective indicated (CDBG ONLY) and whether the project/program is new, ongoing, or expanded from previous years.

   CCC proposes support for staff to continue the evidence based substance abuse treatment in the Carson community for adolescents and young adults. In addition to providing primary treatment for adolescents and young adults, CCC believes it is prudent for Carson City to open a halfway house for recovering addicts/alcoholics. There is no current offsite, licensed, and supervised transitional living home available in the area. The age group 12-17 continues to be a great concern as children who begin using before age 13 have a 43% chance of becoming alcoholic and a person who starts drinking at 21 has only a 10% chance. The age group 18-25 is also of great concer as it is the largest group of clients CCC has in treatment. The possibility of treatment causing a positive change in behavior before criminality and addiction set a path that will be difficult to escape makes the treatment of this age group extremely important. Justice Court Judge Thomas Armstrong stated on 1/6/13 "This community needs the positive long term impact of successful treatment on our young people. Not only should it reduce current and future social costs, it simply saves lives of our young people." Drug and alcohol abuse and dependence pose a serious threat to the health and welfare of our community.

2. If the proposed project/program already exists, please describe your success rates in providing services to low- to moderate-income persons:

   In 2012 CCC provided 100% of the proposed activities to low income clients and families. The grant services were provided to over 1000 different clients. There were 206 no charge adolescent evaluations completed and 424 different18-25 year old clients were assessed and provided services in 2012. These comprehensive evaluations require a minimum of 3 hours at a base cost of $50 per hour.The average length of treatment for a client is 6 months outpatient and 23 days residential. Every client received coaching to encourage sobriety & positive changes.

3. Describe who will benefit from the proposed project/program.

   Clients and their families benefit from substance abuse treatment in multiple ways, like finishing school, finding employment, paying overdue tickets, establishing stability in housing, re-acquiring social connectedness, healing famlies by providing parenting skills, and diminished use of the social services offered in Carson City. The citizens of Carson benefit by a diminished threat of theft, impaired driving, and a reduction in the use of the Emergency Room.

4. If your project is designed to serve a specific or limited clientele, please indicate the population you will be serving with your project/program:

X Abused Children	X Illiterate Persons	X Homeless Persons
X Battered Spouses	X Elderly	X Severely Disabled Adults
_____ Migrant Farm Workers	X Other (Please explain)	

5. For CDBG ONLY. If your project/program will not be serving one of the above limited clientele categories, explain how you will document client income and how you will document that at least 51% of your clientele will be low-to-moderate income:
All clients complete a statement of income when they are accepted into the program.

6. How will the funds be used on this project/program?
CDBG funds will be used to pay the salary, federal taxes, health benefits and training for the counselors who will be providing services. These counselors will be intern certified, fully certified, or licensed to work with the evidence based services necessary to treat youth and young adults with the best practices available.

7. Describe how your organization plans to reduce the need for grant funding in the future:
Each year CCC coordinates with Partnership Carson City, the City Supervisors, and other agencie to leverage new grants and develop new partnerships to establish new funding paths. As a non-profit, CCC is bound to provide services without client payment. New avenues are constantly sought for research grants and collaborations to provide funding to augment the treatment.

8. Could your organization use less than the amount of funds requested for the proposed project/program? Please explain.
CCC will use any amount received to apply to the needed full time positions. We appreciate any support we are able to obtain. It merely increases the number of clients we are able to serve.

9. Are there other agencies or organizations that provide the same service as your organization? If so, how do you coordinate your services with that organization?
CCC is the only State of Nevada Certified and licensed non-profit treatment agency in Carson City for adolescents, young adults and substance challenged families.

10. What is the geographic target area that will be served by this project/program?

☐ Target Area (specify geographic area) ____________________
OR
☒ Community-wide

For Public Improvement (construction) Projects <u>only</u>

1. Is the proposed project part of a larger project or is it a stand-alone project? (If part of a larger project, please describe the entire project.)

2. Can this project be done in different phases? _____ Yes _____ No
If YES, explain.

____
____
____
____

3. Have CDBG or CSSG funds been used for an earlier phase? _____ Yes _____ No

4. Who currently holds title to the property involved?

____
____
____

5. With whom will title be vested upon completion?

____
____
____

6. Do any rights-of-way, easements or other access rights need to be acquired?

_____ Yes _____ No _____ N/A

7. If the project requires water rights or well permits, have they been acquired?

_____ Yes _____ No _____ N/A

For CDBG Economic Development projects <u>only</u>:

1. Identify the proposed employers that will be assisted with this project; (b) describe how they will comply with the requirement that at least 51% of the permanent full-time jobs created are either held by or made available to LMI persons; and (c) explain how they will document the jobs created and the income levels of the persons hired.

____
____
____
____
____
____
____
____

For CDBG Housing Projects please indicate:

The number of homes to be rehabilitated: __________

The number of persons to be benefited: __________

III. PROJECT MEASUREMENT

Carson City has implemented a Performance and Outcome Measurement System into the application and grant/project administration process. When completing this section, keep in mind that ***outputs*** are specific descriptions of what your project is intended to accomplish (such as serve a total of 20 clients) and ***outcomes*** are the benefits or changes that result from the program (such as how well the service met the client needs).

1. What are the projected **outputs,** or total number of people served, from this program/project?

The adolescents, young adults, and families who receive these services will each have a detailed and thorough comprehensive substance abuse evaluation with recommendations for treatment including timelines and prognosis. The clients will participate in the placement recommended for their individual treatment. At least 23 different clients will receive treatment each 6 month period, for a total of 46 per year Each will receive a comprehensive eval, and all recommended treatment from 1.5 hours to 9 hrs per week

2. Of the total number of people in Question 1, how many of these are low-to-moderate income (LMI)? How many are Carson City residents?

One hundred percent of the 23-26 clients will be low income and Carson City residents. The income level is verified through required documentation of financial status which is part of each client file. CCC's clients are typically in the lowest 10% of income, or have no income when they begin receiving services. These financial documents are maintained in hard copy in each client file.

3. What is the projected **outcome** of this program/project? (How will the outputs benefit the total number of people in Question 1?)

In calendar year 2012 CCC provided services to over 200 adolescents. Clients ages 18-25 numbered 424. In 2011, CCC provided services to 104 outpatient youth, when the commitment was for 87. In 2013 CCC intends to provide adolescent and young adult services to over 150 different low income clients, and provide over 730 transitional bed nights to clients who are in need of housing and halfway services. In 2012, CCC provided over 3000 units of service to low income adolescents and young adults. The out come is sobriety, financial security, social networking, reduced law enforcement involvement, and school.

4. What procedures will be put into effect to create, compile and maintain data to track performance measurement for this program/project?

The quanitifiable outcome for the clients includes being gainfully employed, participating in a drug free environment, repairing relationships with family and friends, decreased involvement with law enforcement, increased educational opportunities and better grades, healthy socialization opportunities with sobriety a mainstay of the program, are just some of the projected outcomes of the program. These outcomes are captured on our electronic NHIPPS system which allows us to enter the data at intake and discharge.

IV. PROJECT BUDGET

Complete the Budget Summary chart. More detailed budgets may be attached in support of the proposal. Identify sources of leveraged funding for the activity. Include the status of these funds (i.e. cash on hand, grants received, planned fund-raising, etc.) Attach copies of funding commitment letters or other evidence of funding support.

Project/Program Title: **Project/Program Expenses FY 2013-14**	**Funds Requested**	**Leveraged Funds**	**Total Funds**
Salaries and Benefits	71160	45760	116920
Rent and Utilities		19200	
Mortgage			
Equipment			
Equipment Maintenance & Repair			
Office Supplies			
Operating Supplies			
Postage and Shipping			
Printing and Publications			
Advertising and Promotion			
Subscriptions and Dues			
Liability/Other Insurance			
Professional Fees			
Other project costs: (Specify Below)			
TOTALS	71160	64960	116920

V. PROJECT ADMINISTRATION

A. Provide the names, phone numbers and e-mails of the following people. (There may be more than one person responsible in each category. If the specific individual is not known, please give a job title):

1. The person to whom all questions regarding the application should be directed:
   Mary K Bryan, Administrator 775.882.3945; Susan Centanni, Deputy Administrator, 775.882.3945
   meadowmary@aol.com

2. The person directly responsible for on-site supervision of the project/program, such as a project manager:
   Susan Centanni, Deputy Administrator; Donya Jenkins, Administrative Assistant

3. The person responsible for the financial management of the project/program, including preparation, review and approval of reimbursement requests:
   Barbara Brownlee, 775.882.3945

4. Please list the name, address, phone number and e-mail of the person responsible for preparing the quarterly reports and tracking the performance on this program/project.
   Donya Jenkins 205 S Pratt Ave Carson City NV 89701 775.882.3945 meadowmary@aol.com

VI. AGENCY INFORMATION

1. Proof of non-profit status for private agencies (governmental entities and schools are exempt):

Date of incorporation	5/31/1985
Date of IRS certification	2/16/99
Tax exempt number	88-0212354

2. DUNS Number: 78-2755326
For information on DUNS, go to: http://www.ccr.gov/pdfs/DUNSGuideGovVendors.pdf

3. Attach the following to each copy of the Proposal for Funding:

   a. IRS Tax Exempt "501(c)(3)" letter.

   b. Proof of incorporation from Secretary of State (CERTIFICATE ONLY)

   c. Current organization chart with names of staff members. Staff members may not serve as a Board Member of the agency they work for.

   d. List of current Board of Directors and terms of office. If a member of your Board of Directors is in a position to obtain a financial benefit or interest from your proposed project, you may be ineligible for CDBG funds (See 24 CFR 570.611).

   e. *For all 501(c)(3) non-profit organization*s: a copy of the organization's most recently submitted Federal Tax Return (Form 990 or 990EX). Governmental bodies and schools are exempt from this requirement.

4. Required Certification (see instructions):

Applicant certifies that to the best of his/her knowledge, all information submitted as part of this application is true. Applicant will comply with all grant and contract requirements if funding is approved.

Mary K Bryan Signature of Authorized Official	1/16/13 Date
Mary K Bryan Administrator Typed Name and Title of Authorized Official	775 887 3945 Phone Number

Signature of President of Board of Directors	1/16/13 Date
Robert J. Fliegler, MD Typed Name of President of Board of Directors	775-841-7644 Phone Number

Carson City, a Consolidated Municipality

Annual Report

For Community Support Services Funding
Fiscal Year 2012-2013

Name of Organization: Community Counseling Center

Program/Project: Evidence-Based Substance Abuse Treatment

Amount of Funds Received $ 20,889.80 (out of $45,223)

Contact Person: Donya Jenkins/ Susan Centanni

Mailing Address: 205 S. Pratt Ave.

City: Carson City State: NV Zip Code: 89701

Phone Number: (775) 882-3945 E-mail: meadowmary@aol. com

Date Submitted: 01/16/2013

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

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

The number of beneficiaries of the relapse prevention and substance abuse services and evaluations was to be approximately 46 different individuals with 70 hours of counseling per week, for a total of 3500 hours per year. Each of these clients were to have an evaluation and follow up care. These clients were also to have treatment plans developed for them. In calendar year 2012 CCC provided services to over 200 adolescents, and to 424 clients ages 18-25. This was an increase from 2011. Also in 2012 CCC provided around 3600 units of service to the low income adolescents and young adults. Each of these clients received a comprehensive evaluation which consisted of at least 3 hours with the counselor, followed by a detailed written report with recommendations, diagnoses, prognosis, and detailed history of numerous areas such as legal, medical, psychiatric, work, education, family, alcohol and drug, and others. These clients also each had a treatment plan developed for them which they participated in developing, completing, and signing.

Ninety percent of the clients were able to find employment or obtain some type of assistance like Social Security disability during their time in treatment. Ongoing coaching toward the achievement of sobriety was provided to each client routinely. The groups also provided addiction education, craving management, avoidance of risky activities, like drinking alcohol and spending time with old drug/alcohol using friends, and 12 step activities. Specific referrals for family and mental issues were also done with 100% of the clients.

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

Services were provided to over 1000 different clients during the grant year. All the clients in this report are Carson City residents. Some of the individual benefits to clients were sobriety, financial security, social networking, reduced law enforcement involvement, and completion of educational goals.

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

The clients who enter recovery have a reduction in use of social services, emergency room use, child and family services, and legal involvement. Sober clients are at less risk to endanger our families by driving impaired.

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

This project will be re-occurring. Funding will continue to be found through grants, donations and fund raising.

6. Describe any challenges that impacted your program.

It was a relatively peaceful year. Funding is always an issue and a challenge. Finding grant sources, writing the grants, and obtaining the necessary materials to present is always challenging and somewhat time-consuming. Keeping staff trained at the level of excellence needed to work with substance abusing people is a challenge since they need to be away from the program for long periods of time.

11:01 AM

01/14/13

Accrual Basis

Community Counseling Center
Profit & Loss Budget vs. Actual
July 2011 through June 2012

	Jul '11 - Jun 12	Budget	$ Over Budget	% of Budget
Ordinary Income/Expense				
Income				
3020 · SAPTA Grant	1,246,999.21	1,399,026.00	-152,026.79	89.1%
3030 · Client Income	169,090.98	230,290.00	-61,199.02	73.4%
3031 · Client Income - Insurance				
3031-1 · Refunds	-846.02			
3031 · Client Income - Insurance - Other	21,055.73	21,000.00	55.73	100.3%
Total 3031 · Client Income - Insurance	20,209.71	21,000.00	-790.29	96.2%
3032 · Client Income from Collections	4,003.56	5,559.00	-1,555.44	72.0%
3040 · Donations	1,717.25	12,880.00	-11,162.75	13.3%
3050 · Fund Raising	0.00	8,500.00	-8,500.00	0.0%
3070 · United Way	25,419.00	51,614.98	-26,195.98	49.2%
3085 · NDOC-Recovery Treatment	5,600.00			
3087 · Dependency Court Council	33,009.95	10,405.00	22,604.95	317.3%
3088 · Comm Development Block Grant	13,788.23	14,500.00	-711.77	95.1%
3089 · Comm Service Youth Grant	0.00	4,000.00	-4,000.00	0.0%
3090 · Comm Services Grant	42,000.00	42,000.00	0.00	100.0%
3094 · Community Services COPS Grant				
3094-1 · COPs - Adult/Juvenile Evals	850.00			
3094-2 · COPs - Counseling	81,933.50	75,000.00	6,933.50	109.2%
Total 3094 · Community Services COPS Grant	82,783.50	75,000.00	7,783.50	110.4%
3095 · Douglas County Grant	6,500.00	10,000.00	-3,500.00	65.0%
3097 · Drug Court Grant				
3097-1 · Drug Court Residential Income	77,000.00	35,400.00	41,600.00	217.5%
3097-3 · Drug Court ADEP	648.00	1,380.00	-732.00	47.0%
3097-4 · Drug Court Outpatient clients	60,000.00	31,380.00	28,620.00	191.2%
3097 · Drug Court Grant - Other	239,866.00	332,562.50	-92,696.50	72.1%
Total 3097 · Drug Court Grant	377,514.00	400,722.50	-23,208.50	94.2%
3098 · Interest Income	12.14	500.25	-488.11	2.4%
3099 · Miscellaneous Income	2,395.56			
Total Income	2,031,043.09	2,285,997.73	-254,954.64	88.8%
Gross Profit	2,031,043.09	2,285,997.73	-254,954.64	88.8%
Expense				
4000 · Payroll				
4001 · Salaries	360,687.09	279,154.50	81,532.59	129.2%
4010 · Company FICA	20,702.54	17,319.50	3,383.04	119.5%
4011 · Company Medicare	4,849.79	4,046.00	803.79	119.9%
4012 · Company Workman's Comp	3,449.53	2,561.00	888.53	134.7%
4013 · Company NESD	14,315.38	2,936.00	11,379.38	487.6%
4020 · Company Health Ins	11,578.05	20,823.00	-9,244.95	55.6%
4050 · SIMPLE/Employer Paid	12,026.65	13,987.00	-1,960.35	86.0%
Total 4000 · Payroll	427,609.03	340,827.00	86,782.03	125.5%

Community Counseling Center
Profit & Loss Budget vs. Actual
July 2011 through June 2012

	Jul '11 - Jun 12	Budget	$ Over Budget	% of Budget
4532 · Postage	1,846.73	3,000.00	-1,153.27	61.6%
4535 · Dues & Subscriptions	1,521.00	1,815.00	-294.00	83.8%
4536 · Fees	9,130.55	6,289.50	2,841.05	145.2%
4537 · Bank Charges	77.54	52.50	25.04	147.7%
4538 · Payroll Service Expense	5,873.90	5,300.00	573.90	110.8%
4541 · Professional Services	25,826.09	6,750.00	19,076.09	382.6%
4542 · Staff Development	5,451.94	8,250.00	-2,798.06	66.1%
4543 · Contract Labor	10,973.61	25,000.00	-14,026.39	43.9%
4545 · Fund Raising Expense	2,060.89			
4546 · Donations	200.00	500.00	-300.00	40.0%
4551 · Staff Train/Certification	9,591.56	12,000.00	-2,408.44	79.9%
4553 · Insurance/Professional	234.00	4,250.00	-4,016.00	5.5%
4560 · Travel	3,326.68	4,125.00	-798.32	80.6%
4568 · UA Supplies	95.10			
4570 · Medical Supplies	1,219.15	900.00	319.15	135.5%
4571 · Ct Expense/Supplies	10,826.46	9,000.00	1,826.46	120.3%
4578 · Ct/Public Education	324.43	3,000.00	-2,675.57	10.8%
4580 · Residential Maint & Supplies	8,171.21	6,000.00	2,171.21	136.2%
4585 · Residential Supplemental Food	19,844.80	2,500.00	17,344.80	793.8%
4599 · Miscellaneous Expense	-1,110.34			
Total 4500 · Operating Expenses	203,084.90	160,958.00	42,126.90	126.2%
4600 · EAP Program	360.00			
7000 · Finance Charge & Fees	774.20	337.50	436.70	229.4%
Total Expense	2,058,242.05	2,275,874.86	-217,632.81	90.4%
Net Ordinary Income	-27,198.96	10,122.87	-37,321.83	-268.7%
Other Income/Expense				
Other Expense				
8000 · Interest Expense	3,497.81	3,349.34	148.47	104.4%
Total Other Expense	3,497.81	3,349.34	148.47	104.4%
Net Other Income	-3,497.81	-3,349.34	-148.47	104.4%
Net Income	-30,696.77	6,773.53	-37,470.30	-453.2%