Project Summary
Jack Hopkins Grant Application
The Overlook

The Overlook is requesting \$17,400 in order to contract the installation of a high efficiency, allelectric Mitsubishi heat pump system for heating and cooling our building. For several generations, this building had been heated by a wood stove alone. Now that we are scaling up the range of our events, we seek to install a modern HVAC system that could condition the space more safely and efficiently.

The current heating and cooling system is inadequate for sustaining the high level of community projects the Overlook undertakes. A new heating and cooling system would make the space accessible and comfortable and decrease maintenance needs. It would also lessen the energy use and pollution of the space, improving its environmental sustainability and cost efficiency in the long run.

These improvements would ensure the long-term durability of the physical space, sustaining the Overlook's broad range of community programs. These programs address multiple community development needs listed in the SCAN and Con Plan, and additional cultural activities which enrich the cultural life of the community for a broad constituency.

Name of Project to be Funded:

Installation of a high efficiency, all-electric Mitsubishi heat pump system for heating and cooling our building.

Amount Requested:

\$17,400	

Number of City Residents Served:

1000		

Number of Employees:

Full-Time	Part-Time	Volunteers
		25

Agency's Mission Statement:

The Overlook is a collective of community organizers, artists, non-profits, and makers creating a space for meetings, public events, non-profit efforts, political organizing, gardening, service-provision, information distribution and socializing. Housed in the former historic Godsey Cabinet Shop, our mission is to create a neighborhood center for community development serving the near west side neighborhoods. Purchased by neighbors pooling their money in 2017, the renovated building provides meeting space, community center facilities, and an event platform. It also continues the legacy of cabinetmaker Mac Moulden by hosting shared studio space for woodworking, in addition to textiles, printing, and photography. The building is the new home of the Glenn Carter Memorial Toolshare, the Midwest Pages to Prisoners Project, and the Neighborhood Planting Project, and hosts an expanding roster of community-driven programming as detailed below.

Project Synopsis:

We are requesting \$17,400 in order to contract the installation of a high efficiency, allelectric Mitsubishi heat pump system for heating and cooling our building. For several generations, this building had been heated by a wood stove alone, but now that we are scaling up the range of our events, we are hoping to install a modern HVAC system that could condition the space more safely and efficiently.

Need Addressed: (i.e. food, shelter, childcare)

Heating and cooling are prerequisites for full functioning of the Overlook's many projects, which address these SCAN and Con Plan priorities: food access; community development initiatives benefiting primarily low and moderate-income persons; community centers that provide a safe place for neighbors to congregate, hold events, and access the internet, particularly in low-income neighborhoods; and hubs for information related to services provided by the City.

<u> Type o</u>	<u>f Funding Sought:</u> (check all that apply)
	x Capital Investment
	Operational Funds
	Bridge Funding
	Pilot Project
	Collaborative Project
	Other (Please
S	pecify)

Item Name	Cost
1. Less efficient equipment	\$15,000

2.	
3.	
4.	
5.	
6.	
Total Requested	
Total Project Cost	

Year	Status	Title	Amount
N/A			

Staff Comments:

The Committee might want more information on how the project addresses previously-identified priorities for social services funding (i.e., in <u>SCAN</u>), specifically access to food. The Committee might also clarify whether the project could proceed with partial funding in an amount lower than \$15,000. It seems like the agency is requesting \$17,400 for a specific type of heat pump but could purchase a less efficient model for \$15,000. It's not clear whether partial funding under \$15,000 would be useful.

APPLICATION SUMMARY

Name of Lead Agency:

Purdue University – Purdue Extension Nutrition Education Program

Name of Project to be Funded:

Monroe County Food as Medicine

Amount Requested:

\$8,690

Number of City Residents Served:

30 families

Number of Employees:

Full-Time	Part-Time	Volunteers
3		

Please provide <u>brief</u> (one or two sentences) responses here. There is room in the application to expand on each of these questions.

Agency's Mission Statement:

The Purdue Extension Nutrition Education Program (NEP) works to improve the nutrition and health of audiences with limited resources in Indiana.

Project Synopsis:

We plan to offer an 8-week program that includes free meal kits for families combined with educational classes each week centered around eating right, spending smart and living well.

Need Addressed: (i.e. food, shelter, childcare)

Food		

Type of Funding Sought: (check	Type of Funding Sought: (check all that apply)		
Capital Investment			
Operational Funds			
Bridge Funding			
Pilot Project			
Collaborative Project			
X Other (Please Specify)	Project Funds		

Itemized Costs: (in order of priority)

Item Name	Cost
1. Meal kits and starter kits (2/week for 30 families of 4)	\$5,400
2. Food sourcing coordinator (at Rose Hill Farm Stop)	\$2,000
3. Participant Incentives (1/family at \$25 each)	\$750
4. Parks and Recreation Passes for Twin Lakes and the pool	\$540
5.	
6.	
Total Requested	\$8,690
Total Project Cost	\$8,690

For Office Use Only

Past SSF Funding:

Year	Status	Title	Amount

Staff Comments:

First-time applicant.

No answer was provided to the question asking how the project meets the one-time investment criterion (or, alternatively, what the agency plans to do for future operational funding).

APPLICATION SUMMARY

Name of Lead Agency:

Special Olympics Indiana Monroe County

Name of Project to be Funded:

Expansion of Athlete support

Amount Requested:

3,240.00

Number of City Residents Served:

100

Number of Employees:

Full-Time	Part-Time	Volunteers
		96

Please provide <u>brief</u> (one or two sentences) responses here. There is room in the application to expand on each of these questions.

Agency's Mission Statement:

Special Olympics Indiana Monroe County offers year-round sports training and athletic competition for children and adults with intellectual, cognitive and learning disabilities. SOIMC works to empower athletes to shatter stereotypes and exceed their personal goals both on and off the field.

Project Synopsis:

Rental of basketball courts at Twin Lakes Sports Complex					

Need Addressed: (i.e. food, shelter, childcare)

	Facility rental
<u> Type</u>	of Funding Sought: (check all that apply)
	Capital Investment
	Operational Funds
	Bridge Funding
	Pilot Project
	Collaborative Project
	X Other (Please Specify) Facility rental

<u>Itemized Costs:</u> (in order of priority)

Item Name	Cost
1. 3 Basketball courts for 2 hours each for 18 weeks @ \$30 per	3,240.00
2.	
3.	
4.	
5.	
6.	
Total Requested	3,240.00
Total Project Cost	3,240.00

For Office Use Only

Past SSF Funding:

Year	Status	Title	Amount
2019	Granted	Equipment and Team expansion support	\$5,714

Staff Comments:

Applicant is requesting funding to rent a city-owned facility. The Committee might wish to inquire with Parks and Rec staff about other avenues to support this project.				



CONTACT INFORMATION

Lead Age	ency Name:	The Overlook (The Center for Sustainable Living DBA The Overlook)
Address	011 77 120	n St. on IN 47404
Phone:	none	
E-Mail: Website	http://tho	k.bloomington@gmail.com overlookbloomington.org/
Presider	nt of Board of	Directors: Woodie Bessler
Name of	Executive Di	rector: none
Phone:	812-391-2	2259
E-Mail:	woodie@i	cloud.com
Name of Phone: E-Mail:	Grant Writer 213-595- mseigel@	

AGENCY INFORMATION

s the Lea	d Agency a 501(c)(3)?
Χ	Yes
	No

Number of Employees:

Full-Time	Part-Time	Volunteers	
0	0	25	

MISSION STATEMENT (150 words or less)

Note to faith-based applicants: If your organization is a faith-based agency, please provide the mission statement of your proposed project, <u>not</u> your agency. Please further note: 1) Hopkins funds may never be used for inherently religious activity; 2) Any religious activity must be separate in time or place from Hopkins-funded activity; 3) Religious instruction cannot be a condition for the receipt of services; and 4) Any Hopkins program must be open to all without a faith test.

The Overlook is a collective of community organizers, artists, non-profits, and makers creating a space for meetings, public events, non-profit efforts, political organizing, gardening, service-provision, information distribution and socializing. Housed in the former historic Godsey Cabinet Shop, our mission is to create a neighborhood center for community development serving the near west side neighborhoods. Purchased by neighbors pooling their money in 2017, the renovated building provides meeting space, community center facilities, and an event platform. It also continues the legacy of cabinetmaker Mac Moulden by hosting shared studio space for woodworking, in addition to textiles, printing, and photography. The building is the new home of the Glenn Carter Memorial Toolshare, the Midwest Pages to Prisoners Project, and the Neighborhood Planting Project, and hosts an expanding roster of community-driven programming as detailed below.

PROJECT INFORMATION

Name of the <u>project</u> to be funded:	
HVAC	
Total cost of project: 17,400	
Requested amount of Jack Hopkins funding:	17,400
Number of <u>City residents</u> to be served by this	s project in 2023: 1000
Number of <u>clients</u> to be served by this projec	et in 2023: N/A

PROJECT SYNOPSIS (200 words or less)

Describe the project to be funded. Begin your synopsis with the amount you are requesting and a concrete description of your proposed project. *Example - "We are requesting \$7,000 for an energy-efficient freezer to expand our emergency food service program."*

We are requesting \$17,400 in order to contract the installation of a high efficiency, all-electric Mitsubishi heat pump system for heating and cooling our building. For several generations, this building had been heated by a wood stove alone, but now that we are scaling up the range of our events, we are hoping to install a modern HVAC system that could condition the space more safely and efficiently.

As part of the growing, climate-conscious movement to "electrify everything," we have opted for a high efficiency, electric heat pump rather than a traditional gas furnace. Our eventual goal is to install solar panels on the roof of our building that could be used to power our heat pumps in addition to our other electrical loads. We have worked with a reputable, locally-owned contractor to select a system with a high SEER efficiency rating that is rated to work effectively and efficiently in our climate zone. The system will come with a 10 year parts warranty and the contractor has agreed to donate a 10 year service contract to help clean and maintain the system, free of charge.

COLLABORATIVE PROJECTS

Is this a colla	borative	project?						
Ye	S	X No						
If yes, list the	name(s) of agency	y partner((s)				
. 1					1			
How do your	mission	s, operatio	ons ana se	ervices co	ompiem	ent eacr	otner?	
What is the e	xisting r	elationshi	ip betweei	n agenci	es?			
How will con	ımunica	tion and c	oordinatio	on chang	ge as a re	esult of t	he proje	ect?
Explain any o	halleng	os and stea	nc vou nla	n to take	to addr	ess that	se challe	nges
	nanciig	zs and step	ps you pla	ii to tane	, to addi	C33 til03	c chanc	115031

For collaborative projects, please attach a signed Memorandum of Understanding to this application.

PROJECT LOCATION

Address where the project will be housed (if diffe	erent than a	gency addres	ss):
N/a (same)			
Do you own or have site control of the property a X Yes No N/A	ıt which th	e project is t	to take place?
If you are seeking funds for capital improvement own the property at which the project will take p interest in the property. For example, how long has the a contract/option to purchase? If you rent, how long have you of the lease? Be prepared to provide a copy of your deed, pur the Committee's request.	olace, pleas e project been u rented this j	se explain yon housed at the sproperty and w	our long-term site? Do you have what is the length
n/a			
Is the property zoned for your intended use? If "no," please explain:	X Yes	No	N/A
If permits, variances, or other forms of approval indicate whether the approval has been received	_	_	-
the entity from which the permitting or approval is sought an permit or approval. <i>Note: Funds will not be disbursed until all</i>	nd the length	of time it takes	to secure the
N/A		_	_

PROJECT COSTS

Is this request for operational funds? (e.g., salaries, rent, vouchers, etc), Yes X No
If "yes," indicate the nature of the operational request: Pilot Bridge Collaborative
None of the above – General request for operational funds
Other Expected Project Funds: (Indicate source, amount, and whether confirmed or pending):
none
Describe when you plan to submit your claims for reimbursement and what steps precede a complete draw down of funds: We plan to submit our claims for reimbursement within approximately one month of the grant being
We plan to submit our claims for reimbursement within approximately one month of the grant being awarded. Our HVAC contractor has allotted time in mid-late July to do the installation, which will likely take about one week to complete. Once his work is completed, we will promptly file our reimbursement claim.
If completion of your project depends on other anticipated funding, please describe when those funds are expected to be received:
N/a
FISCAL LEVERAGING (100 words or less) Describe how your project will leverage other resources (e.g., other funds, in-kind contributions, or volunteers.)
The sympathetic HVAC contractor has given us a generous quote, significantly under several other quotes we received. He also has agreed to perform annual maintenance on the system for 10 years for no cost to us.
Additionally, we have secured volunteer labor to help clear shrubbery around the building and pour

concrete pads where the heat pump condensers will be secured.

FUNDING PRIORITIES - RANKED

If the Committee	is unable to meet your full request, will you be able to proceed with
partial funding?	(Due to limited funds, the Committee may recommend partial funding for a program)
X Yes	No

If "yes", provide an itemized list of program elements, ranked by priority:

	Item	Cost
Priority #1	Less efficient equipment	15,000
Priority #2		
Priority #3		
Priority #4		
Priority #5		
Priority #6		
Priority #7		
Total Requested		

JACK HOPKINS FUNDING CRITERIA

NEED (200 words or less)

Explain how your project addresses a previously-identified priority for social services funding as documented in the <u>Service Community Assessment of Needs</u>, the City of Bloomington, Housing and Neighborhood Development Department's <u>2020-2024 Consolidated Plan</u>, or any other community-wide survey of social service needs.

Heating and cooling are prerequisites for full functioning of the Overlook's many projects, which address these SCAN and Con Plan priorities: food access; community development initiatives benefiting primarily low and moderate-income persons; community centers that provide a safe place for neighbors to congregate, hold events, and access the internet, particularly in low-income neighborhoods; and hubs for information related to services provided by the City. (Located in Maple Heights, the Overlook serves these neighborhoods, including Trailview, Ferguson, Crestmont, Pigeon Hill and near west side). The Neighborhood Planting Project addresses food access by distributing food trees (fruit and nut); this year the project offered 12,000 saplings. The meeting space offers a platform for a range of initiatives, some already meeting there: twelve-step programs (NA), yoga and meditation groups, arts workshops, and an Iranian-American support group formed to address the political protests in fall 2022. Without HVAC, groups huddled around the wood stove or suffered the heat at picnic tables outside. Climate control would immediately expand their operations and allow other groups to form, meet, and plan events. It would also allow people to stop by to use the internet and bulletin boards, which will display public postings and information about city services.

ONE-TIME INVESTMENT (100 words or less)

Jack Hopkins Funds are intended to be a one-time investment. Explain how your project fits this criterion. If you are requesting operational funds (e.g., salaries, rent, vouchers, etc), please explain how your project satisfies an exception to the one-time funding rule (pilot, bridge, or collaborative). If you are requesting operational funds that <u>do not</u> satisfy one of the aforementioned exceptions, but your request is being made pursuant to the 2023 allowance for operational funds, please make that clear. If you are requesting operational funding, you must detail your plan for future funding.

We are making a one-time purchase of an HVAC system which we expect to last several decades. Currently we do not have HVAC; we have been subsisting on a wood stove and with no air conditioning. The building is inaccessible in some seasons and for some people without HVAC.

LONG-TERM BENEFITS (200 words or less)

How will your project have broad and long-lasting benefits for our community?

The current heating and cooling system is inadequate for sustaining the high level of community projects the Overlook undertakes. A new heating and cooling system would make the space accessible and comfortable and decrease maintenance needs. It would also lessen the energy use and pollution of the space, improving its environmental sustainability and cost efficiency in the long run.

These improvements would ensure the long-term durability of the physical space, sustaining the Overlook's broad range of community programs. As mentioned above, these programs address multiple community development needs listed in the SCAN and Con Plan, and additional cultural activities which enrich the cultural life of the community for a broad constituency.

OUTCOME INDICATORS (100 words or less)

Describe the outcome indicators to be used to measure the success of your project.

The ultimate outcome of a project (e.g., reduced hunger, homelessness or addiction rates) are often not readily observable within the Jack Hopkins funding period. For that reason, we are asking agencies to provide us with outcome indicators. In contrast to program activities (what you bought or did with grant funds) and the long-term impacts of a program (the lasting social change effected by your initiative), the data we seek are the short-term, preferably quantitative indicators used to measure the change your program has created during the period of your funding agreement. *Example: an agency providing a service might cite to the number of persons with new or improved access to a service.*

The effect of the JH grant would be to equip the Overlook to operate all its projects at full capacity. Our outcome indicators involve the number of people, roster of groups, calendar of events and count of individuals regularly using the space, whether as a meeting space or a drop-in center for internet use, information gathering, neighborhood socializing and larger-scale, one-time cultural and political community events. We will count all of these in a chart, naming the groups using the space, volunteers helping with upkeep and organization, and individuals attending meetings, enjoying one-time events, or stopping by to use the space.

OTHER COMMENTS (500 words or less)

Use this space to provide other information you think the Committee would find useful. Any additional comments should supplement, not restate, information provided in the foregoing.				



Tuttle Heating and AC Bloomington, IN (812) 668-9276 LICENSE EPA 608 Universal

CUSTOMER

The Overlook
The Overlook

611 W 12th St

Bloomington IN 47404

APPROVAL

I have the authority to order the work as outlined above. It is agreed that the seller will retain title to any equipment or material that may be furnished until final payment is made, and if settlement is not made as agreed, the seller shall have the right to remove same and the seller will be held harmless for any damages resulting from the removal thereof.

Mar 30 2023 07:25 PM

Best

Date: Mar 30 2023

Service At: 611 W 12th St

Bloomington IN 47404

OPEN

Tech **Bradley**Order# / Name
CHARGEABLE

Service Call # 01046

SERVICE REQUESTED

Time Requested:

WORK PERFORMED/RECOMMENDATIONS

Quote #1 (High efficiency)

\$17,400.00

Single Zone 9k BTU (26 SEER) Mitsubishi HyperHeat Heat Pump (NW room)

Multi-zone 9K + 24K BTU (20 SEER) Mitsubishi HyperHeat Heat Pump (Main room and back room)

Cost includes full cost of equipment and installation, including high voltage electrical wiring. This equipment has the highest available SEER ratings which will save a significant amount of electricity during peak heating and cooling. Includes a 10 years parts warranty from Mitsubishi. Additionally, I have agreed to provide a 10 years of annual maintenance for no additional cost. In exchange for lowering my quote by \$500, the customer has agreed to remove shrubbery and pour two 2.5' x 4' concrete pads where condensing units will reside.

continued on next page

Date Completed Mar 30 2023

PAYMENT/TERMS

Thank your for your business and please call anytime for regular seasonal maintenance or repair.



Tuttle Heating and AC
Bloomington, IN
(812) 668-9276
LICENSE EPA 608 Universal

Date: Mar 30 2023
Service At: 611 W 12th St

Bloomington IN 47404 Tech Bradley
Order# / Name
CHARGEABLE

Service Call # 01046

OPEN

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WORK PERFORMED/RECOMMENDATIONS - Continued

Quote #2 (Low efficiency)

\$16,000.00

Single Zone 9k BTU (18 SEER) Mitsubishi HyperHeat Heat Pump (NW room)

Multi-zone 9K + 24K BTU (16 SEER) Mitsubishi HyperHeat Heat Pump (Main room and back room)

Cost includes full cost of equipment and installation, including high voltage electrical wiring. Additionally, I have agreed to provide a 10 years of annual maintenance for no additional cost. In exchange for lowering my quote by \$500, the customer has agreed to remove shrubbery and pour two 2.5' x 4' concrete pads where condensing units will reside.



Center for Sustainable Living, Inc

Profit and Loss for CSL dba Overlook Project January - December 2021

	THE OVERLOOK	TOTAL
Revenue		
4000 Donations		\$0.00
4050 Individual Donations	3,030.00	\$3,030.00
Total 4000 Donations	3,030.00	\$3,030.00
4200 Grants		\$0.00
4250 Government Grants		\$0.00
4253 Local Government Grants	9,000.00	\$9,000.00
Total 4250 Government Grants	9,000.00	\$9,000.00
4350 Organization Grants	500.00	\$500.00
Total 4200 Grants	9,500.00	\$9,500.00
Total Revenue	\$12,530.00	\$12,530.00
GROSS PROFIT	\$12,530.00	\$12,530.00
Expenditures		
6400 Operating Expenses		\$0.00
6410 Space Rental	311.02	\$311.02
6420 Utilities	466.91	\$466.91
Total 6400 Operating Expenses	777.93	\$777.93
6600 Program Expenses		\$0.00
6630 Program Materials	6,043.90	\$6,043.90
Total 6600 Program Expenses	6,043.90	\$6,043.90
7100 Merchant Account Fees	1.26	\$1.26
Total Expenditures	\$6,823.09	\$6,823.09
NET OPERATING REVENUE	\$5,706.91	\$5,706.91
NET REVENUE	\$5,706.91	\$5,706.91



CENTER FOR SUSTAINABLE LIVING INC PO BOX 1665 BLOOMINGTON, IN 47402

01/11/2021 Employer ID number: 31-1074237 Person to contact: Name: D. Trimble ID number: 31309 Telephone: 877-829-5500 Accounting period ending: December 31 Public charity status: 509(a)(2) Form 990 / 990-EZ / 990-N required: Yes Effective date of exemption: May 15, 2019 Contribution deductibility: Yes Addendum applies: No 26053633001730

Date:

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

Based on the information you submitted with your application, we approved your request for reinstatement under Revenue Procedure 2014-11. Your effective date of exemption, as listed at the top of this letter, is retroactive to your date of revocation.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

stephene a martin

Stephen A. Martin Director, Exempt Organizations Rulings and Agreements



CONTACT INFORMATION

001111		1-11111011			
Lead Age	ency Name:	Purdue Unive	ersity - Purdue I	Extension Nutrition Ed	lucation Program
Address	2550 North 1900	Program Sei western Avei rette, IN 4790	nue, Suite		
Phone:	765-494-6	6204		_	
E-Mail: Website:	<u> </u>	@purdue.e			
			Michael	_	
Presiden	nt of Board of	Directors:	Micriaer	Dergrion	
Name of	Executive Di	rector: Ar	ngela Abbo	<u>ott</u>	
Phone:	765-494-82	252			
E-Mail:	abbottar@p	ourdue.edu	<u>u</u>		
	Grant Writer 812-679-79		Eakin		
Phone:					
E-Mail:	aeakin@pı	<u>uraue.eau</u>		_	

AGENCY INFORMATION

Is the Lead Agenc	y a 501(c)(3)?		
× Yes			
No			
Number of Emplo	yees:		
Full-Time	Part-Time	Volunteers	
3			
	1		
MISSION STATEM	ENT (150 words or les	cs)	
statement of your pro- used for inherently re Hopkins-funded activi	posed project, <u>not</u> your aş ligious activity; 2) Any rel	gency. Please further note: ligious activity must be sep on cannot be a condition fo	ncy, please provide the mission 1) Hopkins funds may never be parate in time or place from r the receipt of services; and 4)
The Purdue Extension Nutrition Education Program (NEP) works to improve the nutrition and health of audiences with limited resources in Indiana.			

PROJECT INFORMATION

Name of the <u>project</u> to be funded:

Monroe County Food as Medicine

Total cost of project:

\$8.690

Requested amount of Jack Hopkins funding:

\$8,690

30 families Number of <u>City residents</u> to be served by this project in 2023:

30 families

Number of clients to be served by this project in 2023:

PROJECT SYNOPSIS (200 words or less)

Describe the project to be funded. Begin your synopsis with the amount you are requesting and a concrete description of your proposed project. *Example - "We are requesting \$7,000 for an energy-efficient"* freezer to expand our emergency food service program."

We are requesting \$8,690 for our Monroe County Food as Medicine Program. Our model includes community partnerships: City of Bloomington Parks and Recreation, nutrition education professionals from Purdue Extension, and local food producers and/or suppliers sourced through Rose Hill Farm Stop. We plan to offer an 8-week program that includes free meal kits for families combined with educational classes each week centered around eating right, spending smart and living well. Classes will be held and two meal kits will be distributed at Banneker Community Center which is in an area with a great amount of diversity and one of the highest uses of SNAP in the county. Nutritious and culturally appropriate food will be distributed with nutrition and cooking education to people with heightened vulnerability to promote a healthy diet.

Participants will be encouraged to prepare their meals at home with the provided ingredients while referencing the materials provided during the educational session. All recipes and food boxes will be prepared and selected based on community specific needs of our participants. We anticipate seeing an increased number of participants eating fresh fruits and vegetables and engaging in physical activity, and increased nutrition and health knowledge by participants.

COLLABORATIVE PROJECTS

Is this a collaborative project?
Yes x No
If yes, list the name(s) of agency partner(s)
How do your missions, operations and services complement each other?
What is the existing relationship between agencies?
How will communication and coordination change as a result of the project?
Explain any challenges and steps you plan to take to address those challenges.

For collaborative projects, please attach a signed Memorandum of Understanding to this application.

PROJECT LOCATION

Address where the project will be housed (if different than agency address):
Banneker Community Center 930 W 7th St, Bloomington, IN 47404
Do you own or have site control of the property at which the project is to take place? X Yes No N/A
If you are seeking funds for capital improvements to real estate <u>and</u> if you do not own the property at which the project will take place, please explain your long-term interest in the property. For example, how long has the project been housed at the site? Do you have a contract/option to purchase? If you rent, how long have you rented this property and what is the length of the lease? Be prepared to provide a copy of your deed, purchase agreement, or lease agreement upon the Committee's request.
N/A
Is the property zoned for your intended use? If "no," please explain: Yes No X N/A
If permits, variances, or other forms of approval are required for your project, please indicate whether the approval has been received. If it has not been received, please indicate
the entity from which the permitting or approval is sought and the length of time it takes to secure the permit or approval. <i>Note: Funds will not be disbursed until all requisite variances or approvals are obtained.</i>
N/A

PROJECT COSTS

Is this request for operational funds? (e.g., salaries, rent, vouchers, etc), Yes No
If "yes," indicate the nature of the operational request: Pilot Bridge Collaborative None of the above – General request for operational funds
Other Expected Project Funds: (Indicate source, amount, and whether confirmed or pending):
City of Bloomington Parks and Recreation will provide facility space and staff time and print materials (when needed).
Describe when you plan to submit your claims for reimbursement and what steps precede a complete draw down of funds:
Purdue University follows account management guidelines for sponsored projects and requests cost reimbursement.
If completion of your project depends on other anticipated funding, please describe when those funds are expected to be received:
So far, there are no other funding sources for this project. We intend to apply for a grant for 2024 in a multi-county collaborative in hopes of securing sustainable funding for the future and program expansion.
FISCAL LEVERAGING (100 words or less) Describe how your project will leverage other resources (e.g., other funds, in-kind contributions, or volunteers.)
Facility provided by City of Bloomington Parks and Recreation

FUNDING PRIORITIES – RANKED

If the Committee	is unable to meet your full request, will you be able to proceed with
partial funding?	(Due to limited funds, the Committee may recommend partial funding for a program)

X Yes No

If "yes", provide an itemized list of program elements, ranked by priority:

	Item	Cost
Priority #1	Meal kits and starter kits (2/week for 30 families of 4)	\$5,400
Priority #2	Food sourcing coordinator (for sourcing and aggregating of food at Rose Hill Farm Stop)	\$2,000
Priority #3	Participant Incentives (1/family at \$25 each)	\$750
Priority #4	Parks & Recreation Passes for Twin Lakes and the pools	\$540
Priority #5		
Priority #6		
Priority #7		
Total Requested		\$8,690

JACK HOPKINS FUNDING CRITERIA

NEED (200 words or less)

Explain how your project addresses a previously-identified priority for social services funding as documented in the <u>Service Community Assessment of Needs</u>, the City of Bloomington, Housing and Neighborhood Development Department's <u>2020-2024 Consolidated Plan</u>, or any other community-wide survey of social service needs.

Food insecurity plagues about 17%, over 24,000 people, of Monroe County most of which are from lower income communities. This can lead to less access to healthy foods resulting in a nutrition desert. Addressing food insecurity can lead to improved health outcomes, improved mental health and improved wellness, all which can have compounding effects of helping residents become secure in other aspects of their wellbeing.

The Food as Medicine program will be held at Banneker Community Center and serve many of its community members. In a community with a high usage of SNAP, and therefore many food insecure households, this is one way to invest in the health of its people and ultimately give back to an unrightfully deprived, yet resilient community. Addressing food insecurity and nutrition education will positively impact mental health and lessen medical bills as well as address decreasing and healing chronic illnesses.

https://bloomington.in.gov/sites/default/files/2021-04/Bloomington%20CAP%2006%20Local%20Food%20and%20Agriculture.pdf

https://map.feedingamerica.org/county/2017/overall/indiana/county/monroe

ONE-TIME INVESTMENT (100 words or less)

Jack Hopkins Funds are intended to be a one-time investment. Explain how your project fits this criterion. If you are requesting operational funds (e.g., salaries, rent, vouchers, etc), please explain how your project satisfies an exception to the one-time funding rule (pilot, bridge, or collaborative). If you are requesting operational funds that <u>do not</u> satisfy one of the aforementioned exceptions, but your request is being made pursuant to the 2023 allowance for operational funds, please make that clear. If you are requesting operational funding, you must detail your plan for future funding.

N/A			

LONG-TERM BENEFITS (200 words or less)

How will your project have broad and long-lasting benefits for our community?

The Monroe County Food as Medicine program will help to address food insecurity in our county. The health knowledge gained will aid participants in making health conscious choices and expose them to methods of increased physical activity and other forms of wellness to reduce a sedentary lifestyle. It will increase community partnerships allowing more collaborative efforts to address community needs with stronger resources rather than the duplication of efforts. It will also expose and encourage the purchase and consumption of locally sourced food primarily fruits and vegetables.

OUTCOME INDICATORS (100 words or less)

Describe the outcome indicators to be used to measure the success of your project.

The ultimate outcome of a project (e.g., reduced hunger, homelessness or addiction rates) are often not readily observable within the Jack Hopkins funding period. For that reason, we are asking agencies to provide us with outcome indicators. In contrast to program activities (what you bought or did with grant funds) and the long-term impacts of a program (the lasting social change effected by your initiative), the data we seek are the short-term, preferably quantitative indicators used to measure the change your program has created during the period of your funding agreement. *Example: an agency providing a service might cite to the number of persons with new or improved access to a service.*

We anticipate seeing an increased number of participants eating fresh fruits and vegetables and engaging in physical activity, increased nutrition and health knowledge by participants, and increased collaboration between sectors to address local needs. Collectively, the success of the program will be evaluated by assessing participation, continued participation and engagement, number of meal kits distributed, and feedback gathered from participants.

OTHER COMMENTS (500 words or less)

Use this space to provide other information you think the Committee would find useful. An additional comments should supplement, not restate, information provided in the Foregoing.					

2023 Proposed Project Budget

Purdue Extension Nutrition Education Program		Food As Medicine		
Total Projec	Total Project Cost		\$8,690	
	Totals	Other Income Sources	JHSS Grant	
FUNDS				
JHSS Grant			8690	
Other Grants				
Other Income Sources				
TOTAL PROJECT FUNDS			8690	
EXPENSES				
Food Sourcing Coordinator			2000	
Starter Kits (spices, oil, etc.)			600	
Meal Kits			4800	
Participant Completion Incentives			750	
City Pool Day Pass			300	
Twin Lakes Recreation Center Day Pass			240	
TOTAL PROJECT EXPENSES			8690	

Internal Revenue Service

Department of the Treasury

District Director

Purdue University
Accounting Services

Freehafer Hall West Lafayette, IN 47907 P. O. Box 2508 Cincinnati, OH 45201

Person to Contact:
 Helen A. Miley
Telephone Number:
 513-684-3578
Refer Reply to:
 EP/EO Division
EIN:
 35-6002041
Date:
 September 29, 1987

Dear Sir or Madem:

This is in response to your request for verification of your exempt status.

Our records indicate that your organization was recognized as exempt from Federal income tax in December, 1935, under section 101(6) of the Internal Revenue Code of 1939, which corresponds with section 501(c)(3) of the Internal Revene Code of 1986.

Based on the information submitted we have classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Code because you are an organization described in sections 509(a)(1) and 170(b)(1)(A)(11).

This classification is based on the assumption that your operations would continue as stated in the information you submitted. If your sources of support, purposes, character, or method of operation have changed, please let us know so we can consider the effect of the change on your exempt status and foundation status.

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

Sincerely yours,

Harold M. Browning District Director



CONTACT INFORMATION

Lead Agency Name:		Special Olympics Indiana	a Monroe County
Address:	641 E. Wate Bloomingto		
Phone:	812-340	-0955	
E-Mail: Website:	soimc.co	c@gmail.com	
Presiden	t of Board of	Directors: N/A	
	Executive Dia 317-328-2		ng
Name of O Phone: E-Mail:	Grant Writer 812-361-4 lisaloo44		

AGENCY INFORMATION

is the Lead Agency	/ a 501(c)(3)?		
X Yes			
No			
Number of Employ	yees:		
Full-Time	Part-Time	Volunteers	
0	0	96	
			•
MISSION STATEMI	ENT (150 words or less)		
statement of your prop used for inherently reli Hopkins-funded activit	pplicants: If your organization is a posed project, <u>not</u> your agency. Ple igious activity; 2) Any religious act ty; 3) Religious instruction cannot must be open to all without a faith	ase further note: 1) Hopkins funds civity must be separate in time or p be a condition for the receipt of se	s may never be place from
offers year-round spo intellectual, cognitive, sterotypes and excee opportunities for athle	thers in the community, Special Corts training and athletic competition, and learning disabilities. The SC and their personal goals both on an etes to develop physical fitness, diship with others in our communit	on for childern (8 yrs and up) and DIMC works to empower athletes ad off the field. The SOIMC providemostrate courage, experience j	d adults with s to shatter des

PROJECT INFORMATION

Athlete Expansion Support	
Total cost of project:	
Requested amount of Jack Hopkins fund	ing: 3,240.00
Number of <u>City residents</u> to be served by	
Number of <u>clients</u> to be served by this pr	roject in 2023: 100
	ample - "We are requesting \$7,000 for an energy-efficie
freezer to expand our emergency food service progr	
Sports Complex. Since COVID we are struggling program. Currently, we are using multiple school to make changes to the schedule or even cance Additionally having practices in one location and	•
Sports Complex. Since COVID we are struggling program. Currently, we are using multiple school to make changes to the schedule or even cance Additionally having practices in one location and	g to find court space for our ever going baskball ols and different days of the week, We often have practices, if a facility has another program
Sports Complex. Since COVID we are strugglin	g to find court space for our ever going baskball ols and different days of the week, We often have practices, if a facility has another program
Sports Complex. Since COVID we are struggling program. Currently, we are using multiple school to make changes to the schedule or even cance Additionally having practices in one location and	g to find court space for our ever going baskball ols and different days of the week, We often have practices, if a facility has another program

COLLABORATIVE PROJECTS

Is this a collaborative project?
Yes X No
If yes, list the name(s) of agency partner(s)
How do your missions, operations and services complement each other?
What is the existing relationship between agencies?
How will communication and coordination change as a result of the project?
Explain any challenges and steps you plan to take to address those challenges.

For collaborative projects, please attach a signed Memorandum of Understanding to this application.

PROJECT LOCATION

Address where the project will be housed (if different than agency address):
Do you own or have site control of the property at which the project is to take place? X Yes No N/A
If you are seeking funds for capital improvements to real estate <u>and</u> if you do not own the property at which the project will take place, please explain your long-term interest in the property. For example, how long has the project been housed at the site? Do you have a contract/option to purchase? If you rent, how long have you rented this property and what is the length of the lease? Be prepared to provide a copy of your deed, purchase agreement, or lease agreement upon the Committee's request.
N/A
Is the property zoned for your intended use? If "no," please explain: Yes No X N/A
If permits, variances, or other forms of approval are required for your project, please indicate whether the approval has been received. If it has not been received, please indicate the entity from which the permitting or approval is sought and the length of time it takes to secure the permit or approval. Note: Funds will not be disbursed until all requisite variances or approvals are obtained.

PROJECT COSTS

Is this request for operational funds? (e.g., salaries, rent, vouchers, etc), Yes No
If "yes," indicate the nature of the operational request: Pilot Bridge Collaborative None of the above – General request for operational funds
Other Expected Project Funds: (Indicate source, amount, and whether confirmed or pending):
Describe when you plan to submit your claims for reimbursement and what steps precede a complete draw down of funds:
Claims for reimbursement will be submittted after we have secured and paid for the rental of the ball courts
If completion of your project depends on other anticipated funding, please describe when those funds are expected to be received:
when those funds are expected to be received:

FUNDING PRIORITIES – RANKED

If the Committee	is unable to meet your full request, will you be able to proceed with
partial funding?	(Due to limited funds, the Committee may recommend partial funding for a program)
x Yes	No

If "yes", provide an itemized list of program elements, ranked by priority:

	Item	Cost
Priority #1	Rental of Basketball court for 2 hours for 18 weeks	1,080.00
Priority #2	Rental of Basketball court for 2 hours for 18 weeks	1,080.00
Priority #3	Rental of Basketball court for 2 hours for 18 weeks	1,080.00
Priority #4		
Priority #5		
Priority #6		
Priority #7		
Total Requested		3,240.00

JACK HOPKINS FUNDING CRITERIA

NEED (200 words or less)

Explain how your project addresses a previously-identified priority for social services funding as documented in the <u>Service Community Assessment of Needs</u>, the City of Bloomington, Housing and Neighborhood Development Department's <u>2020-2024 Consolidated Plan</u>, or any other community-wide survey of social service needs.

According to the SCAN 2012, an increasing number of children and young adults are being placed on waitlists for programs that support individuals with disabilities. The study indicates that nearly a third of households in Monroe reported having difficulties receiving services for childern with learning disabilities. While the average rate of disability is difficult to depict, Monroe County residents indicated a disability rate of 13% for those aged 5 and older

SCAN touches on the difficulty these residents face in developing strong social ties, advocating effectively for themselves, maintaining employment, and participanting in their communities. Furthermore, as medical services are often increased for disabled residents, these individuals may face poverty at a greater rate than those without disablilities, creating barriers to participating in costly mental and physical health programs.

Both the SCAN and HAND's Consolidated Plan note that providing opportunities for individuals with disabilities to interact within their community and to improve their physical and mental heath is a priority for social service funding in our community, SOIMC provides physical activity, community interaction, health support, and mental stimulation for individuals with disabilities, leveraging and coordinating with existing facilities such as Stone Belt to provide positive long term interations and support.

ONE-TIME INVESTMENT (100 words or less)

Jack Hopkins Funds are intended to be a one-time investment. Explain how your project fits this criterion. If you are requesting operational funds (e.g., salaries, rent, vouchers, etc), please explain how your project satisfies an exception to the one-time funding rule (pilot, bridge, or collaborative). If you are requesting operational funds that <u>do not</u> satisfy one of the aforementioned exceptions, but your request is being made pursuant to the 2023 allowance for operational funds, please make that clear. If you are requesting operational funding, you must detail your plan for future funding.

SOIMC seeks a one-time investment from JHSSF to rent basketball courts at the Twin Lales Sports Complex to provide team expansions in order to offer residents with disabilities physically and mentally active programming.

Residents with disabilities are particularly vulnerable to social isolation, sedentary lifestyles, and prolonged health risks associated with lack of physical activity and interactions. This investment will enable SOIMC to enhance the quality of physical and mental activities provided as well as increase the capacity of athletes served within Bloomington. The need for social interactions and stimulation is particularly critical to help increase employment rates for disabled residents.

LONG-TERM BENEFITS (200 words or less)

How will your project have broad and long-lasting benefits for our community?

As the number of residents with disabilities seeking social interaction and independence increases, support services continue to struggle with funding for programming that provides these residents with the tools necessary to promote independent and interactive lifestyles. Physical activity for disabled residents remains one of the top mechanisms for limiting future physical health problems while also supporting self-growth and emotional connections.

Providing an avenue for disabled residents to interact with the community while maintaining and improving overall health is the mission of SOIMC. This grant will enhance SOIMC's capacity to provide residents with parameters and setting to improve personal growth, improve physical health and create lasting connections to the Bloomington community.

OUTCOME INDICATORS (100 words or less)

Describe the outcome indicators to be used to measure the success of your project.

The ultimate outcome of a project (e.g., reduced hunger, homelessness or addiction rates) are often not readily observable within the Jack Hopkins funding period. For that reason, we are asking agencies to provide us with outcome indicators. In contrast to program activities (what you bought or did with grant funds) and the long-term impacts of a program (the lasting social change effected by your initiative), the data we seek are the short-term, preferably quantitative indicators used to measure the change your program has created during the period of your funding agreement. *Example: an agency providing a service might cite to the number of persons with new or improved access to a service.*

This funding request is for rental of basketball courts. Basketball is an ever growing opportunity for athletes to participate and with teams being able to practice in the same facility, they will have better interaction with other athletes, volunteers and coaches, building skills and providing physical activity. This also will allow more athletes to join as there will be better carpooling opportunities if we are at the same facility.

OTHER COMMENTS (500 words or less)

Use this space to provide other information you think the Committee would find useful. Any additional comments should supplement, not restate, information provided in the foregoing.

Monroe County Indiana Special Olympics is housed under the umbrella of Indiana Special Olympics, however funding for local programs is based almost exclusivelyon County volunteers and local fundraising efforts through private, civic, and individual donors. Athletes are never charged, nor does SOIMC receive federal or state- appropriated funds. With a "No Second Knock" policy, large sponsors at the local level continue to decrease as state and national corporate partnerships continue to increase. As the number of athletes in the local area continues to increase, operatiojnal costs to support as many teams as possible remains the priority.

Sheet1

2023 Jack Hopkins Social Services Grant Special Olympics of Monroe County Project Budget

JHSSG request

3240

Expenses	Cost per	Number	Hours	Weeks		
Rental of Basketball Courts		30	3	2	18	3240

Special Olympics Indiana Income Statement

		As of 12/31/2022	As of 12/31/2021
483 - Monroe County			
Revenues			
483-40125-999	Special Event Revenue Received from Chapter	\$1,634.40	\$672.50
483-40275-999	Fundraising Revenue (A & L's only)	\$6,590.83	\$268.82
483-40400-999	Contributions	\$3,229.88	\$9,348.64
483-40800-999	Grant Revenue	\$0.00	\$0.00
483-49500-999	Funds Received from Chapter	\$428.54	\$0.00
Total Revenues		\$11,883.65	\$10,289.96
Expenses			
483-50300-999	Office Supplies	\$0.00	\$0.00
483-50315-999	Supplies - Other	\$348.31	\$169.41
483-50775-999	Facility Rental Expense	\$441.00	\$369.00
483-51105-999	Travel & Transportation Services	\$1,078.55	\$0.00
483-51125-999	Meals & Lodging	\$210.82	\$0.00
483-54125-999	Incentives & Awards	\$200.00	\$0.00
483-56050-999	Staff & Volunteer Shirts	\$62.00	\$813.10
483-56055-999	Uniform Expense	\$1,083.50	\$0.00
483-56060-999	Athlete Training Expense	\$120.00	\$0.00
483-56095-999	Games Expense Paid to A & C's	\$586.00	\$430.00
483-56100-999	Games Exp/Conf Fees Paid to Chapter (A&C's only)	\$9,996.00	\$3,184.00
483-58500-999	Funds Paid To Other A & L's (A & L's only)	\$907.00	\$50.00
483-59600-999	Funds paid to Chapter for other	\$100.00	\$0.00
Total Expenses		\$15,133.18	\$5,015.51
Transfers			
483-79005-999	Carry-Over Funds for Counties 2020	\$0.00	(\$7,529.39)
483-79006-999	Carry-Over Funds for Counties 2021	(\$12,803.84)	\$12,803.84
Total Transfers (Out)/In		\$12,803.84	(\$5,274.45)
NET SURPLUS/(DEFICIT)		\$9,554.31	\$0.00

Special	Olympics	Indiana	
Cash Ad	count Ac	tivity 2022	
Full Year		03/01/2023 1:05:36 PM	
Date	Trans.	Reference	Balance
483-10005-00	0		
Account:	483-10005-000	(Fifth Third Cash Account (A & L's only))	
01/01/2022		Account Beginning Balance	\$ 20,974.15
01/05/2022	20809-194	My Sports Locker-Computer Check-20569	\$ (513.10)
01/21/2022	20964-58	Fifth Third Bank-Bank Draft-164	\$ (436.45)
02/22/2022	21127-62	Fifth Third Bank-Bank Draft-167	\$ (327.14)
03/01/2022	21137-2	Deposit 10301 - Summarized Cash Receipts Receipt	\$ 141.06
03/07/2022	21137-3	Deposit 10302 - Summarized Cash Receipts Receipt	\$ 200.00
03/25/2022	21245-273	Fifth Third Bank-Bank Draft-168	\$ (60.00)
04/13/2022	21233-25	Transfer: Shelby Co. BB Invite/Arnie Petre	\$ (30.00)
04/13/2022	21234-71	Tfr: Basketball Team Entry Fees #1	\$ (325.00)
04/22/2022	21410-177	Fifth Third Bank-Bank Draft-169	\$ (105.98)
04/26/2022	21408-35	Deposit 10404 - Summarized Cash Receipts Receipt	\$ 361.00
05/02/2022	21408-43	Deposit 10409 - Summarized Cash Receipts Receipt	\$ 100.00
05/11/2022	21375-149	My Sports Locker-Computer Check-20799	\$ (585.20)
05/16/2022	21462-7	Deposit 10426 - Summarized Cash Receipts Receipt	\$ 357.43
05/18/2022	21407-35	Transfer: Polar Plunge Revenue Share	\$ 1,634.40
06/21/2022	21626-223	Fifth Third Bank-Bank Draft-171	\$ (200.60)
06/28/2022	21536-82	Tfr: Summer Games Entry Fees	\$ (7,985.00)
06/28/2022	21541-206	Mark Deckard-Computer Check-20939	\$ (1,078.55)
06/30/2022	21628-6	Tfr: Area 7 Summer Games Shirts	\$ (722.00)
06/30/2022	21646-9	Tfr: Area 7 Spring Games Entry Fees	\$ (136.00)
07/11/2022	21676-23	Deposit 10568 - Summarized Cash Receipts Receipt	\$ 250.00
08/06/2022	21754-20	Tfr: Johnson Co. Softball: Center Grove Lassie League	\$ (105.00)
08/07/2022	21753-10	Transfer: Shelby Co. Softball Invite	\$ (50.00)
08/10/2022	21802-5	Deposit 10630 - Summarized Cash Receipts Receipt	\$ 149.77
09/23/2022	21976-340	Fifth Third Bank-Bank Draft-174	\$ (119.94)
10/05/2022		Tfr: EKS EQ - Campsites & Hay Bales	\$ (100.00)
10/12/2022		Tfr: EKS Entry Fees-EQ,CT,DRW & Skills	\$ (220.00)
10/26/2022	22023-17	Deposit 10763 - Summarized Cash Receipts Receipt	\$ 100.00
11/16/2022		Tfr: EKS Volleyball Team Entry Fees	\$ (140.00)
11/16/2022	22042-79	Tfr: County State Conference Registration Fees	\$ (325.00)
11/16/2022	22046-31	Tfr: Fall Into Fitness Virtual Challenge Fees	\$ (6.00)
11/21/2022	22165-408	Fifth Third Bank-Bank Draft-176	\$ (595.95)
11/23/2022		Tfr: Area 7-Area Bowling Entry Fees	\$ (450.00)
11/29/2022	22456-1	Deposit 10879 - Summarized Cash Receipts Receipt	\$ 161.45
11/30/2022	22121-37	Tfr: EKS Golf Entry Fees/Individual, Skills & Non UGT Teams	\$ (300.00)
11/30/2022	22123-54	Tfr: EKS FF Team & Skills & Softball Entry Fees	\$ (290.00)
11/30/2022	22124-87	Transfer: State Bowling Entry Fees	\$ (405.00)
12/05/2022	22224-23	Deposit 10837 - Summarized Cash Receipts Receipt	\$ 200.00
12/07/2022	22154-163	Lori Anderson-Computer Check-21392	\$ (200.00)
12/14/2022	22177-254	Candace Smith-Computer Check-21406	\$ (210.82)
12/14/2022	22176-37	Tfr: USA Games County Revenue Share	\$ 428.54
12/31/2022	22456-47	Deposit 10912 - Summarized Cash Receipts Receipt	\$ 6,300.00
12/31/2022	22458-60	Deposit 10969 - Summarized Cash Receipts Receipt	\$ 1,500.00
/ 5 . / 2022		Account Subtotals	\$ (4,139.08)
12/21/2022		Account Net Change	
12/31/2022			(4,139.08)
12/31/2022		Account Ending Balance	16,835.07
01/01/2022		Fund Beginning Balance	20,974.15
2/31/2022		Fund Net Change	(4,139.08)
2/31/2022		Fund Ending Balance	\$ 16,835.07

Special	Olympi	cs Indiana		
Counti	es - Rev	enue and Expense 2022		
Full Year		3/1/2023 13:05		
Date	Trans.	Reference		Balance
483-40125-9	99			
Account:	483-40125-	999 (Special Event Revenue Received from Chapter)		
01/01/2022		Account Beginning Balance	\$	
05/18/2022	21407-14	Transfer: Polar Plunge Revenue Share	\$	1,634.40
		Account Subtotals	\$	1,634.40
12/31/2022		Account Net Change	\$	1,634.40
12/31/2022		Account Ending Balance	\$	1,634.40
483-40275-9	+			
Account:	483-40275-9	999 (Fundraising Revenue (A & L's only))		
01/01/2022	24427.40	Account Beginning Balance	\$	444.00
03/01/2022	21137-10	Kroger-10301-Community Rewards-28427	\$	141.06
08/10/2022 12/31/2022	21802-7 22456-78	Kroger-10630-Community Rewards-29014	\$	149.77
12/31/2022	22430-70	Indiana University-10912-FB Concession Runners-29539 Account Subtotals	\$	6,300.00 6,590.83
12/31/2022			\$	
		Account Net Change	_	6,590.83
12/31/2022		Account Ending Balance	\$	6,590.83
483-40400-9	T	200 (Cantributions)		
Account: 01/01/2022	483-40400-5	999 (Contributions)	¢	
03/07/2022	21137-13	Various checks-10302-Donations-28428 Account Beginning Balance	\$	200.00
04/26/2022	21408-67	Women of the Moose/Bloomington-10404-Donation-28607	\$	311.00
04/26/2022	21408-68	Bloomington Moose Lodge-10404-Donation-28608	\$	50.00
05/02/2022	21408-74	lan Woollen-10409-Donation-28614	\$	100.00
05/16/2022	21462-36	Cks: United Way & Kroger-10426-Donations-28644	\$	357.43
07/11/2022	21676-58	Various cash & Humphries-10568-Donations-28903	\$	250.00
10/26/2022	22023-57	Candace Smith-10763-Donation-29255	\$	100.00
11/29/2022	22456-2	Kroger-10879-Community Rewards-29489	\$	161.45
12/05/2022	22224-26	Elks #446 Bloomington-10837-Donation/Dance-29409	\$	200.00
12/31/2022	22458-65	Robert Baird-10969-Donation-29657	\$	1,500.00
		Account Subtotals	\$	3,229.88
12/31/2022		Account Net Change	\$	3,229.88
12/31/2022		Account Ending Balance	\$	3,229.88
483-49500-99	9			
Account:	483-49500-9	99 (Funds Received from Chapter)		
01/01/2022		Account Beginning Balance	\$	*
12/14/2022	22176-14	Tfr: USA Games County Revenue Share	\$	428.54
Part 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		Account Subtotals	\$	428.54
12/31/2022		Account Net Change	\$	428.54
12/31/2022		Account Ending Balance	\$	428.54
483-50315-99				
Account:	483-50315-9	99 (Supplies - Other)		
01/01/2022			\$	
02/22/2022	21043-133	Fifth Third Ban-02222022-1/2022 County CC's-BB pinnies	\$	29.44
04/22/2022	21410-185	Fifth Third Ban-04222022-3/2022 County CC's-bocce ball set	\$	105.98
09/23/2022	21976-199	Fifth Third Ban-9232022-8/2022 County CC's-footballs	\$	119.94
10/05/2022 10/05/2022	21881-3 22108-3	Tfr: EKS EQ - Campsites & Hay Bales <rev>Tfr: EKS EQ - Campsites & Hay Bales</rev>	\$	100.00
11/21/2022	22165-229	Fifth Third Ban-11212022-10/2022 County CC's-volleyballs	\$	92.95
11/21/2022	22103-229	Account Subtotals	\$	348.31
12/31/2022		Account Subtotuls Account Net Change	\$	348.31
12/31/2022		Account Ending Balance	\$	348.31
12/31/2022 483-50775-9 9	10	Account Ending Balance	Þ	340.31
483-50775-95 Account:		99 (Facility Rental Expense)		
01/01/2022	-103-30113-9	Account Beginning Balance	\$	
11/21/2022	22165-225	Fifth Third Ban-11212022-10/2022 County CC's-bowling tourney	\$	441.00
/ = 1/ 2022	LL 100 LL0	Account Subtotals		441.00
12/31/2022		Account Net Change		441.00
12/31/2022		Account Ending Balance		441.00
483-51105-99	9	Account thating butance	-	771.00
Account:		99 (Travel & Transportation Services) 050		
01/01/2022		Account Beginning Balance		

		cs Indiana		
Counti	es - Rev	enue and Expense 2022		
Full Year		3/1/2023 13:05		
Date	Trans.	Reference		Balance
06/28/2022	21541-45	Mark Deckard-06212022 f-2019 Transport/Area Bowli-	\$	308.30
06/28/2022	21541-47	Mark Deckard-06212022 M-Transport to Summer Games-	\$	384.25
06/28/2022	21541-49	Mark Deckard-06212022 M-Transport from Summer Gam-	\$	386.00
		Account Subtotals	\$	1,078.55
12/31/2022		Account Net Change	\$	1,078.55
12/31/2022		Account Ending Balance	\$	1,078.55
483-51125-9				
Account:	483-51125-9	999 (Meals & Lodging)	*	
01/01/2022 12/14/2022	22177-112	Candace Smith-12082022 C-Reimb Food, Ice & Cookies-	\$	210.82
12/14/2022	22111-112	Account Subtotals	\$	210.82
12/31/2022		Account Net Change	\$	210.82
12/31/2022		Account Ending Balance	\$	210.82
483-54125-9	99	necount Entiry Butance		L 10.02
Account:		999 (Incentives & Awards)		
01/01/2022		Account Beginning Balance	\$	
12/07/2022	22154-69	Lori Anderson-12032022 L-Reimb Dance Door Prizes/D-	\$	200.00
		Account Subtotals	\$	200.00
12/31/2022		Account Net Change	\$	200.00
12/31/2022		Account Ending Balance	\$	200.00
483-5 60 50-9				
Account:	483-56050-9	999 (Staff & Volunteer Shirts)		
01/01/2022	22165-227	Fifth Third Ban-11212022-10/2022 County CC's-ALU polo	\$	21.00
11/21/2022	22165-228	Fifth Third Ban-11212022-10/2022 County CC's-ALU polo	\$	31.00 31.00
11/21/2022	22103 220	Account Subtotals	\$	62.00
12/31/2022		Account Net Change	\$	62.00
12/31/2022		Account Ending Balance	\$	62.00
483-56055-9	99	, and a second s		
Account:		99 (Uniform Expense)		
01/01/2022		Account Beginning Balance	\$	
02/22/2022	21043-132	Fifth Third Ban-02222022-1/2022 County CC's-Shirts/Basketball	\$	297.70
05/11/2022	21375-71	My Sports Locke-11692-Hooded Jackets/Swimming-	\$	585.20
06/21/2022	21626-257	Fifth Third Ban-6212022-5/2022 County CC's-shirts/corn toss	\$	200,60
17/71/2022		Account Subtotals	\$	1,083.50
12/31/2022 12/31/2022		Account Net Change	\$	1,083.50
12/31/2022 183-56060-9	00	Account Ending Balance	\$	1,083.50
+63-36060-9 Account:	7	99 (Athlete Training Expense)		
01/01/2022	403 30000 3	Account Beginning Balance	\$	
03/25/2022	21245-151	Fifth Third Ban-03252022-2/2022 County CC's-BB court rental	\$	60.00
2/31/2022	22453-252	Fifth Third Ban-01232023 f-01232023 for Dec.22 Count-gym rental/BB	\$	60.00
		Account Subtotals	\$	120.00
12/31/2022		Account Net Change	\$	120.00
12/31/2022		Account Ending Balance	\$	120.00
183-56095-9				
Account:	483-56095-9	99 (Games Expense Paid to A & C's)	4	
01/01/2022	21646-4	Account Beginning Balance	\$	126.00
1/23/2022	22094-3	Tfr: Area 7 Spring Games Entry Fees Tfr: Area 7-Area Bowling Entry Fees	\$	136.00 450.00
. I LOI LULL		Account Subtotals	-	586.00
2/31/2022		Account Net Change	\$	586.00
2/31/2022	2,	Account Ending Balance	\$	586.00
83-56100-9	99	, interest and parameter		2,30,30
Account:		99 (Games Exp/Conf Fees Paid to Chapter (A&C's only))		
1/01/2022		Account Beginning Balance	\$	-
4/13/2022	21234-30	Tfr: Basketball Team Entry Fees #1	\$	325.00
06/28/2022	21536-31	Tfr: Summer Games Entry Fees	\$	7,985.00
0/12/2022	21907-27	Tfr: EKS Entry Fees-EQ,CT,DRW & Skills	\$	220.00
1/16/2022	22040-8	Tfr: EKS Volleyball Team Entry Fees	\$	140.00

Special	Olympi	ics Indiana	
		enue and Expense 2022	
Full Year		3/1/2023 13:05	
Date	Trans.	Reference	Balance
11/16/2022	22042-31	Tfr: County State Conference Registration Fees	\$ 325.00
11/16/2022	22046-10	Tfr: Fall Into Fitness Virtual Challenge Fees	\$ 6.00
11/30/2022	22121-16	Tfr: EKS Golf Entry Fees/Individual, Skills & Non UGT Teams	\$ 300.00
11/30/2022	22123-22	Tfr: EKS FF Team & Skills & Softball Entry Fees	\$ 290.00
11/30/2022	22124-34	Transfer: State Bowling Entry Fees	\$ 405.00
		Account Subtotals	\$ 9,996.00
12/31/2022		Account Net Change	\$ 9,996.00
12/31/2022		Account Ending Balance	\$ 9,996.00
483-58500-9	99		
Account:	483-58500-	999 (Funds Paid To Other A & L's (A & L's only))	
01/01/2022		Account Beginning Balance	\$
04/13/2022	21233-11	Transfer: Shelby Co. BB Invite/Arnie Petre	\$ 30.00
06/30/2022	21628-2	Tfr: Area 7 Summer Games Shirts	\$ 722.00
08/06/2022	21754-6	Tfr: Johnson Co. Softball: Center Grove Lassie League	\$ 105.00
08/07/2022	21753-1	Transfer: Shelby Co. Softball Invite	\$ 50.00
		Account Subtotals	\$ 907.00
12/31/2022		Account Net Change	\$ 907.00
12/31/2022		Account Ending Balance	\$ 907.00
483-59600-9	99		
Account:	483-59600-	999 (Funds paid to Chapter for other)	
01/01/2022		Account Beginning Balance	\$
10/05/2022	22108-8	Tfr: EKS EQ - Campsites & Hay Bales	\$ 100.00
		Account Subtotals	\$ 100.00
12/31/2022		Account Net Change	\$ 100.00
12/31/2022		Account Ending Balance	\$ 100.00