

CARROLL COUNTY APPLICATION FOR FINANCIAL ASSISTANCE

AGENCY CONTACT INFORMATION

Applicant Agency: End 68 Hours of Hunger, Wolfeboro Chapter

Contact Person: Jan Brooks, Eileen Leavitt

**Phone: 603-856-1019 (JB)
603-651-9115 (EL)**

Fax:

**E-mail: brooksjen64@gmail.com
ebleavitt@gmail.com**

Agency Mailing Address: PO Box 1026, Wolfeboro Falls, NH 03896

City: Wolfeboro

State: NH

ZIP Code: 03894

Agency Physical Address: 258 South Main Street Wolfeboro, NH

Agency's Total Operating Budget: \$61,121.78

Prior Year: 2022 -\$70,000.00

Current Year: 2023 -\$61,121.78

Proposed Year: 2024 - \$70,000.00

Amount of Funding Requested from Carroll County for 2024: \$8,000.00

DESCRIPTION OF FEE STRUCTURE, IF APPLICABLE:

There are no fees however the following outlines our structure. Our Chapter of End 68 Hours of Hunger is a non-profit (501©(3) organization that provides food for elementary children over the weekends; 3 dinners 2 lunches, 2 breakfasts and snacks. It is run by 100% volunteers and relies on donations and fundraising to purchase the food needed over the course of 38 weeks (school year) and 5-weeks during the summer. The cost is \$16.00/child/weekend with an annual expenditure of \$81,440.00. Our Chapter served an average of 130 children from the towns of Wolfeboro, Tuftonboro, Ossipee, Effingham, and Middleton during the school year. School counselors, health providers, teachers and administration recommend students who are in need of food over the weekends. Our organization is run totally by volunteers who totaled 2,379 hours and 4,457 miles this past year; filling a total of 5,069 bags throughout the school year and summer months.

FUNDING SOURCES

Category	Source, Title, Act	Actual Prior FY: 2022	Budget Current FY: 2023	Request FY: 2024
Fees				
Federal				
State				
County	Carroll	Unable to submit application	\$5,000.00	\$8,000.00
Municipal	GWRSD Towns	\$14,000.00	\$14,500.00	\$14,500.00
Fund Raising	Local Events	\$12,677.16	\$43,334.71	\$40,000.00
Grants		\$14,500.00	\$5,604.00	\$5,604.00
Other	Donor appeals letter Private funds & donations	\$80,000.00	\$63,727.22	\$70,000.00

AGENCY OPERATING BUDGET

	Actual Prior FY: 2022	Budget Current FY: 2023	Request FY: 2024
Personnel	NA	NA	NA
Fringe Benefits	NA	NA	NA
Consultants & Subcontracts	NA	NA	NA

Utilities: Electric, Phone, Heat, etc.	\$1,200.00 (donation from sponsor)	\$2,000.00 (donation from sponsor)	\$2,000.00 (donation from sponsor)
Rent	NA	NA	NA
Office Supplies, Printing, Advertising, etc.	Donated by sponsors	Donated by sponsors	Donated by sponsors
Education & Training	NA	NA	NA
Travel, Lodging	NA	NA	NA
Other	\$1,871.48	\$2,190.00	\$2,500.00
Food Purchases	\$52,902.75	\$63,853.00	\$70,000.00
TOTALS:	\$54,774.23	\$66,043.00	\$72,500.00

DEFINE UNIT OF SERVICE FOR THIS PROGRAM:

Weekend food for a child at risk of food insecurity is provided weekly for 38 weeks of the school year and 5 weeks over the summer months.

1 student/1 bag/1 weekend

	<u>Actual Prior FY: 2022</u>	<u>Budget FY: 2023</u>	<u>Request FY: 2024</u>
Total number of units of service in Carroll County	7037 bags (12 months)	5,069 bags (43 weeks)	6-7,000 bags
Unit of Service Cost	\$14/bag	\$16/bag	\$16/bag
Total number of individuals served in Carroll County (count each person only once)	111/week	130/week (38 weeks) 39 (5 weeks)	130-140/week

Explain Method of Formula used to determine amount of Carroll County funding requested:

Number of students at risk of food insecurity within the Governor Wentworth School District multiplied by the average cost of a bag of food \$16.00/week

SERVICE AND FINANCIAL DATA

Service and Cost Distribution (estimated) for:

<u>Municipality</u>	<u>Individuals Served</u>	<u>Units of Service</u>
Albany		
Bartlett		
Brookfield	*	
Chatham		
Conway		
Eaton		
Effingham	*	
Freedom		
Hale's Location		
Hart's Location		
Jackson		
Madison		
Moultonborough		
Ossipee	*	

Sandwich		
Tamworth		
Tuftonboro	*	
Wakefield		
Wolfeboro	*	
TOTALS	Average number over 38 weeks = 130 Average number over 5 weeks during the summer = 39	We serve all children within the GWRSD at risk of food insecurity and do not delineate where they reside.

Board of Directors: On a separate page, please provide the name of each member of your agency's board of directors and a detail of what, if any, compensation each Director receives.

Additional Documentation: Please provide a copy of the organization's most recent annual financial statement, bylaws, certificate of incorporation and proof of non-profit status.

Provide a brief narrative description of the program(s) for which you are requesting funding.

Within the narrative:

- a. Describe the problem which the program will address.
- b. Describe the services to be provided and/or the activities to be engaged in.
- c. Describe the target population as succinctly as possible, including the geographical coverage, age group and/or other special characteristics.
- d. Mission Statement

FOCUS OF PROGRAM

End 68 Hours of Hunger is a private, non-profit (501-C-3) organization that works to confront the approximately 68 hours of hunger that some children experience between the free lunch they receive at school on Friday and the free breakfast they receive at school on Monday morning. Funding relies on fundraising and financial donations that are earmarked solely to purchase food.

SERVICES

The unity and support from our communities has been substantial; enabling us to maintain a supply for a month or two of food, increasing services from a school calendar program to year-round, extending services to GWRSD students working to achieve their GED through Carroll County Academy, and when requested, students being homeschooled. This is due to the financial support from our communities and the support from the *GWRSD Administration, Home/School Coordinator*, the school counselors at each school and the Governor Wentworth Regional School district's transportation department; *increasing the number of bags from 130 to 200 each week during COVID* and returning to an average of 111 students served each week.

Our organization is run solely by unpaid volunteers who work together to fill and distribute the weekly food bags to each school, complete the daily and monthly financial requirements, plan and organize fundraising events, provide publicity in various venues, and ordering, purchasing and stocking the food supply. All Saints Episcopal Church, in keeping with their outreach mission, provides a location for our Chapter of End 68 Hours of Hunger.

OUR MISSION

Studies have shown that children who suffer from hunger have difficulty concentrating on schoolwork and being alert. Our goal is to assure children are ready to learn by providing food for Pre-K through Grade 6 children in Wolfeboro, Brookfield, Tuftonboro, Ossipee, Effingham, and Middleton communities, as well as Ossipee Head Start, Ossipee Crossings Day Care, and Wolfeboro Children's Center.

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2022 MONTH	RECEIVED	EXPENDITURES
January	10,226.24	3,363.34
February	935.00	4,980.87
March	2,082.57	6,973.86
April	5,265.05	4,645.95
May	7,559.11	6,133.90
June	800.00	7,354.04
July	8,223.41	2,239.35
August	7,766.30	1,166.06
September	11,658.04	4,823.41
October	16,696.10	8,222.62
November	30,165.53	9,136.78
December	25,788.58	7,003.97
	Total Received	Total Expenditures
	\$127,165.93	\$66,044.15

SUMMARY

- End 68 Hours of Hunger Wolfeboro Area Chapter is a nonprofit organization
- Relies on fundraising, donations, and grants to provide food for the children at risk of food insecurity
- All donations are allocated solely for the purchase of food for children
- Individual sponsors provide support for administrative costs
- 100% volunteer organization to accomplish goals of each function area: finances, food, publicity, fundraising
- Much appreciation to
 - All Saints Episcopal Church for our site location and the GWRSD administration and transportation of bags of food to the schools by GWRSD
 - Students from Brewster Academy and Kingswood Regional High School assist with fundraisers and stacking shelves each week
 - School/End 68 liaison and counselors for overseeing the need & distribution at each school

We thank **CARROLL COUNTY COMMISSIONERS** for the support that we have received in the past. To ensure we continue to provide food for the students within the GWRSD who are at risk of food we are requesting an allocation of **\$8,000.00** financial assistance for 2024.

Sincerely

Program Coordinators:

Jan Brooks
 Eileen Leavitt
 Carol Simpson

CARROLL COUNTY APPLICATION FOR FINANCIAL ASSISTANCE

Advisory Committee, Names/Titles and Addresses:

Our Chapter of End 68 Hours of Hunger has an Advisory Committee not a Board

Jan Brooks	Program Coordinator and Finance Function Area	brooksjen64@gmail.com
Eileen Leavitt	Program Coordinator and Fundraising, Publicity Function Areas	ebleavitt@gmail.com
Carol Simpson	Program Coordinator and Food Function Area	carol.simpson.fencing@gmail.com
Joan Scapicchio	Assistant for Finances	Joanlmt@hotmail.com
Donna Cullen	Assistant for Fundraising	donnacullen1@gmail.com
Pat Jones	Assistant for Publicity	pdjwolf2@gmail.com
John Brooks	Assistant for Food Program	Rocbrooks23@gmail.com
Deb Bunting	School/End 68 Hours Liaison	dbunting@sau49.com
Peg Mongiello	Fundraising	ipmongiello@gmail.com
Michelle Capone	Secretary	

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

End 68 Hours of Hunger

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

- Individual/sole proprietor or single-member LLC
- C Corporation
- S Corporation
- Partnership
- Trust/estate
- Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____
- Other (see instructions) ▶ **501(c)(3)**

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

PO Box 676

6 City, state, and ZIP code

Somersworth NH 03878

7 List account number(s) here (optional)

45-0998251

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									

or

Employer identification number										
4	5		-	0	9	9	8	2	5	1

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here

Signature of U.S. person ▶ *Clay Bloom*

Date ▶ *3/1/2023*

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.