

**BEFORE THE BOARD OF COUNTY COMMISSIONERS
IN AND FOR THE COUNTY OF CURRY, OREGON**

Order Accepting Grant from
Wild Rivers Grant for
Holiday Youth Services

)
)
)

ORDER NO. 23185

WHEREAS, the Curry County Juvenile Department works with youth who struggle during the holidays; and,

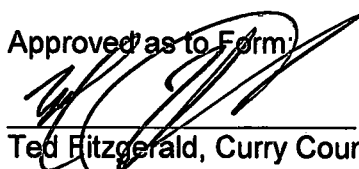
WHEREAS, Wild Rivers offered funding for Holiday Programs to support within our community; and,

WHEREAS, Wild Rivers has offered the Juvenile Department a grant of \$750, as shown in Exhibit A, attached hereto, to provide holiday stockings and food connections for our youth.

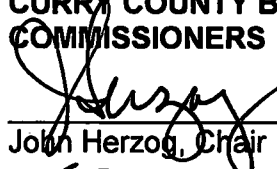
NOW, THEREFORE, THE BOARD OF CURRY COUNTY COMMISSIONERS HEREBY accepts the grant award from Wild Rivers in the amount of \$750, with signature authority to the Juvenile Department Liaison.

DATED this 7th day of December, 2022.

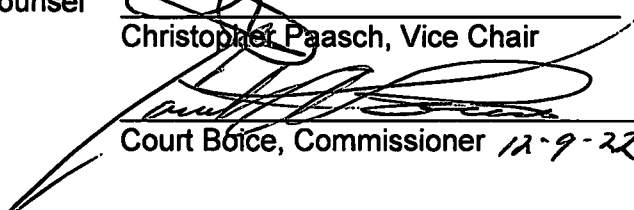
Approved as to Form:


Ted Fitzgerald, Curry County Counsel

**CURRY COUNTY BOARD OF
COMMISSIONERS**


John Herzog, Chair


Christopher Paasch, Vice Chair


Court Boice, Commissioner 12-9-22

Wendy Lang

From: Humboldt Area Foundation + Wild Rivers Community Foundation
<administrator@grantinterface.com>
Sent: Monday, November 21, 2022 4:51 PM
To: Wendy Lang
Subject: Congratulations! Holiday Funding Partnership 2022
Attachments: Agreement to Grant Terms.pdf

Dear Wendy,

It is my honor to inform you that **Curry County Juvenile Department** is the recipient of the following grant from the Humboldt Area Foundation + Wild Rivers Community Foundation, in partnership with Humboldt Health Foundation, Mel & Grace McLean Foundation, Patricia D. & William B. Smullin Foundation, and Providence, Community Health Investment.

- **Holiday Funding Partnership 2022**
- **Holiday Dinner and Stockings for Youth and Families**
- **\$750.00**

You will be receiving a check by mail. Your **Grant Number** is accessible through your applicant dashboard, within your follow-up forms. Your **Grant terms and conditions** are attached. If they are acceptable to you, please sign and deposit the grant check. By accepting this grant, you are agreeing to only use funds as described in your approved grant application. We gladly welcome any informal updates or photos that you would like to share with us. Please fill out the Photo Information and Release Form also found on your applicant dashboard. Please contact me if you need to request a change in use of the grant award or if there are changes in your organization's tax-exempt status or key personnel.

We do not require a formal grant report, but will ask you some basic questions about your holiday program this year on next year's application, should you choose to reapply.

The Holiday Funding Partnership recognizes that your hard work helps families in our region thrive and makes the holiday season brighter. Thank you. We wish you all a successful and happy holiday season.

Sincerely,

Craig Woods

Director of Grantmaking
Humboldt Area Foundation + Wild Rivers Community Foundation
grants@hafoundation.org
707.442.2993



AGREEMENT TO GRANT TERMS

By depositing the grant check, your organization agrees to the following terms and conditions:

1. You as the grantee, agree that you are a nonprofit charitable or public benefit (federal tax-exempt) organization, public school, government agency, Indian tribal government, or have a qualified fiscal sponsor.
2. Please contact your program manager/director if there are significant changes to your program staff, timeline, or tax-exempt status during the grant period.
3. The total amount of this grant or any payment thereof may be discontinued, modified, or withheld at any time, if in the judgement of Humboldt Area Foundation, such as (i) is warranted because grant funds are not being used as required by this letter or (ii) is necessary to comply with the requirements of the law, regulations or rulings.
4. The grant will be used exclusively for charitable, religious, scientific, literary, or educational purposes. Your organization agrees that none of the funds will be used in a way that violates requirements of Internal Revenue Code Section 501(c)(3).
5. For grants above \$50,000, funds may be distributed from Humboldt Area Foundation to the grantee on a reimbursement basis. In such cases, the foundation will advance one-half of total grant funds at the beginning of the grant period. The Foundation will advance the second half of grant funds upon receipt of satisfactory expenditure reports on the initial payment.
6. Your organization understands and agrees that a final narrative report will be submitted to the Foundation by the end of the grant period, or by the grant extension date. Failure to do so may affect your organization's eligibility to apply for HAF grants in the future.
7. Your organization retains full discretion and control over the selection of any sub-grantees or individuals to carry out the work set forth in your proposal.



In doing so, your organization will act completely independently of Humboldt Area Foundation.

8. This letter constitutes Humboldt Area Foundation's and your organization's entire agreement with respect to this grant, the terms of which may not be amended or modified, except in writing by both parties.
9. These grant funds may only be used for charitable purposes and may not be used for any political or lobbying activity. This grant is not earmarked for any attempt to influence legislation. Thus, any use of grant funds by your organization for such activities constitutes a decision of your organization that is wholly independent of Humboldt Area Foundation.

Please retain this agreement for your files.

Select Language ▼

Application

  Public Profile  Collaborate 0

Holiday Dinner and Stockings for Youth and Families Process: Holiday Funding Partnership 2022

Contact Info Request

Applicant:

Wendy Lang

langw@co.curry.or.us

541-247-3375

94235 Moore Street #231 29821 Colvin Street (physical)

Gold Beach, OR 97444

Organization:

Curry County Juvenile Department

93-6002291

541-247-3375

29821 Colvin Street

Gold Beach, OR 97444

Contact Email History

 If your organization information does not appear correct, please contact the funder. Thank you.

 Application

 Document Viewer

 Application Packet

 Question List

 Fields with an asterisk (*) are required.

✓ Holiday Funding Partnership

The Holiday Funding Partnership offers small grants \$500 - \$2,000 to assist Humboldt, Del Norte, Trinity or Curry County non-profit organizations, public benefit organizations (public schools, churches, tribal governments, etc.) or qualified fiscal sponsors with holiday assistance programs offered between *November 15 and January 1*.

The spirit of this grant is to inspire and support all of the activities that make holiday programs in our region a success. We seek to enhance what has already been accomplished prior to this grant.

The committee will consider each application and prioritize funding based on:

- Number of people served
- Focus on vulnerable youth, seniors, and low income families across our rural and native lands
- Programs providing food security (food boxes, food vouchers, grocery credit, community meals), clothing and/or other basic needs

Extra priority given to programs that reach underserved or outlying areas The following requests will not be funded:

- Party decorations
- Venue rental for events
- Craft parties or crafting supplies
- Photographs

✓ Organization Type

Organization Type*

Please select the option that best describes your organization.

(Public benefit organizations include churches, educational organizations/schools, hospitals, government units, tribal governments, etc.)

- ☐ Non-profit/501(c)3
- ☒ Public benefit organization
- ☐ Working with a qualified fiscal sponsor
- ☐ Other

✓ Basic Information

Project Name*

Please enter the name of your project or program.

Holiday Dinner and Stockings for Youth and Families**Amount Requested***

Please enter the amount you are requesting with this application. *(\$2,000 maximum limit)*

\$ 1,000.00

Request Contact*

Please enter the name of the primary contact for this request.

Wendy S. Lang

Request Contact Title/Role*

Please enter the job title and/or role of the request contact.

Director

Request Contact Email Address*

Please enter the email address of the primary contact for this request.

☒ Langw@co.curry.or.us

Request Contact Phone Number*

Please enter the phone number of the primary contact of this request. *Please include area code and extension number (if applicable).*

541-247-3375

Application Sharing*

May we share this application with other potential funders?

☒ Yes

☐ No

✓ Application Questions

Geographic Region*

What geographic areas will your project or program serve? Please select all that apply.

- ☐ Humboldt County
- ☐ Del Norte County
- ☐ Trinity County
- ☒ Curry County
- ☐ Other

Racial Demographics*

Please select the primary demographic that will benefit from your project/program.

- ☐ American Indian/Native American/Alaska Native
- ☐ Asian/Asian American
- ☐ Black/African American
- ☐ Hispanic/Latinx
- ☐ Middle Eastern/Middle Eastern American
- ☐ Native Hawaiian/Pacific Islander
- ☒ White
- ☐ Two or more
- ☐ Other

Demographics (Continued)

Please use this space to share any additional information about the demographics of the community served.

The youth and families we will be serving are mostly low income, with single parent and/or youth being raised by a grandparent or guardian. We also have a percentage of homeless youth (staying with friends or relatives). The majority of our caseload youth in Curry County are white, with some American Indian and Hispanic youth served as well.

1,653 characters left of 2,000

Strategic Goals*

Which of HAF+WRCF's strategic goals does this project/program help to accomplish? Please select all that apply. More information about HAF+WRCF's strategic goals can be found here.

- ☒ Thriving Youth & Families

- ☐ Healthy Ecosystems & Environment
- ☐ A Just Economy & Economic Development
- ☐ Racial Equity
- ☐ None of the Above

Project Reach*

Please estimate the total number of individuals who will be involved in or benefit from this project/program.

50

✓ Project Narrative**Request Description***

Describe your project. How will funds be spent? How will items be distributed? Be as specific as possible.

Our department makes sure that all youth on our caseloads from prevention to high risk youth receive a Holiday Stocking full of personalized items: examples: soap, shampoo, toothbrush and paste, deodorant, body spray, snacks, blanket, cards, games, socks, and one small gift item of \$5 gift cards. These stockings are delivered by Santa (out staff) and the elves. Many times this is the only Christmas gift some of the youth we work with will receive. This will be the third year we will provide this program and each year the feedback, excitement from the youth and families and the gift of giving the staff feels is amazing.

Our staff shops, decorates, bakes, personalizes and delivers the stockings. We also make sure each family has food for Christmas dinner, if not we will hook them up with one of the giving organizations locally.

3,642 characters left of 5,000

Project Timeline*

Please describe the proposed project timeline. Please include the hours, dates, and location of your upcoming holiday program.

We will shop, decorate and prepare the stockings the first two weeks of December. We will deliver them on the 16th of December.

1,871 characters left of 2,000

Start Date

Please enter the estimated start date of this project.

 12/01/2022

Completion Date

Please enter the estimated completion date of this project.

 12/16/2022

Project Impact*

Please discuss your organization's connection with the community being served through this project/program. Please be sure to include any past or present collaborations with this community.

This will be the third year and the excitement, gratitude and thanks from youth and families is over whelming. We have purchased a Santa suit and elf costumes as recommendations from our first year. We collaborate with schools, DHS and families. After we delivered our stockings we then took Santa to the front lawn of the Court house where he waived and gave candy canes to passers by. We stopped by a day care center and took photos with kids. The impact of a youth getting a stocking when there is no decorations or presents at their home is powerful.

1,439 characters left of 2,000

Community Resources*

What other organizations are you working with for this year's holiday program, and how are you collaborating with other programs that are providing similar services?

Last year worked with DHS, Veterans Affairs, and Curry County Employees on food baskets, and dinner delivery. Our department shopped locally and decorated each stocking. We downloaded fun card game instructions to go with the deck of cards, and dice games for dice.

1,731 characters left of 2,000

Expected Contribution

Please indicate how many of each item you expect to contribute through your Holiday Program:

- | | | |
|--|---|----|
| ☐ Clothing for Children | # | |
| ☐ Clothing for Teens | # | 50 |
| ☐ Clothing for Adults | # | |
| ☐ Food Baskets | # | 12 |
| ☐ Toys | # | 50 |
| ☐ Meals | # | 50 |

Other*

- ☐ Yes
☒ No

Other (Continued)

If you marked 'yes' in the question above, please explain and include the number of items you expect to contribute.

Expected Individuals

Please approximate the number of Individuals to be served by your Holiday Program.

- | | | |
|---|---|--|
| ☐ Young Children (0-5) | # | |
| ☐ Children (Ages 6-12) | # | |

 Youth (Ages 13-18)	# 50
 Adults (18+)	# 20
 Older Adults (65+)	#

Previous Funding*

Did you receive funding from Holiday Funding Partnership last year?

- ☒ Yes
☐ No

✓ Previous Funding**Previous Project***

Briefly describe last year's project, including the project impact and geographic area(s) served.

Last years project was the exact same as this years. We served 40 youth throughout Curry County and included two youth who were in residential placements. This included 9 families with food bags from community partners.

Our closing report included several photos of the program.

2,215 characters left of 2,500

Previous Impact

How many individuals were served by your Holiday Program, last year?

 Infant/Youth (Ages 0-5)	#
 Kids (Ages 6-12)	#

 Teens (Ages 13-18)	# 40
 Adults (18+)	# 14
 Seniors (65+)	#
 Total Served	# 54

✓ Project Budget

Secured Funds*

If you have already secured a portion of your funding, please enter that amount here.

\$2,000

Percentage Requested*

What percentage of the total budget is being requested?

(Amount Requested = (?)% of Total Budget)

33%

Total Project Budget*

Please enter the total budget for this project.

\$ 3,000.00

Budget Worksheet*

Please:

1. Download our **Budget Template**
2. Fill out the template and save (on your computer)
3. Upload your completed budget

Wild Rivers Budget.xlsx [19.1 KiB] 

Anticipated Project Budget

Expenses	Amount Requested from HAF+WRCF	In-Kind Donations	Other funding Sources Amount	Source	Total
Stockings & Supplies	\$ 1,000.00				\$ 1,000.00
Staff Hours		\$ 1,200.00			\$ 1,200.00
Donated and home baked			\$ 800.00		\$ 800.00
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
Estimated Project Total Cost					\$ 3,000.00