💫 State of West Virginia

ARPA-35

ARP Application - Jefferson County

Status: Active

Applicant

Date Created: Dec 1, 2021

Henry Christie ctchaplain@frontier.com PO Box 1377 Charles Town, West Virginia 25414 3042796024

Internal Section

STEP ONE

Please select the date for the Commission Meeting before completing the approval step

Commission Meeting Date

--

STEP TWO

Please select decision, award amount (if approved) and additional comments (to be included in rejection letter)

Additional Conditions

--

Certification

PLEASE CERTIFY THAT YOU HAVE REVIEWED THE US TREASURY GUIDELINES REGARDING THE ELIGIBLE USES OF AMERICAN RESCUE PLAN STATE AND LOCAL RECOVERY FUNDS

Digital Signature

Decision

Award Amount

Henry Christie 11/29/2021

Click here for more information (https://home.treasury.gov/policyissues/coronavirus/assistance-for-state-local-and-tribalgovernments/state-and-local-fiscal-recovery-funds)

Contact Information

Organization Name

Charles Town Race Track Chaplaincy Support Services

Website (if applicable)

Address

PO Box 1377, Charles Town, WV 25414

Phone Number

02/28/2022

Email Address

ctchaplain@frontier.com

Project Summary

Please provide a narrative overview or summary of your proposal, including but not limited to the following:

1. Brief description of the proposal

Offset negative impacts of the COVID pandemic on this organization.

2. Purpose and key anticipated outcomes

Continue our ministry and services.

3. Individuals or communties served

Hollywood Casino at Charles Town Race Track

4. How the COVID-19 pandemic has necessitated this request

Decreased revenue due to our benefactors having reduced income.

5. Amount of funding requested

24,488

6. Amount of any bids or cost estimates received to date, if applicable

--

7a. Amount of matching funds raised or committed by your organization

0

7b. Source of matching funds raised or committed by your organization $\ensuremath{n/a}$

8. How ARP funds, if awarded, will be used Continue our services and ministry

9. How long it will take you to complete the project if awarded funding On going.

Proposal Details

1. Please describe the problem or need which your project seeks to address Substance abuse, family problems, anger management on the race track.

2. Please describe goals and expected outcomes of your proposal.

Address problems as they are presented.

3. Please provide your project timeline

On going.

4. Please provide your project's total proposed budget.

\$24,488.00

5. Please list any partners in this proposal, and the partner's role and your relationship with them.

Hollywood Casino at Charles Town Races, benefactor Charles Town Horesmens Benevolent & Protective Association, benefactor

6. Please describe your plan for sustainability of the project or initiative after the grant award has been exhausted.

This is an on going ministry. We are trying to make up for what has been lost due to the pandemic.

Organization Information

1. Please provide your organization's mission statement.

To provide spiritual guidance to those persons working in the horse racing industry in Charles Town, WV to gain a personal relationship with Jesus Christ; 2) to provide support srvices to those workers reusilting in a life that is full and abundent and eternal in scope; 3) to facilitate entry into counseling or other existing programs for those unawafe of these resources; and 4) to promote the advancemant and glory of Christ's kingdom by faith, hope and charity.

2. Describe the history of your organization, tell us about your current programs and activities

The Chaplaincy been at Charles Town Races for several decades, serving mainly persons involved in the horse racing industry.

3. Please describe three significant accomplishments of your organization.

Assist workers and families who have problems and directing them to available resources. During the pandemic the staff has assisted the Racing Office with distributing materials needed for racing as well as forwarding paperwork to the Racing Office for the horsemen. Coordinate athletic and social activities for the horsemen.

4. Please list your Owner(s), Board of Directors, senior staff members, or other key members of your organization:

Rafael Arroyave, Chaplain; Ethel Barrrow, Office Manager; Henry Christie, President; V.ictoria White, VP; Thomas Newcomer, Treasurer; Lori Bourne, Sec.; Randy Funkhouser; William R. Lewis, Jr.; Katurah Obed-Letts; Duane Sowers

5. Please list the staff involved with this project and describe their roles and responsibilities:

Chaplain, Office Manager, Volunteer Board members.

6. Please upload/attach the following financial documents, if applicable:

Cash flow statement for applicant's most recent fiscal year



Scan_20211201.png Uploaded by Henry Christie on Dec 1, 2021 at 12:11 pm

Two years of audited financial statements

Uploaded by ... on

Current operating budget

Uploaded by ... on

If the applicant has not been audited, please include an unaudited balance sheet and income statement as prepared by the applicant



Scan_20211201 (2).png Uploaded by Henry Christie on Dec 1, 2021 at 12:14 pm

7. List any federal, state, local or private grant awards or funding received in the last three years and the current status of those funds. If your organization has previously received funds from Jefferson County, please list the amount, nature of the project(s) and current status of the funding and project(s).

Ranson Community Grant \$2,000, recieved. Jefferson County Community Grant several years ago.

8. If you have made an application for funding for this project from other sources (city, state, private or non-profit organizations) please list the same here.

none

Impact of the COVID-19 Pandemic

1. Please explain the impact of the COVID-19 pandemic and how it relates to your request.

See enclosed 990 statement. We have to reduce spending.

2. How will ARP funding, if awarded, aid in the recovery from the COVID-19 pandemic?

We will be able to increase services

3. Are you requesting lost revenue due to COVID-19

Yes

If yes, please explain See enclosed 990 statement

Upload supporting documentation for revenue loss



Scan_20211201 (2).png Uploaded by Henry Christie on Dec 1, 2021 at 12:26 pm

Supplementary Information

1. Please enter contact information (name, email, and phone) for at least one third-party reference.

Mumaw & Vickers, CPA 304-725-7451

2. Please include any supplementary information or documentation (such as letters of support, newspaper articles, etc) which you feel will be essential to the County's review.

Uploaded by ... on

Attachments

No attachments

History

Date	Activity
Nov 29, 2021 at 10:23 am	Henry Christie started a draft of Record ARPA-35
Dec 1, 2021 at 12:33 pm	Henry Christie submitted Record ARPA-35
Dec 1, 2021 at 12:33 pm	approval step Application Review was assigned to Michelle Gordon on Record ARPA-35
Dec 1, 2021 at 12:33 pm	changed the deadline to Dec 02, 2021 on approval step Application Review on Record ARPA-35

Timeline

Label		Status	Activated	Completed	Assignee	Due Date
	Request Letter of Acknowledgement	Issued	Dec 1, 2021 at 12:33 pm	Dec 1, 2021 at 12:33 pm	-	-
~	Application Review	Active	Dec 1, 2021 at 12:33 pm	-	Michelle Gordon	12/01/2021
	Commission Meeting	Inactive	-	-	-	-
\checkmark	Meeting Finished Yes/No	Inactive	-	-	-	-