

IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

A RESOLUTION transferring \$10,000.00 within the 2012 Health Fund and authorizing the County Executive to execute a Cooperative Agreement with One Good Meal, for the furnishing of a daily meal program for senior citizens and homebound individuals, at a cost to the County not to exceed \$10,000.00.

RESOLUTION #17900, May 21, 2012

INTRODUCED BY Bob Spence, County Legislator

WHEREAS, One Good Meal, a non-profit organization located in Lee's Summit, MO, has submitted a funding proposal for the furnishing of a daily meal program for senior citizens and homebound individuals, at a cost to the County not to exceed \$10,000.00; and,

WHEREAS, this program is in the best interests of the health, welfare, and safety of the citizens of Jackson County; and,

WHEREAS, a transfer is necessary to fund this program; and,

WHEREAS, the County Executive recommends said transfer; now therefore,

BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that the following transfer be made within the 2012 Health Fund:

<u>Department/Division</u>	<u>Character/Description</u>	<u>From</u>	<u>To</u>
Health Fund Contingency Fund 002-8005	56830 – Contingency	\$10,000	
Health Fund One Good Meal 002-7706	56789 – Outside Agency Funding		\$10,000

and,

BE IT FURTHER RESOLVED that the County Executive be and hereby is authorized to execute a Cooperative Agreement with One Good Meal, in the amount of \$10,000.00, in a form to be approved by the County Counselor; and,

BE IT FURTHER RESOLVED that the Director of Finance and Purchasing be and hereby is authorized to make all payments, including final payment on the agreement.

Effective Date: This Resolution shall be effective immediately upon its passage by a majority of the Legislature.

APPROVED AS TO FORM:

[Signature]
Chief Deputy County Counselor

[Signature]
County Counselor

Certificate of Passage

I hereby certify that the attached resolution, Resolution #17900 of May 21, 2012, was duly passed on May 21, 2012 by the Jackson County Legislature. The votes thereon were as follows:

Yeas 8

Nays 0

Abstaining 0

Absent 1

5.21.12
Date

[Signature]
Mary Jo Spino, Clerk of Legislature

Funds sufficient for this transfer are available from the source indicated below.

ACCOUNT NUMBER: 002 8005 56830
ACCOUNT TITLE: Health Fund
Contingency Fund
Contingency
NOT TO EXCEED: \$10,000.00

There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.

ACCOUNT NUMBER: 002 7706 56789
ACCOUNT TITLE: Health Fund
One Good Meal
Outside Agency Funding
NOT TO EXCEED: \$10,000.00

May 21, 2012
Date

[Signature]
Director of Finance and Purchasing

REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office:

Res/~~Ord~~ No.: 17900

Sponsor(s): Bob Spence

Date: May 21, 2012

SUBJECT	<p>Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance</p> <p>Project/Title: <u>Outside Agency Funding Request. Transferring \$10,000 within the 2012 Health Fund to Provide Funding For One Good Meal.</u></p>										
<p>BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i></p>	<table border="1"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$10,000</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td>\$</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$10,000</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$10,000</td> </tr> <tr> <td>Source of funding (name of fund) and account code number; FROM / TO Transfer From The Health Fund Contingency 002-8005-56830 into 002-7706-56789</td> <td> FROM: 002-8005-56830 TO: 002-7706-56789 </td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p>OTHER FINANCIAL INFORMATION: <input type="checkbox"/> No budget impact (no fiscal note required) <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract: Department: Estimated Use: \$</p> <p>Prior Year Budget (if applicable): 2011 \$5,000 Prior Year Actual Amount Spent (if applicable): 2011 - \$ 0</p>	Amount authorized by this legislation this fiscal year:	\$10,000	Amount previously authorized this fiscal year:	\$	Total amount authorized after this legislative action:	\$10,000	Amount budgeted for this item * (including transfers):	\$10,000	Source of funding (name of fund) and account code number; FROM / TO Transfer From The Health Fund Contingency 002-8005-56830 into 002-7706-56789	FROM: 002-8005-56830 TO: 002-7706-56789
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Amount budgeted for this item * (including transfers):	\$10,000										
Source of funding (name of fund) and account code number; FROM / TO Transfer From The Health Fund Contingency 002-8005-56830 into 002-7706-56789	FROM: 002-8005-56830 TO: 002-7706-56789										
PRIOR LEGISLATION	<p>Prior ordinances and (date):</p> <p>Prior resolutions and (date): Resolution # 17490 January 31, 2011</p>										
CONTACT INFORMATION	<p>RLA drafted by (name, title, & phone): Cindy Wallace – Audit Assistant 881-3312</p>										
REQUEST SUMMARY	<p>Please draft a contract for One Good Meal authorizing a re-allocation of the unspent \$5,000 from the 2011 budget year and \$5,000 for 2012. This Outside Agency Contract Should Be Drafted And Held By The Counselor's Office While Awaiting Compliance With Executive Order 04-18. Transfer Funds From The Health Fund Contingency.</p> <p>Transfer from 002-8005-56830 INTO 002-7706-56789 Total Contract = \$10,000 for 2012</p>										
CLEARANCE	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input type="checkbox"/> Business License Verified (Purchasing & Department) <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</p>										
ATTACHMENTS	<p><i>Proposal Attached</i></p>										
REVIEW	<table border="1"> <tr> <td>Department Director: <i>[Signature]</i></td> <td>Date: 5/18/2012</td> </tr> <tr> <td>Finance (Budget Approval): If applicable <i>[Signature]</i></td> <td>Date: 5-18-12</td> </tr> <tr> <td>Division Manager:</td> <td>Date:</td> </tr> <tr> <td>County Counselor's Office:</td> <td>Date:</td> </tr> </table>	Department Director: <i>[Signature]</i>	Date: 5/18/2012	Finance (Budget Approval): If applicable <i>[Signature]</i>	Date: 5-18-12	Division Manager:	Date:	County Counselor's Office:	Date:		
Department Director: <i>[Signature]</i>	Date: 5/18/2012										
Finance (Budget Approval): If applicable <i>[Signature]</i>	Date: 5-18-12										
Division Manager:	Date:										
County Counselor's Office:	Date:										

**Fiscal Note:
Jackson County, Missouri**

Funds sufficient for this transfer are available from the sources indicated below.

Date:	May 18, 2012	PC# _____	RES # <u>17900</u>
<u>Department / Division</u>	<u>Character/Description</u>	<u>From</u>	<u>To</u>
Health Fund - 002			
8005 - Contingency Fund	56830 - Contingency Fund	10,000	
7706 - One Good Meal	56789 - Outside Agencies		10,000
_____	_____	_____	_____
_____	_____	_____	_____

Fiscal Note:

This expenditure was included in the Annual Budget.

Date:	May 18, 2012	PC# _____	RES # _____
<u>Department / Division</u>	<u>Character/Description</u>	<u>From</u>	<u>To</u>
Health Fund - 002			Not to Exceed
7706 - One Good Meal	56789 - Outside Agencies		10,000
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	10,000

Robert S. Ball 5-18-12
Budgeting



One Good Meal is a not-for-profit incorporated organization dedicated to providing hot meals to seniors and homebound regardless of income.

December 5, 2011

Mr. Gary Panethiere, County Auditor
Jackson County, MO
415 E. 12th Street, 2nd Floor
Kansas City, MO 64106

Dear Mr. Panethiere,

Enclosed please find our 2012 Outside Agency Funding Request for Jackson County. As you know, One Good Meal is a 501(c) 3 charity. In the thirteen years of our existence we have never used any of the matching funds or donations for anything but food for our seniors and homebound. We still have no paid employees nor do we compensate any of our drivers or bakers. Our operating costs are 2% of budget. We invite court-appointed volunteers and a great many Honors Program teens to work with us. Currently, volunteers run from 3 years old to 86. With the 85-100 people we serve daily, there are never enough volunteers or money to meet all the needs.

One Good Meal has ten routes covering Lee's Summit border to border. Each route has an average of ten volunteers working on it. They assist with packaging meals for delivery, grab the dessert of the day (donated by volunteer bakers) and begin their route. Each route is documented with a map. Drivers are encouraged to spend a couple minutes talking with our clients. There is a good chance we will be the only people they see all day. Occasionally, we have been the first responder with health issues and accidents.

The primary funding source for One Good Meal is our clients. In 2011, about 53% of our clients are able to pay the cost of \$4.00 per meal. The remainder of our client base needs assistance with the cost of meals. The costs for these clients are partially off-set by a group of individuals who make regular donations to One Good Meal. Contributions are approximately 27 percent of our operating budget. Remaining funding comes through generous support of the community such as Rotary with their "Empty Bowl" event of which One Good Meal is a two-time recipient and the Community Development Block Grant through Lee's Summit. The single creditor for One Good Meal is our long-time partner, Hy-Vee East. Hy-Vee has worked with us such our inception over 15 years ago.

Enclosed for your review are copies of our Outside Agency Funding Request Form 2012 Budget, and Missouri Secretary of State Letter of Good Standing. Thanks to Legislature Bob Spence for his reminder to get this application to you. The fiscal year for One Good Meal is April 1 through March 31st.

Sincerely,
Roberta McArthur, Director
Cathy Fuhrman, Board Member



OUTSIDE AGENCY FUNDING REQUEST FORM 2012 BUDGET

415 E 12th Street, 2nd Floor
Kansas City, MO 64106

Email: auditor@jacksongov.org

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Section E: Summary of Request by Program	page 9

Section A: Organization or Agency Information

Name: One Good Meal

Address: P.O. Box 2222; Lee's Summit, MO 64063-2919

Phone No: 816-547-6394

Fax:

Website Address: www.onegoodmeal.org

Federal Tax ID No: 43-1779562

Fiscal Year Cycle: April 1 - March 31

Executive Director:

Roberta McArthur

Name and Title of Principal Contact Person:

Cathy Fuhrman

Phone No: 816-678-1863

Email Address: cathyfuhrman@sbcglobal.net

Submittal of this request has been authorized by:

Date:

Section B: Agency's 2011 and 2012 Revenue Information

Agency's 2012 Projected Revenue Information

Funding Entity	Agency's 2012 Total Projected Revenue Source You Will Request 2012 Funding From	Projected Amount	% of Total Revenue
Federal		\$ -	0
State		\$ -	0
Jackson County		\$ -	0
Other Counties		\$ -	0
City	Community Development Block Grant	\$ 2,000	2
Charity/Donations	Individuals & Corporate	\$ 24,870	27
Fundraisers	Bake Sales; Community Events	\$ 14,500	16
Other	Client Meal Revenue	\$ 51,813	56
2012 Total Projected Revenue		\$ 93,183	

Agency's 2011 Revenue Information

Funding Entity	Agency's 2011 Total Revenue Source You Received Funding From	Amount	% of Total Revenue
Federal		\$ -	0
State		\$ -	0
Jackson County		\$ -	0
Other Counties		\$ -	0
City	Community Development Block Grant	\$ 2,500	4
Charity/Donations	Individuals & Corporate	\$ 10,100	17
Fundraisers	Bake Sales, Community Events	\$ 10,000	17
Other (please list)	Client Meal Revenue	\$ 37,176	62
2011 Total Revenue		\$ 59,776	

If your agency received funding from Jackson County in 2011, please identify the funding source, amount and program name below.

Jackson County Funding Source	Yes	No	Amount	Program Name
COMBAT	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Mental Health Levy	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Board of Services for Developmentally Disabled	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Domestic Violence Board	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Housing Resources Commission	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Outside Agency Program	<input type="checkbox"/>	<input type="checkbox"/>	\$ 5,000	
2011 Total Jackson County Funding			\$ 5,000	

Did your agency receive funding or resources in 2011 from either of the following?

Mid America Regional Council	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ -
Harvesters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ -

Section C: 2012 Program Budget

Complete a separate program budget for each program your agency is applying for funding.

Agency Name: One Good Meal

Program Name: One Good Meal

Personal Services			
For each salary request below please attach a job description or duties.			
Position / Title	Total Salary	% of Salary to be funded by Jackson Co.	Amount of Salary to be funded by Jackson County
N/A - 100% Volunteer Organization			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
Total Salaries			\$ -
Total Benefits			\$ -
Total Personal Services			\$ -
Contractual Services			
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
Total Contractual Services			\$ -
Supplies			
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
Total Supplies			\$ -

Total Program Request \$ -

Section D: 2012 Program Information

Complete a separate program information sheet for each program your agency is applying for funding.

Agency Name: One Good Meal

Program Name: One Good Meal

Proposed Program

Detail functions to be performed by each program.

One Good Meal serves mid-day meals Monday through Friday to seniors and homebound individuals in Lee's Summit & Greenwood regardless of income. We serve 85-100 meals every day of operation. Because One Good Meal exists, anyone in need can receive a hot, nutritious meal. Hy-Vee supplies the main dish and side dishes at a reduced cost and city funds go to help purchase the Styrofoam containers. Volunteers supply the desserts.

Section D: 2012 Program Information

Complete a separate program information sheet for each program your agency is applying for funding.

Agency Name: One Good Meal

Program Name: One Good Meal

Lee's Summit and Greenwood, Missouri

Fund Separation

Indicate what measures your agency will take to ensure that funds received from Jackson County will be utilized for the benefit of Jackson County residents.

Approach & Method

List the top three (3) objectives for each program.

Section D: 2012 Program Information

Complete a separate program information sheet for each program your agency is applying for funding.

Agency Name: One Good Meal

Program Name: One Good Meal

1. Serve a hot, noon-time meal to those in need regardless of income.

2. Offer Community Service opportunities to students and court-ordered individuals.

3.

Detail specific methods you will use to achieve these objectives.

Meal Delivery: Over the past 15 years, One Good Meal has developed a system for organizing meal delivery to individuals in need. A strong team of volunteers arrive at Martin Luther Lutheran to divide food purchased from Hy-Vee into "to-go" boxes. These boxes are then organized by delivery route and packed into coolers with hot "bean-bags" to keep the food warm. A team of drivers is then dispatched to deliver the meals needed for that day. The meals consist of a main dish, two sides, bread & butter and a dessert. A team of volunteers supply desserts. Clients are referred to One Good Meal, learn about us from a neighbor or relative, or a relative learns about us through our many community activities such as Lee's Summit Downtown Days, John Knox Craft Sales etc. **Community Service Opportunities:** One Good Meal receives court appointed community service volunteers from three counties; Jackson, Cass and Clay. Additionally, high school students working to complete their graduation community service hours often join our volunteer base.

Evaluation

How can the success of each program be evaluated?

Indicate performance measures or statistics you will use to demonstrate the success of each program.

Section D: 2012 Program Information

Complete a separate program information sheet for each program your agency is applying for funding.

Agency Name: One Good Meal

Program Name: One Good Meal

Program success is tracked by the number of clients served and community service hours logged. Client history sheets are used to record meal delivery. Community service hours are tracked and reported to schools or courts as needed.

Notification

How will your organization make clients, the public and the media aware of the generous taxpayer funding received from Jackson County? (Please attach any examples)

One Good Meal enjoys an excellent working relationship with the local media outlets in Lee's Summit. Press releases and news articles will be submitted as appropriate to local newspapers.

Section E: Summary of Jackson County Funding Request by Program

Agency Name: One Good Meal

Program Name: One Good Meal

	Amount
1. Meal Purchase Costs	\$ 10,000
2.	\$ -
3.	\$ -
Total Jackson County Funding Request for All Programs	\$ 10,000

Is there anything Jackson County can do to help your operation run more efficiently?