

COPY

RESOLUTION AUTHORIZING COUNTY GRANT

TEXAS DEPARTMENT OF AGRICULTURE
HOME-DELIVERED MEAL GRANT PROGRAM

A RESOLUTION OF THE COUNTY OF ~~██████████~~ POLK ██████████ (County) TEXAS CERTIFYING THAT THE COUNTY HAS MADE A GRANT TO ~~██████████~~ POLK COUNTY AGING DEPARTMENT ██████████, (Organization) AN ORGANIZATION THAT PROVIDES HOME-DELIVERED MEALS TO HOMEBOUND PERSONS IN THE COUNTY WHO ARE ELDERLY AND/OR HAVE A DISABILITY AND CERTIFYING THAT THE COUNTY HAS APPROVED THE ORGANIZATION'S ACCOUNTING SYSTEM OR FISCAL AGENT.

WHEREAS, the Organization desires to apply for grant funds from the Texas Department of Agriculture to supplement and extend existing services homebound persons in the County who are elderly and/or have a disability, pursuant to the Home-Delivered Meal Grant Program (Program); and

WHEREAS, the Program rules require the County in which an Organization is providing home-delivered meal services to make a grant to the Organization, in order for the Organization to be eligible to receive Program grant funds; and

WHEREAS, the Program rules require the County to approve the Organization's accounting system or fiscal agent, in order for the Organization to be eligible to receive Program grant funds.

BE IT RESOLVED BY THE COUNTY:

SECTION 1: The County hereby certifies that it has made a grant to the Organization in the amount of \$ ~~5,000.00~~ ██████████ to be used between the ~~1ST~~ ██████████ of ~~SEPTEMBER~~ ██████████, 20 ~~10~~ ██████████ and the ~~1ST~~ ██████████ of ~~AUGUST~~ ██████████, 20 ~~11~~ ██████████.

SECTION 2: The County hereby certifies that the Organization provides home-delivered meals to homebound persons in the County who are elderly and/or have a disability.

SECTION 3: The County hereby certifies that it has approved the Organization's accounting system or fiscal agent.

Introduced, read, and passed by the affirmative vote of the County on this ~~12~~ ██████████ day of ~~██████████~~ ██████████, 20 ~~10~~ ██████████.



Signature of Authorized Official


~~ROBERT THOMPSON COUNTY JUDGE~~

Typed Name and Title

NOTE: All information shown in this resolution must be included in the resolution passed by the County.

(This form is available electronically on TDA's website at www.TexasAgriculture.gov)

SECTION B - CONTACT PERSONNEL CONTINUED			
(2) Name of Authorized Official (This person is authorized to enter into legal agreements)			
(23) Same As Above <input type="checkbox"/>			
(24) Title (Check One)	<input type="checkbox"/> Executive Director	<input type="checkbox"/> Chief Financial Officer	<input type="checkbox"/> Chief Executive Officer
	X County Judge	<input type="checkbox"/> Other _____	
(25) First Name JOHN	(26) Middle Initial P	(27) Last Name THOMPSON	
(28) E-mail Address john.thompson@co.polk.tx.us			
(29) Phone (936) 327 - 6813 Ext.		(30) Fax (936) 327 - 6891	

SECTION C - SERVICE INFORMATION	
An organization must submit one application per county. If the applicant delivers meals in multiple counties, a separate application is required for the meals in each county for which a grant is sought.	
(31) The <u>County</u> in which <u>home-delivered meals</u> were delivered	POLK
(32) Total number of HOME-DELIVERED meals delivered to homebound persons 60 years or older and/or disabled in the county stated in Question #31 between September 1, 2009 and August 31, 2010 (regardless of funding source).	43,084
(33) Does the applicant organization serve <u>congregate meals</u> in the county stated in Question #31?	X Yes <input type="checkbox"/> No
(33A.) If you answered 'YES' to question #33, please verify, by initialing on the line provided to the right , that no congregate meals were calculated in the total number of home-delivered meals you reported in Question #32. If you answered 'No', please check the box labeled N/A.	 <input type="checkbox"/> N/A Initial Here
(34) Does the applicant organization serve <u>home-delivered meals</u> in multiple Texas Counties?	<input type="checkbox"/> Yes X No
(34A.) If you answered 'YES' to Question #34, please verify, by initialing on the line provided to the right , that only home-delivered meals delivered in the county stated in Question #31 were calculated in the total number of home-delivered meals you reported in Question #32. If you answered 'No', please check the box labeled N/A.	_____ X N/A Initial Here
(34B.) If you answered 'Yes' to Question #32, please list all of the Texas counties in which the organization serves home-delivered meals, <u>including</u> those for which you do not intend to apply for TDA grant funds.	

SECTION D - CERTIFICATIONS

By signing below, Applicant:

- (1) Certifies all information provided in connection with this application is true and correct to the best of Applicant's knowledge;
- (2) Acknowledges any misrepresentation or false statement made by Applicant, or an authorized agent of Applicant, in connection with this application, whether intentional or not, will constitute grounds for denial of this application;
- (3) Acknowledges acceptance of funds in connection with this application acts as an acceptance of the authority of TDA and the State Auditor's Office (SAO) or any successor agency to conduct an investigation in connection with those funds, and Applicant further agrees to cooperate fully with TDA and/or SAO or its successor in the conduct of the audit or investigation, including allowing TDA and/or SAO to inspect Applicant's premises and providing all records requested;
- (4) Acknowledges this application and any payments owed to Applicant in connection with this application may be reduced or denied because of Applicant's owing any debt to the State of Texas, and if Applicant is an individual, that this application and any payments owed to Applicant in connection with this application may be denied because of delinquency in payment of a guarantee student loan and for failure to pay child support; and
- (5) By submission of this application, Applicant acknowledges as a condition of receipt of grant funds under this program the Applicant will be required to execute a grant agreement with the Texas Department of Agriculture, and further acknowledges that failure to timely execute the grant agreement will result in withdrawal of any grant funds awarded, and those funds will be redistributed to other qualified applicants in accordance with state law and TDA rules.

Applicant further certifies that:

- (1) Applicant is a qualifying governmental agency or nonprofit private organization that is exempt from taxation under §501(a), Internal Revenue Code of 1986, as an organization described by §501(c)(3) of that code, which is a direct provider of home-delivered meals to homebound elderly persons or persons with disabilities in Texas.
- (2) Applicant practices nondiscrimination.
- (3) Applicant has an accounting system or fiscal agent approved by the county where it provides meals and has a system to prevent the duplication of services to clients.
- (4) Applicant has received a grant from the county in which the organization is delivering meals, in accordance with Title 4, Part 1, Subchapter 0, Section 1.953 of the Texas Administrative Code.
- (5) Applicant agrees to use funds received through the home-delivered meal grant program only to supplement or extend existing home-delivered meal services.
- (6) Applicant authorizes TDA to review, verify and authenticate all information provided in this application.
- (7) Applicant understands TDA may request further documentation supporting this application, including contacting other agencies, organizations, facilities or third parties to verify data provided by an Applicant from the records of such agencies, organizations, facilities or third parties.
- (8) Applicant acknowledges, affirms, consents to, and understands that Applicant is solely responsible for calculating and verifying the information contained in sections 33 and 34 of the application, along with the information provided in Attachment A. Applicant acknowledges, affirms, consents to, and understands that if any inaccurate, incorrect, false, or misleading information is supplied in the application, including, without limitation, the information provided in sections 33, 34, and Attachment A, Applicant may be required to refund or pay back a portion or all of the funds awarded pursuant to this Grant.

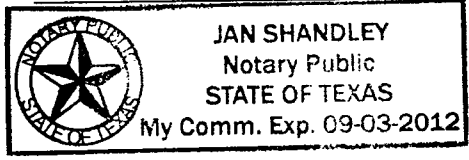
Notice of Penalties: The penalty for knowingly making false statements or false entries, or attempts to secure money through fraudulent means, may include fines and/or incarceration and/or forfeiture of funds under applicable state law.

Contact named in Sec. E.2 (Print)	Signature	Date
John P. Thompson	<i>John P. Thompson</i>	10/12/2010

State of Texas
 County of Polk

SWORN TO AND SUBSCRIBED before me on the 12 day of October, 2010.

Jan Shandley
 Notary Public, State of Texas
 Notary's printed name: Jan Shandley
 Notary's commission expires: 09-03-2012



Chair, Board of Directors (Print)	Signature	Date

State of Texas
 County of _____
 SWORN TO AND SUBSCRIBED before me on the _____ day of _____, 20____.

Notary Public, State of Texas
 Notary's printed name: _____
 Notary's commission expires: _____



**Texans Feeding Texans: Home-Delivered Meal Grant Program
Attachment A – Meal Number Worksheet**

Todd Staples, Commissioner

Applicant Organiza POLK COUNTY GOVERNMENT

Applicant County: POLK COUNTY

Please indicate, by each funding source, how many **home-delivered meals** the organization delivered* during State FY 2010, September 1, 2009 – August 31, 2010, to eligible clients** in the County for this application.

Month	Title III Meals (AAA)	Program Income Meals	NSIP AAA	Title XI Meals (DADS)	Title XV Meals (DADS)	Locally Funded Meals**	AGRICULTURE RE Meals***	OTHER	TOTAL Home- Delivered Meals
Sep-09	1,280	0	0	800	980	0	761	0	3,821
Oct-09	1,244	4	22	664	1,052	0	927	0	3,913
Nov-09	1,140	4	0	632	854	0	914	0	3,544
Dec-09	1,172	7	0	690	925	0	956	0	3,750
Jan-10	1,111	5	0	594	917	0	816	0	3,443
Feb-10	1,178	0	38	622	1,009	0	603	0	3,450
Mar-10	1,616	0	44	500	1,357	0	492	0	4,009
Apr-10	1,374	0	44	661	1,117	0	427	0	3,623
May-10	1,257	0	21	351	1,210	0	444	0	3,283
Jun-10	1,009	0	282	587	1,247	0	309	0	3,434
Jul-10	1,009	2	239	566	1,232	0	233	239	3,520
Aug-10	1,009	0	272	485	1,286	0	242	0	3,294
TOTAL	14,399	22	962	7,152	13,186	0	7,124	239	43,084

*Delivered - Includes a maximum of two attempted, but unsuccessful, meal deliveries per program participant per month.

**Eligible Clients – Homebound persons 60 years of age or older and/or disabled.

***Locally Funded Meals may include meals paid for by fund raising and other private sources, such as United Way.

****Please list Other Meal sources on a separate page, if needed.


Organization Representative

10/12/2010
Date

Applicable please provide TDA with the Region number (i.e. Region 2) for both AAA and/or DADS only

409-951-3234

Regional AAA Office

800-256-6848

Regional DADS Office

(This form is available in a downloadable Excel document on TDA's website at www.TexasAgriculture.gov)