



January 29, 2014

Mr. Cecil Wood
Interim County Manager
Davie County Government
123 South Main Street
Mocksville, NC 27028

Dear Mr. Wood,

The Dragonfly House Children's Advocacy Center is respectfully requesting funds from Davie County Government in the amount of \$21,497.00 for fiscal year 2014-15.

The Dragonfly House is a 501c3 non-profit agency that provides Forensic Interviews, Medical Examinations, Victim Advocacy, and Mental Health Treatment to child victims of physical abuse, sexual abuse, and neglect. Since opening our doors in October, 2010 we have worked with more than 1050 children primarily from Davie, Davidson, and Yadkin counties. Based on population, we have provided more services to children in Davie County than any other location served. The Dragonfly House continues to grow in numbers served and in quality of services provided every year of our operation. While these numbers are staggering to us all, they only continue to prove the need for our agency and the services we provide.

The Dragonfly House has strong partnerships in place with Davie County Sheriff's Office and Davie County Department of Social Services. The services we provide save each of these Department's time and money in their child abuse investigations and have proven to have a positive impact on the outcomes of these cases. We also have a partnership in place with Davie Domestic Violence Services and Davie County Schools. Together, with The Dragonfly House as the spoke of the wheel, we are making a difference in the lives of Davie County children who have suffered abuse.

The funds we are requesting would be used to pay for our facility rent and insurance. I have attached our overall agency budget, the budget for the Davie County request, and other information that may be needed for this request. Should you need any additional information or have any further questions please feel free to contact me at 336-753-6155.

Thank you,

A handwritten signature in cursive script that reads "Brandi Reagan".

Brandi Reagan
Executive Director

Enclosures (8)



**DAVIE COUNTY GOVERNMENT REQUEST FOR FY14-15
FOR THE DRAGONFLY HOUSE**

Annual Rent: \$18,000.00

\$1500.00 per month for 12 months paid to Richard and Judy Shore

Attached: Current Lease Contract Exhibit B, detailing lease renewal in July, 2014 for \$1500.00 per month.

ANNUAL AGENCY INSURANCE: \$3,497.00

Attached: Proof of Coverage documents for 2014 (x2) detailing annual premium payment.

TOTAL OF REQUEST: \$21,497.00

Exhibit B

1. *Term:* Dragonfly House Children's Advocacy Center (tenant) to lease property for an initial lease term of two (2) years beginning July 1, 2012 and ending June 30, 2014.
2. *Rental:* Monthly rent for initial lease term \$1400.00 per month, payable in advance by the first of each month.

Tenant is responsible for payment of all utilities, including natural gas, electricity, water and sewer. Tenant is responsible for maintenance of landscaping and the sign in the front of the building. Owner responsible for payment of County real property taxes
Tenant responsible for hookup, all maintenance and repairs to the following items which are the Owners personal property:

- Lower level refrigerator and stove
- Upstairs kitchen refrigerator and stove
- Conference room table
- Cubicles
- Canon copier currently in kitchen
- 1 metal file cabinet
- 2 light oak desks
- 2 office desk chairs
- 15 black chairs
- Built in microwave and upstairs freestanding microwave
- Phone System

3. *Alterations and repairs* – Owner will authorize Tenant to make reasonable enhancements to the property to accommodate the needs of the tenant, including allowing the removal of carpet and the installation/restoration of flooring in certain areas; painting of the interior areas; finishing the storage area in the basement; installing a security system; and such other changes as may be necessary for the full use and enjoyment of the property by the tenant.
4. *Extension of lease term:* At the conclusion of the initial lease term Tenant may extend the lease for an additional period of two (2) years at \$1500.00 per month.
5. *Option to purchase:* At any time during the lease term the tenant may purchase the property from the owner. The purchase price of the sale will be determined by current market value at that point in time.
6. *Suitability of property:* Proposal set out above is contingent upon the property being suitable for the purposes of the Tenant.

Owner would like the board to provide for tax purposes a tax break in the amount of \$200.00 per month to off-set agreeing to the \$1400.00 per month lease amount.



PHILADELPHIA
INSURANCE COMPANIES

A Member of the Tokio Marine Group

One Bala Plaza, Suite 100, Bala Cynwyd, Pennsylvania 19004
610.617.7900 • Fax 610.617.7940 • PHLX.com

January 29, 2014

Insured's Name: The Dragonfly House Children's Advoca
Insured's Address: 161 E Lexington Rd
Mocksville, NC 27028-2635

Re: Auditing Information Request Form

Below is the auditing information which you requested from Philadelphia Insurance Companies:

Policy Number: PHPK1032203
Nature of Insurance: NP : Non Profit Package
Policy Term: 07/01/2013 - 07/01/2014
Annual Premium: \$2,534.00

For any other information you need to assist in conducting this audit, please contact your agent listed below:

Agency Name: FOUNTAIN, PARKER, HARBARGER , LLC
Agency Address: 201 WASHINGTON ST.
HUNTSVILLE, AL 35801
Agency Phone Number: 256-551-0060

Sincerely,
Customer Service
Philadelphia Insurance Companies



PHILADELPHIA
INSURANCE COMPANIES

A Member of the Tokio Marine Group

One Bala Plaza, Suite 100, Bala Cynwyd, Pennsylvania 19004
610.617.7900 • Fax 610.617.7940 • PHLX.com

January 29, 2014

Insured's Name: The Dragonfly House Children's Advoca
Insured's Address: 161 E Lexington Rd
Mocksville, NC 27028-2635

Re: Auditing Information Request Form

Below is the auditing information which you requested from Philadelphia Insurance Companies:

Policy Number: PHSD847400
Nature of Insurance: FF : Flexi Plus Five
Policy Term: 07/01/2013 - 07/01/2014
Annual Premium: \$963.00

For any other information you need to assist in conducting this audit, please contact your agent listed below:

Agency Name: FOUNTAIN, PARKER, HARBARGER , LLC
Agency Address: 201 WASHINGTON ST.
HUNTSVILLE, AL 35801
Agency Phone Number: 256-551-0060

Sincerely,

Customer Service
Philadelphia Insurance Companies

TDH CAC 2014-2015 FY BUDGET

	PROJECTED FY 2014-15	GCC - VOCA	VOCA Match	Total GCC - VOCA	General Fund	Medical Reimb.	United Way	Davie County Government	CACNC - DHHS	CACNC - NCA	Woodson Foundation	TOTAL
Income		ACTUAL + MATCH = TOTAL GRANT										
<i>43400 Direct Public Support</i>												
43440 In-Kind Income	\$ 4,000.00		\$ 4,000.00	\$ 4,000.00								\$ 4,000.00
43445 Volunteer Time	\$ 9,000.00		\$ 9,000.00	\$ 9,000.00								\$ 9,000.00
43450 Indlvld, Business Contributions	\$ 20,067.29		\$ 14,080.84	\$ 14,080.84	\$ 5,986.45							\$ 20,067.29
Total 43400 Direct Public Support	\$ 33,067.29	\$ -	\$ 27,080.84	\$ 27,080.84	\$ 5,986.45	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33,067.29
<i>Grant Awards</i>												
OTHER Grant	\$ 46,497.00							\$ 21,497.00			\$ 25,000.00	\$ 46,497.00
44800 United Way Contributions	\$ 15,993.25						\$ 15,993.25					\$ 15,993.25
CACNC NCDHHS Sub Award	\$ 12,500.00							\$ 12,500.00				\$ 12,500.00
CACNC NCA Sub Award	\$ 10,000.00								\$ 10,000.00			\$ 10,000.00
GCC VOCA GRANT	\$ 108,323.37	\$ 108,323.37		\$ 108,323.37								\$ 108,323.37
Total Grants	#####	\$ 108,323.37	\$ -	\$ 108,323.37	\$ -	\$ -	\$ 15,993.25	\$ 21,497.00	\$ 12,500.00	\$ 10,000.00	\$ 25,000.00	\$ 193,313.62
47210 Medical Exam Reimbursement	\$ 61,250.00					\$ 61,250.00						\$ 61,250.00
Total 47200 Program Income	\$ 61,250.00	\$ -	\$ -	\$ -	\$ -	\$ 61,250.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 61,250.00
49000 Special Events Income	\$ 33,025.00				\$ 33,025.00							\$ 33,025.00
Total Income	\$ 33,025.00	\$ -	\$ -	\$ -	\$ 33,025.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33,025.00
Gross Profit	#####	\$ 108,323.37	\$ 27,080.84	\$ 135,404.21	\$ 39,011.45	\$ 61,250.00	\$ 15,993.25	\$ 21,497.00	\$ 12,500.00	\$ 10,000.00	\$ 25,000.00	\$ 320,655.91
Expenses		ACTUAL + MATCH = TOTAL GRANT										
<i>61000 Expensos</i>												
61002 Payroll Expenses	\$ 8,483.59		\$ 2,641.08	\$ 2,641.08	\$ 2,396.45	\$ 1,743.85	\$ 103.25		\$ 888.30	\$ 710.64		\$ 8,483.57
61003 Child Advocate Payroll	\$ 34,851.00	\$ 34,851.24		\$ 34,851.24								\$ 34,851.24
61004 Coordinator Payroll	\$ 31,200.00				\$ 31,200.00							\$ 31,200.00
61005 Director Payroll	\$ 45,046.55					\$ 22,795.49	\$ 1,350.00		\$ 11,611.70	\$ 9,289.36		\$ 45,046.55
61006 Direct Svc Volunteer	\$ 9,000.00		\$ 9,000.00	\$ 9,000.00								\$ 9,000.00
61020 HRA Benefit Card	\$ 4,180.00	\$ 1,320.00		\$ 1,320.00		\$ 2,860.00						\$ 4,180.00
Total 61002 Payroll Expenses	#####	\$ 35,971.24	\$ 11,641.08	\$ 47,612.32	\$ 33,596.45	\$ 27,399.34	\$ 1,453.25	\$ -	\$ 12,500.00	\$ 10,000.00	\$ -	\$ 132,561.36
61040 Contractual												
61041 Physician	\$ 72,000.00	\$ 72,000.00		\$ 72,000.00								\$ 72,000.00
61042 Therapist	\$ 32,560.00	\$ 350.62	\$ 7,209.38	\$ 7,560.00							\$ 25,000.00	\$ 32,560.00
61043 Intervlewer	\$ 13,380.00						\$ 13,380.00					\$ 13,380.00
61044 Accountant	\$ 3,380.00					\$ 3,380.00						\$ 3,380.00
61045 Medical Billing	\$ 5,000.00					\$ 5,000.00						\$ 5,000.00
Total 61040 Contract Services	#####	\$ 72,350.62	\$ 7,209.38	\$ 79,560.00	\$ -	\$ 8,380.00	\$ 13,380.00	\$ -	\$ -	\$ -	\$ 25,000.00	\$ 126,320.00
61050 Travel Expenses	\$ -											\$ -
61051 Client Transportation	\$ -											\$ -
61052 Mileage Reimbursement	\$ 1,415.00				\$ 1,415.00							\$ 1,415.00
61053 Subsistence for Travel	\$ 1,320.00					\$ 1,020.00	\$ 300.00					\$ 1,320.00
61054 Registration Fees	\$ 1,095.00					\$ 595.00	\$ 400.00					\$ 1,095.00
Total 61050 Travel Expenses	\$ 3,830.00	\$ -	\$ -	\$ -	\$ 1,415.00	\$ 1,715.00	\$ 700.00	\$ -	\$ -	\$ -	\$ -	\$ 3,830.00
61099 Operational Expenses	\$ 2,500.00					\$ 2,500.00						\$ 2,500.00
61100 Operational Supplies	\$ 5,619.00					\$ 5,159.00	\$ 460.00					\$ 5,619.00
61101 Department Supplies	\$ 4,030.00		\$ 4,030.00	\$ 4,030.00								\$ 4,030.00
61102 Printing	\$ 1,000.00					\$ 1,000.00						\$ 1,000.00
61103 Utilities	\$ 3,300.00					\$ 3,300.00						\$ 3,300.00
61104 Communications/Telephone	\$ 2,280.00					\$ 2,280.00						\$ 2,280.00
61105 Water/Sewer	\$ 280.00					\$ 280.00						\$ 280.00
61106 Rent	\$ 18,000.00							\$ 18,000.00				\$ 18,000.00
61108 Dues and Memberships	\$ 600.00					\$ 600.00						\$ 600.00
61109 Copier Expenses	\$ 3,500.00					\$ 3,500.00						\$ 3,500.00
61112 Postage and Mailing	\$ 600.00					\$ 600.00						\$ 600.00
61113 Database and Software	\$ 3,880.00					\$ 3,880.00						\$ 3,880.00
61115 Insurance - Personal Liability	\$ 4,200.00		\$ 4,200.00	\$ 4,200.00								\$ 4,200.00
61116 Insurance - Property, D&O, etc	\$ 3,497.00							\$ 3,497.00				\$ 3,497.00
61117 Laboratory Fees	\$ 500.00					\$ 500.00						\$ 500.00
61121 Special Events Expenses	\$ 4,000.00				\$ 4,000.00							\$ 4,000.00
61122 Background Checks	\$ 140.00					\$ 140.00						\$ 140.00
Total 61099 Operational Expenses	\$ 57,926.00	\$ -	\$ 8,230.00	\$ 8,230.00	\$ 4,000.00	\$ 23,739.00	\$ 460.00	\$ 21,497.00	\$ -	\$ -	\$ -	\$ 57,926.00
Total 61000 Expenses	#####	\$ 108,321.86	\$ 27,080.46	\$ 135,402.32	\$ 39,011.45	\$ 61,233.34	\$ 15,993.25	\$ 21,497.00	\$ 12,500.00	\$ 10,000.00	\$ 25,000.00	\$ 320,637.36
Net Operating Income	\$ 19.77	\$ 1.51	\$ 0.38	\$ 1.89	\$ -	\$ 16.66	\$ -	\$ -	\$ 0.00	\$ 0.00	\$ -	\$ 18.55

The Dragonfly House
Budget Overview: 7/1/13-6/30/14 - FY14 P&L Classes

July 2013 - June 2014

	GCC - VOCA	VOCA Match	Total GCC - VOCA	General Fund	Medical Reimb.	United Way	TOTAL
Income							
43400 Direct Public Support							\$0.00
43440 In-Kind Income		8,357.00	8,357.00				\$8,357.00
43445 Volunteer Time		7,100.00	7,100.00				\$7,100.00
43450 Individ, Business Contributions				20,688.00			\$20,688.00
Total 43400 Direct Public Support	0.00	15,457.00	15,457.00	20,688.00	0.00	0.00	\$36,145.00
44500 Government Grants							\$0.00
44510 GCC - VOCA Grant	169,164.00		169,164.00				\$169,164.00
Total 44500 Government Grants	169,164.00	0.00	169,164.00	0.00	0.00	0.00	\$169,164.00
44800 United Way Contributions						4,692.00	\$4,692.00
47200 Program Income							\$0.00
47210 Medical Exam Reimbursement					50,000.00		\$50,000.00
Total 47200 Program Income	0.00	0.00	0.00	0.00	50,000.00	0.00	\$50,000.00
49000 Special Events Income		28,420.00	28,420.00				\$28,420.00
Total Income	\$169,164.00	\$43,877.00	\$213,041.00	\$20,688.00	\$50,000.00	\$4,692.00	\$288,421.00
Gross Profit	\$169,164.00	\$43,877.00	\$213,041.00	\$20,688.00	\$50,000.00	\$4,692.00	\$288,421.00
Expenses							
61000 Expenses							\$0.00
61002 Payroll Expenses		5,521.00	5,521.00		1,258.00		\$6,779.00
61003 Child Advocate Payroll	25,609.00	9,041.00	34,650.00				\$34,650.00
61004 Coordinator Payroll	15,600.00		15,600.00				\$15,600.00
61005 Director Payroll	15,705.00	6,818.00	22,523.00		22,524.00		\$45,047.00
61006 Direct Svc Volunteer		7,100.00	7,100.00				\$7,100.00
61020 HRA Benefit Card	2,795.00		2,795.00		635.00		\$3,430.00
Total 61002 Payroll Expenses	59,709.00	28,480.00	88,189.00	0.00	24,417.00	0.00	\$112,606.00
61040 Contract Services							\$0.00
61041 Physician	51,018.00		51,018.00		8,981.00		\$59,999.00
61042 Therapist	22,500.00		22,500.00		5,100.00		\$27,600.00
61043 Interviewer				8,688.00		4,692.00	\$13,380.00
61044 Accountant					6,000.00		\$6,000.00
Total 61040 Contract Services	73,518.00	0.00	73,518.00	8,688.00	20,081.00	4,692.00	\$106,979.00
61050 Travel Expenses					300.00		\$300.00
61051 Client Transportation	200.00		200.00				\$200.00
61052 Mileage Reimbursement	1,475.00		1,475.00				\$1,475.00
61053 Subsistence for Travel	758.00		758.00				\$758.00
61054 Registration Fees	1,725.00		1,725.00		400.00		\$2,125.00
Total 61050 Travel Expenses	4,158.00	0.00	4,158.00	0.00	700.00	0.00	\$4,858.00
61099 Operational Expenses				1,670.00	840.00		\$2,510.00
61100 Operational Supplies	3,200.00	558.00	3,758.00	2,880.00	460.00		\$7,098.00
61101 Department Supplies		3,000.00	3,000.00				\$3,000.00
61102 Printing	1,500.00		1,500.00				\$1,500.00
61103 Utilities		3,300.00	3,300.00				\$3,300.00
61104 Communications/Telephone		2,280.00	2,280.00				\$2,280.00
61105 Water/Sewer		320.00	320.00				\$320.00
61106 Rent	16,800.00	4,800.00	21,600.00				\$21,600.00
61108 Dues and Memberships	665.00		665.00				\$665.00
61109 Copier Expenses	3,300.00		3,300.00		200.00		\$3,500.00
61112 Postage and Mailing	600.00		600.00				\$600.00
61113 Database and Software	2,000.00		2,000.00		1,880.00		\$3,880.00
61115 Insurance - Personal Liability	3,800.00		3,800.00				\$3,800.00
61116 Insurance - Property, D&O, etc				3,450.00			\$3,450.00
61117 Laboratory Fees					500.00		\$500.00
61121 Special Events Expenses				4,000.00			\$4,000.00
61122 Background Checks					210.00		\$210.00
Total 61099 Operational Expenses	31,865.00	14,258.00	46,123.00	12,000.00	4,090.00	0.00	\$62,213.00
Total 61000 Expenses	169,250.00	42,738.00	211,988.00	20,688.00	49,288.00	4,692.00	\$286,656.00
Total Expenses	\$169,250.00	\$42,738.00	\$211,988.00	\$20,688.00	\$49,288.00	\$4,692.00	\$286,656.00
Net Operating Income	\$ -86.00	\$1,139.00	\$1,053.00	\$0.00	\$712.00	\$0.00	\$1,765.00
Net Income	\$ -86.00	\$1,139.00	\$1,053.00	\$0.00	\$712.00	\$0.00	\$1,765.00

The Dragonfly House Children's Advocacy Center **Governing Board of Directors**

<u>Position</u>	<u>NAME</u>	<u>AGENCY/COMMUNITY AFFILIATION</u>	<u>Address</u>	<u>City, State, Zip</u>	<u>EMAIL</u>	<u>Phone</u>	<u>COUNTY</u>
<i>Chairman</i>	Jerry D Hartman	Chief Deputy - Davie County Sheriff's Office	735 Pudding Ridge Road	Mocksville, NC 27028	jhartman@dcsonc.com	336-936-2965	Davie
<i>Vice Chairman</i>	Jeff Insley	Chief of Police - Thomasville PD	7 W. Guilford St.	Thomasville, NC 27361	jeff.insley@thomasville-nc.gov	336-475-4260	Davidson
<i>Secretary</i>	Kathy Hitchcock	Davidson County DSS - CPS Supervisor	P.O. Box 788	Lexington, NC 27293	Kathy.Hitchcock@DavidsonCountyNC.gov	336-474-2741	Davidson
<i>Treasurer</i>	Wanda C. Bowles	Don Bowles CPA	728 N Main St	Mocksville, NC. 27028	wanda@donbowlescpa.com	336-753-1040	Davie
	Amanda Bowman	Director, DCCC Child Development Center	6202 Glen Way West Drive	Winston-Salem, NC 27107	adbowman@davidsonccc.edu	336-224-4830	Davidson
	Christine Bralley	Town of Mocksville - Town Manager	171 S. Clement St.	Mocksville, NC 27028	cbralley@mocksvillenc.gov	336-753-6700	Davie
	Mary Covington	Judge - District 22B	712 Scottwood Drive	Thomasville, NC 27360	lillywalk@yahoo.com	336-880-2001	Davidson
	Charles E. Frye, III	Davidson County Attorney	1120 Country Club Drive	Lexington, NC 27292	Chuck.Frye@DavidsonCountyNC.gov	336-236-3084	Davidson
	Paula Harrison	Retired - Fmr Davidson County DSS Supervisor	122 Shady Brook Road	Mocksville, NC 27028	harr7165@roadrunner.com	336-998-5889	Davie
	Chinera Latham	Retired, Former Educator	2111 Cana Road	Mocksville, NC 27028	aceandteach@yadtel.net	336-575-8376	Davie
	Pamala McNeill	Bermuda Village - Director of Health Care Services	110 Millstone Lane	Advance, NC 27006	pamala.mcneill@bermudavillage.net	336-998-6712	Davie
	Monta Oliver	Yadkin County DSS - CPS Supervisor	250 Willow Street	Yadkinville, NC 27055	moliver@YadkinCountyNC.gov	336-849-7549	Yadkin
	Linda Sechrist	Retired, Independent Consultant	245 Beechwood Drive	Mocksville, NC 27028	sechrlb@roadrunner.com	336-751-5033	Davie
<i>ex-officio</i>	Brandi Reagan	Director	161 E. Lexington Road	Mocksville, NC 27028	brandi@thedragonflyhouse.com	336-753-6155	

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date:

06/14/12

DRAGONFLY HOUSE CHILDRENS ADVOCACY
CENTER INC
161 E LEXINGTON RD
MOCKSVILLE, NC 27028

Employer Identification Number:
45-2735282
DLN:
17053206361002
Contact Person:
ERIC KAYE ID# 31612
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
June 30, 2012
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)