		and the second sec				
House District THE TWENTY-EIGHTH LEGISLATURE						
APPLICATIO	APPLICATION FOR GRANTS					
Senate District CHAPTER 42F, HAV	CHAPTER 42F, HAWAII REVISED STATUTES					
Type of Grant Request:						
GRANT REQUEST - OPERATING	GRANT REQUEST - CAPIT	TAL				
"Grant" means an award of state funds by the legislature, by an appropriation	to a specified recipient, to support the activities of	f the recipient and permit the				
community to benefit from those activities.						
"Recipient" means any organization or person receiving a grant.						
	and the second sec					
STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LEAVE BLANK II	UNKNOWN):					
STATE PROGRAM LD. NO. (LEAVE BLANK IF UNKNOWN):						
1. APPLICANT INFORMATION:	2. CONTACT PERSON FOR MATTERS INVOLVING	THIS APPLICATION.				
Legal Name of Requesting Organization or Individual: Huj Pono Hotoholona	Name VIVIAN TOELLNER					
Dba: PAWS - Pono Animal Way Sanctuary	Title Treasurer					
Street Address: 11-3436 Hibiscus Street - Fern Acres-Mt. View and						
11-3347 Waimaka O Pele Road - Kopua - 20 acre Farm Lot - Mt. View	Phone #(808) 345-2753					
Mailing Address:	Fax #N/A					
PO Boy 943, Mt. View HI 96771	E-mail paws@hphhawaii.org					
3. TYPE OF BUSINESS ENTITY:	6. DESCRIPTIVE TITLE OF APPLICANT'S REQUE	ST:				
NON PROFIT CORPORATION INCORPORATED IN HAWAII	LAVA CAT. RELOCATION & PROTECTION - FENCI					
FOR PROFIT CORPORATION INCORPORATED IN HAWAII						
LIMITED LIABILITY COMPANY						
OTHER						
		-				
	7. AMOUNT OF STATE FUNDS REQUESTED:					
4. FEDERAL TAX ID #:						
	FISCAL YEAR 2017: \$ 40,000.00					
8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:	1					
NEW SERVICE (PRESENTLY DOES NOT EXIST) SPECIFY THE A	MOUNT BY SOURCES OF FUNDS AVAILABLE					
	FTHIS REQUEST:					
	DERAL \$0					
	JNTY \$0 VATE/OTHER \$					
		and the second state of th				
TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE						
		10.11				
VIVIAN TOELL	JER	1-21-16				
ALTHORIZED SIGNATURE NAME	ATME DECENS					
	D 7/22	59 111				
	1/22	LG MA				

Application for Grants

If any item is not applicable to the request, the applicant should enter "not applicable".

I. Background and Summary

This section shall clearly and concisely summarize and highlight the contents of the request in such a way as to provide the State Legislature with a broad understanding of the request. Please include the following:

- 1. A brief description of the applicant's background;
 - Hui Pono Holoholona is dedicated to improving the lives of animals on the Island of Hawaii. The 501c3 nonprofit was established in 2006. Please visit our website: www.hphhawaii.org and FaceBook page. Over 3,500 dogs and cats have been spay/neutered through HPH efforts. PAWS - Pono Animal Way Sanctuary near Mt. View was opened in 2014. The 20 acre Farm Lot is currently home to 75 felines. 25 of the rescued cats have come from the Pahoa Town cat colony areas.
- The goals and objectives related to the request; Protective fencing of the Sanctuary is to improve the safety of animals and humans at the sanctuary. Loose dogs have attacked and return occasionally. Fencing will improve the safety and capacity of the Sanctuary. Two acres have been cleared and are partially fenced. The remaining 18 acres are untouched.
- The public purpose and need to be served; Relocation of cats from certain areas of conflict or natural disaster is a more Humane Solution than the current methods, of do nothing and let them suffer or catch and kill.
- 4. Describe the target population to be served; and East Hawaii Island.
- 5. Describe the geographic coverage. Hilo, Keaau, Pahoa, Kurtistown, Volcano, Mt. View, Puna Area.

II. Service Summary and Outcomes

The Service Summary shall include a detailed discussion of the applicant's approach to the request. The applicant shall clearly and concisely specify the results, outcomes, and measures of effectiveness from this request. The applicant shall:

- Describe the scope of work, tasks and responsibilities; <u>Work with individuals and groups in need of relocating their cat colonies because</u> <u>of natural disaster or conflicts</u>.
- 2. Provide a projected annual timeline for accomplishing the results or outcomes of the service;

Rescue efforts are ongoing, as needs be. Fencing project proceeds as funds become available, if grant is approved, work would begin in 2016 and expect completion in 2017.

- 3. Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results; and Fencing will improve safety and security for the sanctuary. Galvanized steel post will be concrete set in holes drilled into the lava rock.
- 4. List the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the expending agency. The installation of fencing, reporting the number of cats relocated and their condition. HPH financials, Invoices, payments, pictures, video, site visits and any other requested methods.

III. Financial

Budget

- 1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.
- 2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2017.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
25,000	5,000	5,000	<u>5,000</u>	\$40,000,00

- The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2017.
 <u>A Crowdfunding campaign is still open from 2015 on Indiegogo</u>. <u>Applying for</u> <u>County of Hawaii Grant to continue Low Cost Spay/Neuter Clinics for 2016/2017</u>.
- 4. The applicant shall provide a listing of all state and federal tax credits it has been granted within the prior three years. Additionally, the applicant shall provide a listing of all state and federal tax credits they have applied for or anticipate applying for pertaining to any capital project, if applicable. Not Applicable.
- The applicant shall provide a listing of all federal, state, and county government contracts and grants it has been and will be receiving for program funding. County of Hawaii - 2015 / 2016 Non Profit Grant \$13,000.00 for Low Cost Spay / Neuter Clinics for East Hawaii Island.-

Applicant ____

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2015. Zero, No unrestricted funds. All monies are for Spay/Neuter Program costs, Sanctuary Costs or Fence Funds.

IV. Experience and Capability

A. Necessary Skills and Experience

The applicant shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the request. State your experience and appropriateness for providing the service proposed in this application. The applicant shall also provide a listing of verifiable experience of related projects or contracts for the most recent three years that are pertinent to the request. Volunteers will continue to install the Fence. Land clearing will be done by licensed dozing contractor.

B. Facilities

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the request. If facilities are not presently available, describe plans to secure facilities. <u>PAWS - Pono Animal Way Sanctuary is a 20 acre farm</u> lot near Mt. View, on the Island of Hawaii. One acre was dozed in 2013, and a second acre in 2015. Ten 20ft x 30ft Chain link and roofed kennels are occupied by special needs cats. Other felines are located in feeding stations areas, and these are the ones needing the protective sanctuary fencing.

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Applicant

V. Personnel: Project Organization and Staffing

A. Proposed Staffing, Staff Qualifications, Supervision and Training

The applicant shall describe the proposed staffing pattern and proposed service capacity appropriate for the viability of the request. The applicant shall provide the qualifications and experience of personnel for the request and shall describe its ability to supervise, train and provide administrative direction relative to the request. A combined effort of Volunteers will design and install the fencing. Board Members and Volunteers have worked many long and hard hours conducting over 50 spay/neuter clinics, tending to TNRM cat colonies and taking in many unfortunates for hands on care. We are working with many wonderful Veterinarians, aiding with pre and post operating procedures.

B. Organization Chart

The applicant shall illustrate the position of each staff and line of responsibility/supervision. If the request is part of a large, multi-purpose organization, include an organization chart that illustrates the placement of this request. HPH Board members are dedicated to the mission, and will continue to serve, as they have for several years. Daily care for the Sanctuary animals is done by President - Frannie Pueo. Vice President - Tina Bounds handles Adoptions and Foster Care. Financial over site is provided by Treasurer - Vivian Toellner. PAWS Fence Group consists of 7 additional Volunteers.

C. Compensation

The applicant shall provide the annual salaries paid by the applicant to the three highest paid officers, directors, or employees of the organization by position. Zero-All Volunteer.

VI. Other

A. Litigation

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgement. If applicable, please explain. <u>None</u>.

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Applicant _____

B. Licensure or Accreditation

The applicant shall specify any special qualifications, including but not limited to licensure or accreditation that the applicant possesses relevant to this request.<u>IRS</u> 501c3 nonprofit letter of determination:

	All and a second	Derestment of the Trassury			
	P.D. Box 2508				
7	Sinchnati, OH 45201				
- C					
	Date: March 11, 2008	Person to Contact:			
		Sonya Adigun ID# 31-08788 Toli Free Telephone Number:			
	HUI PONO HOLOHOLONA C/O FRANCES PUEO	877-829-5500			
	P.O. BOX 943	Employer Identification Number:			
	MT VIEW, HI 96771	20-8667302			
	Dear Sir or Madam:				
	This is in response to your request of Max been updated to reflect this change.	rch 11, 2008, regarding your change of address. Our records have			
	Our records indicate that a determination Federal income tax, and reflect that you a Code.	letter was issued in June 2007 that recognized you as exempt from are currently exempt under section 501(c)3) of the Internal Revenue			
	Qur records also indicate you are not a pr because you are described in section 509	rivels foundation within the meaning of section 509(a) of the Code B(a)(1) and 170(b)(1)(A)(vi). Public Charity Status			
1	conors may deduct <u>contributions to you as provided in section 170 of the Code</u> . Bequests, legacies, devises, malers, or gifts to you or for your use are deductible for federal estats and gift tax purposes if they meet the estaticable provisions of sections 2055, 2106, and 2522 of the Code.				
	Hou have any questions, please call us	at the telephone number shown in the heading of this letter.			
	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	Sincerely.			
	· ·				
		Cinff Westcott Managar, Exempt Organizations Determinations			
	- Miles				
1					
	4				

Applicant _

DCCA State of Hawaii

Downloaded on January 20, 2016. The information provided below is not a cartification of good standing and does not constitute any other certification by the State. Website URL: <u>http://http://bo.effactation.cou/information</u>

Business Information

MASTER NAME	HUI PONO HOLOHOLONA
BUSINESS TYPE	Domestic Nonprofit Corporation
FILE NUMBER	217673 D2
STATUS	Active
PURPOSE	ALL VOLUNTEER NON PROFIT ORGANIZATION FORMED TO REDUCE ANIMAL OVERPOPULATION HUMANELY; BY OFFERING TO CARETAKERS OF CAT COLONIES AND PET OWNERS IN NEED; LOW COST/FREE SPAY AND NEUTERING OF EAST HAWAII'S CATS & DOGS, DONATIONS ARE WELCOME. ALL FUNDS GO TO THE ANIMALS. P.A.W.S PONO ANIMAL WAY SANCTUARY - 20 ACRE FACILITY WAS STARTED IN 2013. SMALL VERY DEDICATED GROUP HAS SPAY/NEUTERED NEARLY 4,000 DOGS AND CATS.
PLACE INCORPORATED	Hawaii UNITED STATES
INCORPORATION DATE	Dec 6, 2006
MAILING	P O BOX 943
ADDRESS	MOUNTAIN VIEW, Hawaii 96771 UNITED STATES
TERM	PER
AGENT NAME	FRANCES PUEO
AGENT ADDRESS	11-3436 HIBISCUS ST
	MOUNTAIN VIEW, Hawaii 96771
	UNITED STATES

Annual Filings

FILING YEAR	DATE RECEIVED	STATUS
2015	Nov 19, 2015	Processed
2014	Oct 3, 2014	Processed
2013	Dec 7, 2013	Processed
2012	Dec 27, 2012	Processed
2011	Oct 10, 2011	Processed
2010	Dec 9, 2010	Processed
2009	Dec 28, 2009	Processed
2008	Dec 16, 2008	Processed
2007	Mar 17, 2008	Processed

Officers

NAME	OFFICE	DATE
PUEO,FRANCES	P/D	Oct 1, 2007
BOUNDS,TINA	V/D	Oct 1, 2012
TOELLNER, VIVIAN	T/D	Oct 1, 201

Applicant ____

C. Private Educational Institutions

The applicant shall specify whether the grant will be used to support or benefit a sectarian or non-sectarian private educational institution. Please see Article X, Section 1, of the State Constitution for the relevance of this question. N/A

D. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2016-17 the activity funded by the grant if the grant of this application is:

- Received by the applicant for fiscal year 2016-17, but Once fencing is installed, little maintenance should be required. Minor repairs and maintenance would be seen to by Volunteers.
- (2) Not received by the applicant thereafter. <u>Once built</u>, <u>Future funding not</u> <u>anticipated</u>.

E. Certificate of Good Standing (If the Applicant is an Organization)

If the applicant is an organization, the applicant shall submit one (1) copy of a certificate of good standing from the Director of Commerce and Consumer Affairs that is dated no earlier than December 1, 2015.



STATE OF HAWAII STATE PROCUREMENT OFFICE

CERTIFICATE OF VENDOR COMPLIANCE

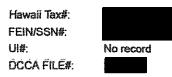
This document presents the compliance status of the vendor identified below on the issue date with respect to certificates required from the Hawaii Department of Taxation (DOTAX), the Internal Revenue Service, the Hawaii Department of Labor and Industrial Relations (DLIR), and the Hawaii Department of Commerce and Consumer Affairs (DCCA).

Vendor Name: HUI PONO HOLOHOLONA

DBA/Trade Name: Hui Pono Holoholona

Issue Date: 01/22/2016

Status: Compliant



Status of Compliance for this Vendor on issue date:

Form	Department(s)	Status
A-6	Hawali Department of Taxation	Compliant
	Internal Revenue Service	Compliant
COGS	Hawaii Department of Commerce & Consumer Affairs	Compliant
LIR27	Hawaii Department of Labor & Industrial Relations	Compliant

Status Legend:

Status	Description
Exempt	The entity is exempt from this requirement
Compliant	The entity is compliant with this requirement or the entity is in agreement with agency and actively working towards compliance
Pending	The entity is compliant with DLIR requirement
Submitted	The entity has applied for the certificate but it is awaiting approval
Not Compliant	The entity is not in compliance with the requirement and should contact the issuing agency for more information

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2016 to June 30, 2017

Applicant: ___Hui Pono Holoholona / PAWS Sanctuary_____

	UDGET ATEGORIES	Total State Funds Requested (a)	Total Federal Funds Requested (b)	Total County Funds Requested (C)	Total Private/Other Funds Requested (d)	
Α.	PERSONNEL COST					
	1. Salaries					
8	2. Payroll Taxes & Assessments					
Ľ	3. Fringe Benefits			<u> </u>		
<u> </u>	TOTAL PERSONNEL COST	0	0	0	0	
В.	OTHER CURRENT EXPENSES					
	1. Airfare, Inter-Island					
I 1	2. Insurance					
	3. Lease/Rental of Equipment					
	4. Lease/Rental of Space					
	5. Staff Training					
	6. Supplies					
	7. Telecommunication					
	8. Utilities					
	9					
	10					
	11					
	12					
	13					
	14					
	15					
	16		·			
	17					
	18					
	19 20					
	20					
	TOTAL OTHER CURRENT EXPENSES	0	0	0	0	
C.	EQUIPMENT PURCHASES	0	0	0	0	
D.	MOTOR VEHICLE PURCHASES	0	0	0	0	
E.	CAPITAL	40,000	0	0	0	
то	TAL (A+B+C+D+E)	40,000	0	0	0	
			Budget Prepared I	3v:		
60	URCES OF FUNDING			-,-		
30			Million of		24-02-	
	(a) Total State Funds Requested	40,000	VIVIAN	DELLNER	345-2153	
	(b) Total Federal Funds Requeste	0	Name (Please type or p	nnt)	and a second second second second	
	(c) Total County Funds Requeste	0			1-21-16	
	(d) Total Private/Other Funds Requested		Signature of Authorized	Official	Date	
то	TAL BUDGET	40,000	VIVIANS TUEllNER TREASURER			

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2016 to June 30, 2017

Applicant: _____Hui Pono Holoholona / PAWS Sanctuary____

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Volunteers - Donated Labor				\$
······································				\$ -
				\$
				\$ -
				\$
	ļ			\$
				s -
				\$
				\$
				\$
				\$
				s -
				\$
				\$ -
TOTAL:				0.00
JUSTIFICATION/COMMENTS:				

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2016 to June 30, 2017

Applicant: _____Hui Pono Holoholona / PAWS Sanctuary_____

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
Heavy Galvanized Metal Fence Post - set in concrete	520.00	\$15.00	\$ 7,800.00	7800
Fencing for 20 acres = 4,342 ft, 300 ft rolls, \$200 per roll	14	\$200.00	\$ 2,800.00	2800
Gates - Drive way size	2	\$300.00	\$ 600.00	600
Gates - Walk in size for Kennel areas	8	\$225.00	\$ 1,800.00	1800
			\$ -	
TOTAL:	544		\$ 13,000.00	13,000

JUSTIFICATION/COMMENTS:

Galvanized fence post cost more, but will last longer in the very rainy location. For Sanctuary's fullest potential all 20 acres should be fenced. Extra materials will be used to section off portions of Sanctuary.

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL
Dozing / Backhoe work contracted out	1.00	\$27,000.00	\$ 27,000.00	27000
			\$-	
			\$-	
			\$ -	
			\$ -	
TOTAL:	1		\$ 27,000.00	27,000
JUSTIFICATION/COMMENTS:				
Fence line must be cleared. 4,432 feet of fence line around 20) acres and se	ctioned if budg	et allows.	

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2016 to June 30, 2017

Applicant: Hui Pono Holoholona / PAWS Sanctuary_____

TOTAL PROJECT COST	ALL SOURCE RECEIVED IN		STATE FUNDS REQUESTED	OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2014-2015	FY: 2015-2016	FY:2016-2017	FY:2016-2017	FY:2017-2018	FY:2018-2019
PLANS						
	75000	0	0	0	0	0
DESIGN						
CONSTRUCTION	6000	0	40000	0	0	C
EQUIPMENT						
TOTAL:	81000	0	40,000	o	o	

The 20 acres of land is donated for the Sanctuary. Current plans are to install fencing a little each year. If State Grant is received overall fencing project will cost less, be accomplished in less than one year and allow Sanctuary to provide community services more quickly and budget donations to direct animal services.

GOVERNMENT CONTRACTS AND / OR GRANTS

Applicant:Hui Pono Holoholona			Contracts Total: 13,000			
	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE	
1	Low Cost Spay / Neuter Program	July 1, 2015 to June 30, 2016	County of Hawaii	County of Hawaii	13,000	
2 3						
4						
5						
6 7						
8				-		
9						
10						
11						
12						
13						
14 15						
15						
16 17						
18	3					
19						
20)	100 mm				
22	7					
23	3					
24						
25						
19 20 21 22 23 24 25 27 28 27 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	7					
25	3					
29						
30						

DECLARATION STATEMENT OF APPLICANTS FOR GRANTS PURSUANT TO CHAPTER 42F, HAWAI'I REVISED STATUTES

The undersigned authorized representative of the applicant certifies the following:

- 1) The applicant meets and will comply with all of the following standards for the award of grants pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant is awarded;
 - b) Complies with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
 - c) Agrees not to use state funds for entertainment or lobbying activities; and
 - d) Allows the state agency to which funds for the grant were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant.
- If the applicant is an organization, the applicant meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is incorporated under the laws of the State; and
 - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant is awarded shall be conducted or provided.
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
 - b) Has a governing board whose members have no material conflict of interest and serve without compensation.

Pursuant to Section 42F-103, Hawai'i Revised Statutes, for grants used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant used for the acquisition of the land.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

Hui Pono Holoholona / PAWS - 1 (Typed Name of Individual or Organizati		
	1-21-16	
(Signature)	(Date)	
Vivian S. Toellner	Treasurer	
(Typed Name)	(Title)	