

SUPPLEMENTAL ITEM CHECKLIST
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM
DUE DATE: MAY 8, 2025

Submit one copy of the following items:

Required:

- ☐ Board of Directors list including position/title on board/city of residence.
- ☐ Contact numbers for Board Chair or President and Treasurer.
- ☐ Resolution or Board Minutes showing approval to apply and designation of person who will sign documents on behalf of the organization.
- ☐ Organization Chart
- ☐ Articles of Incorporation
- ☐ Bylaws
- ☐ Tax Exempt Determination Letter (for non-profit organizations)
- ☐ Organization's Current Budget and Proposed Budget for next fiscal year
- ☐ Most Recent audit or CPA prepared review.
- ☐ Description of employees, board members, volunteers who will work with the project
- ☐ Non-discrimination Policy Statement

If applicable:

- ☐ Fee schedule or structure for the project proposed for funding
- ☐ Copy of program application if one is used to select beneficiaries
- ☐ Analysis of program or service expansion if this is not a new service.
- ☐ Description of how beneficiaries will be selected (if not by application form)
- ☐ Description of how applicant income will be determined if there are direct beneficiaries
- ☐ Detailed explanation of any lawsuits, judgments, or bankruptcy proceedings
- ☐ Job description for new positions expected to be filled using CDBG funding

CITY OF SAN MARCOS
2025 CDBG PUBLIC SERVICES APPLICATION



Due Date: May 8, 2025

I. APPLICANT CONTACT INFORMATION

Applicant Organization: The Society of St. Vincent de Paul

Contact Name: Warner Davis Telephone: [REDACTED]

Mailing Address: 624 E. Hopkins St., San Marcos, TX 78666

Physical Address, if different from mailing address: 218 Roosevelt St., San Marcos, TX 78666

Contact E-Mail Address: [REDACTED] ; [REDACTED]

Web Address: svdpsanmarcos.org

Who is authorized to execute program documents? Warner Davis, Vice-President

II. APPLICATION SUMMARY INFORMATION

Project Name: Emergency Services to the Poor

Amount of CDBG Funds Requested: \$15,000

Project Location: 218 Roosevelt St., San Marcos, TX 78666

III. PROJECT DESCRIPTION

A. PROGRAM SUMMARY

Briefly summarize the program for which CDBG funding has been requested.

The Society of St. Vincent de Paul is an international organization, founded in 1833, with the purpose of providing direct aid and assistance to the poor and needy. Since 1995, the San Marcos Conference, using the time-tested principles and guidelines of the Society, provides direct aid and assistance to individuals and families of the San Marcos area.

B. USE OF FUNDS

How will the funds be used?

Our funds are used to assist the poor and needy of the San Marcos Area. The San Marcos Conference provides assistance with utility bills (including deposits, reconnect and late fees), medical co-pays, etc, prescriptions, gasoline, and bus tickets (mostly to Austin and San Antonio where shelters are more readily available) emergency food and emergency shelter (motels), rent assistance, application fees for birth certificates and I.D. cards – as well as other essentials This assistance is designed to meet emergency situations. If additional assistance is required beyond our means, the individual or family is referred to other organizations and agencies. During FY 2024, \$141,746 was paid in direct aid to our neighbors in the City of San Marcos and surrounding area. During FY2024, \$61,037 was paid to the COSM for utility assistance.

These CDBG funds will be used specifically to meet the needs of our neighbors who request utility and rent assistance.

C. LEVERAGED RESOURCES

Provide a brief description of other funding sources, volunteers, or in-kind donations that are expected to be used with this program.

Other funding sources include church collections and on-line donations from St. John the Evangelist Catholic Church and Our Lady of Wisdom University Parish, individual donations received by mail, and our annual *River Walk for the Poor* fund raiser

Parishioners and other individuals donate food, clothing, diapers, furniture, and household items that can be distributed to the poor and needy as it becomes available for in-kind assistance at our office.

Our office and city utilities are provided by St. John the Evangelist Parish

Our office supplies and expenses are about \$3,600 a year.

All officers and members of the San Marcos Conference are volunteers. There is NO paid staff.

D. ACCOMPLISHMENTS

Once the project is completed, how can its success be measured?

The success of the program is measured by the number of individuals and families that did not have their utilities turned off, how many families were able to remain in their homes, how many individuals did not go hungry, how many persons were able to remain on the job, and how many sick people were assisted back to health and by the number of families that achieved financial independence through counseling.

E. NEED AND JUSTIFICATION

Describe the need for this program. Has the need been increasing in recent years?

YES! There will always be poor and needy who need assistance. There is an ever increasing demand for affordable housing. People are struggling to find a permanent place to live. Evictions are forcing families to seek temporary shelter. There are a more people living in their automobiles. The request for emergency shelter, motels, or just a room has increased greatly in the wake of the pandemic and curtailment of government assistance and increased inflation. Similarly, food and housing insecurity is on the rise.

F. CITY COUNCIL STRATEGIC INITIATIVE

Does this project or program positively impact one of the initiatives described in the attached City Council Strategic Plan? Which one?

Yes - Public Services

G. IMPACT

Describe in detail the impact this program will have on the identified need and on San Marcos residents.

Improve the quality of life and sense of place for those barely subsisting, if even, within the City of San Marcos by meeting emergency utility, food and shelter needs with financial assistance for food, utilities, rent, deposits, temporary shelter, gasoline for those living in their cars, prescriptions, and other needs as necessary.

H. EXPERIENCE OR REFERENCES

Describe your experience in implementing a similar program, or if this is a first-time venture, provide an explanation of why you believe you will be successful in implementation. You may attach up to three letters of reference.

Since 2013, I have volunteered with the Society of St. Vincent de Paul in San Marcos and from 2018 to 2023, I was the conference president; I then took on vice-president duties. Myself, as well as our 34 conference volunteers, make home visits as well as office interviews with our needy neighbors. We discuss their situation, their troubles, and determine how best to assist them with our limited resources.

There are letters of support in the application package.

TYPE OF PUBLIC SERVICE (choose all that apply)

- | | |
|--|---|
| <input type="checkbox"/> 05A Senior Services | <input type="checkbox"/> 05B Handicapped Services |
| <input type="checkbox"/> 05C Legal Services | <input type="checkbox"/> 05D Youth Services |
| <input type="checkbox"/> 05E Transportation Services | <input type="checkbox"/> 05F Substance Abuse Services |
| <input type="checkbox"/> 05G Battered and Abused Spouses Services | <input type="checkbox"/> 05H Employment Training |
| <input type="checkbox"/> 05I Crime Awareness | <input type="checkbox"/> 05J Fair Housing Activities |
| <input type="checkbox"/> 05K Tenant/Landlord Counseling | <input type="checkbox"/> 05L Child Care Services |
| <input type="checkbox"/> 05M Health Services | <input type="checkbox"/> 05N Abused and Neglected Children Services |
| <input type="checkbox"/> 05O Mental Health Services | <input type="checkbox"/> 05P Screening for Lead Paint/Lead Hazards |
| <input type="checkbox"/> 05Q Subsistence Payments | <input type="checkbox"/> 05R Homeownership Assistance (Not Direct |
| <input checked="" type="checkbox"/> Other: Emergency Services | |

PROGRAM INFORMATION

1. Program eligibility (please select one):

- a. ☐ This is a new program.
- b. ☒ This is an existing program that: (select one of the following)
- ☐ Has previously received CDBG funding and the amount requested for this year is the same or less than previous funding; or
- ☒ will expand to serve more beneficiaries or to provide more services if the CDBG funding as requested is approved. *Please attach an analysis that details how the program or service will be expanded, how many new beneficiaries will be served by the expansion, and how this number was determined.*

We are requesting \$1,000 more than last year (\$14,000). That will provide utility assistance for 5 families. We are currently limiting assistance to \$200 per request.

2. Programs receiving funding from the City at this time (during the current program year):

- a. How much CDBG funding was awarded? \$12,000
- b. Is this program receiving any other City of San Marcos sources? Yes
- c. If yes, how much was received and from what source? Awarded \$20,000, 2024 SMHSAB Grant

3. Is there a fee to clients to participate in the program? ☐ Yes ☒ No

If yes, please provide fee structure.

4. Describe the days and hours of operation of the program: Monday-Friday 1 to 4 P.M.

AGENCY INFORMATION

1. Does your organization have an office located in San Marcos? ☒ Yes ☐ No
2. Has your organization been in operation for 2 or more years? ☒ Yes ☐ No
3. Has your organization served San Marcos residents for 2 or more years? ☒ Yes ☐ No

IV. PROGRAM BENEFICIARIES

Applicant must be able to document that at least 51% of the beneficiaries have an annual income that is at or below 80% of the Area Median Income and are San Marcos residents.

A. PRESUMED BENEFIT: See definition above of "Presumed Benefit".

1. Will all of the program's beneficiaries in a Presumed Benefit Category? ____ Yes or **X** No

If "yes", list the categories: _____

2. How many persons in each presumed category are proposed to be assisted if funding is received?

Abused Children	Elderly Persons	Battered Spouses	Homeless Persons	Severely Disabled Adults	Illiterate Adults	Persons living with AIDS
	15	4		10		

3. If this program was carried out the previous full program year (10/1 – 9/30), how many persons were served in each presumed category:

Abused Children	Elderly Persons	Battered Spouses	Homeless Persons	Severely Disabled Adults	Illiterate Adults	Persons living with AIDS
	14	4		11		

B. BENEFICIARIES WHO ARE NOT CONSIDERED "PRESUMED"

1. How many persons are proposed to be assisted if funding is received? **200**

If this program was carried out the previous program year (10/1 – 9/30), how many persons were served?

FY2024 184

2. What percentage of persons proposed to be assisted are expected to be low/mod? **95-100%**

-

3. What percentage of persons proposed to be assisted are expected to be San Marcos residents? **100%**

4. How do you propose to document the income of the beneficiaries? (Check all that apply)

____ Evidence that the child is approved for free or reduced lunch

X Evidence that the family lives in housing sponsored by the Housing Authority

____ Evidence that the family is WIC approved

____ Income documentation using one of the 3 HUD approved methods

____ Self-certification, with income verification required of 20% of certifications

X Other, describe: **Self-Certification / Assistance Application Information**

V. LINE ITEM BUDGET

Please use the following format to present your proposed line-item budget. Secured funds are funds on-hand, pledged, or awarded. Following the line-item budget, please complete the Supplemental Budget Form – Use of Other Resources. Funds and costs, as outlined on the Sources and Uses of Funds form, may **not** be spent or incurred prior to a contract award date (usually October 1st) from the CDBG Program. Supporting documentation may be attached as an Appendix.

Expense Category	Total Program Budget	CDBG Portion	Other Funding Source	Other Funds Amount
Personnel Services				
Salaries				
Fringe Benefits				
Supplies				
Office Supplies	3,000		Donations	3,000
Program Supplies				
Client Materials				
Operating				
Training				
Insurance				
<u>Utilities</u> /Rent/Mortgage	3,000		Donations	2,000
Other (please specify) Council Support	20,000		Donations	20,000
Emergency Utility Assistance	110,000	10,000	SMHSAB, Donations	100,000
Emergency Rent Assistance	40,000	5,000	SMHSAB, Donations	35,000
Emergency Food Assistance	4,000		SMHSAB, Donations	4,000
Emergency Travel Assistance	13,000		SMHSAB, Donations	13,000
Emergency Motel/Other	7,000		SMHSAB, Donations	7,000
Total	200,000	15,000		185,000

Please provide an explanation for any unusual budget expenditures listed in the line-item budget above.
None

VI. PROJECTED IMPLEMENTATION SCHEDULE WITH PERFORMANCE GOALS

Projected Start Date: Oct 1, 2025

Projected Completion Date: Sep 30, 2026

Activity Description	Start Month/Year	End Month/Year	Performance Measurement Goal
<i>Example: Hiring New Staff Member</i>	<i>October 2025</i>	<i>December 2025</i>	<i>Employment process complete</i>
Provide emergency services	Oct 1, 2025	Sep 30, 2026	Number of neighbors assisted

VII. ORGANIZATION INFORMATION

REQUIRED ATTACHMENTS

- ☐ Organizational Chart
- ☐ Articles of Incorporation
- ☐ Proof of Tax-Exempt status
- ☐ Board Minutes and Resolution authorizing application submittal and specifying who will sign documents. *(The organization's governing board must approve the submittal of this funding application and designate a person who is authorized to execute program documents.)*
- ☐ A listing of key staff and employees who will work directly with the proposed program, their primary job duties, and other pertinent information relating to your proposed project.
- ☐ NA If CDBG funds will be used to hire new personnel, please provide a brief job description of the proposed position(s).

BACKGROUND INFORMATION

1. Organization Type:
☒ 501(c) Non-Profit Corporation ☐ Public Corporation ☐ Government Entity
Other: _____
2. Name and title of Board of Directors chair or president: Christine Winek, President
3. How many years has your organization been in business? 30 Yrs in San Marcos
4. Organization's Taxpayer Identification Number (EIN): 74-2763690
5. Organization's Unique Entity Identifier Number: M6Z7Z3BAEWF1
6. Is organization currently registered in the federal System for Award Management (SAM)? ☒ Yes ☐ No

FINANCIAL INFORMATION

1. What is the date of your fiscal year end? Sep 30th
2. Does your organization have a purchasing policy? ☒ Yes ☐ No
3. Has your organization currently or within the past five years had any litigation that is pending or has been resolved?
☐ Yes ☒ No
If "Yes", please attach a summary of the litigation and its status, including any outstanding judgments.
4. Has your organization filed a petition for bankruptcy or has a petition for bankruptcy been filed against your organization?
☐ Yes ☒ No
If "Yes", please attach an explanation that includes the status.
5. During the last fiscal year, did your organization spend \$750,000 or more in Federal financial assistance?
☐ Yes ☒ No
6. What level of financial review does your organization obtain from an independent source? Select from the following options:

<input type="checkbox"/> Single Audit	<input type="checkbox"/> Audited Financial Statement
<input type="checkbox"/> Reviewed Financial Statement	<input type="checkbox"/> Compiled Financial Statement
<input checked="" type="checkbox"/> No independent review	<input type="checkbox"/> Other (describe):

7. What period was covered by your most recent financial review? FY 2024: Oct 1, 2023- Sep 30, 2024
8. Has your organization received City of San Marcos funding in the past two years? X Yes No
- If yes, please attach a short summary of the purpose and amount of City funding. **FY24 HSAB Grant \$20,000, 2024 CDBG \$12,000 to assist the poor and needy of San Marcos with direct aid for Utilities, food, rent, transportation, prescriptions, and other necessities.***

PERSONNEL AND POLICIES

1. Name and Title of your chief administrator Christine Winek, President
Number of years in this position? 2 yrs
2. Total number of current employees at all locations 34 Volunteers NO PAID STAFF
3. Total number of current employees who will be involved in this project 34 Volunteers
4. Total number of new employees expected to be hired for the project No Hires
5. Does your organization have a personnel policy manual? X Yes No
Does it include a procedure for filing grievances? NA Yes No
Does it include a non-discrimination clause? X Yes No
6. Does your organization maintain a written code or standards of conduct that governs the performance of its officers, employees or agents engaged in the award and administration of contracts supported by Federal funds?
X Yes No
7. Separation of duties for financial transactions regarding this project (respond with job title):
- a. Who will approve payment of incurred expenses? Vice-President
- b. Who will prepare the payment check? Treasurer and /or Authorized Volunteer
- c. Who will sign checks paying project expenses? Treasurer and /or Authorized Volunteer
- d. Who posts the transaction to your financial records? Treasurer
- e. Who reconciles monthly bank statements? Treasurer and President

ACCESSIBILITY OF PROGRAMS AND SERVICES

1. Are all facilities to be served by the program ADA Accessible? X Yes No
2. Do you have a Section 504 (ADA) Self-Evaluation on file? Yes X No
3. How will you provide services to persons with Limited English proficiency? Spanish speaking volunteers

INSURANCE, BONDING, AND WORKER'S COMPENSATION

1. Does your organization have liability insurance coverage? X Yes No
2. If yes, in what amount? unknown
3. Does your organization pay worker's compensation in accordance with Federal and state laws?
 Yes No X N/A
4. Does your organization have fidelity bond coverage for principal staff members who handle the organization's accounts? Yes No X N/A
5. Will vehicles owned by the organization be used in conjunction with the proposed project?
 Yes No X N/A
6. If yes, what level of liability insurance is maintained on the vehicles?

VIII. CONFLICTS OF INTEREST (24 CFR 570.611; 24 CFR 85.36; AND 24 CFR 84.42)

Two sets of conflict-of-interest provisions apply to activities carried out with CDBG funding. The first set, applicable to the procurement of goods and services by subrecipients (*funded applicants*), is the procurement regulation found in the *Uniform Administrative Requirements, Cost Principles and Audit Requirement for Federal Awards as codified in Title 2, Part 200 of the Code of Federal Regulations*. The second set of provisions is located at 24 CFR 570.611(a)(2).

With respect to procurement activities, the subrecipient must maintain written standards of conduct governing the performance of its employees engaged in the award and administration of contracts. At a minimum, these standards must:

1. Require that no employee, officer, or agent may participate in the selection, award, or administration of a contract supported by federal funds if a real or apparent conflict would be involved. Such a conflict would arise when any of the following parties has a financial or other interest in the firm selected for an award:
 - An employee, officer, or agent of the subrecipient;
 - Any member of an employee's, officer's, or agent's immediate family;
 - An employee's, agent's, or officer's partner; or
 - An organization which employs or is about to employ any of the persons listed in the preceding sections.
2. Require that employees, agents, and officers of the subrecipient neither solicit nor accept gratuities, favors, or anything of value from contractors or parties to sub-agreements. However, subrecipients may set standards for situations in which the financial interest is not substantial, or the gift is an unsolicited item of nominal value.
3. Provide for disciplinary actions to be applied for any violation of such standards by employees, agents, or officers of the subrecipient.

With respect to all other CDBG-assisted activities, the general standard is that no employee, agent, or officer of the subrecipient who exercises decision-making responsibility with respect to CDBG funds and activities is allowed to obtain a financial interest in or benefit from CDBG activities, or have a financial interest in any contract, subcontract, or agreement regarding those activities or in the proceeds for the activities. Specific provisions include that:

- The requirement applies to any person who is an employee, agent, consultant, officer, or elected or appointed official of the City, a designated public agency, or a subrecipient, and to their immediate family members and business partners.
- The requirement applies to such persons during their tenure and for a period of one year after leaving the grantee or subrecipient organization.
- Upon written request, exceptions may be granted by HUD on a case-by-case basis.

CONFLICT OF INTEREST QUESTIONNAIRE

NOTE: For the purpose of this form, a "covered person" includes any person who is an employee, agent, consultant, officer or elected or appointed official of the City of San Marcos, your organization, or any designated public agency.

Name of Organization: Society of St. Vincent de Paul

1. Does your organization maintain a written code or standards of conduct that governs the performance of its officers, employees or agents engaged in the award and administration of contracts supported by Federal funds?

Yes X No _____ If "No" is checked, please explain how you will comply with this requirement:

2. Are any of your Board Members or employees that are responsible for carrying out this project or members of their immediate families or their business associates also:

a. Employed by the City of San Marcos? Yes _____ No X

b. Members of or closely related to members of the San Marcos City Council? Yes _____ No X

c. Members of or closely related to an employee of the City of San Marcos? Yes _____ No X

d. Current beneficiaries or related to beneficiaries of the project for which funds are requested?

Yes _____ No X

e. Paid providers of goods or services to the program or having other financial interest in the program or related to such individuals? Yes _____ No X

3. For **each** relationship described above, please answer the following questions: (attach additional page if necessary)

a. Name of employee or official: _____

b. Is this person receiving or likely to receive taxable income from your organization?

Yes _____ No _____

c. Is your organization receiving or likely to receive taxable income from or at the direction of the employee or official AND the taxable income is not from the City of San Marcos?

Yes _____ No _____

d. Is your organization affiliated with a corporation or other business entity in which the employee or official serves as an officer or director, or holds an ownership interest of 10% or more?

Yes _____ No _____

4. Describe any other affiliation or business relationship that might cause a conflict of interest with respect to CDBG funds and activities. _____

5. Will any of your organization's employees, officers, board members, or members of their immediate family or business partners have a financial interest in any contract, subcontract, or agreement regarding CDBG funded activities?

Yes _____ No X. If yes, please attach an explanation.

IX. APPLICANT ASSURANCES AND CERTIFICATIONS

The applicant hereby assures and certifies with respect to this project or program, by the submission of this application, that the following are true statements:

1. It possesses legal authority to apply for the grant and to finance the proposed request; that a resolution, motion or similar action has been duly adopted or passed as an official act of the applicant's governing body, authorizing the filing of the application, including all understandings and assurances contained therein, and directing and authorizing the person identified as the official representative of the applicant to act in connection with the application and to provide such additional information as may be required.
2. It will comply with the Uniform Administrative Requirements, Cost Principles and Audit Requirement for Federal Awards as codified in Title 2, Part 200 of the Code of Federal Regulations (UAR) and agrees to adhere to the accounting principles and procedures required therein, utilizing adequate internal controls and maintaining necessary source documentation for all costs incurred.
3. If it expends \$750,000 or more of federal funds in a fiscal year, it will comply with the Single Audit Act of 1984.
4. It will comply with the provisions of Executive Order 11988, relating to evaluation of flood hazards, and Executive Order 11990, relating to protection of wetlands. It will comply with the flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973, Public Law 93-234, 87 Stat. 975, and approved December 31, 1976. Section 102(a).
5. It will have sufficient funds available or the ability to obtain the non-federal share of the cost for construction projects. Sufficient funds will be available when construction is completed to assure effective operation and maintenance of the facility for the purposes constructed.
6. It will give the City and the Comptroller General, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the grant.
7. It will cause work on the project to be commenced within a reasonable time after receipt of notification from the City that funds have been approved and that the project will be performed to completion with reasonable diligence.
8. It will comply with Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and in accordance with Title VI of that Act, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives federal financial assistance and will immediately take any measures necessary to effectuate this agreement.
9. It will comply with the requirements of Title II and Title III of the Uniform Relocation Assistance and Real Property Acquisitions Act of 1970 (P.L. 91-646), which provides for fair and equitable treatment of persons displaced because of federal and federally-assisted programs.
10. It will comply with the provisions of the Hatch Act, which limit the political activity of employees.
11. It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act as they apply.
12. It will insure that the facilities under its ownership, lease or supervision which shall be utilized in the accomplishment of the project are not listed on the Environmental Protection Agency's (EPA) list of Violating Facilities and that it will notify the city/federal grantor agency of the receipt of any communication from the Director of the EPA Office of Federal Activities indicating that a facility to be utilized in the project is under consideration for listing by the EPA.
13. It will assist the city/federal grantor agency in its compliance with Section 106 of the National Historic Preservation Act of 1966 as amended (16 U.S.C. 470), Executive Order 11593, and the Archeological and Historic Preservation Act of 1966 (16 U.S.C. 469a-1 et seq.).

14. It will comply with Texas Civil Statutes, Article 5996a, by ensuring that no officer, employee, or member of the applicant's governing body or of the applicant's contractor shall vote or confirm the employment of any person related within the second degree by affinity or third degree by consanguinity to any member of the governing body or to any other officer or employee authorized to employ or supervise such person. This prohibition shall not prohibit the employment of a person who shall have been continuously employed for a period of two years prior to the election or appointment of the officer, employee, or governing body member related to such person in the prohibited degree.
15. It will ensure that all information collected, assembled or maintained by the applicant relative to this project shall be available to the public during normal business hours in compliance with Texas Civil Statutes, Article 6252-17a, unless otherwise expressly provided by law.
16. It will conduct and administer the program in conformity with the Fair Housing Act (42 USC Section 3901 et. Seq.) and that it will affirmatively further fair housing.
17. It will minimize displacement of persons because of activities assisted with CDBG funds. If displacement of residential dwellings will occur in connection with a grant-assisted project, it will follow a residential anti-displacement and relocation assistance plan as specified by the City of San Marcos.
18. It certifies that it is not now, nor has it ever been, on the Federal List of Debarred Contractors.
19. It will not attempt to recover any capital costs of public improvements assisted in whole or in part with such funds by assessing any amount against properties owned and occupied by persons of LMI, including any fee charged or assessment made as a condition of obtaining access to such public improvements unless (a) such funds are used to pay the proportion of such fee or assessment that related to the capital costs of such public improvements that are financed from revenue sources other than such funds; or (b) for purposes of assessing any amount against properties owned and occupied by persons of moderate income, applicant certifies that it lacks sufficient funds under this contract to comply with the requirements of clause (a).
20. It agrees to comply with the requirements of Title 24 of the Code of Federal Regulations, Part 570 (the U.S. Housing and Urban Development regulations concerning Community Development Block Grants (CDBG)) including subpart J and subpart K of these regulations, except that (1) the Agency does not assume the recipient's environmental responsibilities described in 24 CFR 570.604 and (2) Agency does not assume the recipient's responsibility for initiating the review process under the provisions of 24 CFR Part 52. Agency also agrees to comply with all other applicable Federal, State, and local laws, regulations, and policies governing the funds provided. Agency further agrees to utilize funds available to supplement rather than supplant funds otherwise available. Agency shall comply with all applicable Federal laws, regulations, and requirements, which include compliance with the provisions of the HCD Act and all rules, regulations, guidelines, and circulars promulgated by the various Federal departments, agencies, administrations, and commissions relating to the CDBG Program. The applicable laws and regulations include, but are not limited to:
 - 24 CFR Part 570;
 - 24 CFR Parts 84 and 85;
 - The Davis-Bacon Fair Labor Standards Act;
 - The Contract Work Hours and Safety Standards Act of 1962;
 - Copeland "Anti-Kickback" Act of 1934;
 - Sections 104(b) and 109 of the Housing and Community Development Act of 1974;
 - Section 3 of the Housing and Urban Development Act of 1968;
 - Equal employment opportunity and minority business enterprise regulations established in 24 CFR part 570.904;
 - Non-discrimination in employment, established by Executive Order 11246 (as amended by Executive Orders 11375 and 12086);
 - Section 504 of the Rehabilitation Act of 1973 Uniform Federal Accessibility Standards;
 - The Architectural Barriers Act of 1968;
 - The Americans with Disabilities Act (ADA) of 1990;
 - The Age Discrimination Act of 1975, as amended;

- National Environmental Policy of 1969 (42 USC 4321 et seq.) as amended;
- Lead Based paint regulations established in 24 CFR Parts 35, 570.608, and 24 CFR 982.401;
- Asbestos guidelines established in CPD Notice 90-44;
- HUD Environmental Criteria and Standards (24 CFR Part 51);
- The Energy Policy and Conservation Act (Public Law 94-163) and 24 CFR Part 39
- Flood Disaster Protection Act of 1973;
- Colorado House Bill 06-1023 and 06-1043;
- Procurement Standards (2 CFR 200.322);
- Rights to Inventions Made Under a Contract or Agreement (37 CFR 401.2 (a));
- Energy Efficiency (2 CFR Part 200 Appendix II); and
- Recycling (2 CFR Part 200 Appendix II).

CERTIFICATIONS REGARDING LOBBYING:

21. No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
22. If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit standard form – “Disclosure Form to Report Lobbying”, in accordance with its instructions.
23. The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.
24. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

GENERAL CERTIFICATIONS:

25. The information, exhibits, and schedules contained in this application are true and accurate statements and represent fairly the financial condition of our organization;
26. Our organization is eligible to receive federal funding and has not been placed in a debarred or otherwise ineligible status under the provisions of CFR Part 24;
27. Our organization prohibits discrimination in accordance with Title VI of the Civil Rights Act of 1964; and,
28. Our governing body has duly authorized submission of this document. If funded, we agree to comply with the procedures outlined in the “Playing by the Rules” handbook that will be supplied by the City of San Marcos.

I, the duly authorized representative of the applicant organization, certify that the foregoing statements are true to the best of my knowledge and belief:

CERTIFIED BY:

Signature: //signed// Warner Davis Date Signed: May 3, 2025

Printed Name: Warner Davis Title: Vice President

Organization Name: Society of St. Vincent de Paul

Board of Directors (Officers)

Society of St. Vincent de Paul, San Marcos Conference
624 East Hopkins Street, San Marcos, Texas 78666
Office: 210 Roosevelt St., San Marcos, TX 78666


svdpsanmarcos.org

Membership Criteria

Board members must be active members in good standing. That means they attend meetings regularly and carry out the work and mission of the conference.

Meeting Attendance Record

The Board of Directors (Officers) meets when there are Conference meetings, usually twice a month, 2nd and 4th Tuesdays. Minutes are kept for all meetings. Attendance is recorded of all members, including Officers, at the meetings and put in the meeting minutes.

In FY 25 all Board of Directors (Officers) have attended all Conference meetings with only a few exceptions.



ANNUAL AUDIT – FINANCIAL REVIEW & RECORDKEEPING CHECKLIST

Print this form; Complete in Black or Blue Ink, Scan and Email by November 15
to annualreports@ssvdp.org

The Annual Review (audit) shall be done at least once per year, preferably in September before closing the fiscal year and before completing the Operations Audit Review and other annual reports. Conferences may choose to have an external auditor review their financial records OR may choose Vincentians from another Conference or their own Conference. Vincentian reviewers should be familiar with the Treasurer's Handbook and must be two unrelated persons who are not involved in the financial procedures of the Conference (including counting/depositing money and/or signing/issuing checks/payments). Records needed for the review shall be provided electronically or as paper documents by the Treasurer and other officers. An Officer or Vincentian with access to financial software (CMS, ServWare, or other) should also be available during the financial review.

Diocesan Council: Austin Central Texas District Council: Central South

Conference: San Marcos Date of Audit: 11-1-24

Names of Reviewers:

- 1) Anne McDonald
- 2) Jan Feltman

Officers attending Review

President: Christine Wynec
Vice President: Warner Davis
Secretary: Mary Alice Moreno
Treasurer: Jan Grosch

The following persons are listed at the bank as signers on our Conference Account:

Jan Grosch
Name, Office

Christine Wynec
Name, Office

Guadalupe Hernandez
Name, Office

Mary Casteneka
Name, Office

Mignon Davis
Name, Office

Patricia Becker
Name, Office Mary Alice Moreno

Place a checkmark to the right of the record category if the Conference is, in fact, keeping this record schedule.

Annual Conference Reports*.....Permanent ☐

*Including statistics, membership list, and items with historical significance

Letters of Aggregation.....Permanent ☒

Bank Deposits.....3 Years ☒

Bank Reconciliations.....3 Years ☒

* Bank Statements.....7 Years ☐

Cancelled Checks.....7 Years ☐ *see below*

Invoices Received.....7 Years ☒ N/A

Case Records & Cards.....3 Years ☒

General Correspondence.....3 Years ☒

Treasurer Statements.....7 Years ☐ *see below*

Meeting Minutes.....7 Years ☒

Minute Books.....7 Years ☐ NA

If the Conference is non-compliant with retention of its records in any of the above categories, please explain what will be done to correct this:

* Bank statements from years 2018, 2019 appear lost during our move to a new building. * Digital copies from Feb 2019 have been located. 11/16/24

Are the records maintained in a secure way or place to ensure the confidentiality of the information kept there? Yes ☒ No ☐

If No, what will be done to correct this? _____

Are the records properly destroyed when the retention period is expired? Yes ☒ No ☐

If No, what will be done to correct this? _____

Have all issues from previous audits been resolved? Yes ☒ No ☐

If No, what will be done to correct this? _____

	Yes /	No
Are reviewers familiar with the Treasurers' Handbook/Appendix?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Have the signers on the account have been verified with the bank? (List of authorized signers are stated above.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are funds collected and deposited promptly according to your Conference Guidelines?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are funds disbursed according to your Conference Guidelines?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are letters/e-mails sent to donors who contributed \$250 or more at one time? and/or annual total-receipts/letters for tax purposes are sent to contributors donating \$250 or more.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does the Conference have separate accounts under the control of the Conference?	<input type="checkbox"/>	<input checked="" type="checkbox"/> <i>Ar</i>
Does the Conference collect IRS W-9 forms prior to or at the time of paying rent?	<input type="checkbox"/>	<input checked="" type="checkbox"/> <i>Ar</i>
Explain any negative answers in this section:		
<div><i>* Only 1 acct w/ 1 bank</i> <i>** N/A up to this point</i></div>		

Choose one month from each group: (circle choice)

1st Quarter: October – November – December

2nd Quarter: January – February – March

3rd Quarter: April – May – June

4th Quarter: July – August – September

For each selected month, have available:

- ☒ Conference Guidelines or General Operating Procedures adapted by the Conference
- ☒ Conference Financial Statement
- ☒ Bank Statement
- ☒ Reconciliation page
- ☒ Count sheets and deposit slips for the month
- ☒ Case worksheets for the month
- ☐ Copies or scan of all landlords' W-9s *NO (guidelines in process)*
- ☒ Someone available with access to financial software (CMS, ServWare, or other)

First quarter (Oct-Nov-Dec)

Month/Year selected: 10/23DEPOSITS: 1025.83

	Yes	No	Comment
Do all deposits on the bank statement match the deposits on the Financial Report?	✓		
Does the bank statement's reconciled amount match the Financial Report balance?	✓		
Select one deposit: <u>\$1025.83</u> Date <u>10-10-23</u> Do the amounts on the count sheet, deposit slip and bank statement all match?	✓		

EXPENDITURES: For the month, select at least three disbursement records.

Expenditure #1:

Payee: <u>SM utilities</u> Amount <u>\$150.00</u> Check No. <u>MC</u> Date <u>10-18</u>	Yes	No	Comment
Does the check amount on the record match the check amount on the bank statement?	✓		
Is the expense category classification correct?	✓		
Did the check clear the bank in the same month or the following month?	N/A		
Is there proper supporting documentation? (case record form, receipt, check request form, an/or invoice)	✓		

Expenditure #2: City of SM - utilitiesaccidentally double paid

Payee: Amount <u>\$19.14</u> Check No. <u>MC</u> Date <u>10-16</u>	Yes	No	Comment
Does the check amount on the record match the check amount on the bank statement?	N/A		
Is the expense category classification correct?	✓		
Did the check clear the bank in the same month or the following month?	N/A		
Is there proper supporting documentation? (case record form, receipt, check request form, an/or invoice)	✓		<u>was refunded by util</u>

Expenditure #3: Birth/death certificateco. + noted on treasury records

Payee: Amount <u>\$22.00</u> Check No. <u>MC</u> Date <u>10-25</u>	Yes	No	Comment
Does the check amount on the record match the check amount on the bank statement?	N/A		
Is the expense category classification correct?	✓		
Did the check clear the bank in the same month or the following month?	N/A		
Is there proper supporting documentation? (case record form, receipt, check request form, an/or invoice)	✓		

Second Quarter (Jan-Feb-Mar)

Month/Year selected: 2-29-24DEPOSITS: 306.00 2-5-24

	Yes	No	Comment
Do all deposits on the bank statement match the deposits on the Financial Report?	✓		
Does the bank statement's reconciled amount match the Financial Report balance?	✓		
Select one deposit: <u>\$306.00</u> Date _____ Do the amounts on the count sheet, deposit slip and bank	✓		

statement all match?			
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EXPENDITURES: For the month, select at least three disbursement records.

Expenditure #1: *Wellshire Financial - loan payoff - council pd \$400* *our conf paid 36 25*

Payee: Amount \$ <i>736.25</i> Check No. <i>MB</i> Date <i>2.3.24</i>	Yes	No	Comment
Does the check amount on the record match the check amount on the bank statement?	<i>N/A</i>		
Is the expense category classification correct?	<input checked="" type="checkbox"/>		
Did the check clear the bank in the same month or the following month?	<i>N/A</i>		
Is there proper supporting documentation? (case record form, receipt, check request form, an/or invoice)	<input checked="" type="checkbox"/>		

Expenditure #2:

copy sent Sr Austin conf.

Payee: Amount \$ <i>100⁰⁰</i> Check No. <i>1282</i> Date <i>2.14.24</i>	Yes	No	Comment
Does the check amount on the record match the check amount on the bank statement?	<input checked="" type="checkbox"/>		
Is the expense category classification correct?	<input checked="" type="checkbox"/>		
Did the check clear the bank in the same month or the following month?	<input checked="" type="checkbox"/>		
Is there proper supporting documentation? (case record form, receipt, check request form, an/or invoice)	<input checked="" type="checkbox"/>		

Expenditure #3 *\$100*

Payee: Amount \$ <i>100⁰⁰</i> Check No. <i>1288</i> Date <i>2.20</i>	Yes	No	Comment
Does the check amount on the record match the check amount on the bank statement?	<input checked="" type="checkbox"/>		
Is the expense category classification correct?	<input checked="" type="checkbox"/>		
Did the check clear the bank in the same month or the following month?	<input checked="" type="checkbox"/>		
Is there proper supporting documentation? (case record form, receipt, check request form, an/or invoice)	<input checked="" type="checkbox"/>		

Third Quarter (Apr-May-Jun)

Month/Year selected: *June 2024*

DEPOSITS: *500⁰⁰ 6.6.24*

	Yes	No	Comment
Do all deposits on the bank statement match the deposits on the Financial Report?	<input checked="" type="checkbox"/>		
Does the bank statement's reconciled amount match the Financial Report balance?	<input checked="" type="checkbox"/>		
Select one deposit: \$ <i>500⁰⁰</i> Date <i>6.6.24</i>			
Do the amounts on the count sheet, deposit slip and bank statement all match?	<input checked="" type="checkbox"/>		

EXPENDITURES: For the month, select at least three disbursement records.

Expenditure #1: *Bluebonnet Electric*

Payee: Amount \$ <i>100.68</i> Check No. <i>MC</i> Date <i>6.11</i>	Yes	No	Comment
Does the check amount on the record match the check amount on the bank statement?	<input checked="" type="checkbox"/>		
Is the expense category classification correct?	<input checked="" type="checkbox"/>		
Did the check clear the bank in the same month or the following month?	<i>N/A</i>		

Is there proper supporting documentation? (case record form, receipt, check request form, an/or invoice)			
--	--	--	--

Expenditure #2: Country Oaks Apt - rent

Payee: <u>Country Oaks Apt</u> Amount \$ <u>195.38</u> Check No. <u>1344</u> Date <u>6.14.24</u>	Yes	No	Comment
Does the check amount on the record match the check amount on the bank statement?	✓		
Is the expense category classification correct?	✓		
Did the check clear the bank in the same month or the following month?	✓		
Is there proper supporting documentation? (case record form, receipt, check request form, an/or invoice)	✓		

Expenditure #3: Pedernales Elec.

Payee: <u>Pedernales Elec.</u> Amount \$ <u>149.00</u> Check No. <u>MC</u> Date <u>6.26.24</u>	Yes	No	Comment
Does the check amount on the record match the check amount on the bank statement?	N/A		
Is the expense category classification correct?	✓		
Did the check clear the bank in the same month or the following month?	N/A		
Is there proper supporting documentation? (case record form, receipt, check request form, an/or invoice)	✓		

Fourth Quarter (Jul-Aug-Sep)

Month/Year selected: 7.24

DEPOSITS: MC 51.50 - Web donation

	Yes	No	Comment
Do all deposits on the bank statement match the deposits on the Financial Report?	✓		
Does the bank statement's reconciled amount match the Financial Report balance?	✓		
Select one deposit: \$ <u>51.50</u> Date <u>7.5.24</u>			
Do the amounts on the count sheet, deposit slip and bank statement all match?	✓		

EXPENDITURES: For the month, select at least three disbursement records.

Expenditure #1: Centerpoint Energy - utilities

Payee: <u>Centerpoint Energy</u> Amount \$ <u>126.13</u> Check No. <u>MC</u> Date <u>7.9</u>	Yes	No	Comment
Does the check amount on the record match the check amount on the bank statement?	—		
Is the expense category classification correct?	✓		
Did the check clear the bank in the same month or the following month?	N/A		
Is there proper supporting documentation? (case record form, receipt, check request form, an/or invoice)	✓		

Expenditure #2:

Payee: Amount \$	Check No.	Date	Yes	No	Comment
22663	ML	7-15			
Does the check amount on the record match the check amount on the bank statement?			N/A		
Is the expense category classification correct?			✓		
Did the check clear the bank in the same month or the following month?			N/A		
Is there proper supporting documentation? (case record form, receipt, check request form, an/or invoice)			✓		

Expenditure #3

Payee: Amount <u>\$892</u> Check No. <u>mc</u> Date <u>7.2.1</u>	Yes	No	Comment
Does the check amount on the record match the check amount on the bank statement?	<u>N/A</u>		
Is the expense category classification correct?	<u>✓</u>		
Did the check clear the bank in the same month or the following month?	<u>N/A</u>		
Is there proper supporting documentation? (case record form, receipt, check request form, an/or invoice)	<u>✓</u>		

Comments related to the Financial Review

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be from a notebook or a standard ruled sheet of paper. There is no handwriting or other markings on the page.

VERIFICATION OF FINANCIAL AUDIT REVIEW

Fiscal Year 2024

Date audit completed 11.1.24

Names of person(s) performing audit:

Title - Office held / Vincentian's Home Conference:

Anne McDonald

member

Jan Fillman

member

I/we, the above-named person(s), have completed a Review of the Financial records of this Conference, for the time period and stated in the SVdP Annual Financial Audit Review (worksheets attached).

(Check Only One)

☒ I/we find that the Conference is in compliance with the standards set by the Society of St. Vincent de Paul and further that I/we discovered no problems that need to be corrected or acted upon.

☐ I/we find that the Conference is in compliance with the standards set down by the Society of St. Vincent de Paul and that there were only a few problems that were pointed out for correction. I/we feel that intervention by an upper level of the Society is not necessary at this time. A list of the problems uncovered during the audit is attached on the SVdP Annual Internal Audit Worksheets.

☐ I/we find that the Conference is not in compliance with the standards set down by the Society of St. Vincent de Paul and that there are serious problems that need to be corrected. I/we feel that immediate intervention is needed by an upper level of the Society. A list of the problems uncovered is attached on the SVdP Annual Internal Audit Worksheets.

Signature and phone number of reviewer(s):

Anne McDonald
Janet S. Fillman

Phone 512-618-9336

Phone 618 420 1894

Signature of Conference President:

Christine L. Winek

Date 512-558-1887

The Society of St. Vincent de Paul, San Marcos, Texas

Budget for FY 2025 (Organization & Program Budget)

	Income	Expend.
Utilities		90,000
Rent		45,000
Food		8,000
Medical, Dental, Rx		3,000
Motel/Lodging		5,000
Gas Vouchers (Auto)		5,000
Bus Vouchers, Transportation		5,000
Council Support		15,000
Operational		4,000
Miscellaneous		5,000
Total		185,000
Church Collections/Other Donations	130,000	
Fund Raiser/Other	20,000	
City of San Marcos Grants	35,000	
Total	185,000	

The Society of St. Vincent de Paul, San Marcos, Texas

Proposed Budget for FY 2026 (Organization & Program Budget)

	Income	Expend.
Utilities		110,000
Rent		40,000
Food		4,000
Medical, Dental, Rx		3,000
Motel/Lodging		5,000
Gas Vouchers/Auto		3,000
Bus Vouchers, Transportation		10,000
Council Support		20,000
Operational		4,000
Miscellaneous		4,000
Total		200,000
Church Collections/Other Donations	135,000	
Fund Raisers/Other	30,000	
City of San Marcos Grants	35,000	
Total	200,000	

SOCIETY OF ST. VINCENT DE PAUL

LETTER OF AGGREGATION

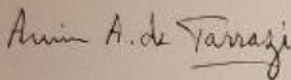
Dear Sister President,

We are happy to inform you that the Council General, at its meeting of 11th September, 1995 has aggregated to the Society of St. Vincent de Paul the Conference

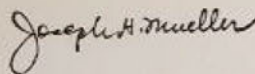
St. John - SAN MARCOS (Texas)
Diocese of Austin - United States

The aggregation has the effect of uniting this Conference to those of the entire world. It is the link which expresses the fraternal friendship of Vincentians and gathers them in the same spiritual family.

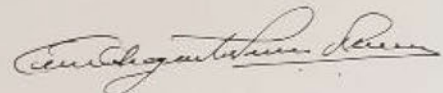
Yours sincerely and devotedly in Our Lord,



International Vice-President



President of the Superior Council



President General

The Society of St. Vincent de Paul, founded in Paris in 1833 by Frederic Ozanam and his companions, is ever marked by its original inspiration.

1. Fundamental principles of the Vincentian apostolate.

Two features sum up this apostolate: living in personal contact with those who suffer and living together the spirit of charity.

These are translated into practice:

- by person to person contact;
- by a spontaneous gift of the heart;
- by participation in a fraternal community of lay people animated by the same vocation.

These essential features should operate in accordance with the needs of the modern world.

We must go far beyond material aid and seek dialogue with our deprived brethren: whatever their poverty may be without any trace of paternalism but rather in an attitude of sincerity, shared friendship and delicacy. Every charitable initiative inspired by such a spirit can be a work of the Society of St. Vincent de Paul.

The Vincentians are convinced that Christ identified Himself with the poor:

"Whatever you did to the least of these my brethren, you did it to me." (Matt. 25,40.)

2. Essential characteristics of the Society.

- a) It is a lay Society, composed of men and women, young and old, sick and poor.
- b) It is a Society with a spirit of youth which gives it dynamism, enthusiasm, generous acceptance of risk, creative imagination and, above all, faculty of adaptation.
- c) It is essentially a universal Society, a sign of the Love of God and of His Grace. This universality should not be confused with uniformity. The Society remains one, even though its activities take many forms, which are not limited to the relief of material poverty.
- d) The Society is Catholic, open to ecumenism in the universal Church. It should bear witness to the duty of unity in its apostolate of charity.
- e) The Society is traditionally poor. The spirit of poverty is opposed to all hoarding; administrative expenses should be reduced to a minimum. The virtue of poverty is also that of sharing: possessions, knowledge, available time, spiritual and moral comfort.

3. Modern character of the Society.

- a) The concept of the Vincentian family embraces both those who help and those who are helped, leading to a sharing with the latter of the affection given to our own family.
- b) Prime importance is given to spiritual life.
- c) Women are present in the Society in either feminine or mixed Conferences.
- d) Presidents are elected at all levels. Each president is, at the same time, a member of the next higher Council.

Vincentian vocation is fully rooted in the Gospel's message. A permanent reference to it enlightens our service and prevents from degenerating into mere philanthropy or activism.

.....

City of San Marcos Housing Authority


1201 Thorpe Lane
San Marcos, TX 78666
[REDACTED]

July 11, 2022

TO WHOM IT MAY CONCERN:

This is to confirm my full support of the Society of St. Vincent de Paul, San Marcos Conference. I fully believe in the goals of the conference and fully support their efforts in providing aide and assistance to the poor and needy of the San Marcos, Texas area.

Sincerely,



Lana Wagner
Executive Director
City of San Marcos Housing Authority

.....

Statement of Support

TO WHOM IT MAY CONCERN:

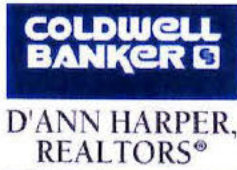
This is to confirm my full support of the Society of St. Vincent de Paul, San Marcos Conference. I fully believe in the goals of the conference and fully support their efforts in providing aid and assistance to the poor and needy of the San Marcos, Texas area.



Lucy Gamez, REALTOR
Century 21 - Randall Morris & Associates
333 Cheatham Street
San Marcos, Texas 78666



Office
Fax
Cell



407 S STAGECOACH TRAIL, SUITE 105
SAN MARCOS, TX 78666
BUS (512) 214-6600
cbharper.com

Statement of Support

TO WHOM IT MAY CONCERN:

This is to confirm my full support of the Society of St. Vincent de Paul, San Marcos Conference. I fully believe in the goals of the conference and fully support their efforts in providing aid and assistance to the poor and needy of the San Marcos, Texas area.

A handwritten signature in blue ink that reads "Mary Evans".

Mary Evans, REALTOR
Coldwell Banker D'Ann Harper
407 S. Stagecoach, Suite 105
San Marcos, TX 78666
[REDACTED]



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**ST. JOHN THE EVANGELIST CATHOLIC CHURCH
DIOCESE OF AUSTIN**

624 E. Hopkins St.
San Marcos, Texas 78666
[REDACTED] / [REDACTED] Fax
sanmarcoscatholic.org

Statement of Support

TO WHOM IT MAY CONCERN:

This is to confirm my full support of the Society of St. Vincent de Paul, San Marcos, Texas Conference. I fully believe in the goals of the conference and fully support their efforts in providing aid and assistance to the poor and needy of the San Marcos, Texas area.

A handwritten signature in black ink, appearing to read "Rev. Brion Zarsky". The signature is fluid and cursive, with the first name "Brion" being particularly prominent.

**Rev. Brion Zarsky
Pastor
St. John the Evangelist Catholic Church
624 East Hopkins St.
San Marcos, Texas 78666**



OUR LADY OF WISDOM

CATHOLIC UNIVERSITY PARISH

100 CONCHO STREET, SAN MARCOS, TX 78666

Statement of Support

TO WHOM IT MAY CONCERN:

This to confirm my full support of the Society of St. Vincent de Paul, San Marcos, Texas Conference. I fully believe in the goals of the conference and fully support their efforts in providing aid and assistance to the poor and needy of the San Marcos, Texas area.

In Christ,

Rev. Jared Cooke
Pastor

St. Vincent de Paul Society, San Marcos, Texas

Meeting Minutes April 22, 2025

ATTENDANCE: Chris, Cindy, Mary Lou, Warner, Diane, Gloria, Jon, Jasen, Roberta, Patricia, Anne, Dennis, John, Lupe, Isabel and Bridgette.

OPENING PRAYER: Opening Prayer and the Vision SVdP Prayer were led by Dennis. We had open discussion of Pope Francis meaningful life and his humbleness. Also how he was admired by not only catholics but non-catholics as well.

MINUTES: Minutes were approved by Jon and seconded by Anne.

READING OF THE RULE: Chris read Statutes 11, Servant Leadership and 12, Servant Leadership Positions of Part III.:

REPORTS:

- 1) Treasurer's Report: Balance as of April 22, 2025 is \$33,366.84.
- 2) Coalition for the Poor: Patricia reported that they did meet but no new information. The PIT count done showed a total of 187 homeless persons.
- 3) President's Report: Chris will be out from April 27th through May 5th. She was happy that we had a good turn out at the stations of the cross on April 11th. Lourdes is only Vincentian who had a birthday this month.
- 4) **OLD BUSINESS:** Chris reminded us about guidelines for helping families with a motel and that hygiene kits are for the homeless only.
- 5) **NEW BUSINESS:** Chris stated that tentatively we will have a conference mass at Our Lady of Wisdom on April 27th at 9:00 am. Jon will give a talk.
Chris moved that Warner apply for the City of San Marcos 2025 Community Development Block Grant and be the administrator. Cindy second the motion and all members present approved.
- 6) The RWFTP will be held on October 4th.

CASE REPORTS: None

UPCOMING EVENTS: Next Conference meetings will be May 13th & May 27th. Next District Meeting May 6th (Tuesday) @ Santa Cruz in Buda at 6:30pm. Next truck pickup/workday May 10th at 9:00am. EIM at St. John's May 17th at 9:00 am (English) and 1:00 pm (Spanish). Ozanam Training, April 26th at St. Martin de Porres in Dripping Springs.

CLOSING: Prayers requests for Pope Francis, Claudio, Sherry, Jessica, Mike and Dennis' friend.

Closing prayer was led by Dennis.

Minutes submitted by Mary Lou for Mary Alice Moreno, Secretary

**The Society of St. Vincent de Paul, San Marcos
Statement of Non-Discrimination**

“Non-Discrimination Policy

The Conference provides services to individuals without regard to race, creed, color, gender, sexual orientation, criminal justice status, disability, marital status, veteran status, national origin, age, or physical handicap.”

**THE SOCIETY OF ST. VINCENT DE PAUL
OF THE UNITED STATES OF AMERICA
BYLAWS For San Marcos Conference, San Marcos, TX**