

**Orting Food Bank**  
**Statements of Activities**  
For the Years Ended December 31, 2020 and 2019

	2020	2019
<b>Changes in Net Assets Without Donor Restrictions</b>		
<b>Revenue and Support</b>		
General contributions	\$ 306,674	\$ 45,856
Noncash contributions of food	979,360	880,390
Fundraising income	5,908	47,583
Interest income	396	835
Other income	9,765	0
<b>Total Revenue and Support</b>	<u>1,302,103</u>	<u>974,664</u>
Net assets released from restrictions	<u>39,679</u>	<u>15,255</u>
<b>Total Revenue, Gains, and Other Support Without Donor Restrictions</b>	<u>1,341,782</u>	<u>989,919</u>
<b>Expenses</b>		
Program	1,102,521	946,382
General and Administration	27,407	30,324
Facilities	60,763	14,793
Fundraising	3,236	12,448
<b>Total Expenses</b>	<u>1,193,927</u>	<u>1,003,947</u>
<b>Increase (Decrease) in Net Assets Without Donor Restrictions</b>	<u>147,855</u>	<u>(14,028)</u>
<b>Changes in Net Assets With Donor Restrictions</b>		
Temporarily restricted contributions	39,679	15,255
Net assets released from restrictions	<u>(39,679)</u>	<u>(15,255)</u>
<b>Increase in Net Assets With Donor Restrictions</b>	<u>0</u>	<u>0</u>
<b>Increase (Decrease) in Net Assets</b>	147,855	(14,028)
<b>Net Assets, Beginning of Year</b>	<u>581,594</u>	<u>595,622</u>
<b>Net Assets, End of Year</b>	<u>\$ 729,449</u>	<u>\$ 581,594</u>

*See accompanying notes and independent accountants' compilation report.*

**Orting Food Bank**  
**Statement of Functional Expenses**

For the Year Ended December 31, 2020

	TOTAL	Program Services	Support Services			Total Support Services
		Total Program Services	General and Administration	Facilities	Fundraising	
Food	\$ 1,036,887	\$ 1,036,887	\$	\$	\$	\$
General expenses	71,194	1,659	15,267	51,032	3,236	69,535
Personnel	45,013	36,010	9,003			9,003
Depreciation	27,674	24,906	2,768			2,768
Repairs and maintenance	8,229			8,229		8,229
Supplies	3,428	3,059	369			369
Equipment, technology, and communication costs	1,502			1,502		1,502
	<u>\$ 1,193,927</u>	<u>\$ 1,102,521</u>	<u>\$ 27,407</u>	<u>\$ 60,763</u>	<u>\$ 3,236</u>	<u>\$ 91,406</u>

*See accompanying notes and independent accountants' compilation report.*

**Orting Food Bank**  
**Statement of Functional Expenses**  
For the Year Ended December 31, 2019

	TOTAL	Program Services	Support Services			Total Support Services
		Total Program Services	General and Administration	Facilities	Fundraising	
Food	\$ 878,789	\$ 878,789				
General expenses	42,399	1,644	16,905	11,402	12,448	40,755
Personnel	51,051	40,841	10,210			10,210
Depreciation	27,378	24,640	2,738			2,738
Repairs and maintenance	1,951			1,951		1,951
Supplies	939	468	471			471
Equipment, technology, and communication costs	1,440			1,440		1,440
	<u>\$ 1,003,947</u>	<u>\$ 946,382</u>	<u>\$ 30,324</u>	<u>\$ 14,793</u>	<u>\$ 12,448</u>	<u>\$ 57,565</u>

*See accompanying notes and independent accountants' compilation report.*



**Orting Food Bank**  
**Statements of Cash Flows**  
For the Years Ended December 31, 2020 and 2019

	<b>2020</b>	<b>2019</b>
<b>Cash Flows Provided (Used) by Operating Activities:</b>		
Cash received from general contributions	\$ 306,674	\$ 45,856
Cash received from restricted contributions	39,679	15,255
Cash received from fundraising income	5,908	47,583
Cash received from interest and other income	396	835
Cash received from paycheck protection program	9,765	0
Cash disbursed for program expenses	(82,232)	(61,762)
Cash disbursed for general supporting expenses	(24,638)	(27,586)
Cash disbursed for facility expenses	(60,763)	(14,793)
Cash disbursed for fundraising expenses	(3,236)	(12,448)
<b>Net Cash Flows Provided (Used) by Operating Activities</b>	<u>191,553</u>	<u>(7,060)</u>
<b>Cash Flows Provided (Used) by Investing Activities</b>		
Expenditures for equipment	(35,433)	0
(Decrease) in amounts held on behalf of others	0	(131)
<b>Net Cash Flows (Used) by Investing Activities</b>	<u>(35,433)</u>	<u>(131)</u>
<b>Net Increase (Decrease) in Cash not restricted by donors</b>	156,120	(7,191)
<b>Cash not restricted by donors - January 1, 2020 and 2019</b>	<u>76,779</u>	<u>83,970</u>
<b>Cash not restricted by donors - December 31, 2020 and 2019</b>	<u>\$ 232,899</u>	<u>\$ 76,779</u>

**Reconciliation of Changes in Net Assets to Net Cash Provided by Operating Activities**

<b>Cash Flows Provided (Used) by Operating Activities:</b>		
Increase (Decrease) in Total Net Assets	\$ 147,855	\$ (14,028)
Adjustments to Reconcile Increase (Decrease) in Total Net Assets to Cash Provided by Operating Activities:		
Depreciation	27,674	27,378
Changes in Assets and Liabilities:		
Decrease (Increase) in Food inventory	15,260	(18,610)
Increase (Decrease) in Accrued payroll and taxes	764	(1,800)
<b>Total Adjustments</b>	<u>43,698</u>	<u>6,968</u>
<b>Net Cash Flows Provided (Used) by Operating Activities</b>	<u>\$ 191,553</u>	<u>\$ (7,060)</u>

*See accompanying notes and independent accountants' compilation report.*



**Orting Food Bank**  
**Notes to Financial Statements**  
**For the years ended December 31, 2020 and 2019**

**Note 1 - Nature of Activities and Summary of Significant Accounting Policies**

**Nature of Activities**

Orting Food Bank is located in Orting, Washington and is organized for the purposes of collecting food donations and distributing them to those in need. The Organization also provides referral services as available to help people. The Organization was incorporated as a non-profit corporation under the laws of the State of Washington in 2007 as a 501(c)(3) charity.

**Basis of Accounting**

The Organization presents financial statements in accordance with accounting principles generally accepted in the United States of America. This basis of accounting involves the application of accrual accounting; consequently, revenues and gains are recognized when earned, and expenses and losses are recognized when incurred.

**Basis of Presentation**

The Organization is required to report information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions.

Net assets without donor restrictions are resources available to support operations. The only limits on the use of this type of assets are the broad limits resulting from the nature of the Organization, the environment in which it operates, the purposes specified in its corporate documents and its application for tax-exempt status, and any limits resulting from contractual agreements with creditors and others that are entered into in the course of its operations. It is the policy of the Board of Directors of the Organization to review its plans for future property improvements and acquisitions from time to time and to designate appropriate sums of net assets without donor restrictions to assure adequate financing of such improvements and acquisitions.

Net assets with donor restrictions are resources that are restricted by a donor for use for a particular purpose or in a particular future period. The Organization's unspent contributions are reported in this class if the donor limited their use.

Contributions of property and equipment or cash restricted to acquisition of property and equipment are reported as net assets with donor restrictions if the donor has restricted the use of the property or equipment to a particular program. If donors specify a length of time over which the property or equipment must be used, the restrictions expire evenly over the required period. Absent that type of restriction for use, the Organization considers the restriction met when the assets are placed in service.

When a donor's restriction is satisfied, either by using the resources in the manner specified by the donor or by the passage of time, the expiration of the restriction is reported in the financial statements by reclassifying the net assets with donor restrictions to net assets without donor restrictions.

Net assets with permanent donor restrictions that do not expire are resources whose use is limited

*See accountants' compilation report.*



**Orting Food Bank**  
**Notes to Financial Statements**  
**For the years ended December 31, 2020 and 2019**

by donor-imposed restrictions that neither expire by being used in accordance with a donor's restriction nor by the passage of time.

The Organization had no net assets with permanent donor restrictions at December 31, 2020 and 2019.

**Use of Estimates**

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates. Significant estimates include useful lives of property and equipment and allocation of expenses to programs.

**Cash**

For purposes of the statements of cash flows, cash includes time deposits, certificates of deposit, and all highly liquid debt instruments with original maturities of three months or less.

**Buildings, Equipment, Improvements, and Depreciation**

Buildings, equipment, and improvements purchased are stated at cost. Donated assets are stated at fair market value at date of receipt. Donated services that enhance non-financial assets are capitalized at fair market value at the date the services are provided. Depreciation is provided by use of the straight-line method over the estimated useful lives of the related assets ranging from three to fifteen years for equipment and thirty-nine years for buildings and improvements. All acquisitions of property and equipment in excess of \$5,000 and all expenditures for repairs, maintenance, renewals, and betterments that materially prolong the useful lives of assets are capitalized. Depreciation expense for the years ended December 31, 2020 and 2019 was \$27,674 and \$27,378, respectively.

**Food Inventory**

Inventory consists of donated food and is stated at \$1.75 per pound as of December 31, 2020 and 2019, as determined by the Washington State Department of Agriculture. The price per pound is determined by the average price of food listed in the consumer price index and is revalued every two years.

**Allocation of Costs to Programs and Supporting Activities**

The Organization allocates personnel and facilities costs including depreciation to programs based upon time spent directly on program activities as well as the square footage of facilities used for program activities.

**Federal Income Tax**

The Organization is exempt from federal income tax under Internal Revenue Code Section 501(c)(3) except to the extent of unrelated business taxable income, if any.

*See accountants' compilation report.*



**Orting Food Bank**  
**Notes to Financial Statements**  
**For the years ended December 31, 2020 and 2019**

**Contributions Received**

Contributions received are recorded as without donor restrictions or with donor restrictions depending on the existence and/or nature of any donor restrictions. Gifts received of long-lived assets, in the absence of donor-imposed use restrictions, are reported as without donor restrictions.

Contributions and donor-restricted support is reported as an increase in net assets with donor restrictions, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the Statement of Activities as net assets released from restrictions.

**Donated Services and Materials**

The Organization recognizes donated services that create or enhance nonfinancial assets. Donated services that require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation are also recognized.

A large number of people have contributed significant amounts of time to the activities of the Organization without compensation. The financial statements do not reflect the value of those contributed services because, although clearly substantial, the services do not meet the recognition criteria required by generally accepted accounting principles and no reliable basis exists for determining an appropriate value for those services. Donated materials are included in the financial statements at their estimated fair market values as of the date of their receipt.

**Note 2 - Concentration of Credit Risk**

The Organization maintains cash balances at financial institutions located in Washington. Accounts at each institution are insured by the Federal Deposit Insurance Corporation up to \$250,000 per institution. The organization did not have any balances on deposit in excess of insurance limits as of the years ended December 31, 2020 and 2019.

*See accountants' compilation report.*



**Orting Food Bank**  
**Notes to Financial Statements**  
**For the years ended December 31, 2020 and 2019**

**Note 3 - Liquidity and Funds Available**

The following reflects Orting Food Bank's financial assets as of the statement of financial position date. The balance would be reduced by amounts not available for general use because of contractual or donor-imposed restrictions within one year of the statement of financial position date, if such restrictions were in place. Examples of amounts not available include amounts set aside for long-term purposes that could be drawn upon if the governing board approved that action. As of the date of the financial statements, no funds were designated by the board as not available for current operating purposes.

Financial assets:	2020	2019
Cash	\$ 232,899	\$ 76,779
Financial assets, at year end	\$ 232,899	\$ 76,779
Less those unavailable for general expenditures within one year, due to:		
Contractual or donor-imposed restrictions:		
None	0	0
Board designations:		
None	0	0
Financial assets available to meet cash needs for general expenditures within one year	\$ 232,899	\$ 76,779

The Organization is partially supported by restricted contributions. Because a donor's restriction requires resources to be used in a particular manner or in a future period, the Organization must maintain sufficient resources to meet those responsibilities to its donors. Thus, financial assets may not be available for general expenditure within one year. As part of the Organization's liquidity management, it has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due. In addition, the Organization may invest cash in excess of daily requirements in short-term investments. Occasionally, the board may designate a portion of any operating surplus to a liquidity reserve, which was \$0 as of December 31, 2020. In the event of an unanticipated liquidity need, the Organization could draw upon \$10,000 of its available line of credit (as further discussed in Note 4).

**Note 4 - Line of Credit**

The Organization has a line of credit for \$10,000 with a bank, which is due on demand. As of December 31, 2020 and 2019, the balance was \$0 and \$0, respectively. The line of credit bears interest at an adjustable rate of the Wall Street Journal Prime Rate (3.25% and 4.75% per annum as of December 31, 2020 and 2019, respectively) plus 2% and is secured by equipment and fixtures.

*See accountants' compilation report.*



**Orting Food Bank**  
**Notes to Financial Statements**  
**For the years ended December 31, 2020 and 2019**

**Note 5 - Paycheck Protection Program**

In April 2020, the organization applied for and received a Paycheck Protection Program loan through the SBA in the amount of \$9,765. The program is part of the government's CARES Act relief effort. The proceeds of the loan were required to be used for paying payroll and certain other limited operating costs. In accordance with the terms of the program, the organization applied for forgiveness of the loan and was subsequently granted forgiveness in December 2020. The income from the loan is reflected in the Statement of Activities.

**Note 6 - Contingency**

On May 5, 2015 the Organization entered into an agreement with Pierce County, Washington, through its Department of Community Connections to renovate and expand the property, which currently houses the food bank facility, for \$120,450. The Organization gave a promissory note to Pierce County for the full amount and is not required to make payments on this note provided that it complies with the following terms: the property must be used as a food bank for the benefit of low income individuals, households, or areas of Pierce County, it will maintain safe and sanitary facilities and will comply with all state and local building codes, licensing requirements, and other requirements regarding the condition of the structure and the operation of the project in the jurisdiction in which the facility is located, and it will keep any records and make any reports relating to compliance with this covenant that the County may reasonably require. If the covenant agreement is followed, the amount owed will be forgiven in full on June 30, 2045. As security for the note, the Organization granted Pierce County a deed of trust on its building, including improvements, and land located in Orting, Washington. The deed of trust and secured promissory note are subject to the restrictions previously described for a period of thirty years, beginning June 30, 2015. If the real property is sold, transferred, or otherwise conveyed or disposed of without Pierce County's prior written consent, the County may declare the principal amount of the note due immediately. After the improvements were completed in 2015, the land and building improvements have a book value of \$457,268 and are recorded on the Statement of Financial Position.

**Note 7 - Subsequent Events**

Management considered and found no subsequent events other than the matter discussed below, requiring disclosure in the financial statements occurring after the balance sheet date until March 16, 2021, the date the financials were available to be issued.

In early 2020, a global pandemic was declared due to a widespread outbreak of the disease known as COVID-19, named for a new strain of coronavirus. The events surrounding the pandemic continue to unfold and therefore it is not possible to reasonably estimate the effects on the financial position and operating results of the Organization for future periods.

*See accountants' compilation report.*



**2021 Budget**

Description	Budget 2018	Budget 2019	Budget 2020	Actual 2020	Budget 2021	Change From 2019
<b>Revenues</b>						
<b>Beginning Net Cash &amp; Investments</b>						
Individual Donations	\$90,000	\$80,000	\$80,000	\$343,087	\$80,000	0.0%
Corporate/Agency Donations/Grants						
Non-Cash Food Contributions	\$850,000	\$850,000	\$850,000	\$964,351	\$850,000	0.00%
Total Fund Raising Income	\$35,000	\$40,000	\$40,000	\$5,174	\$40,000	0.00%
Interest Income	\$50	\$50	\$800	\$396	\$100	-87.50%
<b>Total Income</b>	<b>\$975,050</b>	<b>\$970,050</b>	<b>\$970,800</b>	<b>\$1,313,008</b>	<b>\$970,100</b>	<b>-0.07%</b>
<b>Total Cash Income</b>	<b>\$125,050</b>	<b>\$120,050</b>	<b>\$120,800</b>	<b>\$348,657</b>	<b>\$120,100</b>	<b>-0.58%</b>
<b>Expenses</b>						
<b>Ending Fund Balance</b>						
Food Taken In and Delivered	\$850,000	\$850,000	\$850,000	\$1,029,680	\$850,000	0.00%
Liability Insurance	\$6,000	\$6,000	\$6,000	\$6,732	\$6,000	0.00%
Facility Repair and Maintenance	\$7,000	\$5,000	\$3,500	\$6,797	\$3,500	0.00%
Fund Raisers	\$12,000	\$14,000	\$12,000	\$3,311	\$12,000	0.00%
Dues/Licenses	\$10	\$20	\$20	\$180	\$20	0.00%
Office Expenses	\$2,000	\$2,000	\$2,000	\$3,107	\$2,000	0.00%
Non-Food Supplies	\$500	\$700	\$500	\$1,107	\$500	0.00%
Fuel (Van)	\$1,600	\$1,700	\$1,700	\$1,102	\$1,700	0.00%
Van Maint & Repairs	\$500	\$1,000	\$700	\$1,432	\$1,000	42.86%
Volunteer Recognition	\$1,400	\$1,400	\$1,400	\$1,480	\$1,400	0.00%
Director Salary	\$52,800	\$49,600	\$49,600	\$41,512	\$49,600	0.00%
Payroll Taxes	\$3,500	\$3,472	\$3,472	\$3,644	\$3,472	0.00%
Youth Food Programming (backpacks/Lunches)	\$12,000	\$13,000	\$13,000	\$7,371	\$13,000	0.00%
Travel & Meetings	\$1,000	\$1,000	\$1,000	\$0	\$1,000	0.00%
Utilities	\$11,000	\$12,600	\$12,000	\$12,935	\$13,200	10.00%
Accounting Expense	\$4,000	\$6,000	\$4,000	\$7,056	\$7,000	75.00%
Miscellaneous	\$300	\$0	\$0	\$150	\$0	0.00%
City of Orting Utility Assistance	\$1,500	\$1,500	\$1,500	\$400	\$1,500	0.00%
<b>Total Expense</b>	<b>\$967,110</b>	<b>\$968,992</b>	<b>\$962,392</b>	<b>\$1,127,997</b>	<b>\$966,892</b>	<b>0.47%</b>
<b>Total Cash Expense</b>	<b>\$117,110</b>	<b>\$118,992</b>	<b>\$112,392</b>	<b>\$98,316</b>	<b>\$116,892</b>	<b>4.00%</b>
<b>Cash Surplus/(Deficit)</b>	<b>\$7,940</b>	<b>\$1,058</b>	<b>\$8,408</b>	<b>\$250,341</b>	<b>\$3,208</b>	



ORTING FOOD BANK  
% PAT C WILSON  
PO BOX 1877  
ORTING WA 98360-1877



010272

Employer Identification Number: 20-8562623  
Person to Contact: Mr. Kelley  
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Mar. 04, 2013, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in July 2007.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website [www.irs.gov/ee](http://www.irs.gov/ee) for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

*Richard McKee*

Richard McKee, Department Manager  
Accounts Management Operations





## Coverage Confirmation

The terms, conditions, and exclusions shown here are brief overviews included in, but not limited to, the coverages provided by the Non Profit Insurance Program. The terms and conditions offered may differ from your prior policy and from what you requested in your submission. This document is not intended to be used as a direct reflection of all coverages or to replace or alter the policies in any way. Information represented in this Coverage Confirmation is subject to the exclusions, terms, limitations, and conditions of the policy insuring the Non Profit Insurance Program. All specific coverage, exclusion, and limitation questions should be referred directly to the policies and all attached endorsements. In the event of differences, the policy will prevail. Participating companies are non-admitted, unless otherwise stated. Non-admitted companies are not regulated by the Washington State Insurance Commissioner and are not protected by the Washington State Guaranty Fund. Clear Risk Solutions will process all surplus lines filings on any excess and surplus lines policies, if applicable, on behalf of NPIP. The Policy is subject to audit. Defense costs are outside the limits for nonprofit members and inside the limits for independent schools. For claims made coverages, Extended Reporting Periods are available upon request (information regarding basic ERPs is available in the policy).

**Please note the limits shown here represent the combined full limits provided by multiple policies from various carriers. It is the responsibility of the broker to review this document to confirm its accuracy.**

### Notice of Cancellation for Non-Payment

We may cancel this policy within 10 days in the event of non-payment of premium. Notice of cancellation will be emailed to the Named Insured's last known email address and will indicate the date on which coverage is terminated. A copy will be emailed to the broker of record on file.

**Member/Insured:**

Orting Food Bank  
PO Box 1877  
Orting, Washington 98360

**Producer:**

Propel Insurance - Tacoma  
Lawrence, Kris  
1201 Pacific Avenue, Suite 1000  
Tacoma, Washington 98402

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Policy Term: 06/01/2021 to 06/01/2022

Issue Date: 5/28/2021

Coverage Confirmation Expiration Date: 08/30/2021, at 12:01 a.m.

Member Coverage Number: NPIP212254003

Member Since: 9/11/2012

Authorized Signature:



## Coverage Confirmation

### PROPERTY COVERAGE PART

- Item 1. **NPIP Retained Limit:**  
 Real and Personal Property Coverage Part Each Occurrence \$150,000
- Item 2. **Limit of Insurance:**  
 Real and Personal Property Coverage Part Each Occurrence \$75,000,000 Per all Members of the Group Combined
- Item 3. **Sublimit of Insurance:**

The Sublimits of Insurance shown below are part of and not in addition to the Limit of Insurance shown above for the Real and Personal Property Coverage Part. These sublimits apply excess of the Real and Personal Property Coverage Part Retained Limit shown above. Sublimits applicable in excess of the American Alternative Insurance Corporation policy are per occurrence.

Accounts Receivable	\$100,000 Per Member
Additions, Alterations and Repairs	N/A
Business Income and Extra Expense	\$250,000 + scheduled per Member
Computer Systems	\$1,000,000 Each Occurrence, Per Member
Electronic Data and Media	\$250,000 Each Occurrence, Per Member
Computer Systems and Electronic Data and Media	\$10,000,000 Annual Group Aggregate
Contractors' Equipment	\$100,000 Per Member
Debris Removal	Lesser of 20% or \$500,000 Per Member
Fine Arts	\$100,000 Per Member
Newly Acquired or Constructed Property, Real and Personal Property	\$1,000,000 Per Member
Ordinance or Law	
Undamaged Portion of Building	100% of value of damaged building Per Property Schedule
Increased Costs of Construction	Lesser of 25% of value of damaged building or \$500,000 Per Member
Costs of Demolition	Lesser of 25% of value of damaged building or \$500,000 Per Member
Personal Property in Transit	\$100,000 Per Member
Pollutant Clean Up and Removal	\$100,000 Annual Group Aggregate
Property Off-Premises	\$250,000 Per Member
Valuable Papers and Records including cost of research	\$100,000 Per Member
Personal Property Owned by Employees – Per Employee	\$5,000
Personal Property Owned by Employees – Each Occurrence	\$50,000
Personal Property Owned by Employees – Annual Group Aggregate	\$250,000
Personal Property of Others – Per Person	\$5,000
Personal Property of Others – Each Occurrence	\$50,000
Personal Property of Others – Annual Group Aggregate	\$50,000
Fire Department Service Charge	\$25,000 Per Member
Business Income and Extra Expense for Utility Service Interruption	\$250,000 Per Member
Unnamed Locations	\$250,000 Per Member
Artificial/Paved Surfaces	\$200,000 Per Member
Sewer, Drain or Sump Back-up or Over Flow	\$25,000



**Item 4. Additional Coverages/Endorsements:**

Flood - Each Occurrence and Annual Aggregate Per Member	\$1,000,000 Property located at the time of loss in any flood zone identified by FEMA as Zones A, AO, AH, A1 through 30, AE, A99, AR, AR/A1 through 30, AR/AE, AR/AO, AR/AH, AR/A, VO, V1 through 30, VE and V; or hold a similar high risk FEMA rating are excluded.
Flood – Group Annual Aggregate	\$25,000,000
Earthquake – Each Occurrence and Annual Aggregate Per Member	\$1,000,000
Earthquake – Group Annual Aggregate	\$25,000,000
Auto Physical Damage (except while in transit)	\$2,000,000
Auto Physical Damage (while in transit)	\$300,000
Margin Clause	The most we will pay for Ultimate Net Loss in any one occurrence at a premises described in the Property Schedule on file with the Insurer is <b>125%</b> of the values shown on such schedule on file with the Insurer for Real Property and Personal Property at such described premises. This margin clause does not apply to Increased Cost of Construction or Demolition Costs as provided under the Ordinance or Law Coverage Extension, Debris Removal Coverage Extension, Pollutant Clean Up and Removal and the Fire Department Service Charge Coverage Extension, all subject to the Real and Personal Property Coverage Part Limit of Insurance and other policy terms and conditions.

**Item 5. Deductibles:**

The NPIP Program Retention listed above is in addition to the deductibles listed below.

**Real and Personal Property**  
(except Earthquake, Flood, and Auto Physical Damage for Scheduled Automobiles)

Real and Personal Property	Each Occurrence	See Schedule
Miscellaneous Equipment	Each Occurrence	\$500

1. Earthquake: 2% of insurable values, subject to a \$25,000 minimum, Per Member, Each Occurrence.
2. Flood: 2% of insurable value, subject to a \$25,000 minimum and \$100,000 maximum, Per Member, Each Occurrence. *Flood Zones A, AO, AH, A1 through 30, AE, A99, AR, AR/A1 through 30, AR/AE, AR/AO, AR/AH, AR/A, VO, V1 through 30, VE, and V are excluded from coverage.*
3. Automobile Physical Damage for Scheduled Automobiles: See Schedule
4. Rental Vehicles: \$500 Per Occurrence.

## Coverage Confirmation

### EQUIPMENT BREAKDOWN COVERAGE

Item 1.	<b>NPIP Retained Limit:</b> Equipment Breakdown Coverage	One Accident	\$50,000
Item 2.	<b>Limit of Insurance:</b> Equipment Breakdown Coverage	One Accident	\$75,000,000

**Item 3. Sublimits of Insurance:**

The Sublimits of Insurance shown below are part of and not in addition to the Limit of Insurance shown above for Equipment Breakdown Coverage. These sublimits apply excess of the Equipment Breakdown Coverage Retained Limit shown above.

Expediting Expenses	Included
Hazardous Substances	\$1,000,000
Spoilage	\$500,000
Electronic Data Restoration	\$100,000
Service Interruption	\$100,000
Business Income	Included
Extra Expense	Combined with Business Income
Contingent Business Income	\$100,000
Property Off Premises	\$100,000
Extended Period of Restoration:	60 days
Newly Acquired Locations	Included; 365 days
Service Interruption Waiting Period:	24 hours

Item 4.	<b>Deductibles:</b> Equipment Breakdown Coverage Part	\$1,000 Each Accident
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## Coverage Confirmation

### CRIME COVERAGE PART

Item 1.	<b>NPIP Retained Limit:</b> Crime Coverage Part	Each Occurrence	\$150,000
Item 2.	<b>Limit of Insurance:</b> Crime Coverage Part Crime Coverage Part	Each Occurrence/Member Agg Group Aggregate	\$1,000,000 \$5,000,000

Coverage for ERISA Plans is provided within the Crime Coverage Part. Please refer to the policy for all terms, conditions and exclusions related to ERISA coverage.

**Item 3. Sublimits of Insurance**

The Sublimits of Insurance shown below are part of and not in addition to the Limit of Insurance shown above for the Crime Coverage Part. These sublimits apply excess of the Crime Coverage Part Retained Limit shown above.

Employee Theft - Per Loss Coverage	\$1,000,000
Employee Theft - Per Employee Coverage	Not Applicable
Forgery or Alteration	\$1,000,000
Inside the Premises - Money and Securities	\$100,000
Inside the Premises – Robbery or Safe Burglary of Other Property	\$100,000
Outside the Premises - Money and Securities	\$100,000
Computer Fraud	\$100,000
Funds Transfer Fraud	\$100,000
Money Orders Counterfeit Paper Currency	\$100,000

**Item 4. Deductibles:**

The NPIP Program Retention listed above is in addition to the deductibles listed below.

Employee Theft - Per Loss Coverage	\$500 Each Occurrence
Forgery or Alteration	\$500 Each Occurrence
Inside the Premises - Money and Securities	\$500 Each Occurrence
Inside the Premises – Robbery or Safe Burglary of Other Property	\$500 Each Occurrence
Outside the Premises - Money and Securities	\$500 Each Occurrence
Computer Fraud	\$500 Each Occurrence
Funds Transfer Fraud	\$500 Each Occurrence
Money Orders Counterfeit Paper Currency	\$500 Each Occurrence



## Coverage Confirmation

### GENERAL LIABILITY AND AUTOMOBILE LIABILITY COVERAGE PARTS

Item 1.	<b>NPIP Retained Limit:</b>		
	General Liability Coverage Part	Each Occurrence	\$150,000
	Automobile Liability Coverage Part	Each Accident	\$150,000
Item 2.	<b>Limit of Insurance</b>		
	General Liability Coverage Part	Each Occurrence Per Member	\$5,000,000
	General Liability Coverage Part	Member Aggregate	\$10,000,000
		Group Aggregate	\$50,000,000
	Automobile Liability Coverage Part	Each Accident Per Member	\$5,000,000
	Automobile Liability Coverage Part	Group Aggregate	N/A

**Item 3. Sublimits of Insurance and Additional Coverages/Endorsements:**

The Sublimits of Insurance shown below are part of and not in addition to the Limit of Insurance shown above for the General Liability and Automobile Liability Coverage Parts. These sublimits apply excess of the General Liability and Automobile Liability Coverage Part Retained Limits shown above.

**General Liability**

Fire Legal Liability	\$1,000,000 Each Occurrence Per Member
Damage to Leased or Rental Premises	\$250,000 Each Occurrence Per Member
Employee Benefits Liability (Claims-Made Form)	\$5,000,000 Each Claim Per Member
Employee Benefits Liability (Claims-Made Form)	\$5,000,000 Member Aggregate
Employer's Liability	\$1,000,000 Each Occurrence Per Member
Employer's Liability	\$10,000,000 Member Aggregate
	\$10,000,000 Group Aggregate
Sexual Abuse (Claims Made Form)	\$2,000,000 Each Claims Made Per Member
Sexual Abuse (Claims Made Form)	\$4,000,000 Member Aggregate
	\$20,000,000 Group Aggregate
Failure to Supply	\$250,000 Each Occurrence Per Member
Garage Liability	\$1,000,000 Each Accident Per Member
Medical Expenses – Each Person (Excludes Students)	\$5,000
Medical Expenses – Each Accident	\$25,000
Traumatic Event Response Coverage:	
Crisis Expense Sublimit	\$100,000
Crisis Property Improvements Sublimit	Included in Crisis Expense Sublimit
Traumatic Event Response Group Aggregate	\$250,000

**Automobile Liability**

Auto UM/UIM	\$1,000,000
Garagekeepers Liability	\$1,000,000 Each Accident Per Member
Hired Physical Damage	\$250,000 Each Accident Per Member
Automobile Medical Expenses – Each Person (Excludes Students)	\$5,000
Automobile Medical Expenses – Each Accident	\$25,000

Item 4.	<b>Retroactive Dates:</b>		
	Employee Benefits Liability – Primary	\$5,000,000	2/27/2007
	Sexual Abuse Liability – Primary	\$2,000,000	9/11/2012

Item 5.	<b>Deductibles:</b>		
	General Liability		\$0 Per Occurrence
	Automobile Liability		See Schedule Each Accident



## Coverage Confirmation

### WRONGFUL ACTS LIABILITY COVERAGE PART

Item 1.	<b>NPIP Retained Limit:</b>		
	Wrongful Act Liability Coverage Part	Each Wrongful Act	\$150,000
	Miscellaneous Professional Liability Coverage Part	Each Wrongful Act	\$150,000
Item 2.	<b>Limit of Insurance:</b>		
	<i>Claims-Made Form</i>		
	Wrongful Act Liability Coverage Part (Includes Directors & Officers)	Each Wrongful Act Per Member	\$5,000,000
	Wrongful Act Liability Coverage Part (Includes Directors & Officers)	Member Aggregate	\$5,000,000
		Group Aggregate	\$40,000,000
	Miscellaneous Professional Liability Coverage Part	Each Wrongful Act Per Member	\$5,000,000
	Miscellaneous Professional Liability Coverage Part	Member Aggregate	\$5,000,000
		Group Aggregate	\$40,000,000

**Item 3. Sublimits of Insurance and Additional Coverages/Endorsements:**

The Sublimits of Insurance shown below are part of and not in addition to the Limit of Insurance shown above for the Wrongful Act Liability Coverage Part. These sublimits apply excess of the Wrongful Act Liability Coverage Part Retained Limits shown above.

Fiduciary Liability	\$5,000,000 Each Wrongful Act and Member Aggregate
Sexual Harassment	\$5,000,000 Each Wrongful Act and Member Aggregate

Item 4.	<b>Retroactive Dates:</b>		
	Wrongful Acts Liability – Primary	\$5,000,000	6/1/1986
	Miscellaneous Professional Liability – Primary	\$5,000,000	9/11/2012
	Sexual Harassment – Primary	\$5,000,000	9/11/2012
	Fiduciary Liability – Primary	\$5,000,000	6/1/1986

Item 5.	<b>Deductibles:</b>	
	Wrongful Acts:	\$1,000 Each Wrongful Act
	Miscellaneous Professional:	\$1,000 Each Wrongful Act



## Coverage Confirmation PRIVACY, SECURITY AND TECHNOLOGY COVERAGE

<b>Item 1. NPIP Retained Limit:</b>	\$100,000
<b>Item 2. Deductible:</b>	
All Coverages	\$2,500 per Claim
Except Loss of Business Income	12 Hours waiting period
<b>Item 3. Limit of Insurance:</b>	
Member Annual Policy Aggregate	\$1,000,000
Group Combined Policy Aggregate	\$10,000,000

**Item 4. Sublimits of Coverage:**

The Sublimits of Coverage shown below do not increase the overall Limits listed above.

a. Media Liability	Per Claim and Aggregate	\$1,000,000
b. Privacy and Cyber Liability	Per Claim and Aggregate	\$1,000,000
c. Privacy Regulatory Defense. Awards and Fines	Per Claim and Aggregate	\$1,000,000
d. Payment Card Industry Data Security Standard Fines and Costs	Per Claim and Aggregate	\$250,000
e. Business Interruption and Extra Expense	Each Occurrence and Aggregate	\$250,000
f. Business Interruption System Failure	Each Occurrence and Aggregate	\$250,000
g. Dependent Business Interruption	Each Occurrence and Aggregate	\$250,000
h. Dependent Business Interruption System Failure	Each Occurrence and Aggregate	\$250,000
i. Data Recovery	Each Occurrence and Aggregate	\$250,000
j. Cyber Extortion and Ransomware	Each Occurrence and Aggregate	\$250,000
k. Data Breach Response & Crisis Management	Each Occurrence and Aggregate	\$250,000
l. Cyber Crime	Each Occurrence and Group Aggregate	\$250,000
m. Utility Fraud	Each Occurrence and Group Aggregate	\$100,000
n. Voluntary Shutdown	Each Occurrence and Aggregate	\$250,000
o. Consequential Reputation Loss Endorsement	Each Occurrence and Aggregate	\$250,000

**Item 5. Retro Active Date:** (Coverages a., b., c., and d. above) Full Prior Acts



## PARTICIPATING CARRIERS

**THE FOLLOWING CARRIERS PARTICIPATE IN THE DESIGNATED PORTIONS  
OF THE POLICY (SUBJECT TO CHANGE PRIOR TO JUNE 1, 2021):**

### PROPERTY COVERAGE:

**(Limits listed below reflect the carrier's respective participation in the Combined Group Limit, per Occurrence)**

American Alternative Insurance Corporation, a member of Munich-American Holding Corporation	A+XV (Admitted)	Primary \$10M
Axis Surplus Insurance Company	A XV (Non-Admitted)	Part of \$65M excess \$10M
RSUI Indemnity Company	A+ XIV (Admitted)	Part of \$65M excess \$10M
Arch Specialty Insurance Company	A+ XV (Non-Admitted)	Part of \$65M excess \$10M
Independent Specialty Insurance Company	A X (Non-Admitted)	Part of \$65M excess \$10M
Interstate Fire & Casualty Company	A+ XV (Non-Admitted)	Part of \$65M excess \$10M
Certain UW Lloyds	A XV (Non-Admitted)	Part of \$65M excess \$10M
Certain UW Lloyds, London Syndicate 2357	A XV (Non-Admitted)	Part of \$65M excess \$10M

### EARTHQUAKE COVERAGE:

**(Limits listed below reflect the carrier's respective participation in the Combined Group Aggregate Limit)**

Munich Earthquake Tower Option: \$25,000,000 Combined Group Aggregate		
American Alternative Insurance Corporation, a member of Munich-American Holding Corporation	A+XV (Admitted)	Primary \$10M
Axis Surplus Insurance Company	A XV (Non-Admitted)	Part of \$15M excess \$10M
RSUI Indemnity Company	A+ XIV (Admitted)	Part of \$15M excess \$10M
Arch Specialty Insurance Company	A+ XV (Non-Admitted)	Part of \$15M excess \$10M
Independent Specialty Insurance Company	A X (Non-Admitted)	Part of \$15M excess \$10M
Interstate Fire & Casualty Company	A+ XV (Non-Admitted)	Part of \$15M excess \$10M
Certain UW Lloyds	A XV (Non-Admitted)	Part of \$15M excess \$10M
Certain UW Lloyds, London Syndicate 2357	A XV (Non-Admitted)	Part of \$15M excess \$10M

Peachtree Earthquake Tower Option: \$25,000,000 Combined Group Aggregate

Landmark American Insurance Company	A+ XIV (Non-Admitted)	Part of \$25M
Arch Specialty Insurance Company	A+ XV (Non-Admitted)	Part of \$25M

### EQUIPMENT BREAKDOWN COVERAGE:

**(Limits listed below reflect the carrier's respective participation in the Combined Group Limit, per Occurrence)**

American Alternative Insurance Corporation, a member of Munich-American Holding Corporation	A+XV (Admitted)	Primary \$10M
Axis Surplus Insurance Company	A XV (Non-Admitted)	Part of \$65M excess \$10M
RSUI Indemnity Company	A+ XIV (Admitted)	Part of \$65M excess \$10M
Arch Specialty Insurance Company	A+ XV (Non-Admitted)	Part of \$65M excess \$10M
Independent Specialty Insurance Company	A X (Non-Admitted)	Part of \$65M excess \$10M
Interstate Fire & Casualty Company	A+ XV (Non-Admitted)	Part of \$65M excess \$10M
Certain UW Lloyds	A XV (Non-Admitted)	Part of \$65M excess \$10M
Certain UW Lloyds, London Syndicate 2357	A XV (Non-Admitted)	Part of \$65M excess \$10M

### CRIME COVERAGE:

American Alternative Insurance Corporation, a member of Munich-American Holding Corporation	A+XV (Admitted)	\$5M Combined Group Aggregate
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### GENERAL LIABILITY COVERAGE:

American Alternative Insurance Corporation, a member of Munich-American Holding Corporation	A+XV (Admitted)	\$50M Combined Group Aggregate
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**AUTO LIABILITY COVERAGE:**

American Alternative Insurance Corporation, a member of Munich-American Holding Corporation A+XV (Admitted)

**WRONGFUL ACTS LIABILITY COVERAGE:**

Princeton Excess & Surplus Lines Ins Co, a member of Munich-American Holding Corporation A+XV (Non-Admitted) \$40M Combined Group Aggregate

**MISCELLANEOUS PROFESSIONAL LIABILITY COVERAGE:**

Princeton Excess & Surplus Lines Ins Co, a member of Munich-American Holding Corporation A+XV (Non-Admitted) \$40M Combined Group Aggregate

**THE CARRIERS BELOW PROVIDE COVERAGE FOR THE FOLLOWING LINES OF BUSINESS ON A SEPARATE MASTER POLICY:**

**PRIVACY, SECURITY AND TECHNOLOGY:**

**(Limits listed below reflect the carrier's respective participation in the Combined Group Aggregate Limit)**

Indian Harbor Insurance Company A+ XV (Non-Admitted) Primary \$5M  
Crum & Forster Specialty Insurance Company A XIV (Non-Admitted) \$5M excess \$5M



# Grant Application-2021

City of Orting - Office of the City Clerk  
PO Box 489  
104 Bridge St S., Orting, WA 98360  
Phone: (360) 893-9008  
Fax: (360) 893-6809  
[www.cityoforting.org](http://www.cityoforting.org)

FOR CITY CLERK USE ONLY:

Name of Organization: Orting Senior Center Organization UBI #: 601178872

Contact Person's Name and Title: Staci Guirsch - Director

Mailing Address: P.O. Box 104 Orting, WA 98360

Phone: (360) 893-5827 Email Address: seniorcenter@orting.wednet.edu

Amount Requested: \$ 15,000

How the City Grant will be used (This information can be provided in a letter, attached to this application):

PLEASE SEE ATTACHED LETTER

Who does the grant serve (This information can be provided in a letter, attached to this application):

PLEASE SEE ATTACHED LETTER

All groups seeking grants from the City of Orting must:

- Submit one (1) original and one (1) electronic copy of this application, along with the following attachments, to the City no later than August 21<sup>st</sup>, at 3:00pm, (for grants to be issued in the following year).  
The attachments that shall be included with the application include:
  1. Previous year's annual financial statement
  2. Current year's budget
  3. Proof of non-profit status, including but not limited to 501(c) (3) identification number.
  4. Copy of Liability Insurance with rider for the City. (may be provided after approval)
- A representative of the applicant shall attend the City Council's Community and Government Affairs Committee Meeting to discuss the contents of the application.
- If selected, and approved by the City Council, an authorized representative of the applicant shall execute a contract with the City before the group shall receive the funding.

Staci Guirsch

Signature of Authorized Representative of Applicant

8, 18, 2021

Date

Please return completed form and any additional information to:  
City of Orting – Attn: City Clerk 104 Bridge St S., PO Box 489, Orting, WA 98360  
[clerk@cityoforting.org](mailto:clerk@cityoforting.org) - (360) 893-9008





Orting Valley Senior Center  
120 Washington Avenue North  
P.O. Box 104  
Orting Washington 98360  
360.893.5827  
seniorcenter@orting.wednet.edu

August 18<sup>th</sup> 2021

RE: City of Orting 2022 Grant  
TO: Community and Government Affairs Committee

Thank you for the opportunity to apply for the City of Orting 2022 Grant. Orting Senior Center Organization would like to request \$15,000 to help purchase food and disposables for our Senior Mealsite Program. 2020 and 2021 brought a large influx of new senior participants due to food insecurity from the Covid Pandemic. Attached are copies of our mealsite numbers for the last 3 years and year to date to show the numbers and our need for additional funding to continue to feed the Seniors and disabled in the Orting Community. We were blessed with enough food donations to offset the rise in numbers last year but additional funding is needed to maintain our current meal counts. We have been gifted a new building (Orting Christian Church) and are working to acquire funding to add a commercial kitchen, restrooms and other necessities to provide meals services daily and during emergent times. Our current building will not accommodate our growing numbers and we look forward to being able to continue serving our Orting Seniors in our new building. Your financial support allows us to use existing funds to pursue the expansion of our new building.

Thank you for your consideration,

Staci Guirsch  
Director

**2021 Projected Budget**  
**Orting Valley Senior Center**  
**11/20/2020**

**Expenses:**

Rent	\$4,080.00
Salaries/Wages	\$153,600.00
Senior Meal Program Food	\$75,000.00
Senior Meal Program (Covid supplies)	23,000.00
Office/Center Supplies	\$5,000.00
Equipment Repair/Replacement	\$5,000.00
Utilities (phone, wifi)	\$2,040.00
Insurance	\$3,000.00
Professional Services	\$1,900.00
Nutritionist	\$2,000.00
Licenses/Registrations	\$300.00
SAIL Instructor	\$6,500.00
Advertising/Communication/Newsletter	\$1,000.00
Speakers/Instructors	\$2,000.00
Misc. Expenses	\$5,000.00
Senior Food Pantry Foods	\$10,000.00
Pierce Transit Van	\$8,600.00

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Total Projected Expenses \$305,020.00

**Income:**

Pierce County	\$200,917.06
City of Orting	\$10,000.00
Meal Donations	\$18,000.00
Amazon Smiles	\$100.00
Member Dues	\$3,000.00
Misc. Donations	\$10,000.00
Fundraisers	\$5,000.00
Puyallup Tribe Grant	\$6,500.00
Muckleshoot Tribe Grant	\$5,000.00
Medina Foundation (pending)	\$10,000.00
Walmart (pending)	\$5,000.00
Haggan Foundation	\$5,000.00
United Way (pending)	\$2,500.00
Tulalip Tribe	\$5,000.00
Misc. Grants	\$20,000.00

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Total Projected Income \$306,017.06





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STATE of WASHINGTON SECRETARY of STATE

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I, Ralph Munro, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF INCORPORATION

to

PORTING SENIOR CENTER ORGANIZATION

in Washington NonProfit corporation. Articles of Incorporation were filed for record in this office on the date indicated below.

U. B. I. Number: 601 178 872

Date: May 5, 1989



Given under my hand and the seal of the State of Washington, at Olympia, the State Capitol.

Ralph Munro, Secretary of State





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/17/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER <b>Cross Insurance Agency</b> 8031 Pacific Ave Tacoma, WA 98408	CONTACT NAME: <b>Eloise Patton</b>
	PHONE (A/C, No, Ext): <b>253-475-5313</b> FAX (A/C, No):
	E-MAIL ADDRESS: <b>eloise@crossinsuranceagency.com</b>
	INSURER(S) AFFORDING COVERAGE
	INSURER A: <b>Liberty Mutual Insurance</b> NAIC # <b>24074</b>
INSURED <b>Orting Senior Center Organization</b> Staci Guirsch PO Box 104 Orting, WA 98360	INSURER B:
	INSURER C:
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: 00030150-191539 REVISION NUMBER: 4

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			BLO57775485	05/24/2021	05/24/2022	EACH OCCURRENCE \$ <b>1,000,000</b> DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>1,000,000</b> MED EXP (Any one person) \$ <b>15,000</b> PERSONAL & ADV INJURY \$ <b>1,000,000</b> GENERAL AGGREGATE \$ <b>2,000,000</b> PRODUCTS - COMP/OP AGG \$ <b>2,000,000</b> \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

## CERTIFICATE HOLDER

City of Orting  
110 Train St SW  
Orting, WA 98360

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

*Eloise M. Patton*

(EMP)

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9:17 AM  
08/18/21  
Cash Basis

**Orting Senior Center**  
**Profit & Loss**  
December 31, 2020 through July 31, 2021

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	<u>Dec 31, '20 - Jul 31, 21</u>
Misc. Center	342.14
Non-Profit License	10.00
Office Expense	1,709.42
Plant/Craft Sale	10.00
Salaries & Wages	73,894.78
State Payroll Tax	18,701.96
Telephone	1,002.85
Rent	<u>2,695.00</u>
<b>Total Operating Expenses</b>	<u>158,505.96</u>
<b>Total Expense</b>	<u>160,455.31</u>
<b>Net Ordinary Income</b>	860.19
<b>Other Income/Expense</b>	
Other Income	
Interest Income	<u>1.04</u>
<b>Total Other Income</b>	1.04
<b>Other Expense</b>	
Voided checks	<u>0.00</u>
<b>Total Other Expense</b>	<u>0.00</u>
<b>Net Other Income</b>	<u>1.04</u>
<b>Net Income</b>	<u><u>861.23</u></u>

**Orting Senior Center**  
**Profit & Loss**  
 January through December 2020

	Jan - Dec 20
<b>Ordinary Income/Expense</b>	
<b>Income</b>	
<b>Donations</b>	
Giving Tree	-200.00
Food Bank	6,940.86
AA	150.00
mens coffee group	280.37
Coffee	49.09
Ctr. Use-Donations	26,810.38
Other Organizations	2.80
PC Human Services	12,802.38
<b>Total Donations</b>	46,835.88
<b>Fundraisers</b>	
Growing Smiles	2,913.72
Bake Shop	323.00
Valentine Raffle	169.00
Honey	54.00
Birthday Raffle	123.00
<b>Total Fundraisers</b>	3,582.72
<b>Grants</b>	
Newman Archibald Foundation	5,000.00
AmazonSmile	64.10
Puyallup Tribe	7,000.00
City of Orting	15,000.00
Fred Meyer	37.91
Pierce County ALT	128,177.13
<b>Total Grants</b>	155,279.14
<b>Other Activities</b>	
PAYPAL	655.87
<b>Refunds</b>	
Grant Watch	18.00
Refunds - Other	3.00
<b>Total Refunds</b>	21.00
Lunches	19,954.35
Member Dues	1,127.00
<b>Total Other Activities</b>	21,758.22
<b>Total Income</b>	227,455.96
<b>Gross Profit</b>	227,455.96
<b>Expense</b>	
Building Fund Expense	1,787.50
<b>Fundraiser Expense</b>	
Valentines Day	347.62
Growing Smiles Fundraising	2,497.95
Bake Shop	842.46
Fall Dinner	150.00
<b>Total Fundraiser Expense</b>	3,838.03



**Orting Senior Center**  
**Profit & Loss**  
 January through December 2020

	Jan - Dec 20
<b>Operating Expenses</b>	
Center Expansion	500.00
Nutritionist	520.00
nutrition ed	454.21
SAIL	1,915.00
Transportation	2,508.00
Food Bank	12,924.72
Party Supplies	2,228.71
Repair & Maintenance	395.30
Equipment	1,009.65
Background Checks	66.00
Chocolate Stroll	352.57
Food Card	4,031.60
Advertising & Promotion	298.93
Printing	198.93
Donations	554.00
Bank Charges	525.54
Bond Expenses	114.82
Bookkeeper	1,445.00
Center Ins. 1 yr.	1,215.00
Fed. Payroll Tax Qtr.	22,452.28
<b>Mealsite Expense</b>	
Food	45,361.33
Supplies	11,295.89
Mealsite Expense - Other	7,137.23
<b>Total Mealsite Expense</b>	63,794.45
Misc. Center	920.37
Non-Profit License	50.00
Office Expense	4,739.27
Salaries & Wages	80,122.02
State Payroll Tax	3,400.45
Supplies	8.79
Telephone	2,150.06
Rent	4,080.00
<b>Total Operating Expenses</b>	212,975.67
<b>Total Expense</b>	218,601.20
<b>Net Ordinary Income</b>	8,854.76
<b>Other Income/Expense</b>	
Other Income	
Interest Income	3.57
<b>Total Other Income</b>	3.57
Other Expense	
Voided checks	0.00
<b>Total Other Expense</b>	0.00
<b>Net Other Income</b>	3.57
<b>Net Income</b>	8,858.33

## Agency Units - Summary Report

Report This report lists number of clients that received units and service units at the selected agency during the specified month and year.

**Selected Parameters**

From: 01/01/2018 To 12/31/2018  Received units in the FY

Region/Contractor: PSA 5 - Pierce County Aging and Disability Resources Scope of Work: Congregate Meals

Provider: ORTING VALLEY SENIOR CENTER Program: All

Site: All Service Detail: All

Route: All Client: All

Enrollment Status: Enrolled

Program Type: All

Provider: ORTING VALLEY SENIOR CENTER

Site/ Route	Clients that Received Units (Newly Enrolled Only)	Units (Newly Enrolled Only)	Clients That Received Units	Non-Registered Enrollments (Unduplicated)	Non-Registered Clients Served (Duplicated)	Non-Registered Units	Client Level Units	Total Units
Service: Congregate Meals, OAA TIIC/SCSA/LOC, 1 NSIP Meal								
Site: No Site Assigned	13.00	181.00	92.00	0.00	0.00	0.00	2,486.00	2,486.00
Unduplicated Total by Provider and Service :	13.00	181.00	92.00	0.00	0.00	0.00	2,486.00	2,486.00
Unduplicated Total by Provider:	17.00	181.00	88.00	0.00	0.00	0.00	2,486.00	2,486.00

Unduplicated total for All Providers and Service Sets in the Report

	Clients That Received Units (unduplicated)	Total Non-Registered Units	Total Client Level Units	Total Units
Total :	88.00	0.00	2,486.00	2,486.00 ✖
Total (Newly Enrolled):	17.00	0.00	181.00	181.00 ✖





## Agency Units - Summary Report

Report

This report lists number of clients that received units and service units at the selected agency during the specified month and year.

**Selected Parameters**

From: 01/01/2019 To 12/31/2019  Received units in the FY

Region/Contractor: PSA 5 - Pierce County Aging and Disability Resources Scope of Work: Congregate Meals

Provider: ORTING VALLEY SENIOR CENTER Program: All

Site: All Service Detail: All

Route: All Client: All

Enrollment Status: Enrolled

Program Type: All

Provider: ORTING VALLEY SENIOR CENTER

Site/ Route	Clients that Received Units (Newly Enrolled Only)	Units (Newly Enrolled Only)	Clients That Received Units	Non-Registered Enrollments (Unduplicated)	Non-Registered Clients Served (Duplicated)	Non-Registered Units	Client Level Units	Total Units
Service: Congregate Meals, OAA TIIC/SCSA/LOC, 1 NSIP Meal								
Site: No Site Assigned	16.00	199.00	81.00	0.00	0.00	0.00	3,148.00	3,148.00
Unduplicated Total by Provider and Service :	16.00	199.00	81.00	0.00	0.00	0.00	3,148.00	3,148.00
Unduplicated Total by Provider:	24.00	199.00	73.00	0.00	0.00	0.00	3,148.00	3,148.00

Unduplicated total for All Providers and Service Sets in the Report				
	Clients That Received Units (unduplicated)	Total Non-Registered Units	Total Client Level Units	Total Units
Total:	73.00	0.00	3,148.00	3,148.00
Total (Newly Enrolled):	24.00	0.00	199.00	199.00



# Agency Units - Summary Report

Report This report lists number of clients that received units and service units at the selected agency during the specified month and year.

**Selected Parameters**

From: 01/01/2020 To 12/31/2020  Received units in the FY

Region/ Contractor: PSA 5 - Pierce County Aging and Disability Resources Scope of Work: Congregate Meals

Provider: ORTING VALLEY SENIOR CENTER Program: All

Site: All Service Detail: All

Route: All Client: All Enrollment Status: Enrolled Program Type: All

Provider: ORTING VALLEY SENIOR CENTER

Site/ Route	Clients that Received Units <i>(Newly Enrolled Only)</i>	Units <i>(Newly Enrolled Only)</i>	Clients That Received Units	Non-Registered Enrollments (Unduplicated)	Non-Registered Clients Served (Duplicated)	Non-Registered Units	Client Level Units	Total Units
Service: Congregate Meals, OAA TIIIC/SCSA/LOC, 1 NSIP Meal								
Site: No Site Assigned	3.00	15.00	102.00	0.00	0.00	0.00	854.00	854.00
Unduplicated Total by Provider and Service :	3.00	15.00	102.00	0.00	0.00	0.00	854.00	854.00
Unduplicated Total by Provider:	42.00	15.00	63.00	0.00	0.00	0.00	854.00	854.00

Unduplicated total for All Providers and Service Sets in the Report				
	Clients That Received Units (unduplicated)	Total Non-Registered Units	Total Client Level Units	Total Units
Total :	63.00	0.00	854.00	854.00 ✘
Total (Newly Enrolled):	42.00	0.00	15.00	15.00 ✘

meal counts  
Pre Covid  
1/20 - 3/20





### Agency Units - Summary Report

Report

This report lists number of clients that received units and service units at the selected agency during the specified month and year.

**Selected Parameters**

From: 01/01/2020 To 12/31/2020  Received units in the FY

Region/Contractor: PSA 5 - Pierce County Aging and Disability Resources Scope of Work: Emergency Meal

Provider: ORTING VALLEY SENIOR CENTER Program: All

Site: All Service Detail: All

Route: All Client: All Enrollment Status: Enrolled Program Type: All

Provider: ORTING VALLEY SENIOR CENTER

Site/ Route	Clients that Received Units (Newly Enrolled Only)	Units (Newly Enrolled Only)	Clients That Received Units	Non-Registered Enrollments (Unduplicated)	Non-Registered Clients Served (Duplicated)	Non-Registered Units	Client Level Units	Total Units
Service: Emergency Meal, Covid-19 Response, 1-Meal Pick-Up/Take Out								
Site: No Site Assigned	171.00	7,444.00	298.00	0.00	0.00	0.00	7,444.00	7,444.00
Unduplicated Total by Provider and Service :	171.00	7,444.00	298.00	0.00	0.00	0.00	7,444.00	7,444.00
Unduplicated Total by Provider:	298.00	7,444.00	171.00	0.00	0.00	0.00	7,444.00	7,444.00

Unduplicated total for All Providers and Service Sets in the Report				
	Clients That Received Units (unduplicated)	Total Non-Registered Units	Total Client Level Units	Total Units
Total :	171.00	0.00	7,444.00	7,444.00 *
Total (Newly Enrolled):	298.00	0.00	7,444.00	7,444.00

meal counts  
4/20 - 12/20

↑  
New seniors that came in once Covid began

## Agency Units - Summary Report

Report This report lists number of clients that received units and service units at the selected agency during the specified month and year.

**Selected Parameters**

From: 01/01/2021 To 06/30/2021  Received units in the FY

Region/ Contractor: PSA 5 - Pierce County Aging and Disability Resources Scope of Work: Emergency Meal

Provider: ORTING VALLEY SENIOR CENTER Program: All

Site: All Service Detail: All

Route: All Client: All Enrollment Status: Enrolled Program Type: All

Provider: ORTING VALLEY SENIOR CENTER

Site/ Route	Clients that Received Units (Newly Enrolled Only)	Units (Newly Enrolled Only)	Clients That Received Units	Non-Registered Enrollments (Unduplicated)	Non-Registered Clients Served (Duplicated)	Non-Registered Units	Client Level Units	Total Units
Service: Emergency Meal, Covid-19 Response, 1-Meal Pick-Up/Take Out								
Site: No Site Assigned	21.00	637.00	108.00	0.00	0.00	0.00	5,519.00	5,519.00
Unduplicated Total by Provider and Service :	21.00	637.00	108.00	0.00	0.00	0.00	5,519.00	5,519.00
Unduplicated Total by Provider:	23.00	637.00	106.00	0.00	0.00	0.00	5,519.00	5,519.00

Unduplicated total for All Providers and Service Sets in the Report				
	Clients That Received Units (unduplicated)	Total Non-Registered Units	Total Client Level Units	Total Units
Total :	106.00	0.00	5,519.00	5,519.00
Total (Newly Enrolled):	23.00	0.00	637.00	637.00

Projecting over 11,000 by EOY





# Grant Application-2021

City of Orting - Office of the City Clerk  
PO Box 489  
104 Bridge St S., Orting, WA 98360  
Phone: (360) 893-9008  
Fax: (360) 893-6809  
[www.cityoforting.org](http://www.cityoforting.org)

FOR CITY CLERK USE ONLY:

Name of Organization: ORTING VALLEY FARMERS MARKET UBI #: 603436579

Contact Person's Name and Title: Doug Graves – Market Manager

Mailing Address: P.O. Box 1665 Orting WA 98360

Phone: 360-872-6836 253-509-3609 Email Address: [ovfmcontact@gmail.com](mailto:ovfmcontact@gmail.com)

Amount Requested: \$ 6,000.00

How the City Grant will be used (This information can be provided in a letter, attached to this application):

Grant funds will be used for Promotion and Advertising to attract additional Vendors and Customers. It will also be used to reinstate children's activities and educational programs. And to supplement the Department of Health Matching Bucks program which is designed to provide SNAP EBT card users additional spending power by matching their EBT spending, up to \$40.00 per day, with "Matching Bucks" Vouchers, up to \$40.00. Those Vouchers are used as cash with eligible vendors, selling fresh produce, honey, and plants that will bear edible produce.

Who does the grant serve (This information can be provided in a letter, attached to this application):

This grant offering will serve Local Farmers, Customers, and Children as well as other businesses in Orting who benefit from Farmers Market Customers who also shop brick and mortar stores, while in town.

### All groups seeking grants from the City of Orting must:

- Submit one (1) original and one (1) electronic copy of this application, along with the following attachments, to the City no later than August 21<sup>st</sup>, at 3:00pm, (for grants to be issued in the following year).

The attachments that shall be included with the application include:

1. Previous year's annual financial statement
  2. Current year's budget
  3. Proof of non-profit status, including but not limited to 501(c) (3) identification number.
  4. Copy of Liability Insurance with rider for the City. (may be provided after approval)
- A representative of the applicant shall attend the City Council's Community and Government Affairs Committee Meeting to discuss the contents of the application.
  - If selected, and approved by the City Council, an authorized representative of the applicant shall execute a contract with the City before the group shall receive the funding.

  
Signature of Authorized Representative of Applicant DOUG GRAVES 08/19/2021  
MARKET MANAGER Date

Please return completed form and any additional information to:  
City of Orting – Attn: City Clerk 104 Bridge St S., PO Box 489, Orting, WA 98360  
[clerk@cityoforting.org](mailto:clerk@cityoforting.org) - (360) 893-9008







Orting Valley Farmers Market - 2021 Budget

Budget Type: Operating-Approved  
 Submitted for approval: February 2021  
 Board Approved: March 2021

Status as of: 08/10/21

BECU Balances as of Status Date:

Primary Ckg \$27,822.65  
 EBT Ckg \$1,569.05  
 Savings \$100.08  
 TOTAL \$29,491.78

Projected Income	Approved Budget Dollars		Actuals 08/10/21		
	Approved Budget	On Hand a/o 1/11/2021	On Hand as of 08/10/21	Actuals Expected by 2021 year end	
100.00 2021 "Carry Over/On Hand"	\$0	\$3,673.30	\$3,673.30	\$0.00	\$3673.30 Carried over from 2020
100.11 2021 "CarryOver/OnHand" Vendor tokens unreimbursed	\$0	\$0.00	\$0.00	\$0.00	
100.12 2021 "CarryOver/OnHand" unspent Customer Tokens	\$0	\$0.00	\$0.00	\$0.00	
100.01 Vendor Space Fees	\$7,250	\$0.00	\$5,984.00	\$1,266.00	= 25 vendors at \$250.00 full season and 40 vendors at \$25.00 single day
100.02 Fundraising	\$0	\$0.00	\$0.00	\$0.00	
100.02.2 Market Bag Sales	\$0	\$0.00	\$25.00	\$0.00	5 bags sold Jun 9-Total \$25.00
100.02.4 Basket Raffle	\$0	\$0.00	\$0.00	\$0.00	
100.02.5 Donation Can	\$0	\$0.00	\$0.00	\$0.00	
100.02.6 Calendar Sales	\$0	\$0.00	\$0.00	\$0.00	
100.03 Pierce County Grant	\$1,000	\$0.00	\$0.00	\$0.00	\$1000.00 To be received by year end
100.04 City of Orting Grant (\$4.5K requested-\$3K granted)	\$3,000	\$0.00	\$3,000.00	\$0.00	Grant Application submitted 4Q 2020. \$4500 was requested. \$3000 was approved and received
100.04.1 Donation-Specified Eat Fresh Orting (EBT Match)	\$500	\$0.00	\$0.00	\$0.00	\$500.00 Possible Anticipated Rincon Donation
100.04.2 Grant - Orting Food Bank Voucher Program	\$0	\$0.00	\$0.00	\$0.00	
100.05 Other Grants/Sponsorships	\$0	\$0.00	\$0.00	\$0.00	
100.06 Donations	\$1,000	\$0.00	\$11.01	\$0.00	To Be Determined - \$6.01 Amazon Smile Donation, \$5.00 Amazon Smile Donation
100.10 Unidentified Deposits	\$0	\$0.00	\$553.09	\$0.00	\$553.09 Pierce County 2020 Covid Expense 1/2 refund
100.20 WSDA 2021 Covid Grant			\$20,000.00	\$0.00	\$20,000.00 WSDA Covid Craft Beverage Grant
100.99 Additional Funding Required to balance Budget	\$0	\$0.00	\$0.00	\$0.00	A negative Budget Balance would require a Board decision to raise funds by year end, and post in this line item, to balance Budget
199.00 Amount spent to Factor actual BECU Balance as of update			<del>\$8,294.69</del>		
199.01 Total	\$12,750	\$3,673.30	\$24,951.71	\$1,266.00	



# Orting Valley Farmers Market - 2021 Budget

Budget Type: Operating-Approved

Submitted for approval: February 2021

Board Approved: March 2021

Status as of: 08/10/21

Projected Expenses	Approved Budget		Status as of 08/10/21		
	Approved Budget	Expected to be Paid	Actual Exp Paid	Remaining Exp to be paid	
300.00 Carry over for 2022	\$0	\$2,000.00		\$2,000.00	
300.01 Unpaid 2021 Token Reimbursement checks	\$25	\$25.00		\$200.00	
300.02 Unspent customer 2021 EBT Tokens	\$100	\$100.00		\$400.00	
300.03 Unspent 2021 customer Debit/Credit Tokens	\$175	\$175.00		\$175.00	
300.04.1 Eat Fresh Orting	\$0	\$0.00		\$0.00	
300.04.2 Food Bank Program	\$0	\$0.00		\$0.00	
300.06 Promo/Marketing	\$500	\$500.00		\$500.00	
300.10 Market Bag Purchase	\$0	\$0.00		\$0.00	
300.21 Insurance	\$500	\$500.00	\$300.00	\$200.00	\$300.00 Campbell Risk Management - Market Liability Insurance
					\$40.00 IRS 990-N form creation & filing fee, \$36.70 Flowers for Jolene, \$64.47 Wal Mart Printer Ink, Paper, and Duct Tape for Highway Banner Updates. \$17.21 Freddy's marker paint, \$48.11 Walmart printer ink, \$19.95 WalMart marker paint. \$79.73 Home Depot Perimeter Rope and Caution tape. \$74.78 Printing. \$6.00 Safeway Ice, \$5.98 Safeway Ice, \$20.76 Walmart Printer Ink, \$5.87 Freddy's Printer Paper, \$8.97 Safeway Ice, \$46.08 WalMart Ink, \$69.66 WalMart, Paper File Folders Bin Spray Paint, \$5.98 Safeway Ice, \$5.98 Safeway Ice, \$4.58 Arrow Lumber Toilet Plunger
300.41 Supplies	\$500	\$500.00	\$560.21	\$0.00	
300.42 Storage	\$0	\$0.00		\$0.00	
300.43 KERNEL Expenses	\$0	\$0.00		\$0.00	
300.60 Covid Health Supplies	\$1,500	\$1,500.00		\$1,500.00	
300.91 Webpage	\$180	\$180.00	\$53.90	\$126.10	\$53.90 Weebly Domain Fee (24 months)
300.92 MightyCall Telephone #	\$240	\$240.00	\$139.93	\$100.07	\$19.99 Mighty Call pd for Jan-July
300.93 Hot Spot Data plan	\$120	\$120.00		\$120.00	
300.94 USPS Box Fee	\$100	\$100.00	\$129.00	\$100.00	\$129.00 USPS Box rent Pd 1/13/21
301.41 Mgr. Stipend	\$6,000	\$6,000.00		\$6,000.00	
301.42 Mgr. Stipend 2020	\$0	\$0.00	\$6,500.00		\$6,500.00 paid to compensate for loss in 2020
301.43 Event expenses	\$100	\$100.00		\$100.00	
301.45 Activity & Entertainment	\$500	\$500.00	\$300.00	\$200.00	\$300.00 Dear Crow - Brian Lindsay,
301.71 WSFMA/FMC fees	\$300	\$300.00	\$250.00	\$50.00	\$250.00 WSFMA 2021 Membership 4/3/21
301.72 WSFMA conference	\$400	\$400.00	\$131.99	\$267.01	\$131.99 Board Member WSFMA Conference Fee paid 2/19/21
301.73 Puget Sound Farm Guide	\$0	\$0.00		\$0.00	
301.74 Graham Expo	\$0	\$0.00		\$0.00	
301.75 Puyallup Spring Fair	\$0	\$0.00		\$0.00	
301.81 EBT (SNAP) program exp.	\$100	\$100.00		\$100.00	
301.91 Permits & Fees- County/State	\$750	\$750.00	\$363.00	\$387.00	\$298.00 TPCHD 2021 Food Vendor Application, \$65.00 Wash State Gambling Commission Annual Raffle License Fee.
301.92 Permits & Fees- Orting	\$100	\$100.00	\$101.00	\$0.00	\$101 City of Orting - Blanket Vendor Permit
302.01 Managers Assistant Fees	\$650	\$650.00		\$650.00	
399.99 Total	\$12,840	\$14,840.00	\$8,829.03	\$13,175.18	
Balance of Primary, EBT, Savings accounts as of 08/10/21					\$24,951.71
Balance of Expected Income by year end 2021 as of 08/10/21					\$1,266.00
Total of Actual and Expected year end Income as of 08/10/21					\$26,217.71
Remaining Expenses for 2021 as of 08/10/21					\$13,175.18
Budget Balance as of 08/10/21					\$13,042.53
A Negative amount would reflect funding required by line item 100.99					



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

DEPARTMENT OF THE TREASURY

Date: MAR 26 2015

ORTING VALLEY FARMERS MARKET  
19220 196 ST E  
ORTING, WA 98360-0000

Employer Identification Number:  
47-1671216  
DLN:  
26053482003435  
Contact Person:  
CUSTOMER SERVICE ID# 31954  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
170(b)(1)(A)(vi)  
Form 990/990-EZ/990-N Required:  
Yes  
Effective Date of Exemption:  
August 28, 2014  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 5436

Form **990-N**

Department of the Treasury Internal Revenue Service

## Electronic Notice (e-Postcard)

for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

OMB No. 1545-2085

2019

Open to Public Inspection

A For the **2019** Calendar year, or tax year beginning **2019-01-01** and ending **2019-12-31**

B Check if available

Terminated for Business

Gross receipts are normally \$50,000 or less

C Name of Organization: **ORTING VALLEY FARMERS MARKET**  
**PO BOX 1665, Orting, WA, US, 98360**

D Employee Identification Number **47-1671216**

E Website:

**ortingvalleyfarmersmarket.com**

F Name of Principal Officer: **ORTING VALLEY FARMERS MARKET**  
**PO BOX 1665, Graham, WA, US, 98360**









# Grant Application-2021

City of Orting - Office of the City Clerk  
PO Box 489  
104 Bridge St S., Orting, WA 98360  
Phone: (360) 893-9008  
Fax: (360) 893-6809  
[www.cityoforting.org](http://www.cityoforting.org)

FOR CITY CLERK USE ONLY:  
**RECEIVED**  
**AUG 19 2021**  
**CITY OF ORTING**

Name of Organization: Recovery Café Orting Valley UBI #: 83-2459466

Contact Person's Name and Title: Rena Thompson

Mailing Address: PO Box 1867, Orting, WA 98360

Phone: 360-208-8018 Email Address: rena@recoverycafeorting.org

Amount Requested: \$ 15,000

How the City Grant will be used (This information can be provided in a letter, attached to this application):

Please see letter

Who does the grant serve (This information can be provided in a letter, attached to this application):

Please see letter

**All groups seeking grants from the City of Orting must:**

- Submit one (1) original and one (1) electronic copy of this application, along with the following attachments, to the City no later than August 1<sup>st</sup>, at 3:00pm, (for grants to be issued in the following year).  
The attachments that shall be included with the application include:
  1. Previous year's annual financial statement
  2. Current year's budget
  3. Proof of non-profit status, including but not limited to 501(c) (3) identification number.
  4. Copy of Liability Insurance with rider for the City. (may be provided after approval)
- A representative of the applicant shall attend the City Council's Community and Government Affairs Committee Meeting to discuss the contents of the application.
- If selected, and approved by the City Council, an authorized representative of the applicant shall execute a contract with the City before the group shall receive the funding.

Rena Thompson  
Signature of Authorized Representative of Applicant

8 19 21  
Date

Please return completed form and any additional information to:  
City of Orting – Attn: City Clerk 104 Bridge St S., PO Box 489, Orting, WA 98360  
[clerk@cityoforting.org](mailto:clerk@cityoforting.org) - (360) 893-9008





[www.recoverycafeorting.org](http://www.recoverycafeorting.org)

(360)208-8018

113 Varner Ave SE  
Orting, WA 98360

#### Board Members

Carrie Ching  
Anthony Kagochi  
Rose Tracy  
Pamm Silver  
Alexa Eisenbarth

#### Executive Director

Rena Thompson  
[rena@recoverycafeorting.org](mailto:rena@recoverycafeorting.org)

#### Mission

To create a healing space for those impacted by life challenges.

#### Hours of Operation

Open to Members and Guest  
Tuesday-Saturday  
10 am to 4:00 pm

Please call to make an appointment with our Recovery Support Team.

August 18, 2021

RE: City of Orting Grant Application

Dear Council:

Thank you for your continued support of Recovery Café Orting Valley. Recovery Café Orting Valley creates a healing community of individuals impacted by life challenges. These challenges include homelessness, addiction, mental health concerns, trauma, injustice, but we have a firm belief that everyone is recovering from something. We provide a safe place for individuals to come to know ourselves as loved with gifts to share. We offer peer support through coaching, facilitation of Recovery Circles (a group setting), School for Recovery education and social offerings, and opportunities to grow and give back to the community.

This year and next we hope to increase our services to help support our community more through partnerships with the Orting United Methodist Church and support offering a clothing bank to the community. We are asking for \$5,000 of our request for this new project. This is much needed in our community. It will serve all ranges and many Orting citizens.

The remaining request of \$10,000 we are asking to go to help maintain our mental health supports we offer to our members. We have continued to support individuals with group and individual mental health therapies and hope to keep providing this service.

Recovery Café Orting Valley strives to serve all individuals who seek support as they overcome a challenge in their life. We currently support individuals 13 and older. We serve individual living in and around Orting, Washington. We do not discriminate based on behavioral health status, gender identity, race, sexuality, religion, marital status, veteran status, nation of origin, or any other category of identified discrimination.

Please let me know if you have any more questions.

Sincerely,

Rena Thompson  
Executive Director  
Recovery Café Orting Valley  
[rena@recoverycafeorting.org](mailto:rena@recoverycafeorting.org)

# Recovery Cafe Orting Valley

## Profit and Loss

January - December 2020

	TOTAL
Income	
Beacon Health SABG	20,000.00
City Of Orting	27,499.97
Donations	4,137.29
Facebook Donations	4,295.00
Grants	84,297.00
HCA SABG	13,371.30
Interest Income	1.35
OnePierce	29,818.02
Pierce County Contracts/Grants	25,000.00
Pierce County Rental Assistance	43,788.14
Rebate	345.38
Recovery Cafe Network Grants/Funding	75,000.00
Refund	315.01
<b>Total Income</b>	<b>\$327,868.46</b>
<b>GROSS PROFIT</b>	<b>\$327,868.46</b>
Expenses	
2020 Census Work	6,120.00
Bank Charges & Fees	-20.56
Cafe Supplies	9,269.73
Fundraising and Marketing	2,268.37
Insurance	3,583.55
Interest Paid	300.61
Internet	1,439.80
Meals	5,629.07
Member Support	10,817.40
Office Supplies & Software	13,685.04
Office/General Administrative Expenses	13,436.76
Other Business Expenses	11,670.03
Outreach	4,463.05
Payroll Expenses	3,092.26
Taxes	13,091.54
Wages	121,077.25
<b>Total Payroll Expenses</b>	<b>137,261.05</b>
Reimbursable Expenses	15,000.00
Rental Assistance	63,601.00
Repairs & Maintenance	8,425.18
Security	65.58
Taxes & Licenses	5,359.78
Telephone	630.01
Travel and Training	3,679.91
Utilities and Rent	9,387.72
Void Check	0.00
Website	1,047.35
<b>Total Expenses</b>	<b>\$327,120.43</b>
<b>NET OPERATING INCOME</b>	<b>\$748.03</b>
<b>NET INCOME</b>	<b>\$748.03</b>





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

DEPARTMENT OF THE TREASURY

Date: JUN 25 2019

RECOVERY CAFE ORTING  
C/O DENNIS PASCHKE  
PO BOX 1867 113 VARNER AVE SE  
ORTING, WA 98360

Employer Identification Number:  
83-2459466  
DLN:  
17053079301009  
Contact Person: CYNTHIA A CLARK ID# 17264  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
170(b)(1)(A)(vi)  
Form 990/990-EZ/990-N Required:  
Yes  
Effective Date of Exemption:  
November 1, 2018  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
08/18/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).


<b>PRODUCER</b> Hiscox Inc. 520 Madison Avenue 32nd Floor New York, NY 10022	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): (888) 202-3007      FAX (A/C, No): E-MAIL ADDRESS: contact@hiscox.com	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> Recovery Cafe Orting Valley 113 Vamer Ave SE Orting WA 98360	<b>INSURER A:</b> Hiscox Insurance Company Inc <b>NAIC #</b> 10200	
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES**      **CERTIFICATE NUMBER:**      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			UDC-4932950-CGL-21	08/17/2021	08/17/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ S/T Gen. Agg. \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

<b>CERTIFICATE HOLDER</b>	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 







# Swing Options Overview

## Play and Park Structures

**3 ½" Painted 8' Tripod Swing: P68030:** Min space required 32'8" x 30'

- 2 Bays with 2 Belt Seats, 1 ADA (2-5), & 1 ADA (5-12): **\$3,583 (45' x 30')**
- 3 Bays with 4 Belt Seats, 1 ADA (2-5), & 1 ADA (5-12): **\$4,575 (57' x 30')**

**3 ½" Galvanized 8' Tripod Swing: 68030:** Min space required 32'8" x 30'

- 2 Bays with 2 Belt Seats, 1 ADA (2-5), & 1 ADA (5-12): **\$2,789 (45' x 30')**
- 3 Bays with 4 Belt Seats, 1 ADA (2-5), & 1 ADA (5-12): **\$3,542 (57' x 30')**

## **Wear Mats**

- Medium Duty Mats (36" x 36" x 3/4"): **\$194**
- Heavy Duty Mats (44" x 48" x 1"): **\$286**

## Recreation Services Inc.

**Tri-Pod Swing Frame: Model # 90015301:** Min space required 33' x 32'

- 2 Bays with 2 Belt Seats, 1 ADA (2-5), & 1 ADA (5-12): **\$4,201 (45' x 32')**
- 3 Bays with 4 Belt Seats, 1 ADA (2-5), & 1 ADA (5-12): **\$5,586 (56' x 32')**

## **Wear Mats**

- Beveled Swing Mat (40" x 40" x 1½"): **\$139**

## Interlocking Rubber Play Tiles

**Play Tiles 56' x 32' (Concrete subbase needed): \$34,525**

**Concrete Slab 56' x 32' x 6": \$7,733**

## Concrete Curb Pricing

**Concrete Tangent Block Curb 32' x 32' with Labor: \$3,180**

Home [ / ] / Products [ /products ] / Freestanding [ /products/freestanding ] / 3 1/2" Painted 8' Tripod Swing

## 3 1/2" Painted 8' Tripod Swing (P68030)



### Product Information

Pricing below is for upright posts and swing beam only. Swings are sold separately.

Color Options

Ages

Weight

[View All](#)

2-5

289 lbs

[[https://www.playandpark.com/uploads/color-options/2019\\_PPS\\_Color\\_Option.pdf](https://www.playandpark.com/uploads/color-options/2019_PPS_Color_Option.pdf)]

5-12

Price

**\$1,449**

\*Prices shown in U.S. Dollar and may vary based upon configurations. Pricing does not include freight, sales tax, surfacing or installation costs. Please contact your local Recreation Consultant for more information.

### Downloads



## 3 1/2" Galvanized 8' Tripod Swing (68030)



### Product Information

Pricing below is for upright posts and swing beam only. Swings are sold separately.

Color Options

Ages

Weight

[View All](#)

2-5

284 lbs

[\[https://www.playandpark.com/uploads/color-options/2019\\_PPS\\_Color\\_Option.pdf\]](https://www.playandpark.com/uploads/color-options/2019_PPS_Color_Option.pdf) 5-12

Price

**\$894**

\*Prices shown in U.S. Dollar and may vary based upon configurations. Pricing does not include freight, sales tax, surfacing or installation costs. Please contact your local Recreation Consultant for more information.

### Downloads

## Made for Me Seat 2-5 (67859)



### Product Information

- USA ASTM and CPSC Compliant
- Not CSA Compliant

Color Options

---

[View All](#)

[[https://www.playandpark.com/uploads/color-options/2019\\_PPS\\_Color\\_Option.pdf](https://www.playandpark.com/uploads/color-options/2019_PPS_Color_Option.pdf)]

Age

---

2-5

Weight

---

51 lbs

Price

---

**\$528**

\*Prices shown in U.S. Dollar and may vary based upon configurations. Pricing does not include freight, sales tax, surfacing or installation costs. Please contact your local Recreation Consultant for more information.



## Made for Me Seat 5-12 (67854)



### Product Information

- USA ASTM Compliant and CPSC Compliant
- Not CSA Compliant

#### Color Options

---

[View All](#)

[[https://www.playandpark.com/uploads/color-options/2019\\_PPS\\_Color\\_Option.pdf](https://www.playandpark.com/uploads/color-options/2019_PPS_Color_Option.pdf)]

#### Age

---

5-12

#### Weight

---

55 lbs

#### Price

---

**\$544**

\*Prices shown in U.S. Dollar and may vary based upon configurations. Pricing does not include freight, sales tax, surfacing or installation costs. Please contact your local Recreation Consultant for more information.

### Downloads

## Tri-Pod Swing Frame

### Model: 900153

Our Tri-Pod Swing Frame is one of our most traditional frame options and makes a great addition to any play environment.

More Details

REQUEST A QUOTE

DOWNLOAD PRODUCT FLYER



Full Description

Options

Specifications

Our traditional Tri-Pod Swing Frame is constructed from 2 3/8" galvanized steel tubing with cast aluminum junctions. This swing frame is available in an 8' or 10' height and has three posts on each end for added support. You may have your posts powder coated for an additional charge.

#### Quick Highlights:

- 8' or 10' Height Options
- 3 Bay Options Available with Add-A-Bay Option
- Powder Coated Frame Available for an Upcharge



## Inclusive Swing Seat

### Model: BSIS-25

Bring inclusive swinging to your playground with the inclusive swing seat!

More Details

REQUEST A QUOTE

DOWNLOAD PRODUCT FLYER



### Full Description

### Specifications

All children love the thrill of swinging high on the playground regardless of their age or physical ability. Adding an inclusive swing seat provides children with special needs the confidence to enjoy the swinging experience with the support of the swing seat harness design. The inclusive swing seat, which includes the galvanized chain, is designed for children ages 2-5 and 5-12.

#### Quick Highlights:

- For children ages 2-5 (BSIS-25) or 5-12 (BSIS-512)
- Available in red, yellow, green, blue, or black
- Available with a yellow or tan brace

#### Overall Dimensions:

- BSIS-25
  - Height: 27 15/16"
  - Depth: 10 3/8"
  - Outside Width: 17 3/4"
  - Inside Width: 12 13/16"
- BSIS-512
  - Height: 30 1/8"
  - Depth: 14"
  - Outside Width: 20 5/8"
  - Inside Width: 16"

# City Of Orting

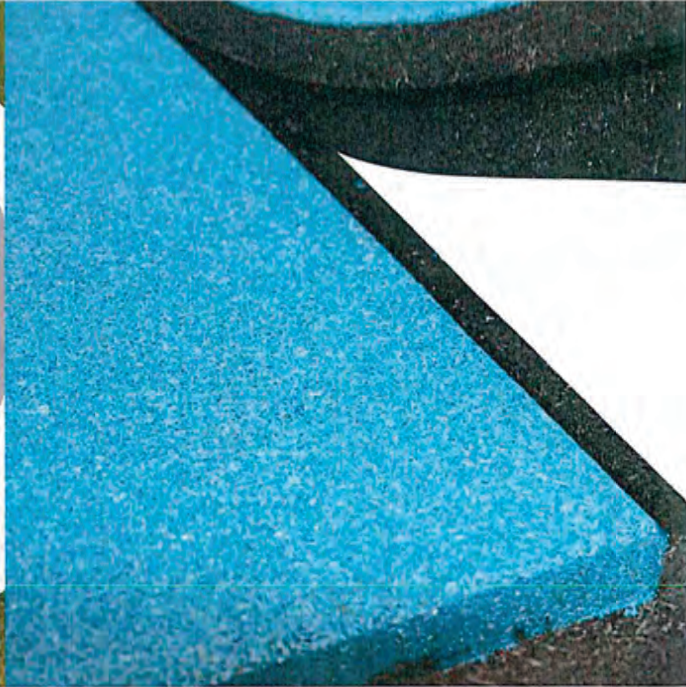
## Budget

September 29, 2021

**Presented by:**  
Clay Nored  
(541) 914-1357  
clay@rsnorthwest.com

Recreation  
Services  
Inc.



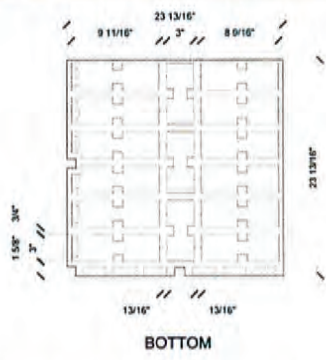


## FEATURES

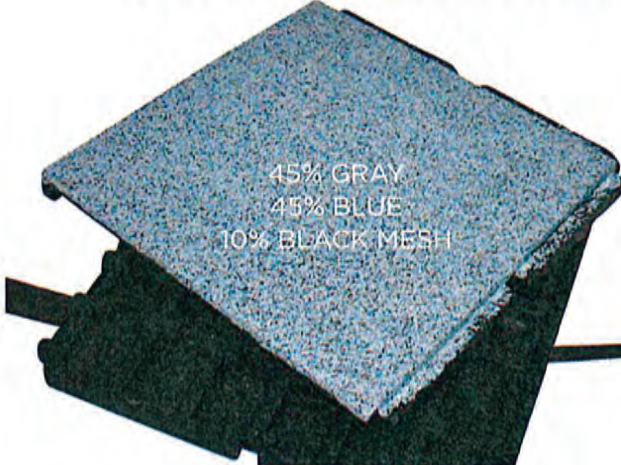
Interlocking Rubber Tiles are designed for playground and recreational use. The tile are equipped with a built-in alignment foot which allows for precise installation. The locking mechanism runs the entire perimeter to provide a more secure installation and will help minimize any curling or tile separation.

## SPECIFICATIONS

- Available in varying thicknesses to meet critical fall heights up to 10 feet
- ADA accessible ramps, tiles, and edges available
- 2.25" - 4' fall - 26 lbs  
2.75" - 6' fall - 29 lbs  
3.25" - 8' fall - 31 lbs  
4.25" - 10' fall - 39 lbs
- Tiles are available in colored standard buffing top and EPDM topped tiles. Refer to the color chart for a complete list of options.



Available Accessories Include:  
 ADA Accessible Ramps  
 Corners  
 U-Locks and Filler Sticks



To verify product certification, visit [www.ipema.org](http://www.ipema.org)

**SuperiorPlaygrounds**

**PLAYCORE**  
 Building Communities through play & recreation™

(541) 914-1357





# Budget

1197 NW Rockwood Ln  
 Bend, OR 97703  
 541/914-1357  
 clay@rsnorthwest.com  
 CCB: 209937  
 L&I: RECRESW843DU

Customer
City of Orting 104 ridge St., S. Orting, WA 98360

Date	Budget No.
09/29/21	31040

Item	Description			Total
23561	Interlocking Rubber Play Tiles - Fall Height Rating: 8ft - Standard Buffings: Blue, Red, Green, Brown, Black, Tan, Gray - Play Area: 56' x 32' - Isotec Joint Glue - Freight INSTALL Tile Installation - Includes travel and per diem  Exclusions: - Concrete sub base - Drainage - Install weather conditions impacts  WA Sales Tax added to invoice			
After 30 days, price may need adjusted, due to material cost escalation.				Total \$34,525.00

**Please Note:**

- Materials and services as per scope noted above, no other materials or services are implied.
- In the event of an inadvertent error or omission, Recreation Services, Inc. shall not be prejudiced in the fulfillment of the agreement, provided that any error or omission shall be corrected as soon as possible.
- Proposal amount may be adjusted to address material cost escalation.
- Excludes additional costs incurred as a result of unforeseen site issues, discovered as the project progresses. Approved change order will be required, prior to commencing with work.



8/27/21

CURB  
PLAYGROUND

Zukowski

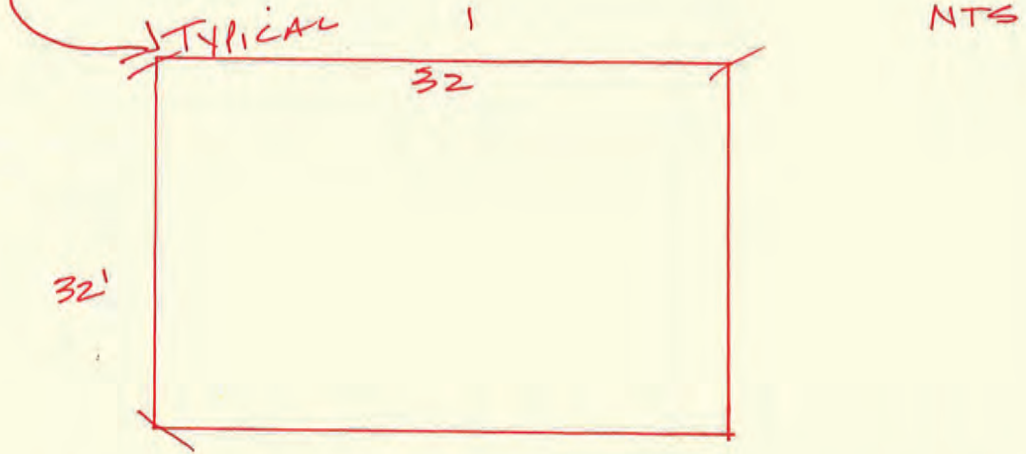
32 x 32 FT

ASSUME:

3" BASE IN GROUND

3" MIN CHIP

ROUND CORNERS OF SQUARE 32' x 32'



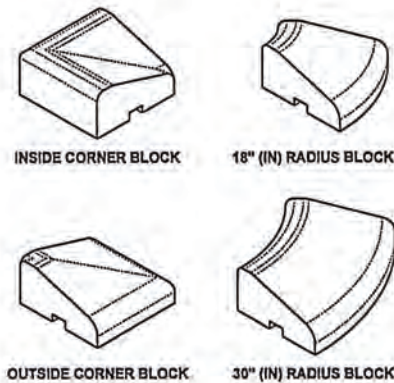
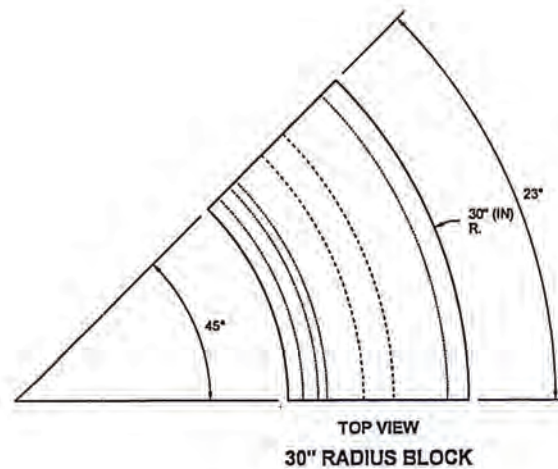
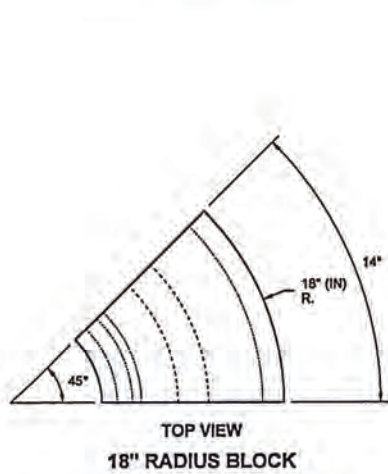
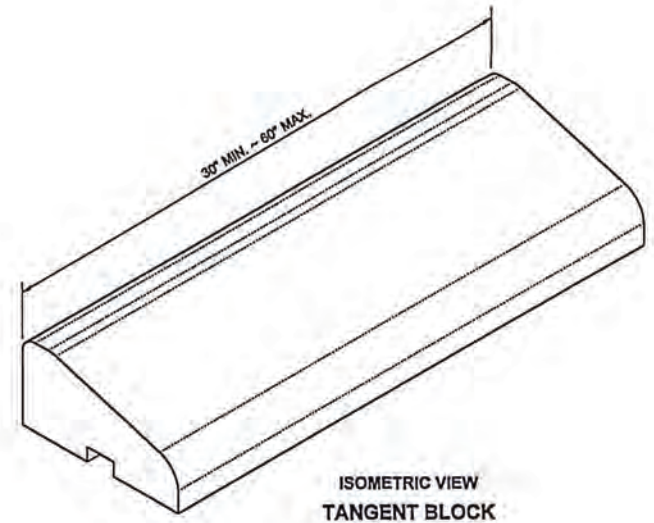
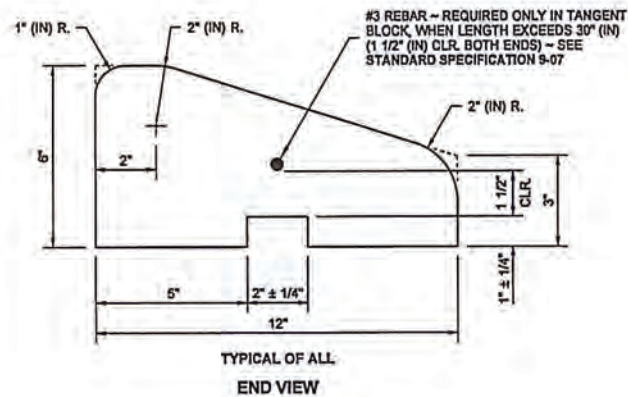
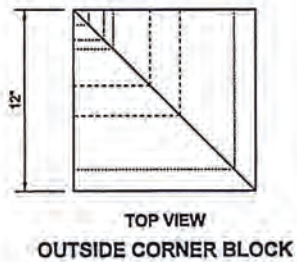
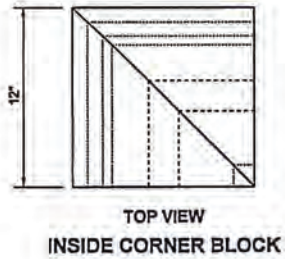
STAKE 1 HR 2 PEOPLE \$60/HR INCL VEHICLE + MATERIALS

XTRA LABOR	2 x \$60/HR	=	\$120.-	
CURB	128 LF x \$20/FT	=	\$2560.-	(INCL EXCAVATE/HAUL)
RESTORE GLASS EST.		=	\$200.-	
DISPOSE EXCAVATE		=	\$300.-	
			<hr/>	
			\$3180.-	

CONTINGENCY INCLUDED

ASSUME: PRECAST

HIGH END LOW AMOUNT OF MATERIAL  
HAND PLAZED - EQUIPMENT EXCAVATION



ISOMETRIC VIEWS



R. B. H.  
Pasco, Pasco  
24557  
Apr 22 2014 9:18 AM

**PRECAST SLOPED  
MOUNTABLE CURB**

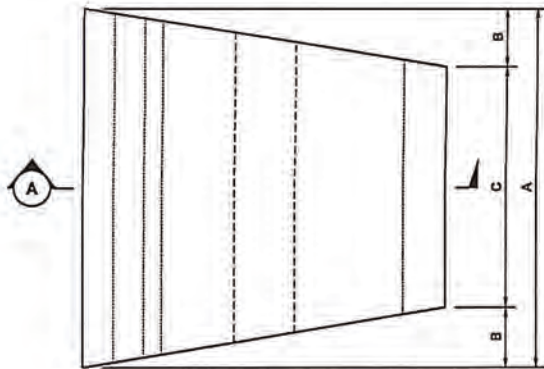
**STANDARD PLAN F-10.62-02**

SHEET 1 OF 2 SHEETS

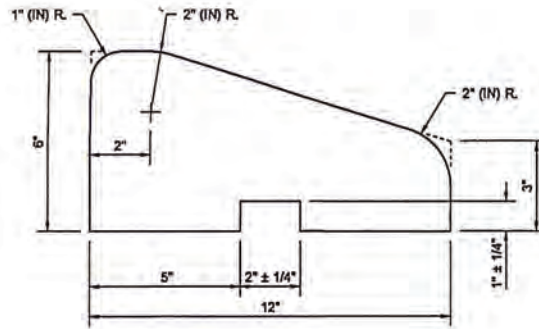
APPROVED FOR PUBLICATION  
R. B. H.  
Apr 22 2014 9:18 AM

STATE DESIGN ENGINEER  
Washington State Department of Transportation

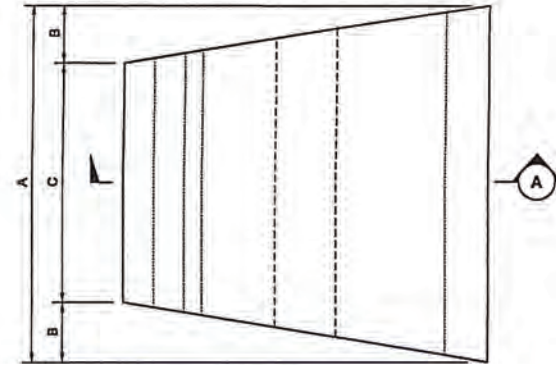




TOP VIEW  
INSIDE RADIUS BLOCK



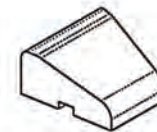
SECTION A



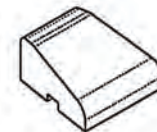
TOP VIEW  
OUTSIDE RADIUS BLOCK

CURB RADIUS TABLE			
CURB RADIUS	DIMENSION A	DIMENSION B	DIMENSION C
3'	12"	2"	8"
4' TO 5'	12"	1 1/2"	9"
6'	12"	1"	10"
7'	12"	7/8"	10 1/4"
8'	18"	1 1/8"	15 3/4"
9'	18"	1"	16"
10'	18"	7/8"	16 1/4"
11' TO 13'	18"	3/4"	16 1/2"
14' TO 15'	18"	5/8"	16 3/4"
16' TO 17'	24"	3/4"	22 1/2"
18' TO 22'	24"	5/8"	22 3/4"
23' TO 29'	24"	1/2"	23"
30' TO 34'	30"	1/2"	29"
35' TO 46'	30"	3/8"	29 1/4"
46' TO 60'	30"	1/4"	29 1/2"
OVER 60'	USE TANGENT BLOCK, SEE SHEET 1		

THIS TABLE LISTS THE CALCULATED DIMENSIONS FOR CASTING BLOCKS SUITABLE FOR CONSTRUCTING VARIOUS CURB RADII. CURVED BLOCKS, OR BLOCKS WITH DIFFERENT DIMENSIONS MAY BE ACCEPTABLE WITH PRIOR APPROVAL OF THE ENGINEER.



INSIDE RADIUS BLOCK



OUTSIDE RADIUS BLOCK

ISOMETRIC VIEWS



*Peter Bakotich*  
Bakotich, Pasco  
Apr 22 2014 9:20 AM

**PRECAST SLOPED MOUNTABLE CURB**

**STANDARD PLAN F-10.62-02**

SHEET 2 OF 2 SHEETS

APPROVED FOR PUBLICATION  
*Peter Bakotich*  
 Bakotich, Pasco  
 Apr 22 2014 9:20 AM  
 STATE DESIGN ENGINEER  
 Washington State Department of Transportation



**CGA Committee Minutes**  
**September 2, 2021**  
**9:00am**

**John Kelly, Chair**  
**John Williams, Vice Chair**  
**Scott Larson, City Administrator**  
**Gretchen Russo, Finance Director**  
**Kim Agfalvi, City Clerk**  
**Greg Reed, Director of Public Works**  
**Emily Adams, City Planner**  
**Sam Colorossi**

\*\*\*\*\*

**1. Call to Order**

Chair Kelly called the meeting to order at 9:01am.

**Present:** Councilmember John Kelly - Chair and Councilmember John Williams - Vice Chair. City Administrator Scott Larson, Finance Director Gretchen Russo, Public Works Director Greg Reed, City Clerk Kim Agfalvi, Sam Colorossi.

**2. Parks Report**

Kim Agfalvi briefed on the last Parks Advisory Board meeting. Emily Adams, City Planner briefed the Parks Advisory Board on the Parks Plan and its survey results. The Parks Advisory Board discussed paving the parking lots in the main City Park, and asked Emily Adams to add that project to the Parks Plan. Also discussed was refreshing the town gazebo in the spring, possible fountain upgrades, and adding a sign that describes how to use the ADA spinner installed in the main park.

**3. Public Comments – no public comments**

**4. Agenda Items**

**A. Parks Level of Service** – Emily briefed on the parks level of service plan. She presented a power point presentation to the committee. Councilmember Kelly asked about specific parks listed in the survey and about neighborhood parks, and asked if they are counted as public parks or community parks. Emily Adams stated she will add HOA owned parks into the 2021 Parks Plan. Councilmember Kelly asked the difference between community parks and neighborhood parks and Emily Adams briefed on the differences. Councilmember Williams stated he would like to not fall behind, and keep adding equipment and upgrades to the parks for the future. City Administrator Larson added staff perspective that the survey had not captured the demand for baseball facilities field use for the last few years. He stated the survey results capture a lot of older people and younger people, and we are seeing an increase for field rentals for baseball and that is critical to address.

**Action:** No action needed.



- B. Orting Historical Society- Clock Tower** – Mr. Colorossi updated on the clock tower project and all communications he had with Electric Time company and the breakdown of the costs for installation of the two clocks from Pease Construction. Councilmember Kelly asked about updates with Don Tracy and installation costs. Mr. Colorossi stated he has found citizens willing to do the installation that are qualified to do so. Councilmember Kelly asked about the use of the boom truck that the City owns. City Administrator Larson stated the City would supply the truck and drivers for the project.  
**Action:** Bring back to next CGA meeting on October 7, 2021.
- C. Cemetery Improvements– Update** – Greg Reed, Director of Public Works briefed on bid submittals for the cemetery improvements for irrigation. He stated the bids were high, and that he asked Parametrix to work with him on design of the projects. He stated most bids submitted included variable drive motors, and that type of motor will not work with the current set up. Greg briefed that the City may need to go to a tank with a compressor system, or use a bladder, but there is maintenance that would need to be done with bladders, and he had concerns over leaking. He stated he will be revisiting the project after a new design is completed.  
**Action:** Bring back to next CGA meeting on October 7, 2021.
- D. Land Acquisition- Pierce County** – City Administrator Larson briefed on a conversation he had with Harold Smelt from Pierce County. Mr. Smelt stated he circulated the City of Orting request for the land behind Hidden Lakes to be transferred from Pierce County to the City of Orting. Mr. Smelt stated that he was told that Pierce County may be setting back the levee several hundred feet due to maintenance issues. Mr. Smelt sent an email to City Administrator Larson stating the County isn't interested in transferring the title of the property to the City, but they would be willing to grant temporary access through an easement.  
**Action:** Drop from next agenda, item will not be moving forward.
- E. Storage of Daffodil Float** Councilmember Kelly briefed on potential modifications to the existing building and stated that the Orting Chamber of Commerce was looking into getting support above door to get the center beam out of the way. The Chamber of Commerce was still working on modifications for the building in regards to snow load, and pitch load.  
**Action:** Bring back to next CGA meeting on October 7, 2021.
- F. Fee Schedule** – Councilmember Kelly briefed on possible changes to the fee schedule. He stated he wants to do away with the golf cart licensing fee. He stated it is out of date, and there is no need to have a fee for it. Public Works Director Greg Reed stated that the price for gravel should be at \$15.00 per yard, and not \$20.00. Councilmember Kelly stated he would like to sit down with City Administrator Larson to go over the fee schedule.  
**Action:** Set up meeting with Councilmember Kelly and City Administrator Larson, and bring item back to next CGA meeting on October 7, 2021.

**G. Interlocal Agreements** – Councilmember Kelly stated he would like to sit down with City Administrator Larson in regard to the Emergency Management agreement to discuss parameters and what is covered.

**Action:** No action needed.

**H. Reader Board RFP** – Kim Agfalvi briefed on the RFP for the reader board, and Councilmember Kelly had questions about the electrical installation being included by installation company and wondered if we could get it cheaper from our small works roster of electricians.

**Action:** Bring back to next CGA meeting on October 7, 2021.

**I. Grant Applications** – Kim Agfalvi briefed about grants and the applications that were submitted. Applications were received from Orting Food Bank, Opportunity Center of Orting, Orting Chamber of Commerce, Orting Senior Center, Recovery Café of Orting, and Orting Farmers Market.

**Action:** Move item forward to October study session.

**J. Sponsorship Resolution-** Kim Agfalvi briefed on resolution 2021-12, a resolution of the City of Orting, Washington, authorizing a City grant of fund to the Orting Historical Society.

**Action:** Move forward to Study Session on September 15, 2021 for council consideration.

**K. Swing Set** – Danielle Charchenko, Accounts Receivable Clerk briefed on bids for swing sets. Councilmember Kelly thanked her for her presentation, and asked that she look into ADA seating for the swing sets.

**Action:** Bring back to next CGA meeting on October 7, 2021 with bids for ADA swing options for the swing sets, and also the concrete curbing needed to surround the new swing sets.

**5. Meeting Minutes of August 5, 2021.**

Meeting minutes were approved.

**6. Action Items/Round table review.**

- Final comments
- Identify Items that are ready to move forward, establish next meeting's agenda.

**7. Adjournment**

Councilmember Kelly adjourned the meeting at 10:45am.

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Kimberly Agfalvi, City Clerk

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Date Approved