

Grant Amount Requested: \$ 5,000.00



Date and Time Stamp
Received
FEB 07 2020
Grants Administration
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2019-2020 PUBLIC SERVICE GRANT APPLICATION

Organization Legal Name: God's Kingdom Station House of Prayer, Inc

Mailing Address: P.O. Box 1411, Ft. Pierce, FL 34954

Physical Address: 720 Delaware Ave, Unit-D, Ft. Pierce, FL 34950

Contact Person: Terrance Beauford Title: Church Administrator

BEST CONTACT Phone Number: (772)204-5015 Email Address: gkshop34954@gmail.com

Website Address: _____

LEGAL STATUS OF ORGANIZATION:

(X) Incorporated, Not-for-Profit - Month and Year of incorporation/creation: April/2009

INCLUDE COPY OF CURRENT 501(c)(3) DOCUMENTATION FROM INTERNAL REVENUE SERVICE.

=====
Person Authorized to Sign on Behalf of this Organization. Signature Must Be Notarized.

Terrance Beauford Signature Today's Date: 02-07-2020

Print Name: Terrance Beauford Title: Church Administrator

Telephone Number: (772)204-5015 Email Address: tbeauford@gmail.com
=====

NOTARY STATE OF FLORIDA, COUNTY OF ST. LUCIE

BEFORE ME, an officer duly authorized by law to administer oaths and take acknowledgements, personally appeared Terrance A Beauford who is personally known to me or produced Indi as identification, and acknowledged he/she executed the forgoing Agreement for the use and purposes mentioned in it and that the instrument is his/her act and deed.

IN WITNESS OF THE FORGOING, I have set my hand and official seal in the State and County aforesaid in this 2/7 day of 2020.

NOTARY PUBLIC *[Signature]*
My Commission Expires: 8/11/2021



Vivienne A Finletter
NOTARY PUBLIC
STATE OF FLORIDA
Comm# GG133001
Expires 8/11/2021

PLEASE SUBMIT AN ORIGINAL APPLICATION AND 7 COPIES
Attach additional pages, as necessary.



2019-2020 PUBLIC SERVICE GRANT APPLICATION

PLEASE PRINT NEATLY OR TYPE YOUR ANSWERS TO THE QUESTIONS IN THIS APPLICATION.

1. Describe your organization and list your Mission Statement.

The Mission of God's Kingdom Station House of Prayer is to proclaim the Gospel of Jesus Christ and the Kingdom of God, to bring restoration, to reveal the access and the dominion of victory in Christ to men, women, boy, girl, husband, wives, families, communities, governments, and all those who are bound by the prince of the air of this world

God's Kingdom Station is a community-oriented ministry with multiple outreach ministries objective such as Men Character Development, Women Character Development, Youth -Resource/Educational/and Extracurricular Involvement Sector, Family Homeless Clothing & Feeding Outreach. And much more. God's Kingdom Station House of Prayer

In 2009 the church doors of Voice of Thunder House of Prayer open for the gospel to go into all the world. The First meeting

place was on Preston Court in the Old NAACP Building. Later in 2009 the ministry moved to 2100 Sunrise Blvd. In 2012 God led Apostle Delores Williams to change the name of the church to God's Kingdom Station House of Prayer. The

church name meaning, "God's Authority is established".

The church then transition to a new meeting place located at 1403 S.

27th St. Ft. Pierce, FL. The name of the church changed but the foundation remained the same, through Apostle Delores Williams mandate from God to establish the church on the word of God and prayer.

While worshipping at 1403 S. 27th St. the Lord allowed Apostle Delores Williams and the Ministry of God's Kingdom Station

House of Prayer to come into covenant fellowship with Apostle Dr. Robert Robinson and the House of Manna Ministry from Cranston, RI. This fellowship is a continuance of enhance ministry and growth for GKSHOP.

The church then transitioned to the Days Inn Hotel near the Ft. Pierce Turnpike while awaiting God's next establishment due to circumstances at the 1403 address.

The Lord has now open a doorway of a worship place at a new location of 720 Delaware Ave Unit-D, Ft. Pierce, FL

2. Describe your organization's history and prior experience, including a description of programs/projects similar to the one you are applying for in this application.

God's Kingdom Station has been in existence since 2009. God's Kingdom Station have been fulfilling outreach to the homeless, drug addicts, prostitutes, gang members, low-income families, as a community outreach on every 4th Saturday of every month at multiple locations. God Kingdom Station continues to grow every year in effort to help meet certain needs of the stated population. God's Kingdom station provide food, clothing, toy give aways, BACK TO SCHOOL GIVEAWAYS, and much more.



3. List all previous grants awarded by the City of Fort Pierce to YOU or any organization(s) you were previously or are currently associated with. If None, write N/A below:

<u>Program Year</u>	<u>Amount</u>	<u>Purpose</u>
2018-19	N/a	
2017-18	N/a	
2016-17	N/a	

Please Note: Organizations/Applicants who have received funding for three consecutive years may be deferred in order to provide funding for newer activities.

4. If you have received funding from the City of Fort Pierce for Public Service projects in the past, please explain **HOW** the program/project described in this grant application is **NEW OR EXPANDED:**

Have never received funding from the City of Ft. Pierce

5. What is your organization's annual budget? Describe how your organization is currently funded.

God's Kingdom Station House of Prayer current Budget is \$82,150.00. God's Kingdom Station House of Prayer is currently funded through tithes & offerings of the membership as well as ongoing programs, fundraisers, and sponsorships.

6. Do the City of Fort Pierce and/other local organizations in Fort Pierce provide services similar to your agency? If you answered Yes, how do your services compliment their offerings? If yes, explain.
How are your services different?

There are very few organizations and churches in the city of Ft. Pierce that supplies needs to the homeless, prostitutes ,and drug addicts within the 34950 zipcode between Orange Ave & Delaware Ave.

7. Project Name (please keep it short): God's Kingdom Station House of Prayer "Homeless" Resource Provision

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Department of Housing and Urban Development (HUD) 2019 Income Limits								
Number of People Living in Household	1	2	3	4	5	6	7	8
Extremely Low Income	13,550	16,910	21,330	25,750	30,170	34,590	39,010	42,550
Very Low Income	22,550	25,800	29,000	32,200	34,800	37,400	39,950	42,550
Low Income	36,050	41,200	46,350	51,500	55,650	59,750	63,900	68,000

8. U.S. Dept. of Housing & Urban Development (HUD) National Objective Activities: (check one)
- Area benefit** activity (the activity benefits/is open to everyone in a particular low-income neighborhood or geography)
 - Limited Clientele** activity (particular individuals or households receive a benefit, and the majority of them qualify as low income)
 - Presumed Benefit** activity (the activity benefits a group of individuals presumed by HUD to qualify for a benefit: battered spouses, homeless, elderly, severely disabled adults, abused children, illiterate adults, persons with HIV/AIDS, or migrant farm workers)

9. Which National Objective(s) shown below does your project/program(s) meet?
- Benefit low to moderate-income persons.
 - Help in the prevention of slums or blight; and/or
 - Meet other community needs having a particular urgency because other financial resources are not available to meet such needs.

10. Beneficiaries from National Objective Activities (#8 Above)
- A. Who are the intended beneficiaries of this program/project? Describe how the project will ensure that the intended beneficiaries are being served and the target population will be reached, including how beneficiaries are identified, and any outreach performed:

God's Kingdom Station will have a log that is designed to capture the age, gender, race, and zipcode of the target population which will allow God's Kingdom station to manage the intended population.

- B. If the project will provide an "Area Benefit", please clearly define the geographic area to be served by the proposed activity. Include a map, if necessary.

The area of population that is intended is the 34950 zip code located between Delaware ave and orange ave of Ft. Pierce where there is a 32% increase of homeless personnel, 18% increase of prostitution, and 19% increase of drug addiction personnel.

- C. If the project will benefit "**Limited Clientele**", list the approximate number and percentage of total persons assisted through this project/program who will be Low to Moderate Income (LMI) and how their income level will be determined.

Homeless 32%

Prostitution 18%

Drug addiction 19%



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D. If a project will provide a "Presumed Benefit", please identify the group(s):

- | | |
|---|---|
| <input type="checkbox"/> Abused Children | <input type="checkbox"/> Illiterate Adults |
| <input type="checkbox"/> Lower Income Senior Citizens | <input type="checkbox"/> Migrant Farm Workers |
| <input type="checkbox"/> Elderly | <input type="checkbox"/> Persons with HIV/AIDS |
| <input checked="" type="checkbox"/> Homeless | <input type="checkbox"/> Severely Disabled Adults |
| <input type="checkbox"/> Lower Income Youth | <input type="checkbox"/> Severely Disabled Children/Youth |
| <input type="checkbox"/> Other _____ | |

11. Describe the existing problems or needs to be addressed by this program/project.

There is a 32% increase of homeless personnel, 18% increase of prostitution, and 19% increase of Drug addiction personnel in the 34950 zip code area near south east Orange ave and Delaware ave .

12. Describe your proposed project's activities and how they will address the problems/needs you listed in #11 above.

God's Kingdom Station House of Prayer will utilize signage to make aware to the homeless, prostitutes, and drug addicted population of the free clothing, free food, and many resources that one would need. GKSHOP will use the tables, chairs, tents, and cooking utensils to host on continuous bases of its efforts of providing the Free Clothing & Food Outreach on every 4th Saturday to meet on going needs to this intended population. This would greatly benefit the city of Ft. Pierce.

13. List the physical addresses where your proposed project activities (listed in #12 above) will take place. Use street addresses within the City limits of Fort Pierce.

720 Delaware Ave, Unit -D, Ft. Pierce, Fl 34950

14. List this project's measurable goals and objectives, as well as the date(s) when each will be met.

Projected measureable goals is to feed 45% - 85% of the Homeless, Prostitutes, and Drug Addicts in the southeast general area of Orange ave/Delaware ave, 34950 zip code area by October 1, 2020.

Projected measureable goals is to provide free clothing to 45% - 85% of the Homeless, Prostitutes, and Drug Addicts in the southeast general area of Orange ave/Delaware ave, 34950 zip code area by October 1, 2020.



Projected measurable goals is to provide many resource information such as food pantry locations, health assistance locations, shelter locations, and etc to 45% - 85% of the Homeless, Prostitutes, and Drug Addicts in the southeast general area of orange ave/Delaware ave, 34950 zip code area by October 1, 2020.

15. How will you track the results of these goals and objectives? (This information will be required with your monthly status reports.)

The results of attendees and recipients of God's Kingdom Station House of Prayer will be tracked through a signature spreadsheet established by the church administrator. The recipients and attendees will also be tracked by a software that will soon be purchase for the church outreach efforts.

16. Briefly describe measurements of outcomes for each of the activities listed in #12. (Examples - number of unduplicated low/moderate income youth served, number of unduplicated senior citizens served, number of unduplicated Veterans served, number of unduplicated adults served, etc.)

The number of unduplicated Adults to be reached is expected at 50 -80 adults

The number of unduplicated Senior Citizens to be reached is expected at 20 -30 senior citizens

The number of unduplicated Youth to be reached is expected at 20 -40 youth

The number of unduplicated Veterans to be reached is expected at 10 -30 veterans

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17. Amount of Grant Funds requested in this application: \$5,000.00
Amount of other funds secured for this program/project: \$5000.00
Amount of other funds earmarked for the program/project: \$6000.00
Total amount needed to complete this program/project: \$16,000.00

18. Describe your contingency plan in the event this grant request is not fully funded, or not funded at all by the City of Fort Pierce:

The contingency plan of God’s Kingdom Station House of Prayer will be to continue its management of the tithe & offerings, pursue other qualified grants, establish more fundraisers/programs for increase of necessary funds to fulfill the mission.

19. If this is a multi-year project, how will you continue to implement this project if City grant funds are not available in future years?

Yes, this is a multi year project, and as stated above the same principles while take effect.

20. Select every qualifier below that best describes your project.

- Improve or enhance education opportunities
- Improve or enhance job training opportunities
- Improve or enhance employment opportunities
- Promote cultural diversity
- Promote outdoor activities and a healthy lifestyle
- Spur interest and participation in neighborhood improvement activities
- Encourage citizen involvement and leverage resources to revitalize low and moderate-income neighborhoods
- Encourage partnerships between City Hall, residents and other community organizations that will result in projects and activities that benefit a community
- Instill and foster community pride
- Promote neighborhood beautification and revitalization
- Promote activities that protect the environment
- Discourage adverse activity such as crime, drug use, and vandalism
- Inspire and support the healthy development of youth



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21. Write an explanation below of how your project will perform each qualifier you selected above:

Food: GKSHOP will host a monthly outreach at the said location to give away food through bag lunches, cooked food, donated food

Clothing: GKSHOP will present intended population with necessary fdonated clothing on a monthly bases

Resources: GKSHOP will have in its facility documents, phone numbers, pamphlets, and material for access to intended population to meet their needs, and obtain necessary assistance.

22. Date project to begin: May 1, 2020
Date project to be completed: October 1, 2020

23. Describe any participant fees that will be required as part of this project/program. Please see "New for Program Year 2019-2020" on Page 4 of the Grant Guidance.

No Participant Fees

24. Applicants must demonstrate that the selection of participants is an objective process and Grant Recipient may not limit participation on the basis of race, gender, nationality, ethnicity, religion, creed, or disability. How will your project comply with this expectation?

Project is to render services to all gender, races, ethnicity, and etc.

25. If this project is sponsored by a church or religious group, participation may not be limited to members of the church. What efforts will you make to ensure that the community at-large is aware of this project and the opportunity for participation?

This Project Is rendered by a church which is a community-oriented ministry. This project is designed to reach the homeless, prostitutes, drug addicts, and all who have a need for services and resources provided through the Feeding & Clothing Resource Outreach of God's Kingdom Station House of Prayer



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26. Provide a COMPLETE, detailed budget for **THIS** project in the budget chart below. List proposed City grant funds and other committed funds and 'in-kind contributions', donated professional services, fees and other resources that will be used to complete the project. List a detailed breakdown of individual items. Use specific descriptions, not broad categories. Remember, committed funds and/or in-kind services **must equal at least 25% of your grant request**.

Be sure to include verification documentation of all funds listed below as 'Committed' or 'In-Kind'. Commitments listed in the budget below that lack documentation **will not be counted as commitments**.

NOTE: Volunteer Hours may be calculated at \$12/hour.

- Please provide at least one (1) quote for each item listed that you will purchase with this grant award in the above Budget under 'Expense/Description'. Each quote should list vendor/company with contact information.

Program/Project Expense/Description	City Grant	Other Committed Funds and/or \$\$ Amount or In-Kind	Source of Other Committed Funds or In-Kind Services (Please provide written verification of <u>Every</u> in-kind service listed here from the "Source")
A Frame Signs \$94.44 (each) x 4 signs	\$377.76		
Panels for A Frame Signs \$24.49 (each) x8	\$195.92		
Resource Outreach Tent 20' x 30' (1-Tent)	\$1,000.00		
Resource Storage Shed 8' x 4' (1-Shed)	\$749.00		
Resource Book Shelve \$129.00 each x 2 shelves	\$258.00		
Resource Brochure Rack \$180.00 each X 2 Racks	\$360.00		
Resource Bulletin Board	\$45.00		
8' tables \$90.00 each x 6 tables	\$540.00		
Folding chairs \$45.00 each x 50 chairs	\$1,125.00		
Cooking Utensils/Fish Fry Set	\$149.00		
Igloo Cooler 120 qt \$60.00 each x 2 coolers	\$120.00		
Volunteer Hours 5 people x 12 hours a month x 12 months x \$12hr			\$8,640.00 Volunteer hours Church Outreach Workers
F.P.U. A. Utilities average \$250 a month x 12 months		\$3000.00	Church Tithe & Offerings from Membership

Lease for Church Rental Space \$750.00 a month x 12 months		\$9,000.00	Church Tithe & Offering from Membership
TOTALS	\$4,919.68	\$11,000.00	
(use more lines/pages as necessary)			

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27. Organization Staff and Volunteers

Please complete the information listed below for each person in your organization who will work on **THIS** project and the percentage of time they will dedicate to the project, including all volunteers.

Name #1	Terrance Beauford
Telephone Number	(772)204-5015
Email Address	tabeuford@gmail.com
Organization Position	Church Administrator
City of Residence	Port St. Lucie
Qualifications	23 years of Community Services & Resource Appropriations
Professional Licenses	Paramedic, Firefighter, CPR, Life Insurance
Role in Project	Church Administrator
% of Time Dedicated to Project	65%
Name #2	Pastor Robert Graham
Telephone Number	(772)940-1282
Email Address	n/a
Organization Position	Outreach Worker
City of Residence	Vero Beach
Qualifications	30 years of Community Services & Resource Appropriations
Professional Licenses	Pastorial License, Carpentry, Stucco
Role in Project	Lead Outreach Worker
% of Time Dedicated to Project	80%
Name #3	Michael Calhoun
Telephone Number	(561)802-8093
Email Address	n/a
Organization Position	Outreach Worker
City of Residence	Ft. Pierce
Qualifications	20 years of Community Services & Resource Appropriations
Professional Licenses	Welding , CDL,
Role in Project	Outreach Worker
% of Time Dedicated to Project	70%
Name #4	Lester Culver
Telephone Number	(772)940-8998
Email Address	n/a
Organization Position	Outreach Worker
City of Residence	Ft. Pierce
Qualifications	28 years of Community Services & Resource Appropriations
Professional Licenses	Painting, Auto Body Work,
Role in Project	Outreach Worker
% of Time Dedicated to Project	55%

Name #5	Darcy McFolley
Telephone Number	(772)267-7809
Email Address	dsmcfolley@gmail.com
Organization Position	Outreach Worker
City of Residence	Port St. Lucie
Qualifications	12 years of Community Services & Resource Appropriations
Professional Licenses	Drug Rehab
Role in Project	Lead Outreach Worker
% of Time Dedicated to Project	65%

28. Please attach **ALL** of the documents listed below to your application. Include a written explanation for EACH document not included:

- Articles of Incorporation and By-Laws
- State and Federal Tax-Exempt determination letter
- Employee Identification Number
- List of Board of Directors with contact information
- Organizational Chart for your Organization
- Board of Director's authorization to apply for this grant
- Last three month's bank statements
- Annual budgets for 2019-2020
- Most recent audit report (if this is not available, provide written explanation)
- Matching funds and In-Kind Services commitment documentation (Budget, #26)
- Three (3) Letters of Support for this project
- Newspaper articles, and Thank-You letters, etc., as available, for your organization's work within the City of Fort Pierce.

END OF 2019-2020 PUBLIC SERVICE GRANT APPLICATION

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003562

Entity Name: GOD'S KINGDOM STATION HOUSE OF PRAYER, INC.

Current Principal Place of Business:

720 DELAWARE AVE, UNIT-D
FT. PIERCE, FL 34950

Current Mailing Address:

P.O. BOX 1411
FORT PIERCE, FL 34954 US

FEI Number: 26-4629171

Name and Address of Current Registered Agent:

BEAUFORD, TERRANCE
4237 SW WHITEBREAD RD
PORT ST LUCIE, FL 34953 US

Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT-CEO/DIRECTOR
Name WILLIAMS, DELORES
Address P.O. BOX 1411
City-State-Zip: FORT PIERCE FL 34954

Title VICE-PRESIDENT/DIRECTOR
Name BEAUFORD, TERRANCE A
Address P.O. BOX 1411
City-State-Zip: FORT PIERCE FL 34954

Title SECRETARY
Name CULVER, DIANNE
Address P.O. BOX 1411
City-State-Zip: FT. PIERCE FL 34954

Title TREASURER
Name HARRIS-BEAUFORD, KIMBERLY C.
Address P.O. BOX 1411
City-State-Zip: FORT PIERCE FL 34954

Title BOARD MEMBER
Name CULVER, LESTER SR
Address P.O. BOX 1411
City-State-Zip: FORT PIERCE FL 34954

Title BOARD MEMBER
Name GRAHAM, ROBERT PASTOR
Address P.O. BOX 1411
City-State-Zip: FT. PIERCE FL 34954

Title BOARD MEMBER
Name GRAHAM, DEBRA EVANG.
Address P.O. BOX 1411
City-State-Zip: FT. PIERCE FL 34954

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TERRANCE ALEXANDER BEAUFORD

PASTOR, CHURCH
ADMINISTRATOR

02/07/2020

Electronic Signature of Signing Officer/Director Detail

Date