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JAN 28 2026

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION FOR BEHAVIORAL HEALTH

129 PLEASANT STREET, CONCORD, NH 03301
603-271-9544 1-800-852-3345 Ext. 9544
Fax: 603-271-4332 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

Lori A. Weaver
Commissioner

Katja S. Fox
Director

December 31, 2025

Her Excellency, Governor Kelly A. Ayotte
and the Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division for Behavioral Health, to enter into a **Sole Source** amendment to an existing contract with Thrive Survivor Support Center (VC#155198), Concord, NH to add funding and modify scope for the continued provision of Continuum of Care housing services, by exercising a contract renewal option, by increasing the price limitation by $14,625 from $712,830 to $727,455 and extending the completion date from September 30, 2029 to November 30, 2029, effective upon Governor and Council approval. 100% Federal Funds.

The original contract was approved by Governor and Council on September 25, 2024, item #27.

Funds are available in the following accounts for State Fiscal Years 2026 and 2027, and are anticipated to be available in State Fiscal Years 2028 through 2030, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See attached fiscal details.

EXPLANATION

This request is to add funding and modify scope for the continued provision of Continuum of Care housing services as further described below. This request is **Sole Source** because MOP 150 requires all amendments to agreements originally approved as sole source to be identified as sole source. Federal regulations require all procurement efforts for these services to be directed by the U.S. Department of Housing and Urban Development (HUD) through an annual Continuum of Care competitive application process. The Department must contract with the vendor selected as a result of this HUD process. HUD awarded New Hampshire additional funding for the Rapid Re-Housing Domestic Violence project on June 17, 2025.

The purpose of this request is to add funding as awarded by HUD for the Rapid Re-Housing Domestic Violence project to support the Contractor's continued delivery of Continuum of Care housing services. The additional funding is the result of the Consolidated Appropriations Act, 2024, which authorizes HUD to make reasonable cost of living adjustments to renewal amounts to help afford increasing costs of operations due to inflation. This amendment is also to make minor scope modifications to reflect updated HUD language.

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Approximately four (4) households will continue to be served at any given time annually through the Permanent Housing project.

The Contractor will continue to deliver Rapid Re-Housing Domestic Violence services that offer rental assistance to individuals, youth and, or families who are experiencing homelessness. The Contractor will continue to provide personalized supportive services and collaborative case management to support the ability of participants, who must be fleeing, or attempting to flee domestic violence while experiencing homelessness, or while at imminent risk of homelessness, to transition to sustained permanent housing. Overall, the Contractor works to maximize each participant's ability to live more independently by providing connections to community services.

The Department will continue to monitor services by reviewing annual reports provided by the Contractor and conducting annual reviews related to compliance with administrative rules and contractual requirements.

As referenced in Exhibit A, Revisions to Standard Agreement Provisions, of the original agreement, the parties have the option to extend the agreement for up to five (5) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and Governor and Council approval. The Department is exercising its option to renew services for two (2) months of the five (5) years available to align with the end date of the HUD award.

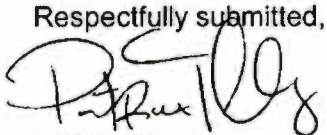
Should the Governor and Council not authorize this request, the Contractor will not receive additional funding, as awarded by HUD, to support cost of living adjustments, and the contract scope will not reflect current HUD language, which may result in fewer permanent housing options and supportive services available, leaving vulnerable individuals and families experiencing homelessness in unsafe situations without needed support. Additionally, the Department will be out of compliance with federal regulations, which could result in a loss of federal funding for these and other types of permanent housing and supportive service programs.

The Department has determined that the Contractor is in good standing with the Secretary of State's Office, has secured the required levels of insurance, and has provided evidence of authority to execute and be bound by the contract. The Contractor is a non-profit organization, and the Department has also confirmed the Contractor is registered and in good standing with the Department of Justice's Charitable Division.

Area served: Statewide.

Source of Federal Funds: Assistance Listing Number #14.267, FAIN NH0165D1T002401

Respectfully submitted,



Lori A. Weaver
Commissioner

DEPARTMENT OF HEALTH AND HUMAN SERVICES
FISCAL DETAILS SHEET

05-95-42-423010-79270000 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: HUMAN SERVICES, HOMELESS & HOUSING, HOUSING – SHELTER PROGRAM

100% Federal Funds

Thrive Survivor Support Center — Vendor #155198

NH0165 100% FF

State Fiscal Year	Class / Account	Class Title	Job Number	Current Amount	Increase (Decrease)	Revised Amount
2024	074-500589	Grants for Pub Asst and Relief	TBD	$0	$0	$0
2025	074-500589	Grants for Pub Asst and Relief	42307050	$106,925	$0	$106,925
		Sub Total		$106,925	$0	$106,925
			Subtotal 7927	**$106,925**	**$0**	**$106,925**

05-95-92-921510-31700000 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: BEHAVIORAL HEALTH DIV; HOMELESS & HOUSING,HOUSING - SHELTER PROGRAM

100% Federal Funds

NH0165 100% FF

State Fiscal Year	Class / Account	Class Title	Job Number	Current Amount	Increase (Decrease)	Revised Amount
2026	072-509073	Grants Federal	92157050	$142,566	$8,531	$151,097
2027	072-509073	Grants Federal	92157050	$142,566	$6,094	$148,660
2028	072-509073	Grants Federal	92157050	$142,566	$0	$142,566
2029	072-509073	Grants Federal	92157050	$142,566	$0	$142,566
2030	072-509073	Grants Federal	92157050	$35,641	$0	$35,641
		Sub Total		$605,905	$14,625	$620,530
			Subtotal 3170	**$605,905**	**$14,625**	**$620,530**
			Overall Total	**$712,830**	**$14,625**	**$727,455**

State of New Hampshire
Department of Health and Human Services
Amendment #1

This Amendment to the Continuum of Care - TSSC contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Thrive Survivor Support Center ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on September 25, 2024 (Item #27), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37 General Provisions, Block 1.7., Completion Date, to read:

   November 30, 2029

2. Form P-37, General Provisions, Block 1.8., Price Limitation, to read:

   $727,455

3. Modify Exhibit A - Revisions to Standard Provisions, by adding Subsection 1.4., to read:

   1.4. Paragraph 6, Compliance by Contractor with Laws and Regulations/Equal Employment Opportunity, Subparagraph 6.1., is amended as follows:

   6.1. In connection with the performance of the Services, the Contractor shall comply with all applicable statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, RSA 151:21 Patients' Bill of Rights, civil rights and equal employment opportunity laws, and the Governor's order on Respect and Civility in the Workplace, Executive Order 2020-01. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

4. Modify Exhibit B, Scope of Services, Section 1.2.7.1. lead-in paragraph only, to read:

   1.2.7.1. Utilization of a service provision model that ensures:

5. Modify Exhibit B, Scope of Services, Section 1.2.18., to read:

   1.2.18. The Contractor must utilize the New Hampshire Homeless Management Information System (NH HMIS) as the primary reporting tool for outcomes and activities of shelter and housing programs funded through this contract. The Contractor must:

   1.2.18.1. Ensure all programs are licensed to provide client level data into the NH HMIS or into a comparable database, per 24 CFR 578, eCFR :: 24 CFR Part 578 -- Continuum of Care Program; and

   1.2.18.2. Follow NH HMIS policy, including specific information required for data entry, accuracy of data entered, and time required for data entry. Refer to Exhibit K for Information Security requirements and Exhibit I for Privacy requirements.

6. Modify Exhibit B, Scope of Services, Section 1.3.3., to read:

   1.3.3. Upon request by the Department, the Contractor must participate with the Department in a

review, onsite or remotely at the Department's discretion, of the Contractor's participant files and at least one month of financial data to ensure compliance with the contractual objectives.

7. Modify Exhibit B – Amendment #1, Scope of Services, Section 1.4.2., to read:

   1.4.2. The Contractor must ensure the APR is submitted to electronically as directed by the Department.

8. Modify Exhibit C, Payment Terms; Section 1., to read:

   1. This Agreement is funded by:

      1.1. 100% Federal funds, Title XIV Housing Programs under the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act), Subtitle A-Housing Assistance (Public Law 102-550), by the US Dept of Housing and Urban Development, Continuum of Care Program, Assistance Listing Number 14.267, as awarded on:

         1.1.1. September 24, 2024, FAIN NH0165D1T002300

         1.1.2. June 17, 2025, FAIN NH0165D1T002401

9. Modify Exhibit C, Payment Terms, Section 3., to read:

   3. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with the approved line items, as specified in Exhibits C-1, Budget through Exhibit C-5, Budget, Amendment #1.

10. Modify Exhibit C, Payment Terms, Section 4., to read:

    4. The Contractor must submit an invoice with supporting documentation to the Department no later than the fifteenth (15th) working day of the month following the month in which the services were provided. The Contractor must ensure each invoice:

       4.1. Includes the Contractor's Vendor Number issued upon registering with New Hampshire Department of Administrative Services.

       4.2. Is submitted in a form that is provided by or otherwise acceptable to the Department.

       4.3. Identifies and requests payment for allowable costs incurred in the previous month.

       4.4. Includes supporting documentation of allowable costs with each invoice that may include, but are not limited to, time sheets, payroll records, receipts for purchases, and proof of expenditures, as applicable.

       4.5. Is completed, dated and returned to the Department with the supporting documentation for allowable expenses to initiate payment.

       4.6. Is assigned an electronic signature, includes supporting documentation, and is emailed to housingsupportsinvoices@dhhs.nh.gov or mailed to:

       NH DHHS
       Bureau of Homeless Services
       129 Pleasant Street
       Concord, NH 03301

11. Modify Exhibit C-1, Budget Sheet, by replacing it in its entirety with Exhibit C-1, Budget Sheet – Amendment #1, which is attached hereto and incorporated by reference herein.

12. Modify Exhibit C-2, Budget Sheet, by replacing it in its entirety with Exhibit C-2, Budget Sheet – Amendment #1, which is attached hereto and incorporated by reference herein.

13. Modify Exhibit C-3, Budget Sheet, by replacing it in its entirety with Exhibit C-3, Budget Sheet –

Amendment #1, which is attached hereto and incorporated by reference herein.

14. Modify Exhibit C-4, Budget Sheet, by replacing it in its entirety with Exhibit C-4, Budget Sheet – Amendment #1, which is attached hereto and incorporated by reference herein.
15. Modify Exhibit C-5, Budget Sheet, by replacing it in its entirety with Exhibit C-5, Budget Sheet – Amendment #1, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment remain in full force and effect. This Amendment shall be effective upon Governor and Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

1/8/2026
Date

DocuSigned by:
Katja S. Fox
ED9D069B04C65442...
Name: Katja S. Fox
Title: Director

Thrive Survivor Support Center

1/8/2026
Date

DocuSigned by:
Jessica Vaughn-Martin
FFD5B6BC5C5D437...
Name: Jessica Vaughn-Martin
Title: Executive Director

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

1/8/2026
Date

DocuSigned by:
Robyn Guarino
74873464494146D...
Name: Robyn Guarino
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

Exhibit C-1, Budget, Amendment #1

TSSC - RRH DV
CoC Funds -
NH0165D1T002300

SFY2025 - 10/1/24-6/30/25

	TOTAL PROGRAM COST			CONTRACTOR SHARE			BHS SHARE		
Activity Name	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**
Rental Assistance	$ 54,648	$ -	$ -	$ -	$ -	$ -	$ 54,648	$ -	$ -
Supportive Services	$ 47,513	$ -	$ -	$ -	$ -	$ -	$ 47,513	$ -	$ -
Administration	$ 4,764	$ -	$ -	$ -	$ -	$ -	$ 4,764	$ -	$ -
25% Required Match	$ 48,359	$ -	$ -	$ 48,359		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 155,284**	**$ -**	$ -	**$ 48,359**	$ -	$ -	$ 106,925	$ -	$ -

SFY2026 - 7/1/25-11/30/25

	TOTAL PROGRAM COST			CONTRACTOR SHARE			BHS SHARE		
Activity Name	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**
Rental Assistance	$ 18,216	$ -	$ -	$ -	$ -	$ -	$ 18,216	$ -	$ -
Supportive Services	$ 15,838	$ -	$ -	$ -	$ -	$ -	$ 15,838	$ -	$ -
Administration	$ 1,587	$ -	$ -	$ -	$ -	$ -	$ 1,587	$ -	$ -
25% Required Match	$ 8,910	$ -	$ -	$ 8,910		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 44,551**	**$ -**	$ -	**$ 8,910**	$ -	$ -	$ 35,641	$ -	$ -

TOTAL - 10/1/24-11/30/25

	TOTAL PROGRAM COST			CONTRACTOR SHARE			BHS SHARE		
Activity Name	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**
Rental Assistance	$ 72,864	$ -	$ -	$ -	$ -	$ -	$ 72,864	$ -	$ -
Supportive Services	$ 63,351	$ -	$ -	$ -	$ -	$ -	$ 63,351	$ -	$ -
Administration	$ 6,351	$ -	$ -	$ -	$ -	$ -	$ 6,351	$ -	$ -
25% Required Match	$ 57,269	$ -	$ -	$ 57,269		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 199,835**	**$ -**	$ -	**$ 57,269**	$ -	$ -	$ 142,566	$ -	$ -

Total W/O Match **$ 142,566**

Contractor Initials: Initial
Date: 1/8/2026

Exhibit C-2, Budget, Amendment #1

TSSC - RRH DV
CoC Funds -
NH0165D1T002401

SFY2026 - 12/1/25-6/30/26

	TOTAL PROGRAM COST			CONTRACTOR SHARE			BHS SHARE		
Activity Name	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**
Rental Assistance	$ 60,818	$ -	$ -	$ -	$ -	$ -	$ 60,818	$ -	$ -
Supportive Services	$ 49,874	$ -	$ -	$ -	$ -	$ -	$ 49,874	$ -	$ -
Administration	$ 4,764	$ -	$ -	$ -	$ -	$ -	$ 4,764	$ -	$ -
25% Required Match	$ 28,864	$ -	$ -	$ 28,864		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 144,320**	**$ -**	$ -	**$ 28,864**	$ -	$ -	$ 115,456	$ -	$ -

SFY2027 - 7/1/26-11/30/26

	TOTAL PROGRAM COST			CONTRACTOR SHARE			BHS SHARE		
Activity Name	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**
Rental Assistance	$ 22,871	$ -	$ -	$ -	$ -	$ -	$ 22,871	$ -	$ -
Supportive Services	$ 17,277	$ -	$ -	$ -	$ -	$ -	$ 17,277	$ -	$ -
Administration	$ 1,587	$ -	$ -	$ -	$ -	$ -	$ 1,587	$ -	$ -
25% Required Match	$ 10,434	$ -	$ -	$ 10,434		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 52,169**	**$ -**	$ -	**$ 10,434**	$ -	$ -	$ 41,735	$ -	$ -

TOTAL - 12/1/25-11/30/26

	TOTAL PROGRAM COST			CONTRACTOR SHARE			BHS SHARE		
Activity Name	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**
Rental Assistance	$ 83,689	$ -	$ -	$ -	$ -	$ -	$ 83,689	$ -	$ -
Supportive Services	$ 67,151	$ -	$ -	$ -	$ -	$ -	$ 67,151	$ -	$ -
Administration	$ 6,351	$ -	$ -	$ -	$ -	$ -	$ 6,351	$ -	$ -
25% Required Match	$ 39,298	$ -	$ -	$ 39,298		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 196,489**	**$ -**	$ -	**$ 39,298**	$ -	$ -	$ 157,191	$ -	$ -

Total W/O Match **$ 157,191**

Contractor Initials: Initial GJM
Date: 1/8/2026

Exhibit C-3, Budget, Amendment #1

TSSC - RRH DV
CoC Funds -
NH0165D1T00(TBD)

SFY2027 - 12/1/26-6/30/27

Activity Name	TOTAL PROGRAM COST BUDGET	TOTAL PROGRAM COST YTD	TOTAL PROGRAM COST MONTHLY	CONTRACTOR SHARE BUDGET	CONTRACTOR SHARE YTD	CONTRACTOR SHARE MONTHLY	BHS SHARE BUDGET	BHS SHARE YTD	BHS SHARE MONTHLY
Rental Assistance	$ 54,648	$ -	$ -	$ -	$ -	$ -	$ 54,648	$ -	$ -
Supportive Services	$ 47,513	$ -	$ -	$ -	$ -	$ -	$ 47,513	$ -	$ -
Administration	$ 4,764	$ -	$ -	$ -	$ -	$ -	$ 4,764	$ -	$ -
25% Required Match	$ 48,359	$ -	$ -	$ 48,359		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 155,284**	**$ -**	$ -	**$ 48,359**	$ -	$ -	$ 106,925	$ -	$ -

SFY2028 - 7/1/27-11/30/27

Activity Name	TOTAL PROGRAM COST BUDGET	TOTAL PROGRAM COST YTD	TOTAL PROGRAM COST MONTHLY	CONTRACTOR SHARE BUDGET	CONTRACTOR SHARE YTD	CONTRACTOR SHARE MONTHLY	BHS SHARE BUDGET	BHS SHARE YTD	BHS SHARE MONTHLY
Rental Assistance	$ 18,216	$ -	$ -	$ -	$ -	$ -	$ 18,216	$ -	$ -
Supportive Services	$ 15,838	$ -	$ -	$ -	$ -	$ -	$ 15,838	$ -	$ -
Administration	$ 1,587	$ -	$ -	$ -	$ -	$ -	$ 1,587	$ -	$ -
25% Required Match	$ 8,910	$ -	$ -	$ 8,910		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 44,551**	**$ -**	$ -	**$ 8,910**	$ -	$ -	$ 35,641	$ -	$ -

TOTAL - 12/1/26-11/30/27

Activity Name	TOTAL PROGRAM COST BUDGET	TOTAL PROGRAM COST YTD	TOTAL PROGRAM COST MONTHLY	CONTRACTOR SHARE BUDGET	CONTRACTOR SHARE YTD	CONTRACTOR SHARE MONTHLY	BHS SHARE BUDGET	BHS SHARE YTD	BHS SHARE MONTHLY
Rental Assistance	$ 72,864	$ -	$ -	$ -	$ -	$ -	$ 72,864	$ -	$ -
Supportive Services	$ 63,351	$ -	$ -	$ -	$ -	$ -	$ 63,351	$ -	$ -
Administration	$ 6,351	$ -	$ -	$ -	$ -	$ -	$ 6,351	$ -	$ -
25% Required Match	$ 57,269	$ -	$ -	$ 57,269		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 199,835**	**$ -**	$ -	**$ 57,269**	$ -	$ -	$ 142,566	$ -	$ -

Total W/O Match **$ 142,566**

Contractor Initials: Initial
Date: 1/8/2026

Exhibit C-4, Budget, Amendment #1

TSSC - RRH DV
CoC Funds -
NH0165D1T00(TBD)

SFY2028 - 12/1/27-6/30/28

	TOTAL PROGRAM COST			CONTRACTOR SHARE			BHS SHARE		
Activity Name	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**
Rental Assistance	$ 54,648	$ -	$ -	$ -	$ -	$ -	$ 54,648	$ -	$ -
Supportive Services	$ 47,513	$ -	$ -	$ -	$ -	$ -	$ 47,513	$ -	$ -
Administration	$ 4,764	$ -	$ -	$ -	$ -	$ -	$ 4,764	$ -	$ -
25% Required Match	$ 48,359	$ -	$ -	$ 48,359		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 155,284**	**$ -**	$ -	**$ 48,359**	$ -	$ -	$ 106,925	$ -	$ -

SFY2029 - 7/1/28-11/30/28

	TOTAL PROGRAM COST			CONTRACTOR SHARE			BHS SHARE		
Activity Name	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**
Rental Assistance	$ 18,216	$ -	$ -	$ -	$ -	$ -	$ 18,216	$ -	$ -
Supportive Services	$ 15,838	$ -	$ -	$ -	$ -	$ -	$ 15,838	$ -	$ -
Administration	$ 1,587	$ -	$ -	$ -	$ -	$ -	$ 1,587	$ -	$ -
25% Required Match	$ 8,910	$ -	$ -	$ 8,910		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 44,551**	**$ -**	$ -	**$ 8,910**	$ -	$ -	$ 35,641	$ -	$ -

TOTAL - 12/1/27-11/30/28

	TOTAL PROGRAM COST			CONTRACTOR SHARE			BHS SHARE		
Activity Name	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**
Rental Assistance	$ 72,864	$ -	$ -	$ -	$ -	$ -	$ 72,864	$ -	$ -
Supportive Services	$ 63,351	$ -	$ -	$ -	$ -	$ -	$ 63,351	$ -	$ -
Administration	$ 6,351	$ -	$ -	$ -	$ -	$ -	$ 6,351	$ -	$ -
25% Required Match	$ 57,269	$ -	$ -	$ 57,269		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 199,835**	**$ -**	$ -	**$ 57,269**	$ -	$ -	$ 142,566	$ -	$ -

Total W/O Match **$ 142,566**

Initial

Contractor Initials: _____
Date: 1/8/2026

Exhibit C-5, Budget, Amendment #1

TSSC - RRH DV
CoC Funds -
NH0165D1T00(TBD)

SFY2029 - 12/1/28-6/30/29

	TOTAL PROGRAM COST			CONTRACTOR SHARE			BHS SHARE		
Activity Name	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**
Rental Assistance	$ 54,648	$ -	$ -	$ -	$ -	$ -	$ 54,648	$ -	$ -
Supportive Services	$ 47,513	$ -	$ -	$ -	$ -	$ -	$ 47,513	$ -	$ -
Administration	$ 4,764	$ -	$ -	$ -	$ -	$ -	$ 4,764	$ -	$ -
25% Required Match	$ 48,359	$ -	$ -	$ 48,359		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 155,284**	**$ -**	$ -	**$ 48,359**	$ -	$ -	$ 106,925	$ -	$ -

SFY2030 - 7/1/29-11/30/29

	TOTAL PROGRAM COST			CONTRACTOR SHARE			BHS SHARE		
Activity Name	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**
Rental Assistance	$ 18,216	$ -	$ -	$ -	$ -	$ -	$ 18,216	$ -	$ -
Supportive Services	$ 15,838	$ -	$ -	$ -	$ -	$ -	$ 15,838	$ -	$ -
Administration	$ 1,587	$ -	$ -	$ -	$ -	$ -	$ 1,587	$ -	$ -
25% Required Match	$ 8,910	$ -	$ -	$ 8,910		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 44,551**	**$ -**	$ -	**$ 8,910**	$ -	$ -	$ 35,641	$ -	$ -

TOTAL - 12/1/28-11/30/29

	TOTAL PROGRAM COST			CONTRACTOR SHARE			BHS SHARE		
Activity Name	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**	**BUDGET**	**YTD**	**MONTHLY**
Rental Assistance	$ 72,864	$ -	$ -	$ -	$ -	$ -	$ 72,864	$ -	$ -
Supportive Services	$ 63,351	$ -	$ -	$ -	$ -	$ -	$ 63,351	$ -	$ -
Administration	$ 6,351	$ -	$ -	$ -	$ -	$ -	$ 6,351	$ -	$ -
25% Required Match	$ 57,269	$ -	$ -	$ 57,269		$ -	$ -	$ -	$ -
TOTAL HUD FUNDS/BALANCE	**$ 199,835**	**$ -**	$ -	**$ 57,269**	$ -	$ -	$ 142,566	$ -	$ -

Total W/O Match **$ 142,566**

Contractor Initials: Initial GJM
Date: 1/8/2026

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State of New Hampshire
Department of State

CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that THRIVE SURVIVOR SUPPORT CENTER is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on April 17, 1978. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: **62811**
Certificate Number: **0007626200**

IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 8th day of January A.D. 2026.

David M. Scanlan
Secretary of State

Docusign Envelope ID: C6149EF1-5667-4EAA-8203-D2BD7401F370

CERTIFICATE OF AUTHORITY

I, Elyse McKay, hereby certify that:
(Name of the elected Officer of the Corporation/LLC; cannot be contract signatory)

1. I am a duly elected Clerk/Secretary/Officer of Thrive Survivor Support Center.
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on January 7, 2026, at which a quorum of the Directors/shareholders were present and voting.
(Date)
by email
VOTED: That Jessica Vaughn-Martin, Executive Director (may list more than one person)
(Name and Title of Contract Signatory)

is duly authorized on behalf of Thrive Survivor Support Center to enter into contracts or agreements with the State
(Name of Corporation/ LLC)

of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority was **valid thirty (30) days prior to and remains valid for thirty (30)** days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: 1/7/2026

Signature of Elected Officer

Name: Elyse McKay

Title: Board Chair (Interim)

Docusign Envelope ID: C6149EF1-5667-4EAA-8203-D2BD7401F370

MERRCOU-01 MFOYE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/7/2026

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 Davis & Towle Morrill & Everett, Inc. 115 Airport Road Concord, NH 03301	CONTACT NAME: PHONE (A/C, No, Ext): (603) 225-6611 FAX (A/C, No): (603) 225-7935 E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A : Philadelphia Insurance Company	23850
INSURED Thrive Survivor Support Center P.O. Box 1344 Concord, NH 03302	INSURER B : Markel Insurance Co.	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

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	X COMMERCIAL GENERAL LIABILITY			PHPK2649176	3/13/2025	3/13/2026	EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
	POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ 2,000,000
	OTHER:							$
A	AUTOMOBILE LIABILITY			PHPK2649176	3/13/2025	3/13/2026	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY / X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$
	DED RETENTION $							$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			MWC0239105-01	7/1/2025	7/1/2026	PER STATUTE / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N: Y	N/A					E.L. EACH ACCIDENT	$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 500,000
							E.L. DISEASE - POLICY LIMIT	$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Workers Comp for state of NH: Volunteer Board Members are excluded from coverage

CERTIFICATE HOLDER

State of NH - Department of Health & Human Services
129 Pleasant Street
Concord, NH 03301-3857

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
Michelle F Foye

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NONPROFIT COVER SHEET

A. Entity Name: Thrive Survivor Support Center

B. Entity's Contact Information:

For Records Requests (e.g., resumes of key personnel; audited financial statements):

Name / Phone / Email: Mandy Hopkins, 603-225-7376 x123, mandy@thrivenh.org

Person responsible for Accuracy and Completeness of information provided:
Name: Jessica Vaughn-Martin Title: Executive Director

Signature: Jessica L Vaughn-Martin

C. List Board of Directors and Affiliations

Name (Identify any additional role(s) in Parentheses) E.g., John Doe (President)	Affiliations
Elyse McKay (Interim Chair)	Community Member – Experience with victim services as a paralegal and advocate. Recently employed by Massachusetts National Guard, 603 Legal and YWCA NH.
Rebecca Elliott (Vice-Chair)	Bangor Savings Bank - AVP, Consumer Relationship Manager
Laurie Bienefeld (Treasurer)	NE Delta Dental – VP, Finance
Emily Marsh (Secretary)	NHTI - College Director, Communications & Marketing
Tracey Goyette Cote, Esq.	Shaheen & Gordon, P.A - Partner
Andrew LaFlame	Three Rivers School – Librarian/Media Specialist
Neiko Lavery	NE Delta Dental – Associate General Counsel
Johane Telgener, M.Ed.	NH Hunger Solutions - Regional Community Engagement Coordinator
Anne Tyrol, MHA, MSN, RN, CENP	Dartmouth Health, Cheshire Medical Center - Chief Nursing Officer
Ronni Wise	Sulloway & Hollis, PLLC - Partner

D. List Key Personnel (Resumes must be available upon request to the person(s) listed in section B or may be attached)**:**

Name	Role	Annual Salary	Amount Paid From This Contract
Jessica Vaughn-Martin	Executive Director	$93,666.80	$0

DISCLOSURE OF LEGAL ACTIVITIES INVOLVING THE STATE OF NEW HAMPSHIRE OR ANOTHER GOVERNMENT ENTITY

E. Check one of the following:

[X] The entity is **not currently or has not been** party to any legal proceeding involving the State of New Hampshire (or any agency or subdivision thereof) or any other state/federal government entity before any adjudicative body in any jurisdiction **OR**

[ ] The entity is or has been party to one or more legal proceedings as set forth above. Identify the jurisdiction, court or other adjudicative body, case number, and briefly describe the nature of the proceeding (Attached extra sheet if necessary).

_____

_____

_____

CHARITABLE TRUSTS UNIT COMPLIANCE CERTIFICATION

F. Check one of the following:

[X] is registered and in good standing with the New Hampshire Department of Justice Charitable Trusts Unit (** see note below) **or** has submitted a complete application for registration to the Charitable Trusts Unit and is awaiting a registration determination **OR**

[ ] is not required to register with the Charitable Trusts Unit because it is neither tax-exempt under section 501(c)(3) of the Internal Revenue Code nor engages in charitable solicitations in the State of New Hampshire **OR**

[ ] is exempt from registration with the Charitable Trusts Unit because it is a federal or state government, agency, or subdivision or is a religious organization, an integrated auxiliary of a religious organization, or is a convention or association of churches.

** Note: Attached screen shot from the DOJ Registered Charities List found at:

https://mm.nh.gov/files/uploads/doj/remote-docs/registered-charities.pdf

2582	Thrive Survivor Support Center	PO Box 1344	Concord	NH	03302-1344	G	5/15/2026

FINANCIAL DISCLOSURES

G. Check one the following:

[X] The organization hired an outside firm to audit its financial statements or to prepare GAAP-compliant financial statements for its most recently completed fiscal year. If so, please ensure that the financial statements and audit results are available to be requested from the contact listed on Page 1 (audited financials may be attached) **OR**

[ ] The above does not apply, but the organization filed an IRS Form 990 or Form 990-EZ for its most recently completed fiscal year. Please attach that IRS Form 990 or Form 990-EZ to the submission. (Form 990 Schedule B is not required) **OR**

[ ] ***If neither of the above apply***, complete the Income Statement and Balance Sheet below with the following basic financial information from the organization's most recently completed fiscal year:

1. INCOME STATEMENT

	Revenue		Expenses
Grants	$	*Compensation of officers, directors, and key personnel*	$
Donations	$		
Program Services Revenue	$	*Other salaries & wages*	$
Interest & Dividends	$	*Payroll taxes & employee benefits*	$
All other Revenue	$	*Occupancy, rent, utilities, and insurance*	$
Total Revenue	$	*Printing, publications, postage, office supplies, and IT*	$
		All other expenses	$
		Total Expenses	$

2. BALANCE SHEET

Assets		Liabilities	
Cash & Equivalents	$	*Accounts Payable*	$
Investments	$	*Loans Payable*	$
Real Estate (less any depreciation)	$	*All other liabilities*	$
		Total Liabilities	$
Other Property & Equipment (less any depreciation)	$		
Pledges, grants, accounts receivable	$		
All other assets	$		
Total Assets	$		

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Thrive Survivor Support Center

Mission Statement: To serve survivors of domestic violence, sexual violence and human trafficking through empowerment, safety and support; and to promote prevention through education in Merrimack County. NH

Vision: The eradication of domestic and sexual violence and human trafficking in our community.

THRIVE SURVIVOR SUPPORT CENTER
(Formerly Crisis Center of Central New Hampshire)
AUDITED FINANCIAL STATEMENTS
June 30, 2024 and 2023

Table of Contents

ROWLEY & ASSOCIATES, P.C.

CERTIFIED PUBLIC ACCOUNTANTS
46 N. STATE STREET
CONCORD, NEW HAMPSHIRE 03301
TELEPHONE (603) 228-5400
FAX # (603) 226-3532

MEMBER
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

MEMBER OF THE PRIVATE
COMPANIES PRACTICE SECTION

INDEPENDENT AUDITOR'S REPORT

Board of Directors
Thrive Survivor Support Center
Concord, New Hampshire

Opinion

We have audited the accompanying financial statements of Thrive Survivor Support Center (a nonprofit organization), which comprise the statement of financial position as of June 30, 2024, and the related statements of activities and changes in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements present fairly, in all material respects, the financial position of Thrive Survivor Support Center as of June 30, 2024, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Thrive Survivor Support Center and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Thrive Survivor Support Center's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Thrive Survivor Support Center's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Thrive Survivor Support Center's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Report on Summarized Comparative Information

We have previously audited Thrive Survivor Support Center's 2023 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated November 6, 2023. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2023, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Rowley & Associates, PC

Rowley & Associates, P.C.
Concord, New Hampshire
October 22, 2024

Thrive Survivor Support Center
Statements of Financial Position
June 30, 2024 and June 30, 2023
See Independent Auditors' Report

	2024	2023
ASSETS		
CURRENT ASSETS		
Cash and Cash Equivalents	$ 194,252	$ 452,552
Cash and Cash Equivalents, Donor Restricted	153,358	42,537
Grants and Pledges Receivable, current portion	272,280	234,230
Prepaid Expenses	12,317	10,985
Total Current Assets	632,207	740,304
PROPERTY AND EQUIPMENT		
Land	130,400	130,400
Buildings and Improvements	1,232,583	972,310
Furniture and Equipment	37,530	24,199
	1,400,513	1,126,909
Less Accumulated Depreciation	(158,286)	(121,486)
Total Property and Equipment, Net	1,242,227	1,005,423
OTHER ASSETS		
Intangible, Net of Accumulated Amortization	4,635	6,684
Deposits	-	1,800
Total Other Assets	4,635	8,484
LONG-TERM ASSETS		
Grants and Pledges Receivable, Long-Term	50,000	-
Total Assets	$ 1,929,069	$ 1,754,211
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Accounts Payable	$ 5,114	$ 8,426
Accrued Expenses	26,765	23,826
Deferred Revenue	7,380	5,350
Note Payable, Current Portion	13,791	11,313
Total Current Liabilities	53,050	48,915
LONG-TERM LIABILITIES		
Note Payable, Less Current Portion	54,841	88,235
NET ASSETS		
Without Donor Restrictions	1,667,820	1,574,524
With Donor Restrictions	153,358	42,537
Total Net Assets	1,821,178	1,617,061
Total Liabilities and Net Assets	$ 1,929,069	$ 1,754,211

Thrive Survivor Support Center
Statements of Activities and Changes in Net Assets
Year Ended June 30, 2024, With Comparative Totals for Year Ended June 30, 2023
See Independent Auditors' Report

	Net Assets Without Donor Restrictions	Net Assets With Donor Restrictions	2024	2023
CONTRIBUTIONS AND SUPPORT				
Grant Revenue	$ 900,416	$ -	$ 900,416	$ 1,359,349
Contributions	354,492	203,464	557,956	311,660
Contributions, In-Kind	20,736	-	20,736	38,991
Contributions, Non-Cash	18,408	-	18,408	23,056
Fundraising Events, Net Costs, $14,374 & $23,842	25,097	-	25,097	27,705
Interest Income	297	-	297	195
Miscellaneous Income	3,347	-	3,347	1,039
Total Support and Revenue	1,322,793	203,464	1,526,257	1,761,995
Net Assets Released from Donor Imposed Restrictions	92,643	(92,643)	-	-
EXPENSES				
Program Services	885,523	-	885,523	851,400
Management and General	353,901	-	353,901	236,852
Fundraising	82,716	-	82,716	71,511
Total Expenses	1,322,140	-	1,322,140	1,159,763
INCREASE IN NET ASSETS	93,296	110,821	204,117	602,232
NET ASSETS AT BEGINNING OF YEAR	1,574,524	42,537	1,617,061	1,014,829
NET ASSETS AT END OF YEAR	$ 1,667,820	$ 153,358	$ 1,821,178	$ 1,617,061

Thrive Survivor Support Center
Statement of Functional Expenses
Year Ended June 30, 2024
With Comparative Totals for Year Ended June 30, 2023
See Independent Auditors' Report

	Program Services	Management & General	Fundraising	Total 2024	Total 2023
Salaries and Wages	$ 450,227	$ 154,556	$ 66,536	$ 671,319	$ 644,429
Payroll Taxes	35,746	10,557	5,151	51,454	52,405
Employee Benefits	37,950	13,359	150	51,459	51,685
Pension Plan Contributions	13,045	5,524	2,494	21,063	13,667
Direct Program Expenses	160,551	-	-	160,551	118,787
Phone & Advocacy Hotline	18,767	-	-	18,767	37,996
Donated Supplies	17,368	420	620	18,408	23,556
Utilities	26,323	2,047	-	28,370	27,912
Rent Expense	-	1,485	-	1,485	24,962
Office Expense	18,853	13,175	1,314	33,342	18,224
Communications	21,827	1,892	25	23,744	23,536
Professional Fees	19,491	17,102	-	36,593	15,626
Information Technology	8,082	24,340	-	32,422	13,379
Depreciation	-	36,800	-	36,800	15,692
Insurance	15,449	11,773	1,083	28,305	16,487
Accounting Fees	-	15,110	-	15,110	11,397
Miscellaneous	10	1,015	-	1,025	334
Staff Expenses and Gifts	-	3,595	-	3,595	3,699
Bank, Credit Card and Other Fees	1,939	9,690	4,697	16,326	16,650
Repairs and Maintenance	22,766	1,556	-	24,322	7,492
Parking Expense	8,480	6,715	-	15,195	6,610
Dues and Membership	-	2,140	112	2,252	1,941
Conferences and Training	4,197	2,966	534	7,697	1,514
Travel	4,452	629	-	5,081	4,734
Real Estate Taxes	-	7,719	-	7,719	-
Amortization	-	2,049	-	2,049	2,049
Grant to Other Organization	-	-	-	-	5,000
Interest Expense	-	7,687	-	7,687	-
Total Functional Expenses	$ 885,523	$ 353,901	$ 82,716	$ 1,322,140	$ 1,159,763

Thrive Survivor Support Center
Statements of Cash Flows
Years Ended June 30, 2024 and 2023
See Independent Auditors' Report

	2024	2023
CASH FLOWS FROM OPERATING ACTIVITIES		
Increase in Net Assets	$ 204,117	$ 602,232
Adjustments to Reconcile Change in Net Assets to Net Cash Provided by Operating Activities		
Depreciation	36,800	15,692
Amortization	2,049	2,049
(Increase) Decrease in Operating Assets:		
Grants Receivable	(88,050)	4,465
Pledges Receivable, Current Portion	-	350
Prepaid Expenses	(1,332)	(8,340)
Deposits	1,800	-
Increase (Decrease) in Operating Liabilities:		
Accounts Payable	(3,312)	8,426
Accrued Payroll and Payroll Taxes	2,939	1,918
Deferred Revenue	2,030	(9,908)
NET CASH PROVIDED BY OPERATING ACTIVITIES	157,041	616,884
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchases of Property and Equipment	(273,604)	(690,268)
NET CASH USED BY INVESTING ACTIVITIES	(273,604)	(690,268)
CASH FLOWS FROM FINANCING ACTIVITIES		
Net (Payments) Proceeds, Note Payable	(30,916)	99,548
NET CASH PROVIDED (USED) BY FINANCING ACTIVITIES	(30,916)	99,548
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	(147,479)	26,164
CASH AND CASH EQUIVALENTS, AT BEGINNING OF YEAR	495,089	468,925
CASH AND CASH EQUIVALENTS, AT END OF YEAR	$ 347,610	$ 495,089
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION		
Cash paid during the year for		
Interest	$ 7,687	$ -
SUPPLEMENTAL DISCLOSURE OF NON-CASH FINANCIAL ACTIVITY		
Contributions, In-Kind	$ 20,736	$ 38,991
Contributions, Non-Cash	$ 18,408	$ 23,056

NOTE A- NATURE OF THE ORGANIZATION

Thrive Survivor Support Center (the "Organization") is a non-profit corporation located in Concord, New Hampshire and serves the needs of adult and emancipated minor victims of domestic violence and sexual assault in Merrimack County by staffing a hotline and providing emergency shelter to victims of violence and their children. The Organization also provides appropriate referrals to social service agencies in Merrimack County and assists victims in dealing with the courts and police. Through public awareness and education, the Organization seeks to eliminate the conditions which cause domestic violence and sexual assault. The Organization receives the majority of its funding from the New Hampshire Coalition Against Domestic and Sexual Violence (NHCADSV) as disclosed in Note C.

The Organization, formerly Crisis Center of Central New Hampshire, changed its name effective July 3, 2024.

NOTE B- SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The financial statements of the Organization have been prepared in conformity with Generally Accepted Accounting Principles (GAAP) as applied to not-for-profits. The Financial Accounting Standards Board (FASB) is the accepted standard-setting body for establishing accounting and financial reporting principles for not-for-profits. The more significant of the FASB's generally accepted accounting principles applicable to the Organization, and the Organization's conformity with such principles, are described below. These disclosures are an integral part of the Organization's financial statements.

Basis of Presentation

The Organization reports 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 - These net assets generally result from revenues generated by receiving contributions that have no donor restrictions, providing services, and receiving interest from operating investments, less expenses incurred in providing program-related services raising contributions, and performing administrative functions.

Net assets with donor restrictions - These net assets result from gifts of cash and other assets that are received with donor stipulations that limit the use of the donated assets, either temporarily or permanently, until the donor restriction expires, that is until the stipulated time restriction ends or the purpose of the restriction is accomplished.

Basis of Accounting

The Organization uses the accrual basis of accounting in its financial statements. Under this basis, revenue is recognized when earned rather than when payment is received, and expenses and purchases of assets are recognized when the obligation is incurred rather than when the cash is disbursed.

Use of Estimates

The preparation of financial statements and related disclosures in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect certain amounts reported in the financial statements and accompanying notes. Actual results experienced by the Organization may differ from management's estimates.

NOTE B- SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Cash and Cash Equivalents

For purposes of the statements of cash flows, the Organization considers all highly liquid investments (short-term investments such as certificates of deposits and money market accounts) with an initial maturity of three months or less to be cash equivalents. The following table provides a reconciliation of cash and cash equivalents reported within the statement of financial position to the sum of the corresponding amounts within the statement of cash flows as of June 30:

	2024	2023
Cash and Cash Equivalents	$194,252	$452,552
Restricted Cash and Cash Equivalents	153,358	42,537
Total	$347,610	$495,089

Grants Receivable

Accounts receivable consists of grants which are recorded at cost. The Organization uses the direct write off method to write off uncollectable accounts. The Organization does not record an allowance for doubtful accounts because management expects to collect all outstanding balances; this is not considered a departure from accounting principles generally accepted in the United States because the effects of the direct write off method approximate those of the allowance method. The Organization does not charge interest on accounts receivable.

Unconditional Pledges Receivable

Unconditional promises to give that are expected to be collected within one year are recorded at net realizable value. Unconditional promises to give that are expected to be collected in future years are recorded at fair value, which is measured as the present value of their future cash flows. The discounts on those amounts are computed using risk-adjusted interest rates applicable to the years in which the promises are received. Amortization of the discounts is included in contribution revenue. Conditional promises to give are not included as support until the conditions are substantially met.

Property and Equipment

The Organization's property and equipment policy is to capitalize individual purchases, renewals and betterments in excess of $2,500. Maintenance, repairs, and minor renewals are charged to expense as incurred. Periodically, management evaluates property and equipment for impairment when events or changes in circumstances indicate that the carrying amount of such assets may not be recoverable. When items of property and equipment are sold or retired, the related cost and accumulated depreciation are removed from the accounts and any gain or loss is included in the statements of activities. These items are depreciated using the straight-line method over their estimated useful lives as follows:

Buildings and Improvements	15-39 years
Furniture and Equipment	3-7 years

Depreciation expense record by the Organization for the years ended June 30, 2024 and 2023 was $36,800 and $15,692, respectively.

NOTE B- SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Intangible Assets

The Organization owns intangible assets consisting of a database management system and website development. Intangible assets acquired separately are measured at initial cost. Following initial recognition, intangible assets are carried at cost less any accumulated amortization and any accumulated impairment losses. Subsequent expenditures are capitalized only when they increase the future economic benefits embodied in the specific assets to which they relate. All other expenditures are recognized in the statement of activities as incurred.

Intangible assets with finite lives are amortized over the useful economic life and assessed for impairment whenever there is an indication that the intangible assets may be impaired. Changes in the expected useful life or the expected pattern of consumption of future economic benefits embodied in the asset is accounted for by changing the amortization period or method, as appropriate, and are treated as changes in accounting estimates. The amortization expense on intangible assets with finite lives is recognized in expenses. The Organization does not hold any intangible assets with indefinite lives.

Amortization is recognized in the statement of activities on a straight-line basis over the estimated useful life of the intangible assets from the date they are available for use. Amortization expense for the years ended June 30, 2024 and 2023 was $2,049 and $2,757, respectively.

Contributions and Promises to Give

Contributions received are recorded as net assets with donor restrictions or net assets without donor restrictions depending on the existence or nature of any donor restrictions. Contributions are recognized when the donor makes an unconditional promise to give to the Organization. Contributions that are restricted by the donor are reported as increases in net assets without donor restrictions if the restriction expires in the fiscal year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in net assets with donor restrictions depending on the nature of the restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions.

Contributions are recognized under FASB ASU 2018-08, *Not-For-Profit Entities (Topic 958): Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made.* Under this ASU, contributions are not recognized as revenue if there are donor-imposed conditions and barriers that must be overcome before the Organization is entitled to the assets transferred. Conditional contributions can exist if the Organization has limited discretion over how the resources are spent and the contributor retains a right of return to the resources provided if the conditions are not met. If contributions are received prior to the satisfaction of the donor-imposed conditions and barriers, the advanced receipt of funds would be recorded as deferred revenue on the statement of financial position. Once conditions have been substantially met, the contributions are recognized as revenue and classified as net assets with or without donor restrictions depending on remaining donor restrictions.

NOTE B- SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Functional Allocation of Expenses

The costs of providing the Organization's program and other activities have been summarized on a functional basis in the statements of functional expenses. Accordingly, certain costs have been allocated among the programs and supporting services benefited. Expenses are charged to each program based on the direct expenses incurred or estimated usage based on time spent on each function by the staff.

Contributed Materials and Services

Contributed Services – In-Kind Contributions

The Organization receives donated services from a substantial number of unpaid volunteers who have made significant contributions of their time to the 24-hour Crisis Line. The criterion for recognition of such volunteer effort under generally accepted accounting principles is that the services must be specialized skills, which would be purchased if not donated. All contributed services were considered without donor restriction and were valued at fair-market-value. This condition has been met. Total in-kind contributions as of June 30 were as follows:

	2024	2023
Phone & Advocacy Hotline	$17,068	$37,996
Professional Services	1,969	995
Total	$20,736	$38,991

In addition, many individuals volunteer their time and perform a variety of tasks that assist the Organization; these amounts have not been recognized in the accompanying statement of activities because the criteria for recognition as contributed services has not been met.

Contributed Goods – Non-Cash Contributions

The Organization receives donated goods throughout the year. Contributed goods, which may include food supplies and equipment, have been recorded on the statements of activity at their fair market value at the date of the contribution. Any equipment contributed is capitalized and depreciated over its estimated useful life. The Organization received $18,408 and $23,056 in various supplies during the years ended June 30, 2024 and 2023, respectively.

Advertising

The Organization conducts non-direct response advertising. These costs are expensed as incurred. Advertising costs were $0 and $25 for the years ended June 30, 2024 and 2023, respectively.

Income Taxes

The Organization has been notified by the Internal Revenue Service that it is exempt from federal income tax under Section 501(c) (3) of the Internal Revenue Code. The Organization is further classified as an organization that is not a private foundation under Section 509(a)(3) of the Code. The most significant tax positions of the Organization are its assertion that it is exempt from income taxes and its determination of whether any amounts are subject to unrelated business tax (UBIT). The Organization follows the guidance of Accounting Standards Codification (ASC) 740, Accounting for Income Taxes, related to uncertain income taxes, which prescribes a threshold of more likely than not for recognition of tax positions taken or expected to be taken in a tax return.

NOTE B- SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Deferred Revenue
Revenue is recognized when earned, however, funds received that are not earned as of year-end are recorded as a liability under deferred revenue. Deferred revenue arises when resources are received by the Organization before it has a legal claim to them. Deferred revenue related to an annual Fall fundraising event was $7,380 and $5,350 for the years ended June 30, 2024 and 2023, respectively.

Compensated Absences
Employees of the Organization are entitled to paid vacation depending on job classification, length of services and other factors. Employees must use their vacation time each fiscal year or forfeit that time. There was no accrued vacation earned, but unpaid as of June 30, 2024 and 2023, respectively.

Financial Instruments
The carrying value of cash and cash equivalents, grants receivable, pledges receivable, prepaid expenses, accounts payable and accrued expenses are stated at carrying cost at June 30, 2024 and 2023, which approximates fair value due to the relatively short maturity of these instruments.

Leases
The Organization adopted FASB ASU2016-02, Leases (Topic 842) in the current period. The Organization has elected the short-term lease recognition exemption for all applicable classes of underlying assets. Leases with an initial term of 12 months or less, that do not include an option to purchase the underlying asset that we are reasonably certain to exercise, are not recorded on the statement of financial position. Therefore, the adoption did not have an impact on the Organization's financial statements.

Comparative Financial Information
The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Organization's financial statements for the year ended June 30, 2023, from which the summarized information was derived.

Reclassifications
Certain financial statement and note information from the prior year financial statements has been reclassified to conform with current year presentation format.

Subsequent Events
Management has evaluated subsequent events through October 22, 2024, the date which the financial statements were available to be issued, and has not evaluated subsequent events after that date. No subsequent events were identified that would require disclosure in the financial statements.

NOTE C- CONCENTRATIONS

Cash

The Organization maintains its cash in three local financial institutions. The accounts are secured by the Federal Deposit Insurance Corporation (FDIC) up to $250,000. At various times throughout the year, the Organization may have cash balances at the financial institution that exceeds the insured amount. Management does not believe this concentration of cash results in a high level of risk for the Organization. The Organization had uninsured balances of $0 and $16,994 at June 30, 2024 and 2023, respectively.

Major Source of Funding

The Organization is a pass-through entity of the New Hampshire Coalition Against Domestic and Sexual Violence (NHCADSV). Approximately 59% and 49% of the funds received by the Organization are from grants allocated from NHCADSV for the years ended June 30, 2024 and 2023, respectively. In addition, substantially all of the accounts receivable are owed to the Organization from NHCADSV at June 30, 2024 and 2023.

NOTE D- CORPORATE ORGANIZATION

The Corporation is a voluntary organization under Chapter 292 of the New Hampshire Revised Statutes Annotated and therefore has no capital stock.

NOTE E- NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions consist of funds received by the Organization, restricted as to use or time. The restrictions are considered to expire when payments are made. As of June 30, 2022 the Organization had no net assets with donor restrictions. As of June 30, the Organization had net assets with donor restrictions are available for the following purpose:

Prevention Education Programs	$ 3,358
Franklin Building	150,000
Total	$ 153,358

NOTE F- BOARD DESIGNATED NET ASSETS

For the years ended June 30, 2024 and 2023 the Organization no board designated net assets.

NOTE G- GRANTS AND PLEDGES RECEIVABLE

The Organization's grants and pledges receivable are made up of short-term and long-term grants and pledges. Grants and pledges were collectable as follows as of June 30:

2025:	$ 272,280
2026:	25,000
2027:	25,000
	$ 322,280

NOTE H- LEASING ARRANGEMENTS

Operating Office Lease

The Organization rented its Concord, New Hampshire office space under a non-cancelable operating lease. The Organization entered into this operating lease in March of 2021, for a term of two years maturing on March 31, 2023. The Organization extended the lease for a three-month period ending June 30, 2023 when the Organization purchased a new office building. Rent expense related to this agreement was $0 and $21,600 during the years ended June 30, 2024 and 2023, respectively. There are no future required minimum rents.

Operating Storage Lease

The Organization leases storage units as various rates. The lease agreements are each on a month-to-month basis. Rent expense related to this agreement was $1,485 and $3,362 during the years ended June 30, 2024 and 2023, respectively. There are no future required minimum rents.

Operating Parking Leases

The Organization rents various parking spaces nearby its office and shelter locations. The lease agreements may be terminated by either party with 30-days' notice. Rent expense related to this agreement was $15,195 and $6,610 during the years ended June 30, 2024 and 2023, respectively. There are no future required minimum rents.

NOTE I- NOTE PAYABLE

The Organization has a loan payable with a local bank, dated June 2023 and maturing June 30, 2030. The interest rate is 7.625% and monthly payments are $1,546. The loan is collateralized by real estate. The balance of the loan was $68,632 as of June 30, 2024. Future maturities of long-term dept as of June 30 are as follows:

2025	$ 13,791
2026	14,879
2027	16,055
2028	17,323
2029	6,584
	$ 68,632

NOTE J- RETIREMENT PLAN

In February 2021, the Organization started a retirement plan under the Internal Revenue Code Section 403(b) for its employees through a third party. Eligible participants working more than 20 hours per week may elect to make voluntary pre-tax elective salary deferrals or after-tax Roth deferrals each year, not to exceed the maximum allowed by law. The Organization may contribute to the employees' retirement fund at the Board's discretion. The Organization made contributions of $21,063 and $13,667 under this plan for the years ended June 30, 2024 and 2023, respectively.

NOTE K- LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS

The Organization has a policy to structure its financial assets to be available as its general expenditures, liabilities and other obligations come due. The Organization's primary source of support is grants. That support is held for the purpose of supporting the Organization's budget. The Organization had the following financial assets that could be readily made available within one year to fund expenses without limitations as of June 30:

	2024	2023
Cash and Cash Equivalents	$ 347,610	$ 495,089
Grants and Pledges Receivable, Current	272,280	234,230
Less Amounts:		
With Donor Imposed Restriction	(153,358)	(42,537)
	$ 466,532	$ 686,782

At times, the Board of Directors may designate a portion of any operating surplus to its liquidity reserve for future expenditures, however, there were no such designations at June 30, 2024. The Organization believes its liquid financial assets are sufficient to fund unanticipated liquidity needs that may arise.

NOTE L- FAIR VALUE MEASUREMENTS

Fair values of assets measured on a recurring basis as of June 30 are as follows:

2024	Fair Value	Significant Other Observable Inputs (Level 2)
Grants and Pledges Receivable	$ 322,280	$ 322,280
2023		
Grants and Pledges Receivable	$ 234,230	$ 234,230

The fair market value of grants and pledges receivable are estimated at the present value of expected future cash flows. The Organization reports transfers between levels of the fair value hierarchy, if any, at the end of the reporting period. There were no such transfers at June 30, 2024 and 2023, respectively.

JESSICA L. VAUGHN-MARTIN, MSW

(she/her/hers)

EXECUTIVE SUMMARY

- ❖ Passionate, experienced social work professional dedicated to improving the lives of survivors of violence.
- ❖ Strong relationship builder with track record of working collaboratively across sectors to achieve desirable outcomes.
- ❖ Strategic systems level thinker who is able to look at the big picture and break down goals into tangible steps.

EDUCATION

University of New Hampshire 2013
Master of Social Work, Concentration: Community and Administrative Practice

Bachelor of Arts, Psychology 2002
Minor: Women's Studies

EMPLOYMENT EXPERIENCE

Thrive Survivor Support Center (fka Crisis Center of Central NH) Jan 2022 - present
Executive Director

- Lead a dual domestic and sexual violence agency serving Merrimack County in New Hampshire.
- Partner with Board of Directors, staff, and volunteers to assess the needs of the survivors we serve and the agency to constantly improve service delivery.
- Act as lead grant writer for the agency writing all federal, state and municipal grants, personally raising over $675,000, an increase of 200% from the previous year.
- Create and implement all policies and procedures to ensure operational excellence and a trauma informed work environment.
- Partner with community leadership to expand impact and outreach to survivors of violence through innovative, problem solving.
- Working to rebuild multiple aspects of the agency including personnel, community outreach and partnerships, increase fundraising, update and implement policies and procedures, fiscal management and oversight, and board governance.

Granite United Way Mar 2020 – Jan 2022
Director, Community Impact

- Provide technical assistance, training and capacity building services to nonprofit agencies statewide to integrate trauma informed and culturally effective care into all aspects of human services.
- Leading statewide listening sessions to improve community engagement, prioritize funding strategy and highlight the voices of those with lived/living experience.
- Lead statewide grant making process including priority setting, logistics management and agency partner support.

Vaughn-Martin Consulting Jan 2020 – January 2022

- Provided project management, technical assistance and training support to community initiatives designed to mitigate the adverse effects of childhood trauma within a New Hampshire community.
- Facilitated, organized and led meetings involving community leadership to improve project outcomes centered on trauma informed initiatives.
- Provided grant writing consultation and support to become grant ready.

Manchester Family Justice Center Feb 2017 – Jan 2020
Executive Director

- Created and implemented a colocation of services to provide wraparound supports to victims and survivors of violence, utilizing client feedback to inform programming.
- Responsible for all program development, supervision, fund development, operational oversight and program evaluation of the Manchester Family Justice Center.

- Individually secured over $450,000 to support Manchester Family Justice Center operations via grant writing, business partnership, and individual donor engagement during tenure.

University of New Hampshire, Graduate School of Social Work 2015 – 2022
Adjunct Instructor & Field Liaison

- Develop and deliver curriculum related to Social Policy I and II, Community/Administrative Practice, Non-Profit Management, Intimate Partner Violence, Supervision, and Field Internship to graduate MSW students utilizing a variety of teaching modalities.
- Manage a portfolio of local social work field placement sites to provide holistic supervision and support to both MSW student interns and field supervisors.

United Way of the Greater Seacoast 2013 -2017
Director, Community Impact

- Provided technical assistance, support and capacity building to a portfolio of human service agencies focused on housing and homelessness services utilizing evidence-based practice.
- Engaged and utilized volunteer committees as a means to drive strategic decision making related to funding, strategic planning and scope of work.
- Partnered with other funders in New Hampshire to create meaningful impact related to the topics of housing/homelessness and other complex social issues.

Granite United Way 2012- 2013
Development and Community Impact Intern

- Managed and facilitated volunteers reviewing grant proposals within the Southern Region focused on basic needs including housing, food insecurity and victim services.
- Conducted widespread community outreach and public speaking in order to advance the work of Granite United Way in the community.

Waypoint (formerly Child and Family Services) **2007-2011**
NH Children's Lobby Intern 2010-2011

- Supported lobbying efforts related to child welfare, domestic violence and state funding.
- Supported clients, including survivors of violence, to speak before the NH state legislature.

Program Supervisor 2008-2010

- Provided oversight of day-to-day Family Intervention operations to ensure program implementation including partnering with NH DHHS.
- Conducted annual budget development, staff training and facilitated monthly team meetings. • Hired, trained, and supervised statewide program staff to assure high quality services. Family Assessment Specialist 2007-2008 • Provided assessment services to adults at time of application for TANF to determine basic needs and barriers to employment., including domestic violence, homelessness and health concerns.

State of New Hampshire 2004-2007
Employment Counselor

- Conducted family violence assessment and employment counseling for clients seeking exemption from TANF work requirement to address family violence and other barriers.

Familystrength 2002-2004
Home Based Counselor

- Provided in-home counseling and intensive case management to court mandated adolescents, domestic violence survivors receiving TANF and other families involved with DCYF services.

YWCA NH Crisis Service 2000-2002
Advocate and Shelter Manager

- Provided safety planning crisis intervention, case management and hospital and police accompaniment to survivors of violence.
- Managed the operations of an emergency domestic violence shelter including house meetings, grant reporting, etc.