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# STATE OF NEW HAMPSHIRE DEPARTMENT of NATURAL and CULTURAL RESOURCES STATE COUNCIL on the ARTS

19 Pillsbury Street CONCORD, NEW HAMPSHIRE 03301

November 27, 2018

His Excellency, Governor Christopher T. Sununu and the Honorable Executive Council State House Concord, New Hampshire 03301

#### REQUESTED ACTION

The Department of Natural and Cultural Resources, State Council on the Arts respectfully requests permission to award a Conservation License Plate (Moose Plate) Grant to the Cardigan Mountain Art Association (VC #298586) for the restoration and conservation of five historic painted theater curtains in the amount of \$10,870 effective upon Governor and Executive Council approval through June 30, 2019. 100% Agency Income

Funding is available as follows:

03-35-35-350010-34000000 Office of the Commissioner 054-500527 Trust Fund Expenditures <u>FY 2019</u>

\$10,870

#### **EXPLANATION**

Pursuant to RSA 261:97-c, Moose Plate Funds are used to promote the use and conservation of cultural resources in New Hampshire and to preserve the cultural heritage that belongs to all New Hampshire citizens by providing for the preservation of publicly-owned historic properties.

The Town of Canaan owns four painted theater curtains from the Lyceum Hall and one from the Grange Hall. In 1884, the Canaan Lyceum Hall Association outfitted the second floor of the Meeting House for public and private gatherings, plays and musical evenings. Painted scenery was ordered to add color and depth to the stage. The grand drape is signed L. J. Couch & Co., a South Boston studio which produced the scenery and shipped it to Canaan by train. Canaan has the only known set of New Hampshire scenery curtains produced by the Levi J. Couch Scenic Studio.

The Indian River Grange organized in 1875 and built its hall in Canaan village in 1877. After the village fire of 1923, the Hall was rebuilt. The Grange Hall curtain, titled "Indian River," is the only curtain that survived.

These curtains, currently under the stewardship of the Cardigan Mountain Art Association, belonged on stages built for popular entertainment in the late 1800s. Those venues, along with the public's demand for what they offered, have been gone for decades and few residents today are aware of their role in Canaan's social life. The Lyceum Hall curtains have been out of public view since the early 1900s and the Grange Hall curtain has been hidden on the back wall of the former Grange Hall stage for 30 years. Once restored and used for public programs they will add color and richness to a wide variety of events at the Meeting House and become a tangible link to Town history. Canaan's curtains will join a growing collection of New Hampshire historic stage scenery made available for current and future generations to enjoy and may be considered an aspect of the State's cultural tourism.

Respectfully submitted,

Sarah L. Stewart Commissioner

○98 08() <u>FY2019CC # 9755</u> Acct Code:<u>34()() -05</u>4

#### NEW HAMPSHIRE STATE COUNCIL ON THE ARTS GRANT'AGREEMENT



This agreement between the State of New Hampshire, New Hampshire State Council on the Arts (hereinafter "Council") and Cardigan Mountain Art Assoc (hereinafter "Grantee") is to witness receipt of funds subject to the following conditions:

I. GRANT PERIOD: FY2019

#### 2. OBLIGATIONS OF THE GRANTEE:

- The Grantee agrees to accept \$10,870.00 and apply it to the program(s) described in the grant application and approved budget referenced above. In the performance of this grant agreement, the Grantee is in all respects an independent contractor and is neither an agent nor employee of the State:
- Funding credit including Council logo must appear in all programs, publicity, and promotional materials. The following wording and Council logo should be used:



Cardigan Mountain Art Assoc is supported in part by a grant from the Mooseplate program and New Hampshire State Council on the Arts.

State Council on the Arts

- The Grantee agrees to abide by the limitations, conditions and procedure outlined herein and in the attached appendices. If appropriated funds for this grants program are reduced or terminated, all payments under this grant may cease. That determination rests within the sole discretion of the Council.
- 3. PAYMENT will be made following the receipt and execution of all required documents and approval of the Governor and Executive Council
- 4. FINAL REPORT: The Grantee agrees to submit a final financial and narrative report on a form provided by the Council no more than 30 days after the end of the grant period. Failure to submit the final report will render the Grantee ineligible for Council funding for two years.
- SOVEREIGN IMMUNITY: No provision of this contract is to be deemed a waiver of sovereign immunity by the State of New Hampshire.

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COUNCIL APPROVAL	GRANTEE SIGNATURE
Contracting Officer for State Agency	Org/ Name: Cardigan Mountain Art Assoc
9.20.18	Address: P.O. BH 523, CANAAN NH 0374/
Signature Date	SUSAN 1. PARESON
Name, Title: Virginia Lupi, Director	Printed Name of Authorized Official for Grantee
C. I. Q. $\bot$	Authorized Official's Signature & Title  Date
analyticus 1	/////
Sarah L. Stewart, Commissioner	NOTARIZATION REQURIED: STATE OF NEW HAMPSHIRE, COUNTY OF
	Graffon
APPROVED BY ATTORNEY GENERAL	
as to form, substance and execution:	On the let day of November 2018 before the undersigned
	officer, personally appeared
Quill VIIIM 12/3/(8	(Print name of person whose signature is being notarized)
Office of Salarana Consent. Data	or satisfactorily proven to be the person whose name appears above,
Office of Attorney General Date	and acknowledged that s/he executed this document in the capacity
J. McA	indicated. Tiska M. alt
MY WY	Notary Public/ Justice of the Peace
COMMISSION	Brinted Name: Vicky M.A lister
EXPIRES	My Commission expires: March 25, 2020
COMMISSION EXPIRES MARCH 25, 2020	
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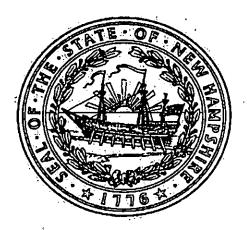
### **State of New Hampshire Department of State**

#### **CERTIFICATE**

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that CARDIGAN MOUNTAIN ART ASSOCIATION is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on May 08, 2006. 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: 557066

Certificate Number: 0004211970



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 16th day of November A.D. 2018...

William M. Gardner

Secretary of State

#### CERTIFICATION OF BOARD RESOLUTION

Authorization to Enter into Contracts with New Hampshire State Council on the Arts

Important: To expedite your payment these steps must be followed in this order: \* Resolution date must occur on or before the Grant Agreement is signed. \*\* Certificate on bottom of page must be signed and notarized on the same date or after the grant agreement is signed. 1. \*Resolution: THIS IT TO CERTIFY that the following is a true and correct copy of excerpts from resolutions adopted at a meeting of the Board of Directors CARDICAN HT ART ASSIC. (name of organization) at which time a quorum was present and voted, and further that said resolution has not been rescinded, altered or amended and is still in full force and effect. "Be it resolved that DUSK is hereby authorized (Printed name of authorizing official) on behalf of this Corporation to enter into contracts with the State of New Hampshire and to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, as (s)he may deem necessary, desirable or appropriate." Printed Name ROSEMARY 2. \*\*Certificate STATE OF NEW HAMPSHIRE COUNTY OF ovember, 2018 before the undersigned officer, personally appeared or satisfactorily proven to be the person whose name appears (print name of person whose signature is being notarized) above, and acknowledged s/he executed this document in the capacity indicated. Printed Name: V

My Commission Expires



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/15/2018

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(les) 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). CONTACT JoAnn Ostlen PRODUCER Kielly Insurance Agency, Inc. PHONE (AC. No. Ext): 603-298-9898 88 Main St E-MAIL ADDRESS: West Lebanon NH 03784 INSURER(S) AFFORDING COVERAGE NAIC # Phone: 603-298-9898 Fax: 603-298-9899 INSURER A: Co-Operative Insurance Companies INSURED INSURER B: Cardigan Mt. Art Association INSURER C: PO Box 523 INSURER D: Canaan NH 03741 INSURER E INSURER F **REVISION NUMBER: CERTIFICATE NUMBER:** COVERAGES 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. ADOLSUBR POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER LTR 1,000,000 COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (En occurrence) 50,000 CLAIMS-MADE X OCCUR 5,000 MED EXP (Any one person) 05/23/18 05/23/19 PERSONAL & ADVINJURY **Business Owners Policy** BP 0164781 2,000,000 GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER: 1,000,000 PRO-PRODUCTS - COMPANY AGG POLICY OTHER: COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY BODILY (NUURY (Per person) ANY AUTO SCHEDULED AUTOS NON-OWNED AUTOS ONLY OWNED AUTOS ONLY HIRED AUTOS ONLY BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) UMBRELLA LIAB EACH OCCURRENCE EXCESS LIAB CLAIMS-MADE AGGREGATE DED RETENTION 8 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY PER ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICERALEMBER EXCLUDED? E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 191, Additional Remarks Schedule, may be attached if more space is required) Art Association - Event for one week taking place during May - June, 2019. The Certificate holder is as noted below. CANCELLATION **CERTIFICATE HOLDER** SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. New Hampshire Department of Natural & Cultural Resources AUTHORIZED REPRESENTATIVE 19 Pillsbury Street, First Floor Concord, NH 03301 © 1988-2015 ACORD CORPORATION. All rights reserved.

#### Lavoie, Leanne

From:

Mason, Cassandra

Sent:

Tuesday, November 27, 2018 3:23 PM

To:

Lavoie, Leanne

Subject:

FW: Grant Application Paperwork

Here you go.

From: Susan Pearson [mailto:spearson1551@gmail.com]

Sent: Sunday, November 25, 2018 7:22 PM

To: Mason, Cassandra

Subject: Re: Grant Application Paperwork

Yes, that is correct.

On Tue, Nov 20, 2018 at 3:35 PM Mason, Cassandra < Cassandra. Mason@dncr.nh.gov > wrote:

Hi Susan,

Is it correct to say that you don't have Worker's Comp insurance because you are all volunteers?

Thanks,

Cassie

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#### GRANTEE INFORMATION FORM for ORGANIZATIONS

Please complete the following for fulfillment of grant requirements by the State of New Hampshire's Department of Administrative Services.

Name	e of Organization CARDIGAN HOUNTAIN ART ASSOCIATION	
	tatement of Purpose: your organization's mission statement or list your organization's objectives in the space below)	
	ATTACHED (MISSION STATEMENT)	
(List a	alary of Administrator: innual salary of administrator, not artist's fees, who will be involved in this grant.)  SALARY	
Attac	h the Following:	
3.	DUNS Number (If not provided on application) 006528474	
4.	Resume of Administrator	
5.	Financial Statement:	
	A one-page financial statement of your organization's most recently completed fiscal year.	
6.	Board of Directors:	
•	A list of the current directors and officers of your organization.	
·-	Please do not include any personal information such as home addresses, phone numbers or emails.	
<b>7</b> .	List Geographic Areas Served by Organization	
8.	Certificate of Liability and Workers Comp Insurance with the Department of Natural &	
^	Cultural Resources as the certificate holder	
9.	Please include a copy of a current year Certificate of Good Standing. (if not provided with the	
1	application	
	If you do not have a Certificate of Good Standing with the state of NH please call Secretary o	
	State Corporate Division at 271-3244 and request an application.	

#### RESUME

#### Susan Irene Pearson

#### **Prospective Administrator of Funds**

Education:

B.S. Medical Technology, University of Buffalo

M.S. Interior Design, UMass, Amherst

Employment: Medical Technologist at several hospitals, including DHMC

Interior Designer with some small design firms early on, then as

sole proprietor for most of career

Salesperson at Bridgman's Furniture, Inc. more recently

**Currently retired** 

Hobbies: Painting, knitting, Mahjongg, carpentry, birdwatching, mushroom

foraging

Memberships: Pastel Society of New Hampshire

Cardigan Mountain Art Association

Qualifications for Handling Money:

In addition to running my own design business for many years, I also have been the treasurer of the Cardigan Mountain Art Association since 2006. Duties have included depositing all funds, paying all bills, and recording all transactions in a computer program, preparing monthly Treasurer Reports, and annual financial reporting to the State and to the IRS to fulfill 501(c)3 requirements. When CMAA had a gallery, I was responsible for keeping track of all sales and paying the artists for work that was sold.

3:41 PM 10/18/18 Accrual Basis

## Cardigan Mountain Art Association Profit & Loss

January through December 2017

	Jan - Dec 17
Ordinary Income/Expense	· · · · · · · · · · · · · · · · · · ·
Income	
Fund raiser	887.75
Member Dues Income	440.00
Total Income	1,327.75
Gross Profit	1,327.75
Expense	
Fee	35.00
Fund Raising	
Advertizing	154.00
Foes	200.00
Total Fund Raising	354.00
Insurance	•
Liability Insurance	350.00
Total Insurance	350.00
Miscellaneous	47.80
Supplies Office	143.04
Total Supplies	143.04
Total Expense	929.84
Net Ordinary Income	397.91
•	
Net Income	397.91

#### Answers to Grantee Information Form

#### Item 6—Board of Directors:

Vicky McAlister, President

Sandra Pregent, Vice President

Rosemary Haness, Secretary

Susan Pearson, Treasurer

Liz Houghton

Joan Thomson

Jeanette Stillson

#### Item 7—Geographic area served:

Southern Grafton County

ITEM 3- DUNS# : 006528474

#### **CMAA MISSION STATEMENT**

The mission of the Cardigan Mountain Art Association is to promote, support, and serve visual, performing and literary artists and to inspire and educate our community in the creative process as well as develop a relationship between artists and the community through the display and attainment of arts and crafts, exhibitions, educational offerings, special events and artistic programs.

Prepared 1/3/08 by Josh Trought Sue Pearson Liz Houghton Barb McAlister Jeannette Stillson Rosemary Haness