



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

19 Pillsbury Street CONCORD, NEW HAMPSHIRE 03301
Phone: 271-2789 Fax: 271-3584

May 24, 2022

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

REQUESTED ACTION

Authorize the Department of Natural and Cultural Resources, Division of the Arts, to award an American Rescue Plan Act grant to West Claremont Center for Music and the Arts (VC #354860), Claremont, NH in the amount of \$6,000 for salary support of the Executive Director and Administrative Assistant, effective upon Governor and Council approval through June 30, 2022. 100% Federal Funds.

Funds are available in account, ARPA Grant DNCR Arts Council, as follows:

03-035-035-353510-24930000-072-500575 - Grants Federal

FY 2022
\$6,000

EXPLANATION

The National Endowment for the Arts amended the Arts Partnership Grant to the New Hampshire State Council on the Arts to assist arts and cultural nonprofit organizations sustain their operations. These American Rescue Plan funds are intended to help these entities and their employees endure the economic hardships caused by the pandemic and to distribute critical funds to a broad constituency and geographic range. The first forty-three organizations to receive funding were those awarded Public Value Partnership grants in July 2021.

This funding category recognizes that the nonprofit arts industry is an important sector of New Hampshire's economy, and that financial support is necessary to help save jobs and keep operations functioning. The grant awards are designed to assist in the recovery of organizations that are at risk of permanent closure, or endured loss of paid staff, venue, or significant revenue. Organizations were allowed to request funds for salary support, marketing, fulfill contracts with artist's, rent and utilities, or health and safety supplies.


Six panelists reviewed forty-one applications and recommended thirty-seven awards based on three criteria: quality of arts programming, administrative capacity, and impact on the arts work force. Grant categories and deadlines are advertised through the divisions' website, social media, and electronic newsletters.

Earlier in Fiscal Year 2022, West Claremont Center for Music and the Arts received a Youth Arts Project grant in the amount of \$6,000 bringing the cumulative total over the \$10,000 threshold, therefore requiring Governor and Council approval. West Claremont Center for Music and the Arts (WCCMA) is a major contributor to the on-going revitalization of Claremont and plays an active role in enhancing the quality of life in the region. WCCMA's mission is to bring professional music and arts experiences, diverse musicians, and equitable educational opportunities to the under-served and low-income communities of Claremont, NH and the broader Upper Valley region.

The Attorney General's Office has reviewed and approved the agreement as to form, substance, and execution.

Respectfully submitted,

(15/11)


Sarah L. Stewart
Commissioner



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 West Claremont Center for Music and the Arts (hereinafter "Grantee") is to witness receipt of funds subject to the following conditions:

1. GRANT PERIOD: FY2022

2. OBLIGATIONS OF THE GRANTEE:

- The Grantee agrees to accept \$6,000.00 and apply it to the program(s) described in the grant application and approved budget for American Rescue Plan | Salary Support. 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:



New Hampshire
State Council on the Arts

West Claremont Center for Music and the Arts is supported in part by a grant from the New Hampshire State Council on the Arts & the National Endowment for the Arts.

- The Grantee acknowledges that the NHSCA Program Coordinator may schedule a site visit to the organization and may request a site visit from the NHSCA.
- 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.

5. SOVEREIGN IMMUNITY: No provision of this contract is to be deemed a waiver of sovereign immunity by the State of New Hampshire.

COUNCIL APPROVAL

Contracting Officer for State Agency

Signature

Date

Name, Title: Virginia Lupi, Director

Sarah Stewart

5/26/2022

Date

Name, Title: Sarah Stewart, Commissioner

APPROVED BY ATTORNEY GENERAL

as to form, substance and execution:

[Signature]

05/26/2022

Office of Attorney General

Date

GRANTEE SIGNATURE

Org/ Name: West Claremont Center for Music and the Arts

133 Old Church Rd, PO Box 902, Claremont, NH 03743

Address:

Melissa Richmond, Executive Director

Printed Name of Authorized Official for Grantee

5/13/2022

Authorized Official's Signature & Title

Date

NOTARIZATION REQUIRED:

STATE OF NEW HAMPSHIRE, COUNTY OF Merrimack

On the 13 day of May, 2023 before the undersigned officer, personally appeared

Melissa Richmond

(Print name of person whose signature is being notarized)

or satisfactorily proven to be the person whose name appears above, and acknowledged that s/he executed this document in the capacity indicated.

Cassandra Mason

Notary Public/ Justice of the Peace

Printed Name: Cassandra Mason

My Commission expires: 8/2/22

10662]

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 WEST CLAREMONT CENTER FOR MUSIC AND THE ARTS is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on April 26, 2018. 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: 794201

Certificate Number 0005331437



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 31st day of March A.D. 2021

A handwritten signature in black ink, appearing to read "Wm Gardner".

William M. Gardner
Secretary of State

[\(/online/Home/\)](#)  [Back to Home \(/online\)](#)

Business Information

Business Details

Business Name: WEST CLAREMONT CENTER FOR
MUSIC AND THE ARTS

Business ID: 794201

Business Type: Domestic Nonprofit Corporation

Business Status: Good Standing

Business Creation Date: 04/26/2018

Name in State of
Incorporation: Not Available

Date of Formation in
Jurisdiction: N/A

Principal Office Address: 133 Old Church Rd, Claremont,
NH, 03743, USA

Mailing Address: PO Box 902, Claremont, NH,
03743, USA

Citizenship / State of
Incorporation: Domestic/New Hampshire

Last Nonprofit
Report Year: 2020

Next Report Year: 2025

Duration: Perpetual

Business Email: melissa@wcc-ma.org

Phone #: NONE

Notification Email: melissa@wcc-ma.org

Fiscal Year End
Date: NONE

Principal Purpose

S.No	NAICS Code	NAICS Subcode
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- | | | |
|---|--|--|
| 1 | OTHER / The West Claremont Center for Music and the Arts' (WCCMA) mission is to bring professional music and arts experiences, diverse musicians, and educational opportunity to Caremont NH, and wider region. The further purpose of WCCMA is to provide programs for free, by free will donations, or with scholarship opportunities so that all people in the community have access to the arts. | |
| 2 | OTHER / West Claremont Center for Music and the Arts is organized exclusively for charitable, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code. | |

Page 1 of 1, records 1 to 2 of 2

Principals Information

Name/Title	Business Address
Richard Davenport / Incorporator	188 Main St, Charlestown, NH, 03603, USA
Moo Young Cheon / Incorporator	66 Roosevelt Rd, Claremont, NH, 03743, USA
Ann Richmond / Incorporator	63 Roosevelt Rd, Claremont, NH, 03743, USA
Deborah Snelling / Incorporator	39 Bellic St, Claremont, NH, 03743, USA
Beverly Foster / Incorporator	33 Graigue Hill Rd, Claremont, NH, 03743, USA

< Previous ... 1 **2** ... Next > Page 1 of 2, records 1 to 5 of 6 Go to Page

Registered Agent Information

Name: Not Available

Registered Office Not Available

Address:

Registered Mailing Not Available

Address:

Trade Name Information

No Trade Name(s) associated to this business.

Trade Name Owned By

No Records to View.

Trademark Information

Trademark Number	Trademark Name	Business Address	Mailing Address
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No records to view.

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NH Department of State, 107 North Main St. Room 204, Concord, NH 03301 -- [Contact Us](#)

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Certificate of Authority #1

(Corporation, Non-profit Corporation)


Corporate Resolution

I, Ann Richmond (Name of Person A), hereby certify that I am duly elected Clerk/Secretary/Officer of West Claremont Center for (Name of Organization). I hereby certify the following is a true record of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on 5/18/2022, at which a quorum of the directors/shareholders were present and voting.

Voted: That Melissa Richmond (Name of Person - cannot be Person A) (may list more than one person) is duly authorized to enter into contracts or agreements on behalf of West Claremont Center for (Name of Organization) with the State of New Hampshire and any of its agencies and departments and further is authorized to execute any documents which may in his/her judgement to be desirable or necessary to affect the purpose of this vote.

I hereby certify that said vote has not been amended or repealed and remains in full force and effect as the date of the contract to which this certificate is attached. This authority shall remain valid for thirty (30) days from the date of this Corporate Resolution. I further certify that it is understood the State of New Hampshire will rely on this certificate as evidence the person(s) listed above currently occupy the positions(s) indicated and that they have full authority to bind the corporation. To the extent that there are 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: 5/20/2022

ATTEST: 
(Signature of Person A)

STATE OF NH

COUNTY OF Sullivan



CLARENEW02

PARE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/16/2022

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 The Church Insurance Agency Corp 210 South St, Ste 2 Bennington, VT 05201-2894		CONTACT Tracey Parent NAME: PHONE (AC, Mo, Ext): 800-293-3525 FAX (AC, Mo): E-MAIL: tparent@cpa.org ADDRESS:		
INSURED Union St Lukes Episcopal Church PO Box 902 Claremont, NH 03743		INSURER(S) AFFORDING COVERAGE		NAIC #
		INSURER A: Church Ins Co of Vermont		10669V
		INSURER B: Employers Insurance Co of Wausau		21458
		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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	N	N	VPP0012411	4/1/2022	4/1/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 30,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 5,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000	
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$	
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$	
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	N	WCC625900102021029	10/10/2021	10/10/2022	PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Proof of Coverage for the West Claremont Center for Music and the Arts @ 133 Old Church Rd, Claremont NH 03743

CERTIFICATE HOLDER

CANCELLATION

Dept of Natural and Cultural Resources
NHSCA
19 Pillsbury St
Concord, NH 03301-

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