

COMMUNITY AND PUBLIC FACILITIES FOCUS GROUP - MONTANA DEPARTMENT OF COMMERCE MAY 2, 2014

COMMUNITY AND PUBLIC FACILITIES FOCUS GROUP

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IN SUPPORT OF MONTANA'S FIVE-YEAR CONSOLIDATED PLAN

TRANSCRIPT OF THE PROCEEDINGS

Robert Gaudin, Facilitator

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DEPARTMENT OF COMMERCE:

STEPHANIE CRIDER

JOANNE GILBERT

1 WHEREUPON, the following proceedings were had:
 2 MR. GAUDIN: For those of you who are on the
 3 telephone, we had waited a few minutes. We have a parade
 4 outside the door, so we're thinking that maybe people are
 5 stuck in traffic.
 6 MS. CRIDER: This has just been a comedy of
 7 errors for us.
 8 MR. GAUDIN: So I apologize for that.
 9 But I would like to get started. My name is
 10 Rob Gaudin. I'm the director of research and planning for
 11 a Portland, Oregon consulting firm by the name of Western
 12 Economic Services. We provide housing and community
 13 development planning services throughout the country, from
 14 Boston to L.A. and Montana to Mississippi and a lot of
 15 places in between.
 16 But I have the privilege to report that we've been
 17 working with the Montana Department of Commerce for the
 18 last 28 years. And most of that work has been related to
 19 consolidated planning issues, or the study before that was
 20 called the Comprehensive Housing Affordability Strategy.
 21 Throughout all of this, you know, we do periodically take
 22 a more reflective view on what our housing and community
 23 development needs are.
 24 So we're embarking upon this five-year strategy at
 25 this time, the kind of thing that we're really required to

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1 do. In some ways this is like a compliance. We get money
 2 from HUD for HOME and CDBG and ESG programs, and in return
 3 for those funds we need to take a few moments every five
 4 years to think about how we might prioritize what our
 5 needs are, what kind of strategies we might take to
 6 address those needs, how we might best implement our
 7 resources in an efficient fashion. So we have a five-year
 8 strategy and an annual action plan. And we need to do it
 9 in such a way that we're also affirmatively furthering
 10 fair housing.
 11 You know, this process is actually a little bit
 12 complicated, but, briefly, we take a look at quantitative
 13 and qualitative data. We drill down and try to identify
 14 not just the broad brush perspective but, really, what are
 15 priority needs within the array of communities, both small
 16 and medium size. Not the large communities so much, like
 17 Billings and Missoula or Great Falls, because they have
 18 their own programs for that also funded by HUD. But our
 19 approach here, we really want to try to identify how we're
 20 going to use these resources, how we're going to allocate
 21 them across both housing and community development needs.
 22 I would like to take a moment and talk the multitudes
 23 of folks who are attending today's meeting -- I hope we
 24 have more than two on the speakerphone. But I'd like to
 25 start here at my left, for those of you who are on the

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1 phone.
 2 MS. CRIDER: I'm Stephanie Crider. I'm with the
 3 Department of Commerce. Most of you have either gotten an
 4 e-mail or a phone call from me just trying to set things
 5 up. So that's who I am.
 6 MR. McCORMICK: And I'm Michael McCormick,
 7 director of the Livingston Food Pantry of Park County.
 8 MR. GAUDIN: And how long have you been doing
 9 this, Michael?
 10 MR. McCORMICK: About four-and-a-half years.
 11 MR. GAUDIN: Okay. And Patricia.
 12 MS. KENT: Patty Kent, from the Western
 13 Montana Mental Health --
 14 (-- has joined the conference.)
 15 MR. GAUDIN: Hi, Patty, we seemed to have lost
 16 connection with you.
 17 MS. KENT: Can you hear me now?
 18 MR. GAUDIN: Yes.
 19 MS. KENT: Yeah, somebody joined the conference
 20 so it bleeped out.
 21 So, anyway, I've been doing housing and treatment
 22 space for the mentally ill in western Montana for almost
 23 21 years.
 24 MR. GAUDIN: Very good.
 25 And who else is now on the line? Well, they may also

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1 have their button muted.
 2 (Robie Culver has joined the conference.)
 3 MR. GAUDIN: Hi, Robie. How are you? Well, we
 4 heard your announcement.
 5 MS. CRIDER: Star 2 will unmute the phone.
 6 MR. GAUDIN: And maybe partway along the way,
 7 you'll figure out how to unmute. Star 2, I guess, is it?
 8 But nevertheless, you know, the kinds of things that
 9 we're doing within this, there are certain national
 10 objectives that we need to attain; you know, provide
 11 decent housing and make sure we have a suitable living
 12 environment. And that includes, you know,
 13 infrastructure or water and sewer, as well as community
 14 and public facilities, as well as expand economic
 15 opportunities for some of our lower income citizens
 16 throughout the state.
 17 You know, HUD would like us to do this in a certain
 18 type of way, kind of offering us some accountability.
 19 Right? We need to do this in a sustainable fashion so
 20 that it enhances the long-term viability of our
 21 communities, that we are indeed able to benefit
 22 individuals and families who qualify for our programs,
 23 chiefly those who are a little lower income, as well as
 24 creating and maintaining affordable housing throughout our
 25 communities.

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1 Now, the kind of resources over the last few years
 2 that we've been getting from HUD have been declining.
 3 2014, which was just recently announced, was a slight
 4 increase from the previous year, so that's a hopeful sign
 5 for our future. But it's in excess of \$9 million flowing
 6 into the state for these kinds of issues. Now, \$9 million
 7 is a good amount of money, and I believe that we can spend
 8 that wisely.

9 In doing our plan, though, we need to take into
 10 consideration a fairly broad array of issues, as I noted
 11 earlier. We do this by taking sets of data and measuring
 12 relationships. We also want to have expert opinion, like
 13 you, and you guys, and advise us about what's going on.
 14 So fundamentally today, your role is a very important one.
 15 You know, tell us what's going on. Tell us about your
 16 challenges, how we might overcome them collectively a
 17 little bit better. You know, so it's an opportunity for
 18 you to talk to us in the early stages prior to analysis of
 19 lots of data, prior to public input meetings. We wanted
 20 to take this opportunity to kind of reach out to you and
 21 see what your challenges are and how we might be able to
 22 incorporate that with this overall process.

23 So if I'm just yammering on, and I probably will until
 24 somebody, please, interrupts me -- You know, the idea is
 25 for you to provide to us; this is a listening opportunity

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1 for us. You know, this vehicle that we're using, the
 2 Go to Webinar, is being recorded. So please share with us
 3 your experiences, your opinions, your perspective and
 4 commentary about how it's working for you today and how we
 5 might be able to be make it better work in the future.

6 There are some specific topics or pieces, if you will,
 7 of the Consolidated Plan. We go through this kind of with
 8 an assessment approach. We take a look and inventory all
 9 of our needs. We try to assess their importance, how
 10 critical they are, what the size of this need is, and then
 11 we develop a strategy for some idea of how to attack this
 12 particular problem. Following the strategy, we actually
 13 take actions, we spend resources. Each year we get these
 14 resources from HUD, and each year we have a specific set
 15 of actions that we wish to accomplish.

16 I won't get into, at least today, too much about fair
 17 housing. But we have to, within our programs, certify
 18 that we're affirmatively furthering fair housing, which
 19 means we operate our programs in such a way as enhancing
 20 access to being able to make housing choices which are
 21 free from discriminatory actions associated with protected
 22 classes.

23 Following all that, we get to report back to HUD about
 24 how we did last year, so this Consolidated Annual
 25 Performance and Evaluation Report. So the strategy, you

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1 know, the actions, and reporting back to HUD is kind of
 2 the loop that we go through. And the strategy is done
 3 once every five years. You know, it has some fairly
 4 elaborate parts. There's a housing needs assessment and a
 5 homeless needs assessment, the community development
 6 component, which is what we're addressing this afternoon,
 7 and the non-housing special needs populations are also
 8 addressed. You know, we document the entire process and
 9 who we had participate and how we conducted our outreach
 10 and so on. But this body of information has us create the
 11 Consolidated Plan.

12 You know, the community development piece which we're
 13 talking about today -- We had another focus group devoted
 14 to economic development. Today's Community and Public
 15 Facilities really does kind of give us a walk down the
 16 community development arena, which includes
 17 infrastructure, whether that's sewers and roads. If we
 18 have a need to address special needs populations, I'd
 19 certainly encourage some of that as well today. This is
 20 the last of three specific focus groups, so if we have
 21 opportunities to address other matters, that would be
 22 great.

23 But more specifically, what I really want to do --
 24 (Craig Erickson has joined the conference.)
 25 MR. GAUDIN: Hi, Craig.

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1 I think we're getting our answers -- our questions
 2 answered. I'm not sure how many other people can actually
 3 talk and we can hear them. But why don't we say, for
 4 those who have called in, Patty has already made a few
 5 comments. Craig, how about yourself; can you introduce
 6 yourself and talk a little bit about background in
 7 community and public facilities?

8 MS. CRIDER: Star 2 will unmute your phone.

9 MR. ERICKSON: Ain't technology grand? Well,
 10 howdy, everybody. Anyway, this is Craig Erickson, from
 11 Great West Engineering. And my background? Ten years at
 12 Bear Paw Development as an EDA planner and grant writer,
 13 grant administrator; and the last five years at Great West
 14 Engineering doing grant writing, grant administration.
 15 And also, we do growth policy updates, capital improvement
 16 plans, floodplain assessments, and things like that. So
 17 in a very brief, brief description, that's what I do.

18 MR. GAUDIN: Thank you very much.

19 MR. ERICKSON: You're welcome.

20 MR. GAUDIN: When the software announced your
 21 presence, we were talking about, you know, what we are
 22 hoping to do within the community and public facilities
 23 arena for this focus group. And that really comprises
 24 giving us a sense of how you define these types of
 25 facility needs, maybe by the type of facility and kind of

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1 geographic areas, as well as hopefully we can go away with
 2 some sense of how you think we might prepare strategies to
 3 address the potpourri, if you will, of these community and
 4 public facility needs.
 5 You know, what I hope to do today is kind of get a
 6 sense of what our greatest needs are. You know, here we
 7 are looking from 30,000 feet across the entire state, and
 8 we all have --
 9 (-- has joined the conference.)
 10 MR. GAUDIN: Another person joined the
 11 conference. Excellent. If they have, please feel free at
 12 any time during this discussion to speak up and ask a
 13 question, request a clarification on something. There's
 14 two reasons. First, I'll know that the voice part is
 15 working for you; and, secondly, I'll just keep yammering
 16 on until somebody interrupts me. So that's actually your
 17 real job today, is to interrupt me.
 18 So with that --
 19 MS. KENT: Oh, we can do that any time.
 20 MR. GAUDIN: Yes, you can.
 21 MS. KENT: And I don't know about the winter in
 22 Portland, but it's been a bad winter here and this is the
 23 sunniest Friday afternoon we've had in a long time. So if
 24 you need comments from us, maybe you could sort of guide
 25 what you're looking for and get us moving on that. Sorry,

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1 just speaking for myself.
 2 MR. GAUDIN: Well, what I'm hoping to do is for
 3 you to tell us what your greatest community and public
 4 facilities needs are. You know, this process really is
 5 about reaching out to you, the experts in that arena. If
 6 there's some kind of policy barriers, there's local
 7 government problems to getting things implemented or
 8 changed, you know, what are kind of good steps for the
 9 State to take. What I have done for the other focus
 10 groups is just go over some of the preliminary data that
 11 we've gathered. And again, just interrupt me. You can
 12 steer the conversation to some other direction; I'm
 13 totally open to that. Because I'm just working from a
 14 script. And if there's a pressing issue that this reminds
 15 you of, then we can go there, too.
 16 But I would like to --
 17 MS. KENT: Well, sure, I'll jump in. I think
 18 that -- I mean, I don't -- A lot of us understand -- And
 19 I'm sorry if there is someone that is new to this, but
 20 we've done a lot of this comprehensive plan review or
 21 consolidated plan, whatever it is called now, and we
 22 understand how do we need to document needs and how do we
 23 need to get the money spent where we need it.
 24 And I think with public facilities, the most difficult
 25 thing that I see is you have boiled water orders competing

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1 with sewer competing with a Head Start project competing
 2 with a homeless shelter, and Montana as a state, with the
 3 exception of the entitlement cities, has enough to do
 4 maybe two or three projects. And so the biggest thing is,
 5 that catchall public facilities category continues to be
 6 funded less and less and yet those needs, particularly in
 7 the rural areas, simply grow. And so you might get a
 8 sewer system in or a new water system in somewhere, but
 9 you haven't even begun to address what doesn't qualify as
 10 housing under the housing category or for HOME funds or
 11 for continuum of care funds.
 12 And I think that, for me -- The public facilities
 13 money is some of the only money that is available for
 14 things like crisis stabilization homes or a Head Start
 15 building or whatever it is that are critical components to
 16 support community needs, and yet they're not the big sewer
 17 system or a major apartment complex or first-time home
 18 buyers. So I think if there's anything that I can say,
 19 is, that pool of money probably has a much greater demand
 20 than you're seeing because people just say, We aren't
 21 going to apply because only two projects will be funded.
 22 And so you don't.
 23 And then, secondly, the CDBG grants for public
 24 facilities are some of the most voluminous grants to put
 25 together. You're laughing? Yeah, I know.

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1 MR. ERICKSON: I just wrote --
 2 MS. KENT: I have binders full of stuff.
 3 Right. And, actually, the last one I did, I said I
 4 would never, ever do it again. What happens is -- And I
 5 haven't written one lately, so I apologize if this has
 6 been updated. Part of that grant is an entire community
 7 needs assessment; not just for what your project is and
 8 other similar needs, it's for everything under the sun.
 9 And if your local government hasn't done anything like
 10 that recently, which most small, rural towns haven't, then
 11 you get to do it. And so I think if there's some way to
 12 defer to the local government that's submitting the grant
 13 that they've decided this particular project is the most
 14 important, it is the number-one project that needs to be
 15 put forward at this time, and eliminate this entire
 16 community needs assessment, it would save a tremendous
 17 amount of money for the grantees and it would save a
 18 tremendous amount of reading for the grantors.
 19 And I don't know -- You know, I understand that the
 20 guidelines that go with this are statutorily driven, but
 21 there still has to be a place for that community
 22 discretion that the State can interpret the rules or make
 23 a blanket statement that that community needs assessment
 24 is driven by local government. And it shouldn't be part
 25 of the scoring criteria, if you will, if the local

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1 government has said, yeah, this is the most important
 2 thing, and they're willing put to put forward that grant.
 3 So having said all that, I think the problem is two:
 4 They're very difficult to put together, time-consuming,
 5 and expensive; and there just historically has not been
 6 much money, so it's not a resource that is often looked
 7 to. And yet it is one of the only sources that can cover
 8 certain things, and particularly with respect to anything
 9 that has a component of treatment and a short-term stay;
 10 that is, for disabled folks typically well under median
 11 income, and families.
 12 So I just want to say we need it, we need more, and we
 13 need to make it easier to apply. And I realize that's
 14 really trite because you hear that at a every single
 15 meeting. But it's a very unique pot of funding with
 16 respect to its eligible uses. And so I want to make a
 17 plug for it as being a really important piece of how to
 18 address a lot of the problems that include the housing
 19 continuum, if you will, but have more of a treatment
 20 component. Addiction is another example.
 21 So thank you.
 22 MR. GAUDIN: Thank you.
 23 Craig, was there something you wanted to add to that?
 24 MR. ERICKSON: Well, yeah. I mean, getting back
 25 to that question of what, in my opinion, are the greatest

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1 application. But many clients, especially when you get
 2 into the smaller communities, simply do not have the
 3 capacity or the financial wherewithal to invest in the
 4 types of planning documents that are needed to address the
 5 types of questions that are currently being asked by the
 6 Community Development Block Grant Program.
 7 I do understand that most of that's being statutorily
 8 driven, but holy cow, that's a tough row to hoe. So I
 9 don't know what can be done to streamline that process.
 10 But after going from the CDBG application to a TSEP
 11 application, the TSEP application looked downright simple.
 12 And that's not the easiest application either, but it's
 13 more project specific, and I really did appreciate that
 14 about the TSEP application.
 15 So those are my comments.
 16 (Karen Byrnes has joined the conference.)
 17 MR. GAUDIN: Hi, Karen.
 18 As far as that particular line of thought about the
 19 community and public facilities, do you see some
 20 difficulties between securing resources for the hard costs
 21 and maintaining a flow of resources for the soft costs,
 22 kind of capital versus operational resources?
 23 MS. KENT: You're fielding that one to anyone?
 24 MR. GAUDIN: To anyone.
 25 MS. KENT: You know, basically, I think that

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1 community facility needs, in no particular order -- well,
 2 actually, I will prioritize. Based on my experience,
 3 housing is at the top of the list, followed very closely
 4 by water, wastewater, and roads, especially in eastern
 5 Montana. We're currently updating Glendive's growth
 6 policy, and -- My gosh. And they have all kinds of other
 7 needs, law enforcement, schools, you name it. They're
 8 trying to deal with it, and they can't begin. They're
 9 having a very difficult time coping with it.
 10 The cost of these projects -- Glendive is in the
 11 middle of a very large wastewater treatment project, and
 12 the bids came in very high. And as we've drilled into
 13 why, it's primarily labor; the contractors cannot compete
 14 with the Bakken, so labor costs are very high. But
 15 generally speaking, across the state of Montana, I would
 16 say housing, water, wastewater, and roads, as a major,
 17 major concern for our clients.
 18 And whoever commented on the process of applying for
 19 CDBG funding, I just wrote a CDBG grant for a senior
 20 center -- excuse me, a nursing home renovation, and the
 21 29 questions, give or take one or two, related to
 22 planning. You know, there is -- you know, unfortunately,
 23 our client is the type of client that has done health care
 24 assessments and they have done a housing study, so we have
 25 the ability to respond to those questions that are in the

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1 should be one of the ultimate levels of analysis for any
 2 public facilities project, is if you build it can you run
 3 it. You know, that's pretty important to know. And part
 4 of the reason we use grant money and how we use it is to
 5 create that pre-facility so that whether it's a lower rent
 6 that we're charging or we're receiving a nightly rate for
 7 a therapeutic component we can pay for the staff and we
 8 can keep the lights on. But again, that's why the grant
 9 funding is so critical. Because when you add to operating
 10 costs a mortgage, that's often the piece that tips things
 11 over or creates the less affordable project and cannot
 12 reach the lower-level income folks.
 13 MR. GAUDIN: So to what extent would these soft
 14 costs sink some prospective community or public
 15 facilities?
 16 MS. KENT: You mean, operating costs?
 17 MR. GAUDIN: Yes.
 18 MS. KENT: Well, in the world of addiction --
 19 That's why we don't have any addiction treatment. Because
 20 there is no payer source, except hopefully if you have a
 21 Medicaid client they're the payer source. If the Medicaid
 22 expansion goes through the Legislature, there will be a
 23 payer source for a lot of people. Under the ACA, there
 24 might be a payer source. But, really, it comes down to
 25 how are folks paying for treatment. And if they're not on

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1 Medicaid, which there's a huge percentage of the folks who
 2 are eligible to benefit under these programs that are not
 3 Medicaid eligible, they're stuck. They're stuck. And
 4 whether they fund that through ACA or not, there's no
 5 resources.
 6 So you can build it, but you've got to staff it. And
 7 a lot of those public facilities are 24/7. And how do you
 8 pay your staff? You have to have a payer source for the
 9 service being rendered. So whether it's a nightly bed
 10 rate, a treatment rate, or, you know -- I mean, Head Start
 11 I imagine has a head count. You've got to have people
 12 walking in the door with some resource. So, you know,
 13 without that, I don't know how you pay for it. I mean,
 14 continually fundraising to pay for staff is not the best
 15 plan.
 16 MR. GAUDIN: Well, here I'm just going to follow
 17 a little dialogue and offer some other questions. Within
 18 this arena, and treatment in particular since that's what
 19 we're talking about with you, there are economies of
 20 scale, which would imply the consolidation of services to
 21 be delivered in particular areas. Would that be a viable
 22 alternative for you?
 23 MS. KENT: Yes and no. It depends on the service
 24 and it depends -- Because there are really funny rules
 25 with respect to mental health that you can't have more

1 than 16 beds in certain facilities because then they're a
 2 hospital. So there's all these other quirky statutes,
 3 depending on what you're doing, that may limit you to
 4 16 beds.
 5 Now, 16 beds is actually a pretty good economy of
 6 scale for this -- this state. We looked at how low we
 7 could go, and you really can't go below 12 in addition,
 8 and 16 is proving tough. So it depends on -- I mean, and
 9 I see what you're saying; well, not every community can
 10 have every facility, and I totally agree. But I'll tell
 11 you what, when you're in a psychiatric crisis and they
 12 say, Don't worry, we'll just take you in the car over to
 13 Warm Springs; and by the way we have to put you in
 14 shackles, and it's okay, that won't cause any increase in
 15 your anxiety; and our sheriff will take you there, and it
 16 takes them two-and-a-half hours in a winter snowstorm to
 17 get there. That's a system we already have. That doesn't
 18 work. It doesn't work for the counties, it doesn't work
 19 for the clients, and it definitely doesn't work for the
 20 state.
 21 So there has to be a balance in what those services
 22 are and where they're offered. And then you've got all
 23 these layers of different funny rules about who is paying
 24 for what and what size things can be. So I understand
 25 what you're asking. It isn't always that simple. And

1 what you'll find I believe in Montana is you have the same
 2 problem as everywhere, it's just a matter of volume. And
 3 so whether there's 500 people or 50 homeless people,
 4 you're going to have homeless people in every community;
 5 and psychiatric crises and suicide -- potential suicide
 6 issues, every community.
 7 So it's a tough question. And that's why in some
 8 respects it's very expensive to build here, because you do
 9 end up building facilities that are smaller to serve a
 10 very large geographic area that just doesn't have the
 11 population base. But that's the nature of the beast in a
 12 rural state.
 13 MR. GAUDIN: Okay. But let's come back to, as
 14 you call them, the quirky rules or certain things that
 15 cause the label to change from one word to another word,
 16 which is a whole other set of rules; or maybe it's not
 17 able to locate in town because you're now this other new
 18 word. What can --
 19 MS. KENT: You lose your funding. You lose
 20 Medicaid funding. And in this state, you don't want to do
 21 that, not with mental illness; that's a pretty critical
 22 piece.
 23 MR. GAUDIN: What can Commerce do to facilitate
 24 overcoming any of these barriers?
 25 MS. KENT: Well, I guess you have to decide if it

1 creates a problem. And really, a 16-bed facility in most
 2 communities in this state would be great. I mean, it
 3 would be full and it would be utilized. And I think going
 4 larger than that is a rare case except for somewhere --
 5 maybe Billings, maybe ultimately Missoula, but it's rare.
 6 And that's also just that the scale of life here is not
 7 well-suited to large institutional settings.
 8 MR. GAUDIN: Right.
 9 MS. KENT: And I haven't always lived here. I
 10 mean, I've lived in a lot of big cities and I see the
 11 difference. But you try to do something in Montana on a
 12 different scale and it doesn't always work simply because
 13 of the scale. So is it broken? I don't know. That's
 14 really the question.
 15 But, I mean, if you were asked to drive 250 miles to
 16 have your leg set because you broke it on the football
 17 field, you'd have fit. Not you personally, but everyone
 18 would. Medical care is all over this state in all
 19 different sizes and shapes. We don't have that for
 20 addiction or mental health, and that's where the gap is.
 21 So it's really an expectation of the cultural phenomena.
 22 How do we best serve it? CDBG public facilities. I'm
 23 just telling you, you guys are really important. And
 24 somehow, a bigger allocation for such a big state because
 25 of our lack of economies of scale would be tremendously

1 helpful. And then you're not always competing against
 2 boiled water and sewer and the really critical aspects
 3 that are understood by most versus something like
 4 addiction or suicide prevention or whatever it is.
 5 MR. GAUDIN: How might you convince Commerce that
 6 this allocation should be increased? Are there compelling
 7 things --
 8 MS. KENT: Oh. The suicide data in this state is
 9 off the charts. And they actually have that. I mean,
 10 through Karen Byrnes, who is on the phone also,
 11 Butte-Silver Bow was the first psychiatric crisis facility
 12 funded by CDBG, and they do understand. I mean, they were
 13 really pleased to -- as I understand it, to fund that
 14 grant. But when you're one of two or one of three, it's
 15 really hard to decide whether you're going to take the
 16 time and the money to apply for what is ultimately
 17 \$400,000 or 450. I think Commerce, I think they totally
 18 get it.
 19 I mean, Montana has the poverty statistics, the
 20 suicide statistics, the addiction statistics. They're off
 21 the charts. So it's really saying to Congress -- We get
 22 an allocation based on population. What about an
 23 allocation based on need, given the percentage of this
 24 population that is significantly higher than the national
 25 average? So, I mean, it really -- I think it just comes

1 down to that level.
 2 Because if you try to shift it from housing or
 3 anything else, then the housing people are going to say,
 4 No, you can't do that. And I understand that as well.
 5 MR. GAUDIN: Okay. So aside from mental health
 6 and addiction and treatment, are there other public
 7 facilities, for any other of the individuals who might be
 8 here or participating on this call, that you think should
 9 be allocated more resources from Commerce?
 10 (No response.)
 11 MR. GAUDIN: I'll take that as a no.
 12 MS. KENT: It's unanimous. There we go, my job's
 13 done.
 14 MR. GAUDIN: Well, I didn't hear anything, but
 15 that doesn't mean everybody agrees or disagrees.
 16 MS. KENT: I understand.
 17 MR. GAUDIN: Yeah.
 18 You know, I don't think I necessarily want to go by
 19 today's script.
 20 MS. KENT: No, no, no, no.
 21 MR. GAUDIN: But I think I do want to talk a
 22 little bit about -- We're conducting a survey right now,
 23 and it just got started a few days ago, so we don't have a
 24 lot of people participating yet. But I did want to kind
 25 of get your perspective on how people are replying.

1 You're right, other people are talking about having a
 2 different opinion.
 3 This first question is not the first question in the
 4 survey, but it's the first one I want to present to you
 5 today. And it just asks people about how should we
 6 allocate our resources across these particular needs.
 7 Now, we've got HOME and CDBG, you know, so no matter what,
 8 HOME funds are going to go to housing. But CDBG, largely
 9 these are CDBG categories, and public facilities kind of
 10 is down here near the bottom of the list. That's
 11 9.3 percent. It's not necessarily that we can actually
 12 make that a category that gets actually that percent,
 13 because we have various program guidelines. But do you
 14 think this should be higher on the list? Is that kind of
 15 what you're saying?
 16 MS. KENT: Oh, absolutely. Yeah. And I
 17 understand -- I mean, the need for human service dollars,
 18 there's always a huge, huge demand greater than what's
 19 funded. Housing does have HOME programs, and it would be
 20 interesting to see how often that money is combined or
 21 used on its own. But that's what I said earlier. I tried
 22 to articulate that this category is asked to do so many
 23 things.
 24 MR. GAUDIN: Well, you're right. The next slide
 25 presents a sample of those community and public

1 facilities, and the treatment is near the bottom of the
 2 list. We have health care facilities a little. But I'll
 3 be honest with you, the sentiment for those -- These
 4 couple of slides here, there's one more on infrastructure
 5 also, but, you know, they're structured a little bit like
 6 how we're supposed to rate the need for the Consolidated
 7 Plan. Right? No need means we're not going to do
 8 anything; high need, we are really going to try to do
 9 something.
 10 But, so far, we have 94 people who have participated.
 11 By the time we get to this question, you know, a bunch of
 12 people are skipping that question. But childcare
 13 facilities, the top of the list, has very weak sentiment.
 14 And so public facilities in general kind of has a weak
 15 sentiment. Is there something about --
 16 MS. KENT: I don't know who you sent this to, but
 17 I haven't seen it.
 18 MR. GAUDIN: We do have your e-mail.
 19 MS. CRIDER: I would check your spam folder,
 20 because it did come from MDOC -- or Montana Department of
 21 Commerce for community development.
 22 MS. KENT: Okay. We've had a lot of problems
 23 with our e-mail, and I apologize.
 24 MS. CRIDER: Would you like me to re-send it to
 25 you?

1 MS. KENT: If you could re-send it. It's
 2 supposedly fixed. It's been a two months' nightmare.
 3 MS. CRIDER: I can go ahead and send that to you.
 4 MS. KENT: But I think it would be interesting to
 5 see how this preliminary survey fits in with, you know,
 6 the other data that -- I mean, DPHHS does a huge report
 7 every year for the Legislature on the state of sort of the
 8 need and the people they serve. And the White Paper, I
 9 believe it's called, that Commerce puts out has a lot of
 10 very interesting data as well regarding housing that
 11 overflows into public facilities.
 12 And so -- I mean, I just had a conversation today
 13 about crisis stabilization in Sanders County: Well, it's
 14 a huge county, how do we do it? We're trying to put
 15 together something in working with the tribe and the
 16 hospitals in Polson. It is so needed, and there is -- It
 17 is taking a tremendous amount of time. But you have this
 18 incredibly fractured county with huge demands. And part
 19 of it is, who reports a suicide as a suicide or do they
 20 report as other or do they report it as mental health call
 21 or do they put someone in jail and have them sleep off the
 22 alcohol that caused them to be suicidal?
 23 And I'm not just talking about suicide, but I think
 24 this data, it would be interesting to know if it really
 25 fits in with what the other state agencies are putting

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1 together. Because childcare facilities I would never have
 2 guessed would be the number-one need in this state.
 3 MR. GAUDIN: I think there's someone else who
 4 wants to make a comment, too.
 5 Karen? Karen, we can't hear you.
 6 MS. CRIDER: Star 2 unmutes it.
 7 MS. BYRNES: Can you hear me now?
 8 MR. GAUDIN: Yes.
 9 MS. BYRNES: Yay. This has been a nightmare.
 10 MS. CRIDER: I'm sorry.
 11 MR. GAUDIN: We're all newbies.
 12 MS. BYRNES: Technology was not working for me at
 13 all.
 14 MR. GAUDIN: Well, now you're with us.
 15 MS. BYRNES: Now I'm with you. That's good.
 16 Yeah, as far as the survey goes, I have to say I'm
 17 with Patty, I did not get this. Maybe it's in my spam,
 18 too; or if I did get it I totally missed it. I would love
 19 to take part in it; yeah.
 20 MS. CRIDER: I'll re-send that to you as well.
 21 MS. BYRNES: Thank you.
 22 Childcare facilities, that was the highest need? Am I
 23 reading this right?
 24 MR. GAUDIN: The sentiment -- I've sorted all
 25 these by the frequency of high need identified by the

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1 participants.
 2 MS. BYRNES: Okay.
 3 MR. GAUDIN: Now, most of the other categories
 4 that we've reviewed, high need was 30 or 40, and 20 means
 5 that the sentiment for those participating in this didn't
 6 really have much to say. Medium need, you go down the
 7 list, more medium need, you know, than almost anything
 8 else. A few of them are residential treatment centers,
 9 you know, a lot are saying low need.
 10 So the question comes to mind, of course, as you
 11 suggest, maybe the community has not participated in the
 12 survey yet. I mean, it's only been out a few days; we
 13 finally got the final version released just a few days
 14 ago. So maybe you were sent it and it just got diverted
 15 somewhere. When you do get it, please send it to your
 16 peers throughout your industry, send it to your fellow
 17 parishioners at your church or any other group that you
 18 might belong to, because everybody is welcome to
 19 participate. So we really want you -- we want to get a
 20 good idea of how people view these various categories of
 21 need.
 22 I mean, I'm not surprised necessarily. We go
 23 backwards here to the previous slide about how people
 24 allocated resources. By the time they get down here to
 25 public facilities: Oh, that's not a big category, I'll

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1 just skip it. So we've got a lot of missing replies. A
 2 lot of people skipped certain questions. Look at this one
 3 down here, public buildings with improved -- 50 skipped
 4 the question. But it would be helpful -- it would be
 5 helpful to get people to participate and offer their
 6 perspective and commentary.
 7 MS. BYRNES: Definitely.
 8 MR. GAUDIN: Yeah.
 9 But what I'm hearing you say -- Let's pretend for a
 10 moment that instead of saying 20 it said 94 but still had
 11 the same ranking. Would you believe this is a correct
 12 ranking, or is something out of whack from the ranking
 13 that's portrayed here?
 14 MS. KENT: I would say it's a function of who has
 15 responded so far.
 16 MS. BYRNES: I agree with Patty.
 17 MR. GAUDIN: So if different people participated,
 18 you believe the ranking would change quite a bit.
 19 MS. KENT: Yes.
 20 MS. BYRNES: Yes.
 21 MS. CRIDER: On the phone, would you do us a
 22 favor? We have a court reporter. If you could say your
 23 name when you're responding.
 24 MS. KENT: You can't tell who we are yet?
 25 MS. CRIDER: It was really easy when it was just

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1 you, Patty.
 2 (A brief discussion was held off the record.)
 3 MR. GAUDIN: You know, the other slide here,
 4 here's the infrastructure issues. Notice the high need.
 5 These questions are asked nearly at the same time, like
 6 one right after the other. Water system improvements,
 7 water system capacity, street and road, sidewalks. Just
 8 like Craig was saying, you know, first things he stated,
 9 those are higher than any of the public facility ones.
 10 MS. KENT: That's interesting.
 11 MR. GAUDIN: Yeah.
 12 One of the questions at the front of the survey asked
 13 what's your role. So if we said, Well, I'm in the
 14 treatment industry, we could weight the responses. But
 15 the idea is to get, across the board, how people view
 16 these.
 17 Now, in terms of these infrastructure questions, would
 18 you think they are ranked reasonably, or is there
 19 something that needs to be moved more to the top?
 20 MS. KENT: That is Patty. This looks more
 21 consistent with what I would have guessed.
 22 MS. BYRNES: This is Karen. I agree. If you
 23 look at the top four, they're all really close, so I'd put
 24 those all together, really. I mean, I know a lot of
 25 communities have sewer issues for sure. Here in

1 Butte-Silver Bow, I would say that sidewalks and streets
 2 and roads are probably higher on our list. But, yeah,
 3 those top four are definitely majors.
 4 MR. GAUDIN: Okay. So let's go backwards one.
 5 We'll look at these again. Which one of these should be
 6 the top four here? See, when we get a thousand people to
 7 reply, we'll see if your prediction turns out.
 8 MS. BYRNES: I think you're -- Go ahead.
 9 MS. KENT: How you are defining health care
 10 facilities? Were there any definitions or is this just
 11 how it is presented?
 12 MR. GAUDIN: It's just how it's presented.
 13 MS. KENT: This is Patty. I think health care
 14 and residential treatment should be near the top, because
 15 if you aren't healthy it's hard to do much else.
 16 MR. GAUDIN: Okay. Well, I certainly urge you to
 17 participate in the survey and, you know, give us your
 18 perspective and commentary on those questions that ask for
 19 a response, a narrative response, because it would be
 20 certainly helpful to have that -- I mean, helpful for us.
 21 I mean, the question isn't how can we advocate to change
 22 federal law, because I'm pretty sure we're not going to be
 23 able to do that. You know, some of the definitions that
 24 are used that you referred to, I'm not sure we can do
 25 that. Then the question becomes, What can we do to

1 facilitate delivery of these facilities and services?
 2 You know, are there other sources of information
 3 that -- excuse me, sources of resources which we might
 4 partner with or team with or somehow play tag team with to
 5 create the avenue for both the operational and the capital
 6 being applied efficiently in smaller communities? Can you
 7 identify any partners that we might reach out to?
 8 MS. KENT: This is Patty. I think -- I'm not
 9 sure that I understand your question, but I'm going to
 10 throw this out there. What I would ask you all to do is
 11 say, What are the resources that the state is already
 12 receiving in housing? There's the HOME program primarily.
 13 What are the resources that the state's receiving in
 14 economic development? There's a number of different pots
 15 out there for economic development, whether it's the
 16 Big Sky Coal Trust Fund, CDBG itself, I mean, whether it's
 17 a redevelopment agency locally. There are -- there are a
 18 number of resources at the state and local levels for
 19 economic development, and I would say, Well, what's
 20 missing, and then what's the pressure on this particular
 21 fund? And as a radical suggestion, to say, Do we need to
 22 allocate that much to housing and economic development,
 23 given the lack of resources in these other areas?
 24 And are there partners? Yeah, there's partners. And
 25 part of the grant process is saying who else have you

1 tapped. Everybody wants to be the last one in; everyone
 2 wants you to leverage your money. This fund is being
 3 asked to put itself -- spread itself way to thin. And so
 4 I guess that's what I would advocate, is, yeah, you guys
 5 look at what other partners are out there and have that
 6 discussion and say, Does this make a reasonable allocation
 7 of where this fund goes?
 8 MR. GAUDIN: Well, just as kind of someone who is
 9 helping the discussion, the other focus groups, part of
 10 those discussions was some enumeration of partners that
 11 make deals work if the State can chip in a small amount,
 12 you know, and make the funds last and leverage and that
 13 kind of thing. That's where I was going at with this
 14 question to you, is, are there other places that could
 15 provide a portion of funds to make this small allocation
 16 to public facilities work more effectively? Is there
 17 someone that Commerce could team with or reach out to or
 18 partner with in some fashion that you're aware of? If you
 19 are, then that would be great, maybe we can open a
 20 dialogue with them.
 21 So that was where I was going with that question. And
 22 I'm hoping you do know.
 23 MS. KENT: Well, every grant that goes in there
 24 has a number of partners, that I've ever written. I mean,
 25 so I guess I'm sort of like, What do you mean with

1 partners? It is very -- very infrequently do you see a
 2 sole source funding for a project.
 3 So, Karen, maybe Craig, or whoever else is out there,
 4 let me know. But we partner and leverage to -- I mean,
 5 you'll have a dozen sources of funding in most projects,
 6 and that's just to get it built.
 7 MS. BYRNES: Yeah, I'm right with you, Patty.
 8 This is Karen. Every grant we've ever put in has more
 9 than one source, at least three or four, at least, that go
 10 into it to make the project go. And so I think we are
 11 leveraging our partners to the absolute hilt already. I
 12 don't know how you could do it better.
 13 MS. GILBERT: We had a comment from Robie Culver.
 14 She said that she thought that the infrastructure ranking
 15 looks about right. She's going to have to get off the
 16 phone soon, so she's going to send in her written
 17 comments.
 18 MR. GAUDIN: Excellent.
 19 You know, because of kind of where we went with our
 20 discussion, we skipped a portion of it. Someone has also
 21 expressed an interest to leave early on Friday afternoon.
 22 MS. KENT: Who could that be?
 23 MR. GAUDIN: I don't know.
 24 But I do want to take this opportunity to thank you
 25 very much for participating. I would certainly encourage

1 you to get the word out about our housing and community
 2 development survey. It's important to --
 3 Yes, ma'am.
 4 MS. GILBERT: Sorry. Robie commented.
 5 MS. CULVER THROUGH MS. GILBERT: Historic and
 6 housing tax credit information and training would be
 7 helpful as a partner. Might try to engage the investors
 8 in this type of conversation.
 9 MS. CRIDER: So partnering with SHPO.
 10 MR. GAUDIN: Thank you for that comment.
 11 MS. KENT: SHPO just reviews.
 12 MS. CRIDER: Oh, that's right.
 13 MS. KENT: I mean, when I hear "partner" I hear
 14 money.
 15 MR. GAUDIN: All right. With that in mind, you
 16 know, we have some categorical statements about where
 17 we're headed with our population and our economy and so
 18 on, which we've skipped over those. What I have heard
 19 from you, the fundamental answer is what you're asking for
 20 is a greater allocation of CDBG resources. Am I going
 21 away with an incorrect notion?
 22 MS. KENT: Well, a greater total allocation but
 23 perhaps divided between fewer categories or divided
 24 differently among the eligible categories, given the other
 25 resources available for some of those other eligible

1 activities.
 2 MR. GAUDIN: Thank you for defining that.
 3 So I guess we have some notions here about what might
 4 be some of our primary needs, but again, from what you
 5 have said, some additional perspective and commentary
 6 needs to come in on the survey.
 7 I see we have another question.
 8 MS. CULVER THROUGH MS. GILBERT: Yes, the partner
 9 in historic tax credits would be individuals that have
 10 money to invest. SHPO is involved as the regulator.
 11 MR. GAUDIN: All right. Well, listen, with that,
 12 I would like to say thank you very much for your time and
 13 your participation. If you have further comment or
 14 commentary you would like to offer, please send Stephanie
 15 or Jennifer, whose contact information is on the slide
 16 here, your questions or your comment or your position. If
 17 you wish to offer additional comments about the planning
 18 process or where we're going, I would very much appreciate
 19 receiving those kinds of things.
 20 With that, unless there's further discussion or
 21 anything else, I guess we'd be done for this afternoon.
 22 MS. KENT: You know, I'm not going to let you go
 23 quite yet.
 24 Karen, before you got on, one of my points was that
 25 the local government should be able to decide, when

1 they're submitting that CDBG grant, what their number-one
 2 need is and to not have an entire volume on the community
 3 needs assessment that covers everything from sewer to
 4 senior centers to addiction treatment to sidewalks. And
 5 maybe you could speak to that.
 6 MS. BYRNES: Thanks, Patty. I'm sorry, my other
 7 phone rang in the middle of that, and I'm sorry I was
 8 talking to two people at once.
 9 So at the beginning of the discussion, there was talk
 10 about the community being able to identify -- or the local
 11 government being able to say where greatest need is at the
 12 time?
 13 MS. KENT: Right. Without submitting as part of
 14 the grant a survey of the entire -- you know, everything
 15 under the sun community facilities needs. To just say
 16 this is what we pick and believe us.
 17 MS. BYRNES: Yes. I mean, just in the part of
 18 writing the grant procedurally, you know, you have your
 19 public hearings, you've identified what the greatest need
 20 is through this process, you've identified this project.
 21 And I think that we should be allowed to just leave that
 22 and that we don't have to back it up with a bunch of other
 23 information. We know what our greatest needs are in the
 24 community and we know we have to figure out how the
 25 funding can fit into a project.

1 I mean, like we said, this funding is not an amount
 2 that we compete for that's going to complete an entire
 3 project, ever. It's always a piece of that. So,
 4 obviously, when we put a project forward, it is definitely
 5 one of the greatest community needs we have. Otherwise,
 6 we wouldn't be going through, quite honestly, the trouble
 7 of trying to use CDBG funds. And that's just my honest
 8 answer. It can be a nightmare to try to get those funds
 9 to work in your project because of the conditions that
 10 come with those funds. So by just applying for them and
 11 putting them into that project, you are definitely saying
 12 this is our greatest need.

13 MR. GAUDIN: Well, thank you very much for your
 14 comments and your commentary.

15 Again, if you have additional things you wish to
 16 communicate about this topic or any of the other topics,
 17 please feel free to e-mail Stephanie or Jennifer Olson
 18 those notes. And thank you very much for attending
 19 today's webinar. And I very much appreciate your time and
 20 your perspective that you've brought to this meeting.

21 MS. KENT: Thank you. Have a great Friday
 22 afternoon.

23 MS. BYRNES: Thank you.

24 MR. GAUDIN: You're welcome.

25 MS. BYRNES: 'Bye.

1 MR. GAUDIN: 'Bye.

2 MR. McCORMICK: I think I was in the wrong
 3 meeting, seriously.

4 MR. GAUDIN: Which meeting were you --

5 MR. McCORMICK: I should have been in economic
 6 development. Because that conversation was all about
 7 health care. And the Livingston Food Pantry is not
 8 directly into health care. But we were funded to help --
 9 the grant we got, the CDBG grant we got is specifically
 10 for construction of a new facility that the Food Pantry is
 11 building in Livingston. And this facility will house the
 12 Food Pantry, a multipurpose community room, and a licensed
 13 community commercial kitchen.

14 MR. GAUDIN: You actually are at the right
 15 meeting, because that, too, is a public facility. That's
 16 a community facility.

17 MR. McCORMICK: Yeah, it is. And when I met with
 18 Gus and others and talked about this originally, Gus said,
 19 Well, we're going to direct you down this path, but if
 20 that doesn't work, we'll look at economic development.

21 Because what we are doing in this center, this new
 22 community center, is creating tools and support for
 23 economic development. This commercial kitchen is being
 24 designed to support entrepreneurs, existing small food
 25 processors, farmers and ranchers who want to process and

1 add value to their crops, to teach classes. We're working
 2 with Gallatin College at MSU on a course program that will
 3 train people to be employed in the hospitality industry.
 4 And, specifically, we're working to develop a curriculum
 5 that will train people for careers as restaurant and
 6 institution cooks.

7 I've had meetings and put together programs with an
 8 organization in Bozeman called Korman Marketing. They do
 9 all the hiring for Crazy Mountain Ranch, which is a huge
 10 guest ranch in Clyde Park owned by Altria. It's known
 11 locally around Livingston as the Marlboro Ranch because
 12 Altria used to be Philip Morris.

13 And so we're all about tackling the root causes of
 14 hunger in Livingston and Park County, and the major
 15 driver, of course, like anywhere, is economic.

16 80 percent, in an average month, of the people who come
 17 into our Food Pantry for emergency food support are there
 18 because they don't have moneys available to buy food. And
 19 the reason they don't have money, 80 percent are either
 20 unemployed or underemployed. About 55 percent are
 21 unemployed. They are what I would call employable. Then
 22 we've got 25 percent who are employed, some of them
 23 working two and three jobs, but the jobs they're working,
 24 you can guess, are minimum wage hourly, no benefits, and
 25 many of them seasonal.

1 MR. GAUDIN: Right.

2 MR. McCORMICK: Last year, the Livingston Job
 3 Service Center posted over 700 job openings. 17 percent
 4 of those jobs were for restaurant cooks and related
 5 kitchen workers. And I went out and interviewed the
 6 people running those ads. They couldn't find people with
 7 the barest, minimal qualifications to come into their
 8 kitchen and go to work. We're going to prepare people for
 9 those jobs.

10 So, you know, we're really more about economic
 11 development. For me, after 30 years in the corporate
 12 world, I moved to Montana to retire and go fishing, and
 13 that got pretty boring after a while so I got involved
 14 with the local Food Pantry. And what we're trying to do
 15 in Livingston is create a model that can be duplicated in
 16 other communities.

17 The community kitchen is really meant to support the
 18 local farm economy by giving farmers the opportunity to,
 19 rather than sell a truckload of dirty commodity beets, to
 20 bring those beets into this kitchen and run them through
 21 the huge food processor after they've all been cleaned and
 22 sanitized, vacuum-packed and sliced, diced, chopped, or
 23 whatever, in five-pound bags, and be able to sell to
 24 restaurants and institutions; so that they've added that
 25 value component to their product, and that's, of course,

1 where the money is.
 2 So we're hoping to drive the creation of new
 3 businesses, the expansion of existing businesses, and the
 4 bottom line is allow people to create new jobs because
 5 they need people to support their growing businesses.
 6 MR. GAUDIN: I think that's an admirable thing to
 7 be doing.
 8 MR. McCORMICK: So that's what our \$450,000 is
 9 going toward, brick and mortar.
 10 MR. GAUDIN: Well, not only are you providing a
 11 place for someone to get something to eat -- Right?
 12 MR. McCORMICK: Right. We will be serving meals.
 13 You know, the Food Pantry is still a significant part of
 14 this building.
 15 MR. GAUDIN: Right. But the building can have
 16 multiple functions.
 17 MR. McCORMICK: Right. The kitchen is like a
 18 timeshare condominium; you come in and you rent just the
 19 time you need. The kitchen and the multipurpose room, the
 20 community room, which will be used for meetings and
 21 serving meals and classes, and there's a couple of event
 22 planners locally who want to use it for things like
 23 wedding rehearsal dinners and what have you, that part of
 24 the equation, that will be self-supportive. The rental
 25 income on the kitchen will pay for the operation of the

1 paid for, no debt to service.
 2 And I think that's the way to use a CDBG grant other
 3 than just, you know, paying for things; use it to leverage
 4 additional opportunities.
 5 MR. GAUDIN: That's right. You're working with
 6 the ideal situation. I want to applaud you for this.
 7 MR. McCORMICK: Yeah. I went to a foundation in
 8 New York City and showed them that CDBG commitment, along
 9 with all other money we needed, and at that point we
 10 needed \$175,000 to put us over our goal. And when the guy
 11 saw that and saw that he was going to close the deal, he
 12 wrote a check for \$175,000. So we were done. I mean,
 13 we're never done, but --
 14 MR. GAUDIN: Right. You're on your way.
 15 MR. McCORMICK: Right.
 16 MR. GAUDIN: Thank you.
 17 (The meeting was concluded at 1:54 p.m.)
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1 kitchen, including the salary of the kitchen manager.
 2 And my hope is that we're going to develop our own
 3 line of Food Pantry products that will be sold at retail,
 4 so we will begin to self-fund the pantry so I can stop
 5 going out and trying to raise money all the time.
 6 MR. GAUDIN: That's excellent.
 7 MR. McCORMICK: Anyway, Rob, don't you think that
 8 conversation would have been better placed in the economic
 9 development?
 10 MR. GAUDIN: I think you're right. I mean,
 11 because you're using a public facility grant to create a
 12 public facility with excess capacity, and that excess
 13 capacity is being utilized in a way to promote development
 14 in the community.
 15 MR. McCORMICK: Right.
 16 MR. GAUDIN: It's like an ideal solution.
 17 So congratulations on that.
 18 MR. McCORMICK: Well, thanks to all of you. We
 19 raised about \$1.2 million. The CDBG grant was 450, and
 20 what that grant did that was so important, other than give
 21 us access to another \$450,000, it really helped us
 22 leverage the last couple of grants we needed to meet our
 23 goal. So we've got all the funding in place when we --
 24 We're doing groundbreaking in about two or three weeks,
 25 and when we open the door March 1, the facility is fully

COURT REPORTER'S CERTIFICATE

STATE OF MONTANA)
) ^{SS.}
COUNTY OF LEWIS AND CLARK)

I, CHERYL ROMSA, Court Reporter, residing in Helena, Montana, do hereby certify:

That the foregoing proceedings were reported by me in shorthand and later transcribed into typewriting; and that the -45- pages contain a true record of the proceedings to the best of my ability.

DATED this 16th day May, 2014.

s/Cheryl A. Romsa
CHERYL A. ROMSA