

Bob Dixon  
Presiding Commissioner

Rusty MacLachlan  
1<sup>st</sup> District Commissioner

John C. Russell  
2<sup>nd</sup> District Commissioner



Shane Schoeller  
Clerk of the Commission

Christopher J. Coulter, AICP  
County Administrator

Megan Applegate  
Executive Assistant

**COUNTY COMMISSION**  
**Greene County, Missouri**  
**(417) 868-4112**

**Greene County Commission**  
**Commission Briefing Minutes**

**Tuesday, April 11, 2023**  
8:45 AM  
Historic Courthouse, Room 212  
940 N. Boonville Ave.

PLEASE CHECK & RETURN  
PC  Absent  
CC1   
CC2

**Meeting Information**

Meeting link: <https://ocmo.webex.com/join/mapplegate> Access code: 2499 501 7983

**More ways to join**

Join by phone: +1-415-655-0001 Access code: 2499 501 7983

**Attendees:** John Russell, Rusty MacLachlan, Chris Coulter, Megan Applegate, Jeff Scott, Tina Phillips, Mike Cagle, Brent Johnson, Amanda Corcoran, Mailyn Jeffries, Rance Burger, Cindy Stein, Justin Hill.

**Teleconference Attendees:** Jim Arnott, Jeff Bassham, Robert Jehle and Michael Summers

**Informational Items**

**Budget-Jeff Scott**

- ERA1 and ERA2 update

**Human Resources-Mailyn Jeffries and Amanda Corcoran**

- Open Enrollment update.

**Chris Coulter**

- BOA reminder
- Update on Wilson Creek
- Contract for PIO services.

**Public Information Office-Robert Jehle**

- Wrapping up tasks for contract service person.
- Reminder of upcoming training until August.

**Items for Consideration and Action by the Commission**

**Discussion and Possible Vote: Economic YOP Tax Credit Application, Horses of Hope**

Commissioner Rusty MacLachlan moved to approve the YOP tax credit application for Horses of Hope and allow the presiding commissioner to sign the application. Commissioner John Russell seconded the motion and it passed. Yes: MacLachlan and Russell. Absent: Dixon.

**Other:**

With no other business the meeting was adjourned.

# NAP ATTACHMENT B - LOCAL GOVERNMENT CERTIFICATION

## Instructions

Law 32.110 RSMo requires a local government certification for all projects submitted to the Department of Economic Development, Neighborhood Assistance Program (NAP). All applicants, as part of their proposal, must submit this completed form. Applications submitted without a completed Local Government Certification form will be denied.

NAP applicants must complete Sections I, II, III, and IV of this form before forwarding to the appropriate government authority. Local governments must complete section V, and may, at their discretion, require supporting documentation and/or a copy of the actual NAP proposal as a condition for their endorsement. Such requests should be directed to the applicant, NOT the Department of Economic Development.

This form does not signify approval of a proposed NAP project by the local unit of government. This form serves only to certify that the proposed NAP project is not in conflict with the existing plans and ordinances approved, enacted, or enforced by the local unit of government.

## Section I. Applicant Information

LEGAL NAME OF APPLICANT	Horses of Hope - MO, Inc.		
OFFICIAL AGENCY ADDRESS	3555 S. Farm RD 253, Rogersville, MO 65742		
NAP CONTACT PERSON/TITLE	Michele McColm		
DAYTIME TELEPHONE NUMBER	620-429-0390	EMAIL ADDRESS	horsesofhopeswmo@gmail.com

## Section II. Description of the Proposed Project

Briefly summarize the project you intend to submit for participation in NAP. Describe the goals and NAP program outcomes you plan to achieve as well as the function and operation of the project.

HOPE for H.E.A.L.T.H (Healing Equine Activities for Lifelong Therapeutic Health) is a multi-faceted project that incorporates equine assisted mental health, therapeutic riding, equine assisted activities, and recreational opportunities to provide programs that serve clients with mental health diagnoses, physical, mental, emotional and behavioral disabilities, and those suffering from mental, physical and substance abuse. The goals and outcomes of the project include the following:

Clients with Mental Health Diagnoses: To improve the quality of life for individuals suffering from mental health diagnoses and substance abuse by utilizing equine assisted mental health (EAMH) activities and trauma informed individual and group psychotherapy. Clients will improve upon one area of mental health and wellness as it relates to their personally identified goals; Clients with Disabilities - To increase individual physical, cognitive, social and/or emotional development of day-to-day clients by utilizing therapeutic riding, and equine assisted activities. Clients of all ages will increase at least one skill set as it relates to physical, cognitive, social and/or emotional development over the course of one year; Women Suffering from Mental/Physical Abuse - To provide critical life and coping skills through EAMH and trauma focused group therapy activities to women suffering from physical and mental abuse. Women receiving EAMH/trauma focused group sessions will improve upon one area of quality of life as it relates to their personally identified goals.

**Section III. Service Area and Populations Served**

Briefly define and describe the geographic service area of this project and the targeted populations the project will serve. Attach a map showing the boundaries of the service area and project location.

Horses of Hope - MO, Inc., located in Rogersville, MO, will provide primary services to Webster County, as well as the following counties of: Greene, Polk, Dallas, Christian, Stone, Taney, Lawrence and Jasper. The targeted populations include clients of all ages with disabilities; clients of all ages with mental health diagnoses; women suffering from physical and mental abuse.

**Section IV. Statement of Intent & Notarization**

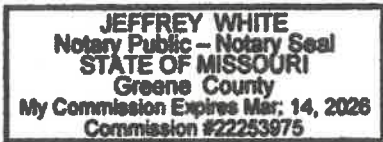
Statement of Intent to submit the application to the Missouri Department of Economic Development, NAP: I have examined this request in its entirety and believe it to be an accurate description of the project to be submitted by this organization for the purpose of securing support through the Neighborhood Assistance Program administered by the Missouri DED. In the event that the proposed project is significantly altered and information contained herein is no longer accurate, I understand that a new Local Government Certification will be required.

MUST BE SIGNED IN PRESENCE OF NOTARY Signature of Executive Director Michelle M. McColm Date 4-3-23

STATE OF Missouri )  
COUNTY OF Greene ) ss.

On this 3<sup>rd</sup> day of April in the year 2023 before me, Jeffrey White, a Notary Public in and for said state, personally appeared Michelle McColm [name of Corporate Officer/ Member], Executive Director [Official Title], Horses of Hope-Mo, Inc [Name of Corporation/ Agency], known to me to be the person who executed the within Agreement in behalf of said company and acknowledged to me that he or she executed the same for the purposes therein stated.

Jeffrey White  
Notary Public



My commission expires 3/14/26

**Section V. Local Government Certification**

On behalf of the following unit of government: Greene County Commission  
(Community)

I, Bob Dixon (Name), have determined, based upon the information presented herein, that the project:  
 Does not  Does appear to conflict with the existing plans and ordinances approved, enacted, or enforced by this body.

NAME <b>Bob Dixon</b>	TITLE <b>Presiding Commissioner</b>	
AGENCY <b>Greene County Commission</b>	TELEPHONE <b>417-868-4112</b>	EMAIL <b>bdixon@greencountymo.gov</b>
SIGNATURE <u>Bob Dixon</u>	DATE <u>04/13/2023</u>	