

March 20, 2019

By Fax: 919-733-2120

The Honorable Roy Cooper Governor of North Carolina 20301 Mail Service Center Raleigh, NC 27699-0301

By Fax: 919-716-6750

The Honorable Josh Stein North Carolina Attorney General 9001 Mail Service Center Raleigh, NC 27699-9001

By Fax: 919-715-4645

The Honorable Mandy Cohen Secretary of the Department of Health and Human Services Complaint Intake Unit 2711 Mail Service Center Raleigh, NC 27699-2711

By Fax: 919-715-3096

Mr. David A. King, Director of the Office of the Internal Auditor Department of Health and Human Services 2014 Mail Service Center Raleigh, North Carolina 27699-2014

#### Re: Request for Termination of North Carolina's Contract with Human Coalition

Dear Governor Cooper, Attorney General Stein, Secretary Cohen, and Mr. King:

Campaign for Accountability ("CfA") respectfully requests that you investigate and terminate the Department of Health and Human Services' ("DHHS") contract agreement with Human Coalition,

a part of the state's appropriation to Carolina Pregnancy Care Fellowship ("CPCF").<sup>1</sup> Human Coalition appears to be using this funding to support religious activities in violation of the United States and North Carolina constitutions, as well as violating the explicit terms of its CPCF appropriation.

#### **Background**

Human Coalition is a Texas-based 501(c)3 nonprofit organization dedicated to ending abortion in the United States. The group was originally organized in 2009 as Media Revolution Ministries to steer women seeking abortion providers online to crisis pregnancy centers. In 2014, Media Revolution Ministries changed its name to Online for Life. In 2015, the organization again changed its name, this time to Human Coalition, and explained that the majority of the organization's work now occurred offline in "local ministries."

Human Coalition first registered as a nonprofit in North Carolina on December 28, 2015.<sup>3</sup> In 2016 Human Coalition took over the First Choice Pregnancy Solutions clinic in Raleigh and renamed it the Cura Women's Care Clinic of Raleigh (also known as the Curo Women's Care Clinic of Raleigh). On May 15, 2017 Human Coalition registered Henry Colin LeCroy as its first lobbyist in North Carolina.<sup>4</sup> A second lobbyist, Robert Mitchell Touchton, registered on behalf of Human Coalition on June 5, 2017.<sup>5</sup>

On June 28, 2017, eighteen months after first registering as a nonprofit in North Carolina and one month after first registering lobbyists in the state, the North Carolina General Assembly appropriated \$1.3 million to the North Carolina Department of Health and Human Services, Division of Public Health for each fiscal year of the 2017-2019 biennium.<sup>6</sup> This appropriation funds Pregnancy Care Initiatives at CPCF and requires CPCF to transfer \$300,000 each year to Human Coalition to develop and implement a two-year Continuum of Care pilot program that provides "care and support to assist women experiencing crisis pregnancies to continue their pregnancies to full term." The program is to be administered through Human Coalition's Curo Women's Care Clinic of Raleigh.

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<sup>&</sup>lt;sup>1</sup> See Ex. A at § 11E.13 (Session Law 2017-57), full text available at <a href="https://www4.ncleg.net/sessions/2017/bills/senate/pdf/s257v9.pdf">https://www4.ncleg.net/sessions/2017/bills/senate/pdf/s257v9.pdf</a>.

<sup>&</sup>lt;sup>2</sup> Certificate of amendment on file with and available from the Texas Secretary of State. *Accessible at* <a href="https://pregnancyhelpnews.com/new-look-name-for-online-for-life">https://pregnancyhelpnews.com/new-look-name-for-online-for-life</a>.

<sup>&</sup>lt;sup>3</sup> See Ex. B (Human Coalition's Application for Certificate of Authority for Nonprofit Corporation, filed Dec. 28, 2015).

<sup>&</sup>lt;sup>4</sup> See Ex. C (Lobbyist Registration Statement 2017 for Henry Colin LeCroy, filed May 15, 2017), available at https://www.sosnc.gov/online\_services/search/lobbying\_results.

<sup>&</sup>lt;sup>5</sup> See Ex. D (Lobbyist Registration Statement 2017 for Robert Mitchell Touchton, filed June 5, 2017), available at https://www.sosnc.gov/online\_services/search/lobbying\_results.

<sup>&</sup>lt;sup>6</sup> See Ex. A, supra note 1, at § 11E.13.

<sup>&</sup>lt;sup>7</sup> See id. at § 11E.13(b).

Language in the Continuum of Care pilot program appropriation specifically provides that funding may be spent for "nonsectarian purposes only," and cannot be used for religious purposes.<sup>8</sup> Human Coalition is also required to use "care coordinators" to assist the program participants in connecting with appropriate resources, as well as a trained mentor who will guide the participant "toward positive lifestyle changes," and employ licensed nursing staff to provide medical support to program participants, especially during initial counseling sessions.<sup>10</sup>

#### **Human Coalition's Improper Religious Use of State Funds**

Human Coalition's Clinic Volunteer Application

Human Coalition's website states that "[v]olunteers are the heart and soul of what makes [Human Coalition's] *ministry* happen." Referring to its work as a "ministry" rather than the provision of healthcare or social services denotes the religious mission that appears to form the basis of Human Coalition's efforts.

In addition to requesting standard contact and biographical information such as education, employment, volunteer, and criminal history, the volunteer application used by Curo Women's Care Clinic of Raleigh includes several questions regarding the applicant's faith:

- Have you made a personal profession of faith in Jesus Christ? If you answered yes [], please share.
- Please provide the following information concerning your local church. (Church Name, Address, Denomination, Phone, Pastor's Name, Position you have served in the church.)
- What special skills, talents, gifts or personality traits would you bring to this ministry?
- How would you rate yourself in the knowledge of what the Bible teaches about abortion?<sup>12</sup>

The form also includes questions that, though not explicitly religious, appear coded to suggest a religious undertone. These include whether the applicant has "ever known an unwed mother" and directs those who answer yes to explain that answer.<sup>13</sup> Additionally, the form asks applicants

<sup>&</sup>lt;sup>8</sup> *Id*.

<sup>&</sup>lt;sup>9</sup> See id. at § 11E.13(c)(1).

<sup>&</sup>lt;sup>10</sup> See id. at § 11E.13(c)(2)-(3).

<sup>&</sup>lt;sup>11</sup> See Ex. E (Raleigh page of Human Coalition website (last visited March 13, 2019)(emphasis added)), available at https://www.humancoalition.org/cities/raleigh/.

<sup>12</sup> See Ex. F (Curo Women's Care Clinic of Raleigh Volunteer Application), available at https://docs.google.com/forms/d/e/1FAIpQLSdWBAyfoHOhzYHM47EjDFZIAt4eQ07F1DJ03BRO-FrhrHOZZw/viewform.

<sup>&</sup>lt;sup>13</sup> *Id*.

"[u]nder what circumstances would you consider abortion an alternative for a woman with a crisis pregnancy?"<sup>14</sup> The form directs the applicant to pick from among four options:

- Never an option
- In cases of rape or incest
- In cases of where the mother's life was in extreme peril
- In cases of extreme psychological distress<sup>15</sup>

Finally, there is a list of potential volunteer positions from which applicants may choose including "Prayer Team Advocate." <sup>16</sup>

Legally, Human Coalition cannot assess whether potential volunteers are fit based on their religious beliefs or affiliations. Neither should those applicants' relationships with unwed mothers nor personal beliefs regarding when it is appropriate to exercise one's constitutional right to an abortion be dispositive. And, obviously, Prayer Team Advocate is not a secular position. In total, Human Coalition's volunteer application demonstrates the group's religious nature.

#### Human Coalition Provides Christian Mentoring

Human Coalition's Continuum of Care pilot program pairs participants with trained mentors.<sup>17</sup> Although the appropriation requires all aspects of the state-funded pilot program to be nonsectarian, Human Coalition describes mentoring as "a vital part of the Continuum of Care program that helps connect our clients to the church, so they don't have to walk their parenting journey alone."<sup>18</sup> Human Coalition's Raleigh clinic purports to hold mentor training sessions every month. In 2018, Human Coalition advertised its mentor training as "your chance to demonstrate the love of Christ,"<sup>19</sup> apparently only targeting Christian mentors. In 2019, Human Coalition promotes its mentor training with a biblical quote from the New Testament: "Let us not become weary in doing good, for at the proper time we will reap a harvest if we do not give up.' (Galatians 6:9)."<sup>20</sup>

Human Coalition further describes its mentoring program as a way to "disciple" the women receiving Human Coalition's Continuum of Care services, stating:

<sup>15</sup> *Id*.

<sup>&</sup>lt;sup>14</sup> *Id*.

<sup>&</sup>lt;sup>16</sup> *Id* 

<sup>&</sup>lt;sup>17</sup> See Ex. A, supra note 1, at §11E.13(c)(1).

<sup>&</sup>lt;sup>18</sup> See Ex. G (Continuum of Care webpage of Human Coalition website (last visited March 13, 2019)), available at <a href="https://www.humancoalition.org/events/mentor-program-raleigh/">https://www.humancoalition.org/events/mentor-program-raleigh/</a>.

<sup>&</sup>lt;sup>19</sup> See Ex. H (2018 Mentor Training page on Human Coalition website (last visited March 13, 2019)), available at <a href="http://web.archive.org/web/20181217221234/https://www.humancoalition.org/events/mentor-training/">http://web.archive.org/web/20181217221234/https://www.humancoalition.org/events/mentor-training/</a>.

<sup>&</sup>lt;sup>20</sup> See Ex. G, supra note 18.

As a mentor, you will form a lasting relationship with a mother by providing a healthy support system. You will also experience the blessing of discipling a mom as you help her build a home where Christ is honored. Together, we will connect the mom with a local church body, so she can continue growing in her knowledge and understanding of Jesus. Thank you for prayerfully considering becoming a mentor to our moms. Through your involvement, we can reach hurting and confused women with the love of Christ. May God bless you for your faithful support.<sup>21</sup>

#### Human Coalition's Church Outreach

Human Coalition's website includes information about its "church outreach."<sup>22</sup> There is a page dedicated to explaining Human Coalition's belief that the "transformation [to an anti-abortion culture] begins with the church, moving the culture into one that values the life of every preborn human."<sup>23</sup>

The church outreach page includes a "church toolkit" that "provides pastors and churches resources to address the issue of abortion with grace and compassion, clear Biblical understanding, and concrete steps for the congregation."<sup>24</sup> The toolkit provides materials for two Christian sermon packages, along with a section titled "How to Talk About Abortion," complete with biblical citations, and a link to a book titled *Deliver Us from Abortion*, written by the group's co-founder and president, Brian Fisher.<sup>25</sup>

Human Coalition also provides other "Resources for the Church," including videos and talking points to teach the pro-life pastors to "respond with grace, compassion, and truth to Planned Parenthood." Human Coalition counsels pastors that though they "may be outraged by what [they] are seeing, as pastors and shepherds," they need to lead the people in their congregation in related discussions.<sup>27</sup> There are links to heavily edited videos of Planned Parenthood employees that were secretly filmed by the Center for Medical Progress as well as "talking points" consisting of bulleted lists identifying the Planned Parenthood employee(s) in the video and summarizing the

<sup>&</sup>lt;sup>21</sup> See Ex. I (Mentor Application page on Human Coalition website (last visited March 13, 2019)), available at <a href="https://www.humancoalition.org/contact/will-you-be-a-mentor-rdu/">https://www.humancoalition.org/contact/will-you-be-a-mentor-rdu/</a>.

<sup>&</sup>lt;sup>22</sup> See Ex. J (Church Outreach page on the Human Coalition website (last visited March 13, 2019)), available at <a href="https://www.humancoalition.org/church-outreach/">https://www.humancoalition.org/church-outreach/</a>.

<sup>&</sup>lt;sup>23</sup> *Id*.

<sup>&</sup>lt;sup>24</sup> *Id*.

<sup>&</sup>lt;sup>25</sup> See Ex. K (The Church Toolkit page of the Human Coalition website (last visited March 13, 2019)), available at <a href="https://www.humancoalition.org/church-outreach/the-church-toolkit/">https://www.humancoalition.org/church-outreach/the-church-toolkit/</a>.

<sup>&</sup>lt;sup>26</sup> See Ex. J, supra note 22.

<sup>&</sup>lt;sup>27</sup> See Ex. L (Pro-Life Pastor page of the Human Coalition website (last visited March 13, 2019)), available at <a href="https://www.humancoalition.org/church-outreach/pro-life-pastor/">https://www.humancoalition.org/church-outreach/pro-life-pastor/</a>.

bad acts supposedly shown in the video.<sup>28</sup> These "talking points" stress that pastors must "always lead with grace" and remind readers that "[s]tatistics say 1 in 3 women in the church have had abortions" and that "[m]any men in the church have been a part of one as well."<sup>29</sup>

Notably, Human Coalition's website provides information only for Christian churches. It does not discuss partnering with, or even refer to, any non-Christian religious institutions.

#### **Legal Analysis**

The Constitutions of the United States and North Carolina Ban the Establishment of Religion

The First Amendment to the United States Constitution dictates that "Congress shall make no law respecting an establishment of religion." This mandate applies to the states through the Fourteenth Amendment.<sup>31</sup>

The North Carolina Constitution similarly guarantees that "no human authority shall... control or interfere with the rights of conscience," and that no person shall "be subjected to discrimination by the State because of ... religion." The Supreme Court of North Carolina has asserted that "while the religion clauses of the state and federal Constitutions are not identical, they secure similar rights.... Thus, we may utilize Establishment Clause jurisprudence to examine legislation for 'aspects of religious partiality' prohibited by both constitutions."

The U.S. Supreme Court has long interpreted the prohibition on government establishment of religion to prohibit the use of public funds to promote or endorse religious activities.<sup>35</sup> In *Mitchell v. Helms*, where plaintiffs challenged the use of public funds to provide instructional materials to students at private religious schools, the Supreme Court articulated the standards for analyzing Establishment Clause challenges to public funding.<sup>36</sup> Justice O'Connor concurred in the judgment upholding the program, agreeing with the plurality that the funding was provided for a secular

<sup>30</sup> U.S. CONST. amend. I.

<sup>&</sup>lt;sup>28</sup> Id. These videos have resulted in multiple felony charges against Center for Medical Progress's founder, David Daleiden, and his colleague Sandra Merritt. See Press Release, Attorney General Xavier Becerra Announces Charges Filed Against David Robert Daleiden for Criminal Invasion of Privacy, STATE OF CALIFORNIA DEPARTMENT OF JUSTICE (March 28, 2017), available at https://oag.ca.gov/news/press-releases/attorney-general-xavier-becerra-announces-charges-filed-against-david-robert.

<sup>&</sup>lt;sup>29</sup> *Id*.

<sup>&</sup>lt;sup>31</sup> Everson v. Bd. of Educ., 330 U.S. 1, 8 (1947).

<sup>&</sup>lt;sup>32</sup> N.C. CONST. art. I, § 13.

<sup>&</sup>lt;sup>33</sup> N.C. CONST. art. I, § 19.

<sup>&</sup>lt;sup>34</sup> In re Appeal of Springmoor, Inc., 348 N.C. 1, 5 (1998) (citing Heritage Village Church & Missionary Fellowship, Inc. v. North Carolina, 299 N.C. 399, 406 (1980)).

<sup>&</sup>lt;sup>35</sup> Everson, 330 U.S. at 16 ("No tax in any amount, large or small, can be levied to support any religious activities or institutions, whatever they may be called, or whatever form they may adopt to teach or practice religion."); *Mitchell v. Helms*, 530 U.S. 793, 840 (2000) (O'Connor, J. concurring) ("our decisions 'provide no precedent for the use of public funds to finance religious activities").

<sup>&</sup>lt;sup>36</sup> Mitchell v. Helms, 530 U.S. 793 (2000).

purpose, on a neutral basis to secular and sectarian schools, and was not used to advance religion.<sup>37</sup> Because the Court did not reach a majority opinion, her concurrence is the controlling opinion from the case.<sup>38</sup> Justice O'Connor wrote separately from the plurality to emphasize existing precedent that, while it is relevant to an Establishment Clause analysis that the aid in question is provided on a basis that is neutral regarding religion, a government aid program does not pass constitutional muster "solely because of the neutral criteria it employs as a basis for distributing aid." The government may fund secular functions performed by religious organizations, however the actual diversion of government aid to religious indoctrination is not consistent with the Establishment Clause.<sup>40</sup>

One year later, in applying the *Mitchell v. Helms* standards to a challenge to a Maryland program that denied state grants to a private religious college, the U.S. Court of Appeals for the Fourth Circuit recognized "fundamental guideposts" for analyses of challenges to public funding under the Establishment Clause:

First, the neutrality of aid criteria is an important factor, even if it is not the only factor, in assessing a public assistance program. Second, the actual diversion of government aid to religious purposes is prohibited.<sup>41</sup>

In that case, the Fourth Circuit held that the plaintiff private college was entitled to state funding because the funding program had a secular purpose, the criteria for receiving aid were neutral regarding religion, and there was no evidence that the plaintiff had used or would use the aid for religious purposes.<sup>42</sup> Though the court thought it unnecessary to decide whether the plaintiff institution was pervasively sectarian, nevertheless it found that the plaintiff institution was not, and held the funding did not violate the Establishment Clause.<sup>43</sup>

Applying the same guideposts to North Carolina's grant for Human Coalition's Continuum of Care pilot program, however, the funding likely fails the articulated test. While North Carolina provided aid in a neutral manner and for a secular purpose, Human Coalition appears to focus its care specifically on Christian aid recipients.<sup>44</sup> Even though the state's aid criteria are neutral, Human

<sup>&</sup>lt;sup>37</sup> *Id.* at 836-37.

<sup>&</sup>lt;sup>38</sup> Columbia Union College v. Oliver, 254 F.3d 496, 504 n. 1 (4<sup>th</sup> Cir. 2001) (quoting Marks v. United States, 430 U.S. 188, 193 (1977) ("When a fragmented Court decides a case and no single rationale explaining the result enjoys the assent of five Justices, the holding of the Court may be viewed as that position taken by those Members who concurred in the judgments on the narrowest grounds.")).

<sup>&</sup>lt;sup>39</sup> *Mitchell*, 530 U.S. at 839.

<sup>&</sup>lt;sup>40</sup> *Id.* at 840-41.

<sup>&</sup>lt;sup>41</sup> Columbia Union College, 254 F.3d at 504.

<sup>&</sup>lt;sup>42</sup> *Id.* at 504-06.

<sup>&</sup>lt;sup>43</sup> *Id.* at 508-10.

<sup>&</sup>lt;sup>44</sup> Human Coalition's website repeatedly references women and men "in the church" when discussing its services, but never mentions women of other religions or non-denominational individuals. *See*, *e.g.*, Ex. L, *supra* note 27.

Coalition's own criteria for selecting whom it serves do not appear to be, consequently violating the Establishment Clause.

Further, Human Coalition's descriptions of its Continuum of Care programming provide "evidence that the government aid in question has resulted in religious indoctrination." Human Coalition states that mentoring is "a vital part of the Continuum of Care program that helps connect [their] clients to the church," and proclaims that "transformation begins with the church." These and similar statements make clear that Human Coalition's programming results in actual diversion of government aid to religious purposes, further disqualifying the organization from receiving government funding.

North Carolina awarded Human Coalition a two-year grant totaling \$600,000 to provide nonsectarian pregnancy care and services to women visiting its Raleigh clinic. Yet Human Coalition refers to its work as a "ministry" and uses sectarian messaging to describe all of the services that it provides. Human Coalition explicitly recruits volunteers and mentors who will encourage, or even compel, clients to accept a particular religious message. By any measure Human Coalition is a pervasively sectarian organization and an inappropriate recipient of state money.

This programming raises serious questions regarding potential violations of the United States and North Carolina Constitutions, as well as the explicit terms of Human Coalition's Continuum of Care pilot program grant.

Human Coalition's Continuum of Care Funding Should Be Terminated

On October 4, 2017 DHHS signed an agreement with CPCF regarding the \$2.6 million appropriation provided for by Conference Committee Report for S.L. 2017-57.<sup>48</sup> Human Coalitions is a sub-recipient of the CPCF funds,<sup>49</sup> and is similarly bound by the agreement. The agreement states that the funding recipient must "comply with all laws . . . that are applicable" and empowers DHHS to "immediately terminate all or any portion" of the agreement if the funding recipient "breaches any [agreement] obligation." In addition, the agreement reaffirms that Continuum of Care funding may only be used for "nonsectarian purposes" and requires the use of

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<sup>&</sup>lt;sup>45</sup> Columbia Union College, 254 F.3d at 505-06 (citing Mitchell v. Helms, 530 U.S. 793, 858 (2000) (O'Connor, J. concurring)).

<sup>&</sup>lt;sup>46</sup> See Ex. G, supra note 18.

<sup>&</sup>lt;sup>47</sup> See Ex. J, supra note 22.

<sup>&</sup>lt;sup>48</sup> See Ex. M (Special Appropriations Agreement between the State of North Carolina, Department of Health and Human Services, Division of Public Health and Carolina Pregnancy Care Fellowship, effective July 1, 2017).

<sup>&</sup>lt;sup>49</sup> *Id.* at 2, 3, 30-31; *see also*, Ex. N (Medical Clinic Project involving Carolina Pregnancy Care Fellowship and Human Coalition).

<sup>&</sup>lt;sup>50</sup> See Ex. M, supra note 48, at 3.

<sup>&</sup>lt;sup>51</sup> *See id* at 4.

licensed nursing staff.<sup>52</sup> Under the agreement's own terms, DHHS is entitled to terminate Human Coalition's contract.<sup>53</sup>

In the event that the state does not terminate Human Coalition's contract, however, the North Carolina Supreme Court has affirmed its "long-standing holdings that taxpayers have standing to challenge unlawful or unconstitutional government expenditures," concluding "that taxpayers are entitled to seek equitable relief in the form of a declaratory judgment." Specifically, "[w]here there is a legally recognized injury, like breach of contract, or where an important public policy is at issue . . . N.C. Gen. Stat. § 1-253 provides that the complainant is entitled to a declaration."

Human Coalition's flagrant disregard not only of constitutional prohibitions against the establishment of religion, but also of the explicit terms of its grant funding, entitle DHHS to terminate the contract and could form the basis of a taxpayer suit. The terms of the appropriation clearly state "[t]hese funds shall be used for nonsectarian purposes only." It appears, however, that Human Coalition is using this funding to support its faith-based mentoring program as well as its overtly religious messaging. DHHS should terminate Human Coalition as a sub-recipient under the CPCF agreement for its failure to comply with the terms of the agreement. Additionally, North Carolina taxpayers have standing to challenge the state's funding of Human Coalition in court.

#### Grounds for Investigation by the Office of the Internal Auditor

The Office of the Internal Auditor of the Department of Health and Human Services must "[c]onduct independent analysis of programs carried out or financed by the Department [] for the purpose of promoting economy and efficiency in the administration of, or preventing and detecting waste, management, misconduct, fraud and abuse in its programs and operations."<sup>57</sup> Further, the Internal Auditor is responsible for "[k]eep[ing] the Secretary of the Department [] informed concerning fraud, abuses, and deficiencies relating to programs and operations administered or financed by the Department [], recommend corrective action concerning fraud, abuses, and deficiencies, and report on the progress made in implementing corrective action."<sup>58</sup>

As illustrated above, Human Coalition's pervasive use of faith-based language, reliance on church affiliations, and emphasis on its mission to align mothers with the organization's Christian beliefs raise questions about the constitutionality and propriety of this program. It appears that Human Coalition views its "ministry" as fully sectarian and does not appear to use its state funding separately from its self-proclaimed faith-based work. Moreover, Human Coalition's

<sup>&</sup>lt;sup>52</sup> *Id* at 4-5.

<sup>&</sup>lt;sup>53</sup> *Id* at 4.

<sup>&</sup>lt;sup>54</sup> Goldston v. State, 361 N.C. 26, 28 (2006).

<sup>&</sup>lt;sup>55</sup> Sanders v. State Personnel Comm'n, 197 N.C. App. 314, 323 (N.C. Ct. App. 2009) (citation omitted).

<sup>&</sup>lt;sup>56</sup> See Ex. A, supra note 1, at § 11E.13(b).

<sup>&</sup>lt;sup>57</sup> N.C. Gen. Stat. § 143B-216.50(b)(5).

<sup>&</sup>lt;sup>58</sup> N.C. Gen. Stat. § 143B-216.50(b)(6).

implementation of certain required programming, such as the mentoring program, appears to be affirmatively rooted in Christian ideology.<sup>59</sup>

In addition, the terms of the appropriation state that the pilot program must include the "use of licensed nursing staff in the Human Coalition's Raleigh clinic to provide medical support to program participants.<sup>60</sup> Human Coalition does not appear to employ full-time licensed nursing staff and therefore may also fail to meet this requirement.

The state's grants to Human Coalition appear to constitute serious misuse of public funds. An investigation by the Office of the Internal Auditor is necessary, and corrective action appears to be warranted.

#### **Conclusion**

It is exceedingly likely that at least some of Human Coalition's expenditures under the State's grant violate provisions of both the United States and North Carolina Constitutions, as well as the explicit terms of the grant funding. Given that the state has appropriated a total of \$600,000 in grants to the organization—and may consider continuing or even expanding the pilot program in 2019—an investigation into Human Coalition's use of public funds is imperative.

For these reasons, CfA urges the Office of the Internal Auditor to investigate the North Carolina Department of Health and Human Services' contract with Human Coalition and recommends that Governor Cooper take the appropriate corrective action.

Sincerely,

Alice C.C. Huling

Succepi

Counsel

<sup>&</sup>lt;sup>59</sup> See, Section entitled *Human Coalition Provides Christian* Mentoring, *supra* pgs. 4-5. <sup>60</sup> See Ex. A, *supra* note 1, at §11E.13(c)(2).

## EXHIBIT A

#### GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2017

#### SESSION LAW 2017-57 SENATE BILL 257

AN ACT TO MAKE BASE BUDGET APPROPRIATIONS FOR CURRENT OPERATIONS OF STATE DEPARTMENTS, INSTITUTIONS, AND AGENCIES, AND FOR OTHER PURPOSES.

The General Assembly of North Carolina enacts:

#### PART I. TITLE OF ACT AND INTRODUCTION

#### TITLE OF ACT

**SECTION 1.1.** This act shall be known as the "Current Operations Appropriations Act of 2017."

#### INTRODUCTION

**SECTION 1.2.** The appropriations made in this act are for maximum amounts necessary to provide the services and accomplish the purposes described in the budget in accordance with the State Budget Act. Savings shall be effected where the total amounts appropriated are not required to perform these services and accomplish these purposes, and the savings shall revert to the appropriate fund at the end of each fiscal year, except as otherwise provided by law.

#### PART II. CURRENT OPERATIONS AND EXPANSION GENERAL FUND

#### CURRENT OPERATIONS AND EXPANSION/GENERAL FUND

**SECTION 2.1.** Appropriations from the General Fund of the State for the maintenance of the State departments, institutions, and agencies, and for other purposes as enumerated, are made for the fiscal biennium ending June 30, 2019, according to the following schedule:

| Current Operations – General Fund                     | FY 2017-2018     | FY 2018-2019     |
|---|------------------|------------------|
| EDUCATION   |                  |                  |
| Community Colleges System Office                      | \$ 1,121,815,001 | \$ 1,141,757,845 |
| Department of Public Instruction                      | 9,046,403,622    | 9,425,109,426    |
| Appalachian State University East Carolina University | 134,672,993      | 134,672,993      |
| Academic Affairs                                      | 214,598,809      | 214,598,809      |
| Health Affairs  | 74,373,798       | 75,014,745       |
| Elizabeth City State University                       | 31,964,712       | 31,154,712       |
| Fayetteville State University                         | 52,116,162       | 52,116,162       |



- e. Average length of interpregnancy interval.
- f. Percent of children meeting developmental milestones in the first year.
- g. Number of emergency room visits related to child health in the first two years.
- (2) For the 17P Intervention Trial, relative risk of preterm birth in treated versus untreated program participants.

**SECTION 11E.12.(e)** Not later than three months after the Department receives the report due under subsection (d) of this section, the Department shall submit a final report to the Joint Legislative Oversight Committee on Health and Human Services and the Fiscal Research Division evaluating the demonstration project. At a minimum, the report shall include all of the following:

- (1) An estimate of the cost to expand the program incrementally and statewide.
- (2) An estimate of any potential savings of State funds associated with expansion of the program.
- (3) If expansion of the program is recommended, a time line for expanding the program.

**SECTION 11E.12.(f)** The demonstration project authorized under this section shall terminate upon the submission of the report due under subsection (d) of this section by the University of North Carolina at Chapel Hill.

#### **FUNDS FOR PREGNANCY CARE INITIATIVES**

**SECTION 11E.13.(a)** Of the funds appropriated in this act to the Department of Health and Human Services, Division of Public Health, the sum of one million three hundred thousand dollars (\$1,300,000) in nonrecurring funds for the 2017-2018 fiscal year and the sum of one million three hundred thousand dollars (\$1,300,000) in nonrecurring funds for the 2018-2019 fiscal year shall be allocated to the Carolina Pregnancy Care Fellowship, a nonprofit organization, to be used as follows:

- (1) \$800,000 in nonrecurring funds for each fiscal year of the 2017-2019 fiscal biennium shall be used to provide grants to purchase durable medical equipment for clinics that apply to the Carolina Pregnancy Care Fellowship for such equipment.
- (2) \$170,000 in nonrecurring funds for each fiscal year of the 2017-2019 fiscal biennium may be used to provide grants for training on the use of durable medical equipment to clinics that apply to the Carolina Pregnancy Care Fellowship for such training.
- (3) \$30,000 in nonrecurring funds for each fiscal year of the 2017-2019 fiscal biennium may be used by Carolina Pregnancy Care Fellowship for administrative purposes related to the grants authorized by subdivisions (1) and (2) of this subsection.
- (4) \$300,000 in nonrecurring funds for each fiscal year of the 2017-2019 fiscal biennium shall be transferred to the Human Coalition, a nonprofit organization, to develop and implement a two-year continuum of care pilot program as provided in subsection (b) of this section.

**SECTION 11E.13.(b)** Funds allocated to the Human Coalition shall be used to develop and implement a two-year pilot program at its Raleigh clinic to provide a continuum of care and support to assist women experiencing crisis pregnancies to continue their pregnancies to full term. These funds shall be used for nonsectarian purposes only.

**SECTION 11E.13.(c)** The pilot program authorized by subsection (b) of this section shall consist of at least all of the following components:

(1) The use of care coordinators to perform the following functions:

- a. Assess the immediate challenges causing a program participant to seek abortion and eliminate these challenges by assisting the program participant in connecting to appropriate resources. The care coordinator shall personally assist a program participant in connecting to appropriate resources, when appropriate.
- b. Introduce each program participant to a trained mentor who will continue to guide the program participant toward positive lifestyle changes.
- (2) The use of licensed nursing staff in the Human Coalition's Raleigh clinic to provide medical support to program participants.
- (3) Close collaboration between care coordinators and licensed nursing staff during initial counseling sessions in order to accomplish the following:
  - a. Appropriately introduce continuum of care services available through the pilot program.
  - b. Create individual care plans for program participants and their families to help build a stable family life for the duration of the pregnancy. Care plans should identify and address any further challenges identified by care coordinators with encouragement and additional resources.

**SECTION 11E.13.(d)** By November 1, 2017, and periodically thereafter, the Human Coalition shall report to the Department on the start-up and operations of the pilot program authorized by subsection (b) of this section. By April 1, 2018, the Department shall report to the Joint Legislative Oversight Committee on Health and Human Resources and the Fiscal Research Division on the status of the pilot program.

**SECTION 11E.13.(e)** By April 1, 2019, the Department shall submit a final report on the pilot program authorized by subsection (b) of this section to the Joint Legislative Oversight Committee on Health and Human Services and the Fiscal Research Division. At a minimum, the Department's final report shall include all of the following:

- (1) An estimate of the cost to expand the program incrementally and statewide.
- (2) An estimate of any potential savings of State funds associated with expansion of the program.
- (3) If expansion of the program is recommended, a time line for expanding the program.

**SECTION 11E.13.(f)** Unless otherwise extended by law, the pilot program authorized by subsection (b) of this section expires June 30, 2019.

#### COMMUNICABLE DISEASE TESTING

**SECTION 11E.14.** Of the funds appropriated in this act to the Department of Health and Human Services, Division of Public Health, State Laboratory of Public Health, the sum of three hundred thousand dollars (\$300,000) in recurring funds and the sum of three hundred thousand dollars (\$300,000) in nonrecurring funds for each fiscal year of the 2017-2019 fiscal biennium shall be used for the following purposes:

- (1) To provide testing for Hepatitis C and other priority communicable diseases identified by the Division of Public Health.
- (2) To provide individuals who test positive for Hepatitis C and other priority communicable diseases with access to appropriate treatment options.

### SUBPART XI-F. DIVISION OF MH/DD/SAS AND STATE OPERATED HEALTHCARE FACILITIES

#### FUNDS FOR THE NORTH CAROLINA CHILD TREATMENT PROGRAM

### EXHIBIT B

### State of North Carolina Department of the Secretary of State

SOSID: 1488146 Date Filed: 12/28/2015 8:50:00 AM Elaine F. Marshall North Carolina Secretary of State

C2015 357 00085

#### APPLICATION FOR CERTIFICATE OF AUTHORITY FOR NONPROFIT CORPORATION

Pursuant to §55A-15-03 of the General Statutes of North Carolina, the undersigned corporation hereby applies for a Certificate of Authority to conduct affairs in the State of North Carolina, and for that purpose submits the following:

| 1. The name of the corporation is Human Coalition  |  |   |   |  |
|--|--|---|---|--|
|  | and if that name is unavailable for u  | and if that name is unavailable for use in the State of North Carolina, the name the corporation wishes |   |  |
|  | to use is:   |   |   |  |
| 2.   | The state or country under whose la  | ws the corporation was organized is:  | Texas   |  |
| 3.   | . The date of incorporation was 1/21/2009 ; its period of duration is: Perpetual |   |   |  |
| 4.   | The street address of the principal  | office of the corporation is:   |   |  |
|  | Number and Street 7800 N. Dallas F   | arkway, Suite 550   |   |  |
|  | City, State, Zip Code_Plano, Texas 7   | 75024   |   |  |
| 5.   | The mailing address if different from  | om the street address of the principal  | office of the corporation is:   |  |
| 6. The street address and county of the registered office in the State of North Carolina is: |  |   |   |  |
|  | Number and Street 176 Mine Lake Court, Suite 100                                 |   |   |  |
|  | City, State, Zip Code_Raleigh, NC 2  | 7615-6417   | County: Wake  |  |
| 7.   | The mailing address if different from  | om the street address of the registered   | l office in the State of North Carolina is:   |  |
| 8.   | The name of the registered agent in  | the State of North Carolina is: InCorp  | Services, Inc.  |  |
| 9.   |  | esses of the current officers of the cor  |   |  |
|  | Name   | <u>Title</u>  | Business Address  |  |
| _  | rian E. Fisher   | President/Treasurer Secretary   | 7800 N. Dallas Pkwy., Suite 550, Plano, TX 75024 7800 N. Dallas Pkwy., Suite 550, Plano, TX 75024 |  |
|  |  | costotaly   | 7000 N. Salitas F Wy., Sulte 500, Fizilio, FX 7502  |  |
|  |  |   |   |  |
|  |  |   |   |  |
| _  |  | ·   |   |  |
| _  |  |   |   |  |
| _  |  |   |   |  |

### APPLICATION FOR CERTIFICATE OF AUTHORITY FOR NONPROFIT CORPORATION

Page 2

| 10. | (Check one      | of the following | lowing.)          |  |                      |  |
|-----|-----------------|------------------|-------------------|--|----------------------|--|
|     | a               | The c            | orporation has m  | embers.  |                      |  |
|     | ъ               | ✓ The c          | orporation does   | not have members.                                |                      |  |
| 11. |                 |                  |                   | or document of simil<br>ecords in the state or   |                      | nenticated by the Secretary of State or other ation.   |
| 12. |                 |                  |                   | fictitious name in ord<br>adopting the fictitiou |                      | s in this State, a copy of the resolution of its board |
| 13. | This applic     | ation will       | be effective upor | n filing, unless a date                          | and/or time is speci | fied:  |
| Γhi | s the <u>23</u> | day of           | December          | , 20_15  |                      |  |
|     |                 |                  |                   |  |                      | Human Coalition  |
|     |                 |                  |                   |  |                      | Name of Corporation                                    |
|     |                 |                  |                   |  |                      | SMILL  |
|     |                 |                  |                   |  |                      | Signature  |
|     |                 |                  |                   |  |                      | Barry Moerschell, General Counsel/Secretary            |
|     |                 |                  |                   |  |                      | Type or Print Name and Title                           |
|     |                 |                  |                   |  |                      |  |

#### Notes:

1. Filing fee is \$125. This document and one exact or conformed copy of this application must be filed with the Secretary of State.

Revised January 2000

Form N-09



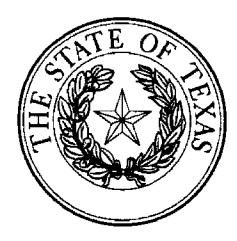
#### Office of the Secretary of State

#### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Human Coalition (file number 801076579), a Domestic Nonprofit Corporation, was filed in this office on January 21, 2009.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 10, 2015.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Carlos H. Cascos Secretary of State

TID: 10264

Dial: 7-1-1 for Relay Services Document: 644403240003

# EXHIBIT C

Date Filed: 5/15/2017 Elaine F. Marshall NC Secretary of State Y201713500007



Elaine F. Marshall, Secretary of State

#### **Lobbyist Registration Statement 2017**

| <u>Lobbyist Information</u>  |
|--|
| Complete Name of Lobbyist: (Mr./Ms./Dr.) Henry ColinLeCroy   |
| Firm Name of Lobbyist (If Applicable):   |
| Check all applicable boxes Lobbyist is not a member of a Firm $D$ Lobbyist is an employee of the Principal $0$ |
| Physical Business Address of Lobbyist (NOT a P.O. Box  |
| 7800 North Dallas Parkway Plano TX 75024   |
| Mailing Address of Lobbyist: PO Box 5052 Frisco TX 75035   |
| Telephone No. of Lobbyist: 214)295-7301 Fax No.:   |
| E-Mail Address of Lobbyist: <u>clecroy@humancoalitionorg</u>   |
| Optional secondary e-mail address (Example: Administrative Assistant): bperrv@humancoalition.orq               |
| Principal Information  |
| Complete Name of Principal: Human Coalition  |
| Physical Business Address of Principal (NOT a P.O. Box):   |
| 7800 North Dallas Parkway Plano TX 75024   |
| Name of Principal's Authorized Officer (Must be same name as listed on Principal Registration):                |
| Barry Moerschell   |
| Fitle of Principal's Authorized Officer: Generatounsel   |
| Mailing Address of Principal's Authorized Officer: PO Box 5052 Frisco TX 75035                                 |
| Telephone No. of Principal's Authorized Officer: (214) 295-7301 Fax No.:                                       |
| E-Mail Address of Principal's Authorized Officer: <u>bmoerschell@humancoalition.org</u>                        |
| Optional secondary e-mail address (Example: Administrative Assistant):   |
| bperry@humancoalition.org  |
| The question below MUST be answered "yes" or "no". If yes, include the name of the State Agency.               |
| :G.S. § 120C-200(f).   |
| I am a former employee of the state agency   |
| (MUST enter state agency name) and I left that employment within the last six months.                          |
|  |

I am not a former employee of a state agency

<sup>\*</sup>State agency. - An agency in the executive branch of the government of this State, including the Governor's Office, a board, a department, a division, and any other unit of government in the executive branch. N.C. Gen. Stat.  $\S$  138A-(3)(30k).

<sup>&</sup>lt;sup>1</sup> You must check a box or complete the Firm Name Section above, otherwise this registration will be rejected.

#### GENERAL SUBJECTS ON WHICH THE LOBBYIST INTENDS TO LOBBY

Enter codes from the subject identification table below. List all applicable categories.

4,5,11,17,

| CODE | SUBJECT  | CODE | SUBJECT  |
|------|--|------|--|
| 1    | Agriculture, horticulture, farming, and livestock                                  | 17   | Health service, medicine, drugs and controlled                                       |
|      |  |      | substances, health insurance, hospitals  |
| 2    | Amusements, games, athletics and sports  | 18   | Higher education   |
| 3    | Banking, finance, credit and investments   | 19   | Housing, construction, building codes  |
| 4    | Children, minors, youth, seniors   | 20   | Insurance (excluding health insurance)   |
| 5    | Church and religion  | 21   | Labor, salaries and wages, collective bargaining                                     |
| 6    | Communications, newspaper, television, radio, computers and information technology | 22   | Law enforcement, courts, judges, crimes, prisons                                     |
| 7    | Consumer affairs   | 23   | Licenses, permits  |
| 8    | Ecology, environment, pollution, conservation, zoning, land and water use          | 24   | Liquor, alcoholic beverages  |
| 9    | Education  | 25   | Manufacturing, distribution, services  |
| 10   | Elections, campai <sub>g n</sub> s, voting, political parties                      | 26   | Natural resources, forest and forest products, fisheries, mining and mining products |
| 11   | Equal rights, civil rights, minority affairs                                       | 27   | Public lands, parks, recreation  |
| 12   | Government, taxation, financing, revenue, budget,                                  | 28   | Social insurance, unemployment insurance, public                                     |
|      | appropriations, bids, fees, funds  |      | assistance, workers compensation   |
| 13   | Government, county   | 29   | Transportation, highways, streets and roads  |
| 14   | Government, federal  | 30   | Utilities, power, cable television, gas  |
| 15   | Government, municipal  | 31   | Other (must s ecifr):  |
| 16   | Government, state  |      |  |

#### Registration will be rejected if Category 31 "Other" is selected and no subject is specified.

Report Preparer's Identity/Signature (Rule 18 NCAC 12 .0209)

| Print name of Preparer (if other than lobbyist): Henry LeCroy  |  |
|--|--|
| Signature of Preparer: HenryLeCroy   | Date <u>5/15/2017</u>                                      |
| CERTIFI  I hereby certify that all information disclosed in this "Lobbyist accordance with G.S. §120C-200. By signing this certification, Lobbying Law and the rules, including filing reports, as the law | I understand I have an affirmative duty to comply with the |
| Signature of Lobby ist Henry Le Croy   | <b>Date</b> 5/15/2017                                      |

## EXHIBIT D

Form LRS Page 1 of 3 (rev. 11/15) Elaine F. Marshall, Secretary of State

Lobbying Compliance Division by ist Registration Statement 2017 Elaine F. Marshall, Secretary of State

Date Filed: 6/5/2017 Elaine F. Marshall NC Secretary of State Y201715600001

**Lobbyist Information** 

| Market Ma |
|--|
| Complete Name of Lobbyist: (Mr./Ms./Dr.) Robert Mitchell Touchton  |
| Firm Name of Lobbyist (If Applicable):   |
| ¹Check all applicable boxes Lobbyist is not a member of a Firm Lobbyist is an employee of the Principal  |
| Physical Business Address of Lobbyist (NOT a P.O. Box  |
| 4237 Louisburg Road Suite 105 Raleigh NC 27604   |
| Mailing Address of Lobbyist: 4237 Louisburg Road Suite 105 Raleigh NC 27604  |
| Telephone No. of Lobbyist: (919) 889-4075 Fax No.: (866) 570-5117  |
| E-Mail Address of Lobbyist:rtouchton@humancoalition.org  |
| Optional secondary e-mail address (Example: Administrative Assistant):   |
| Principal Information  |
| Complete Name of Principal: Human Coalition  |
| Physical Business Address of Principal (NOT a P.O. Box):   |
| 4237 Louisburg Road Suite 105 Raleigh NC 27604 7500 North Dallas Parkway, Plano, TX 75024  |
| Name of Principal's Authorized Officer (Must be same name as listed on Principal Registration):  |
| Barry Moerschell   |
| Title of Principal's Authorized Officer: General Counsel   |
| Mailing Address of Principal's Authorized Officer: 4237 Louisburg Road Suite 105 Raleigh NC 27604  |
| Telephone No. of Principal's Authorized Officer: (214) 295-7301 Fax No.:   |
| E-Mail Address of Principal's Authorized Officer: bmoerschell@humancoalition.org   |
| Optional secondary e-mail address (Example: Administrative Assistant):   |
| The question below MUST be answered "yes" or "no". If yes, include the name of the State Agency.  * G.S. § 120C-200(f).  |
|  |
| I am a former employee of the state agency   |
| I am not a former employee of a state agency   |

<sup>\*</sup>State agency. - An agency in the executive branch of the government of this State, including the Governor's Office, a board, a department, a division, and any other unit of government in the executive branch. N.C. Gen. Stat. § 138A-(3)(30k).

<sup>1</sup> You must check a box or complete the Firm Name Section above, otherwise this registration will be rejected.

#### GENERAL SUBJECTS ON WHICH THE LOBBYIST INTENDS TO LOBBY

Enter codes from the subject identification table below. List all applicable categories.

4,5,11,17,

| CODE | SUBJECT  | CODE | SUBJECT   |
|------|--|------|---|
| 1    | Agriculture, horticulture, farming, and livestock                                  | 17   | Health service, medicine, drugs and controlled            |
|      |  |      | substances, health insurance, hospitals                   |
| 2    | Amusements, games, athletics and sports  | 18   | Higher education  |
| 3    | Banking, finance, credit and investments   | 19   | Housing, construction, building codes                     |
| 4    | Children, minors, youth, seniors   | 20   | Insurance (excluding health insurance)                    |
| 5    | Church and religion  | 21   | Labor, salaries and wages, collective bargaining          |
| 6    | Communications, newspaper, television, radio, computers and information technology | 22   | Law enforcement, courts, judges, crimes, prisons          |
| 7    | Consumer affairs   | 23   | Licenses, permits   |
| 8    | Ecology, environment, pollution, conservation, zoning, land and water use          | 24   | Liquor, alcoholic beverages                               |
| 9    | Education  | 25   | Manufacturing, distribution, services                     |
| 10   | Elections, campaigns, voting, political parties                                    | 26   | Natural resources, forest and forest products, fisheries, |
|      |  |      | mining and mining products                                |
| 11   | Equal rights, civil rights, minority affairs                                       | 27   | Public lands, parks, recreation                           |
| 12   | Government, taxation, financing, revenue, budget,                                  | 28   | Social insurance, unemployment insurance, public          |
|      | appropriations, bids, fees, funds  |      | assistance, workers compensation                          |
| 13   | Government, county   | 29   | Transportation, highways, streets and roads               |
| 14   | Government, federal  | 30   | Utilities, power, cable television, gas                   |
| 15   | Government, municipal  | 31   | Other (must specify):                                     |
| 16   | Government, state  |      |   |

#### Registration will be rejected if Category 31 "Other" is selected and no subject is specified.

Report Preparer's Identity/Signature (Rule 18 NCAC 12.0209)

| Print name of Preparer (if other than lobbyist): Bob Touchton |  |  |
|---|--|--|
| Signature of Preparer: Bob Touchton                           | Date <u>6/5/2017</u>   |  |
| CERTII  | FICATION   |  |
|   | ist Registration Statement 2017" is true, complete and correct in<br>n, I understand I have an affirmative duty to comply with the<br>aw requires. |  |
| Signature of Lobbyist Bob Touchton                            | Date 6/5/2017  |  |

Date Filed: 6/5/2017 Elaine F. Marshall NC Secretary of State Y201715600001



Elaine F. Marshall, Secretary of State

#### **Lobbyist Registration Statement 2017**

| Lobbyist Information  |  |  |  |
|---|--|--|--|
| Complete Name of Lobbyist: (Mr./Ms./Dr.) Robert Mitchell Touchton   |  |  |  |
| Firm Name of Lobbyist (If Applicable):  |  |  |  |
| <sup>1</sup> Check all applicable boxes Lobbyist is not a member of a Firm Lobbyist is an employee of the Principal 🔽   |  |  |  |
| Physical Business Address of Lobbyist (NOT a P.O. Box   |  |  |  |
| 4237 Louisburg Road Suite 105 Raleigh NC 27604  |  |  |  |
| Mailing Address of Lobbyist: 4237 Louisburg Road Suite 105 Raleigh NC 27604   |  |  |  |
| Telephone No. of Lobbyist: (919) 889-4075 Fax No.: (866) 570-5117   |  |  |  |
| E-Mail Address of Lobbyist: <u>rtouchton@humancoalition.org</u>   |  |  |  |
| Optional secondary e-mail address (Example: Administrative Assistant):  |  |  |  |
| Principal Information   |  |  |  |
| Complete Name of Principal: Human Coalition   |  |  |  |
| Physical Business Address of Principal (NOT a P.O. Box):  |  |  |  |
| 4237 Louisburg Road Suite 105 Raleigh NC 27604  |  |  |  |
| Name of Principal's Authorized Officer (Must be same name as listed on Principal Registration):                         |  |  |  |
| Barry Moerschell  |  |  |  |
| Title of Principal's Authorized Officer: General Counsel  |  |  |  |
| Mailing Address of Principal's Authorized Officer: 4237 Louisburg Road Suite 105 Raleigh NC 27604                       |  |  |  |
| Telephone No. of Principal's Authorized Officer: (214) 295-7301 Fax No.:  |  |  |  |
| E-Mail Address of Principal's Authorized Officer: <u>bmoerschell@humancoalition.org</u>                                 |  |  |  |
| Optional secondary e-mail address (Example: Administrative Assistant):  |  |  |  |
| The question below MUST be answered "yes" or "no". If yes, include the name of the State Agency.  * G.S. § 120C-200(f). |  |  |  |
|   |  |  |  |
| I am a former employee of the state agency  |  |  |  |
| I am not a former employee of a state agency  |  |  |  |

<sup>\*</sup>State agency. – An agency in the executive branch of the government of this State, including the Governor's Office, a board, a department, a division, and any other unit of government in the executive branch. N.C. Gen. Stat. § 138A-(3)(30k).

<sup>&</sup>lt;sup>1</sup> You must check a box or complete the Firm Name Section above, otherwise this registration will be rejected.

#### GENERAL SUBJECTS ON WHICH THE LOBBYIST INTENDS TO LOBBY

Enter codes from the subject identification table below. List all applicable categories.

4,5,11,17,

| CODE | SUBJECT   | CODE | SUBJECT  |
|------|---|------|--|
| 1    | Agriculture, horticulture, farming, and livestock                                   | 17   | Health service, medicine, drugs and controlled substances, health insurance, hospitals |
| 2    | Amusements, games, athletics and sports   | 18   | Higher education   |
| 3    | Banking, finance, credit and investments  | 19   | Housing, construction, building codes  |
| 4    | Children, minors, youth, seniors  | 20   | Insurance (excluding health insurance)   |
| 5    | Church and religion   | 21   | Labor, salaries and wages, collective bargaining                                       |
| 6    | Communications, newspaper, television, radio, computers and information technology  | 22   | Law enforcement, courts, judges, crimes, prisons                                       |
| 7    | Consumer affairs  | 23   | Licenses, permits  |
| 8    | Ecology, environment, pollution, conservation, zoning, land and water use           | 24   | Liquor, alcoholic beverages  |
| 9    | Education   | 25   | Manufacturing, distribution, services  |
| 10   | Elections, campaigns, voting, political parties                                     | 26   | Natural resources, forest and forest products, fisheries, mining and mining products   |
| 11   | Equal rights, civil rights, minority affairs  | 27   | Public lands, parks, recreation  |
| 12   | Government, taxation, financing, revenue, budget, appropriations, bids, fees, funds | 28   | Social insurance, unemployment insurance, public assistance, workers compensation      |
| 13   | Government, county  | 29   | Transportation, highways, streets and roads  |
| 14   | Government, federal   | 30   | Utilities, power, cable television, gas  |
| 15   | Government, municipal   | 31   | Other (must specify):  |
| 16   | Government, state   |      |  |

#### Registration will be rejected if Category 31 "Other" is selected and no subject is specified.

| Report Preparer's Identity/Signature (Rule 18 NC   | AC 12 .0209)           |  |
|--|------------------------|--|
| Print name of Preparer (if other than lobbyist): Bob Touchton  |                        |  |
| Signature of Preparer: Bob Touchton  | Date <u>6/5/2017</u>   |  |
| <u>CERTIFICATION</u>   |                        |  |
| I hereby certify that all information disclosed in this "Lobbyist Registration Statement 2017" is true, complete and correct in accordance with G.S. §120C-200. By signing this certification, I understand I have an affirmative duty to comply with the Lobbying Law and the rules, including filing reports, as the law requires. |                        |  |
| Signature of Lobbyist Bob Touchton   | _ Date <u>6/5/2017</u> |  |

### EXHIBIT E



<u>ء</u>.

**Amber Lehman** 

Human Coalition - Raleigh **Executive Director of** Advancement

**News and Events** 4000 Steps - RDU

Read More >

Mentor Program Raleigh

chosen life? Be a mentor! difference in the life of a Do you want to make a client who has bravely

Read More >

### We need YOU! **Get Involved**

area where you are interested in serving to receive more information on how you can help. Volunteers are the heart and soul of what makes this ministry happen. Please select the



### EXHIBIT F

# Curo Women's Care Clinic of Raleigh Volunteer Application

\* Required

| Name *   |   |    |
|--|---|----|
|  |   |    |
| Address *  |   |    |
|  |   |    |
|  |   |    |
|  |   |    |
|  |   |    |
|  |   |    |
| Phone Number *   |   |    |
| Priorie Number   |   |    |
|  |   |    |
| Gender *   |   |    |
| O Male   |   |    |
| ○ Female   |   |    |
| Email Address *  |   |    |
|  |   |    |
|  |   |    |
|  |   |    |
|  |   |    |
|  |   |    |
| Have you ever been convicted of a crime oth military)? * | ner than a minor traffic offense (including while in th | ıe |
| ○ Yes  |   |    |

| ○ No   |
|--|
| Education *  |
| High School : Name, City, Year Graduated, Degree Earned                                    |
|  |
|  |
|  |
|  |
|  |
|  |
| College/University : Name, City, Year Graduated, Degree Earned                             |
| Sellege, ellivereity titaline, elty, real eladatea, begies ballied                         |
|  |
|  |
|  |
|  |
|  |
| G.E.D.   |
| ○ Yes  |
| ○ No   |
|  |
| Previous Volunteer History   |
| (Include Dates, Address, Telephone, Position/Duties, Supervisor Name, Reason for leaving.) |
|  |
|  |
|  |
|  |
|  |
|  |
| Previous Volunteer History   |
| (Include Dates, Address, Telephone, Position/Duties, Supervisor Name, Reason for leaving.) |

|   |  |                   |                   | <i>A</i>        |
|---|--|-------------------|-------------------|-----------------|
| ployment Hist                           | ory                                      |                   |                   |                 |
| ıployer, Dates,                         | Position, Telephor                       | ne, Address, Sup  | ervisor, Reason   | for Leaving.)   |
|   |  |                   |                   |                 |
|   |  |                   |                   | 6               |
| <b>ployment Hist</b><br>nployer, Dates, | <b>ory</b><br>Position, Telephor         | ne, Address, Supe | ervisor, Reason t | for Leaving.)   |
|   |  |                   |                   |                 |
|   |  |                   |                   |                 |
|   |  |                   |                   |                 |
|   |  |                   |                   | <u>la</u>       |
| dical/Nursing                           | License # (include                       | e state)          |                   |                 |
|   |  |                   |                   |                 |
|   |  |                   |                   |                 |
|   |  |                   |                   |                 |
|   |  |                   |                   | 4               |
|   |  |                   |                   | _               |
|   | friends, relatives, on ame and relations |                   | s working for Hu  | ıman Coalition? |
| co, otate then t                        |  | omp to you        |                   |                 |

What is your reason for seeking to volunteer here? \*

|                            |   |                        | /                           |
|----------------------------|---|------------------------|-----------------------------|
|                            | personal profession of faith                              | n in Jesus Christ? *   |                             |
| ) Yes<br>) No              |   |                        |                             |
|                            |   |                        |                             |
| you answered y             | es to the above question, pl                              | ease snare             |                             |
|                            |   |                        |                             |
|                            |   |                        |                             |
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|                            |   |                        |                             |
|                            |   |                        |                             |
|                            | e following information con                               |                        |                             |
|                            | e following information con<br>dress, Denomination, Phone |                        |                             |
| Church Name, Ad            |   |                        |                             |
| Church Name, Ad<br>church. |   | , Pastor's Name, Posi  | tion you have served in the |
| Church Name, Ad<br>church. | dress, Denomination, Phone                                | , Pastor's Name, Posi  | tion you have served in the |
| Church Name, Ad<br>church. | dress, Denomination, Phone                                | , Pastor's Name, Posi  | tion you have served in the |
| Church Name, Ad<br>church. | dress, Denomination, Phone                                | , Pastor's Name, Posi  | tion you have served in the |
| Church Name, Ad<br>church. | dress, Denomination, Phone                                | , Pastor's Name, Posi  | tion you have served in the |
| Church Name, Ad            | dress, Denomination, Phone                                | ty traits would you br | ing to this ministry?       |

| lave you ever had any traumatic experiences related to abortion?            |                               |
|---|-------------------------------|
| Yes   |                               |
| No  |                               |
|   |                               |
| f you answered yes to the above question, please explain:                   |                               |
|   |                               |
|   |                               |
|   |                               |
|   |                               |
|   |                               |
|   | <i>A</i>                      |
| lave you ever known an unwed mother?  |                               |
| _   |                               |
| Yes   |                               |
| O No  |                               |
| f you answered yes to the above question, please explain:                   |                               |
| you allowered yes to the above question, please explain.                    |                               |
|   |                               |
|   |                               |
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|   |                               |
|   |                               |
|   | <i>I</i> .                    |
| Inder what circumstances would you consider abortion an alternati           | ive for a woman with a crisis |
| Jnder what circumstances would you consider abortion an alternationegnancy? | ive for a woman with a crisis |

| ☐ In cases of rape or incest  |
|---|
| ☐ In cases of where the mother's life was in extreme peril  |
| ☐ In cases of extreme psychological distress  |
| Please list any books, films, or other material that you have read or viewed that relate to abortion, pregnancy, or alternatives to abortion. |
|   |
|   |
|   |
|   |
|   |
| How would you rate yourself in the knowledge of abortion methods?   |
| ○ Good  |
| ○ Fair  |
| O Poor  |
| How would you rate yourself in the knowledge of current laws concerning abortion?   |
| Good  |
| ○ Fair  |
| ○ Poor  |
| How would you rate yourself in the knowledge of what the Bible teaches about abortion?  |
| Good  |
| ○ Fair  |
| ○ Poor  |
| Are you currently or have you ever been involved in seeking to adopt a child?   |
| ○Yes  |
| ○ No  |
| If you answered yes to the above question, please explain:  |
|   |

|   | 10             |
|---|----------------|
| hat do you consider to be your strengths?                         |                |
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| hat do you consider to be your possible areas of weakness?        |                |
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| e there any particular personality types with whom you have diffi | culty working? |
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|   |                |
| you answered yes to the above question, please explain:           |                |
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| Reference #1  |                               |
|---|-------------------------------|
| (Name, Email Address, Phone #, Years known, Relationship)   | _                             |
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| Deference #2  |                               |
| Reference #2  |                               |
| (Name, Email Address, Phone #, Years known, Relationship)   |                               |
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| Reference #3  |                               |
|   |                               |
| (Name, Email Address, Phone #, Years known, Relationship)   |                               |
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| Legistry that all information I have provided in this volunteer applies   | ion for Core / London         |
| I certify that all information I have provided in this volunteer applicate Coalition is true, complete, and correct. I expressly authorize Curo/H |                               |
| representatives, employees, and agents, to contact and obtain inform  |                               |
| and references and to otherwise verify the accuracy of all information  |                               |
| application or in connection with my application.   |                               |
| If I become a volunteer at Curo/Human Coalition, I agree to fully adhe  | re to its policies and rules, |
| including those rules relating to maintaining client confidentiality. I red   |                               |
| will serve in a different role than the employees of Curo/Human Coali   |                               |
| expecting to receive any compensation or other benefits in return for   |                               |
| may provide for this organization. Once you have read the above state name below (electronic signature)   | ement, please type in your    |
| Tiarrie below (electronic signature)  |                               |
|   |                               |
|   |                               |
| Please select all of the ways you would like to volunteer.  |                               |
| ☐ Client Care Coordinator (Counseling Students Only)  |                               |
| T T CHEDI CALE COOLUMNIOLI COUNCENDO SUMENTE CINIVI   |                               |

| rms. | 100%: You made it.   |
|------|--|
|      | oice Pregnancy Solutions.<br>Service - Additional Terms      |
|      | vas created inside of First Cho<br>Report Abuse - Terms of S |

## EXHIBIT G

Be a mentor! We will equip you with everything you need to walk alongside a mom Do you want to make a difference in the life of a client who has bravely chosen life? and dad, as they improve their lives and prepare for their baby.

Mentoring is a vital part of the Continuum of Care program that helps connect our clients to the church, so they don't have to walk their parenting journey alone. This is a great opportunity for an individual, a family, or a small group to become a positive community for a family in need.

Our Mentorship Training is coming up, see dates below. To sign up, click here and one of our staff members will be in contact with you. Childcare and food will be provided.

# 2019 Mentor Program Training Dates:

- February 21
- March 21
- April 18
  - May 16
- June 20
- July 18
- August 15
- September 19
- November 7 October 17

All trainings will be 6-7:30pm and held at the Raleigh Clinic. Food will be provided.

Our Mentorship Training is coming up, see dates below. To sign up, click here and one of our staff members will be in contact with you. Childcare and food will be LOCAL STRATEGIES WHO WE ARE WHAT WE DO

# 2019 Mentor Program Training Dates:

provided.

**₩** > .£

- February 21
- March 21
- April 18
- May 16
- June 20
- July 18
- August 15
- September 19
  - October 17
- November 7

All trainings will be 6-7:30pm and held at the Raleigh Clinic. Food will be provided.

"Let us not become weary in doing good, for at the proper time we will reap a harvest if we do not give up." (Galatians 6:9)

**BE A PART OF THE CONTINUUM** 

## EXHIBIT H

| (http://  | anabiy9 | fatpwa | ercapeni/V | egirgph<br><b>f</b> | <b>⊗</b> |
|---|---------|--------|------------|---------------------|----------|
| https://www.humancoalition.org/events/mentor-training/                    | NOV     | DEC    | JAN        |                     |          |
| 1 capture (/web/*/https://www.humancoalition.org/events/mentor-training/) |         | 17     |            | ▼ Abou              | ıt this  |
| 17 Dec 2018   | 2017    | 2018   | 2019       | cap                 | ture     |

## **Mentor Training**

We need mentors! These are women and men who desire to come alongside our clients and provide them with emotional and spiritual support. This is your chance to demonstrate the love of Christ and make a real difference in the life of one of our clients and/or their partner who chose life.

Sign up now to get the necessary training to be an effective, compassionate mentor. We typically host a training session at our clinic every other month. **Our last training of 2018** will be held on **NOVEMBER 8**:

• **Time:** 6:30 p.m. to 8:00 p.m.

• Place: 4237 Louisburg Rd, Suite 105, Raleigh

• More details: Light snacks are provided. This is an adults-only event.

During training, you will learn how to come alongside our clients and support them in their parenting journey. This is a wonderful way to make an impact in our community and transform our culture into one that truly celebrates life.

For more information about becoming a mentor, contact us using the form below.

| Name *  |  |  |  |
|---------|--|--|--|
| First   |  |  |  |
|         |  |  |  |
| Last    |  |  |  |
|         |  |  |  |
| Email * |  |  |  |
|         |  |  |  |
| Phone * |  |  |  |
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SUBMIT

## EXHIBIT I

STORE

# Will you be a mentor?

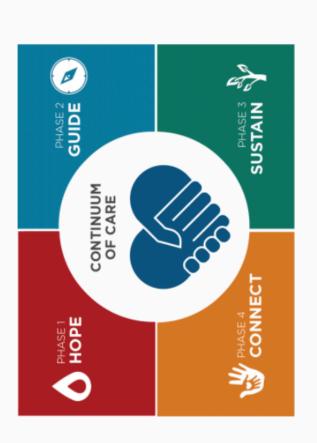
<u>ء</u>

WHO WE ARE

church body, so she can continue growing in her knowledge discipling a mom as you help her build a home where Christ considering becoming a mentor to our moms. Through your disciple the women we serve. As a mentor, you will form a is honored. Together, we will connect the mom with a local involvement, we can reach hurting and confused women with the love of Christ. May God bless you for your faithful Right now, Human Coalition is searching for mentors to lasting relationship with a mother by providing a healthy support system. You will also experience the blessing of and understanding of Jesus. Thank you for prayerfully support.

SUBMIT

Mentorship Application - Raleigh Phone\* Last Name\* Email\* First

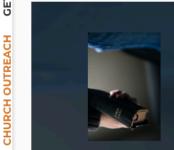


## EXHIBIT J



Moving the culture into one that values the life of every preborn human.

To reset the cultural compass to make abortion unthinkable in America, change must begin in people's hearts and minds. This transformation begins with the church, moving the culture into one that values the life of every preborn human.



The Church Toolkit provides pastors and churches resources to address the issue of abortion with grace and compassion, clear Biblical understanding,

The Church Toolkit

**+** > .∈

and concrete steps for the congregation.

Learn More >

## Meet the Team

A diverse team made up of leaders, speakers and authors who are dedicated to calling the Church to end abortion.



LOCAL STRATEGIES

WHO WE ARE WHAT WE DO

# Resources for the Church

An online resource for anyone in the Church to be informed about how to defend the pro-life position.



## EXHIBIT K



Addressing Abortion with Grace and Compassion

## Sermon Packages



Imago Dei More >

Love Never Fails

More >

HUMAN®

**→ >** .=

An online resource for anyone in the Church to be informed about how to defend

the pro-life position.

Resources for the Church

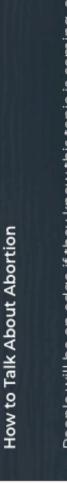
have experienced an abortion in any way. They may have had an abortion, People will be on edge if they know this topic is coming, especially if they

How to Talk About Abortion

helped someone to get an abortion, funded an abortion, stayed silent when they knew someone was going to get an abortion, or pressured

someone to get an abortion.

Read More >



have experienced an abortion in any way. They may have had an abortion, People will be on edge if they know this topic is coming, especially if they

helped someone to get an abortion, funded an abortion, stayed silent

when they knew someone was going to get an abortion, or pressured

someone to get an abortion.

Read More >



Find resources to engage the culture in the movement to end abortion in America.

Shop Now >

**Deliver Us from Abortion** 

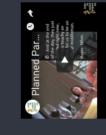
Buy Now >

## EXHIBIT L

## How church leaders should respond to Planned Parenthood:

While we may be outraged at what we are seeing, as pastors and shepherds, we need to remember those we are leading as we speak about these videos. Our people are talking about them and trying to process the varying views they are being bombarded with on social media and in the news.

We need to speak first with grace, knowing there are people in our congregation who have abortion as part of their past. We need to give our people something to do in response. We want to help pastors to do just that, so we have broken down each video and provided talking points for you, as well as some higher level talking points and other resources.



Is Planned

selling body parts? Parenthood really

sum of it's parts?

Can a baby's life be negotiated by the

How does the process actually work?

Is Planned

to get fully intact baby changing procedures Parenthood really

bodies?

See all videos >

Subscribe for new content

HUMAN® COALITION

**Talking Points** 

## Speak Truth, Not Rhetoric

Statistics say 1 in 3 women in the

Always Lead With Grace

church have had abortions.

#### exaggerate or make up stories or order to approve of abortion one human being. Knowing that, in human beings, and some more powerful human being gets to must say it is okay to kill some make the decision about who inside the mother is a distinct The truth is on our side in this stats. Science proves the life lives and dies. In history this debate. We don't need to

first need to hear and know they been a part of one as well. They Many men in the church have

are forgiven, before they can hear the outrage leading to

action.

## **End With Action**

legislators, join one of the many encourage people to write their There are many calls to action, pastors to point them toward Human Coalition Prayer App, speak out, flood social media with pro life messages, etc. something. It is our job as peaceful protests that are scheduled, download the Our people want to do what they can do. We

and you as the shepherd.

never ends well.

conversations. The Bible, science acronym that will help you be and ethics all lead to life, not See our blogs on the SLED equipped for these death.

## EXHIBIT M

## ATTACHMENT A SPECIAL APPROPRIATIONS AGREEMENT COVER Non-Profit Organizations

**THIS AGREEMENT** is hereby made between the State of North Carolina, Department of Health and Human Services, Division of Public Health and Carolina Pregnancy Care Fellowship with an address at 5320 Old Plantation Circle, Winston-Salem, NC 27104.

This agreement consists of the following documents, which are incorporated herein by reference:

- 1. Attachment A Special Appropriations Agreement Cover
- 2. Attachment B General Terms and Conditions
- 3. Attachment C Payment Request Form
- 4. Attachment D Recipient Electronic Payment Form
- 5. Attachment E W9 (Recipient to Attach)
- 6. Attachment F State Grant- No Overdue Tax Debts
- 7. Attachment G Conflict of Interest Policy
- 8. Attachment H IRS Tax Exemption Letter (Recipient to Attach if applicable)
- 9. Attachment I By-laws (Recipient to Attach)
- 10. Attachment J List of Board Members (Recipient to Attach)
- 11. Attachment K Scope of Work
- 12. Attachment L Reporting Requirements

Effective Date: July 1, 2017

Termination Date: June 30, 2019

State Financial Assistance Award Amount: \$2,600,000 State Appropriations

Scope of work: As provided in the Conference Committee Report for S.L. S.L. 2017-57, Item #G-89, the recipient hereby intends to provide funding to Carolina Pregnancy Care Fellowship (CPCF). CPCF shall use \$800,000 to purchase durable medical equipment for clinics that apply to the Fellowship for such equipment. Up to thirty thousand dollars (\$30,000) in each year may be used by CPCF for administrative purposes. Up to \$170,000 may be used each year to provide grants to clinics for training on the use of durable medical equipment. The remaining \$300,000 is provided for the Human Coalition to develop and implement a two-year Continuum of Care pilot program at its Raleigh Clinic. The pilot program shall provide care coordination and medical support to women experiencing crisis pregnancies.

Reporting Requirements: The Division has determined that this is a subaward for financial assistance. Financial Assistance Contracts are subject to the Uniform Administration of State Awards, Oversight and Reporting Requirements for recipient and subrecipients described in N.C. General Statue § 143C-6-23(d) and in 09 NCAC 03M.205.

- (a) A non-governmental grantee who receives a combined \$500,000 or more funds from all state agencies must continue to submit a single or program-specific audit prepared and completed in accordance with Generally Accepted Government Auditing Standards, also known as a Yellow Book audit, to Risk Mitigation and Audit Monitoring at <a href="McGrantsReporting@dhhs.nc.gov">NCGrantsReporting@dhhs.nc.gov</a> within 9 months of the grantee's fiscal year end.
- (b) DHHS encourages all of its non-governmental grantees that receive funds from other state agencies or DHHS divisions to contact their assigned contract monitor(s) to determine if year-end reports must be submitted for those particular grants/awards.

## ATTACHMEMT B GENERAL TERMS AND CONDITIONS

- A. The failure of either party to insist in any one or more instances upon strict performance of any of the terms or provisions of this Agreement, or to exercise any option or election herein, shall not be construed as a waiver of such terms, provisions, option or election in the future. No waiver by any party of any one or more of its rights or remedies under this Agreement shall be deemed to be a waiver of any prior or subsequent rights or remedy hereunder or at law. All remedies afforded in this Agreement are cumulative and in addition to the various remedies available in law or in equity.
- B. Choice of Law. The validity of this Agreement and any of its terms or provisions, as well as the rights and duties of the parties to this Agreement, are governed by the laws of North Carolina. The Recipient, by signing this Agreement, agrees and submits, solely for matters related to this Agreement, to the exclusive jurisdiction of the courts of North Carolina and agrees, solely for such purpose, that the exclusive venue for any legal proceedings shall be Wake County, North Carolina.
- C. All notices permitted or required to be given by one Party to the other and all questions about the contract from one Party to the other shall be addressed and delivered to the other Party's Contract Administrator.

| DEPARTMENT                           | RECIPIENT                     |  |
|--------------------------------------|-------------------------------|--|
| Leigh Hayden, Program Budget Analyst | Roberta "Bobbie" Meyer, State |  |
| 2001 Mail Service Center             | Director                      |  |
| Raleigh, N.C. 27699-2001             | 5320 Old Plantation Circle    |  |
| Telephone: 919 855-4859              | Winston-Salem, NC 27104       |  |
| Email: leigh.hayden@dhhs.nc.gov      | 704-281-8631                  |  |
|                                      | Email: directorcpcf@aol.com   |  |

- D. Availability of Funds. The parties to this contract agree and understand that the payment of the sums specified in this contract is contingent upon and subject to the availability of funds for this purpose.
- E. Payment Provisions. Upon execution of this contract, the Recipient may request and, upon approval by the Agency, receive a single payment for amounts up to one hundred thousand dollars (\$100,000). For grants-in-aid of more than one hundred thousand dollars (\$100,000) payments will be paid in quarterly installments, consistent with G. S. 143C-6-21.
- F. Effective Period: This contract shall be effective on July 1, 2017 and shall terminate on June 30, 2019.
- G. The Recipient shall comply with all laws, ordinances, codes, rules, regulations, and licensing requirements that are applicable to the conduct of its business, including those of federal, state, and local agencies having jurisdiction and/or authority.
- H. The Recipient shall maintain its accounting records relating to the performance of the Services and this Agreement in accordance with generally accepted accounting procedures. Upon reasonable prior notice to Recipient, the Office of State Budget and Management may, during the term of this Agreement and for a period of up to six years following the expiration or termination for any reason of this Agreement, audit and copy such records.

- I. Antitrust Laws. This Agreement is entered into in compliance with all State and Federal Antitrust laws.
- J. Record Retention. The Recipient shall maintain all pertinent records for a period of five years or until all audit exceptions have been resolved, whichever is longer.
- K. The State Auditor and Office of State Budget and Management shall have access to persons and records as a result of all contracts or State financial assistance entered into by State agencies or political subdivisions in accordance with General Statute 147-64.7. Additionally, as the State funding authority, the Department of Health and Human Services shall have access to persons and records as a result of all contracts or State financial assistance entered into by State agencies or political subdivisions.
- L. Assignment. This Agreement or any interest therein shall not be assigned or transferred by the Contractor.
- M. The term of this Agreement shall begin on the effective date described in Article I and shall terminate upon the earlier of (1) completion of all required services, or (2) an earlier termination as provided for in paragraph B below.
- N. Either Party may, upon sixty (60) days prior written notice to the other party, terminate all or any portion of this Agreement or the services required to be performed herein without cause.
- O. The Department of Health and Human Services may, by written notice, immediately terminate all or any portion of this Agreement or the Services for cause in any of the following circumstances:
  - (1) Recipient breaches any obligation hereunder, or fails to make progress sufficient to assure performance of this Agreement or any of the Services;
  - (2) Recipient is adjudged insolvent or bankrupt; Contractor makes an assignment for the benefit of creditors; or the appointment of a receiver, liquidator or trustee of any of Contractor's property or assets.
- P. Neither party shall be liable, or deemed to be in default, for any delay, interruption or failure in performance under this Agreement resulting directly or indirectly from acts of God, acts of civil or military authority; fires, floods; accidents, explosions, earthquakes, strikes or labor disputes, loss or interruption of electrical power or other public utility, or delays in transportation or any cause beyond its reasonable control.
- Q. Signature Warranty: The undersigned represent and warrant that they are authorized to bind their principals to the terms of this agreement.
- R. Per SL 2017-57, Section 11E.13, Funds allocated to the Human Coalition shall be used to develop and implement a two-year pilot program at its Raleigh clinic to provide a continuum of care and support to assist women experiencing crisis pregnancies to continue their pregnancies to full term. These funds shall be used for nonsectarian purposes only.
  - The pilot program authorized shall consist of at least all of the following components:
  - (1) The use of care coordinators to perform the following functions:
  - a. Assess the immediate challenges causing a program participant to seek abortion and eliminate these challenges by assisting the program participant in connecting to appropriate resources. The

care coordinator shall personally assist a program participant in connecting to appropriate resources, when appropriate.

- b. Introduce each program participant to a trained mentor who will continue to guide the program participant toward positive lifestyle changes.
- (2) The use of licensed nursing staff in the Human Coalition's Raleigh clinic to provide medical support to program participants.
- (3) Close collaboration between care coordinators and licensed nursing staff during initial counseling sessions in order to accomplish the following:
- a. Appropriately introduce continuum of care services available through the pilot program.
- b. Create individual care plans for program participants and their families to help build a stable family life for the duration of the pregnancy. Care plans should identify and address any further challenges identified by care coordinators with encouragement and additional resources

Signatures follow on the next page

| Department of Health and Human Services: | Ву:  |
|--|--|
| $\frac{10/4/2017}{\text{(Date)}}$        | Congland Housen Program Anal<br>Signature Authority Name/Title |
| Carolina Pregnancy Care Fellowship       | By:  |
| 9-28-17<br>(Date)                        | Signature Authority Name/Title                                 |

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed.

## ATTACHMENT C

## NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES SPECIAL APPROPRIATION (SA) Payment Request Form

|  |   | ient Kequ  |  |   | Vicini   |
|--|---|--|--|---|--|
| . Recipient Information (Mal                             | ke sure information is comp   | olete & accurat  | e) II.   | Payment Alloc   | cation   |
| A. Recipient: Carolina Pr<br>B. Address: (Complete Maili | egnancy Care Felloving, including suite if appli  | vship<br>cable)  | A.   | SFY <u>2017-2018</u>  | Amount: \$ <u>1,300,000</u>  |
| C. City  | State 7in   |  | _ B.   | Amount Reques   | t this Payment: \$_325,000   |
|  | ·   |  | _  | SA Balance (if a  | d to Date: \$pplicable): \$  |
| D. Contact's Name:<br>Position in Organization:          |   |  |  |   |  |
| E. Phone No: ()  |   |  |  |   |  |
| F. Kind of Organization: □                               |   |  | Corporation  |   | Trust  |
|  | Government  |  | Unincorporate<br>Other   | ed Association  | _<br>_   |
| used each year to provide<br>naining \$300,000 is provi  | n each year may be a<br>grants to clinics for<br>ded for the Human (<br>eigh Clinic. The pilo<br>s pregnancies.<br>One-time payment | used by CPo<br>training on<br>Coalition to<br>of program | CF for admit the use of a develop and shall provid   | inistrative pur<br>durable medic<br>d implement a<br>e care coordin | poses. Up to \$170,000 may   |
|  | Semi-annual (Jan-Jun)<br>Semi-annual (Jul-Dec)  |  | (Oct-  | =   |  |
|  | •   | ш  | (Jan-l<br>(Apr-  | -   |  |
| Match Required (check one): Ye                           | es □ No ⊠   | On a   | tol  |   |  |
| If matching required, is cas If match not on hand, by wh | hat date and from what so   | ource does the   |  |   |  |
| )  | mented, and will be valided -6-21 through G.S. 143C-  | d expenditure  | s of actual rec  | eipts; and that t<br>ARIZED   | ove information is correct; he financial assistance will ablic (Official Seal) |
| Koberta Meyer  | <u> </u>  |  | Kindon   | er Kuliso   | (v16°  |
| Printed Name   |   |  |  | Printed N   | ame  |
| 9/18/17  |   |  | 9-   | 15.17   | KIMBER GULISANO  Notary Public   |
| Date   | ************************  |  |  | Date  | Davie Co., North Carolina  |
| or DHHS Use Only   | ***********   | ******   | ******   | *******   | My.Commission Expires Feb. 6,  |
| ecipient/Tax ID #:                                       | Center:   |  | No. of the last of | _ Fiscal Year:  |  |
|  |   |  |  |   |  |
| epartment or Division Budget Off                         | ficer Date  |  |  | 0.40  | anager D-t-  |

## RECIPIENT ELECTRONIC PAYMENT FORM - ATTACHMENT D

### Office of the State Controller

Return to: OSC Support Services Center Address: 1410 Mail Service Center

PRINT the following information.

Payee Name:

Raleigh, NC 27699-1410



CAROLINA PREGNALLY

CARE FELLOWSHIP

## Recipient Electronic Payment

Email: osc.support.services@osc.nc.gov

Telephone: 919-707-0795

Required E-mail Address:

Fax: 919-981-5561

bookkeeper oper @

☐ Change Existing ePay Account

FAX or E-MAIL ADDRESS for payment notification. (Place a check mark in front of the method that you prefer.)

For your convenience and benefit, the State of North Carolina offers payees the opportunity to receive future payments electronically, rather than by check. Your payments will be deposited into the checking or savings account of your choice. In addition to having the money deposited electronically, you also will be notified of the deposit either by fax or by e-mail. The fax or e-mail will provide you with all the information that would normally be on your check stub. To receive payments electronically, you must complete this form, attach a voided check, and return via mail, e-mail, or fax to the information listed above.

| If you would like to receive remittances via fax, please che the box below. Otherwork remittances will be sent via E-mittances will be sent via E-mittances.  Print Name and Title:                        | eck 201 eom<br>rise<br>ail.  |
|--|--|
| CIR LI FAX Number:   |  |
|  |  |
|  | ROBERTA, S MEYE<br>STATE DIRECTOR  |
| Contact Phone Number:  | 704-281-8631   |
| ☐ Savings Acct #:  | 101-201-8631   |
| nt must comply with the provisions on<br>k one of the following:   | f U.S. law, as well as the   |
| nt must comply with the provisions or<br>k one of the following:   | f U.S. law, as well as the   |
| n Carolina may remit to the financial of subject to being transferred to a fore  | institution for credit to the  |
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| entries each pay period, and if neces<br>t identified on the attached certification<br>m. This authority will remain in effect u   | n document. I understand intil I cancel it in writing.   |
| DATE: 9/19/1   | 7  |
|  |  |
| ( - rk - h ( - n :   | Savings Acct #:  VIDE A BANK LETTER COUNT INFO  Int must comply with the provisions of cone of the following:  In Carolina may remit to the financial of subject to being transferred to a fore of the following transferred to a to me may be labeled with "IAT" as the vill be subject to my receiving financial elect to remit future payments to me vertices each pay period, and if necessions. |

## Department of the Treasury

Internal Revenue Service

#### **Request for Taxpayer Identification Number and Certification**

Give Form to the requester. Do not send to the IRS.

|  | 1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blan  | 1.                    |   |
|--|--|-----------------------|---|
|  | Carolina Pregnancy Care Fellowship   | κ.                    |   |
| 0  | 2 Business name/disregarded entity name, if different from above   |                       |   |
| a C  |  |                       |   |
| 2  | 3 Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes:  |                       | 4 Exemptions (codes apply only to                               |
| Print or type<br>Specific Instructions on page | Individual/sole proprietor or Single-member LLC S Corporation S Corporation Partnership  | ☐ Trust/estate        | certain entities, not individuals; see instructions on page 3): |
| £ 5  | Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partne  | rship) ▶              | Exempt payee code (if any)                                      |
| Print or type                                  | Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box the tax classification of the single-member owner.  | in the line above for | Exemption from FATCA reporting                                  |
| P i  | ☐ Other (see instructions) ► 501 (c) 3 Non-Profit  |                       | code (if any)   |
| ξį   | 5 Address (number, street, and apt. or suite no.)  | Tn.                   | (Applies to accounts maintained outside the U.S.)               |
| Ď  | 5320 Old Plantation Circle   | Requester's name a    | and address (optional)  |
| See S  | 6 City, state, and ZIP code  | OSC Support S         | Services Center   |
| S  | Winston Salem, NC 27104  | 1410 Mail Servi       | ce Center   |
|  | 7 List account number(s) here (optional)   | Raleigh, NC 27        | 699-1410  |
|  |  |                       |   |
| Pa   |  |                       |   |
| Enter  | Your TIN in the appropriate boy. The TIN provided was a second of the se |                       |   |
|  |  |                       | urity number  |
| entitie  | ent alien, sole proprietor, or disregarded entity, your social security number (SSN). However, f   | , a                   |   |
| TIN o  | es, it is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i> n page 3.   | et a                  |   |
| Note.  | . If the account is in more than one name, see the instructions for line 1 and the chart on page<br>lines on whose number to enter   | or                    |   |
| guide  | lines on whose number to enter.  | 4 for Employer i      | dentification number  |
|  |  |                       |   |
| Par  | t II Certification   |                       |   |
| Under  | penalties of perjury, I certify that:  |                       |   |
| 1. The   | e number shown on this form is my correct taxpayer identification number (or I am waiting for  |                       |   |
| L. ( U)  | m not subject to backup withholding because: (a) I am exempt from backup withholding, or (b<br>rvice (IRS) that I am subject to backup withholding as a result of a failure to report all interest of<br>longer subject to backup withholding; and   |                       |   |
| 3. I ar  | n a U.S. citizen or other U.S. person (defined below); and   |                       |   |
| 4. The   | FATCA code(s) entered on this form (if any) indicating that I am exempt from EATCA reporting   | is correct            |   |
| Certifi  | cation instructions. You must cross out item 2 above if you have been notified by the IRS the  | y io conect.          |   |
| net ball                                       | SH VIII HAVE TAILED TO POPORT All interest and I I I I I I   | ar you are currenilly | SHIPPELL TO DOCKUD withholding                                  |

because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the

Sign Signature of Here U.S. person ▶

#### **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

#### **Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.



## Carolina Pregnancy Care Fellowship

September 18, 2017

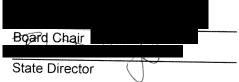
To: State Agency Head and Chief Fiscal Officer

#### Certification:

We certify that the Carolina Pregnancy Care Fellowship does not have any overdue tax debts, as defined by N.C.G.S. 105-243.1, at the federal, State, or local level. We further understand that any person who makes a false statement in violation of N.C.G.S. 143C-6-23(c) is guilty of a criminal offense punishable as provided by N.C.G.S.) 143C-10-1b.

#### **Sworn Statement:**

Victoria Miglin and Roberta Meyer being duly sworn, say that we are the Board Chair and State Director respectively, of Carolina Pregnancy Care Fellowship of Winston Salem in the State of North Carolina and that the foregoing certification is true, accurate and complete to the best of our knowledge and was made and subscribed by us. We also acknowledge and understand that any misuse of State funds will be reported to the appropriate authorities for further action.



Sworn to and subscribed before me on the day of the date of said certification.

| (Notary Signature and Seal) | My Commission Expires: $\frac{7abb}{2019}$ |
|-----------------------------|--|
| · - · · · ·                 | KIMBER GULISANO                            |

If there are any questions, please contact the state agency that provided your gran

Notary Public Davie Co., North Carolina My Commission Expires Feb. 6, 2019

<sup>&</sup>lt;sup>1</sup> G.S. 105-243.1 defines: Overdue tax debt. – Any part of a tax debt that remains unpaid 90 days or more after the notice of final assessment was mailed to the taxpayer. The term does not include a tax debt, however, if the taxpayer entered into an installment agreement for the tax debt under G.S. 105-237 within 90 days after the notice of final assessment was mailed and has not failed to make any payments due under the installment agreement."

## ATTACHMENT G CONFLICT OF INTEREST ACKNOWLEDGEMENT AND POLICY

| Notary Public for said County and State, certify that ally appeared before me this day and acknowledged refine Pregnancy Cure Jellow Skyp [name of Organization] |
|--|
| rganization, affirmed that the foregoing Conflict of Interest Policy   |
| er governing body in a meeting held on the $\frac{1}{2}$ day of  |
| y of <u>Aptimix</u> , 17.  |
| Nótary Public  |
| , 20 <u>/                                  </u>  |
| ed by the Board of Directors/Trustees or other governing dopted conflict of interest policy.   |
|  |

### **Conflict of Interest Policy**

Employees and board members have an obligation to conduct business within guidelines that prohibit actual or potential conflicts of interest. This policy establishes only the framework within which the Carolina Pregnancy Care Fellowship wishes its business to operate. The purpose of these guidelines is to provide general direction so that board members and employees can seek further clarification on issues related to the subject of acceptable standards of operation.

An actual or potential conflict of interest occurs when a board member or an employee is in a position to influence a decision that may result in personal gain or gain for a relative as a result of the Carolina Pregnancy Care Fellowship 's business dealings. For the purpose of this policy, a relative is any person who is related by blood or marriage, or whose relationship with the board member or employee is similar to that of persons who are related by blood or marriage.

No presumption of a conflict is created by the mere existence of a relationship with outside firms. However, if a board member or an employee has any influence on any material business transactions, it is imperative that he or she discloses to an officer of the organization as soon as possible the existence of any actual or potential conflict of interest so that safeguards can be established to protect all parties.

Personal gain may result not only in cases where a board member, an employee, or a relative has a significant ownership in a firm with which the Carolina Pregnancy Care Fellowship does business, but also when a board member, an employee, or a relative receives any kickback, bribe, substantial gift, or special consideration as a result of any transaction or business dealings involving the Carolina Pregnancy Care Fellowship.

Approved 12/08

### **Conflict of Interest Policy**

Signature Page

**Policy:** No member of the Carolina Pregnancy Care Fellowship's Board of Directors, or any of its committees, staff members or volunteers shall derive any personal profit or gain, directly or indirectly, by reason of his/her participation with the CPCF. Each person shall disclose any personal interest in which h or she may have in any matter pending before the CPCF, and shall refrain from participation in any decision on such matter. The minutes from the board meetings shall reflect the disclosed information and that the Board member refrained from voting.

Board members, employees, and members of employees' immediate families are prohibited from accepting gifts, monies or gratuities from the following:

- 1. Persons receiving benefits or services from the organization;
- 2. Any person or entity performing or seeking to perform services under contract with the organization; and
- 3. Persons who are otherwise in a position to benefit from the actions of any employee of the organization.

#### Procedure:

I certify that I have read the above policy and will abide by it. Except as described below, I am not now, or at any time during the past year have been:

- 1. A participant, directly or indirectly, in any arrangement, agreement, investment or other activity with any vendor, supplier or other party doing business with the CPCF which has resulted , or could result, in personal benefit to me.
- 2. A recipient, directly or indirectly, of any salary payments or loans or gifts of any kind, or any free service or discounts or other fees from or on behalf of any persons or organizations engaged in any transaction with the CPCF. Any exceptions to 1 or 2 above are stated below with a full description of the transactions and of the interest, whether direct or indirect, which I have or have had during the past year in the persons or organizations having transactions with the CPCF.

| Date:         |  |
|---------------|--|
| Signature:    |  |
| Printed Name: |  |

# CONFLICT OF INTEREST POLICY EXAMPLE

The Board of Directors/Trustees or other governing persons, officers, employees or agents are to avoid any conflict of interest, even the appearance of a conflict of interest. The Organization's Board of Directors/Trustees or other governing body, officers, staff and agents are obligated to always act in the best interest of the organization. This obligation requires that any Board member or other governing person, officer, employee or agent, in the performance of Organization duties, seek only the furtherance of the Organization mission. At all times, Board members or other governing persons, officers, employees or agents, are prohibited from using their job title, the Organization's name or property, for private profit or benefit.

- A. The Board members or other governing persons, officers, employees, or agents of the Organization should neither solicit nor accept gratuities, favors, or anything of monetary value from current or potential contractors/recipients, persons receiving benefits from the Organization or persons who may benefit from the actions of any Board member or other governing person, officer, employee or agent. This is not intended to preclude bona-fide Organization fund raising-activities.
- B. A Board or other governing body member may, with the approval of Board or other governing body, receive honoraria for lectures and other such activities while not acting in any official capacity for the Organization. Officers may, with the approval of the Board or other governing body, receive honoraria for lectures and other such activities while on personal days, compensatory time, annual leave, or leave without pay. Employees may, with the prior written approval of their supervisor, receive honoraria for lectures and other such activities while on personal days, compensatory time, annual leave, or leave without pay. If a Board or other governing body member, officer, employee or agent is acting in any official capacity, honoraria received in connection with activities relating to the Organization are to be paid to the Organization.
- C. No Board member or other governing person, officer, employee, or agent of the Organization shall participate in the selection, award, or administration of a purchase or contract with a recipient where, to his knowledge, any of the following has a financial interest in that purchase or contract:
  - 1. The Board member or other governing person, officer, employee, or agent;
  - 2. Any member of their family by whole or half blood, step or personal relationship or relative-in-law;
  - 3. An organization in which any of the above is an officer, director, or employee;
  - 4. A person or organization with whom any of the above individuals is negotiating or has any arrangement concerning prospective employment or contracts.
- D. **Duty to Disclosure** -- Any conflict of interest, potential conflict of interest, or the appearance of a conflict of interest is to be reported to the Board or other governing body or one's supervisor immediately.
- E. **Board Action** When a conflict of interest is relevant to a matter requiring action by the Board of Directors/Trustees or other governing body, the Board member or other governing person, officer, employee, or agent (person(s)) must disclose the existence of the conflict of interest and be given the opportunity to disclose all material facts to the Board and members of committees with governing board delegated powers considering the possible conflict of interest. After disclosure of all material facts, and after any discussion with the person, he/she shall leave the governing board or committee meeting while the determination of a conflict of interest is discussed and voted upon. The remaining board or committee members shall decide if a conflict of interest exists.

In addition, the person(s) shall not participate in the final deliberation or decision regarding the matter under consideration and shall leave the meeting during the discussion of and vote of the Board of Directors/Trustees or other governing body.

- **F. Violations of the Conflicts of Interest Policy** -- If the Board of Directors/Trustees or other governing body has reasonable cause to believe a member, officer, employee or agent has failed to disclose actual or possible conflicts of interest, it shall inform the person of the basis for such belief and afford the person an opportunity to explain the alleged failure to disclose. If, after hearing the person's response and after making further investigation as warranted by the circumstances, the Board of Directors/Trustees or other governing body determines the member, officer, employee or agent has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.
- G. Record of Conflict -- The minutes of the governing board and all committees with board delegated powers shall contain:

- 1. The names of the persons who disclosed or otherwise were found to have an actual or possible conflict of interest, the nature of the conflict of interest, any action taken to determine whether a conflict of interest was present, and the governing board's or committee's decision as to whether a conflict of interest in fact existed.
- 2. The names of the persons who were present for discussions and votes relating to the transaction or arrangement that presents a possible conflict of interest, the content of the discussion, including any alternatives to the transaction or arrangement, and a record of any votes taken in connection with the proceedings.

| Approved by:                       |
|------------------------------------|
| ##Recipient Name##                 |
| Name of Organization               |
| Carolina. Pregnancy Car Fellowship |
| Signature of Organization Official |
| 9/19/17                            |
| Date                               |

INTERNAL REVENUE SERVICE DISTRICT DIRECTOR P. O. BOX 2508 CINCINNATI, OH 45201

Date: SEP 0 4 1939

CAROLINA PREGNANCY CARE FELLOWSHIP 1311 EAST MOREHEAD ST STE 5 CHARLOTTE, NC 28204

Employer Identification Number:

Contact Person: D. A. DOWNING Contact Telephone Number: (513) 241-5199 Accounting Period Ending: December 31 Foundation Status Classification: 509(a)(1) Advance Ruling Period Begins: February 25, 1998 Advance Ruling Period Ends: December 31, 2002 Addendum Applies:

Dear Applicant:

Based on information you supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

No

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably expect to be a publicly supported organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, during an advance ruling period you will be treated as a publicly supported organization, and not as a private foundation. This advance ruling period begins and ends on the dates shown above.

Within 90 days after the end of your advance ruling period, you must send us the information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, we will classify you as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, we will classify you as a private foundation for future periods. Also, if we classify you as a private foundation, we will treat you as a private foundation from your beginning date for purposes of section 507(d) and 4940.

Grantors and contributors may rely on our determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you send us the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until we make a final determination of your foundation status.

If we publish a notice in the Internal Revenue Bulletin stating that we

# BYLAWS OF CAROLINA PREGNANCY CARE FELLOWSHIP

#### **ARTICLE I: NAME**

The name of the Corporation shall be Carolina Pregnancy Care Fellowship hereinafter called the "Corporation."

#### **ARTICLE II: OFFICES**

The principle office and registered agent of the Corporation shall be located in Winston-Salem, NC. The Corporation may have such other offices, within North Carolina as may be designated by the Board of Directors, or as shall be appropriate or necessary for the conduct of the affairs of the Corporation.

#### **ARTICLE III: MEMBERS**

#### **SECTION 1: GENERAL RIGHTS AND POWERS**

Except as otherwise provided by law, by the Articles of Incorporation, or by these bylaws, the number, classes, qualifications, rights, privileges, dues, fees, responsibilities, and the provisions governing the withdrawal, suspension, and expulsion of members shall be determined by the Board of Directors. Except as may otherwise be required by law, the Articles of Incorporation, or these bylaws, any rights of members to vote and any right, title or interest in or to the Corporation, its membership, except that liability of a member for sum due the Corporation shall survive such termination unless otherwise expressly provided by the Board of Directors.

#### **SECTION 2: QUALIFICATIONS FOR MEMBERSHIP**

Faith-based Pregnancy Centers, Maternity Homes, and Adoption Agencies which are registered in the State of North Carolina and which are or would be eligible to be tax-exempt under Section 501(c)(3) or successor provisions of the Internal Revenue Code will be eligible for membership in the Corporation, subject to any additional standards which may be set by the Board of Directors.

Membership requires Pregnancy Centers, Maternity Homes, and Adoption Agency

Board of Directors agree with the Corporation's-Statement of Faith and Commitment

of Care and Competency.

As faith-based members of the Corporation all members are expected to conduct their

organizations according to biblical principles.

Membership in the Corporation requires annual dues be paid in a timely manner

according to pay scale set by the Board of Directors.

**SECTION 3: COMPENSATION** 

No member shall receive any compensation for his or her service in such capacity,

except that the Board of Directors may by resolution provide for reimbursement

for actual disbursements expended on behalf of or in service to the corporation

and according to policies authorized by the Board of Directors.

**ARTICLE IV: PURPOSES AND LIMITATIONS** 

**SECTION 1: GENERAL PURPOSES** 

The Corporation is organized exclusively for charitable, religious, educational, and

scientific purposes within the meaning of section 501 (c) (3) of the Internal Revenue

Code.

**SECTION 2: SPECIFIC PURPOSES** 

The Corporation equips, encourages and networks pregnancy care organizations in

North Carolina.

Therefore, the purpose of Carolina Pregnancy Care Fellowship is to provide

encouragement to Pregnancy Centers, Maternity Homes and Adoption Agencies by

providing forums for the exchange of ideas and information, spiritual growth,

fellowship and networking.

#### **SECTION 3: LIMITATION ON PRIVATE INUREMENT**

The property of the Corporation is irrevocably dedicated to non-profit purposes. No part of the net earnings or assets of the Corporation shall inure to the benefit of, or be distributed to its members, Directors, Trustees, Officers or other private person, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes of the Corporation.

#### **SECTION 4: LIMITATION ON POLITICAL ACTIVITIES**

No substantial part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing or distributing of statements) any political campaign on behalf of or in opposition to any candidate for public office.

#### **SECTION 5: LIMITATION UPON DISSOLUTION**

Upon dissolution of the Corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed by a Court of Competent Jurisdiction of the county in which the principal office of the Corporation is then located, exclusively for such purposes or to such organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

#### **SECTION 6: OTHER LIMITATIONS**

Notwithstanding any other provision of these bylaws, the Corporation shall not carry on any other activities not permitted to be carried on (a) by a Corporation exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future tax code, or (b) by a Corporation,

contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

#### **ARTICLE V: DIRECTORS**

#### **SECTION 1: GENERAL POWERS**

The property, business, and affairs of the Corporation shall be overseen by its Board of Directors in accordance with these Bylaws and the purposes of the Corporation.

The Board is responsible for overall policy and direction of the Corporation and delegates responsibility for day-to-day operations to the Executive Director. Specific powers of the Board of Directors include but are not limited to:

- a. defining the mission, goals, and objectives of the Corporation, and assigning priorities among the goals and objectives when needed
- b. selecting the Corporation's Executive Director and periodically reviewing his/her performance
- c. responsible for determining required staff positions and salaries and approving major personnel policies
- d. reviewing and approving the Corporation's budget
- raising the financial resources required to meet the Corporation's goals and objectives, as coordinated by the Executive Director, and establishing general fund raising policies
- f. conducting a biennial review and evaluation for the Corporation's performance of the goals and objectives of the highest priority

#### **SECTION 2: NUMBER AND TENURE**

The number of Directors shall not be less than five or greater than eleven. The number of Directors may be changed by a vote of a majority of the entire Board. The term for Directors shall be three years. Directors may serve no more than two consecutive terms followed by a mandatory one year off before re-nomination.

#### **SECTION 3: COMPOSITION OF THE BOARD:**

The members of the Board shall be selected to serve as individuals and not as official representatives of any Pregnancy Center, Maternity Home or Adoption Agency or social organization.

Members of the Board shall have a demonstrated commitment to the Corporation's mission.

Members of the Board shall have served a minimum of two years in an executive leadership capacity.

Executive Directors/CEO's of Pregnancy Centers, Maternity Homes or Adoption Agencies must maintain the majority of members at all times.

#### **SECTION 4: ELECTION AND REMOVAL**

Election to the Board of Directors shall be made by a two-thirds vote of the existing Board of Directors. Re-election of a Director to a second consecutive term shall also be made by a two-thirds vote of the other Directors. At any regular meeting of the Board, or at a meeting called for the purpose, any Director may, by vote of two-thirds of the entire Board, be removed from the Board with or without cause, and another may be elected in the place of the person so removed to serve for the remainder of the term. A member of the Board should resign by written notice to the Board. No one may be nominated without his or her consent.

#### **SECTION 5: VACANCIES**

Any vacancy occurring to the Board of Directors or created by an increase in the number of Directors may be filled by a two-third vote of the remaining Directors. A Director elected to fill a vacancy shall be elected for the un-expired term of the predecessor in office.

#### **SECTION 6: MEETINGS**

A majority of the total membership of the Board at any meeting shall constitute a

quorum, <u>provided</u> that at the annual meeting, meeting to elect members to the Board of Directors, to elect Officers, and to approve the budget, a quorum shall constitute two-thirds (2/3) attendance of the total membership of the Board.

Regular meetings of the Directors shall be set at a minimum of at least quarterly. The annual meeting shall be held in August each year. Special meetings may be called by the Chairman of the Board, or two Directors. The person or persons calling a special meeting of the Board of Directors shall give a notice of at least one week by any usual means of communication to all board members. Any meeting may be dispensed with at the discretion of the board. A Director may attend a special or regular meeting by telephone conference or similar communications equipment provided all persons participating in the meeting are able to communicate with each other at the same time.

The Board may take action without a meeting provided each Director consents to such action in writing or approves such action at a subsequent regular or special meeting. Consent in writing includes communications by electronic mail, facsimile or other electronic communication.

Any Director may waive notice of any meeting. The attendance by a Director at a meeting shall constitute a waiver of notice of such meeting, except where a Director attends a meeting for the expressed purpose of objecting to the transaction of any business because the meeting is not lawfully called or convened.

#### **SECTION 7: VOTING POWERS**

Each member of the Board shall have one vote.

The Executive Director shall be considered an "ex officio" (non-voting) member of the Board.

Voting by proxy shall not be allowed

#### **SECTION 8: COMPENSATION**

The Executive Director may be paid such reasonable compensation as the Board of

Directors or its Executive Committee may authorize and direct. No other Officer who is a member of the Board of Directors may receive any compensation, except as reimbursement for actual disbursements expended on behalf of or in service to the Corporation and according to policies authorized by the Board of Directors.

#### **ARTICLE VI: OFFICERS**

#### **SECTION 1: OFFICERS**

The Officers of the Corporation shall consist of a Chairman, Vice-Chairman, Recording Secretary, Treasurer, Executive Director and any Vice-Chairs as the Board of Directors may appoint. Any two or more offices may be held by the same person, but no Officer may act in more than one capacity where action of two or more Officers is required.

Any of these offices may be combined except Chairman, Vice-Chairman, and Treasurer.

#### **SECTION 2: TERMS OF OFFICE**

The terms of Officers shall be one year. Officers shall be elected at the Annual Meeting. If necessary to fill offices that have become vacant, the Board may elect Officers at any regular meeting.

#### **SECTION 3: CHAIRMAN**

The Chairman shall preside over all meetings of the Board of Directors and shall perform the following duties and responsibilities.

- a. approves agenda, follows Roberts Rules of Order
- b. appoint the chairpersons of all Board committees and serve as liaison for the Corporation's Board, its committees and the staff
- c. maintain liaison as needed with foundations supporting the Corporation and other potential funding sources
- d. facilitate and coordinate the Board's discharge of its responsibilities as set forth in the bylaws and by Board resolutions
- e. such other responsibilities as provided in the Corporation's bylaws or as

- directed by the Board
- f. Encourages and motivates the Executive Director in team-like workmanship
- g. Evaluates organization for effectiveness and ensures consistent evaluation of staff and services
- h. Monitors board activity, making sure the board fulfills its legal, moral and ethical responsibilities, follows the Bylaws and Articles of Incorporation, and the Corporation's policy and procedures

#### **SECTION 4: VICE-CHAIRMAN**

- a. Second in command following the Chairman
- b. In the absence or disability of the Chairman, the Vice-Chairman shall perform his/her duties
- c. Assist the Chairman as requested
- d. Facilitates the evaluation of the Board and its members

#### **SECTION 5: SECRETARY**

- a. Keep minutes for all Board meetings and Executive Committee meetings including votes, and resolutions adopted by the Board
- b. Issuing of notices for the annual meeting and for meetings of the Board of Directors
- c. Filing of all reports required by governmental authorities
- d. Updates and maintains all the legal and official documents of the Corporation such as Bylaws, Articles of Incorporation, and other corporate filings

#### **SECTION 6: TREASURER**

- a. Oversee the custody of all funds, securities and assets of the Corporation
- b. Prepare and distribute monthly financial reports for the Board
- c. Assure that all of the Corporation's financial obligations and policies are being followed

- d. Assure that any financial audits are properly prepared by financial professional
- e. If applicable, chair the finance committee
- f. Assist in the preparation of the organization's budget
- g. Ensure the proper and timely preparation of the federal and state tax returns
- h. Assist the Executive Director with procedures for daily financial operations

#### **SECTION 7: ASSISTANT TREASURER**

- a. In the absence of the Treasurer or in the event of his or her death, inability or refusal to act, the Assistant Treasurer, who shall be appointed by the Chairman of the Board unless otherwise determined by the Board of Directors, shall perform the duties of the Treasurer, and when so acting shall have all the powers of and be subject to all the restrictions upon the Treasurer.
- b. He or she shall perform such other duties as may be assigned to them by the
   Board of Directors or by the Treasurer.

#### **SECTION 8: EXECUTIVE DIRECTOR**

- a. Shall direct and execute all decisions of or programs adopted by the Board of Directors
- b. Shall act as the Chief Executive Officer of the Corporation
- c. Shall serve as Assistant Secretary and when so acting shall have all the powers of and be subject to all the restrictions upon the Secretary
- d. Serves as an ex officio (non-voting) member of the Board of Directors and serves on the Executive Committee of the Board of Directors if an Executive Committee exists
- e. Responsible for the day-to-day operations of Corporation in accordance with the mission and bylaws of the organization
- f. Responsible for carrying out the organizations mandates and directions as set by the board; and is subject to supervision and an annual review by the Board

of Directors

g. Duties shall include but not limited to:

a. The hiring and discharging of all employees

b. The execution of contracts or other instruments on behalf of the Corporation except in cases where the execution thereof is expressly

delegated by the Board of Directors or by the bylaws to some other

Officer or agent of the Corporation

**SECTION 8: COMPENSATION OF OFFICERS** 

The Executive Director may be paid such reasonable compensation as the Board of

Directors or its Executive Committee may authorize and direct. No other Officer who

is a member of the Board of Directors may receive any compensation, except as

reimbursement for actual disbursements expended on behalf of or in service to the

Corporation and according to policies authorized by the Board of Directors.

**ARTICLE VII: COMMITTEES** 

The Board of Directors may create committees, including an Executive Committee. The

Chairman of the Board shall appoint the chairpersons of all committees of the Board. The

designation of any committee and the delegation thereto of authority shall not relieve

the Board of Directors, or any member of the Board, of any responsibility or liability

imposed upon it or him or her by law. A majority of any such committee, if the committee

is composed of more than two members, may determine its action and fix the time and

place of its meetings, unless the Board of Directors shall provide otherwise.

**SECTION 1: EXECUTIVE COMMITTEE** 

The Executive Committee is composed of the Officers of the Board of Directors and

the Executive Director and is authorized and empowered to deal with all matters

referred to it by the Board of Directors. In emergency matters that may arise between

meetings of the Board, the Executive Committee shall be empowered to conduct

business not in conflict with policy set by the Board and to report to the Board thereon.

#### **ARTICLE VIII: MISCELLANEOUS PROVISIONS**

#### **SECTION 1: INDEMNIFICATION**

Every person who is or shall have been a Director or Officer of the Corporation and his or her personal representatives shall be indemnified by the Corporation against all costs and expenses reasonably incurred by or imposed upon him or her in connection with or resulting from any action, suit, or proceeding to which her or she may be made a party by reason of his or her being or having been a Director or Officer of the Corporation or of any subsidiary or affiliate thereof, except in relation to such matters as to which he or she shall finally be adjudicated in such action, suit, or proceeding to have acted in bad faith and to have been liable by reason of willful misconduct in the performance of his or her duty as such Director or Officer. "Costs and expenses" shall include, but without limiting the generality thereof, attorney's fees, damages, and reasonable amounts paid in settlement.

#### **SECTION 2: FISCAL YEAR**

The fiscal year of the Corporation shall begin on the first day of January each year and shall end on the thirty-first day of December each year, unless otherwise determined by the Board of Directors.

#### **SECTION 3: CORPORATE SEAL**

The official seal of the Corporation shall have inscribed thereon the name of the Corporation. The official seal shall also contain such other words or figures as the Board of Directors may determine. The official seal may be used by placing, by any process whatsoever, an impression, facsimile, or other reproduction of said official seal.

#### **SECTION 4: CONFLICT OF INTEREST**

No contract or other transaction between the Corporation and one or more of its Directors or Officers, or between the Corporation and any other Corporation, firm, association or other entity in which one or more of the Directors or Officers are Directors or Officers, or have a substantial financial interest, shall be approved by a vote of the Board or any committee thereof if such Director or Officer is present at the meeting of the Board, or of a committee thereof, which authorizes such contract or transaction, or his or her votes are counted for such purpose, unless:

- a. The material facts as to such interest in such contract or transaction and as to any such common Directorship, Officership, or financial interest are disclosed in good faith or are known to the Board or committee, and the Board of committee authorizes such contract or transaction by unanimous written consent, provided at least one Director so consenting is disinterested, or by a majority vote without counting the vote or votes of such interested Director or Officer even though the disinterested Director is less than a quorum; or
- b. The material facts as to such interest in such contract or transaction and as to any such common Directorship, Officership, or financial interest are disclosed in good faith or are known to the Directors entitled to vote thereon, if any, and such contract or transaction is authorized by a majority vote of such Directors

#### **SECTION 5: AMENDMENTS**

The bylaws may be altered, amended, or repealed and new Bylaws adopted upon the affirmative vote of two-thirds (2/3) of the total membership of the Board of Directors at any regular or special meeting of the Board. Written notice of the proposed action and vote, and the content thereof, be included with the call of meeting.

These Bylaws adopted by the Board of Directors on this 12<sup>th</sup> day of November 1997 Revised and amended by the Board of Directors on this 25<sup>th</sup> day of April 2008 Revised and amended by the Board of Directors on this 15<sup>th</sup> day of August 2008

Revised and amended by the Board of Directors on this  $29^{th}$  day of April 2011 Revised and amended by the Board of Directors on this  $4^{th}$  day of May 2012 Revised and amended by the Board of Directors on this  $9^{th}$  day of August 2014

# Carolina Pregnancy Care Fellowship

#### **Board of Directors**

#### Chairman

Vicki Miglin, Executive Director Pregnancy Resource Center of Statesville 1710 B Davie Ave Statesville, NC 28677

#### Vice Chairman

Susan Sturgill, Director Wilkes Pregnancy Care Center 1224 School Street. Wilkesboro, NC 28697

#### Secretary

Denise Garnes, Director Caring Hearts Pregnancy Center 135 Seventh Street Taylorsville, NC 28645

#### **Treasurer**

Crystal Regan, Executive Director Pregnancy Care Center 4264 N Highway 16 Denver, NC 28037

Mary Fainn, Executive Director GATE Pregnancy Resource Center 3824 NC Highway 49 S Harrisburg, NC 28075

Tonya Baker Nelson, Executive Director Hand of Hope Pregnancy Centers 607 Ennis Street Fuquay-Varina, NC 27526

Laura Strabley, Executive Director Carolina Pregnancy Center 1012 Charles Blvd. Greenville, NC 27835

# ATTACHMENT K SCOPE OF WORK

# Services, Objectives and Expected Results

| Grantee Name:           | Carolina Pregnancy Care Fellowship       |
|-------------------------|--|
| Project/Activity Title: | Medical Clinic Project                   |
| Period Covered:         | July 1 2017 through June 30, 2018 - 2019 |

Grant Award (\$). These funds are to be utilized for (cite purpose as stated in Appropriation Bill or Conference Committee Report). In compliance with the requirements of G.S. 143C-6-23, The following is a description of activities and accomplishments to be undertaken by our organization using the provided state funding:

# Grantee is to complete the following section:

As provided in the Conference Committee Report for S.L. S.L. 2017-57, Item #G-89, the recipient hereby intends to provide funding to Carolina Pregnancy Care Fellowship (CPCF). CPCF shall use \$800,000 to purchase durable medical equipment for clinics that apply to the Fellowship for such equipment. Up to thirty thousand dollars (\$30,000) in each year may be used by CPCF for administrative purposes. Up to \$170,000 may be used each year to provide grants to clinics for training on the use of durable medical equipment. The remaining \$300,000 is provided for the Human Coalition to develop and implement a two-year Continuum of Care pilot program at its Raleigh Clinic. The pilot program shall provide care coordination and medical support to women experiencing crisis pregnancies.

Grantee is to provide a general description of planned expenditures to serve as a guide for preparing an annual budget related to this award (add or delete categories if needed).

| <b>Expenditure Category</b>  | <b>Amount of Expenditure</b> |
|--|------------------------------|
| Employee Expenses (e.g. program related staffing):                       | \$ 36,000                    |
| Services/Contract Expenses (e.g. utilities, telephone, lease related exp | enses: \$ 340,000            |
| Goods Expenses (e.g. supplies and equipment):                            | \$1,600,000                  |
| Administrative Expenses (e.g. overhead and project management):          | \$ 24,000                    |
| Other Expenses (Specify): Funding to Human Coalition                     | \$ 600,000                   |
| Total Expenses:  | \$2,600,000                  |

# ATTACHMENT K – Human Coalition SCOPE OF WORK

# Services, Objectives and Expected Results

| Grantee Name:           | Carolina Pregnancy Care Fellowship       |
|-------------------------|--|
| Project/Activity Title: | Medical Clinic Project - Human Coalition |
| Period Covered:         | July 1 2017 through June 30, 2019        |

Grant Award (\$). These funds are to be utilized for (cite purpose as stated in Appropriation Bill or Conference Committee Report). In compliance with the requirements of G.S. 143C-6-23, The following is a description of activities and accomplishments to be undertaken by our organization using the provided state funding:

# Grantee is to complete the following section:

As provided in the Conference Committee Report for S.L. S.L. 2017-57, Item #G-89, the recipient hereby intends to provide funding to Carolina Pregnancy Care Fellowship (CPCF). CPCF shall use \$800,000 to purchase durable medical equipment for clinics that apply to the Fellowship for such equipment. Up to thirty thousand dollars (\$30,000) in each year may be used by CPCF for administrative purposes. Up to \$170,000 may be used each year to provide grants to clinics for training on the use of durable medical equipment. The remaining \$300,000 is provided for the Human Coalition to develop and implement a two-year Continuum of Care pilot program at its Raleigh Clinic. The pilot program shall provide care coordination and medical support to women experiencing crisis pregnancies.

Grantee is to provide a general description of planned expenditures to serve as a guide for preparing an annual budget related to this award (add or delete categories if needed).

Expenditure Category

Amount of Expenditure

| Expenditure Category   | <b>Amount of Expenditur</b> |
|--|-----------------------------|
| Employee Expenses (e.g. program related staffing):                       | \$ 360,000                  |
| Services/Contract Expenses (e.g. utilities, telephone, lease related exp | penses: \$ 180,000          |
| Goods Expenses (e.g. supplies and equipment):                            | \$ 12,000                   |
| Administrative Expenses (e.g. overhead and project management):          | \$ 48,000                   |
| Other Expenses (Specify):  | \$ 0                        |
| Total Expenses:  | \$ 600,000                  |

# EXHIBIT N

# Medical Clinic Project

Parties involved:

Carolina Pregnancy Care Fellowship and Human Coalition.

Project:

Medical Clinic Project

Period covered:

July 1, 2017 through June 30, 2019

### Funding Provisions as stated in the NC State Budget:

As provided in the Conference Committee Report for S.L. 2017-57, Item #G-89, \$300,000 is provided each fiscal year for the Human Coalition to develop and implement a two-year Continuum of Care pilot program at its Raleigh Clinic. The pilot program shall provide care coordination and medical support to women experiencing crisis pregnancies.

As a sub-recipient of funds allocated by the State of North Carolina to Carolina Pregnancy Care Fellowship, Human Coalition agrees to:

- Establish a program at Human Coalition's Women's Care Clinic in Raleigh to provide care coordination and medical support to women experiencing crisis pregnancies.
- Participate in a yearly onsite visit by Carolina Pregnancy Care Fellowship to discuss program implementation and effectiveness.
- Provide the necessary documentation to facilitate timely transfer of funds from CPCF once they are received from the State.
- 4. Submit to the CPCF State Director a copy of the Quarterly and End of Year Reports required o the following schedule:

First Quarter

November 1, 2017 & 2018

Second Quarter

February 1, 2017 & 2018

Third Quarter

May 1, 2017 & 2018

Fourth Quarter

August 1, 2017 & 2018

Year End Report

August 1, 2017 & 2018

5. Submit scanned copies to CPCF of the invoices/receipts to document expenditures for each quarter to substantiate expenditures. These should be labeled to correspond with the format of

the detailed vest end report.

Date /0-23-17

Signature

Ben Matthews, Executive Vice President, Human Coalition

Roberta (Bobbie) Meyer, CPCF State Director

Date 10/35/17