Fiscal Year Ending: 12/31/2024

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**Governance Information (Authority-Related)** 

Questio	n	Response	URL (if Applicable)
1.	Has the Authority prepared its annual report on operations and accomplishments for the reporting period as required by section 2800 of PAL?	Yes	https://www.clintoncountyida.com/sites/ccida.com/files/information-page/documents/2024%20CGFC%20Operations%20and%20Accomplishments.pdf
2.	As required by section 2800(9) of PAL, did the Authority prepare an assessment of the effectiveness of its internal controls?	Yes	https://www.clintoncountyida.com/information-page/cgfc-annual-reports
3.	Has the lead audit partner for the independent audit firm changed in the last five years in accordance with section 2802(4) of PAL?	No	N/A
4.	Does the independent auditor provide non-audit services to the Authority?	No	N/A
5.	Does the Authority have an organization chart?	Yes	https://www.clintoncountyida.com/sites/ccida.com/files/information-pages/information-policies/cgfc/CGFC-Organizational-Chart.pdf
6.	Are any Authority staff also employed by another government agency?	Yes	Clinton County
7.	Has the Authority posted their mission statement to their website?	Yes	https://www.clintoncountyida.com/sites/ccida.com/files/information-pages/information-policies/cgfc/Mission-Statement-Clinton-Grant-Facilitation-Corporation.pdf
8.	Has the Authority's mission statement been revised and adopted during the reporting period?	No	N/A
9.	Attach the Authority's measurement report, as required by section 2824-a of PAL and provide the URL.		https://www.clintoncountyida.com/sites/ccida.com/files/information-page/documents/2024%20CCCRC%20Mission%20Statement%20and%20Measurement%20Report.pdf

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## **Governance Information (Board-Related)**

Question		Response	URL (If Applicable)
1.	Has the Board established a Governance Committee in accordance with Section 2824(7) of PAL?	Yes	N/A
2.	Has the Board established an Audit Committee in accordance with Section 2824(4) of PAL?	Yes	N/A
3.	Has the Board established a Finance Committee in accordance with Section 2824(8) of PAL?	Yes	N/A
4.	Provide a URL link where a list of Board committees can be found (including the name of the committee and the date established):		https://www.clintoncountyida.com/information-page/cccrc-information-policies
5.	Does the majority of the Board meet the independence requirements of Section 2825(2) of PAL?	Yes	N/A
6.	Provide a URL link to the minutes of the Board and committee meetings held during the covered fiscal year		https://www.clintoncountyida.com/information-page/meeting-information/cgfc?dy=2024
7.	Has the Board adopted bylaws and made them available to Board members and staff?	Yes	https://www.clintoncountyida.com/sites/ccida.com/files/information-pages/information-policies/cgfc/Bylaws-of-Clinton-Grant-Facilitation-Corporation.pdf
8.	Has the Board adopted a code of ethics for Board members and staff?	Yes	https://www.clintoncountyida.com/sites/ccida.com/files/information-pages/information-policies/cgfc/Code-of-Ethics-Clinton-Grant-Facilitation-Corporation.pdf
9.	Does the Board review and monitor the Authority's implementation of financial and management controls?	Yes	N/A
10.	Does the Board execute direct oversight of the CEO and management in accordance with Section 2824(1) of PAL?	Yes	N/A
11.	Has the Board adopted policies for the following in accordance with Section 2824(1) of PAL?		
	Salary and Compensation	Yes	N/A
	Time and Attendance	Yes	N/A
	Whistleblower Protection	Yes	N/A
	Defense and Indemnification of Board Members	Yes	N/A
12.	Has the Board adopted a policy prohibiting the extension of credit to Board members and staff in accordance with Section 2824(5) of PAL?	Yes	N/A
13.	Are the Authority's Board members, officers, and staff required to submit financial disclosure forms in accordance with Section 2825(3) of PAL?	Yes	N/A
14.	Was a performance evaluation of the board completed?	Yes	N/A
15.	Was compensation paid by the Authority made in accordance with employee or union contracts?	No	N/A
16.	Has the board adopted a conditional/additional compensation policy governing all employees?	Yes	https://www.clintoncountyida.com/information-page/cgfc-information-policies

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# **Board of Directors Listing**

Name	Defayette, Keith	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	4/15/2019	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Hoover, David	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	4/15/2019	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

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Name	Leta, Mark	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	4/15/2019	Has the Board Member/Designee	Yes
		Signed the Acknowledgement of	
		Fiduciary Duty?	
Term Expiration Date	Pleasure of Authority	Complied with Training	Yes
		Requirement of Section 2824?	
Title		Does the Board Member/Designee	No
		also Hold an Elected or Appointed	
		State Government Position?	
Has the Board Member Appointed		Does the Board Member/Designee	No
a Designee?		also Hold an Elected or Appointed	
_		Municipal Government Position?	
Designee Name		Ex-Officio	

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Name	Trahan, Trent	Nominated By	Local
Chair of the Board	Yes	Appointed By	Local
If yes, Chair Designated by	Local	Confirmed by Senate?	N/A
Term Start Date	4/15/2019	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

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Name	Trombley, Joey	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	1/1/2022	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	No
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

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Name	VanNatten, John	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	4/15/2019	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

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Name	Zurlo, Michael	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	4/15/2019	Has the Board Member/Designee	Yes
		Signed the Acknowledgement of	
		Fiduciary Duty?	
Term Expiration Date	Pleasure of Authority	Complied with Training	Yes
		Requirement of Section 2824?	
Title		Does the Board Member/Designee	No
		also Hold an Elected or Appointed	
		State Government Position?	
Has the Board Member Appointed		Does the Board Member/Designee	Yes
a Designee?		also Hold an Elected or Appointed	
		Municipal Government Position?	
Designee Name		Ex-Officio	

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## Staff Listing

Name	Title	Group	Department/ Subsidiary	Union Name	Bargaining Unit	Full Time/ Part Time					Performance Bonus		Other Compensati on/Allowanc es/Adjustme nts	Compensat ion paid by Authority	also paid by another entity to perform the work of the	payment made by a State or
																nt
Brunelle, Dorothy		Administrative and Clerical				PT	No	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	) Yes	Yes
Moffat, Toni		Administrative and Clerical				PT	No	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	) Yes	Yes
Ryan, Molly F	Executive Director	Executive				FT	Yes	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Yes	Yes

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## **Benefit Information**

During the fiscal year, did the Authority continue to pay for any of the above mentioned benefits for former staff or individuals affiliated	No
With the Authority after those individuals left the Authority?	

## **Board Members**

Name	Title	Severance Package	Payment for Unused	Club Member- ships	Use of Corporate Credit	Personal Loans	Auto	Transportation	Housing Allowance	Spousal / Dependent Life	Tuition Assistance	Multi-Year Employment	None of these Benefits	Other
			Leave		Cards					Insurance				
Defayette,	Board of												X	
Keith	Directors													
Hoover,	Board of												X	
David	Directors													
Leta, Mark	Board of												X	
	Directors													
Trahan,	Board of												Х	
Trent	Directors													
Trombley,	Board of												Х	
Joey	Directors													
VanNatten,	Board of												X	
John	Directors													
Zurlo,	Board of												Х	
Michael	Directors													

# <u>Staff</u>

Name	Title	Severance	Payment	Club	Use of	Personal	Auto	Transportation	Housing	Spousal /	Tuition	Multi-Year	None of	Other
		Package	for	Member-	Corporate	Loans			Allowance	Dependent	Assistance	Employment	these	
			Unused	ships	Credit					Life			Benefits	
			Leave	_	Cards					Insurance				

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# **Subsidiary/Component Unit Verification**

Is the list of subsidiaries, as assembled by the Office of the State Comptroller, correct?					Yes			
Are there other subsidiaries or component units of the Authority that are active, not included in the PARIS reports submitted by this Authority and not independently filing reports in PARIS?								
Name of Subsidiary/Component Unit	Si	atus						
Request Subsidiary/Component Unit Change								
Name of Subsidiary/Component Unit	Si	atus	Requested	Changes				
Request Add Subsidiaries/Component Units								
Name of Subsidiary/Component Unit		Establishment Date			Purpose of Su	ubsidiary/Component Unit		
Request Delete Subsidiaries/Component Units								
Name of Subsidiary/Component Unit	Termination	n Date	Reason for Ter	mination		Proof of Termination Document Name		

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# Summary Financial Information SUMMARY STATEMENT OF NET ASSETS

			Amount
Assets			
Current Assets			
	Cash and cash equivalents		\$0.00
	Investments		\$0.00
	Receivables, net		\$0.00
	Other assets		\$0.00
	Total current assets		\$0.00
Noncurrent Assets			
	Restricted cash and investments		\$0.00
	Long-term receivables, net		\$0.00
	Other assets		\$0.00
	Capital Assets		
		Land and other nondepreciable property	\$0.00
		Buildings and equipment	\$0.00
		Infrastructure	\$0.00
		Accumulated depreciation	\$0.00
		Net Capital Assets	\$0.00
	Total noncurrent assets		\$0.00
Total assets			\$0.00
Liabilities			
Current Liabilities			
	Accounts payable		\$0.00
	Pension contribution payable		\$0.00
	Other post-employment benefits		\$0.00
	Accrued liabilities		\$0.00
	Deferred revenues		\$0.00
	Bonds and notes payable		\$0.00
	Other long-term obligations due within one year		\$0.00
	Total current liabilities		\$0.00
Noncurrent Liabilities			

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	Pension contribution payable	\$0.00
	Other post-employment benefits	\$0.00
	Bonds and notes payable	\$0.00
	Long term leases	\$0.00
	Other long-term obligations	\$0.00
	Total noncurrent liabilities	\$0.00
Total liabilities		\$0.00
Net Asset (Deficit)		
Net Assets		
	Invested in capital assets, net of related debt	\$0.00
	Restricted	\$0.00
	Unrestricted	\$0.00
	Total net assets	\$0.00

#### SUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGES IN NET ASSETS

	<u> </u>	Amount
Operating Revenues		
	Charges for services	\$0.00
	Rental and financing income	\$0.00
	Other operating revenues	\$0.00
	Total operating revenue	\$0.00
Operating Expenses		
	Salaries and wages	\$0.00
	Other employee benefits	\$0.00
	Professional services contracts	\$0.00
	Supplies and materials	\$0.00
	Depreciation and amortization	\$0.00
	Other operating expenses	\$0.00
	Total operating expenses	\$0.00
Operating income (loss)		\$0.00
Nonoperating Revenues		
	Investment earnings	\$0.00
	State subsidies/grants	\$0.00
	Federal subsidies/grants	\$0.00
	Municipal subsidies/grants	\$0.00
	Public authority subsidies	\$0.00

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	Other nonoperating revenues	\$0.00
	Total nonoperating revenue	\$0.00
Nonoperating Expenses		
	Interest and other financing charges	\$0.00
	Subsidies to other public authorities	\$0.00
	Grants and donations	\$0.00
	Other nonoperating expenses	\$0.00
	Total nonoperating expenses	\$0.00
	Income (loss) before contributions	\$0.00
Capital contributions		\$0.00
Change in net assets		\$0.00
Net assets (deficit) beginning of		\$0.00
year		
Other net assets changes		\$0.00
Net assets (deficit) at end of year		\$0.00

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## **Current Debt**

Question		Response
1.	Did the Authority have any outstanding debt, including conduit debt, at any point during the reporting period?	No
2.	If yes, has the Authority issued any debt during the reporting period?	

# New Debt Issuances

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## **Schedule of Authority Debt**

Type of Debt			Statutory Authorization(\$)	Outstanding Start of Fiscal Year(\$)	New Debt Issuances(\$)	Debt Retired (\$)	Outstanding End of Fiscal Year(\$)
State Obligation	State Guaranteed						
State Obligation	State Supported						
State Obligation	State Contingent Obligation						
State Obligation	State Moral Obligation						
Other State-Funded	Other State-Funded						
Authority Debt - General Obligation	Authority Debt - General Obligation						
Authority Debt - Revenue	Authority Debt - Revenue						
Authority Debt - Other	Authority Debt - Other						
Conduit		Conduit Debt					
Conduit		Conduit Debt - Pilot Increment Financing					
TOTALS							

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## Real Property Acquisition/Disposal List

This Authority has indicated that it had no real property acquisitions or disposals during the reporting period.

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## Personal Property

This Authority has indicated that it had no personal property disposals during the reporting period.

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#### **Property Documents**

Question		Response	URL (If Applicable)
1.	In accordance with Section 2896(3) of PAL, the Authority is required to prepare a report at least annually	Yes	https://www.clintoncountyida.com/information-page/cgfc-annual-reports
	of all real property of the Authority. Has this report been prepared?		
2.	Has the Authority prepared policies, procedures, or guidelines regarding the use, awarding, monitoring,	Yes	https://www.clintoncountyida.com/information-page/cgfc-information-
	and reporting of contracts for the acquisition and disposal of property?		policies
3.	In accordance with Section 2896(1) of PAL, has the Authority named a contracting officer who shall be	Yes	N/A
	responsible for the Authority's compliance with and enforcement of such guidelines?		

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## **Grant Information**

This Authority has indicated that it did not award any grants during the reporting period.

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## **Loan Information**

This Authority has indicated that it did not have any outstanding loans during the reporting period.

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## **Bond Information**

This Authority has indicated that it did not have any outstanding bonds during the reporting period.

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**Additional Comments**