

JOHNSON COUNTY SMALL BUSINESS GRANT 2020

David Jones	David's Custom Cabinets	Carpentry	3348 FM 4, Cleburne 76033
Cliff McDaniel	Genesis Gym	Gym	9528 E.FM 917, Alvarado 76009
Sandy Johnson	JAG Custom Paint & Body	Auto Repair	8208 E. FM 917, Alvarado 76009
David Fuller	By the Yard Materials	Landscape-Retail	1311 FM 917, Alvarado 76009
Sharon Vaughn	Hearts & Flowers	Floral Arrangements	5236 E Hwy. 67, Alvarado 76009
Royce Steed	Eagle Powder Coating	Mfg.Powder Coating	12301 E FM RD 917, Alvarado 76009
Stormy Donovan	Clarity DPF Cleaning serv.	Diesel Filter Cleaning	5297 Big Six St.Ste A, Alvarado 76009
Ron Mc Daniel	McDaniel Custom Saddles	Manufacturing	9528 E FM 917, Alvarado 76009
Ellen P Stephenson	Ell's Place	Restaurant	4205 E FM 4, Cleburne 76031
Estelle Stepherson	A & E Picture Framing	Mfg.	2617 CR 429, Cleburne 76031
Darren Albertson	Dani & Zos Resale Shop	Retail	12870 FM 917 Unit C, Alvarado 76009
Daid Jones	Willow Creek Ranch	Venue Rental	3348 W. FM4, Cleburne 76033
Richard Bristow	SFX Performance	Auto Parts	12611 E. FM 917 Ste.A Alvarado 76009
Bryan Zimmerman	Awards N More	Awards/Trophies	101 Rainbow Crest, Burleson 76028
Mike Culpepper	Culpco Holdings	Burleson Handyman	6244 Cook Hills Rd. Burleson 76028
Casey Gray	Gray Matter Garage	Auto Repair	5966 E.Hwy. 67, Alvarado 76009
Manushaqe Hodza	Villa Dianna Italian rest.	Restaurant	2475 East Renfro, Burleson 76028
Robert Welch	RLW Liquidators	Auction House	5308 Bid Six St. Alvarado 76009
Juan D. Gozales	Expression Woodworks	Mfg. Cabinets	2525 E Renfro, Burleson 76028

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT
In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: David Jones / David's Custom Cabinets Inc

Mailing Address: 3348 W. FM 4, Cleburne TX 76033

Business Address: 3348 W. FM 4, Cleburne TX 76033

Business ID#: 75-1651153

Sales Tax and Use Permit #: _____

Applicant Contact Name: David Jones Phone #: 817-558-2608

Email Address: jonesbarnllc@gmail.com

Grant Amount Requested (\$5000 max): \$ 5,000.00 Business Type: Maintenance

Business in operation as of Jan 01, 2020? YES NO

Business is currently operating and compliant? YES NO

Business is located in unincorporated area of Johnson County? YES NO

Business has 20 employees or less" YES NO

Business lost employees during Covid-19 Declarations? YES NO

If "YES" how many? _____ Will business be rehiring? YES NO

Business operates as a Franchise or Franchisee? YES NO

If "YES" is business locally owned? YES NO

Business received any financial support or loans as result of CARES Act? YES NO

How has your business been impacted by the COVID-19 Declarations? March 15th 2020

the shut down affected business

How long was business closed during COVID-19 Declarations? From: March 15th to June 15th

If awarded a grant, how do you plan to use the grant to support the growth of the business?

Help pay bills,

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Following an award, if any one or more of the criteria are not met or it is discovered that an application contains materially false or misleading information, then as a condition of an award and of this program, the applicant shall immediately refund all grant payments previously made and all costs incurred by the County and/or JCEDC, including reasonable attorney's fees. By submitting an application or by accepting an award, it is an express condition that the applicant and recipient indemnify, defend, release and hold harmless the County, JCEDC, and its members, officials, employees, and representatives from and against any and all claims, liabilities, losses and expenses (including reasonable attorney's fees) directly or indirectly arising from or in connection with any act, omission, or conduct of the County and/or JCEDC.

I have read and agree to the terms and conditions set forth above. I understand that my request will be evaluated and recommendations made as to approval of this Small Business Recovery Grant. I understand that the submittal of this application in no way guarantees me a grant from the Johnson County Economic Development Commission or the Johnson County Commissioners' Court. I understand that additional information may be requested as needed. The JCED and/or the Johnson County Commissioners' Court reserves the right to reject any and all applications at their sole discretion. All information provided is true and correct and any financial information submitted has not been manipulated to exaggerate the financial duress of this business.

I agree to the above statement

I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant: _____

Date: 7-7-2020

Printed Name of Applicant: _____

David Jones

Title of Applicant: _____

Owner

Name of Business: _____

David's Custom Cabinets Inc

Physical Address of Business: _____

3348 W. FM 4, Cleburne TX 76033

City: Cleburne

State: Texas

Zip Code: 76033

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission

Diana J. Miller, Executive Director

Phone: 817-556-6985

Email: grant-icedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT
In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: Genesis Gym

Mailing Address: 9528 E FM 917

Business Address: Alvarado TX 76009

Business ID#: 37-1892311

Sales Tax and Use Permit #: 3-20666-6958-4

Applicant Contact Name: Cliff McDaniel Phone #: 817-790-6446

Email Address: cjmcd23@hotmail.com

Grant Amount Requested (\$5000 max): \$5000 Business Type: Recreation

Business in operation as of Jan 01, 2020? Yes YES _____ NO

Business is currently operating and compliant? Yes YES _____ NO

Business is located in unincorporated area of Johnson County? Yes YES _____ NO

Business has 20 employees or less? Yes YES _____ NO

Business lost employees during Covid-19 Declarations? Yes YES _____ NO

If "YES" how many? 3 Will business be rehiring? Yes YES _____ NO

Business operates as a Franchise or Franchisee? Yes YES _____ NO

If "YES" is business locally owned? Yes YES _____ NO

Business received any financial support or loans as result of CARES Act? _____ YES No NO

How has your business been impacted by the COVID-19 Declarations? Yes

All of our business is interacting with others in large groups. We have been totally shut down

How long was business closed during COVID-19 Declarations? From: April 15, 2020 to June 15, 2020

If awarded a grant, how do you plan to use the grant to support the growth of the business? We will get back to the business of training and gym rentals. This should generate at least 3 more employees to get going again.

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Cliff I agree to the above statement

Cliff I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant: Cliff McDaniel  Date: 7/6-2020

Printed Name of Applicant: Cliff McDaniel

Title of Applicant: Owner

Name of Business: Genesis Gym

Physical Address of Business: 9528 E FM 917

City: Alvarado State: Texas Zip Code: 76009

Return the completed application and documents via email to:

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Johnson County Economic Development Commission

Diana J. Miller, Executive Director

Phone: 817-556-6985

Email: grant.jcedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT
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APPLICATION

Applicant/Business Name: JAG CUSTOM PAINT & BODY, INC.

Mailing Address: 8208 E. FM 917

Business Address: 8208 E. FM 917

Business ID#: 75-2251855

Sales Tax and Use Permit #: 1-75-2251855-8

Applicant Contact Name: SANDY JOHNSON

Phone #: 817-790-0303

Email Address: SANDYVADELL@AOL.COM

Grant Amount Requested (\$5000 max): \$5000

Business Type: AUTOMOTIVE REPAIR

Business in operation as of Jan 01, 2020? YES NO

Business is currently operating and compliant? YES NO

Business is located in unincorporated area of Johnson County? YES NO

Business has 20 employees or less? YES NO

Business lost employees during Covid-19 Declarations? YES NO

If "YES" how many? _____ Will business be rehiring? YES NO

Business operates as a Franchise or Franchisee? YES NO

If "YES" is business locally owned? YES NO

Business received any financial support or loans as result of CARES Act? YES NO

How has your business been impacted by the COVID-19 Declarations?
Business has dropped off.

How long was business closed during COVID-19 Declarations? From: has not yet close to

If awarded a grant, how do you plan to use the grant to support the growth of the business?
paying bills to keep the doors open, insurance, taxes, utilities etc.

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I agree to the above statement

I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant:  Date: 7/6/2020

Printed Name of Applicant: SANDY JOHNSON

Title of Applicant: PRESIDENT

Name of Business: JAG CUSTOM PAINT & BODY, INC.

Physical Address of Business: 8208 E. FM 917

City: ALVARADO State: Texas Zip Code: 76009

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission
Diana J. Miller, Executive Director
Phone: 817-556-6985
Email: grant-jcedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT
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APPLICATION

Applicant/Business Name: By The Yard Materials
Mailing Address: Po Box 288, Lillian, TX 76061
Business Address: 11311 E. FM 917, Alvarado, TX 76009
Business ID#: 81-4372857
Sales Tax and Use Permit #: 32062024255
Applicant Contact Name: Danny Fuller Phone #: 817-475-1625
Email Address: danny@btymaterials.com
Grant Amount Requested (\$5000 max): \$ 5000 Business Type: Retail Landscape Yard
Business in operation as of Jan 01, 2020? YES NO
Business is currently operating and compliant? YES NO
Business is located in unincorporated area of Johnson County? YES NO
Business has 20 employees or less? YES NO
Business lost employees during Covid-19 Declarations? YES NO
If "YES" how many? 1 Will business be rehiring? YES NO
Business operates as a Franchise or Franchisee? YES NO
If "YES" is business locally owned? YES NO
Business received any financial support or loans as result of CARES Act? YES NO*
How has your business been impacted by the COVID-19 Declarations? while we did not have to close our sales have been short of forecast, especially as we have moved in to the summer months. A lot of uncertainty looking toward the fall/winter months.
How long was business closed during COVID-19 Declarations? From: to
If awarded a grant, how do you plan to use the grant to support the growth of the business? we plan to hire additional employees to refocus growth and aggressively pursue sales.

* we did apply for and receive the paycheck protection loan from the federal government BUT after receiving more information decided that we did not fulfill all requirements and paid the loan back in full. Documentation can be provided.

Application Form No. 1

Business Plan for Federal Government Contractors

AFFIDAVIT

Application Number: 100-100000-100000

Applicant Name: ABC Company

Business Address: 123 Main St, City, State

Business Type: General Contractor

State of Incorporation: State of New York

Applicant's Federal Status: Sole Proprietorship Partnership Corporation

Principal Activities: Construction Services

Form Number: Application for Bid, Form No. 100-100000-100000

Applicant's Federal Status: YES NO

Applicant's Federal Status: YES NO

Applicant's Federal Status: YES NO

Applicant's Federal Status: YES NO

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Applicant's Federal Status: YES NO

Applicant's Federal Status: YES NO

Applicant's Federal Status: YES NO

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2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT
In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: Eagle Powder Coating & Fabrication

Mailing Address: 12301 E FM Road 917

Business Address: 12301 E FM Road 917

Business ID#: 32-0546849

Sales Tax and Use Permit #: 32054684991

Applicant Contact Name: Royce Steed

Phone #: 682-203-0939

Email Address: royce.steed@yahoo.com

Grant Amount Requested (\$5000 max): \$5000.00 Business Type: Manf. & Powder Coating

Business in operation as of Jan 01, 2020? YES YES _____ NO

Business is currently operating and compliant? YES YES _____ NO

Business is located in unincorporated area of Johnson County? YES YES _____ NO

Business has 20 employees or less" YES YES _____ NO

Business lost employees during Covid-19 Declarations? YES YES _____ NO

If "YES" how many? 2 Will business be rehiring? YES YES _____ NO

Business operates as a Franchise or Franchisee? _____ YES NO _____ NO

If "YES" is business locally owned? _____ YES _____ NO

Business received any financial support or loans as result of CARES Act? _____ YES NO _____ NO

How has your business been impacted by the COVID-19 Declarations? YES

How long was business closed during COVID-19 Declarations? From: _____ to Not closed

If awarded a grant, how do you plan to use the grant to support the growth of the business? _____
To pay rent, utilities, and materials for jobs. To rehire the two employees. My business is very slow now

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RS _____ I agree to the above statement

RS _____ I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant: _____

Date: 07/07/2020

Printed Name of Applicant: Royce Lane Steed

Title of Applicant: Owner

Name of Business: Eagle Powder Coating & Fabrication

Physical Address of Business: 12301 E FM Road 917

City: Alvarado

State: Texas

Zip Code: 76009

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission

Diana J. Miller, Executive Director

Phone: 817-556-6985

Email: grant-icedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT
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APPLICATION

Applicant/Business Name: Stormy Donovan Clarity DPF Cleaning Service LLC

Mailing Address: PO Box 1239 Alvarado Tx. 76009

Business Address: 5297 Big Six Street Suite A Alvarado 76009

Business ID#: See attachment

Sales Tax and Use Permit #: 3-20603-7331-6

Applicant Contact Name: Stormy Donovan Phone #: 817-658-3767

Email Address: Claritydpfcleaning@gmail.com

Grant Amount Requested (\$5000 max): \$ 5000.00 Business Type: Commercial/Auto Repair/maintenance

Business in operation as of Jan 01, 2020? YES NO

Business is currently operating and compliant? YES NO

Business is located in unincorporated area of Johnson County? YES NO

Business has 20 employees or less? YES NO

Business lost employees during Covid-19 Declarations? YES NO

If "YES" how many? _____ Will business be rehiring? YES NO

Business operates as a Franchise or Franchisee? YES NO

If "YES" is business locally owned? YES NO

Business received any financial support or loans as result of CARES Act? YES NO

How has your business been impacted by the COVID-19 Declarations? _____

Yes, we have seen a significant drop in business. We clean a very expensive filter in diesel exhaust systems.

How long was business closed during COVID-19 Declarations? From: We were not closed, we are under transportation repair.

If awarded a grant, how do you plan to use the grant to support the growth of the business? _____

Shop rent, and utilities.

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I agree to the above statement

I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant: Storrey Donovan Date: 7-6-20

Printed Name of Applicant: Storrey Donovan

Title of Applicant: Owner

Name of Business: Clarity DPF Cleaning Service LLC

Physical Address of Business: 5297 Big Six Street Suite A

City: Alvarado State: Texas Zip Code: 76009

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission

Diana J. Miller, Executive Director

Phone: 817-556-6985

Email: grant-icedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT
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Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: McDaniel Custom Saddles

Mailing Address: 9528 E FM 917

Business Address: Alvarado TX 76009

Business ID#: 94-3446085

Sales Tax and Use Permit #: 3-20381-1471-9

Applicant Contact Name: Ron McDaniel Phone #: 817-790-6446

Email Address: rbm18457@gmail.com

Grant Amount Requested (\$5000 max): \$5000 Business Type: Manufacturing

Business in operation as of Jan 01, 2020? Yes YES NO

Business is currently operating and compliant? Yes YES NO

Business is located in unincorporated area of Johnson County? Yes YES NO

Business has 20 employees or less? Yes YES NO

Business lost employees during Covid-19 Declarations? Yes YES NO

If "YES" how many? 2 Will business be rehiring? Yes YES NO

Business operates as a Franchise or Franchisee? Yes YES NO

If "YES" is business locally owned? Yes YES NO

Business received any financial support or loans as result of CARES Act? YES No NO

How has your business been impacted by the COVID-19 Declarations? Yes

The major portion of income comes from making trade shows

and all of my shows for this current year have been canceled

How long was business closed during COVID-19 Declarations? From: April 15, 2020 to June 15, 2020

If awarded a grant, how do you plan to use the grant to support the growth of the business? We

will get back to the manufacturing of our custom saddles. This should generate at least 3

more employees to get going again.

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Ron _____ I agree to the above statement

Ron _____ I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant: Ron McDaniel  Date: 7/6-2020

Printed Name of Applicant: Ron McDaniel

Title of Applicant: Mgr

Name of Business: McDaniel Custom Saddles

Physical Address of Business: 9528 E FM 917

City: Alvarado State: Texas Zip Code: 76009

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission

Diana J. Miller, Executive Director

Phone: 817-556-6985

Email: grant-icedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT
In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: Ell's Place

Mailing Address: 4205 East FM 4, Cleburne, TX 76031

Business Address: Same

Business ID#: 26-0864497

Sales Tax and Use Permit #: 3-20322-5238-2

Applicant Contact Name: Ellen P. Stephenson

Phone #: 817-525-3998

Email Address: ellenpstephenson@gmail.com

Grant Amount Requested (\$5000 max): \$5,000

Business Type: Restaurant

Business in operation as of Jan 01, 2020? YES YES _____ NO

Business is currently operating and compliant? Yes YES _____ NO

Business is located in unincorporated area of Johnson County? Yes YES _____ NO

Business has 20 employees or less? Yes YES _____ NO

Business lost employees during Covid-19 Declarations? Yes YES _____ NO

If "YES" how many? 2 Will business be rehiring? Yes YES _____ NO

Business operates as a Franchise or Franchisee? _____ YES No NO

If "YES" is business locally owned? _____ YES _____ NO

Business received any financial support or loans as result of CARES Act? _____ YES No NO

How has your business been impacted by the COVID-19 Declarations? _____

Take-Out Only for 2 months. Lost income.

How long was business closed during COVID-19 Declarations? From: _____ to _____

If awarded a grant, how do you plan to use the grant to support the growth of the business? _____

Payroll, supplies, et cetera

PROGRAM LIMITATIONS: The Johnson County Small Business Recovery Program is not intended to and shall not be construed to confer any right, interest, or entitlement to any person or business entity, and any grants, or portions of grants, under this program may be suspended, revoked, or cancelled at any time. Applications for grants will be uniformly considered based on compliance with eligibility criteria and on a first come, first served basis only; awards will not be given nor considered on the basis of age, race, ethnicity, religion, sex, or any legally protected classification. Due to limited funding, no person or business entity will be allowed overlapping awards of more than one award per eligible business, nor more than the maximum allowable grant per business. The Johnson County Commissioners' Court reserves the right to decline any application for any non-discriminatory reason or to approve and provide grants of less than the maximum amount.

Following an award, if any one or more of the criteria are not met or it is discovered that an application contains materially false or misleading information, then as a condition of an award and of this program, the applicant shall immediately refund all grant payments previously made and all costs incurred by the County and/or JCEDC, including reasonable attorney's fees. By submitting an application or by accepting an award, it is an express condition that the applicant and recipient indemnify, defend, release and hold harmless the County, JCEDC, and its members, officials, employees, and representatives from and against any and all claims, liabilities, losses and expenses (including reasonable attorney's fees) directly or indirectly arising from or in connection with any act, omission, or conduct of the County and/or JCEDC.

I have read and agree to the terms and conditions set forth above. I understand that my request will be evaluated and recommendations made as to approval of this Small Business Recovery Grant. I understand that the submittal of this application in no way guarantees me a grant from the Johnson County Economic Development Commission or the Johnson County Commissioners' Court. I understand that additional information may be requested as needed. The JCED and/or the Johnson County Commissioners' Court reserves the right to reject any and all applications at their sole discretion. All information provided is true and correct and any financial information submitted has not been manipulated to exaggerate the financial duress of this business.

ES I agree to the above statement

ES I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant: Ellen P. Stephenson Date: 7-13-2020

Printed Name of Applicant: Ellen P. Stephenson

Title of Applicant: Owner

Name of Business: Ell's Place

Physical Address of Business: 4205 East FM 4

City: Cleburne State: Texas Zip Code: 76050

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission

Diana J. Miller, Executive Director

Phone: 817-556-6985

Email: grant-icedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT
In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: A+E Custom Picture Framing

Mailing Address: 2617 County Road 429, Cleburne 76031

Business Address: SAME

Business ID#: 46-5568355

Sales Tax and Use Permit #: 3-20539-4328-1

Applicant Contact Name: Estelle Stepherson Phone #: 817-308-3295

Email Address: estepherson@sbeaglobal.net

Grant Amount Requested (\$5000 max): \$ 5,000.- Business Type: Picture Framing

Business in operation as of Jan 01, 2020? YES NO

Business is currently operating and compliant? YES NO

Business is located in unincorporated area of Johnson County? YES NO

Business has 20 employees or less? YES NO

Business lost employees during Covid-19 Declarations? YES NO

If "YES" how many? Will business be rehiring? YES NO

Business operates as a Franchise or Franchisee? YES NO

If "YES" is business locally owned? YES NO

Business received any financial support or loans as result of CARES Act? YES NO

How has your business been impacted by the COVID-19 Declarations? Completely shut down since March.

How long was business closed during COVID-19 Declarations? From: March 13 to June 15

If awarded a grant, how do you plan to use the grant to support the growth of the business?

purchase updated inventory ; a point of sale system used in the picture framing industry

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I have read and agree to the terms and conditions set forth above. I understand that my request will be evaluated and recommendations made as to approval of this Small Business Recovery Grant. I understand that the submittal of this application in no way guarantees me a grant from the Johnson County Economic Development Commission or the Johnson County Commissioners' Court. I understand that additional information may be requested as needed. The JCED and/or the Johnson County Commissioners' Court reserves the right to reject any and all applications at their sole discretion. All information provided is true and correct and any financial information submitted has not been manipulated to exaggerate the financial duress of this business.

I agree to the above statement

I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant:  Date: 7-7-2020

Printed Name of Applicant: Estelle Stepherson

Title of Applicant: Co-owner

Name of Business: A & E Custom Picture Framing

Physical Address of Business: 2617 County Road 429

City: Cleburne State: Texas Zip Code: 76031

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission

Diana J. Miller, Executive Director

Phone: 817-556-6985

Email: grant-icedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT
In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: Dani and Zo's Resale Shop

Mailing Address: 12870 FM 917 Unit C Alvarado Tx 76009

Business Address: 12870 FM 917 Unit C Alvarado Tx 76009

Business ID#: 842531441

Sales Tax and Use Permit #: 3-20714-5010-3

Applicant Contact Name: Darren Albertson Phone #: 817-524-8335

Email Address: darren.albertson@yahoo.com

Grant Amount Requested (\$5000 max): \$5,000 Business Type: Resale Shop

Business in operation as of Jan 01, 2020? YES NO

Business is currently operating and compliant? YES NO

Business is located in unincorporated area of Johnson County? YES NO

Business has 20 employees or less? YES NO

Business lost employees during Covid-19 Declarations? YES NO

If "YES" how many? Will business be rehiring? YES NO

Business operates as a Franchise or Franchisee? YES NO

If "YES" is business locally owned? YES NO

Business received any financial support or loans as result of CARES Act? YES NO

How has your business been impacted by the COVID-19 Declarations?

Yes, the pandemic forced us to close our store. We were unable to gain revenue or buy products to replenish our

inventory. We have had to pay rent and utilities from our personal savings.

How long was business closed during COVID-19 Declarations? From: 04/17/2020 to 05/21/2020

If awarded a grant, how do you plan to use the grant to support the growth of the business?

We would utilize a grant to pay rent, utilities and purchase inventory.. We would

be able to recover most of our savings and prayerfully be able to get back to a positive bottom line.

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I have read and agree to the terms and conditions set forth above. I understand that my request will be evaluated and recommendations made as to approval of this Small Business Recovery Grant. I understand that the submittal of this application in no way guarantees me a grant from the Johnson County Economic Development Commission or the Johnson County Commissioners' Court. I understand that additional information may be requested as needed. The JCED and/or the Johnson County Commissioners' Court reserves the right to reject any and all applications at their sole discretion. All information provided is true and correct and any financial information submitted has not been manipulated to exaggerate the financial duress of this business.

I agree to the above statement

I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant:  Date: 07/07/2020

Printed Name of Applicant: Darren Albertson

Title of Applicant: Owner

Name of Business: Dani and Zo's Home Resale Shop

Physical Address of Business: 12870 FM 917 Unit C

City: Alvarado State: Texas Zip Code: 76009

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission

Diana J. Miller, Executive Director

Phone: 817-556-6985

Email: grant-icedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT

In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: David Jones / Willow Creek Ranch

Mailing Address: 3348 W. FM 4, Cleburne TX 76033

Business Address: 3348 W. FM 4, Cleburne TX 76033

Business ID#: _____

Sales Tax and Use Permit #: _____

Applicant Contact Name: David Jones

Phone #: 817-558-2608

Email Address: jonesbarnllc@gmail.com

Grant Amount Requested (\$5000 max): \$ 5,000.00 Business Type: Vehicle Rental

Business in operation as of Jan 01, 2020? YES NO

Business is currently operating and compliant? YES NO

Business is located in unincorporated area of Johnson County? YES NO

Business has 20 employees or less? YES NO

Business lost employees during Covid-19 Declarations? YES NO

If "YES" how many? _____ Will business be rehiring? YES NO

Business operates as a Franchise or Franchisee? YES NO

If "YES" is business locally owned? YES NO

Business received any financial support or loans as result of CARES Act? YES NO

How has your business been impacted by the COVID-19 Declarations? March 15th 2020

the shutdown closed us and
affected future events

How long was business closed during COVID-19 Declarations? From: March 15th 2020 to Now

If awarded a grant, how do you plan to use the grant to support the growth of the business? _____

Help pay bills.

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Following an award, if any one or more of the criteria are not met or it is discovered that an application contains materially false or misleading information, then as a condition of an award and of this program, the applicant shall immediately refund all grant payments previously made and all costs incurred by the County and/or JCEDC, including reasonable attorney's fees. By submitting an application or by accepting an award, it is an express condition that the applicant and recipient indemnify, defend, release and hold harmless the County, JCEDC, and its members, officials, employees, and representatives from and against any and all claims, liabilities, losses and expenses (including reasonable attorney's fees) directly or indirectly arising from or in connection with any act, omission, or conduct of the County and/or JCEDC.

I have read and agree to the terms and conditions set forth above. I understand that my request will be evaluated and recommendations made as to approval of this Small Business Recovery Grant. I understand that the submittal of this application in no way guarantees me a grant from the Johnson County Economic Development Commission or the Johnson County Commissioners' Court. I understand that additional information may be requested as needed. The JCED and/or the Johnson County Commissioners' Court reserves the right to reject any and all applications at their sole discretion. All information provided is true and correct and any financial information submitted has not been manipulated to exaggerate the financial duress of this business.

I agree to the above statement

I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant:

David Jones

Date:

7-7-2020

Printed Name of Applicant:

David Jones

Title of Applicant:

Owner

Name of Business:

Willow Creek Ranch

Physical Address of Business:

3348 W.F.M 4

City: Cleburne

State: Texas

Zip Code: 76033

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission

Diana J. Miller, Executive Director

Phone: 817-556-6985

Email: grant-icedc@digitex.net

2020 JOINSON COUNTY SMALL BUSINESS RECOVERY GRANT
In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: SFX Performance

Mailing Address: 12811 E. FM 917 UNIT A

Business Address: 12811 E. FM 917 UNIT A

Business ID#: EIN 20-0248415

Sales Tax and Use Permit #: 1-200248415-7

Applicant Contact Name: Richard Bristow

Phone #: 817-473-3500

Email Address: rbristow@sfxperformance.com

Grant Amount Requested (\$5000 max): \$5000.00 Business Type: auto parts

Business in operation as of Jan 01, 2020? YES NO

Business is currently operating and compliant? YES NO

Business is located in unincorporated area of Johnson County? YES NO

Business has 20 employees or less" YES NO

Business lost employees during Covid-19 Declarations? YES NO

If "YES" how many? _____ Will business be rehiring? YES NO

Business operates as a Franchise or Franchisee? YES NO

If "YES" is business locally owned? YES NO

Business received any financial support or loans as result of CARES Act? YES NO

How has your business been impacted by the COVID-19 Declarations?

Although we didn't completely shut down we did go down to a skeleton staff, we did continue to pay all employees

their full paychecks during this time. Once we did reopen we purchased a lot of PPE and disinfecting solutions

including wipes, disinfectant. We have also supplied customers with masks from as early as February.

How long was business closed during COVID-19 Declarations? From: _____ to 5/1/2020

If awarded a grant, how do you plan to use the grant to support the growth of the business? _____

We have been a business and employer here in Johnson county for over 10 years and hope to continue to be for the foreseeable future.

We hope to continue to grow this business. Thank you for the opportunity.

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I have read and agree to the terms and conditions set forth above. I understand that my request will be evaluated and recommendations made as to approval of this Small Business Recovery Grant. I understand that the submittal of this application in no way guarantees me a grant from the Johnson County Economic Development Commission or the Johnson County Commissioners' Court. I understand that additional information may be requested as needed. The JCED and/or the Johnson County Commissioners' Court reserves the right to reject any and all applications at their sole discretion. All information provided is true and correct and any financial information submitted has not been manipulated to exaggerate the financial duress of this business.

Yes I agree to the above statement

Yes I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant: 

Date: 07/06/2020

Printed Name of Applicant: Richard P. Bristow

Title of Applicant: Partner

Name of Business: SFX Performance

Physical Address of Business: 12811 E. FM 917 UNIT A

City: ALVARADO

State: Texas

Zip Code: 76009

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission

Diana J. Miller, Executive Director

Phone: 817-556-6985

Email: grant-icedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT
In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: Awards-N-More

Mailing Address: 101 Rainbow Crest

Business Address: Same

Business ID#: _____

Sales Tax and Use Permit #: 32049566022

Applicant Contact Name: Bryan Zimmerman Phone #: 214-577-5857

Email Address: awards_n_more@yahoo.com

Grant Amount Requested (\$5000 max): \$ 5000 Business Type: Awards/Trophies/Screen Printing etc.

Business in operation as of Jan 01, 2020? Yes YES NO

Business is currently operating and compliant? Yes YES NO

Business is located in unincorporated area of Johnson County? Yes YES NO

Business has 20 employees or less" Yes (ME) YES NO

Business lost employees during Covid-19 Declarations? _____ YES NO I am only emp. NO

If "YES" how many? _____ Will business be rehiring? _____ YES NO

Business operates as a Franchise or Franchisee? _____ YES NO NO

If "YES" is business locally owned? _____ YES NO

Business received any financial support or loans as result of CARES Act? _____ YES NO NO

How has your business been impacted by the COVID-19 Declarations? Yes

Zero income since March.

How long was business closed during COVID-19 Declarations? From: Bascially March to Current

If awarded a grant, how do you plan to use the grant to support the growth of the business?

Pay my open accounts that are on hold and pay my bills

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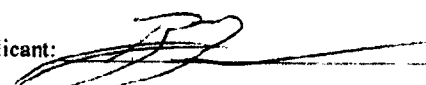
Following an award, if any one or more of the criteria are not met or it is discovered that an application contains materially false or misleading information, then as a condition of an award and of this program, the applicant shall immediately refund all grant payments previously made and all costs incurred by the County and/or JCEDC, including reasonable attorney's fees. By submitting an application or by accepting an award, it is an express condition that the applicant and recipient indemnify, defend, release and hold harmless the County, JCEDC, and its members, officials, employees, and representatives from and against any and all claims, liabilities, losses and expenses (including reasonable attorney's fees) directly or indirectly arising from or in connection with any act, omission, or conduct of the County and/or JCEDC.

I have read and agree to the terms and conditions set forth above. I understand that my request will be evaluated and recommendations made as to approval of this Small Business Recovery Grant. I understand that the submittal of this application in no way guarantees me a grant from the Johnson County Economic Development Commission or the Johnson County Commissioners' Court. I understand that additional information may be requested as needed. The JCED and/or the Johnson County Commissioners' Court reserves the right to reject any and all applications at their sole discretion. All information provided is true and correct and any financial information submitted has not been manipulated to exaggerate the financial duress of this business.

BZ I agree to the above statement

BZ I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant: 

Date: 7-8-2020

Printed Name of Applicant: Bryan Zimmerman

Title of Applicant: Owner

Name of Business: Awards-N-More

Physical Address of Business: 101 Rainbow Crest

City: Burleson

State: Texas

Zip Code: 76028

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission

Diana J. Miller, Executive Director

Phone: 817-556-6985

Email: grant-jcedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT

In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: Culpc Holdings

Mailing Address: 3216 East Renfro

Business Address: 6244 Cook Hills Rd

Business ID#: 47-4622566

Sales Tax and Use Permit #: _____

Applicant Contact Name: Mike Culpepper Phone #: 817-229-1853

Email Address: mikeculpepper@yahoo.com

Grant Amount Requested (\$5000 max): \$ 5000 Business Type: Handyman

Business in operation as of Jan 01, 2020? X YES _____ NO

Business is currently operating and compliant? X YES _____ NO

Business is located in unincorporated area of Johnson County? X YES _____ NO

Business has 20 employees or less? X YES _____ NO

Business lost employees during Covid-19 Declarations? _____ YES _____ NO

If "YES" how many? _____ Will business be rehiring? _____ YES _____ NO

Business operates as a Franchise or Franchisee? _____ YES X _____ NO

If "YES" is business locally owned? _____ YES X _____ NO

Business received any financial support or loans as result of CARES Act? _____ YES X _____ NO

How has your business been impacted by the COVID-19 Declarations? _____

Inability to serve customers due to decreased access to cleaning/sanitation supplies to provide a safe environment. Work was also slowed down due to protections in place at suppliers with long wait periods to enter and obtain supplies to complete jobs.

How long was business closed during COVID-19 Declarations? From: _____ to _____

If awarded a grant, how do you plan to use the grant to support the growth of the business? _____

Continue to provide services with appropriate protection for customers and employees.

Provide the use of independent contractors to complete jobs and provide essential services

to the community

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I have read and agree to the terms and conditions set forth above. I understand that my request will be evaluated and recommendations made as to approval of this Small Business Recovery Grant. I understand that the submittal of this application in no way guarantees me a grant from the Johnson County Economic Development Commission or the Johnson County Commissioners' Court. I understand that additional information may be requested as needed. The JCED and/or the Johnson County Commissioners' Court reserves the right to reject any and all applications at their sole discretion. All information provided is true and correct and any financial information submitted has not been manipulated to exaggerate the financial duress of this business.

I agree to the above statement

I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant: 

Date: 7-8-2020

Printed Name of Applicant: Mike Culpepper

Title of Applicant: Owner/Operator

Name of Business: Culpco Holdings Inc

Physical Address of Business: 6244 Cook Hills Rd

City: Burleson

State: Texas

Zip Code: 76028

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission

Diana J. Miller, Executive Director

Phone: 817-556-6985

Email: grant-icedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT

In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: Gray Matter Garage, LLC

Mailing Address: 308 Sunset Dr, Cleburne, TX 76033

Business Address: 5966 E Highway 67, Alvarado, Texas 76009

Business ID#: 83-1991317

Sales Tax and Use Permit #: 3-20684-4798-9

Applicant Contact Name: Kim Gray

Phone #: 817-691-2010

Email Address: graymatterats@gmail.com

Grant Amount Requested (\$5000 max): \$5000

Business Type: Automotive Repair and Technology Solutions

Business in operation as of Jan 01, 2020? Yes YES NO

Business is currently operating and compliant? Yes (mobile) YES NO

Business is located in unincorporated area of Johnson County? Yes YES NO

Business has 20 employees or less? Yes YES NO

Business lost employees during Covid-19 Declarations? Yes YES NO

If "YES" how many? 1 Will business be rehiring? Yes YES NO

Business operates as a Franchise or Franchisee? YES No NO

If "YES" is business locally owned? YES NO

Business received any financial support or loans as result of CARES Act? YES No NO

How has your business been impacted by the COVID-19 Declarations? Yes

Volume of business sharply declined during the month of March which resulted in the closure of our physical location and having to become mobile in order to pay other monthly operating costs, taxes and living expenses.

How long was business closed during COVID-19 Declarations? From: March 30, 2020 to

If awarded a grant, how do you plan to use the grant to support the growth of the business? The grant will be used to pay cost of goods, monthly operating expenses, and help to purchase a new shop so I can continue to grow my business in Johnson County and provide jobs for upcoming technicians who want hands on experience with new advanced automotive technology.

PROGRAM LIMITATIONS: The Johnson County Small Business Recovery Program is not intended to and shall not be construed to confer any right, interest, or entitlement to any person or business entity, and any grants, or portions of grants, under this program may be suspended, revoked, or canceled at any time. Applications for grants will be uniformly considered based on compliance with eligibility criteria and on a first come, first served basis only; awards will not be given nor considered on the basis of age, race, ethnicity, religion, sex, or any legally protected classification. Due to limited funding, no person or business entity will be allowed overlapping awards of more than one award per eligible business, nor more than the maximum allowable grant per business. The Johnson County Commissioners' Court reserves the right to decline any application for any non-discriminatory reason or to approve and provide grants of less than the maximum amount.

Following an award, if any one or more of the criteria are not met or it is discovered that an application contains materially false or misleading information, then as a condition of an award and of this program, the applicant shall immediately refund all grant payments previously made and all costs incurred by the County and/or JCEDC, including reasonable attorney's fees. By submitting an application or by accepting an award, it is an express condition that the applicant and recipient indemnify, defend, release and hold harmless the County, JCEDC, and its members, officials, employees, and representatives from and against any and all claims, liabilities, losses and expenses (including reasonable attorney's fees) directly or indirectly arising from or in connection with any act, omission, or conduct of the County and/or JCEDC.

I have read and agree to the terms and conditions set forth above. I understand that my request will be evaluated and recommendations made as to approval of this Small Business Recovery Grant. I understand that the submittal of this application in no way guarantees me a grant from the Johnson County Economic Development Commission or the Johnson County Commissioners' Court. I understand that additional information may be requested as needed. The JCED and/or the Johnson County Commissioners' Court reserves the right to reject any and all applications at their sole discretion. All information provided is true and correct and any financial information submitted has not been manipulated to exaggerate the financial distress of this business.

CG I agree to the above statement

CG I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant:  Date: 07-07-2020

Printed Name of Applicant: Casey Gray

Title of Applicant: Owner

Name of Business: Gray Matter Garage

Physical Address of Business: 5966 E Highway 67

City: Alvarado State: Texas Zip Code: 76009

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission

Diana J. Miller, Executive Director

Phone: 817-556-6985

Email: grant-icedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT

In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: Villa Dianna Italian Restaurant / Boni Inc

Mailing Address: 2475 E. Renfro St. Ste A Burleson TX 76028

Business Address: 2475 E. Renfro St. Ste A Burleson TX 76028

Business ID#: _____

Sales Tax and Use Permit #: 76-0719935

Applicant Contact Name: Manushage Hadza Phone #: 817-703-3300

Email Address: mhodza29@yahoo.com

Grant Amount Requested (\$5000 max): \$ 5,000.00 Business Type: Restaurant (Italian)

Business in operation as of Jan 01, 2020? YES NO

Business is currently operating and compliant? YES NO

Business is located in unincorporated area of Johnson County? YES NO

Business has 20 employees or less? YES NO

Business lost employees during Covid-19 Declarations? YES NO

If "YES" how many? 11 Will business be rehiring? YES NO

Business operates as a Franchise or Franchisee? YES NO

If "YES" is business locally owned? YES NO

Business received any financial support or loans as result of CARES Act? YES NO

How has your business been impacted by the COVID-19 Declarations? We mainly rely on

Dine in customers about 80% and takeout 20%. We happen to have a Drive-thru window which has been our life saver for us. We could have never made it through

this without it. With reopening of Texas now on hold and back to 50% it has slowed things

How long was business closed during COVID-19 Declarations? From: 3/23/20 to 5/11/20

If awarded a grant, how do you plan to use the grant to support the growth of the business? Dine in closed, Drive-thru - takeout

We have been having a bit of trouble with our entrance and exit by out drive-thru and would love to fix the big potholes. We have filled with gravel but when it rains and as cars run over and over it gets bad again. So thats where I would like to use the grant.

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M.H. I agree to the above statement

M.H. I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant: Manushaqe Hodza Date: 7-8-20
Printed Name of Applicant: Manushaqe Hodza
Title of Applicant: Goni INC (President)
Name of Business: Villa Dianna Italian Restaurant
Physical Address of Business: 2475 E. Rentro St.
City: Burleson State: Texas Zip Code: 76028

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission
Diana J. Miller, Executive Director
Phone: 817-556-6985
Email: grant-jcedc@jcc.org

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT
In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: ROBERT WELCH DBA/RLW LIQUIDATORS

Mailing Address: P O BOX 13801 ARLINGTON TEXAS 76094

Business Address: 5308 BIG SIX STREET ALVARADO TX 76009

Business ID#: _____

Sales Tax and Use Permit #: 52037459022

Applicant Contact Name: ROBERT WELCH Phone #: 817-861-2786

Email Address: WELCH2300@SBCGLOBAL.NET

Grant Amount Requested (\$5000 max): \$5000 Business Type: AUCTION HOUSE

Business in operation as of Jan 01, 2020? YES YES _____ NO

Business is currently operating and compliant? YES YES _____ NO

Business is located in unincorporated area of Johnson County? YES YES _____ NO

Business has 20 employees or less" YES YES _____ NO

Business lost employees during Covid-19 Declarations? YES YES _____ NO

If "YES" how many? 5 Will business be rehiring? YES YES _____ NO

Business operates as a Franchise or Franchisee? NO YES NO NO

If "YES" is business locally owned? NO YES N/A NO

Business received any financial support or loans as result of CARES Act? _____ YES _____ NO

How has your business been impacted by the COVID-19 Declarations? YES

HAD TO SHUT DOWN BUSINESS DUE TO REGULATIONS AND MANDATES

How long was business closed during COVID-19 Declarations? From: MARCH 2020 to MAY 2020

If awarded a grant, how do you plan to use the grant to support the growth of the business? _____
RENTAL ENPENSE, UTILITIES, INSURANCE PAYROLL FOR EMPLOYEES

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RW _____ I agree to the above statement

RW _____ I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant: ROBERT WELCH  Date: 07/06/20

Printed Name of Applicant: ROBERT WELCH

Title of Applicant: OWNER

Name of Business: RLW LIQUIDATORS

Physical Address of Business: 5308 BIG SIX STREET ALVARADO TX 76009

City: ALVARADO State: Texas Zip Code: 76009

Return the completed application and documents via email to:

NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**

Johnson County Economic Development Commission
Diana J. Miller, Executive Director
Phone: 817-556-6985
Email: grant-jcedc@digitex.net

2020 JOHNSON COUNTY SMALL BUSINESS RECOVERY GRANT
In Partnership with the
Johnson County Economic Development Commission

APPLICATION

Applicant/Business Name: Expression Woodworks

Mailing Address: 2525 E. Renfro Burleson TX 76028

Business Address: Same as mailing

Business ID#: EIN 84-2213547

Sales Tax and Use Permit #: N/A

Applicant Contact Name: JD Gonzales Phone #: 817-271-3723

Email Address: jd@expression-woodworks.com

Grant Amount Requested (\$5000 max): \$ 5000.00 Business Type: Cabinet Shop Manufacturing

Business in operation as of Jan 01, 2020? YES NO

Business is currently operating and compliant? YES NO

Business is located in unincorporated area of Johnson County? YES NO

Business has 20 employees or less" YES NO

Business lost employees during Covid-19 Declarations? YES NO

If "YES" how many? _____ Will business be rehiring? YES NO

Business operates as a Franchise or Franchisee? YES NO

If "YES" is business locally owned? YES NO

Business received any financial support or loans as result of CARES Act? YES NO

How has your business been impacted by the COVID-19 Declarations? Customers have pulled out of projects or postponed them until the crisis has ended due to unknown financial burdens. We work primarily residential

How long was business closed during COVID-19 Declarations? From: N/A to N/A

If awarded a grant, how do you plan to use the grant to support the growth of the business?

To cover expenses for operation as well as paying my employees so I don't have to pay them off.

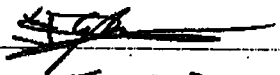
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I agree to the above statement
 I am authorized to submit this application on behalf of the business

If awarded a grant I will provide documentation to the JCEDC and the Johnson County Commissioners' Court that 100% of the funds were spent on eligible expenses or qualified reimbursements within 90 days of receiving the grant.

Signature of Applicant:  Date: 07-09-2020
Printed Name of Applicant: JUAN D. GONZALES
Title of Applicant: OWNER / PARTNER
Name of Business: EXPRESSION WOODWORKS
Physical Address of Business: 2525 E BONFEE
City: BURLESON State: TEXAS Zip Code: 76028

Return the completed application and documents via email to:
NOTE* In SUBJECT line of email, put "COVID-19 GRANT"**
Johnson County Economic Development Commission
Diana J. Miller, Executive Director
Phone: 817-556-6985
Email: 