

The Indiana Commission to Combat Drug Abuse



Behavioral Health Division

Comprehensive Community Plan

County: Hancock
LCC Name: Neighborhoods Against Substance Abuse
LCC Contact: Tim Retherford
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City: Greenfield
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County Commissioners: Bill Spalding, Jeannine Gray, and Gary McDaniel
Address: 111 S. American Legion Place, Ste. 219
City: Greenfield
Zip Code: 46140

Vision Statement

What is your Local Coordinating Council's vision statement?

Working together to create a safer, healthier Hancock County that allows our youth and families to thrive.

Mission Statement

What is your Local Coordinating Council's mission statement?

Neighborhoods Against Substance Abuse exists as a community partnership that strives to develop healthy lifestyles through Prevention, Education, Treatment, and Enforcement of substance abuse issues for youth and adults.

Membership List					
#	Name	Organization	Race	Gender	Category
1	Brandee Bastin Board Member	Hancock County Tobacco Free Coalition/Rotary	Caucasian	Female	Civic/Volunteer
2	Mandy Gray Coalition Member	Purdue Cooperative Extension	Caucasian	Female	Education
3	Crystal Baker Board Member	Hancock County Health Department	Caucasian	Female	Healthcare
4	Mike Crider Advisory Member	State Senator	Caucasian	Male	Government
5	Janeen Younce Board Member	Retired Business	Caucasian	Female	Business
6	Melanie Kerkhof Coalition Partner	Medicap Pharmacy	Caucasian	Female	Healthcare
7	Caron MacPherson Board Member	University of Indianapolis	Caucasian	Female	Healthcare/Education
8	Christine Rapp Board Member	D.A.R.E. Indiana	Caucasian	Female	Prevention
9	Mark Galbraith Coalition Member	Hancock County D.A.R.E.	Caucasian	Male	Law Enforcement/Education
10	Dede Allender Board Member	Recycle Hancock County	Caucasian	Female	Prevention
11	Brad Burkhart Coalition Member	Hancock County Sheriff's Dept.	Caucasian	Male	Law Enforcement
12	Scott Stroud Board Member	Greenfield- Central Schools	Caucasian	Male	Education
13	Tim Retherford Staff – Executive Director	NASA	Caucasian	Male	Prevention
14	Gina Colclazier Coalition Member	Brandywine Community Church	Caucasian	Female	Religious
15	Kim Hall Board Member	Mental Health Partners of Hancock County	Caucasian	Female	Treatment/Intervention
16	Angel Abner Board Member	Wellspring Mental Health	Caucasian	Female	Treatment/Intervention
17	Kyle Addison Board Member	Hancock County Sheriff's Dept.	Caucasian	Male	Law Enforcement/ Prevention
18	Chad Sisk Coalition Member	Daily Reporter	Caucasian	Male	Media
19	Paul Galbraith Coalition Partner	Brandywine Community Church	Caucasian	Male	Religious
20	Jeff Colclazier Staff – Program Asst.	NASA	Caucasian	Male	Prevention
21	Craig Moore Coalition Partner	New Palestine High School	Caucasian	Male	Education
22	Brent Eaton Coalition Partner	Hancock County Government	Caucasian	Male	Law Enforcement
23	Adam Barton Coalition Partner	Eastern Hancock High School	Caucasian	Male	Education
24	Nathan Bruck Coalition Partner	Greenfield-Central High School	Caucasian	Male	Education
25	Stan Wilkison Coalition Partner	Mt. Vernon High School	Caucasian	Male	Education

LCC Meeting Schedule:

Please provide the months the LCC meets throughout the year:

: NASA meets every month, except for the month of July. Meetings are primarily on the 1st Friday of the month barring holidays or grant award season. Meetings are in-person.

II. Community Needs Assessment

The first step in developing an effective substance use and misuse reduction plan is to assess your community. A community assessment tells you about your community's readiness to implement prevention, treatment, and justice-related programs to address substance use and misuse. An assessment also provides an overview of the risk and protective factors present in the community, helping your coalition plan more effectively.

Community Profile

County Name
Hancock
County Population
79,840 (2020 Census); Estimate July 2023 (census.gov) 86,166
Schools in the community
Eastern Hancock, Greenfield-Central, Mt. Vernon, and New Palestine Schools (K-12) Public St. Michael's Catholic School, Zion Lutheran School (K-8) Private, Geist Montessori Academy (K-8) Public Charter
Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.)
Hancock Health Network, Community Health Network
Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.)
Hancock Counseling and Psychiatric Services, Community Health Network Behavioral Health, The Jane Pauley Community Health Center, Mental Health Partners, Hickory House, Mosaic Counseling, Eagle Creek Counseling, Origins Family Counseling, Restoration Counseling, Oases Counseling, Lana Allen – LCSW, Hancock Connection Center, and Wellspring
Service agencies/organizations
Rotary, Lions Club, Sertoma, Veteran's, Boy Scouts, Girl Scouts, FOP #140, Eagles, Elks, Chambers of Commerce (New Palestine and Greenfield), YMCA, Boys and Girls Clubs of Hancock County.

Local media outlets that reach the community
Daily Reporter, Giant FM, Comcast, 89.7 WRGF and Indianapolis radio and television market.
What are the substances that are most problematic in your community?
Alcohol, marijuana, prescription/OTC, methamphetamine, heroin, and vaping (nicotine included)
List all substance use/misuse services/activities/programs presently taking place in the community
NASA classroom education on prescription/OTC drugs, marijuana, vaping, and alcohol (Alcohol Literacy Challenge). Hancock County D.A.R.E., Celebrate Recovery, the Landing for Teens, The Bridge, Hancock County Tobacco Free Coalition – Prevention and Cessation programs, NASA Youth Council, Talitha Kuom, and many local treatment providers for adults.

Community Risk and Protective Factors

Use the list of risk and protective factors to identify those present in your community. Identify the resources/assets and limitations/gaps that exist in your community related to each. The lists are not all-inclusive and others may apply.

Risk Factors Examples: trauma and toxic stressors; poverty violence; neighborhood characteristics; low neighborhood attachment; community disorganization; community norms and laws favorable toward drug use, firearms, and crime; availability of alcohol and other drugs; weak family relationships; family substance use; peer substance use; mental health problems; families moving frequently from home to home; limited prevention and recovery resources.

Protective Factors Examples: strong family relationships; neighborhood economic viability; low childhood stress; access to health care; access to mental health care; community-based interventions; restricted access to alcohol and other drugs including restrictive laws and excise taxes; safe, supportive, and connected neighborhoods; meaningful youth engagement opportunities; local policies and practices that support healthy norms and child-youth programs; positive connection to adults.¹

Risk Factors	Resources/Assets	Limitations/Gaps
1. Easy access to alcohol is a problem. It is prevalent in most homes, with many other alternative sources.	1. Underage Drinking Task Force 2. Local school policies (Drug Testing and Juvenile probation waiver)	1. Availability to purchase, steal, and order online. 2. All schools now have drug testing as of fall 2024. Funding for this will be the challenge now.

¹Risk and protective factors extracted from IUPUI Center for Health Policy Community Conditions Favorable for Substance Use, April 2018.

	3. Religious (Celebrate Recovery) programs are available for adults in our community.	3. Youth treatment is very hard to access. This continues to be difficult in 2025.
2. Marijuana and vaping products (nicotine and THC) are readily available in Hancock County.	1. Treatment providers for adults are prevalent. 2. Navigators are available to assist individuals through the system. 3. Free religious based recovery programs are available to adults and teens.	1. No in-patient treatment facilities for youth and only one facility that caters to affluent, mostly out of our community. 2. Lack of insurance coverage for services. 3. No individualized youth treatment programs locally.
3. Peer perception of use and family attitudes toward use create an acceptance of use for Rx/OTC, opioids and other narcotic drugs.	1. NASA Youth Council for peer education. 2. School partnerships to provide classroom education on alcohol, marijuana, prescription drugs, tobacco, and vaping. 3. Media partnerships to share message with families.	1. Invincibility syndrome. 2. Family modeling of behaviors. 3. Treatment options for adults are limited based on insurance/cost; options for youth are near non-existent.
Protective Factors	Resources/Assets	Limitations/Gaps
1. Community partnerships and overall willingness to work together.	1. Underage Drinking Task Force 2. Tobacco Free Coalition and smoke-free indoor air ordinance. 3. School Safety Committee to address all issues within school system, but includes prevention, law enforcement, prosecutor's office and probation at the table.	1. Classroom time to dedicate to substance abuse education. 2. Lack of community programs outside of the school systems for families. 3. Partners are stretched thin to cover all the necessary areas.
2. Prevention programs and efforts.	1. DARE, NASA, Tobacco-Free Coalition classroom education efforts. The Alcohol Literacy Challenge continues, and Bounce program is being piloted this semester. The Youth Council also continued presenting Generation Rx programs in 2 nd Grade in 2024.	1. Low number of evidence-based programs being utilized. The Alcohol Literacy Challenge is evidence-based and DARE is evidence based.

	2. Youth led programs, Youth Council, VOICE, Leadership groups. 3. Media education program in the local newspaper, through digital TV and an Indy based network.	2. Youth favorable attitudes toward use of specific drugs. 3. Limited funding, time and other resources needed to be successful in the education forum.
3. Faith community programs.	1. Wellspring Center (Mental Health) programming 2. Celebrate Recovery for adults/families. 3. The Landing, The Bridge – teen and college age groups for teens seeking recovery. Recovery café is also available at this location.	1. Lack of youth related full treatment programs. 2. Lack of access to affordable treatment for those not interested in religious based programs. 3. Mental health needs far exceed resources available locally.

III. Making A Community Action Plan

Now that you have completed a community assessment and have identified the risk and protective factors that exist, you can develop a plan of action. The Comprehensive Community Plan (CCP) is a systematic and community-driven gathering, analysis, and reporting of community-level indicators for the purpose of identifying and addressing local substance use problems.

Step 1: Create problem statements, and ensure problems statements are in line with statutory requirements

Step 2: Ensure your problem statements are evidence-informed, then prioritize

Step 3: Brainstorm what can be done about each

Step 4: Prioritize your list, and develop SMART goal statements for each

Step 5: List the steps to achieve each goal

Step 1: Create + Categorize Problem Statements

Create problem statements as they relate to each of the identified risk factors.

Risk Factors	Problem Statement(s)
1. Easy access to alcohol in our community.	1. Underage drinking is a problem in Hancock County. 2. Adult alcohol abuse is a problem in Hancock County.

	3. Drinking alcohol is a past time in many families in our community.
2. Marijuana and vaping products (nicotine and THC) are readily available in Hancock County.	1. The use of marijuana and its derivatives is a problem in Hancock County. 2. Vaping of nicotine and THC products has become the number one drug of choice among many of our youth. 3. Legalization of marijuana is leading to many perception problems locally.
3. Peer perception of use and family attitudes toward use create an acceptance of use for Rx/OTC, opioids and other narcotic drugs.	1. The abuse of Prescription/Over-the-Counter drugs is a problem in Hancock County. 2. The use/abuse of Heroin is prevalent in Hancock County. 3. Methamphetamine is a leading drug of choice in Hancock County.

Step 2: Evidence-Informed Problem Statements

Identify your top three problem statements using local or state data. Ensure that there is a problem statement for each co-equal funding category (e.g., prevention/education; intervention/treatment; and criminal justice services and activities).

Problem Statements	Data That Establishes Problem	Data Source
1. Underage Drinking and adult alcohol abuse are a problem in Hancock County.	1. Past 30 Day Alcohol Usage Rates by Grade: 8 th – 4.5% 10 th – 5.2% 12 th – 8.9% 2. Binge Drinking Rates by Grade (2 wks. Prior to survey) 8 th – 1.1% 10 th – 0.8% 12 th – 1.4% 3. 2024 Arrests: OWI – 449 OWI Causing Death - 0 Public Intoxication – 49 Minor Poss/Cons. – 16 UDTF Arrests – 16 Furnishing to a Minor - 0	1. Indiana Youth Survey (INYS) (Prevention Insights - Spring 2024 Hancock County). *Includes all 4 Hancock County public schools. 2. INYS – Spring 2024 *Includes all 4 Hancock County public schools. 3. Hancock County Sheriff's Department

	<p>4. 2024 Charging Information: OWI – 398 Public Intoxication – 45 Minor Pos./Consumption of Alcohol – 26 Furnishing to a Minor - 0</p>	4. Hancock County Prosecutor's Office
2. The use of marijuana and vaping of THC and nicotine products are a problem in Hancock County.	<p>1. Past 30 Day Marijuana Usage Rates by Grade: 8th – 1.9% 10th – 2.5% 12th – 4.9%</p> <p>2. Past 30 Day Vaping Usage Rates by Grade: 8th – 3.0% 10th – 3.4% 12th – 6.0%</p> <p>3. 2024 Arrests: Dealing Marijuana/Lookalike-7 Possession Mar/Lookalike – 117</p> <p>4. 2024 Charging Information: Dealing Mar./Lookalike – 7 Possession Mar./Lookalike- 176</p>	<p>1. INYS – Spring 2024 *Includes all 4 Hancock County public schools.</p> <p>2. INYS – Spring 2024 *Includes all 4 Hancock County public schools.</p> <p>3. Hancock County Sheriff's Department</p> <p>4. Hancock County Prosecutor's Office</p>
3. Prescription/Over-the-Counter drug abuse, and the use of methamphetamine and other opioids is a problem in Hancock County.	<p>1. Past 30 Day Prescription Drug Usage Rates by Grade: 8th – 1.4% 10th – 0.6% 12th – 1.1%</p> <p>2. Past 30 Day Over-the-Counter Drug Usage Rates by Grade: 8th – 3.3% 10th – 2.9% 12th – 2.7%</p> <p>Note: Youth Meth and Heroin usage rates are all below 0.5%.</p> <p>3. 2024 Arrests: Dealing Meth - 12 Possession Meth – 99 Dealing Cocaine/Narcotic Drug - 16 Dealing Schedule I-V – 6</p>	<p>1. INYS Spring 2024 *Includes all 4 Hancock County public schools.</p> <p>2. INYS Spring 2024 *Includes all 4 Hancock County public schools.</p> <p>3. Hancock County Sheriff's Department.</p>

	Possession Coc./Narc. Drug/Lookalike – 83 Possession Schedule I-V – 52 Possession Syringe/ Possession Paraphernalia - 93 4. 2024 Charging Information: Dealing Meth - 11 Possession Meth – 98 Dealing Coc/Narcotic Drug - 27 Dealing Schedule I-IV – 5 Dealing in a Look-a-like - 0 Possession Coc./Narc. – 109 Possession Lookalike – 0 Possession Cont. Sub. - 46 Possession Paraphernalia – 110 Possession of Syringe - 20	4. Hancock County Prosecutor's Office
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Update for 2025:

Some arrest and charging data seem to be significantly different. The prosecutor's office gave it to me in cases not charges this year. Charges can be multiple per case. Our population continues to increase in our county. Ohio legalization of pot at the state level may significantly impact our community moving forward.

INYS data looks really good, with significant decreases in most cases. There were a couple that saw a small increase, but the overall usage rates tell a pretty good story for our community.

Step 3: Brainstorm

Consider the resources/assets and limitations/gaps that were identified for each risk factor, and list what actions can be taken for each identified problem statement.

Problem Statements	What can be done (action)?
1. Underage Drinking and adult alcohol abuse are a problem in Hancock County.	1. . Support enforcement efforts of the Underage Drinking Task Force, and other law enforcement efforts to address adult alcohol related issues (i.e. public intoxication and OWI) to ensure both youth and adult alcohol related issues are being addressed. 2. Conduct, support and partner in educational efforts in both the classroom and community to educate residents of the dangers of alcohol use/abuse. 3. Support efforts to expand treatment options for youth and adults in our community.

<p>2. The use of marijuana and vaping of THC and nicotine products are a problem in Hancock County.</p>	<p>1. Support efforts of the Hancock County Drug Task Force, other law enforcement efforts, and the enforcement of school policies with regard to marijuana and vaping.</p> <p>2. Conduct, support and partner in educational efforts on marijuana and vaping in our classrooms and community. Utilize existing partnership with the Hancock County Tobacco Free Coalition and other organizations to create a greater impact on these issues.</p> <p>3. Support efforts to expand treatment options for youth and adults in our community. This will include the search for effective vaping related programs for youth.</p>
<p>3. Prescription/Over-the-Counter drug abuse, and the use of methamphetamine, cocaine, and other opioids is a problem in Hancock County.</p>	<p>1. Support efforts of the Hancock County Drug Task Force and other enforcement efforts.</p> <p>2. Provide and support opportunities for residents to properly dispose of prescription/OTC drugs.</p> <p>3. Conduct, support and partner in educational efforts on the dangers of use/abuse of these drugs in both the classroom and the community.</p> <p>4. Support efforts to expand treatment options for youth and adults in our community.</p>

UPDATE for 2025: The problem statements have remained the same again for this year, with the exception of adding cocaine in PS 3. Arrest and charging data show that cocaine is close to the same numbers as marijuana and methamphetamine, so it needs to be names as well. Arrest data and charging data shows these are the primary areas of concern for our community. We have a growing community (as we were named the fastest growing county in the state), and law enforcement is completely back to normal (with an active drug task force), which results in the expectation of potential increases in arrests in 2025. 2024 youth survey numbers show encouraging youth usage rates.

Step 4: Develop SMART Goal Statements

For each problem statement, prioritize your list of what can be done. Choose your top two actions for each. Then, develop goal statements that demonstrate what change you hope to achieve and by when you hope to achieve it.

Problem Statement #1
Goal 1 Hancock County will see rates remain steady in both 30-day alcohol use and binge drinking among 12 th graders as reported by the INYS done annually in our schools by April 2026.
Goal 2 Hancock County will see an additional 3% increase in arrests and charging for adult alcohol related offenses in 2025.
Problem Statement #2
Goal 1 Hancock County will see rates remain steady in 30-day marijuana use and a 1.0% decrease in vaping among 12 th graders as reported by the INYS done annually in our schools by April 2026.
Goal 2 Hancock County will see an additional 3% increase in marijuana related arrests and charges among adults in 2025.
Problem Statement #3
Goal 1 Hancock County will see a collection of 1 ton of old/unused medications for proper disposal through the collection events and use of the 7 permanent drop boxes across our county in 2025.
Goal 2 Hancock County will see an additional 3% increase in narcotics related arrests and charging in 2025.

2025 Update: INYS data tells a great story for Hancock County youth. All major usage rates decreased with only some minimal increases in rates that were already below 3%. Remaining goals were not completely met in the 2024-25 plan. Arrests were a tad lower in most drugs of choice and alcohol related. Charging information shows some decreases with most drugs, but this year they provided it in cases, not charges, so it isn't an apples to apples comparison again. It is reasonable to expect increases with our growing population and active task forces.

Step 5: Plans to Achieve Goals

For each goal, list the steps required to achieve each

Problem Statement #1	Steps
Goal 1 Hancock County will see rates remain steady in both 30-day alcohol use and binge drinking among 12 th graders as reported by the INYS done annually in our schools by April 2026.	1. Prevention/Education – Fund and/or participate in education programs focused on educating Hancock County youth on the dangers of drinking underage. 2. Treatment/Intervention – Fund/Support expansion of local youth treatment and intervening programs designed to help youth with alcohol related problems. 3. Justice/Law Enforcement – Fund/Support programs designed to identify, arrest or adjudicate youth who are drinking underage.
Goal 2 Hancock County will see an additional 3% increase in arrests and charging for adult alcohol related offenses in 2025.	1. Prevention/Education – Fund/Support efforts to educate Hancock County residents on the dangers of alcohol abuse, and drinking and driving. 2. Treatment/Intervention – Fund/Support programs designed to assist adults seeking to give up alcohol. 3. Justice/Law Enforcement – Fund/Support law enforcement efforts to identify, arrest or adjudicate those adults breaking the laws surrounding alcohol.
Problem Statement #2	Steps
Goal 1 Hancock County will see rates remain steady in 30-day marijuana use and a 1.0% decrease in vaping among 12 th graders as reported by the INYS done annually in our schools by April 2026.	1. Prevention/Education – Fund/Participate in programs designed to educate Hancock County youth on the dangers of marijuana use and vaping. 2. Treatment/Intervention – Fund/Support efforts designed to expand and/or create treatment/intervening opportunities for youth who need help with a marijuana or vaping issue.

	<p>3. Justice/Law Enforcement – Fund/Support law enforcement efforts designed to identify, arrest or adjudicate youth found with marijuana or vaping products.</p>
<p>Goal 2 Hancock County will see an additional 3% increase in marijuana related arrests and charges among adults in 2025.</p>	<p>1. Prevention/Education – Fund/Participate in programs designed to educate the community on the dangers of marijuana and/or vaping use.</p> <p>2. Treatment/Intervention – Fund/Support programs designed to assist adults who need help in giving up marijuana and/or vaping.</p> <p>3. Justice/Law Enforcement – Fund/Support law enforcement efforts designed to identify, arrest or adjudicate adults possessing, or selling marijuana products.</p>
Problem Statement #3	Steps
<p>Goal 1 Hancock County will see a collection of 1 ton of old/unused medications for proper disposal through the collection events and use of the 7 permanent drop boxes across our county in 2025.</p>	<p>1. Prevention/Education – Fund/Support/Participate in programs designed to educate on the dangers of Rx/OTC abuse, and programs designed to limit access (i.e. Take back/disposal efforts).</p> <p>2. Treatment/Intervention – Fund/support treatment/intervening programs to assist Hancock County residents who need help with their prescription drug addictions.</p> <p>3. Justice/Law Enforcement – Fund/support law enforcement efforts to identify, arrest or adjudicate individuals illegally possessing or dealing prescription drugs.</p>
<p>Goal 2 Hancock County will see an additional 3% increase in narcotics related arrests and charging in 2025.</p>	<p>1. Prevention/Education - Fund/Support/Participate in programs designed to educate on the dangers of use of methamphetamine and heroin and other opioids.</p>

	<p>2. Treatment/Intervention - Fund/support treatment/intervening programs to assist Hancock County residents who need help with their drug addictions.</p> <p>3. Justice/Law Enforcement - Fund/support law enforcement efforts to identify, arrest or adjudicate individuals possessing or dealing methamphetamine and heroin or other opioids.</p>
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2025 UPDATE: Arrest and charging goals once again reflect an expectation of an increase in 2025. The drug task force is expanding their efforts, Ohio has marijuana legalization at the state level, and our community continues to grow rapidly. You can be in Ohio in less than an hour from anywhere in our county.

IV. Fund Document

The fund document allows the LCC to provide finances available to the coalition at the beginning of the year. The fund document gauges an LCC's fiscal wellness to empower their implementation of growth within their community. The fund document also ensures LCCs meet the statutory requirement of funding programs within the three categories of (1) Prevention/Education, (2) Treatment/Intervention, and (3) Criminal Justice Services and Activities (IC 5-2-11-5).

Funding Profile		
1	Amount deposited into the County DFC Fund from fees collected last year:	\$66,622.71
2	Amount of unused funds from last year that will roll over into this year:	\$33,531.31
3	Total funds available for programs and administrative costs for this year (Line 1 + Line 2): This is complete balance of fund.	\$100,154.02
4	Amount of funds granted last year:	\$107,136.14
Additional Funding Sources (if no money is received, please enter \$0.00)		
A	Substance Abuse and Mental Health Services Administration (SAMHSA):	\$375,000.00
B	Centers for Disease Control and Prevention (CDC):	\$0.00
C	Bureau of Justice Administration (BJA):	\$0.00
D	Office of National Drug Control Policy (ONDCP):	\$0.00
E	Indiana State Department of Health (ISDH):	\$0.00
F	Indiana Department of Education (DOE):	\$0.00
G	Indiana Division of Mental Health and Addiction (DMHA):	\$0.00
H	Indiana Family and Social Services Administration (FSSA):	\$0.00
I	Local entities:	\$0.00
J	Other:	\$0.00
Categorical Funding Allocations		
Prevention/Education: \$32,384.68	Intervention/Treatment: \$32,384.67	Justice Services: \$32,384.67
Funding allotted to Administrative costs:		
Itemized list of what is being funded		Amount (\$100.00)
General Office supplies		\$3,000.00
Funding Allocations by Goal per Problem Statement:		
Problem Statement #1	Problem Statement #2	Problem Statement #3
Goal 1: \$22,450.68	Goal 1: \$22,084.67	Goal 1: \$23,525.67
Goal 2: \$9,934	Goal 2: \$10,300	Goal 2: \$8,859

2025 Update: NASA does their best to expend dollars evenly. Programs were funded and some didn't expend everything they asked for. In addition, NASA is in Year 2 of a PFS grant in that lowers the need for administrative dollars. We have budgeted a small amount to cover costs not allowable in the PFS grant for 2025. Our coalition was also not able to grant all \$107,136.14 that was available. These factors left the amount that rolled forward for 2025.