

Appropriations Requests for Legislatively Directed Spending Items

- 1. The sponsoring representative's first name: Karen
- 2. The sponsoring representative's last name: Whitsett
- 3. The cosponsoring representatives' names. All cosponsors must be listed. If none, please type 'n/a.' A signed letter from the sponsor approving the co-sponsorship and a signed letter from the member wishing to co-sponsor are required. Attach letters at question #9 below. N/A
- 4. Name of the entity that the spending item is intended for: Covenant Community Care
- 5. Physical address of the entity that the spending item is intended for: 18917 Joy Rd, Detroit, MI 48228
- 6. If there is not a specific recipient, the intended location of the project or activity: $\rm N/A$
- Name of the representative and the district number where the legislatively directed spending item is located: Karen Whitsett, District 4.
- 8. Purpose of the legislatively directed spending item. Please include how it provides a public benefit and why it is an appropriate use of taxpayer funding. Please also demonstrate that the item does not violate Article IV, S 30 of the Michigan Constitution. Covenant Community Care is a faith-based, charitable federally qualified health center that provides care to nearly 20,000 patients annually regardless of their ability to pay. They also operate a mobile dentistry and an outpatient substance abuse clinic. The requested funds would be used to support such programming.

Epic Health is a comprehensive family-owned healthcare provider that offers a range of services under one roof, from primary care to addiction management, with several

locations across metro-Detroit. The West Davison Clinic is scheduled to have a grand opening on June 11, 2025. The two brothers that run the company were intentional in locating the clinic in a healthcare desert, with over 70,000 people in the area that don't have close access to a care center. The requested funds would be used to bolster existing programming and expand the center's reach and impact throughout the community.

- 9. Attach documents here if needed: N/A
- 10. The amount of state funding requested for the legislatively directed spending item. $500,\!000$
- Has the legislatively directed spending item previously received any of the following types of funding? Check all that apply. None
- Please select one of the following groups that describes the entity requesting the legislatively directed spending item: Non-profit organization
- 13. For a non-profit organization, has the organization been operating within Michigan for the preceding 36 months? Yes
- 14. For a non-profit organization, has the entity had a physical office within Michigan for the preceding 12 months? Yes
- 15. For a non-profit organization, does the organization have a board of directors? Yes
- 16. For a non-profit organization, list all the active members on the organization's board of directors and any other officers. If this question is not applicable, please type 'n/a.'

Joslyn Pettway (CEO) Mark Lubienski (Treasurer) Julia Smith (Chair) Cathy Wenz (Secretary) Prince Williams Pastor Semmeal Thomas Ester Gallegos Sister Nancyann Turner Graciela Villalobos Mitzi Cardona (Vice Chair) Reverend Samuel Spruill Director Elizabeth Pitts

17. "I certify that neither the sponsoring representative nor the sponsoring representative's staff or immediate family has a direct or indirect pecuniary interest in the legislatively directed spending item."

Yes, this is correct

- 18. Anticipated start and end dates for the legislatively directed spending item: October 2025-September 2026
- 19. "I hereby certify that all information provided in this request is true and accurate." Yes