

Rotary International Global Grant Request for San Jose de Bocay, Jinotega,  
Nicaragua

for Medical transportation where 78.8% of Population is considered to be at  
Extreme Poverty level according to INIDE (the national institute for economic  
Development for Nicaragua).

There are currently only 2 terrestrial ambulances serving a 3992 square km. area  
made up of mountainous jungle and no water ambulances for the poorest  
municipality of Nicaragua on the border with Honduras.



# Martin Rojas

719 Cabernet Ct. Grapevine, TX. 76051 | (972) 904-1004 | martinrojas121@gmail.com

Monday, July 28, 2014

**Conrad Heede**

*Grapevine Rotary Club*

Dear Conrad,

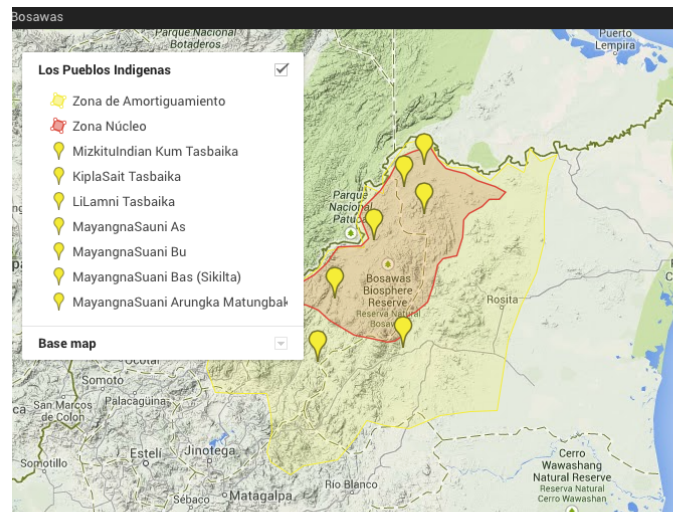
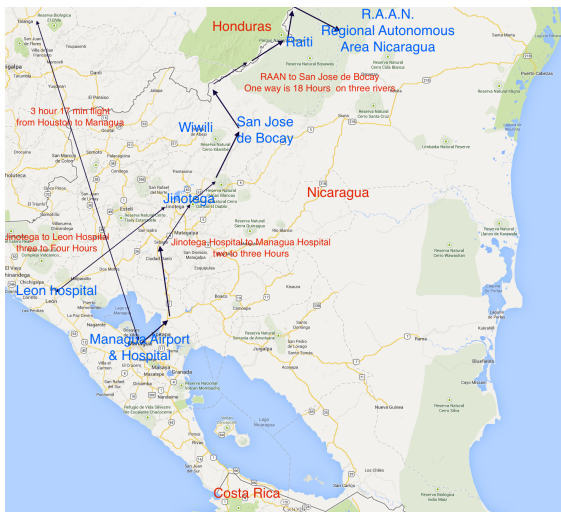
"Nicaragua, the poorest country in Central America and the second poorest in the Western Hemisphere, has widespread underemployment and poverty." Central Intelligence Agency website.

Thank you for your time on the phone last week to discuss some of the needs in the Bosawas Reserve jungle "Reserva Bosawas" where the most marginalized members of Nicaragua, the Mayangna and Miskito Indians struggle to survive daily. As this would be my first request for a global grant, please help me to fill in any gaps which have been overlooked in order to insure the success of this grant, as it is will absolutely save the lives of children, and mothers in this forsaken place. Considering it is only second in the Western Hemisphere, behind Haiti in poverty, according to the CIA, the focus of this request will center on one of the poorest municipalities in Nicaragua due to the extreme geographical terrain made up of mountains, rivers, jungle, lack of infrastructure with access only available through the use of Four wheel drive vehicles, and hand dug out canoes.

The purpose of the following information is to solicit a global grant to provide transportation out of the Reserva Bosawas, Jinotega, Wiwili and surrounding areas, along three rivers and back to civilization, out of the remotest part of this jungle, for those children and mothers needing immediate and long-term medical attention, whereas without this medical/surgical intervention, they would surely die.

This project would have a long-term, sustainable impact on approximately 141,000 Mestizo, Mayangna, and Miskito peoples of San Jose de Bocay region requiring parasite, malarial, bacterial, and other Neglected Tropical Diseases and another potentially affected 900,000 requiring surgical care for cleft lips, palates, club feet, burns, and any other issues where there is an economic need for transportation and free medical assistance.

As background, my family has spent the last seven years traveling back and forth to Nicaragua from the states, rendering medical and surgical help and continuing a parasite prevention and disease mitigation program by going deep into the deepest parts of the Reserva Bosawas, the second largest Biosphere, eclipsed in size only by the Amazon Jungle, in the Western Hemisphere.



I mention the following "transportation" costs only to give a background no the immense costs associated with an average trip, of which we self-fund (no 501 C (3) status), and have completed over a dozen in 7 years.

• Airfare	\$ 800
• Vehicle rental 4x4 truck (9 days plus gas)	\$1350
• Panga (hand dug out canoe) Rental with crew	\$ 550
• Gasoline for 18 hour, one-way trip, on three rivers X 2	\$ 700
Total Transportation costs	\$3,400

This does not include parasite medicine, seed supplies, food and housing for us, malarial and preventative immunological medicine for us, and then once off the river, the surgical and medical care at hospitals, post and pre-op stays, nutrition for



babies to bring to a surgical readiness health state, housing and food for the mothers escorting their children, as well as transportation back to their respective villages in the jungle. It is expensive and not as effective on a grand scale as what can be accomplished through Rotary International, and therefore the reason for my request.

As an example of travel times and costs associated with patient transfers from the jungle, please see pictures of Bertalina (mother) and Queben Spellman Mueller (child), with cleft lip and palate. Queben weighed 9 pounds 14 ounces at 9 months of age, due to malnutrition and general subsistence jungle conditions aggravated and compounded by his cleft, when we admitted him to the Hospital in Leon, after travel for 18 hours in a canoe, and then another 9 hours in a 4 wheel drive truck, due to road conditions necessitating four wheel drive. After 3 weeks in the hospital to bring him to a surgical readiness health state, he had gained almost 30% in weight, to a little over 12 pounds, and Dr. Herdocia was able to successfully repair his cleft, allowing us to take him and his mother back to the jungle, where he now has a fighting chance to live. As a L.E.A.P. (Life Enhancement Association for People at [www.leap-foundation.org](http://www.leap-foundation.org)) advocate, volunteer, and donor for many years, I am able to find like-minded individuals whom are able to contribute their resources, time, and money for surgical procedures to help children like Queben and his mother, free of charge. Cheryl Ann Shoemaker Spence is my medical liaison for the children we bring out of the jungle and hosts them, and their mothers while in the hospital. She has a 501 C (3) to which we voluntarily donate in order to handle additional costs of hosting and feeding and transportation in Leon, Nicaragua, where the hospital and Dr. Herdocia reside. She has been a resident for ten years, and is an American who has adopted several Nicaraguan children with medical issues, and has a home for children with severe medical issues and developmental issues, and is a trusted friend who has hosted children we have brought out of the jungle for up to nine months - see Yuleydi Zeledon, born with her feet pointed backwards, who had to have progressive casting and surgery, which we coordinated with the mayor of San Jose de Bocay, the hospital in Leon and Cheryl, in order to get her free surgery. Yuleydi lives at the edge of the jungle and would never have been able to afford the surgery, let alone the transportation out of the Bocay area in Northern Nicaragua. Here are pics of Queben, before and after, as well as of Yuleydi, now undergoing physical therapy for the next 11 to 14 months after successful progressive casting and surgery;



Yuleydi also needs surgery for her fused fingers.

The two primary areas of focus that line up with Rotary Grants would be the following;

1. Disease prevention and treatment -

- Neglected Tropical Diseases (NTD's)

NTD's are a group of infectious diseases, particularly prevalent in areas of poverty, geographic isolation and resource scarcity. Due to their effects on appearance, pregnancy health, and child growth and development, they frequently result in further cycles of isolation and economic deprivation for infected

individuals, families and communities. Despite their widespread prevalence and significant disease burden, research and treatment of NTD's has been historically underfunded.

Parasite treatment for hookworms, tapeworms, pinworms, and other as well as prevention through shoes and boots program

Bacterial: typhoid, brucellosis, other bacterial infection

Dysplastic/Neoplastic: lymphoma,

Parasitic: malaria, visceral leishmaniasis, schistosomiasis, amebiasis, Chagas disease

Mycobacteria: TB

Fungal: histoplasmosis

- For further Information on Reserva Bosawas parasitic infections specific to Leishmaniasis, spread by the sandfly, whose treatment lasts 2 to 10 weeks, visit the following website for complete information from the Global Health Education Consortium in collaboration with WHO (World Health Organization)-Neglected Tropical Diseases, DNDi (Drugs for Neglected Diseases initiative), OneWorldHealth, PLoS Neglected Tropical Diseases (peer-reviewed open access journal) and NIH National Institute of Allergy and Infectious Diseases (NIAID) at [http://www.cugh.org/sites/default/files/content/resources/modules/To%20Post%20Both%20Faculty%20and%20Trainees/79\\_Leishmaniasis\\_FINAL.pdf](http://www.cugh.org/sites/default/files/content/resources/modules/To%20Post%20Both%20Faculty%20and%20Trainees/79_Leishmaniasis_FINAL.pdf)

## 2. Maternal and child health

Our overall purpose would be to address the needs of the Bosawas Reserve and surrounding Jinotega area, by providing long-term transportation, free of charge, for those mothers and children needing emergency and immediate medical attention, including but not limited to education on pregnancy and prenatal vitamins and care, through childbirth and early childhood. According to the Ministerio de Salud de Nicaragua, or Nicaraguan Health Ministry, the 4000 square kilometer area comprising the San Jose de Bocay municipality, has the number one mortality rate for pregnant mothers, most of whom are adolescent teens due to the low level of cultural programs directed towards youth on behalf of the government due to the extreme poverty of Nicaragua.

Furthermore, the San Jose de Bocay municipality is listed as being in Extreme poverty by the Nicaraguan government institute that ranks municipalities in Nicaragua. (see letter from Mayor of San Jose de Bocay attached)

Also, this would allow us to continue to bring wheelchairs to those children requiring them. Here are just a couple that we have brought to Nicaragua over the years-

Here is Adamin and his brothers and sisters in WINA in



the Bosawas reserve. He was the first child that received a special needs wheelchair from us back in 2007.



Here is Miguel in 2012 at 16 years of age. They brought him in on a mule, 6 hours over the mountainous jungle, to receive his very first wheelchair in his life.



Here are three that we took last week to be donated by the Jinotega Rotary club by me and my two sisters to replace the cheap, hard plastic ones that hurt the legs and back of those using them as follows;



## Geo-political background

### The department of Jinotega

The Jinotega region is perhaps the most war-torn region in Nicaragua's history. Its remote location as well as its proximity to the border with Honduras made it a haven for rebel forces throughout the last seven decades. The most intense battles took place in the Department of Jinotega between 1927 and 1934 under [Augusto C. Sandino](#) and his troops (popularly known as "los bandoleros") against the [American occupation](#) troops. Later, at the end of the 1970s, Jinotega was a place of bitter war between the troops of Anastasio Somoza Debayle and the civilian rebel population. Somoza was defeated on July 19, 1979. After a short period of peace, [civil war](#) began again between government troops of the new Sandinista [regime](#) and the Contra rebels who felt betrayed by the Sandinistas and were funded by the United States. (from wikipedia)

### Landmine and UXO Problem

"Nicaragua was contaminated by landmines and unexploded ordnance (UXO) during the internal conflict of 1979-1990. In addition to mined areas near the borders with Honduras and Costa Rica, mines were laid throughout the country to protect strategic installations. Antipersonnel mines were used predominantly; antivehicle mines were also used on the northern border with Honduras. UXO has been discovered in minefields and is also scattered throughout the country in rural and urban areas.<sup>[11]</sup>

The total number of mines emplaced was initially estimated as 135,643 in 991 minefields. By February 2007 this had risen to 169,029 mines as a result of reports from communities.<sup>[12]</sup> At least 105 communities in 52 municipalities and 14 departments were affected. The military only has 80 percent of the records of mines laid by the Sandinista Popular Army (Ejército Popular Sandinista, EPS) and these records "are probably not fully detailed or reliable;" other minefields laid by the Contras were not recorded or marked.<sup>[13]</sup> Mined areas not registered in military records continue to be discovered as a result of mine risk education campaigns, information provided by the public, and the occurrence of incidents in areas not previously suspected to be mine-affected.<sup>[14]</sup>

Nicaragua reported that as of 31 March 2007 at least 20,837 mines still required clearance.<sup>[15]</sup> Recorded mines were believed to be in 70 mined areas covering 55.5 square kilometers of the Honduran border and two areas in the interior of the country.

<sup>[16]</sup> [The northern departments of Jinotega](#) and Nueva Segovia were believed to be the most heavily mine-affected.

Contaminated municipalities include Mozonte, San Fernando, Jalapa, Murra, Wiwili de Nueva Segovia and Wiwili de Jinotega; all are agricultural, wood producing and cattle breeding areas. A population of more than 29,000 people in 111 communities was believed to be living within about five kilometers of the remaining minefields. "(from <http://www.the-monitor.org/index.php/publications/display?url=lm/2007/nicaragua.html>)

“During the war between the US-backed Contras and the government of the [Sandinistas](#) in the 1980s, much of the country's infrastructure was damaged or destroyed.[109] Transportation throughout the rest of the nation is often inadequate. For example, one cannot travel all the way by highway from Managua to the Caribbean coast. The road ends at the town of [Rama](#). Travelers have to transfer and make the rest of the trip by [riverboat](#) down the [Río Escondido](#)—a five-hour journey.[85] “ Nicaragua is among the poorest countries in the Americas.[94][95][96] Gross Domestic Product (GDP) in [purchasing power parity](#) (PPP) in 2008 was estimated at \$17.37 billion USD.[3] Agriculture represents 17% of GDP, the highest percentage in Central America. [97] Remittances account for over 15% of the Nicaraguan GDP. Close to one billion dollars are sent to the country by Nicaraguans living abroad.[98] The economy grew at a rate of about 4% in 2011.[3]

According to the [United Nations Development Programme](#), 48% of the population in Nicaragua live below the poverty line,[99] 79.9% of the population live with less than \$2 per day,[100] According to UN figures, 80% of the [indigenous people](#) (who make up 5% of the population) live on less than \$1 per day.[101] <http://en.wikipedia.org/wiki/Nicaragua>

Despite being one of the poorest countries in Latin America, Nicaragua has improved its access to potable water and sanitation and has ameliorated its life expectancy, infant and child mortality, and immunization rates. However, income distribution is very uneven, and the poor, agriculturalists, and indigenous people continue to have less access to healthcare services. Nicaragua's total fertility rate has fallen from around 6 children per woman in 1980 to just above replacement level today, but the high birth rate among adolescents perpetuates a cycle of poverty and low educational attainment. Nicaraguans emigrate primarily to Costa Rica and to a lesser extent the United States. Nicaraguan men have been migrating seasonally to Costa Rica to harvest bananas and coffee since the early 20th century. Political turmoil, civil war, and natural disasters from the 1970s through the 1990s dramatically increased the flow of refugees and permanent migrants seeking jobs, higher wages, and better social and healthcare benefits

<https://www.cia.gov/library/publications/the-world-factbook/geos/nu.html>

## Global Grant Responses

- Respond to a need the benefiting community has identified
  - Please see letter from Rotary club number 79651 in District 4240
- Include the active participation of the benefiting community
  - Please see letter from the Mayor/Governor, Alcaldesa AnaJaneth Sobalvarro Ch. from the San Jose de Bocay Municipality encompassing 171 of the poorest and remotest villages of Nicaragua identified by Nicaragua as the number one municipality for death mortality rate for pregnant women.
- Are designed to enable the community to help itself after the Rotary club or district has concluded its work
  - This project will be designed to be self-sustaining due to municipality using the boat during “down time” to transport goods and personnel up and down the river, and starting a fuel fund for free medical trips every two weeks. As a part of this “down time”, the boat will pick up emergencies along the pre-established river routes.
- Have measurable results
  - Children and mothers transported by ambulance and boat will be documented by boat captain and ambulance driver and transportation/medical coordinator in charge of insuring medical attention in San Jose de Bocay, Jinotega, Leon, or Mangua, depending on level of medical need and surgical necessity.
- Active Rotarian involvement
  - Jinotega-Las Brumas, District # 4240 Club #79651 and Grapevine Rotary club District #5790 Club #1793 would be actively involved in realizing the successful implementation and long-term sustainability of the program.
- Can support scholars pursuing graduate-level study internationally
  - Those seeking medical degrees specific to surgery or immunological /neglected tropical diseases or education of prevention of spreading and treatment of those NTDs, as well as social work in the area of maternal and infant mortality or neonatal child care and early childhood education are only a few of the myriad of areas of study for those scholars pursuing graduate-level study internationally.



- Preliminary Budget is \$51,000 for a 4x4 Landcruiser converted to ambulance.



- 
- A group of people in a small boat navigating a river through a dense, misty forest. The scene is atmospheric, with thick fog or mist obscuring the background and the riverbanks. The boat is positioned in the center of the frame, with several people visible inside. The water is dark and reflects the surrounding environment. The forest is dense with trees and foliage, creating a sense of being deep within a wilderness.



The host partner, because of its local expertise and proximity to the project location, usually conducts the community assessment and manages project implementation and expenses.

- Frequent communication among project partners is essential to ensuring joint decision making, better oversight of the project and funds, and strong partnerships for future projects. Plan the method and frequency with which you'll communicate on the grant's activities and progress.

- The ASJdB and myself have been communicating at least once a month for over 7 years, and most recently two and three times per month via Facebook and email since the mayor and several council members and myself are friends.

- Set benchmarks to evaluate progress toward your project goals.

- Twice a month, on the 15th and 30th of the month, we will have scheduled medical transportation trips along a pre-set route on the three rivers, Bocay, Coco, and Lakus Rivers, with subsequent land transportation via the ambulance to one of three hospitals (Jinotega, Leon, or Managua) depending on the medical evaluation provided by the medical staff in San Jose de Bocay through the Interior ministry of Health, or MINSA.

- Identify measurement methods.

- Transportation Log by the boat captain and medical liaison/transportation coordinator setting up the MINSA evaluation, ambulance transportation, and subsequent hospital visit.

- How can we make the activity sustainable?
- As a business entrepreneur and project manager overseeing millions of dollars in budgets per quarter on average, making this project self sustaining is a very straight forward and feasible proposition. Private use for commercial transport up and down the river by the municipality, and “pay for hire” transport of goods up and down the rivers would leave more than sufficient profit to pay for fuel for the ambulance and boat, as well as provide income for the boat captain, his helper, and ambulance driver during the other two off weeks when the boat is not running pre-set medical routes.

Is there strong community support for the project?

- The government of Nicaragua does not provide “free” health care and medical transportation in any part of the San Jose De Bocay and Bosawas areas and therefore is desperately needed. The 171 communities headed by the Mayor/ Governor of the ASJdB as well as the Rotarians of Jinotega are in support of this project.

How will we measure the project’s success?

- Children and mothers transported and lives saved through medical and surgical intervention

Who will benefit from the project?

- The poorest and most marginalized members of the Mayangna and Miskito Indians in the jungle of the Reserva Bosawas where there are no jobs, electricity, running water, or medical facilities and therefore no income, as well as those affected by extreme poverty in the Northern part of Nicaragua, subsisting on about a dollar per day, if employed.

Who will benefit from this global grant?

- Rotary international, the rotary clubs of Jinotega and Grapevine, the mayorship of San Jose de Bocay, the families whose children will be saved, the newly employed boat captain, his helpers and the driver and their families.

Where will your project take place?

- In the Departament (state) of Jinotega

When do you anticipate your project will take place?

- As soon as we have the funding, as we already have identified the boat captain and boat storage, the driver and storage for the ambulance, the means of funding the initial fuel and labor costs, as well as river and road routes. The municipality will provide the evaluation in San Jose de Bocay by providing and paying for the medical doctor to evaluate as well as provide a transportation coordinator /medical liaison coordinator.

What community needs will your project address and how were these needs identified?

- Disease prevention and treatment as well as severe life threatening medical issues for children and pregnant mothers.

Detail how your project will address these community needs.

- An average trip to San Jose de Bocay from about midway into the jungle costs an average of 700 cords per person, one way, or the equivalent of \$27 US. Both ways is \$54. As an example, Queben and his mother would have paid \$108 roundtrip. However, there is no hospital in San Jose de Bocay, and the nearest hospital with an adequately trained staff and surgical suite is either Leon, or Managua, approximately 150 miles away, which takes 7 to 11 hours away, due to the poor road conditions, half the distance requiring four wheel drive transportation. The cost for fuel is about \$100 each way, or \$200 both ways, bringing the total to \$308.00 US, before surgery and hospital, and food and hotel costs. This \$308 is the average amount that a Northern Jinotegan earns in an entire year. Someone coming from the jungle, in my estimation and the municipalities estimation, like Queben and his mom, Bertalina, will never see \$10 at any one time in their life, nor ever earn \$308.00 dollars over a lifetime. A few years back, a mother begged me to take her child to the hospital with me, and as boat fare, she offered me her only asset, a sickly looking chicken. Of course, we took her child and her for free, but the child passed away before we were able to make it to the hospital.

How were members of the local community involved in planning the project? Does your project align with any current or ongoing local initiatives?



- Over the last seven years, myself and the municipality, have made multiple excursions into the jungle each year to help the indigenous, and are very excited, actually overwhelmed, that this project may come to fruition.

Describe any training, community outreach, or education programs, if applicable, and who will conduct them. How will recipients be selected?

- Each village has a community leader and a council made up of elders who will be trained on the boat schedule and how and who may qualify for free transport. The municipality will be in charge of training and education on the selection process.

Pending Items are as follows;

MOU (memorandum of understanding)

Committees on both ends to be selected, Grapevine and Jinotega Rotary clubs

Recommend myself as the point of contact

Selection as to what entity maintains and owns the assets and runs the program

Three competitive bids for ambulance and boat

Funding

Purchase and implementation

Please advise is there are items which must be addressed, as I have given it the best effort based on the limited information that I could gather from websites. I defer to your expertise to help me and the people of Jinotega, their mothers and children.

Catch the lightning,

Martin

P.S.

Here are a few pics from some past trips...





## CLUB ROTARIO JINOTEGA - LAS BRUMAS

Jinotega, 26 de Julio 2014

Sres.

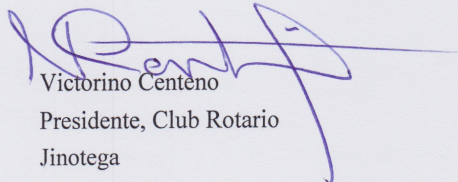
**Club Rotario, Grape Vine**

Muy estimados compañeros Rotarios

Por medio de la presente el Club Rotario Jinotega - Las Brumas, AVALA, la gestión del compañero Martin Rojas, para apoyar con trasporte en rio y carretera, a niños y madres que requieran atención medico quirúrgica en Labio Leporino y Paladar Hendido, en el departamento de Jinotega, Nicaragua.

La intención es obtener un bote de rio con motor de 40HP, fuera de borda para recorrer el Rio Bocay y Coco hasta comunidades inaccesibles de otra forma. Así como un vehículo 4x4 (four wheel Drive), que traslade desde Ayapal o Wiwili, hasta Jinotega, Managua o León, donde se realicen las cirugías.

Confiado en su comprensión, les reiteramos nuestros saludos, Vivamos Rotary!.



Victorino Centeno  
Presidente, Club Rotario  
Jinotega

“Vivamos Rotario y de verdad cambiemos vidas”



## JINOTEGA Rotary Club - LAS BRUMAS

Jinotega 26th of July, 2014

Gentlemen  
Grapevine Rotary Club

Very dear fellow Rotarians

By means of this transmission letter, the rotary club Jinotega -Las Brumas, SUPPORTS, the management and administration by our fellow Rotarian, Martin Rojas, to support providing free transport, over rivers and road, to children and mothers requiring surgical care for cleft lip and cleft palates, in the department of Jinotega, Nicaragua.

Our intention is to obtain a riverboat with 40HP engine, an outboard motor of 40 horsepower to reach inaccessible communities on the Bocay and Coco Rivers which are not accessible by any other means. As well, we require a 4x4 vehicle (four wheel drive), which will transport patients from Ayapal or Wiwilí, to Jinotega, Managua, or Leon, where the surgeries will take place.

We are confident a mutual understanding between Rotarians, we reiterate our greetings, Live Rotary!.

Victorino Centeno  
President, Rotary Club  
Jinotega



# ALCALDÍA MUNICIPAL SAN JOSÉ DE BOCAY JINOTEGA - NICARAGUA

TRABAJANDO CON CALOR HUMANO PARA EL DESARROLLO



San José de Bocay – Depto. de Jinotega  
26 de julio del 2014.

Sres. Rotario Internacionales.

Estimado Señores.

Su Despacho.

Nuestro municipio San José de Bocay en la actualidad se encuentra en la Categoría de Extrema Pobreza e inseguridad Ciudadana, según estudios realizados por el Instituto Nicaragüense de Fomento Municipal. Según el Ministerio de Salud somos el Municipio N°-1 en mortalidad materna, en su mayoría adolescentes embarazadas debido al bajo nivel cultural y a los pocos programas dirigidos a la juventud por parte del gobierno. Como Gobierno Municipal no contamos con los recursos Económicos Necesarios para darle respuestas a las demandas planteadas por la población, el Municipio está conformado por 171 comunidades, dividido en cinco micro regiones Bocay, San Juan de Awawas, Ayapal, Saslaya y Raiti, este último está conformado por comunidades indígenas en donde viven muy distante de la cabecera municipal.


Ante todo este escenario me dirijo a ustedes para hacerles formal solicitud de un motor acuático #40, un bote y un vehículo que sirvan de ambulancia para el traslado de las personas que se encuentran enfermas por diferentes patologías en la micro región de Raiti y sean tratadas en clínicas en donde reciban buena atención médica.

Es por todo lo antes expuesto, que en nombre del Gobierno municipal de San José de Bocay le estoy solicitando su apoyo en poder hacer realidad estas iniciativas en la mejora de la salud de las personas más desprotegidas como son los habitantes de la micro región de Raiti.

Es meritorio hacer mención que el Sr. **Martin Fernando Rojas**, nos ha apoyado desde hace siete años en medicina, víveres, ropa, calzado, ha operado a niños indígenas en clínicas privadas en la ciudad de León, demostrando un gran interés en apoyar a nuestro municipio, por todo lo antes expuesto le estamos muy agradecidos con el señor Rojas por el gran esfuerzo que él hace para llevar esta gran ayuda de mucha importancia para la población de Raiti.

Como Alcaldesa de este municipio recurro a usted para que nos apoye con dicha solicitud a la espera de una respuesta positiva a la presente, me es grato saludarles.

Atentamente

  
**Lic. Ana Janeth Sobalvarro Ch.**  
Alcaldesa Municipal  
San José de Bocay

Cc/archivo

Contiguo al Auditorio del MINSA - San José de Bocay - Jinotega - Telf- 27829011.



# ENGLISH TRANSLATION OF MUNICIPALITY OF SAN JOSE DE BOCAY

SAN JOSE MUNICIPAL MAYOR OF BOCAY  
JINOTEGA-NICARAGUA  
WORKING WITH HUMAN WARMTH TOWARDS DEVELOPMENT

SAN JOSE DE BOCAY -DEPARTMENT of JINOTEGA  
JULY 26, 2014

Gentlemen of Rotary International

Dear Sirs

Your Office,

Our municipality San Jose De Bocay, currently ranks in the lowest municipal economic category- "extreme poverty and insecurity", based on studies by the Nicaraguan Institute of Municipal Development. According to the Nicaraguan health ministry (MINSA) we are ranked first in maternal mortality, and most of these are young pregnant teenagers, mainly due to the low cultural levels attained and very few programs for youth promulgated by the government. As a municipal government we do not have the economic resources nor answers to meet the demands made by our citizens. The municipality is made up of 171 communities, divided into five smaller regions- Bocay, San Juan de Awaswas, Ayapal, Saslaya and Raiti, the last in the list being made up of indigenous Indian communities that live far from the county seat.

Faced with this scenario, I am writing to make a formal request of a boat with a 40 horse power outboard motor, and a vehicle to serve as an ambulance for transporting persons who are sick with different pathologies from the worst region- Raiti, so that they may be treated in clinics where they receive good medical care.

It is because all of the above, that on behalf of the municipal government of San Jose de Bocay, I am asking for your support to make these initiatives a reality in improving the health of the most vulnerable people, the inhabitants of the region of Raiti.

It is worthwhile to mention that Mr **Martin Fernando Rojas**, has supported us over the last seven years with medicine, food, clothing, footwear, and paid for operations for indigenous children in private clinics in the city of Leon, showing great interest in supporting our town. For all of the above we are very grateful to Mr. Rojas for the great effort he makes to bring this very important boon for the people of Raiti.

As Mayor of this municipality, I turn to you for you to support us and hope for a positive response to this request, I am pleased to greet you.

Best regards

Ms. Ana Ch Janeth Sobalvarro  
Municipal Mayor  
San Jose de Bocay

Adjacent to Auditorium MINSA-San Jose de Bocay - Jinotega- phone - 27829011.



# MINISTERIO CENTRADO EN JESÚS

Carretera Poneloya KM 14 Entrada La Gallina 340 mts oeste  
sobre a carretera Finca Centrado en Jesus,  
Poneloya, Leon Nicaragua telefono: 2310 2683 o cel:8359 4939  
www.jcmmissions.com centradoenjesus@gmail.com  
RUC# J0810000149855

27 July 2014

Dear Sirs;

Asocacion Ministerio Centrado en Jesus in Leon Nicaragua works to help children find medical care in Nicaragua and when necessary helps find care outside of Nicaragua for children Nicaragua is unable to help for lack of resources.

We partner with The Child foundation in Miami Florida, HeartGift Foundation Austin Texas, Shriners Hospital, Cincinnati Children's hospital, and a new contact with Cedar Sinai Heart Institute.

We also open our home to those who live in other areas of Nicaragua to help coordinate care that can be provided in Leon and sometimes in Managua. Providing the love and support needed during the time away from home.

We have helped many children from the east coast that live in the Rio Coco area, which is very remote and only accessible by boat. Through contacts such as Martin Rojas and other ministries we have been a part of helping many children received medical care not available in their area. Working together to make a difference is what it's all about.

We would be a home away from home for those needing medical care for the time it takes to complete the care.

Please consider supporting a boat and ambulance service to the remote areas of Nicaragua. God Bless you abundantly.

Sincerely,

Cheryl A. Spence President Asocacion Ministerio Centrado en Jesus Leon Nicaragua.





# MARTIN F. ROJAS

719 Cabernet Ct. Grapevine TX. 76051

[martinrojas121@gmail.com](mailto:martinrojas121@gmail.com)

(972) 904-1004

## BILINGUAL EXECUTIVE HELPING INNOVATIVE COMPANIES CONNECT WITH GREAT CUSTOMERS

**Sales leader-** A proven leader with strategic target acquisition and business development prowess in calling on CXO level prospects. Most recently, targeted global oil field service completion and "down hole" oil tool companies in North America.

**Salient Communicator-** A consummate listener and communicator whom is keenly adept at accurately assessing, disseminating, and parlaying essential technical or financial information across the drawing board or the board room. Fluent in Spanish and skilled in global business development regardless of language or cultural barriers.

**Seeker of Excellence-** Personal excellence and integrity in all matters, leveraged to motivate prospects, clients, and colleagues.

### Experience:

**Composite Tools Business Unit Manager:** Omnitek Products & Protek      Grapevine, TX      2011 – 2012

- Δ Managed drillable down hole composite tools and composite frac ball product line for commercialization to the "Big Four" oilfield service companies as well as the largest independents in North America
- Δ Grew gross profit margin 19% managing product line from cradle to grave for a multi-million dollar P&L center
- Δ Worked extensively with applications engineers at three of the "Big Four" completions companies and multiple independents to develop new applications for composites; from concept to prototype, then from first article to production
- Δ Developed, marketed, and sold new grades of composites
- Δ Selected vendors; managed procurement, logistics and supply continuity; developed the QA/QC process- built a lab from scratch for qualifying new grades of composites and developed the M&Ps for testing, recording, and comparing new composites

**Director of Outsourced Business Sales for TXU Energy/SPI, Inc**      Dallas, TX      2009 – 2011

- Δ Recruited, hired, and managed 27 outside sales reps and 3 managers focused on new business acquisition for TXU Energy services in the enterprise and middle market segment in Texas
- Δ Lead a multi-million dollar annual P & L outsourced sales group resulting in increased N.O.I., in every successive quarter, with an annualized N.O.I. increase of 51% in a declining market, by focusing the sales teams and managers on targeting the highest value clients in the enterprise segment while increasing term of contracts by over 34%

**Vice President of Business Development for Golden Medium, LLC**      Dallas, TX      2004 – 2009

- Δ Co-founded company in 1998 and remained until 2000 when I sold my interests to other co-founders. Bought back into the business in 2004, and continued as a partner
- Δ Established successful loan origination into the US builder market in Texas culminating in agreements with Pulte and KB Home increasing revenues by over \$50 million per year
- Δ Developed personal origination FHA, VA, and conventional pipeline in excess of \$7 million per year

**Sales Executive for National Accounts for QWEST Communications**      Dallas, TX      2003 – 2004

- Δ Exceeded revenue target by 22% through the acquisition of Fortune 1000 clients selling enterprise telecommunication, data, disaster recovery, remote storage, and ISP services

**Director of North Texas Field Sales for TXU Communications**      Dallas, TX      2000 – 2002

- Δ Developed and lead five managers and their sales teams in DFW and North Texas to attain a 157% to plan average for sales of local phone service, data, and internet services to business clients



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***Supervisor- Mid Market Business Account Sales for MCI Corporation*** Houston, TX 1995 – 1997

- Δ Directed a sales force of 21 outbound telemarketing reps
- Δ Created and managed the number one production team at MCI for 4 consecutive quarters
- Δ Awarded MCI's highest honors including multiple Ovation, All- Star, and Club MCI Awards

***TSP Business Sales Professional for MCI Corporation*** Austin, TX 1993 – 1994

- Δ Ranked number one across approximately 1,680 sales professionals nationwide

### *Education:*

**The University of Texas: The Red McCombs School of Business** Austin, TX 1989 – 1994

***BBA, Business Honors Program:*** accounting, finance, marketing, sales, and business management

Activities and Societies: Business Honors Program; Texas Achievement Honors Award Scholar; Deans Honor roll-Multiple years; Phi Eta Sigma Honor Society; Alpha Lambda Delta Honor Society; U.T. Austin Rugby Union Captain

**South Texas College of Law** Houston, TX 1994 – 1995

Completed all requirements for Contracts, Torts, Constitutional Law, Legal Research and Writing, Property, and Criminal Law