

COOPERATIVE AGREEMENT

THIS AGREEMENT, made by and between **JACKSON COUNTY, MISSOURI**, a Constitutional Home Rule Charter County of the First Class of the State of Missouri, hereinafter referred to as "the County" and a Missouri not-for-profit corporation, **SOUTHERN CHRISTIAN LEADERSHIP CONFERENCE OF GREATER KANSAS CITY, 1216 BROOKLYN AVENUE, KANSAS CITY, MO 64127**, hereinafter referred to as "SCLC".

WHEREAS, the County and SCLC desire to enter into an Agreement to provide funding to be used for Martin Luther King Jr. Celebration; and,

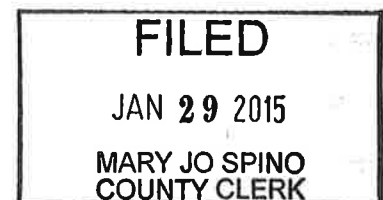
WHEREAS, the County deems it to be in the best interest of its citizenry to support such programs and activities; and,

NOW THEREFORE, in consideration of the foregoing and the terms and provisions herein contained, the County and SCLC respectively promise, covenant, and agree with each other as follows:

NOW, THEREFORE, it is agreed by and between the parties as follows:

1. **Services**. SCLC shall provide the Martin Luther King Jr. Celebration, as is more fully set out in the proposal attached hereto as Exhibit A and incorporated herein by reference. The budget SCLC submitted as part of Exhibit A is considered final and non-changeable. Any changes to the budget must be approved by the Jackson County Legislature.

2. **Terms Of Payment**. The County agrees to pay SCLC the total amount of **\$60,000.00** for services rendered under this Agreement. Upon execution of this



Agreement the County shall pay SCLC a lump sum amount of \$60,000.00. The County reserves the right to audit all invoices and to reject any invoice for good cause. The County retains the right to deduct from an invoice of SCLC any overpayment made by the County on a prior invoice. The County retains the right to make invoice corrections/changes. The County will not reimburse sales tax expense.

3. **Reports/Other Documentation** SCLC shall submit an annual report which shall summarize all of SCLC's activities pursuant to this Agreement. SCLC's failure to submit this annual report shall disqualify SCLC from future funding by the County.

SCLC must notify the County in writing on SCLC's letterhead, within five working days of the following changes:

- a. SCLC name, address, telephone number, administration, or board of directors
- b. SCLC funding that will affect the program under this contract
- c. Liability insurance coverage
- d. Management or staff responsible for providing services pursuant to this contract
- e. Any proposed or actual merger or acquisition either taken by the SCLC or toward the SCLC

4. **Submission Of Documents**. No payment shall be made under this Agreement unless SCLC shall have submitted to the County's Director of Finance and Purchasing: (1) a written proposal setting out in detail the intended use of the County's funding, including the target population to be served; (2) SCLC's IRS Form 990 from the previous fiscal or calendar year; (3) a statement of SCLC's total budget for its most recent fiscal year; and (4) a detailed explanation of actual expenditures of the County's funds (pertains to final payments and payments on contracts for future years). If SCLC

has previously received funding from the County, to be eligible for future payments, SCLC must submit either an audited financial statement for SCLC's most-recent fiscal or calendar year by March 31 of the following year, or a certified public accountant's program audit of the County's funds by January 31 of the following year. Any documents described herein which were submitted to the Director of Finance and Purchasing as a part of an application for funding need not be resubmitted to qualify for payment. No payment shall be made if SCLC is out of compliance on any other County contract, or has not paid county taxes on all properties owned by SCLC and assessed by the County.

5. **Equal Opportunity**. SCLC shall maintain policies of employment as follows:

A. SCLC and SCLC's subcontractor(s) shall not discriminate against any employee or applicant for employment because of race, religion, color, sex, age, disability, or national origin. SCLC shall take affirmative action as set forth to ensure that applicants are employed and employees are treated without regard to their race, religion, color, sex, age, disability, or national origin. Such action shall include, but not be limited, to the following: recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. SCLC agrees to post in conspicuous places, available to employees and applicants for employment, notices setting forth the policies of non-discrimination.

B. SCLC and SCLC's subcontractor(s) shall, in all solicitation or advertisements for employees placed by them or on their behalf, state that all

qualified applicants will receive consideration for employment without regard to race, religion, color, sex, age, disability, or national origin.

6. **Employment Of Unauthorized Aliens Prohibited.** Pursuant to §285.530.1, RSMo, SCLC assures that it does not knowingly employ, hire for employment, or continue to employ an unauthorized alien to perform work within the State of Missouri and/or Jackson County, and shall affirm, by sworn affidavit and provision of documentation, its enrollment and participation in a federal work authorization program with respect to the employees working in connection with the contracted services. Further, SCLC shall sign an affidavit, attached hereto and incorporated herein as Exhibit B, affirming that it does not knowingly employ any person who is an unauthorized alien in connection with the contracted services.

7. **Audit.** The parties agree that the County may, for any reason and at any given time, examine and audit the books and records of SCLC pertaining to its finances and operations. Further, SCLC agrees to establish and adopt such accounting standards and forms as recommended by the County prior to receipt of the County's first distribution of funds under the terms of this Agreement. The forms used to document expenditure of these funds may be changed from time to time by the County.

8. **Default.** If SCLC shall default in the performance or observation of any covenant, term or condition herein contained to be performed by SCLC, the County shall give SCLC ten days written notice, setting forth the default. If said default shall continue and not be corrected by SCLC within ten days after receipt of notice from the County, the County may, at its election, terminate this Agreement and withhold any payments not yet made to SCLC. Said election shall not, in any way, limit the County's

rights to sue for breach of this Agreement.

9. **Appropriation Of Funds.** SCLC and the County recognize that the County intends to satisfy its financial obligation to SCLC hereunder out of funds annually appropriated for that purpose by the County. County promises and covenants to make its best efforts to appropriate funds in accordance with this Agreement. In the event no funds or insufficient funds are appropriated and budgeted, or are otherwise unavailable by any means whatsoever for payment due hereunder, County shall immediately notify SCLC of this occurrence and this Agreement shall terminate on the last day for which appropriations were received, without penalty or expense to the County of any kind whatsoever, except as to the portions of the payment amounts herein agreed upon for which funds shall have been appropriated and budgeted or are otherwise available, or at any time after the last date that County has paid for the Services, if earlier.

County further agrees:

A. That any funds authorized or appropriated for services rendered under this Agreement shall be applied to the payments hereunder until all such funds are exhausted.

B. That County will use its best efforts to obtain authorization and appropriation of such funds including, without limitation, the inclusion in its annual budget, a request for adequate funds to meet its obligation under this Agreement in full.

10. **Conflict Of Interest.** SCLC warrants that no officer or employee of the County, whether elected or appointed, shall, in any manner whatsoever, be interested in or receive any benefit from the profits or emoluments of this Agreement.

11. **Severability**. If any covenant or other provision of this Agreement is invalid, or incapable of being enforced by reason of any rule of law or public policy, all other conditions and provisions of this Agreement shall, nevertheless, remain in full force and effect; and no covenant or provision shall be deemed dependent upon any other covenant or provision unless so expressed herein.

12. **Indemnification**. SCLC shall indemnify, defend and hold the County harmless from any and all claims, liabilities, damages, and costs (including reasonable attorney's fees directly related thereto) including but not limited to violation of civil rights and/or bodily injury to or death of any person and for damage to or destruction of property if and to the extent caused by the negligence, willful misconduct or omissions of SCLC during the performance of this Agreement.

13. **Insurance**. SCLC shall maintain the following insurance coverage during the term of this Agreement.

A. SCLC shall maintain Commercial General Bodily Injury and Property Damage Liability insurance, each in a combined single limit of One Million Dollars (\$1,000,000) each occurrence for bodily injury and property damage liability.

B. SCLC shall maintain, if any motor vehicles are used in the performance of the Services, Commercial General Bodily Injury and Property Damage Liability insurance, and Automobile Liability insurance including owned, non-owned, or hired vehicles, each in a combined single limit of One Million Dollars (\$1,000,000) each occurrence for bodily injury and property damage liability.

C. SCLC agrees to provide the County with certificates of insurance evidencing the above described coverage prior to the start of Services, and annually thereafter, if required by the County. Such certificates shall provide that the applicable insurance policies have been endorsed to provide a minimum of thirty days advance notice to the County in the event of cancellation, non-renewal, or reduction in limits by endorsement.

14. **Term.** The term of this Agreement shall commence January 1, 2015, and shall continue until December 31, 2015, unless sooner terminated pursuant to paragraph 8, 15, or 19 hereof. If this Agreement is terminated by either party, the County shall pay only for those services actually performed by SCLC as verified by the County's audit.

15. **Termination.** This Agreement may be terminated for any reason or no reason by either of the parties upon thirty (30) days' written notice to the other party's designated fiscal representative. All services and payments shall continue through the effective date of termination. Termination of this Agreement shall not constitute a waiver of the rights or obligations which the County or SCLC may be entitled to receive as provided in this Agreement, or be obligated to perform under this Agreement for services prior to the date of termination. Should this Agreement terminate, all County written materials of any kind must be delivered and returned by SCLC to the County within ten (10) days of the termination of this Agreement.

16. **Standard Of Care.** SCLC shall exercise the same degree of care, skill, and diligence in the performance of the Services as is ordinarily possessed and exercised by professionals operating under similar circumstances.

17. **Financial Contact.** SCLC shall designate a fiscal representative to act as a liaison between the parties to resolve any problems, complaints, or special circumstances encountered in the billing of the services agreed upon here.

Fiscal Representative

Q. Troy Thomas
415 E. 12th Street, Suite 100
Kansas City, MO 64106

**Southern Christian Leadership
Conference of Greater Kansas City**
Ariana Coleman, Program Director
1216 Brooklyn Avenue
Kansas City, MO 64127
(913) 522-7526

18. **Compliance.** The performance of this Agreement shall be subject to review by the County. The County Compliance Review Officer shall review this contract according to his responsibilities as set out in Chapter 6 of the Jackson County Code. SCLC shall file quarterly compliance reports as required by the County Compliance Review Office. The County warrants that all books, records, accounts, and any other documents in the possession of the County relating to this Agreement are public records open for inspection in accordance with Chapter 610, RSMo.

19. **Remedies For Breach.** SCLC agrees to faithfully observe and perform all of the terms, provisions, and requirements of this Agreement, and SCLC's failure to do so constitutes a breach of this Agreement. In such event, SCLC consents and agrees as follows:

A. The County may, without prior notice to SCLC, immediately terminate this Agreement; and

B. The County shall be entitled to collect from SCLC all payments made by the County to SCLC for which SCLC has not yet rendered services in

accordance with this Agreement, and to collect the County's reasonable attorney's fees, court costs and service fees if it is necessary to bring action to recover such payments.

20. **Transfer And Assignment**. SCLC shall not assign or transfer any portion or the whole of this Agreement without the prior written consent of the County.

21. **Organization Identity**. If SCLC is merged or purchased by another entity, the County reserves the right to terminate this Agreement. SCLC shall immediately notify the county in the event it is merged or purchases by any other entity.

22. **Confidentiality**. SCLC's records concerning the identities of those participating in its programs shall be strictly confidential; the County shall be entitled to examine said records in performing its audit and review functions, but shall not disclose said identities to any third party in any fashion.

23. **Incorporation**. This Agreement incorporates the entire understanding and agreement of the parties.

IN WITNESS WHEREOF, the County and SCLC have executed this Agreement
this 29th day of January, 2015.

APPROVED AS TO FORM:

JACKSON COUNTY, MISSOURI



W. Stephen Nixon
County Counselor

By 
Michael D. Sanders
County Executive

ATTEST:

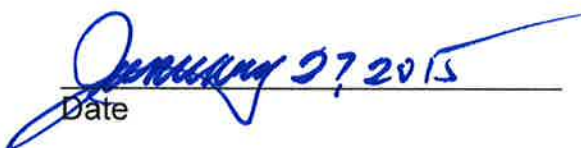
SOUTHERN CHRISTIAN LEADERSHIP
CONFERENCE OF GREATER
KANSAS CITY


Mary Jo Spino
Clerk of the Legislature

By 
Title Vice President
Federal Tax I.D. 43-1389572

REVENUE CERTIFICATE

I hereby certify that there is a balance otherwise unencumbered to the credit of the appropriation to which this Agreement is chargeable, and a cash balance otherwise unencumbered in the treasury from which payment is to be made, each sufficient to meet the obligation of \$60,000.00, which is hereby authorized.


Date


Director of Finance and Purchasing
Account No. 008-5014-56789
50142015001



OUTSIDE AGENCY FUNDING REQUEST FORM 2015 BUDGET

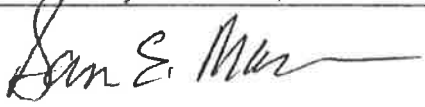
EXHIBIT A

415 E 12th Street, 2nd Floor
Kansas City, MO 64106
Email: auditor@jacksongov.org

Res. 18699

Section A: Organization or Agency Information page 1
 Section B: Agency's 2014 and 2015 Revenue Information page 2
 Section C: Jackson County Program Budget Request page 3
 Section D: Program Information pages 4 - 8

Section A: Organization or Agency Information

Name:	Southern Christian Leadership Conference of Greater Kansas City		
Address:	1216 Brooklyn Avenue Kansas City, Mo	Zip Code:	64127
Phone No:	816-241-8100	Fax:	816-241-1455
Website Address:	www.sclc.org		
Federal Tax ID No:	43-1389572	Fiscal Year Cycle:	Dec. 1, 2014 - Nov. 30, 2015
Chairman of the Board:	Rev. Sam Mann		
Phone No:	(816) 678-8697	Email:	revmann@aol.com
Name/Title of Principal Contact Person:	Mrs. Arlana Coleman, Program Director		
Phone No:	(913) 522-7526	Email:	ajoycole@att.net

Section B

Res. 18699

Agency's 2014 and 2015 Revenue Information

Agency's 2015 Projected Revenue Information

Funding Entity	Source You Will Request 2015 Funding From	Projected Amount	% of Total Revenue
Federal		\$ -	0
State		\$ -	0
Jackson County		\$ 60,000	50
Other Counties		\$ -	0
City		\$ -	0
Charity/Donations		\$ 31,250	26
Fundraisers		\$ 28,075	24
Other		\$ -	0
2015 Total Projected Revenue		\$ 119,325	

Agency's 2014 Revenue Information

Funding Entity	Source You Received 2014 Funding From	Amount	% of Total Revenue
Federal		\$ -	0
State		\$ -	0
Jackson County		\$ 60,000	29
Other Counties		\$ -	0
City			10
Charity/Donations		\$ 35,050	36
Fundraisers		\$ 24,275	2
Other (please list)			24
2014 Total Revenue		\$ 119,325	

Please identify the Jackson County source(s) your agency received funding from in 2014

Jackson County Funding Source	Yes	No	Amount	Program Name
COMBAT	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Mental Health Levy	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Board of Services for Developmentally Disabled	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Domestic Violence Board	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Housing Resources Commission	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Outside Agency Program	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
2014 Total Jackson County Funding			\$ -	

**Did your agency receive funding or resources in 2014 from either of the following?
If so, in what way did you participate? If not, why?**

Mid America Regional Council	\$ -
MAAC Link	\$ -
Harvesters	\$ -

Section C

Res. 18699

2015 Jackson County Program Budget Request

complete a separate program budget for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Martin Luther King Jr. Celebration

Program Request # **of**

Personal Services			
attach job description or duties for NEW salary requests only			
Position / Title	Annual Salary	% of Salary to be funded by Jackson Co.	Amount of Salary to be funded by Jackson Co.
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
		Total Salaries	\$ -
		Fringe Benefits	\$ -
Total Personal Services			\$ -
Contractual Services			
1. Speakers			\$ 20,936
2. Venue Rentals			\$ 37,215
3. Media Promotion			\$ 8,539
4. Air/ Ground Transportation / Lodging			\$ 5,350
5. Insurance/ Planning/ Admin. Support			\$ 7,225
6. Entertainment & Scholarships			\$ 31,050
Total Contractual Services			\$ 110,315
Supplies			
1. Awards			\$ 2,550
2. Offering Envelopes & Evaluation Tool			\$ 800
3. T- shirts & Logo			\$ 2,275
4. Food for Scholarship Breakfast & Youth workshops			\$ 2,050
5. Table Decorations & Florist			\$ 1,285
6. Certificates			\$ 50
Total Supplies			\$ 9,010
Total Jackson County Program Budget Request			\$ 119,325

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Black Archievers in Business and Industry Awards Dinner

Program Request # _____ of _____

Proposed Program Cost	
What is the total cost to run your program regardless of the Jackson County funding you are requesting?	
Total Program Cost	\$ 19,500
Proposed Program	
Detail functions to be performed - limit your response to the space provided	
African - Americans who have achieved in business and industry are recognized and presented as positive role models in the community. These individuals are nominated by their respective employers for their contributions to their companies and the communities in which they live. Once inducted into the Black Archiever's Society the award recipients work with high school and junior high students as role models to encourage them to pursue post secondary educations as well as careers in business and industry. The mentorship relationships are fostered to reduce violence and expose the negative affects of illegal drug use.	

Section D**Res. 18699****2015 Program Information***Complete a separate program information sheet for each program your agency is applying for funding*Agency Name: Southern Christian Leadership Conference of Greater KCProgram Name: Black Achievers in Business and Industry Awards Dinner

Program Request # _____ of _____

Participants	
Identify the number of participants that each program serves	
# served with this program	250
Of the # served with this program, how many are from:	
Jackson County	200
Other Counties	Cass; Clay and Platte, Mo; Wyandotte and Johnson , Ks.
Target Population	
Describe target population and demographics to be served by each program	
Corporations and Companies in the Metropolitan Kansas City area committed to diversity in the workplace.	
Estimate of your cost per participant: \$97.50	
What criteria do you have for the participants you serve? Commitment to diversity in the workplace.	
Do you keep a list of participants for each program? Yes	
Would you provide these services to anyone at your door? No	
Is anyone denied services? No	
Please classify your program from the following types by % of your agency's overall services:	
Seniors Program:	
Indigent Program (Below Poverty Level):	
Indigent Senior Program:	

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2015 Program Information

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Black Achievers in Business and Industry Awards Dinner

Program Request # _____ **of** _____

Service Delivery Area

Identify your specific geographic service delivery area for each program

Jackson County, Kansas City, Missouri

Fund Separation

Indicate what measures your agency will take to ensure that funds received from Jackson County will be utilized for the benefit of Jackson County residents

Funds will be used to pay the cost of the dinner and to recognize African Americans who have achieved in their compaines and contributed to their communties as well as to recognize companies committed to diversity in the workforce.

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2015 Program Information

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Black Achievers in Business and Industry Awards Dinner

Program Request # _____ **of** _____

Approach & Method
<p>List the top three (3) objectives for each program</p> <p>1. To encourage companies and businesses to promote diversity in the workplace.</p>
<p>2. To recognize and honor achievement by African American professionals, managers and supervisors for their contributions to their respective companies and the communities in which they live.</p>
<p>3. To promote positive role models through mentorship relationships between Black Achievers and High School students.</p>
<p>Detail specific methods you will use to achieve these objectives</p> <p>The above objectives will be achieved by recognizing, through awards, the companies commitment to diversity and accomplishments of their African American professionals, managers, and supervisors.</p>

Section D

Res. 18699

2015 Program Information

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Black Achievers in Business and Industry Awards Dinner

Program Request # _____ of _____

Evaluation

How can the success of each program be evaluated? Indicate performance measures or statistics you will use to demonstrate the success of each program

Goal of 250 persons attending the Awards Dinner.

Notification

How will your organization make clients, the public and the media aware of the generous taxpayer funding received from Jackson County? (Please attach any examples)

At each event, Jackson County will be announced as a primary sponsor of the Martin Luther King Jr. Celebration. The Souvenir Program Book will be distributed at each event and it will prominently display Jackson County as a primary sponsor of the MLK Celebration. Public Service Announcements will be broadcasts on local radio stations informing the public that Jackson County is a primary sponsor of the MLK Celebration.

Section D

Res. 18699

2015 Program Information

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Scholarship Breakfast

Program Request # _____ **of** _____

Proposed Program Cost	
What is the total cost to run your program regardless of the Jackson County funding you are requesting?	
Total Program Cost \$	22,400
Proposed Program	
Detail functions to be performed - limit your response to the space provided	
The Scholarship breakfast provides college scholarships to high school and college students from Kansas City, Raytown, Grandview, Lee's Summit and Blue Springs. Breakfast Speakers from Colleges and Universities (Chancellors, Presidents and Academic Deans) speak to the students and encourage them to continue to pursue their academic careers. Students from the target areas are given special recognition, including scholarships. High school juniors are paired with Black Achievers in business and industry in SCLC mentorship program. This effort is designed to reduce violence and drug abuse among young people.	

Section D

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2015 Program Information

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Scholarship Breakfast

Program Request # _____ **of** _____

Participants	
Identify the number of participants that each program serves	
# served with this program	200
Of the # served with this program, how many are from:	
Jackson County	150
Other Counties	Clay; Platte and Cass, Mo. : Wyandotte and Johnson, Ks.
Target Population	
Describe target population and demographics to be served by each program	
High School and Junior High School Student from Metropolitan Kansas City.	
<p>Estimate of your cost per participant: \$112.00</p> <p>What criteria do you have for the participants you serve? A desire to learn the principles on non-violent direct action, Commitment to human rights, justice and equality and Grade point average.</p> <p>Do you keep a list of participants for each program? Yes</p> <p>Would you provide these services to anyone at your door? Students who meet the academic criteria and commitment to human rights , justice and equality.</p> <p>Is anyone denied services? No</p> <p>Please classify your program from the following types by % of your agency's overall services:</p> <p style="padding-left: 40px;">Seniors Program:</p> <p style="padding-left: 40px;">Indigent Program (Below Poverty Level): 80%</p> <p style="padding-left: 40px;">Indigent Senior Program:</p>	

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Scholarship Breakfast

Program Request # _____ **of** _____

Service Delivery Area

Identify your specific geographic service delivery area for each program

Jackson County - Kansas City, Missouri

Fund Separation

Indicate what measures your agency will take to ensure that funds received from Jackson County will be utilized for the benefit of Jackson County residents

Funds will be used to : (1) pay the costs at the Breakfast, invitations to Junior and Senior High School Students and to provide scholarships to High School and College Students.

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Scholarship Breakfast

Program Request # _____ **of** _____

Approach & Method

List the top three (3) objectives for each program

1. Inspire youth to continue their education beyond the secondary level.
2. Inspire youth to commit their lives to human rights, non - violent conflict resolution, justice and equality.
3. To teach youth about the ill affects of drug abuse.

Detail specific methods you will use to achieve these objectives

The above objectives will be achieved by encouraging youth to continue their edcation through Scholarships and mentorship relationships.

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Scholarship Breakfast

Program Request # _____ **of** _____

Evaluation

How can the success of each program be evaluated? Indicate performance measures or statistics you will use to demonstrate the success of each program

Goal of 200 youth attending the event and 15 to 20 Scholarships given.

Notification

How will your organization make clients, the public and the media aware of the generous taxpayer funding received from Jackson County? (Please attach any examples)

At each event, Jackson County will be announced as a primary sponsor of the Martin Luther King Jr. Celebration. The Souvenir Program Book will be distributed at each event and it will prominently display Jackson County as a primary sponsor of the MLK Celebration. Public Service Announcements will be broadcasts on local radio stations informing the public that Jackson County is a primary sponsor of the MLK Celebration.

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater Kansas City

Program Name: Community Luncheon

Program Request # _____ **of** _____

Proposed Program Cost	
What is the total cost to run your program regardless of the Jackson County funding you are requesting?	
Total Program Cost	\$ 19,700
Proposed Program	
Detail functions to be performed - limit your response to the space provided	
<p>The Community Luncheon is designed to promote unity in the Greater Kansas City Community by bringing people together of different ethnic, race and religious backgrounds. The aim of the Luncheon is to celebrate and promote non-violence, equality, justice, and peace, with special emphasis on young people, church groups and neighborhood organizations throughout the metropolitan Kansas City area and surrounding communities such as Raytown and Grandview.</p>	

Section D 2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater Kansas City

Program Name: Community Luncheon

Program Request # _____ **of** _____

Identify the number of participants that each program serves	
# served with this program	500
Of the # served with this program, how many are from:	
Jackson County	400
Other Counties	Cass, Clay and Platte, Mo. ; Wyandotte and Johnson, Ks.
Target Population	
Describe target population and demographics to be served by each program	
Youth, Young Adults, Human Rights Organizations, Churches, Schools and Community Centers.	
Estimate of your cost per participant: \$39.40	
What criteria do you have for the participants you serve: Commitment to Human Rights, Justice and Equality.	
Do you keep a list of participants for each program? No	
Would you provide these services to anyone at your door?	Yes
Is anyone denied services?	No
Please classify your program from the following types by % of your agency's overall services:	
Seniors Program: 10%	
Indigent Program (Below Poverty Level): 75%	
Indigent Senior Program: 15%	

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2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater Kansas City

Program Name: Community Luncheon

Program Request # _____ **of** _____

Service Delivery Area

Identify your specific geographic service delivery area for each program

Jackson County - Kansas City, Missouri

Fund Separation

Indicate what measures your agency will take to ensure that funds received from Jackson County will be utilized for the benefit of Jackson County residents

Funds will be used to pay the cost of the lunch and Speaker for the benefit of Jackson County Residents

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater Kansas City

Program Name: Community Luncheon

Program Request # _____ **of** _____

Approach & Method

List the top three (3) objectives for each program

1. Inspire youth/ young adults and Jackson County residents to get involved in their communities through positive action.

2. Inspire youth and young adults to become aware of the needs in their communities and to make positive contributions to the improvement of their communities.

3. Inspire youth/ young adults and Jackson County to promote human rights, equality, justice and diversity.

Detail specific methods you will use to achieve these objectives

Inspiration to achieve the above objectives will accomplished by providing positive role models and positive messages to those that attend the Luncheon.

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2015 Program Information

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater Kansas City

Program Name: Community Luncheon

Program Request # _____ **of** _____

Evaluation

How can the success of each program be evaluated? Indicate performance measures or statistics you will use to demonstrate the success of each program

Goal of 500 attendees at Community Luncheon.

Notification

How will your organization make clients, the public and the media aware of the generous taxpayer funding received from Jackson County? (Please attach any examples)

At each event, Jackson County will be announced as a primary sponsor of the Martin Luther King Jr. Celebration. The Souvenir Program Book will be distributed at each event and it will prominently display Jackson County as a primary sponsor of the MLK Celebration. Public Service Announcements will be broadcast on local radio stations informing the public that Jackson County is a primary sponsor of the MLK Celebration.

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Interfaith Service

Program Request # _____ **of** _____

Proposed Program Cost	
What is the total cost to run your program regardless of the Jackson County funding you are requesting?	
Total Program Cost	\$ 8,700
Proposed Program	
Detail functions to be performed - limit your response to the space provided	
<p>The Interfaith service is designed to promote unity among the many religious denominations in Kansas City and Jackson County, Missouri. The service emphasizes non violent solutions to differences across religious, racial and ethnic lines. Nationally known gospel artist and speakers are brought in to address an ecumenical service. The service is designed to promote understanding among differing religious faiths. An Individual from the Kansas City, Jackson County Community is selected and recognized for his/ her contribution to the promotion of religious and racial tolerance.</p>	

Section D 2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Interfaith Service

Program Request # _____ **of** _____

Participants	
Identify the number of participants that each program serves	
# served with this program	400
Of the # served with this program, how many are from:	
Jackson County	350
Other Counties	Cass; Clay and Platte, Mo.; Wyandotte and Johnson, Ks.
Target Population	
Describe target population and demographics to be served by each program	
Churches of all Denominations in metropolition Kansas City, Human Rights and Civil Rights Organizations.	
<p>Estimate of your cost per participant: \$21.75</p> <p>What criteria do you have for the participants you serve? Commitment to Human Rights, Justice, Brotherhood and Equality</p> <p>Do you keep a list of participants for each program? No</p> <p>Would you provide these services to anyone at your door? Yes</p> <p>Is anyone denied services? NO</p> <p>Please classify your program from the following types by % of your agency's overall services:</p> <p style="padding-left: 40px;">Seniors Program:10%</p> <p style="padding-left: 40px;">Indigent Program (Below Poverty Level):75%</p> <p style="padding-left: 40px;">Indigent Senior Program: 15%</p>	

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Interfaith Service

Program Request # _____ **of** _____

Service Delivery Area

Identify your specific geographic service delivery area for each program

Jackson County - Kansas City, Missouri

Fund Separation

Indicate what measures your agency will take to ensure that funds received from Jackson County will be utilized for the benefit of Jackson County residents

Funds will be used to pay the costs of the speakers and artists and to extend invitations to churches of all denominations in Jackson County.

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Interfaith Service

Program Request # _____ of _____

Approach & Method

List the top three (3) objectives for each program

1. To promote cooperation and understanding among different religious groups.

2. Inspire the attendees to appreciate the dignity and worth of all human personality.

3. To promote religious tolerance among people of different religious persuasions.

Detail specific methods you will use to achieve these objectives

The Interfaith Service will bring together persons from a variety of religious backgrounds in an ecumenical service designed to promote understanding and cooperation among such persons.

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater KC

Program Name: Interfaith Service

Program Request # _____ of _____

Evaluation

How can the success of each program be evaluated? Indicate performance measures or statistics you will use to demonstrate the success of each program

Goal of 400 attendees at the Interfaith Service.

Notification

How will your organization make clients, the public and the media aware of the generous taxpayer funding received from Jackson County? (Please attach any examples)

At each event, Jackson County will be announced as a primary sponsor of the Martin Luther King Jr. Celebration. The Souvenir Program Book will be distributed at each event and it will prominently display Jackson County as a primary sponsor of the MLK Celebration. Public Service Announcements will be broadcasts on local radio stations informing the public that Jackson County is a primary sponsor of the MLK Celebration.

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater Kansas City

Program Name: Artist Tribute

Program Request # _____ of _____

Proposed Program Cost	
What is the total cost to run your program regardless of the Jackson County funding you are requesting?	
Total Program Cost \$	15,000
Proposed Program	
Detail functions to be performed - limit your response to the space provided	
Nationally Known artist are brought to Kansas City to emphasize positive themes such as respect for all cultures, brotherhood and a sense of community through the fine arts. The program emphasizes the elimination of drug and alcohol activity in the Kansas City/ Jackson County community by presenting positive role models to young people. This event will also focus on local and national talent involvement in the community, their contribution to the community and positive exposure for youth and young adults.	

Section D 2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater Kansas City

Program Name: Artist Tribute

Program Request # _____ **of** _____

Participants	
Identify the number of participants that each program serves	
# served with this program	200
Of the # served with this program, how many are from:	
Jackson County	150
Other Counties	Cass; Clay and Platte, Mo; Wyandotte and Johnson, Ks.
Target Population	
Describe target population and demographics to be served by each program	
Churches of all denominations, Human Rights and Civil Rights Organizations in Metropolitan Kansas City.	
<p>Estimate of your cost per participant: \$75.00</p> <p>What criteria do you have for the participants you serve? Commitment to Human Rights, Civil Rights and Justice.</p> <p>Do you keep a list of participants for each program? NO</p> <p>Would you provide these services to anyone at your door? Yes</p> <p>Is anyone denied services? Yes</p> <p>Please classify your program from the following types by % of your agency's overall services:</p> <p style="margin-left: 40px;">Seniors Program: 10%</p> <p style="margin-left: 40px;">Indigent Program (Below Poverty Level):75%</p> <p style="margin-left: 40px;">Indigent Senior Program:15%</p>	

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater Kansas City

Program Name: Artist Tribute

Program Request # _____ of _____

Service Delivery Area

Identify your specific geographic service delivery area for each program

Jackson County, Kansas City, Missouri

Fund Separation

Indicate what measures your agency will take to ensure that funds received from Jackson County will be utilized for the benefit of Jackson County residents

Funds will be used to pay nationally known and local artist to provide entertainment that inspires positive themes such as respect for all human personality and a sense of community.

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater Kansas City

Program Name: Artist Tribute

Program Request # _____ **of** _____

Approach & Method
List the top three (3) objectives for each program
1. To inspire youth/ young adults and citizens of Jackson County, through the fine arts, to appreciate community and brotherhood.
2. To provide positive role models to youth / young adults in Jackson County.
3. To present positive messages to youth / young adults and citizens of Jackson County through music and other fine arts.
Detail specific methods you will use to achieve these objectives
Nationally known and local artist will pay tribute to the principles of community, brotherhood, justice and equality.

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater Kansas City

Program Name: Artist Tribute

Program Request # _____ of _____

Evaluation

How can the success of each program be evaluated? Indicate performance measures or statistics you will use to demonstrate the success of each program

Goal of 200 persons attending the Artists performance.

Notification

How will your organization make clients, the public and the media aware of the generous taxpayer funding received from Jackson County? (Please attach any examples)

At each event, Jackson County will be announced as a primary sponsor of the Martin Luther King Jr. Celebration. The Souvenir Program Book will be distributed at each event and it will prominently display Jackson County as a primary sponsor of the MLK Celebration. Public Service Announcements will be broadcasts on local radio stations informing the public that Jackson County is a primary sponsor of the MLK Celebration.

Section D
2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater Kansas City

Program Name: Youth Leadership Workshop

Program Request # _____ **of** _____

Proposed Program Cost What is the total cost to run your program regardless of the Jackson County funding you are requesting?	
Total Program Cost	\$ 18,561
Proposed Program Detail functions to be performed - limit your response to the space provided	
The Youth Leadership Workshop is aimed at Junior High and High School students in Jackson County and is specifically designed to emphasize academic and positive extra curricular activities for youth, and to highlight the negative affects of illegal drug use. Workshops are conducted at the Kauffman Center by trained and nationally recognized speakers who give student strategies for advoiding violence in conflict resolution as well as promoting the positive impact of continuing their academic careers.	

Section D 2015 Program Information

Res. 18699

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater Kansas City

Program Name: Youth Leadership Workshop

Program Request # _____ **of** _____

Participants	
Identify the number of participants that each program serves	
# served with this program	200
Of the # served with this program, how many are from:	
Jackson County	150
Other Counties	Cass; Clay and Platte, Mo. And Wyandotte and Johnson , Ks.
Target Population	
Describe target population and demographics to be served by each program	
Elementary, Junior High and High School Students in Metropolitan Kansas City.	
<p>Estimate of your cost per participant: \$92.80</p> <p>What criteria do you have for the participants you serve? A desire to learn the principles of non-violent direct action and a commitment to human rights, justice and equality.</p> <p>Do you keep a list of participants for each program? Yes</p> <p>Would you provide these services to anyone at your door? Those who meet the above stated criteria.</p> <p>Is anyone denied services? No</p> <p>Please classify your program from the following types by % of your agency's overall services:</p> <p style="margin-left: 40px;">Seniors Program:</p> <p style="margin-left: 40px;">Indigent Program (Below Poverty Level): 80%</p> <p style="margin-left: 40px;">Indigent Senior Program:</p>	

Section D
2015 Program Information **Res. 18699**

Complete a separate program information sheet for each program your agency is applying for funding

Agency Name: Southern Christian Leadership Conference of Greater Kansas City

Program Name: Youth Leadership Workshop

Program Request # _____ **of** _____

Service Delivery Area Identify your specific geographic service delivery area for each program
Jackson County, Kansas City, Missouri
Fund Separation Indicate what measures your agency will take to ensure that funds received from Jackson County will be utilized for the benefit of Jackson County residents
Funds will be used to rent the Kauffman Center invite Elementary, Junior High and High School students. They are taught non- violent conflict resolution and to avoid the pitfalls of drug abuse.

WORK AUTHORIZATION AFFIDAVIT

As a condition for any service provided to the County, a business entity shall, by sworn affidavit and provision of documentation, affirm its enrollment and participation in a federal work authorization program with respect to the employees working in connection with the contracted services.

Business entity, as defined in section 285.525, RSMo pertaining to section 285.530, RSMo, is any person or group of persons performing or engaging in any activity, enterprise, profession, or occupation for gain, benefit, advantage, or livelihood. The term "business entity" shall include but not be limited to self-employed individuals, partnerships, corporations, contractors, and subcontractors. The term "business entity" shall include any business entity that possesses a business permit, license, or tax certificate issued by the state, any business entity that is exempt by law from obtaining such a business permit, and any business entity that is operating unlawfully without such a business permit.

Every such business entity shall complete the following affidavit affirming that it does not knowingly employ any person who is an unauthorized alien in connection with the contracted services. The completed affidavit must be returned as a part of the contract documentation.

This affidavit affirms that **Southern Christian Leadership Conference of Greater Kansas City**, is enrolled in, and is currently participating in, E-verify or any other equivalent electronic verification of work authorization operated by the United States Department of Homeland Security under the Immigration Reform and Control Act of 1986 (IRCA); and, **Southern Christian Leadership Conference of Greater Kansas City**, does not knowingly employ any person who is an unauthorized alien in conjunction with the contracted services.

In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)

Taylor Fields
Authorized Representative's Signature
Vice President
Title

Taylor Fields
Printed Name
1-16-2015
Date

Subscribed and sworn before me this 16th day of January, 2015. I am commissioned as a notary public within the County of Jackson, State of MO, and my commission expires on 6-5-2018.

S. Rizzo
Signature of Notary

January 16, 2015
Date