COOPERATIVE AGREEMENT

AN AGREEMENT by and between JACKSON COUNTY, MISSOURI, hereinafter called "the County" and CAVE SPRINGS ASSOCIATION, 8701 Gregory Blvd., Kansas City, Missouri 64133, hereinafter called "Agency."

WHEREAS, the County and Agency desire to enter into a cooperative agreement, whereunder the County will pay \$22,277.00 to Agency.

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 Agency respectively promise, covenant, and agree with each other as follows:

- 1. <u>Services</u>. Agency shall purchase liability insurance for Cave Spring Park and Interpretive Center located at the corner of Gregory and Blue Ridge Boulevard in Jackson County, Missouri. Agency shall also provide the partial salary of the Executive Director of Cave Spring, the partial salary of a part-time office worker, and necessities to insure public access and safety. The authorized expenditures are more fully set out in the proposal attached hereto and incorporated herein by reference as Exhibit A
- 2. <u>Terms of Payment</u>. The County agrees to pay to Agency the total amount of \$22,277.00 in quarterly installments of \$5,569.25 each, with the first payment to be made upon execution of this Agreement. The remaining payments shall be made upon the County's receipt of the reports as set forth in paragraph 3 hereof. The County,

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MARY JO SPINO
COUNTY CLERK

through the Legislative Auditor, may approve adjustments to line items listed in Agency's budget/proposal contained in Exhibit A, in an amount not to exceed 10 percent of the total amount of the Agreement, so long as there is no additional total cost to the County.

- 3. Reports. Within 30 days after the conclusion of each calendar quarter under this Agreement, Agency shall submit a quarterly report, including cancelled checks and/or a copy of the face of the check and corresponding bank statements, invoices, and any other documents requested by the Director of Finance and Purchasing, to establish that the funds provided pursuant to this Agreement were used for the purposes set forth herein. The last quarter's report shall include an annual report which shall summarize all of Agency's activities pursuant to this Agreement. Agency's failure to submit this annual report shall disqualify Agency from future funding by the County.
- 4. <u>Submission of Documents</u>. No payment shall be made under this contract unless the contracting agency shall have submitted to the 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) the agency's IRS Form 990, from the previous fiscal or calendar year; (3) a statement of the agency's total budget for its most recent fiscal year; and, (4) a detailed explanation of actual expenditures of County funds (pertains to final payments and payments on contracts for future years.) If an agency has previously received County funding, to be eligible for future payments, an agency must submit either an audited financial statement for the agency's most recent fiscal or calendar year, by March 31 of the following year, or a certified public

accountant's program audit of County funds, by January 31 of the following year. Any document described herein which was 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 the contract agency is out of compliance on any other County contract.

- 5. **Equal Opportunity**. Agency agrees and assures that no person eligible for services shall on the ground of race, color, religion, national origin, sex, handicap, veteran status, or age be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination for any service funded by this Agreement. Furthermore, Agency agrees and assures that it will provide equal employment opportunities to applicants and employees and will not discriminate against them on the basis of race, color, religion, national origin, sex, handicap, veteran status, or age.
- 6. <u>Audit</u>. The County further reserves the right to examine and audit, during reasonable office hours, the books, and records of Agency pertaining to its finances and operations.
- 7. **Default.** If Agency shall default in the performance or observation of any term or condition of this Agreement, the County shall give written notice setting forth the default and the correction required. If said default shall continue and not be corrected by Agency within ten days of its receipt of said notice, the County may, at its election, terminate the Agreement and withhold any payments not yet made. Said election shall not in any way limit the County's right to seek legal redress.
 - 8. Conflict of Interest. Agency 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.

- 9. **Severability.** If any covenant or other provision of this Agreement is invalid or incapable of being enforced by reasons 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.
- 10. Liability and Indemnification. No party to this Agreement shall assume any liability for the acts of any other party to this Agreement, its officers, employees or agents and Agency shall indemnify, defend and hold the County harmless from any and all claims, liabilities, damages, 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 Agency during the performance of this Agreement.
- 11. <u>Term.</u> This Agreement shall be effective January 1, 2013, and shall terminate on December 31, 2013. This Agreement may be terminated prior to that date by either party upon written notice, delivered thirty (30) days prior to the effective date of termination. If this Agreement is terminated by either party, the County shall pay only for those services actually performed by Agency as verified by the County's audit.
- 12. <u>Incorporation</u>. This Agreement incorporates the entire understanding and agreement of the parties.

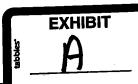
| IN WITNESS WHEREOF, the parties day of, 2013. | have executed this Agreement this _31 |
|---|---|
| APPROVED AS TO FORM: W. Stephen Nixoh County Counselor | By: Michael D. Sanders County Executive |
| ATTEST: | CAVE SPRING ASSOCIATION |
| Mary Jo Spinø Clerk of the Legislature | By: Executive Director Federal I.D. No: 51-0189082 |

REVENUE CERTIFICATE

I hereby certify that there is a balance otherwise unencumbered to the credit of the appropriation to which this contract 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 \$22,277.00 which is hereby authorized.

Director of Finance and Purchasing Account No. 003-7302-56789

73022013001





OUTSIDE AGENCY FUNDING REQUEST FURING 2013 BUDGET

415 E 12th Street, 2nd Floor Kansas City, MO 64106

Email: auditor@jacksongov.org

| Section A: Organization or Agency Information | page 1 |
|---|-------------|
| Section B: Agency's 2012 and 2013 Revenue Information | page 2 |
| Section C: Individual Program Budget | page 3 |
| Section D: Program Information | pages 4 - 8 |
| Section E: Summary of Request by Program | page 9 |

| Section A: Organization | on or Agency Information |
|--|---|
| Name: CAUE SPRING ASSOCIATIO | ργ |
| Address: 8701 GREGORY BLUD. | |
| Phone No: 816 · 547 - 9679 | Fax: |
| Website Address: CAUE SPRING, ORG | |
| Federal Tax ID No: 51-0189082 | Fiscal Year Cycle: 2013 |
| Executive Director: AL MADDOX | |
| Name and Title of Principal Contact Person: AC | MADDOX, PRESIDENT |
| Phone No: 816 - 547 - 9679 | Email Address: 4, M4000x 38CGL084L, NET |
| | |

Submittal of this request has been authorized by:

8-18-12 Date:



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| Section B: Agency's 2012 and 2013 Revenue Information | | | | | |
|---|--|----|---------------------|-----------------------|--|
| Agency's 2013 Projected Revenue Information | | | | | |
| Funding Entity | Agency's 2013 Total Projected Revenue Source You Will Request 2013 Funding From | | Projected Amount | % of Total Revenue | |
| Federal | | \$ | - | #DIV/0! | |
| State | | \$ | - | #DIV/0! | |
| Jackson County | | \$ | 22,277 00 | #DIV/0I | |
| Other Counties | | \$ | _] | #DIV/0! | |
| City | | \$ | _ | #DIV/01 | |
| Charity/Donations | | \$ | 4000 eo | #DIV/0! | |
| Fundraisers | | \$ | 3500 00 | #DIV/01 | |
| Other | | \$ | 1300 00 | #DIV/0I | |
| | 2013 Total Projected Revenue | \$ | 31,071-00 | | |

| 1 | y's 2012 | Reven | ue inf | orma | tion | |
|--|------------------------------|-----------|---|--|--|-----------------------|
| | s 2012 Total I Received F | | | | Amount | % of Total Revenue |
| Federal | | | | \$ | | #DIV/01 |
| State | | | | \$ | ~ | #DIV/01 |
| Jackson County | | | | \$ | 22,277-00 | #DIV/0! |
| Other Counties | | | | \$ | ~~,~. | #DIV/0! |
| City | | | | \$ | _ | #DIV/0I |
| Charity/Donations | | | | \$ | _ | #DIV/0! |
| Fundraisers | | | | \$ | _ | #DIV/0! |
| Other (please list) | | | | s | _ | #DIV/0! |
| | 2 | 012 Total | Revenu | e \$ | | #517701 |
| please identify the fo | unding sour | ce. amou | nt and i | orograi | n name below. | |
| | | | | | | rom Nama |
| Jackson County Funding Source | | Yes | No | Am | | ram Name |
| Jackson County Funding Source | | Yes | No | Am \$ | | ram Name |
| Jackson County Funding Source COMBAT Mental Health Levy | | Yes | No EY | Am \$ \$ | | ram Name |
| Jackson County Funding Source COMBAT Mental Health Levy Board of Services for Developmentally Di | | Yes | No EY EY | Am \$ \$ \$ | | ram Name |
| Jackson County Funding Source COMBAT Mental Health Levy Board of Services for Developmentally Di Domestic Violence Board | | Yes | No EY EY EY | Am \$ \$ \$ \$ | | ram Name |
| Jackson County Funding Source COMBAT Mental Health Levy Board of Services for Developmentally Di | | Yes | No EY EY | Am \$ \$ \$ \$ | | ram Name |
| Jackson County Funding Source COMBAT Mental Health Levy Board of Services for Developmentally Di Dornestic Violence Board Housing Resources Commission Outside Agency Program | | Yes | No. PY E E E E E E | Am \$ \$ \$ \$ \$ \$ | ount Prog | ram Name |
| Jackson County Funding Source COMBAT Mental Health Levy Board of Services for Developmentally Di Domestic Violence Board Jousing Resources Commission Outside Agency Program 2012 To | isabled tal Jackson | Yes | No EY EY EY EY EY | ************************************** | ount Prog | EIVED |
| Dackson County Funding Source COMBAT Mental Health Levy Board of Services for Developmentally Di Domestic Violence Board Housing Resources Commission Outside Agency Program 2012 To | isabled tal Jackson | Yes | No □ □ □ □ □ □ □ □ □ □ □ □ □ | Am \$ \$ \$ \$ \$ \$ \$ \$ 22 \$ 2: | ount Prog | EIVED |
| Jackson County Funding Source COMBAT Mental Health Levy Board of Services for Developmentally Di Domestic Violence Board Jousing Resources Commission Outside Agency Program 2012 To | isabled tal Jackson | Yes | No EY EY EY EY EY | ************************************** | Programme Progra | EIVED |

Section C: 2013 Program Budget

Complete a separate program budget for each program your agency is applying for funding.

| Agency | Name: CΔυ | e Jering A | SSOCIATION | <u>J</u> | |
|--------------|---------------------------------------|------------------|---|--------------------------------------|------------------|
| Program | | | | | |
| | | Davis and Comis | | | |
| Fores | ا ch salary request be | Personal Service | | intion or du | ties. |
| 10100 | Position / Title | Annual Salary | % of Salary to be funded by Jackson Co. | Amount of to be fund Jackson C | Salary led by |
| | | | | \$ | |
| | | | | \$. | |
| | | | | \$ | |
| | | | | \$ | |
| | · · · · · · · · · · · · · · · · · · · | | | \$ | |
| | · | | | \$ | |
| Total Salari | es | | | \$ | _ |
| Total Fringe | e Benefits | | | \$ | |
| | | Total Pers | onal Services | \$ 0 | |
| | Co | ontractual Serv | ices | | |
| AL MA | DOOK | | | \$ 1668 | 6.00 |
| Percy | SLOAN | | | \$ 4000 | 0.00 |
| | | | | \$ | - |
| | | | i | \$ | |
| | | | | \$ | - |
| | | | | \$ | |
| | | Total Contra | ctual Services | \$20,68 | 16.00 |
| · | | Supplies | | | |
| LIBILIT | 9 MSURANCE | | | \$ 1591 | ,00 |
| | | | | \$ | - |
| | | | | \$ | <u>-</u> |
| | | | | \$ | - |
| | | | | \$ | - |
| | RECEIVED | | | \$ | - |
| | | | Total Supplies | \$ | |
| | SEP 1'3 2012 | | | | |
| | JACKSON COUNTY | Total Prog | ram Request | : \$ 22,27 | 17 - 00 |

JACKSON COUNTY AUDITORS OFFICE KANSAS CITY. MISSOURI

Section C

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

| Agency Name: | | |
|---------------|--|--|
| Program Name: | | |

Proposed Program

Detail functions to be performed by each program.

Cave Spring Association operates a Jackson County Park in Southeast Jackson County. We have added several new attractions in the park this year. This 39 acre park now has over 5 miles of walking trails with 3 new ones this year. Our old and new attractions include a nature center with displays on nature and the history of our area, wildlife pond with habitats, new bridges, a waterfall area with shelter house and picnic area, fire pit, small cave. water garden with fish, Duck Island, 2 camping area's one for large groups and one for family size camping, bird watching area, chimney's from cabins made in 1918 and several picnic area's. We have a great web site which we receive hits from all over the country, We hold special events that focus on the family and our biggest event is Pumpkins on Parade with over 2000 visitors in 4 hours and over a 1000 carved pumpkins. Our main mission is to have the greatest small park in the greater Kansas City area and educate our visitors on our history and nature.

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AUDITORS OFFICE KANSAS CITY. MISSOURI

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

| Service Delivery Area Identify your specific geographic service delivery area for each program. | |
|---|---------------------------------------|
| | |
| | · · · · · · · · · · · · · · · · · · · |
| | |
| | |
| | |
| | |
| | |
| | |
| We are located just off I435 one mile East of Swope Park on | |
| Gregory Blvd This makes us accessible to all of greater K.C | , |
| | |
| | |
| | |
| | |
| | |
| Fund Separation Indicate what measures your agency will take to ensure that funds received from Jackson C | County |
| will be utilized for the benefit of Jackson County residents. | |
| | |
| | |
| | |
| The County covers our insurance and salaries. | |
| | |
| | . |
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| JACKSON COUNTY AUDITORS OFFICE KANSAS CITY, MISSOU | |

Section D

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

| Agency Name: | CAUE SPRING ASSOCIATION | |
|---------------|-------------------------|--|
| Program Name: | | |

| Participants Identify the number of participants by County that each program serves. | | | | |
|--|------|--------------------|--|--|
| Jackson, MO 9,639 | | | | |
| Clay,Platte, Cass, MO | 360 | • | | |
| Wyandotte, Johnson, KS | 3975 | | | |
| Other Missouri | 512 | other states - 463 | | |

Target Population

Describe target population and demographics to be served by each program.

The have Spring web site (cave spring.org.) has changed our demographic targets. We now get inquires from all over the Country about our facility. Jackson County is still our biggest target area. We gear our programs to scouting, schools, day care centers, handicapped, home schoolers and church groups. Our biggest increase is from Johnson County and Eagle scout projects.

Would you provide these services to anyone at your door? Is anyone denied services?

What level of indigents (below poverty level) do you serve?

Please classify your program from the following types by percentage of your agency's overall service

Senior Program

5 %

Indigent Program (Below Poverty Level)

2%

Senior Indigent Program

0%

What criteria do you have for the clients you serve?

Provide good up to date programs and keep our fees reasonable, and this will help all groups.

AUG 2 3 2012

AUDITORS OFFIC KANSAS CITY, MISS

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

| Agency Name: | CAUE SPRING ASS | OC NECTORY |
|---|--|------------------------------|
| - | CAUE STICING THIS | oct At (OP |
| Program Name: _ | | |
| | Approach & Met | hod |
| | List the top three (3) objectives f | |
| 1. Give peo | ple a place to have recre | eation and see nature and |
| a place w | vith historical significand | e. |
| 5, p 53322 | | , |
| · | | |
| 2. | | |
| Develop an | d maintain this nature a | nd historical site and park. |
| | | |
| | | |
| 3. | | |
| Provide edu | ıcational opportunity fo | r nature and history. |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| | | |
| | The state of the s | shipus those shipstives |
| Detail | specific methods you will use to a | chieve these objectives. |
| Dunyida adı | ucational programs and | tours for a fee. These fees |
| | donations, membership | |
| | park. This year with hig | |
| | | it we have had to dig deep |
| · | ns to keep us going. Ou | |
| part of our | | AUG 2 3 2012 |
| | | JACKSON COUNTY |
| | | KANSAS CITY, MISSOURI |

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

| Agency Name: | CAUR SPRING ASSOCIATION | · | |
|---------------|-------------------------|---|-------------|
| Program Name: | | | |

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.

Visitor participation both new and repeat and participation in our new and regular programs. We now have national and state recognition as a historical site which will help visitation.

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)

We have developed our biggest asset our web site with face book and other nature and historical sites. We combine our story with other sites to tell our story. We have a new family campsite to go with our scout campsite giving people a choice of a place to go and camp close with the cost of gas is high.

Giving Scouts a place to do their Eagle Project and improve our park at the same time.

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JACKSON COUNTY AUDITORS OFFICE KANSAS CITY, MISSOU