

COOPERATIVE AGREEMENT

AN AGREEMENT by and between **JACKSON COUNTY, MISSOURI**, hereinafter called "the County", and the **SOUTHERN CHRISTIAN LEADERSHIP CONFERENCE**, 1216 Brooklyn Avenue, Kansas City, MO 64127, hereinafter called "SCLC."

WHEREAS, the County desires to join with other organizations and governmental entities in efforts to honor Dr. Martin Luther King for his contributions to the equality of all Americans; and

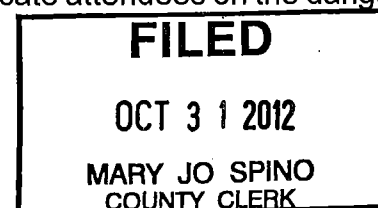
WHEREAS, the County deems it to be in the best interest of the citizenry to support such efforts; and

WHEREAS, SCLC has requested funding to support the 2012 Martin Luther King Birthday Celebration which promotes the recognition of Dr. King as a significant historical figure, and his philosophy and teachings as important in the development of the United States of America; and

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

1. **Services To Be Provided.** The SCLC shall use the County's funding to support the cost of activities in connection with the 2012 Martin Luther King Birthday Celebration.

2. **Terms of Payment.** The County agrees to pay SCLC in the amount of \$60,000.00 for its services to be performed under this Agreement. Upon execution of this Agreement, the County shall pay \$60,000.00 to SCLC. The County funds shall specifically be used to promote activities within the celebration that educate attendees on the dangers



of illegal drug use and promote public health.

3. **Reports.** SCLC shall submit a final report, including invoices and cancelled checks, and other documentation as requested by the Director of Finance and Purchasing to show that the initial funds paid by the County were used for the purpose set forth in this Agreement. Said report shall be submitted to the Director of Finance and Purchasing, 415 East 12th Street, Kansas City, Missouri 64106, no later than December 31, 2012.

4. **Audit.** The County further reserves the right to examine and audit, during reasonable office hours, the books and records of SCLC pertaining to its finances and operations, and particularly in regard to the terms of this Agreement.

5. **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 contract.

6. **Time of the Essence.** Timely performance of all duties provided herein is of the essence of this Agreement.

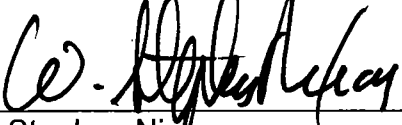
7. **Duration.** This Agreement shall begin upon its execution, and terminate on December 31, 2012, or upon the County's receipt of the final accounting report referred to in paragraph 3 above, whichever occurs first.

8. **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.

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

IN WITNESS WHEREOF, the parties have executed this Agreement this 31 day of October, 2012.

APPROVED AS TO FORM:


W. Stephen Nixon
County Counselor


JACKSON COUNTY, MISSOURI

By: 
Michael D. Sanders
County Executive

ATTEST:


Mary Jo Spino
Clerk of the Legislature

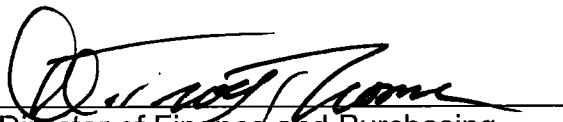
SOUTHERN CHRISTIAN
LEADERSHIP CONFERENCE

By: 
Executive Director
Federal Tax ID: 43-1389572

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 \$60,000.00 which is hereby authorized.

October 30, 2012
Date


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

5014 2012 001



OUTSIDE AGENCY FUNDING REQUEST FORM 2012 BUDGET

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

Email: auditor@jacksongov.org

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Section A: Organization or Agency Information

Name:	Southern Christian Leadership Conference of Greater Kansas City		
Address:	1216 Brooklyn Avenue - Kansas City, MO 64127		
Phone No:	816-241-8100	Fax:	816-241-1455
Website Address:	www.sclckc.org		
Federal Tax ID No:	43-1389572	Fiscal Year Cycle:	Jan. 1, 2012 - Dec. 31, 2012
Executive Director:	Rev. Nelson "Fuzzy" Thompson		
Name and Title of Principal Contact Person:	Mrs. Arlana Coleman, Program Coordinator		
Phone No:	913-522-7526	Email Address:	ajoy@kc.rr.com
Submittal of this request has been authorized by:	Rev. Nelson "Fuzzy" Thompson		
Date:	16-Sep-11		

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KANSAS CITY, MISSOURI
Section A

Section B: Agency's 2011 and 2012 Revenue Information

Agency's 2012 Projected Revenue Information

Funding Entity	Agency's 2012 Total Projected Revenue Source You Will Request 2012 Funding From	Projected Amount	% of Total Revenue
Federal		\$ -	0
State		\$ -	0
Jackson County		\$ 60,000	29
Other Counties		\$ -	0
City		\$ 20,000	10
Charity/Donations		\$ 75,000	36
Fundraisers		\$ 5,000	2
Other		\$ 50,000	24
2012 Total Projected Revenue		\$ 210,000	

Agency's 2011 Revenue Information

Funding Entity	Agency's 2011 Total Revenue Source You Received Funding From	Amount	% of Total Revenue
Federal		\$ -	0
State		\$ -	0
Jackson County		\$ 60,000	29
Other Counties		\$ -	0
City		\$ 20,000	10
Charity/Donations		\$ 75,000	36
Fundraisers		\$ 5,000	2
Other (please list)		\$ 50,000	24
2011 Total Revenue		\$ 210,000	

**If your agency received funding from Jackson County in 2011,
please identify the funding source, amount and program name below.**

Jackson County Funding Source	Yes	No	Amount	Program Name
COMBAT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$ 15,000	Artist Tribute
Mental Health Levy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$ 35,000	Community Luncheon
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 checked="" type="checkbox"/>	<input type="checkbox"/>	\$ 10,000	Interfaith Service
2011 Total Jackson County Funding			\$ 60,000	

Did your agency receive funding or resources in 2011 from either of the following?

Mid America Regional Council	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ -	
Harvesters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ -	

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KANSAS CITY, MISSOURI

Section C: 2012 Program Budget

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: Community Luncheon

Personal Services			
For each salary request below please attach a job description or duties.			
Position / Title	Total Salary	% of Salary to be funded by Jackson Co.	Amount of Salary to be funded by Jackson County
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
Total Salaries			\$ -
Total Benefits			\$ -
Total Personal Services			\$ -
Contractual Services			
Speakers			\$ 10,000
Entertainment			\$ 3,000
Media Promotion			\$ 2,000
			\$ -
			\$ -
			\$ -
Total Contractual Services			\$ 15,000
Supplies			
Food & Beverage			\$ 10,000
Program Book, Banner, Souvenirs			\$ 10,000
			\$ -
			\$ -
			\$ -
			\$ -
Total Supplies			\$ 20,000

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AUDITORS OFFICE
KANSAS CITY, MISSOURI

Total Program Request \$ 35,000

Section D: 2012 Program Information

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

Agency Name: Southern Christian Leadership Conference of KC

Program Name: Community Luncheon

Proposed Program

Detail functions to be performed by each program.

Event to promote unity in the community. Special emphasis on young people - college/youth organization - church groups and positive community organizations. Passing the torch, accepting the mantle, encouraging them to dream; "Creating A Beloved Community".

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SHERIFFS OFFICE
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Section D

Section D: 2012 Program Information

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

Agency Name: Southern Christian Leadership Conference of KC

Program Name: Community Luncheon

Participants	
Identify the number of participants by County that each program serves.	
Jackson, MO	400
Clay, Platte, Cass, MO	
Wyandotte, Johnson, KS	100
Other Missouri	

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

Youth / Young Adults / Adults - Metropolitan Kansas City and surrounding communities

Would you provide these services to anyone at your door?

Answer Yes or No

Is anyone denied services?

Answer Yes or No

What level of indigents 40%

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

Senior Program	% 20
Indigent Program (Below Poverty Level)	% 40
Senior Indigent Program	% 20

What criteria do you have for the clients you serve?

Registration and an expressed interest in the programs.

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CLERK OF COURSE
KANSAS CITY, MISSOURI

Section D: 2012 Program Information

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

Agency Name: Southern Christian Leadership Conference of KC

Program Name: Community Luncheon

Service Delivery Area

Identify your specific geographic service delivery area for each program.

Jackson County - Kansas City, MO Metropolitan area.

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.

Institutions to be invited.

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JACKSON COUNTY
MANAGER'S OFFICE
KANSAS CITY, MISSOURI

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Section D: 2012 Program Information

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

Agency Name: Southern Christian Leadership Conference of KC

Program Name: Community Luncheon

Approach & Method

List the top three (3) objectives for each program.

1. Youth / Young Adult Involvement

2. Community Involvement and education

3. Emphasis on Unity

Detail specific methods you will use to achieve these objectives.

Mailing to youth organizations - canvassing, contacting schools and organizations - newspapers - magazines and of course Television.

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CLERK'S OFFICE
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Section D: 2012 Program Information

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

Agency Name: Southern Christian Leadership Conference of KC

Program Name: Community Luncheon

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 number of youth / young adults / adults

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)

Display of county logo on all publications - Radio Ads - Newspaper Ads - Promotions on all materials

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Section C 2: 2012 Program Budget

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

Agency Name: SCLC of Greater Kansas City

Program Name: Artist Tribute

Personal Services			
For each salary request below please attach a job description or duties.			
Position / Title	Total Salary	% of Salary to be funded by Jackson Co.	Amount of Salary to be funded by Jackson County
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
Total Salaries			\$ -
Total Benefits			\$ -
Total Personal Services			\$ -
Contractual Services			
Speakers & Entertainment			\$ 6,000
Sound & Light Equipment			\$ 4,000
Media Promotion / Tickets			\$ 4,000
			\$ -
			\$ -
			\$ -
Total Contractual Services			\$ 14,000
Supplies			
Programs			\$ 1,000
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
Total Supplies			\$ 1,000

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JACKSON COUNTY
AUDITOR'S OFFICE
KANSAS CITY, MISSOURI

Total Program Request \$ 15,000

Section D 2: 2012 Program Information

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

Agency Name: SCLC of Greater KC

Program Name: Artist Tribute

Proposed Program

Detail functions to be performed by each program.

Event to focus on local and national talent involvement in the community and movement - their contribution to the community and struggle - positive exposure for youth and young adults

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JACKSON COUNTY
AUDITORS OFFICE
KANSAS CITY, MISSOURI

Section D 2: 2012 Program Information

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

Agency Name: SCLC of Greater KC

Program Name: Artist Tribute

Participants	
Identify the number of participants by County that each program serves.	
Jackson, MO	400
Clay, Platte, Cass, MO	150
Wyandotte, Johnson, KS	200
Other Missouri	

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

Would you provide these services to anyone at your door?

Answer Yes or No

Is anyone denied services?

Answer Yes or No

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

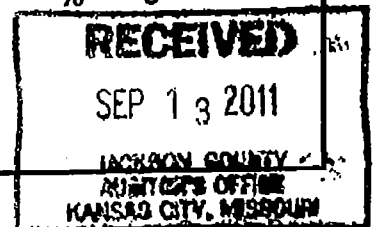
Senior Program % 10

Indigent Program (Below Poverty Level) % 30

Senior Indigent Program % 5

What criteria do you have for the clients you serve?

Registration and an interest in the program



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Section D 2: 2012 Program Information

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

Agency Name: SCLC of Greater KC

Program Name: Artist Tribute

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.

Artist to be invited to participate with and for county residents

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AUDITOR'S OFFICE
KANSAS CITY, MISSOURI

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Section D 2: 2012 Program Information

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

Agency Name: SCLC of Greater KC

Program Name: Artist Tribute

Approach & Method

List the top three (3) objectives for each program.

1. Inspire Youth / Young Adults to involvement in community through positive acts

2. Inspire to action for self awareness and positive avenues for community improvement

3. Opportunity to display talent.

Detail specific methods you will use to achieve these objectives.

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AUDITORS OFFICE
KANSAS CITY, MISSOURI

Section D 2: 2012 Program Information

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

Agency Name: SCLC of Greater KC

Program Name: Artist Tribute

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 600 number of youth / young adult participants. Quality of program. Involvement of community organizations.

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)

Promotion on all materials; display of county logo on all publications - Newspaper Ads - Radio Ads

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CLERK'S OFFICE
KANSAS CITY, MISSOURI

Section C 3: 2012 Program Budget

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

Agency Name: SCLC of Greater Kansas City

Program Name: Interfaith Service

Personal Services			
For each salary request below please attach a job description or duties.			
Position / Title	Total Salary	% of Salary to be funded by Jackson Co.	Amount of Salary to be funded by Jackson County
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
Total Salaries			\$ -
Total Benefits			\$ -
Total Personal Services			\$ -
Contractual Services			
Speakers & Program Participants			\$ 7,000
			\$ -
			\$ -
			\$ -
Total Contractual Services			\$ 7,000
Supplies			
Program / Awards / Invitations			\$ 2,000
Media Promotion			\$ 1,000
			\$ -
			\$ -
			\$ -
			\$ -
Total Supplies			\$ 3,000
Total Program Request			\$ 10,000

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AUDITOR'S OFFICE
KANSAS CITY, MISSOURI

Section D 3: 2012 Program Information

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

Agency Name:

SCLC of Greater KC

Program Name:

Interfaith Service

Proposed Program

Detail functions to be performed by each program.

Event to bring all faiths together for the purpose of focusing on the "King Dream" now. How can we work together to prosper. Set an agenda for development and share resources for the next generation. "Creating The Beloved Community"

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Section D 3: 2012 Program Information

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

Agency Name: SCLC of Greater KC

Program Name: Interfaith Service

Participants	
Identify the number of participants by County that each program serves.	
Jackson, MO	600
Clay, Platte, Cass, MO	150
Wyandotte, Johnson, KS	200
Other Missouri	

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

Kansas City Metropolitan Area - Jackson County

Would you provide these services to anyone at your door?

Answer Yes or No

Is anyone denied services?

Answer Yes or No

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

% 10

Indigent Program (Below Poverty Level)

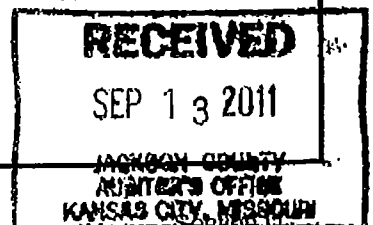
% 30

Senior Indigent Program

% 5

What criteria do you have for the clients you serve?

Registration and an interest in the program



Section D 3: 2012 Program Information

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

Agency Name:

SCLC of Greater KC

Program Name:

Interfaith Service

Service Delivery Area

Identify your specific geographic service delivery area for each program.

Kansas City Metropolitan Area and surrounding MO & KS counties

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.

Open invitation to all wanting to participate

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MANAGER'S OFFICE
KANSAS CITY, MISSOURI

Section D 3: 2012 Program Information

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

Agency Name:

SCLC of Greater KC

Program Name:

Interfaith Service

Approach & Method

List the top three (3) objectives for each program.

1. Various Faith Groups coming together

2. Focus on allowing development of ideas for community building

3. Future Agenda & Relationships

Detail specific methods you will use to achieve these objectives.

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KANSAS CITY, MISSOURI

Section D

Section D 3: 2012 Program Information

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

Agency Name:

SCLC of Greater KC

Program Name:

Interfaith Service

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 1,000 participants - with follow-up from multiple faiths

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)

Promotion on all materials; display of county logo on all publications - Newspaper Ads - Radio Ads

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KANSAS CITY, MISSOURI

Section D