#### **COOPERATIVE AGREEMENT**

AN AGREEMENT by and between Jackson County, Missouri, a Constitutional Charter County, hereinafter referred to as "the County" and the MID-AMERICA REGIONAL COUNCIL, 600 Broadway, Suite 200, Kansas City, MO 64105, a regional planning commission operating pursuant to Section 251.150 et seq., RSMo, hereinafter referred to as "MARC."

WHEREAS, the County deems it to be in the best interest of its citizenry to support services to low-income families as provided by MARC and other agencies, under subcontracts with MARC; and,

WHEREAS, this Agreement is entered into pursuant to the provisions of Chapter 70, RSMo, dealing with cooperative agreements; therefore,

The County and MARC agree, in consideration of the following mutual promises and valuable consideration, as follows:

- 1. <u>Services</u>. MARC shall provide emergency assistance to low-income families of Jackson County, and is expressly authorized to enter into a subcontract with the Bishop Sullivan Center to provide these services, as are more fully set out in the document attached hereto, as Exhibit A, upon such terms and conditions as MARC shall deem appropriate, provided that said subcontractor shall provide that the County's funds shall be used by the Bishop Sullivan Center solely to provide services to low-income families of Jackson County.
- 2. <u>Terms of Payment</u>. Upon the execution of this Agreement, the County shall pay to MARC the lump sum of \$27,150.00 for low-income families.

- 3. Annual Report. MARC shall submit an annual report, including a statement of budgeted and actual expenditures and other documentation as requested by the Director of Finance and Purchasing to show that the funds paid to MARC by the County were used for the purpose set forth in this Agreement. Said annual report shall be submitted no later than December 31, 2011. Failure to submit said annual report shall disqualify MARC from future funding by the County.
- Submission of Documents. No payment shall be made under this contract 4. unless the Bishop Sullivan Center shall have provided to MARC and MARC shall have confirmed to Director of Finance and Purchasing its receipt of: (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 vear: 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. <u>Audit</u>. The County further reserves the right to examine and audit, during reasonable office hours, the books and records of MARC pertaining to the finances and operations of MARC.
- 6. **Default**. If MARC shall default in the performance or observation of any term or condition of this Agreement, the County shall give MARC written notice setting forth the default and the correction required. If said default shall continue and not be corrected within 10 days of the notice of default by MARC, the County may at its election terminate the contract and take such action in law or equity to recover all funds given to MARC under this contract but not used for the purposes set forth in the contract.
- 7. <u>Conflict of Interest</u>. MARC 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. MARC shall insure that its subcontractor has made this same warranty.
- 8. <u>Term</u>. This Agreement shall commence January 1, 2011, and terminate on December 31, 2011. This Agreement may be terminated prior to that date by either party upon written notice delivered thirty 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 as verified by the County's audit as provided in paragraph 5.
- 9. <u>Equal Opportunity</u>. In carrying out this Agreement, MARC shall insure that none of the benefits or services of the program are denied to any eligible recipient on

the basis of race, color, religion, sex, age, handicap or national origin. MARC shall take affirmative action to insure that applicants are employed, and that employees are treated during employment without regard to their race, color, religion, sex, age, handicap or national origin in terms and conditions of employment or termination, rates of pay or other forms of compensation and selection for training including apprenticeship. MARC shall in all solicitations or advertisements for employees placed by or on behalf of MARC state that all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, age, handicap or national origin.

- 10. <u>Liability and Indemnification</u>. 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 MARC 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 MARC during the performance of this Agreement.
- 11. <u>Incorporation</u>. This Agreement incorporates the entire understanding and agreement of the parties.

IN WITNESS WHEREOF, the County and MARC have executed this Agreement this  $\frac{14}{100}$  day of  $\frac{1}{100}$  day of  $\frac{1}{100}$ , 2011.

APPROVED AS TO FORM:

W. Stephén Nikon County Counselor JACKSON COUNTY, MISSOURI

By Michael D. Sanders

**County Executive** 

ATTEST:

Clerk of the Legislature

MID-AMERICA REGIONAL COUNCIL

43-0976432 Federal I.D. or S.S. #

#### 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 to the credit of the fund from which payment is to be made, each sufficient to meet the obligation of \$27,150.00 which is hereby authorized.

March 92011

Director of Finance and Purchasing

Account No. 002-7902.56789

79022011005





# OUTSIDE AGENCY FUNDING REQUEST FORM 2011 BUDGET

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

Email: auditor@jacksongov.org SEP 1 7 2010

### Section A: Organization or Agency Information

Name: Bishoo Sullivan Center

Address: 6435 Truman Road, Kansas City, MO 64126

Phone No: 816-231-0984 Fax: 816-231-3096

Website Address: www.bishonsullivan.org

Federal Tax ID No: 43-1750848 Fiscal Year Cycle: July-June

Executive Director: Thomas Turner

Name and Title of Principal Contact Person: Thomas Turner Executive Director

Phone No: 816-231-0984 Email Address: tom\_turner@hishonsullivan\_org

Submittal of this request has been authorized by:

Thomas Turner

Date: September 15, 2010

	Agency's 2011 Projected Revenue	Information	
Funding Entity	Agency's 2011 Total Projected Revenue Source You Will Request 2011 Funding From	Projected Amount	% of Total Revenue
Federal	Emergency Food and Shelter Program	\$ 24,000	1
State Jackson County Other Counties	Missouri Housing Develonment Outside Agency	\$ 50,000 \$ 30,000 \$	3 2
City		\$	
Charity/Donations		\$ 1,472,000	85
Fundraisers		\$ 125,000	7
Other	MAAE Managed	\$ 30,000	

	Agency's 201	0 Revenu	e Infor	ma	tion			
Funding Entity	Agency's 2010 To Source You Received		<u>n</u>		Amour	nt	_	% of Revenue
Federal	Emergency Food and Shelter Program		\$	. 25,	973		2	
State	Missouri Housing Development		\$	45,	,500		3	
Jackson County	Outside Agency	Outside Agency		\$	27,	,150		2
Other Counties				\$		ļ		
City				\$				
Charity/Donations				\$	1,406,	377	8	6
Fundraisers				\$	100,	,000		6
Other (please list)	MAAC Managed			\$		لــــمممــــا		2
	If your agency received f	2010 Total F						
Jackson County Fu	please identify the funding s	ource, amou	nt and p		am name		gram N	ame
COMBAT				\$				
Mental Health Levy				\$				Į
Board of Services for Developmentally Disabled				\$	•			
Domestic Violence Board				\$				
Housing Resources Commission				\$				
Outside Agency Program		₽		\$	27,150	Emerge	ncy A	ssistanc
SEP 1-7-2010	,				41	f-llavd-a		
	your agency receive funding o				tner of the	ionowing	r	
Mid America, Regional Counțil				\$				j
Harvesters		<u> </u>	\$		<del></del>			

# Section C: 2011 REVISED Program Budget

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

**Agency Name:** 

**Bishop Sullivan Center** 

**Program Name:** 

**Emergency Assistance** 

Position / Title	uest below please atta Total Salary	% of Salary to be funded by Jackson Co.	Amo to b	ount of Salary e funded by kson County
Pantry Manager	\$36,167	38%	\$	13,575
Receptionist	\$27,934	49%	\$	13,575
			\$	
			\$	
January Community			\$	
			\$	
otal Salarles			\$	27,150
otal Benefits			\$	
ACI DONONIO	Total Per	sonal Services	\$	27,150
	Contractual Serv	rices		•
			\$	-
			\$	-
			\$	-
			\$	-
,			\$	_
			\$	-
	Total Contra	ctual Services	\$	pt
	Supplies			
			\$	
			\$	<b>-</b>
	•		\$	_
			\$	_
			Ψ \$	_
ECEIVED		ļ	Ψ \$	_
		Total Supplies	\$	=
JAN 25 2011		, otal Cappiloo	<u> </u>	
Ackson Colaty Auditers Office	Total Proc	ıram Request	\$	27,150

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

Agency Name:	<u> Bishop Sullivan Center</u>
Program Name:	Emergency Assistance

#### **Proposed Program**

Detail functions to be performed by each program.

Our program is to provide emergency assistance to as many as 15,000 Jackson County residents over the next year. Emergency Assistance is defined as support for life's basic necessities, such as food, rent and utilities (water, heat and lights). This kind of assistance often keeps families in their homes and thus reduce incidences of homelessness in our county.

SEP 17 7UIL

# Pantry Manager Job Description

#### Pantry:

- 1. Prepare food orders
- 2. Restock pantry daily
- 3. Unload, sort and make commodities daily
- 4. Shop at Harvester's, Price Chopper and Aldi's as needed to provide food for 30+ families daily.
- 5. Accept and unload donations at dock door
- 6. Attend Harvester's agency relation meetins
- 7. Give out items in pantry as needed (fans)
- 8. Prepare food orders for senior deliveries

#### **Building Maintenance:**

- 1. Stock toilet paper and paper towels in bathrooms
- 2. Take trash from building and deposit in dumpster
- 3. Keep trash picked up from parking lot
- 4. Keep grass and weeds trimmed

#### Coordinate Volunteers: ·

- 1. Pantry Distribution
- 2. Sorting & Stocking
- 3. Separating commodities
- 4. Daily pick-up of bread donation from Price Chopper
- 5. Monthly pick-up of food from Our Lady of Peace

#### Job Description

Job Title: Front Desk Receptionist

**Employment Status: Full Time** 

Supervisor's Name: Jane McQueen

The overall purpose of this position: To greet people who come to Bishop Sullivan Center in person or on the phone. Briefly screen people who need assistance. Carry out administrative duties for the food pantry. Overall management of the lobby.

#### Major responsibilities

Answer phones in a polite and professional manor.

Screen callers and walk-ins for needed services.

Refer people whom we cannot help.

Place food orders from Harversters.

Record information in MAAC on food applicants.

Keep bookshelves neat.

Keep lobby in general order (pick up noticeable trash, keep chairs straight).

Able to react to change productively and handle other essential tasks as assigned.

Skills needed for Job
Organizational skills.
People skills.
Bi-lingual.
Computer skills.
Knowledge of services provided by other agencies.

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

**Agency Name:** 

Bishop Sullivan Center

**Program Name:** 

Emergency Assistance

Identify	Participants the number of participants by County that each program serves.
Jackson, MO Clay,Platte,	15,000
Cass, MO	
Wyandotte,	
Johnson, KS	
Other Missouri	

#### **Target Population**

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

We serve people living in some of the poorest neighborhoods in Jackson County. We serve families living in zip codes 64120 through 64129. Their income must be within 150% of the poverty guidelines. We report all our assistance to the Mid-America Assistance Coalition (MAAC) and use their database to qualify applicants.

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

ИО

Answer Yes or No Answer Yes or No

What level of indigents (below poverty level) do you serve? Within 150% of noverty guidelines. Please classify your program from the following types by percentage of your agency's overall service

Senior Program

%

Indigent Program (Below Poverty Level)

79**%** 

Senior Indigent Program

21%

What criteria do you have for the clients you serve?

They must live in zip codes we service and their income must be within 150% of poverty guidelines.

SEP 1 7 2010

Section D

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

**Agency Name:** 

Bishop Sullivan Center

**Program Name:** 

Emergency Assistance

#### Service Delivery Area

Identify your specific geographic service delivery area for each program.

We serve people who live in zip codes 64120 through 64129.

#### **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.

Our agency requires families requesting assistance to provide a current bill or piece of mail that shows their address. We also require proof of income, a photo ID and social security cards for all persons in the household. Our service area encompasses zip codes that are all located in Jackson County.

SFP 1.7.2010

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

Agency Name:	Bishop Sullivan Center
Program Name:	Emergency Assistance
	American O. M. a.
1	Approach & Method  List the top three (3) objectives for each program.
1. To assist low-in food, rent and u	COME people of Independent Come
2	·
To provide employ them become self-	yment assistance to those who are able to work to help sufficient.
To refer clients we cannot provid	to other agencies in the county to obtain help that
Detail	specific methods you will use to achieve these objectives.
assistance, separat	ave years of experience working with low-income people. have become adept at screening people asking for ing out those who really need help from those who mayonot. base is a great tool for evaluating the legitimacy of

SEP 17 2010

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

Agency Name:

Bishop Sullivan Center

**Program Name:** 

Emergency Assistance

#### **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.

We keep records of everyone who come to us for help. That information is recorded on MAAC. It helps us to sort out those who truly have an emergency need from those who are in chronic need. Success in emergency assistance is when you help a client who then doesn't return for help for at least a year. This can easily be tracked on MAAC.

#### **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)

Since most of our donors ask that their donations remain anonymous, we don't normally print out an entire list of contributors for publication. However, we do let people know of the county's generous funding on our website.

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