### COOPERATIVE AGREEMENT

(A) (A) (1

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, PALESTINE SENIOR CITIZEN ACTIVITY CENTER, 3325 PROSPECT, KANSAS CITY, MO 64128, hereinafter referred to as "Organization".

WHEREAS, the County and Palestine desire to enter into an Agreement to provide funding to be used for its Life Enrichment Forever Fit and Healthy Program for senior citizens; 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 Palestine respectively promise, covenant, and agree with each other as follows:

1. Services. Palestine shall provide services through its Life Enrichment Forever Fit and Healthy Program for senior citizens as is more fully set out in the proposal attached hereto as Exhibit A and incorporated herein by reference. The budget Organization submitted as part of Exhibit A is considered final and non-changeable. If Organization encounters unforeseen circumstances that require a change to Organization's budget, Organization shall submit a written request to the Jackson County Legislative Auditor's no later than October 30, 2015. Any changes to the budget must be approved by the Jackson County Legislature.

FILED

MAR 2 G 2015

MARY JO SPINO
COUNTY CLERK

- d. Management or staff responsible for providing services pursuant to this contract
- e. Any proposed or actual merger or acquisition either taken by the Organization or toward the Organization
- Submission Of Documents. No payment shall be made under this 4. Agreement unless Organization 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) Organization's IRS Form 990 from the previous fiscal or calendar year; (3) a statement of Organization'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 Organization has previously received funding from the County, to be eligible for future payments, Organization must submit either an audited financial statement for Organization'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 Organization is out of compliance on any other County contract, or has not paid county taxes on all properties owned by Organization and assessed by the County.
- 5. **Equal Opportunity**. Organization shall maintain policies of employment as follows:
  - A. Organization and Organization's subcontractor(s) shall not discriminate against any employee or applicant for employment because of race, religion,

color, sex, age, disability, or national origin. Organization 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. Organization agrees to post in conspicuous places, available to employees and applicants for employment, notices setting forth the policies of non-discrimination.

- B. Organization and Organization'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, Organization 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, Organization 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. <u>Audit</u>. The parties agree that the County may, for any reason and at any given time, examine and audit the books and records of Organization pertaining to its

finances and operations. Further, Organization 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. <u>Default</u>. If Organization shall default in the performance or observation of any covenant, term or condition herein contained to be performed by Organization, the County shall give Organization ten days written notice, setting forth the default. If said default shall continue and not be corrected by Organization 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 Organization. Said election shall not, in any way, limit the County's rights to sue for breach of this Agreement.
- 9. Appropriation Of Funds. Organization and the County recognize that the County intends to satisfy its financial obligation to Organization 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 Organization 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. <u>Conflict Of Interest</u>. Organization 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. <u>Indemnification</u>. Organization 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 Organization during the performance of this Agreement.

- 13. <u>Insurance</u>. Organization shall maintain the following insurance coverage during the term of this Agreement.
- A. Organization 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. Organization 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. Organization 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 Organization as verified

by the County's audit.

- 15. <u>Termination</u>. 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 Organization 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 Organization to the County within ten (10) days of the termination of this Agreement.
- 16. <u>Standard Of Care</u>. Organization 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.** Organization 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. 12<sup>th</sup> Street, Suite 100 Kansas City, MO 64106 Palestine Senior Citizen Activity Center Lori Smith, Executive Director 3325 Prospect Kansas City, MO 64128 (816) 921-1963

18. <u>Compliance</u>. 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.

Organization 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. Organization agrees to faithfully observe and perform all of the terms, provisions, and requirements of this Agreement, and Organization's failure to do so constitutes a breach of this Agreement. In such event, Organization consents and agrees as follows:
- A. The County may, without prior notice to Organization, immediately terminate this Agreement; and
- B. The County shall be entitled to collect from Organization all payments made by the County to Organization for which Organization 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. <u>Transfer And Assignment</u>. Organization shall not assign or transfer any portion or the whole of this Agreement without the prior written consent of the County.
- 21. <u>Organization Identity</u>. If Organization is merged or purchased by another entity, the County reserves the right to terminate this Agreement. Organization shall immediately notify the county in the event it is merged or purchases by any other entity.
- 22. <u>Confidentiality</u>. Organization'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. <u>Incorporation</u>. This Agreement incorporates the entire understanding and agreement of the parties.

IN WITNESS WHEREOF, the County and Organization have executed this Agreement this <u>26 th</u> day of <u>March</u>, 2015.

APPROVED AS TO FORM:

W. Stephen Nikon County Counselor

ATTEST:

Mary Jo Spino V
Clerk of the Leoslature

JACKSON COUNTY, MISSOURI

Michael D. Sanders County Executive

PALESTINE SENIOR CITIZEN ACTIVITY CENTER

Title

Federal Tax I.D. 43-1531200

#### **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 \$85,000.00, which is hereby authorized.

3/19/15 Date

Director of Finance and Purchasing Account No. 002-7731-56789

PC 77312015001



# OUTSIDE AGENCY FUNDING REQUEST FORM 2015 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 2014 and 2015 Revenue Information | page  | 2     |   |
| Section C: | Jackson County Program Budget Request      | page  | 3     |   |
| Section D: | Program Information                        | pages | 4 - 8 | 3 |

#### **Section A: Organization or Agency Information** Palestine Senior Citizen Activity Center (PSCAC) Name: Address: 3325 Prospect Ave Kansas City, Mo Zip Code: 64128 Phone No: 816-921-1963 Fax: 816-9247586 Website Address: www.palestineactivitycenter.org Federal Tax ID No: 43-1531200 Fiscal Year Cycle: January 2015-December 2015 Executive Director/President: Lori Smith, Executive Director Phone No: 816-921-1963 Email: palestinedir2@sbcglobal.net Name/Title of Principal Contact Person Phone No: 816-921-1963 Email: palestinedir2@sbcglobal.net



| Section B Agency's 2014 and 2015 Revenue Information |  |    |         |    |  |  |
|--|--|----|---------|----|--|--|
|  | Agency's 2015 Projected Revenue Information  |    |         |    |  |  |
| Funding Entity                                       | Projected % of Funding Entity Source You Will Request 2015 Funding From Amount Total Revenue |    |         |    |  |  |
| Federal  |  |    |         | 0  |  |  |
| State  | NORC   | \$ | 97,000  | 19 |  |  |
| Jackson County                                       | Outside Fundiung   | \$ | 200,000 | 40 |  |  |
| Other Counties                                       |  | \$ |         | 0  |  |  |
| City   | CDBG   | \$ | 100,000 | 20 |  |  |
| Charity/Donations                                    | Members & Church Donations   | \$ | 23,000  | 5  |  |  |
| Fundraisers  | Center Fundraising Events  | \$ | 20,000  | 4  |  |  |
| Other  | Lease, Membership, and Meals   | \$ | 60,000  | 12 |  |  |
|  | 2015 Total Projected Revenue   | \$ | 500,000 |    |  |  |

|   | Agency's 20                 | 14 R    | evenu     | e Info  | rma         | tion    |            |                 |
|---|-----------------------------|---------|-----------|---------|-------------|---------|------------|-----------------|
|   |                             |         |           | _       |             |         | 4          | % of            |
| Funding Entity  | Source You Received 2       | 2014 F  | unding    | From    | -           | Amo     | unt        | Total Revenue   |
| Federal   |                             |         |           |         | \$          |         | -          | 0               |
| State   | NORC                        |         |           |         | \$          |         | 97,000     | 19              |
| Jackson County  | Outside Agency Funding      |         |           |         | \$          |         | 75,000     | 14              |
| Other Counties  |                             |         |           |         | \$          |         | 1.00       | 0               |
| City  | CDBG                        |         |           |         | \$          |         | 101,000    | 20              |
| Charity/Donations   | Members & Church Donation   | ons     |           |         | \$          |         | 200,000    | 39              |
| Fundraisers   | Center Fundraising Events   |         |           |         | \$          |         | 2,500      | 0               |
| Other (please list)   | Lease, Membership, and Me   | eals    |           |         | \$          |         | 42,000     | 8               |
|   |                             | 201     | 4 Total I | Revenue | \$          |         | 517,500    |                 |
| Please ide  | entify the Jackson County s | ource   | e(s) your | agency  | recei       | ved fur | nding from | n in 2014       |
| Jackson County F  | unding Source               |         | Yes       | No      | Ar          | nount   | Pro        | gram Name       |
| COMBAT  |                             |         | <b>7</b>  |         | \$          | -       |            |                 |
| Mental Health Levy  |                             |         | 7         |         | \$          | -       |            |                 |
| Board of Services for   | or Developmentally Disabled |         | <b>V</b>  |         | \$          | -       |            |                 |
| Domestic Violence   | Board                       |         | _         |         | \$          | 175     |            |                 |
| Housing Resources   | Commission                  |         | <b>▽</b>  |         | \$          | -       | R          | ECEIVED         |
| Outside Agency Pro  | ogram                       | _<br>[] |           |         | \$          | -       | 75,000     | AUG 2 0 2014    |
|   | 2014 Total Jac              | keon    | County    | Funding | <b>i</b> \$ | 2       |            | AUG 2 V 2014    |
| Did your agency receive funding or resources in 2014 from either of the following items of fice |                             |         |           |         |             |         |            |                 |
|   | If so, in what way          | did yo  | ou partic | _       |             | vny?    |            | AS CITY MISSOL  |
| Mid America Region  | nal Council                 |         |           |         | \$          | -       | •          | anning to apply |
| MAAC Link   |                             |         |           |         | \$          | -       | •          | anning to apply |
| Harvesters  |                             |         | <b>✓</b>  |         | \$          | 16      | Free Food  | Items           |

### Section C 2015 Jackson County Program Budget

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

| Agency Name:     | Palestine Senior Citizen Activity Center - Revised |    |   |  |  |  |
|------------------|--|----|---|--|--|--|
| Program Name:    | Life Enrichment Forever Fit and Health Program     |    |   |  |  |  |
| Program Request# | 1  | of | 1 |  |  |  |

| attach ich desari                       | Personal Service<br>otion or duties for NEW  | _   | de |  |
|---|--|---|----|--|
| Position / Title                        | Annual Salary  | % of Salary<br>to be funded by<br>Jackson Co. | A  | mount of Salary<br>o be funded by<br>Jackson Co.   |
| Executive Director                      | 45000  | 50%   | \$ | 22,500   |
| Office Assistant                        | 22880  | 50%   | \$ | 11,440   |
| Program Director                        | 22880  | 50%   | \$ | 11,440   |
| Receptionist                            | 14544  | 50%   | \$ | 7,272  |
| Janitor                                 | 14847  | 50%   | \$ | 7,424  |
|   |  |   | \$ |  |
|   | <del></del>  | Total Salaries                                | \$ | 60,076   |
|   |  | Fringe Benefits                               | \$ | 4,924  |
| 11/2                                    | Total Pers   | onal Services                                 | \$ | 65,000   |
| C                                       | Contractual Service  | es  |    |  |
| *************************************** |  |   | \$ | -  |
|   |  |   | \$ |  |
|   |  |   | \$ | -  |
|   |  |   | \$ |  |
|   |  |   | \$ | 14   |
|   |  |   | \$ | -  |
|   | Total Contrac  | tual Services                                 | \$ | -  |
|   | Supplies   | - minero                                      |    | 110-110-110-110-110-110-110-110-110-110  |
| ood Reimbursement                       | THE STATE OF THE S |   | \$ | 20,000   |
|   |  |   | \$ | W.   |
|   |  |   | \$ |  |
|   |  |   | \$ |  |
|   |  |   | \$ | Select Control of the |
|   |  |   | \$ | 1000<br>1201   |
|   |  | otal Supplies                                 | \$ | 20,000   |
| Total Jackson Cou                       |  |   | *  | 85 000   |

Total Jackson County Program Budget Request \$ 85,000

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

| Agency Name:     | Palestine Senior Citizen Activity Center        |  |  |  |  |
|------------------|---|--|--|--|--|
| Program Name:    | Life Enrichment Forever Fit and Healthy Program |  |  |  |  |
| Program Request# | 1 of1   |  |  |  |  |

#### **Proposed Program Cost**

What is the total cost to run your program regardless of the Jackson County funding you are requesting?

Total Program Cost

\$

500,000

#### **Proposed Program**

#### Detail functions to be performed - limit your response to the space provided

Assistance with salary costs for program delivery, postage, advertisement, office and cleaning supplies. The Life Enrichment Program offers an array of services and programs for senior citizens, 55 years of age and older in the 3rd district of Jackson County, Missour and surrounding areas including hot meals daily, exercise classes, line dancing, monthly health assessments and vision screening. The Healthy Choice Meal Program provides a hot lunch, Monday through Friday for our members and anyone who needs a hot meal. We never turn anyone away. The Meals Program also provides a Free lunch Program to assist seniors that cannot afford to purchase the meals. We serve an average of 100-150 meals every day of operation with our recent increase of memberships and participants. The main reason that the Healthy Choice Meal Program exists is to make sure seniors can receive a hot, affordable, nutritious, and healthy meal with a variety of choices on a daily basis. Our kitchen staff prepares fresh, hot main dish, side dishes and desserts from scratch at a reduced cost and county funds go to help purchase the food. The Life Enrichment Program aids in the prevention isolation and loneliness while providing a support system and community involvement. The Life Enrichment Program-Forever Fit offers an array of fitness programs, health assessments and nutritional classes for our members to enhance their minds, souls and bodies. Forever Fit services and programs including strength and conditioning classes, yoga, zumba, Thai Chi, line dancing, monthly health assessments and vision screening, mediation classes. he NORC Program is assist seniors with a referral system to get specialized services and repair to allow seniors to live independently and remain in their homes. By seniors staying in their homes versus going to a nursing home, it saves the state more than \$7,000 a month per senior who lives in a nursing home. A coordinator meets with seniors to conduct an inhome assessment of their need for assistance to remain in their home and other basic needs. Throughout the year, the Coordinator helps them resolve any issues and crises that arise via home visits or phone communication. The services and programs offered by the NORC Program include Estate and Will preparation, financial consultation, educational courses and a referral program for outside assistance. The programs and services provided through the Life Enrichment Programs aids in preventing isolation and loneliness while providing a support system, various programs and services and community involvement. In addition to programs and services offered through the Life Enrichment Program, the members expericence various outside volunteering, educational, cultural and social programs and events.

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JACKSON COUNTY

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

| Agency Name:   | Palestine Senior Citizen Activity Center                               |  |  |  |
|--|--|--|--|--|
| Program Name:  | Life Enrichment Forever Fit and Healthy Program                        |  |  |  |
| Program Request #  | 1 of1  |  |  |  |
| lde  | Participants ntify the number of participants that each program serves |  |  |  |
|  | 48,000   |  |  |  |
| Of the # served with this  | s program, how many are from:  |  |  |  |
| Jackson County   | 47,950   |  |  |  |
| Other Counties   | 50   |  |  |  |
|  | Target Population  |  |  |  |
| Describe target population and demographics to be served by each program  The need for the Palestine Senior Citizen Activity Center (PSCAC) is great. The PSCAC estimates that 48,000 senior citizens, 55 and older attend the center and participate in various programs and services within a year. Of that number, 47,950 live in the 3rd District of Jackson County and surrounding districts. In comparison, of each county, the 3rd District has one of the highest poverty rates in Jackson County. The program's targeted population is senior citizens who are 55 years of age are older, who are low income members of the center, In-House Adult Daycare, their guests, residence for the three (3) surrounding senior housing units and the urban core of Kansas City, MO. More than half of our members reside in the 3rd district of Jackson County, MO. The geographic area is from Independence Avenue to 47th Street and Van Brunt to Troost Avenue within the 3rd District of Jackson County, MO. Many seniors have limited resources for basic life necessities such as healthy nutritional meals, health assessments and screenings, fitness and exercise programs, financial, estate and will preparation due to lack of resources. Many of our senior citizens have aken on the responsibility of raising their grandchildren and in some cases, their great-grandchildren, which is an additional burden on their finances. The limited resources and additional financial burdens leads to fatigue, depression and in most cases, malnourishment. The need for outreach programs and preventive services is clearly great in the 3rd District and surrounding districts. |  |  |  |  |
| Estimate of your cost per participant: \$ 25  What criteria do you have for the participants you serve? 55 years and older  Do you keep a list of participants for each program? Yes   |  |  |  |  |
| Would you provide these services to anyone at your door? Yes   |  |  |  |  |
| s anyone denied services? <b>No</b>  |  |  |  |  |
| Please classify your pro   | egram from the following types by % of your agency's overall services: |  |  |  |

Indigent Program (Below Poverty Level): 95%

Indigent Senior Program: 95%

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

| Complete a separate program information sheet for each program your agency is applying for turioning  |
|---|
| Agency Name: Palestine Senior Citizen Activity Center   |
| Program Name: Life Enrichment Forever Fit and Healthy Program   |
| Program Request #1 of1  |
| Service Delivery Area   |
| Identify your specific geographic service delivery area for each program  |
| Approximately 95% of the senior program participants live within the 3rd District of Jackson County, MO in the city of Kansas City. The 3rd district of Kansas City encompasses zip codes 64106, 64108, 64109, 64110, 64120, 64123, 64124, 64125, 64126, 64127, 64128, 64129, and 64130; which is from Independence Avenue to 47th Street and Van Brunt to Troost. The unemployment rate according to data.kcmo.org, in the 3rd District is 18.8% with a senior population of 22%. The overall poverty rate within the 3rd District is 36% while 19.4% are seniors who are 65 years old or older live in poverty. |
|   |
|   |
| 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   |
| PSCAC has the following internal controls in place to ensure that the funding is used for the residents of Jackson County:  • Each member provides a valid ID and a copy of a utility bill addressed to the member for proof of residency  • Membership cards issued to each member  • Completed applications are on file with the copies of residency proof attached  • Use an electronic system to track all members and visitor information including name, address, phone   |
| number and other pertinent personal information   |

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JACKSON COUNTY AUDITORS OFFICE KANSAS CITS edites DURI

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

| Agency Name: Palestine Senior Citizen Activity Center   |  |  |   |   |  |  |
|---|--|--|---|---|--|--|
| Program Name:   | Program Name: Life Enrichment Forever Fit and Healthy Program  |  |   |   |  |  |
| Program Request #   | _1   | of   | 1   | ш   |  |  |
|   |  |  | & Method  |   |  |  |
|   |  |  | ctives for each   |   |  |  |
|   |  |  |   | % within the next 12 months to aid  |  |  |
| seniors in maintaining inc  | lendependent livi  | ıng, socia skill   | ls, and commun  | nity involvement.   |  |  |
|   |  |  |   |   |  |  |
| 2.Decrease the number of months by emphasizing the  |  |  |   | education by 10% within the next 12 food choices.   |  |  |
| 3.Increase the number of months to aid in decreasi  |  |  |   | meals daily by 10% within the 12  |  |  |
| Deta  | il specific meth-  | ods you will   | use to achieve  | these objectives  |  |  |
| three, (6) six, (9) nine, an invitations for a free lunch and visitors who eat in ou and flyers to promote the sessions for members on programs such as healthy in your home sessions wiformer KC Chiefs Will Sh Guest speakers to discus and soul. Conduct survey Continue contact to ensur staying in your own home | d (12) twelve into<br>n on PSCAC to so<br>ir cafeteria or pur<br>upcoming classe<br>a weekly basis.<br>y food choices su<br>th open discussion<br>ields, former LA<br>is the importance<br>is to find the need<br>re seniors have es<br>from the Aging i | ervals to provi<br>eniors to have<br>rchase a to-go<br>es. Program o<br>Staff will trac<br>ummits, health<br>on groups. Gu<br>Laker Clay Jo<br>e of exercise a<br>ds and equipr<br>equipment neo<br>in Community | ide data about to a meal on us. or meal. Staff wildirector will devok the number on conferences, housest trainers will ohnson and formand physical fitnment that senioreded. Guest spr. State of MO E | hed and a statistical analyses at (3) the programs and services: Send out Staff will track the number of members at create signup sheets at front desk elop and conduct informational from the various now to remain independent and living a come to conduct classes such as the come to conduct classes such as the come to stay in their homes. The seakers to discuss the importance of the program of the conduct classes and the effects on your mind, body as need to stay in their homes. |  |  |
| Continue partnerships wit   | in Samuel Rodge  | ers and Swope  | e comprenensi   | ve Health for health fairs  |  |  |

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JACKSON COUNTY AUDITORS OFFICE KANSAS CITSEMINEDURI

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

| Agency Name:      | Palestine Senior Citizen Activity Center        |  |
|-------------------|---|--|
| Program Name:     | Life Enrichment Forever Fit and Healthy Program |  |
| Program Request # | 1 of1   |  |

#### **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

Monitor achievement of outputs and outcomes: of service delivery, steps in research, events, and processed using the following criteria:

- The kitchen staff will assess how many members have purchased a meal in the cafeteria, how many to-gomeal were purchased, and how many meals were purchased by guests and visitors. Perform a survey with members and guests about satisfaction, quality, serving size and presentation of the meals.
- The fitness and nutrition team will assess performance goals set by seniors, this team will consist of trainers, educators, program directors, executive director, center members and members who are volunteering to assist with programs and services.
- Use program director to assess and perform a survey of the number of seniors remaining in their home, what and how many services were provided, what special equipment was needed, and how many seniors are moved to nursing homes.

The following tools to be used to help provide accurate data: members feedback surveys, pre and post program measures with a comparison group/agency, post measures and benchmarks, pre and post program measures and long term post-program measures.

#### **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)

The Palestine Senior Citizen Activity Center will use the bi-monthly newsletter, bulletin boards, banners displayed at events, program agendas, flyers, website (which is currently being developed), a center plaque, and brochures to share with the members, vendors, stakeholders, public and media to make awareness of the generous taxpayer funding received from Jackson County. We will also name our cardio room, The Jackson County Forever Cardio Room.

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JACKSON COUNTY AUDITORS OFFICE KANSAS CITSEQUIRE BOURI

#### **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 **Palestine Senior Citizen Activity Center**, 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, **Palestine Senior Citizen Activity Center**, 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.)

| Authorized Representative's Signature  Leave Tive Divector  Title                               | Printed Na          | Outle<br>12/15 |
|---|---------------------|----------------|
| Subscribed and sworn before me this _ commissioned as a notary public with, and my commissioned | nin the County of 🚣 | Klon, State of |
| Ramula Claudiyl Signature of Notary   |                     | 2-15           |

PAMELA OLAWAIYE
Notary Public - Notary Seal
State of Missouri, Jackson County
Commission # 12295931
My Commission Expires Jan 24, 2016