THIS AGREEMENT, by and between the governing board of the St. Louis County Family Services Collaborative (referred herein as “Governing Board”) and **name** (referred herein as “Provider”).

WHEREAS, the Governing Board administers the Local Collaborative Time Study and receives dollars from the Federal Government.  LCTS funds received by collaboratives have been designated by state statute for use in the expansion of early intervention and prevention services in Minnesota communities.

NOW THEREFORE, the Governing Board and the Provider agree to Exhibit A (grant application).

THE EFFECTIVE DATES of this **date range**.

1. COST OF SERVICES shall not exceed **amount**.
	1. The provider must complete a Reimbursement Request to receive reimbursement.
		1. Attach itemized receipts to receive funds/reimbursement or a detailed invoice to pay a third-party vendor (copies accepted).
		2. Food reimbursements requests must include a purpose and number of people attending.
		3. Gift cards, gifts, prizes reimbursements must include a log of the recipients’ name, address, and signature.
	2. The provider may receive an advance with a written request on letterhead or email detailing the intended expenditure(s). The provider must submit itemized receipts documenting the expenditure of the advance prior to receiving any additional funds. The maximum advance is half of the total grant.
	3. Budget modifications up to 10 percent of the original budget may occur; modifications more than 10 percent require Finance Committee approval.
	4. The Governing Board financials are subject to St. Louis County audits -- Provider should keep electronic or paper expenditure documentation for 10 years.
	5. Email documents to director@fscmn.org.

CONDITIONS OF THE PARTIES OBLIGATIONS

* 1. This is a one-time grant and not designed to sustain programming for the long-term.
	2. The Provider will provide a program evaluation to the Governing Board.  The evaluation includes an outline of actual expenditures, outcome data, and narrative on outcome achievement. Photos of the event are also appreciated. The evaluation is due January 31st or the end of the Agreement, whichever comes first.  The Provider will complete an evaluation each year funds are received.
	3. Credit St. Louis County Family Services Collaborative for funding the event in any media coverage.

CANCELLATION, DEFAULT, AND REMEDY

* 1. The Agreement shall remain in effect until the expiration date or termination by either party.  A 30-day written notice delivered to the other party at the address provided above can terminate the Agreement.
	2. Legislative or guideline changes by the State may require the Governing Board to renegotiate terms or cancel the Agreement without a 30-day advance notice.

MUTUAL INDEMNIFICATION. Each party shall be liable for its own acts to the extent provided by law and herby agrees to indemnify, hold harmless and defend the other, its officers and employees against any and all liability, loss costs, damages, expenses, claims or actions, including attorney’s fees with the other, it’s officers and employees may hereafter sustain, incur or be required to pay, arising out of or by reason of any act or omission of the party, its agents, servants, or employees, in the execution, performance, or failure to adequately perform its obligations pursuant to this Agreement.

DATA PRIVACY. The Provider agrees to comply in all respects with the Minnesota Government Data Practices Act (MN Statute Chapter 13) and further agrees to comply with any requests of the Governing Board that are necessitated by the Governing Board’s obligation under said Act.

COMPLIANCE. The Provide shall abide by Federal, State, and local laws, statutes, ordinances, rules, and regulations now in effect or hereinafter adopted pertaining to this Agreement or the facilities, programs, and staff for which the Provider is responsible.

IN WITNESS WHEREOF, the parties have executed this agreement.

Name, position, organization Date

Name, Chairperson, St, Louis County Family Services Collaborative Date