

AGREEMENT

THIS AGREEMENT made and entered into this 14 day of November, 2000, by and between the County of Nassau, a political subdivision of the State of Florida, hereinafter referred to as COUNTY, and the Nassau County Volunteer Center, hereinafter referred to as VOLUNTEER CENTER.

WITNESSETH

WHEREAS, it is in the best interest of the citizens of Nassau County that there be a VOLUNTEER CENTER.

WHEREAS, the VOLUNTEER CENTER is the clearinghouse for volunteer recruitment activities in Nassau County.

NOW, THEREFORE, the parties hereto agree as follows:

1. For and in consideration of the sum of \$6,000.00, which shall be paid in quarterly installments, during the months of November, February, May and August, the VOLUNTEER CENTER does hereby agree to perform services that will benefit the residents of Nassau County. Said services to include but not be limited to the following:
 - a. Continue the present level of services provided for volunteer recruitment activities in Nassau County and to mobilize people and resources, through the promotion of volunteerism, to deliver creative solutions to community problems.
2. The VOLUNTEER CENTER shall make their financial records available to the COUNTY for purposes of an audit, if requested by the COUNTY. The COUNTY shall require an audit of previous year's financial records to be performed by an independent accounting firm. The audit report must be presented to the COUNTY before the May distribution is made.
3. All facilities, programs, and services should be compliant with the Florida Accessibility Code and the federal Americans with Disabilities Act.

IN WITNESS WHEREOF, the parties hereto have duly executed this agreement this 27th day of November, 2000.

SIGNED, SEALED & DELIVERED
IN THE PRESENCE OF:

BOARD OF COUNTY COMMISSIONERS
NASSAU COUNTY, FLORIDA

Its: Chairman

Attest: _____
Ex-Officio Clerk

THE NASSAU COUNTY VOLUNTEER CENTER

GAIL A. SHULTS
Executive Director

CONTRACT APPROVED AS TO FORM
BY THE NASSAU COUNTY ATTORNEY:

MICHAEL S. MULLIN

AFFIDAVIT

01 FEB 21 12:15

I, Gail G. Shults, certify that our programs and facilities are in compliance with the Federal Americans with Disabilities Act and the Florida Accessibility Code.

Gail G. Shults
Signature

State of Florida
County of Nassau

The foregoing instrument was acknowledged before me this 19th day of February, 2001, by Gail A Shults, as _____ of _____, who is personally known to me or who has produced _____ as identification and who did take an oath.

Andrea J. Green

NOTARY PUBLIC
State of Florida at Large
My Commission Expires:

