## **AGREEMENT**

## 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 \$3,000.00, 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 shall be compliant with the Florida Accessibility Code and the federal Americans with Disabilities Act. Failure to provide facilities, programs and

services that are compliant with both the Florida Accessibility Code and the federal Americans with Disabilities Act (ADA) shall be considered a breach of the contract.

IN WITNESS WHEREOF, the parties hereto have duly executed this agreement this 9th day of November \_\_\_\_\_\_, 2005.

SIGNED, SEALED & DELIVERED IN THE PRESENCE OF:

BOARD OF COUNTY COMMISSIONERS NASSAU COUNTY, FLORIDA

Brende & Sirveille

ANSLEY NACREE

Its: Chairman

ATTEST:

OOHM A. CRAWFORD Ex-Officio Clerk

THE NASSAU COUNTY VOLUNTEER CENTER

GAIL A. SHULTS

Executive Director

CONTRACT APPROVED AS TO FORM BY THE NASSAU COUNTY ATTORNEY:

## AFFIDAVIT

Dail Shuts, certify that our programs and in compliance with the Federal Americans with facilities are Disabilities Act and the Florida Accessibility Code.

Signature TITLE: Executive Din

State of Florida County of MASSAU

The foregoing instrument was acknowledged before me this 23 day of NOU , 2005, by Gail Shults , as who is personally known to me or who has produced \_FF DC\_\_\_\_\_, as identification and) who did take an oath.

Notary Public State of Florida at La My Commission expires:



MARIE CURRETUAND Motary Public, State of Florida May commun. expires Judy 16, 2008 No. DD 194346