

**STATEMENT OF AGREEMENT  
BETWEEN**

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**(Agency)  
AND  
HABERSHAM COUNTY UNITED WAY (HCUW)**

This agreement is entered into in the mutual belief of the parties that:

- (a) the participation of representative citizens in fund raising and budgeting for local agencies is essential.
- (b) federated fundraising is the most effective way to provide for the financial needs of these agencies
- (c) all parties involved – the United Way, the Agency and the public, must consider the total needs of the community in the establishment, continuation and improvement of effective and necessary community services.
- (c) The United Way represents a partnership of organizations and contributors cooperatively working together to help provide effective and efficient health, welfare, recreational, educational and other charitable programs.

**THE AGENCY AGREES:**

1. To support and abide by the policies and procedures established by HCUW.
2. To enthusiastically support and assist in the HCUW fund raising campaign in all appropriate ways including; encouraging Board, Staff, Volunteers and Members to strive toward 100% participation, participation in campaign presentations, participation in the Annual Kick Off event and offering tours of the agency where possible.
3. To identify itself in every way possible with United Way through its activities, published materials and signage. To consistently use the United Way logo on letterheads, publications press releases and public functions.
4. To notify HCUW of any changes in its non-profit status, its Executive Director, or its Board President.
5. **ALLOCATION OF FUNDS**
  - a. To submit its proposed budget each year during the Allocation process and to cooperate fully with the Allocation committee in providing requested material in a timely manner.
  - b. To use the HCUW allocated funds for the purposes stated in the Allocation Request and not for accumulating agency surpluses.
6. **ACCOUNTING PROCEDURES**
  - a. To keep complete and accurate books of account and financial records in accordance with accepted standards.
  - b. To have a minimum of two volunteer Board members review and approve the financial statement of the agency on a monthly basis and the entire Board review them on no less than a quarterly basis.
  - c. To comply with audit guidelines, as established by HCUW, and to have the agency Board review the agency's audit.

**7. BOARD GOVERNANCE**

- (a) Management of the agency must be vested in a responsible and active Board, comprised entirely of unpaid volunteers who meet no less than quarterly and who establishes and enforces policies.
- (b) There should be a specific plan for Board rotation, attendance requirements and Board diversity.

**8. LEGAL REQUIREMENT**

- (a) The agency must maintain its recognition by IRS as an organization exempt from federal income tax. (501(c)3 status)
- (b) The agency must have on file a current copy of incorporation papers from the Secretary of State showing the agency is registered with the State of Georgia to solicit charitable contributions.
- (c) The agency should maintain a policy declaring it an equal opportunity employer.

**THE HABERSHAM COUNTY UNITED WAY AGREES TO:**

- 1. To respect the Agency’s prerogative to determine its own policies and programs within the community.
- 2. To preserve and protect the identity of each member organization and to direct its own publicity so as to assist the agency’s educational campaign.
- 3. To encourage a cooperative atmosphere for community-wide service planning and development.
- 4. To assess, on a continuing basis, the need for human service programs, seeking solutions to human problems and assisting in the development of new or the expansion or modification of existing human service programs.

This agreement has been read and approved at a meeting of the governing body of this Agency held on \_\_\_\_\_; and by the Habersham County United Way at a meeting of its Board of Directors held on \_\_\_\_\_

AGENCY: \_\_\_\_\_ HABERSHAM COUNTY UNITED WAY  
 EXECUTIVE DIRECTOR: \_\_\_\_\_ EXECUTIVE DIRECTOR: \_\_\_\_\_  
 PRESIDENT: \_\_\_\_\_ PRESIDENT: \_\_\_\_\_  
 DATE: \_\_\_\_\_ DATE: \_\_\_\_\_