

Blue & You Foundation

For a Healthier Arkansas 

November 12, 2014

Patrick O'Sullivan
Executive Director

USAbLe Corporate Center
320 West Capitol Ave., Suite 200
Little Rock, AR 72201
501-378-2221 FAX 501-378-2051
posullivan@arkbluecross.com

Heather Clements
City of Jonesboro
P.O. Box 1845
Jonesboro, AR 72403

Dear Ms. Clements:

The Blue & You Foundation for a Healthier Arkansas is pleased to award \$145,030 to the City of Jonesboro to provide funding for the *Craighead Forest Trail Fitness Project*. The grant period will begin January 1, 2015 and end December 31, 2015.

Terms of the grant are set out below. **If you are in agreement, please have the appropriate officer indicate acceptance, and return a signed copy of this letter (*signed by an officer of the organization*) by December 19, 2014. We then will issue the grant check.**

The grant is conditioned on your agreement with the following:

1. To complete the scope of work as detailed in your attached grant application.
2. To permit Blue & You Foundation staff to visit your offices or operation periodically during the grant year to review progress of the project.
3. To maintain written records of receipts and expenditures adequate to easily identify the use of the grant funds and to make your books and records available to our staff at reasonable times.
4. To make no changes in any budget category exceeding 10% without written permission from the Foundation. A copy of your approved budget is attached.
5. To submit an interim, six-month progress report by July 21, 2015 and a final, 12-month project report by January 31, 2016, in accordance with Attachment A. You agree that the Blue & You Foundation may publish these results, in whole or in summary, on its Web site or in printed publications.
6. To provide a copy of this agreement, your program and budget as described in your attached application, and our reporting requirements to the person from your organization who will administer the grant program and complete your progress reports.
7. To not knowingly employ (either as a volunteer or in a compensated capacity) any employee of Arkansas Blue Cross and Blue Shield or an affiliated company in the implementation of your program funded by this grant.

8. To furnish one copy of any printed publications or materials produced with Blue & You Foundation funds and to include acknowledgement of Blue & You Foundation support in all such publications or productions. Any reference to the Foundation should always be listed as Blue & You Foundation for a Healthier Arkansas. Please submit any acknowledgement for our approval of proper use prior to publication.
9. To agree that communication material created with a Blue & You Foundation grant will not be sold by the grantee organization or institution without the approval of the Foundation.
10. To return any unspent funds at the end of the grant period.

In order to receive payment, please signify your agreement to the above terms by the signature of an officer who is authorized to execute contracts on your behalf. Keep one copy for your records and return the original to Blue & You Foundation, Attention: Patrick O'Sullivan.

Sincerely,



Patrick O'Sullivan
Executive Director

AGREED TO AND ACCEPTED ON BEHALF OF CITY OF JONESBORO

(signed by an officer of the organization)

SIGNATURE:

NAME:

TITLE:

DATE:
