| COUNTY OF WILLIAMSON | § | AGREEMENT                  |
|----------------------|---|----------------------------|
|                      | § | BETWEEN THE                |
|                      | § | CITY OF GEORGETOWN AND     |
|                      | § | WILLIAMSON COUNTY          |
| STATE OF TEXAS       | § | CHILDREN'S ADVOCACY CENTER |

This is an agreement between the City of Georgetown, a Texas Home Rule Municipal Corporation (City), and WILLIAMSON COUNTY CHILDREN'S ADVOCACY CENTER, for the fiscal year from October 1, 2021, through September 30, 2022 (Agreement.)

The City of Georgetown values partnerships with organizations that are committed to addressing our community's greatest public challenges, and the purpose of City funding to the non-profit sector is to cultivate and sustain partnerships with 501(c)3 organizations that strengthen the City's key priorities in the following areas: Public Safety, Transportation, Housing, Parks & Recreation, Veteran Services, and Safety Net, further defined as follows:

## Public Safety.

- While the City is Georgetown's Public Safety leader (Fire & Police), public safety also encompasses a broad scope of work that makes this community safe for all.
  - Eligible organizations and programs may include those that contribute to safe neighborhoods such out of school time, youth empowerment, and neighborhood community centers.

# Transportation.

• Eligible organizations include those that assist in meeting the transportation needs of Georgetown residents unable to access private transportation such as homebound seniors and youth under the age of 16 years.

# Housing.

• Eligible organizations include those that offer emergency shelter, transitional or temporary housing, and affordable housing.

## Parks & Recreation.

• Eligible organizations include those that provide affordable, accessible activities that enhance Georgetown residents' health and well-being, including sports, fitness, and other recreational programs.

#### Veteran's Services

Support veteran programs and services within the community.

## Safety Net.

- The City recognizes its responsibility to support efforts to address this
  community's most pressing basic needs. Examples of basic needs include food
  insecurity, emergency financial assistance, mental/behavioral health care,
  substance abuse, domestic/family violence, and health care. Safety Net priorities
  will be based on ongoing analysis of unmet existing needs and emerging needs
  in this community, and may change over time.
- 1. The City finds that Williamson County Children's Advocacy Center provides Safety Net Services for the community, as defined above; Williamson County Children's Advocacy Center accomplishes a public purpose and benefits the community of Georgetown, Texas as it enhances the quality of life and the overall economic development of the city per Chapter 380 of the Local Government Code. The City finds that the services Williamson County Children's Advocacy Center will provide pursuant to this Agreement are services that the City would provide, absent this Agreement, within the vision and limitations otherwise placed upon the City.
- 2. In consideration for the services Williamson County Children's Advocacy Center provides pursuant to this Agreement, the City agrees to pay Williamson County Children's Advocacy Center an amount not to exceed a total of \$19,000 to be paid in a one-time lump sum payment by October 15, 2021.
- 3. As consideration for the funds to be paid by the City, Williamson County Children's Advocacy Center agrees to provide the following as a condition of this Agreement:
  - A. provide services for abused children, non-offending family members, and professionals dedicated to the intervention, investigation, prosecution, and treatment options related to child abuse cases in Williamson County in a child-friendly environment;
  - B. coordinate as appropriate with the City and other community service providers in the provision of services to Georgetown residents;
  - C. provide a final report to the City in the format prescribed in the attached Exhibit A to this Funding Agreement on or before October 31, 2022 that specifically identifies and includes:
    - 1. how the City's funds were used;
    - 2. an analysis of the goal set forth in the evaluation section of the grant application, including outputs and outcomes;
    - 3. the total numbers served and the total number Georgetown citizens served; and
  - D. provide to the City a copy of the Williamson County Children's Advocacy Center's annual independent auditor's report based upon its fiscal year (as soon as one has been completed) or the organization's Form 990.

- 4. As a recipient of a FY 2021-22 Strategic Partnerships for Community Services Grant, the Children's Advocacy Center shall also have the ability receive an exemption of certain development related fees in an amount not to exceed \$10,000 should Children's Advocacy Center remodel their current facilities and/or build new facilities in Georgetown if the request is made in the fiscal year defined in this Funding Agreement:
  - A. Development related fees are defined as Land Development Processing Fees outlined in the City of Georgetown's Unified Development Code (UDC) Development Manual which include Building Permits and Inspections Fees and Fire Code Permit Fees;
  - B. These development related fees <u>do not include</u>: Electric Connection and Engineering Fees; Water and Wastewater Connection and Engineering Fees; and Impact Fees.
- 5. This Agreement shall not be altered, waived, amended or extended, without the written consent of both parties.
- 6. Williamson County Children's Advocacy Center may not assign this Agreement to another party without the written consent of the City.
- 7. Either party may terminate this Agreement for any reason with written notice to the other party. Notice of termination shall be hand-delivered or sent by certified mail, return receipt requested, to the following addresses:

David Morgan, City Manager

City of Georgetown

P. O. Box 409

Georgetown, TX 78627-0409

Williamson County Children's

Advocacy Center

1811 SE Inner Loop

Georgetown, TX 78626

All obligations under this Agreement shall cease, and the City shall only fund those expenses that actually were expended, up to the date the notice of termination is received.

THE CITY OF GEORGETOWN

WILLIAMSON COUNTY CHILDREN'S ADVOCACY CENTER

Josh Schroeder, Mayor

Kerrie Stannell, Chief Executive Officer

ATTEST:

APPROVED AS TO FORM:

Skye Masson, City Attorney

**EXECUTED** this \_\_\_\_\_ day of September, 2021.

| STATE OF TEXAS   | §<br>§ CORPORATE             | E ACKNOWLEDGMENT  |   |  |
|--|------------------------------|-------------------|---|--|
| COUNTY OF WILLIAMSON   | §                            |                   |   |  |
| This instrument was acknowledged<br>Kerrie Stannell, a person known to m<br>County Children's Advocacy Center, | ne, in her capacity as Chief | Executive Officer | • |  |
| country Chinaren 51 ravocacy Center,   | on serial of said organiza   |                   |   |  |
|  |                              |                   |   |  |

# **ORGANIZATION NAME**

# **COVER PAGE**

# **CHECKLIST OF ATTACHMENTS**

| Budget Information. How were the City's funds used? Include:  Actual Expenditures compared to Planned Budget             |
|--|
| An analysis of the goal(s) set forth in the evaluation section of the grant application, including outputs and outcomes. |
| The Total numbers served and the total number of Georgetown Citizens served.   |

# Organization Information 2021-22 Final Grant Report

| Organization Name                  |  |
|------------------------------------|--|
| Mailing Address                    |  |
| CEO or Executive Director (include |  |
| title if other than "CEO" or "ED") |  |
| Phone Number & Email Address       |  |
| Organization Mission               |  |
| Organization Vision                |  |
| Total Grant Awarded                |  |
| Program Name                       |  |

# **Contact Information**

| Primary Grant Writer Name, Title |  |
|----------------------------------|--|
| Email, Phone                     |  |

# **Evaluation**

**GOAL:** What will this funding help you accomplish?

**Inputs:** What resources (human, financial, organizational, and/or community) were committed to this grant request?

**Activities:** What activities supported or accomplished your goal(s)?

**Outputs:** Did your activities produce the expected outputs? Outputs are often quantitative measures (# of participants, # of sessions held, # of encounters).

**Outcomes:** What benefits, impacts, or changes in behavior, knowledge, skills, and/or attitudes for participants resulted from the completion of the activities?

**Performance Measures:** Did you accomplish your goal(s)? How did you measure your result(s)? How did your monitoring methods help you correct errors, remedy problems and/or refine your work?

#### GOAL:

|                      | Proposed in Grant Request | Actual Update/Results |
|----------------------|---------------------------|-----------------------|
| Inputs               |                           |                       |
| Activities           |                           |                       |
| Outputs              |                           |                       |
| Outcomes             |                           |                       |
| Performance Measures |                           |                       |

## **GOAL:**

|                      | Proposed in Grant Request | Actual Update/Results |
|----------------------|---------------------------|-----------------------|
| Inputs               |                           |                       |
| Activities           |                           |                       |
| Outputs              |                           |                       |
| Outcomes             |                           |                       |
| Performance Measures |                           |                       |

## **GOAL:**

|                      | Proposed in Grant Request | Actual Update/Results |
|----------------------|---------------------------|-----------------------|
| Inputs               |                           |                       |
| Activities           |                           |                       |
| Outputs              |                           |                       |
| Outcomes             |                           |                       |
| Performance Measures |                           |                       |

This format is required. Please enter your information into the shaded cells for rows applicable to your grant request. Use the "Other" sections to provide data for other types of revenue or expense in your program or project budget. Show specifically how our grant was used. Include narrative at the bottom to explain your numbers & assumptions, as needed.

| Name of Organization:           |  |            |                 |        |             |
|---------------------------------|--|------------|-----------------|--------|-------------|
| <b>Budget Period From:</b>      | To:  |            |                 |        |             |
| Revenue/Support for this        | Grant Request  | Plan       | ned Budget      | Actual | Expenditure |
| Individual contribut            | -  | \$         | -               | \$     | -           |
| Fundraisers & Speci             | ial  | <b>C</b>   |                 | ¢      |             |
| Events<br>Program/Service       |  | \$         | -               | \$     | -           |
| Revenues                        |  | \$         | -               | \$     | -           |
|                                 | lation, Corporate Grants or Other (list narrative/notes if more space is needed) |            |                 |        |             |
|                                 |  | \$         | -               | \$     | -           |
|                                 |  | \$         | -               | \$     | -           |
|                                 | oport (calculated for you or enter your  | ø          |                 | ø      |             |
| own total)                      |  |            |                 |        | <u>-</u>    |
| Expenses for this Grant R       | •  |            | tal Amount      |        | int Request |
| Salaries, benefits an           |  | \$         | -               | \$     | -           |
| Consultants and pro             |  | \$         | -               | \$     | -           |
|                                 | pment including travel, lodging  | \$         | -               | \$     | -           |
| Equipment                       |  | \$         | -               | \$     | -           |
| Supplies and suppor             | · ·  | \$         | -               | \$     | -           |
|                                 | hone, internet, fax, postage   | \$         | -               | \$     | -           |
| Mortgage or Rent, a             |  | \$         | -               | \$     | -           |
| Fundraising Expens              |  | \$         | -               | \$     | -           |
| other (list below an is needed) | d describe in narrative/notes if more space                                      |            |                 |        |             |
|                                 |  | \$         | -               | \$     | -           |
|                                 |  | \$         | -               | \$     | -           |
| Total Expense (cale             | culated for you or enter your own total)   | \$         | -               | \$     | -           |
| Difference (Revenu              | ıe/Support less Expense)   | \$         | -               | \$     | _           |
| Narrative/Notes: Please above.  | use as many lines as needed for further exp                                      | lanation o | of budget items |        |             |
| 1                               |  |            |                 |        |             |
| 2                               |  |            |                 |        |             |
| 3                               |  |            |                 |        |             |
| 4                               |  |            |                 |        |             |