

Vital Pathways PO Box 1437 Houlton, ME 04730

## **Memorandum of Agreement**

Vital Pathways Fiscal Agent Agreement Form
Filing Date: \_\_\_\_\_ To be reviewed on:\_\_\_\_\_

Purpose: To establish a cooperative agre	ement betwe	en Vital Pathways and	
		(hereinafter referred to a	as "the organization").
Address:			
Phone: List two members responsible for reque		Email:	
zist two members responsible for reque	oung ramasi		
The organization is a dedicated commun	nity action gro	up whose purpose is to:	
The organization serves as a community assist its activities. The organization doe associated with this agreement and the Initials of organizations represent	s not presentl described act	y have an IRS 501(c)3 designation.	Administrative fees
Vital Pathways agrees to serve as fiscal a receive grant funding and/or donations, scope of the Vital Pathways mission.	_	_	
The organization agrees to utilize fundin funds received via Vital Pathways 501(c) grant funds received will be incorporate advise Vital Pathways immediately if this	3 status be us d into this Me	ed for the purpose stated in the gramorandum of Agreement. The orga	ant application. All anization agrees to
The organization agrees to file a year en associated with the funding for which Vi Vital Pathways board twelve months fro update contact information listed above	tal Pathways s m the date of	serves as fiscal agent. Such reports	will be provided to the
<b>Vital Pathways</b> , at its sole discretion, made unacceptable change in the organization dissolution of the organization, any unexpathways operating fund or be used at V	n's purpose. In opended fund	the case of the termination of this s held by Vital Pathways will be trar	agreement or
At the completion of the project, if the of Vital Pathways for one year for future us be transferred to the operating fund and up their own 501(c)3 within that year, the closure fee of 2% will be charged on all respectively.	se by the organd be used at Volen funds will	nization. After one year all remaining ital Pathways discretion. If the orga be transferred to their account. A t	ng unused funds will nization is able to set
The organization assumes all risks and re This memorandum will remain in force f unexpended funds left in the project acc	or the duratio		
Organization Representative	Date	Vital Pathways Officer	 Date