

## United Way of Escambia County Certification Agreement

United Way of Escambia County hereby certifies that:

Agency Name: \_\_\_\_\_

Address: \_\_\_\_\_

has met all the requirements for CERTIFICATION (listed below) and is therefore eligible for Certification Status and all the benefits related hereto.

### AGENCY HAS MET THESE CERTIFICATION REQUIREMENTS:

- |  |   |
|--|---|
| <input type="checkbox"/> IRS Determination Letter                          | <input type="checkbox"/> Patriot Act Compliance Form                  |
| <input type="checkbox"/> Articles of Incorporation                         | <input type="checkbox"/> Current Annual Report                        |
| <input type="checkbox"/> Agency Bylaws (if applicable)                     | <input type="checkbox"/> 25 Word Defining Organization's Purpose      |
| <input type="checkbox"/> State of Florida Tax Exempt                       | <input type="checkbox"/> Admin. & FR Percentage at or below 25%       |
| <input type="checkbox"/> State of Florida Solicitation Registration Number | <input type="checkbox"/> IRS Form 990                                 |
| <input type="checkbox"/> Board Meeting Schedule                            | <input type="checkbox"/> Most Recent External Audit (if req'd by IRS) |
| <input type="checkbox"/> Board of Directors List with Affiliations         | <input type="checkbox"/> Agency Support Form                          |

### AS A CONDITION TO CERTIFICATION THE AGENCY AGREES TO:

**MAINTAIN** the standards to retain certification as set forth in the United Way of Escambia County's Certification Guidelines and to notify United Way of Escambia County of any conditions which may affect its certification status (i.e. change in administrative overhead above 25%, not complying with the Patriot Act, not meeting IRS financial reporting standards)

**INFORM** United Way of Escambia County of any changes in address pertaining to location of offices, service delivery sites and new officers and Board members or directorship of agency.

**PARTICIPATE** actively in United Way of Escambia County's community fundraising campaign by encouraging participation of its constituency and members in local activities and in support of an annual United Way fundraising campaign among employees and Board of Directors.

**REFRAIN** from soliciting additional donations from donors who you have been asked to Thank for their support. These donors are **ALREADY** your donors. Please help us prevent donor fatigue by not over asking them for additional support. This does not mean you cannot ask donors for support in the future. It does mean we ask you to refrain from doing it through the Thank You process.

**REPORT** as requested upon receipt of additional Program Support funding received through the funds application process. The agency will adhere to the reporting policies and procedures outlined at the time that the Funds Distribution Volunteers award fulfillment of agency's program funding request.

**PARTICIPATE** in the Thank You, marketing, and promotional opportunities designed to effectively illustrate your relationship to United Way donors & how you use their gifts.

**CERTIFIED AGENCIES ARE ENTITLED TO:**

**REDUCED** designation fee charged for funds raised on behalf of agency through annual workplace campaign. Certified partner agencies charged 9% administrative/fundraising rate and others are charged 11%.

**INDICATE** to the community that it has met the United Way standards for certification by placing the United Way logo (see attached branding instructions) on your website, print or digital communications.

**PARTICIPATE** in speaking opportunities during the United Way annual fundraising campaign held in area workplaces. (Agency **MUST** submit speaker form to United Way prior to being listed as a member of the speaker's bureau- a copy of this form follows this certification for your convenience.)

**NOTIFICATION** of application guidelines/timelines for the Combined Federal Campaign and Florida State Employees Campaign. Due to government regulations, the agency must complete a separate Annual Application for inclusion.

**PARTICIPATE** as a recipient agency in Day of Caring. Submit your one-day projects to [pam@unitedwayescambia.org](mailto:pam@unitedwayescambia.org) .

**PARTICIPATE** in leadership, development, volunteer and other training and resource education programs at a reduced partner rate.

**COMPETE** for United Way Grants from Special Requests for Proposals focused on specific impact areas (many are at a higher funding and long-term threshold).

**APPLY** for the pool of undesignated donor funding given through the United Way Annual Campaign to the Community Chest Fund that is used to fund selected Agency Programs.

**LISTING** in campaign and other United Way of Escambia County literature.

**ACCESS** as first-come, first-served for in-kind furniture and supply donations received through the United Way of Escambia County warehouse.

**LISTING** on the United Way website for all of your fundraising events, your top five wish-list needs, and your top three volunteer opportunities with links to your contacts

**LISTING** as a United Way Speaker's Bureau partner you will be listed and scheduled based on your availability at the request of local partners who want to hear more about your mission. (Agency **MUST** submit speaker form to United Way prior to being listed as a member of the speaker's bureau)

In witness hereto, the parties have signed this agreement:

CERTIFIED ORGANIZATION

UNITED WAY OF ESCAMBIA COUNTY

\_\_\_\_\_  
Signed, Board President

\_\_\_\_\_  
Signed, President/CEO

\_\_\_\_\_  
Signed, Executive Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date