## APPENDIX 2: TEMPLATE LONG-TERM RECOVERY COMMITTEE MEMORANDUM OF UNDERSTANDING

**[Insert name of Long-Term Recovery Committee] (LTRC)**

**And [Insert Agency Name] existing 501(c) 3 Fiscal Agent**

The purpose of this memorandum is to enable the **[Insert Agency Name]** to act as the fiscal agent of the **[Insert LTRC Name].**

**The [Insert LTRC Name] will:**

* Instruct donors to make checks payable to the **[Insert Agency Name]** and designate for the benefit of the **[LTRC Name];**
* Establish such procedures and/or forms and appropriate financial officers to authorize the **[Insert Agency Name]**to write checks to vendors of services or supplies delivered to the **[Insert LTRC Name]**or the LTRC’s clients;
* Maintain its own system for honoring designations on the use of particular donations and sub-accounts for the various, separate activities of the **[Insert LTRC Name]**;
* Receive funds from various sources to support the recovery activities of the **[Insert LTRC Name]** and deliver said donations to the **[Insert Agency Name]** for deposit.

**The [Insert Agency Name] will:**

* Provide evidence of robust internal controls and record protection procedures to the LTRC;
* Deposit and hold all **[Insert LTRC Name]** funds in an FDIC insured bank;
* Establish a “pass through” account and such bookkeeping procedures as shall isolate the funds designated for the **[Insert LTRC Name]** from those of the agency or other entities for whom the agency holds funds;
* Provide monthly, quarterly, and annual reports to the **[Insert LTRC Name]** detailing receipts, expenditures, and balances on hand to the **[Insert LTRC Name]**;
* Receive all money donated to the **[Insert LTRC Name]**;
* Send a copy of the deposit receipt to the **[Insert LTRC Name]**;
* Write and mail checks to vendors of services or supplies when authorized to do so by the **[Insert LTRC Name]**.
* Undergo professional, third-party audits on an annual basis.

This memorandum constitutes the entire agreement between the parties, and shall remain in force until the parties mutually agree to alter or terminate the understanding.

In executing this MOU, the **[Insert LTRC Name]** assumes all responsibility for the appropriate receipt and expenditure of the funds entrusted to it.

The **[Insert Agency Name]** agrees only to act as the fiscal agent of the **[Insert LTRC Name]** and does not assume any of the rights or obligations of the **[Insert LTRC Name]**.

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**Printed Name Printed Name**

**[Insert LTRC Name] Representative [Insert Agency Name] Representative**

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**Signature Signature**

**[Insert LTRC Name] Representative [Insert Agency Name] Representative**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**