

**FY 2013/14 GENERAL REVENUE & CHANGE FOR CHANGE CONTRACT
SUBMISSION INSTRUCTIONS**

Please carefully read the entire handout before completing the Agreement. For your convenience, this packet includes the following resources:

1. Three (3) copies of the Agreement (Please sign and return all 3 copies.)
2. A copy of the Agreement attachment
3. Your agency's Florida Department of State, Division of Corporations filing record (**The agency's legal name as registered with the Department of State is the only name that can be listed on the Agreement, including the attachments to the Agreement.**)
4. **A copy of the Provider Self-Monitoring Checklist**, which must be submitted with the contract.

Please submit three (3) copies of the complete Agreement to our office by 5:00 p.m., on Monday, October 28, 2013, at the mailing address listed below. Please note that the submission due date is mandatory unless you receive an extension by this office based on extraordinary circumstances. **To expedite the approval process you can submit the contract materials earlier than the due date.**

Mailing Address for City of Tallahassee	Physical Address for City of Tallahassee
Pat Holliday, Human Services Division Economic & Community Development Department 300 South Adams Street, B-27 City Hall Tallahassee, Florida 32301-1731	435 North Macomb Street Renaissance Building (located in Frenchtown) Third floor

Mailing and Physical Address for Leon County
Tiffany Harris, Human Services Analyst Human Services & Community Partnerships 918 Railroad Avenue Tallahassee, Florida 32310

Before submitting the Agreement packets to our office, please carefully edit all three (3) copies for accuracy, and **make certain the Agreement is numbered sequentially**, starting on page one (1), which would be the first page of the Agreement. **The submission of incomplete agreements will result in a delay in the execution of the contract.**

Please note that one complete General Revenue or Change for Change Agreement includes the following sections:

1. The General Revenue or Change For Change Agreement, **with original signatures, including 2 witnesses to the signatory**
2. Attachment A: Statement of Work
3. Attachment B: Collaboration Plan
4. Attachment C: Program Logic Model
5. Attachment C1: Outcome Measurement Framework
6. Attachment D: Method and Amount of Compensation
7. Attachment D1: Vendor Information/W-9 Forms

In reference to the **Outcome Measurement Framework**, you can utilize the applicable sections included in your 2013/14 CHSP application; however, please modify the sections to conform to the Agreement's headings.