July 2, 2012

Sherry Clinton
Action Associates, Inc.
P.O. Box 1534
Clinton, Oklahoma 73601

Dear Ms. Clinton,

Please review and, if acceptable, sign this latter of agreement between Action Associates and the City of Clinton.

Action Associates, Inc. will accept referrals from the Police Department of the City of Clinton, whenever, in the opinion of a representative of the City's Police Department an individual or individuals need shelter or assistance, said representative shall refer such persons to Action Associates, Inc., and Action Associates Inc., shall provide a safe haven for such referrals.

Action Associates, Inc., shall provide semi-annual reports to the City of Clinton, covering the number of referrals received as a result of city action.

In return for accepting referrals from the City of Clinton, the city will contribute not less than $ 16,000.00 per budget year, or an amount as appropriated by the City Council. Action Associates, Inc. will present their annual request to the city in writing, by March 1, of each year, in order that said request may be reviewed by the city staff and City Council during the annual budget process.

If the general conditions outlined above are acceptable, please sign at return to the office of the City Manager.

_____ Date:_____
For Action Associates

_____ Date:_____

Respectfully,

Steve Hewitt
City Manager