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**Memorandum of Understanding**  
**Scotts Bluff County General Assistance**

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This Memorandum of Understanding (MOU) is made and entered by and between Community Action Partnership of Western Nebraska, hereinafter referred to as "CAPWYN" and the Scotts Bluff County Board of Commissioners, hereinafter referred to as "Scotts Bluff County", to be effective December 1, 2024.

For and in consideration of the covenants and agreements contained herein, and for their mutual benefits, the parties agree as follows:

**CAPWYN:**

Will administer the Scotts Bluff County General Assistance fund on behalf of the county, following the Scotts Bluff County General Assistance guidelines and in compliance with County -Medical and General Assistance program under sections 68-104, 68-114, 68-115, 68-126 and 68-131, Reissue Revised Statutes of Nebraska, 1943. CAPWYN will staff the program with property trained employee(s) that are subject to random drug screens, that have been cleared through the State of Nebraska Central Registry of Offenses Against Children and Dependent Adults, State and Federal criminal history background and State of Nebraska Motor Vehicle Operator Record checks. All services provided under this agreement will be in compliance with the Title VI of the Civil Rights Act which provides that no recipient of services provided by this agreement shall be discriminated against on the basis of race, color, creed, national origin, ethnic background, sex, age, or disability.

**Scotts Bluff County:**

Agrees to pay CAPWYN, \$1,150 per month, or \$8,050 for county fiscal year 2024-2025 and hereinafter \$13,800 for the following years, to staff and administer the General Assistance fund, plus reimburse CAPWYN for expenditures made on behalf of those qualified individuals as outlined in the Scotts Bluff County General Assistance guidelines. CAPWYN will provide the county with a quarterly accounting of those expenditures. Amount of assistance will be determined by the County during the budget process.

The parties further agree that either party may cancel and terminate this MOU, upon thirty (30) days written notice to the other party.

IN WITNESS WHEREOF, the parties have executed this MOU in the year and on the day set forth below.

COMMUNITY ACTION PARTNERSHIP OF WESTERN NEBRASKA:

Signature\_\_\_\_\_Date\_\_\_\_\_