Sample ICMA/State Sponsor Agreement

Joint Support of Range Rider Program

This letter of agreement sets forth the understanding between ICMA and \_\_\_\_\_\_\_\_ ( ) as to their joint support of a Range Rider program for the state of \_\_\_\_\_\_\_\_.

**Term of Agreement**: This agreement shall be for a period through June 30, 20\_\_. It shall be automatically renewed unless canceled by either of the parties, which may be done at any time with 60 days written notice to the other.

**Adherence to ICMA Range Rider Program:** ICMA and the agree to adhere to and follow the “ICMA Range Rider Program, Information, Guidelines and Resources”.

**Appointment of Range Rider**: A specific person or persons will serve as a Range Rider (s) of this program only if jointly appointed by the Executive Director of ICMA and the president of \_\_\_\_\_\_\_\_. The term of the appointment shall be one year, subject to renewal as stated above.

**Reimbursement of Expenses**: The maximum total amount to be expended by the two sponsors shall be established annually, starting with the date of appointment of each Range Rider. For the first year, the maximum amount shall be $\_\_\_\_, to be shared equally between the two sponsors. The addition of future Range Riders and increases in budget will be mutually agreed to by both ICMA and the state sponsor.

**Reports**: The Range Rider will submit at least quarterly written reports to the president of \_\_\_\_\_\_\_\_\_ along with the statement of expenses. These reports will be incorporated into the state sponsor’s invoices to ICMA.

**Appointment of Range Rider**: The Range Rider appointed under this agreement is \_\_\_\_\_\_\_\_.

**Outside Activities**: Nothing in this agreement will preclude an individual appointed as Range Rider to engage in teaching or consulting with state agencies, quasi-public entities, local governments, or regional agencies as long as conflict of interest, as defined in the “ICMA Program Information, Guidelines, and Resources” is avoided.

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 \_\_\_\_\_\_\_\_, President, \_\_\_\_\_\_\_\_ Date

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 Executive Director, ICMA Date