



**CoxHealth Community Partners Program (CCPP) Contract of Agreement**

Please select which CCPP program best meets your needs!

**Option #1: The Employee Discount Card - \$400 donation (or a trade of equal value of goods and/or services to be used in one of the CoxHealth Foundation auctions) to the CoxHealth service fund listed below.**

**Community Partners responsibilities:**

- Honor promotional discount to ALL of CoxHealth employees from May 15<sup>th</sup> of that year, until June 1<sup>st</sup> of the next year.
- Submit the discount information for approval by April 28.
- Payment (or trade agreement) must be made in full by May 15.

**CoxHealth Foundation responsibilities:**

- Approve discount promotion; three-line maximum will be honored for a donation of \$400 (or trade agreement).
- Distribute Employee Discount Card to **all** CoxHealth employees by May 31, 2010.
- Post information on the CoxHealth employee intraweb.

**Option #2: Systemwide Distribution - \$350 donation (or a trade of equal value of goods and/or services to be used in one of the CoxHealth Foundation auctions) to the CoxHealth service fund listed below.**

**Community Partners responsibilities:**

- Honor promotional agreement to all CoxHealth employees for time agreed upon by both parties.
- Submit promotional piece, for approval.
- Provide 2,500 copies of piece no later than the Wednesday before their distribution date.
- Pay in full prior to distribution of promotional piece.

**CoxHealth Foundation responsibilities:**

- Approve discount promotional piece.
- Distribute promotional piece to all payroll pickup sites (not enclosed w/ paychecks).
- Post promotional piece in all departments at clock-in sites or employee information sites.
- Post promotional information on the CoxHealth employee intraweb.

**Options #3: Intraweb Distribution-\$200 donation (or a trade of equal value of goods and/or services to be used in one of the CoxHealth Foundation auctions) to the CoxHealth service fund listed below.**

**Community Partner responsibilities:**

- Provide a jpeg or pdf file of flyer for review by CoxHealth Foundation.
- Flyer must not contain any CoxHealth logo(s).

**CoxHealth Foundation responsibilities:**

- Post flyer on CoxHealth employee intraweb site for 2 consecutive weeks under Community Partner Incentives.

I have read and agree to honor this agreement and understand that as my company receives a service valued at greater than \$250 this is not a tax-deductible donation.

Name: (please print) \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Option: \_\_\_\_\_ Fund for donation: \_\_\_\_\_  
(see catalog of funds)

**PACKAGE OPTIONS:**

**PACKAGE A:**

- **Discount Card & two system-wide distributions--\$900.00.**

**PACKAGE B:**

- **Discount Card, one system-wide distribution and one intraweb distribution: \$800.00.**

**PACKAGE C:**

- **Two system-wide distributions, two intraweb distributions--\$800.00.**