

**Statement of Agreement
For the Use of Facilities as Mass Immunization / Prophylaxis Center**

This agreement is made and entered into between Miami University, Butler County, State of Ohio and the Butler County Health Department (BCHD).

Recitals

Pursuant to the terms of Ohio Revised Code statutes, the BCHD provides public health care, including emergency services in behalf of individuals and families who are potential victims of infectious disease outbreak or disaster. The Miami University Physical Facilities Department is authorized to permit the BCHD to use the facilities, equipment and grounds for administering and/or dissemination of pharmaceuticals and information required in the conduct of BCHD activities, and wishes to cooperate with the BCHD for such purposes.

The parties hereto mutually desire to reach an understanding that will result in making the aforesaid use. Now, therefore, it is mutually agreed between parties as follows:

1. Miami University agrees that, after meeting its responsibilities to its faculty, staff and students it will permit, to the extent of its ability and upon request by the BCHD, the use of its physical facilities by the BCHD as a Mass Immunization / Prophylaxis Center for the victims of infectious disease outbreaks, bio-terrorism incidents, or other disasters.
2. The BCHD agrees that it shall exercise reasonable care in the conduct of its activities in such facilities and further agrees to replace or reimburse the Facility for any supplies or materials that may be used or destroyed by the BCHD in the conduct of its operations in said Mass Immunization/ Prophylaxis Center. No modifications or changes will be made to the facility without the expressed written approval of the Miami University Vice President for Finance and Business Services. Prior to occupancy of the Facility, representatives of both parties will inspect the structure and note any gross damage. Prior to vacating the Facility, representatives of both parties will inspect the structure and note and additional gross damage. BCHD will be responsible for any additional gross damage. Normal wear and tear is the responsibility of the Facility.

In witness thereof, the Miami University has caused this agreement to be executed by the Vice President for Finance and Business Services, and the BCHD has caused this agreement to be executed by the BCHD Director of Administration, said agreement to become effective and operative upon fixing the last signature hereto.

Signatures to Agreement:

Patricia F. Burg
Patricia Burg, Director of Administration

9-25-12
Date

David K. Creamer
Dr. David Creamer, Vice President for
Finance and Business Services

7-17-12
Date

Facility:

Millett Assembly Hall
Name

500 E. Sycamore St
Street

Oxford OH 45056
City State Zip

513-529-2222 (M.U. Police Dept.)
Contact/Emergency number

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For the Use of Facilities as Mass Immunization / Prophylaxis Center

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Recitals

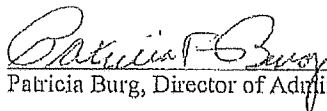
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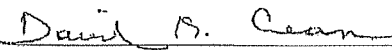
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Signatures to Agreement:


Patricia Burg, Director of Administration

9-25-12
Date


Dr. David Crean, Vice President for
Finance and Business Services

7-17-12
Date

Facility:

Recreational Sports Center
Name

750 S. Oak Street
Street

Oxford OH 45056
City State Zip

513-529-2222 (M.U. Police Dept.)
Contact/Emergency number