

Date

RE: Fiduciary Letter of Agreement

Dear Wayne Metropolitan Community Action Agency:

Per your request, this letter is being sent to acknowledge that **Fiduciary Name** agrees to be the fiduciary for **Organization Name** for the FY2026 Seeding Wayne County Grant Program for the amount of **Enter grant amount here**.

Wayne Metro understands the organizations will enter into their own fiscal sponsor agreement and will not dictate or oversee any fee structure, reporting relationships or liability coverage between them.

The roles and responsibilities for each entity in the fiduciary agreement for the Seeding Wayne County Grant are listed out below:

- **[Entity Name]** is responsible for project implementation
- **[Entity Name]** is responsible for reporting
- **[Fiduciary Name]** is responsible for fund disbursement
- **[Entity Name]** is responsible for purchases
- **[Entity Name]** is responsible for Grant Coordinator interactions.

**[Fiduciary Name]** understands they are ultimately responsible for all other aspects of the Neighborhood Beautification Grant Program and this attachment will not supersede any program or fiscal reporting or compliance required in the Agreement.

If you have any questions or need additional information, please feel free to contact me at Fiduciary Email or Fiduciary phone number

**The contact person's information for the Fiduciary, **[insert fiduciary name here]**, is as follows:**

**Name:**

**Title:**

**Email:**

**Phone:**

*The authorized signatory's contact information, if different than the contact person for the Fiduciary, [insert fiduciary name here] is as follows:*

**Name:**

**Title:**

**Email:**

**Phone:**

Sincerely,

Fiduciary contact person

Fiduciary Organization

## Signature Page

For: Organization Name

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(Signature)

Name:

Title:

Date:

For: Fiduciary Name

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(Signature)

Name:

Title:

Date: