COMMISSIONERS COURT AGENDA

JUNE 11, 2018

Commissioners Court – June 11, 2018

NOTICE OF A MEETING OF THE COMMISSIONERS COURT OF CALDWELL COUNTY, TEXAS



FILED thisday of	fre 20 18
4:20	P P M
CAROL HOLCO	MB
COUNTY CLERK, CALDWELL (COUNTY, TEXAS
By Marieth Schenty	Deputy

Notice is hereby given that an open meeting of the Caldwell County Commissioners Court will be held on the <u>11th day of June, 2018 at 9:00 A.M.</u> in the 2nd Floor Courtroom, Caldwell County Courthouse located at 110 S. Main Street, Lockhart, Texas at which time the following subjects will be discussed, considered, passed or adopted, to wit:

Call Meeting to Order.

Invocation. Lockhart Ministerial Alliance

Pledge of Allegiance to the Flags.

(Texas Pledge: Honor the Texas Flag; I pledge allegiance to thee, Texas, one state under God, one and indivisible).

Announcements. Items or comments from Court members or staff.

<u>Citizens' Comments.</u> At this time any person may speak to Commissioners Court if they have filled out a Caldwell County Commissioners Court Participation Form. Comments will be limited to four (4) minutes per person. No action will be taken on these items and no discussion will be had between the speaker(s) and members of the Court. The Court does retain the right to correct factual inaccuracies made by the speakers. (If longer than 30 minutes, then the balance of comments will continue as the last agenda item of the day).

CONSENT AGENDA. (The following consent items may be acted upon in one motion).

- 1. Approve payment of County invoices in the amount of \$372,752.85.
- 2. Ratify re-occurring County payments in the amount of:
 - A. \$ 299,044.96 (Payroll for 05/16/2018 05/31/2018)
 - B. \$ 88,026.30 (Payroll Tax for 05/16/2018 05/31/2018)
 - C. \$ 31,720.54 (Utilities)
 - D. \$ 187,130.30 (Department of Motor Vehicle Fees)
 - E. \$ 238,817.97 (Texas Motor Vehicle Sales/Use Tax and Surcharge)
 - F. \$ 17,693.31(Texas Motor Vehicle Registration Surcharge/Title Application Fees)
 - G. \$ 1,856.67 (Texas Boat and Boat Motor Sales and Use Tax Report)

- 3. Accept 2018-2019 Proposed Budget for the Asset Forfeiture Fund for the Caldwell County District Attorney's Office.
- 4. Accept the Proposed 2019 Appraisal District and Collection Budgets submitted by the Caldwell County Appraisal District.
- 5. Accept the 2017 US Form 990, Return of Organization Exempt from Income Tax, for Delhi Volunteer Fire Department for the tax year ending December 31, 2017.
- 6. Accept ESD financial reporting from Emergency Services District No. 3 (ESD #3) for Fiscal Year Ending September 30, 2017.

AGENDA ACTION ITEMS

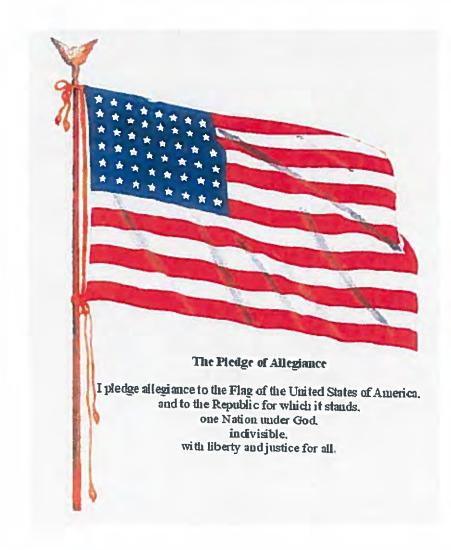
- 7. Discussion/Action regarding the burn ban. Cost: None; Speaker: Judge Schawe/Martin Ritchey; Backup: 4.
- 8. Discussion/Action to consider adopting an order to regulate certain fireworks in the unincorporated areas of the county during the Fourth of July Fireworks period. Cost: None; Speaker: Judge Schawe/Martin Ritchey; Backup: 2.
- Discussion/Action to consider renewing a license agreement with Camp Gladiator for use of the Caldwell County Justice Center parking lot. Cost: None; Speaker: Commissioner Wright; Backup: 4.
- 10. Discussion/Action to execute the renewal of the Central Texas Alternative Dispute Resolution Services Agreement. Cost: None; Speaker: Judge Schawe; Backup: 5.
- 11. Discussion/Action to consider borrowing funds to meet needs of the County. Cost: TBD; Speaker: Judge Schawe/Barbara Gonzales; Backup: 9.
- 12. Discussion/Action regarding County IT Department and hiring IT consultant to review and discuss various needs of the County. Cost: None; Speaker: Judge Schawe; Backup: None.
- 13. Discussion/Action to designate the Purchasing Agent to report to Commissioners Court. Cost: None; Speaker: Judge Schawe; Backup: None.

- 14. Discussion/Action authorizing the County Judge to execute the Feral Hog Program Professional Services Agreement with Texas State Meadows Center for Water and Environment and authorizing the County Judge to execute the Interlocal Agreement by and between Caldwell County and Texas A&M AgriLife Extension Service for the Feral Hog Abatement Program. Cost: None; Speaker: Judge Schawe/Nick Dornak; Backup: 19.
- 15. Discussion/Action authorizing the County Judge to execute the Caldwell County Justice Center Low Impact Development Education Professional Services Agreement with Texas State Meadows Center for Water and the Environment. Cost: Nonc; Speaker: Judge Schawe/Jacque Thomas/Nick Dornak; Backup: 7.
- 16. Discussion/Action to execute the Department of State Health Services Vital Statistics Section Remote Birth Access contract and HHS Enterprise Data Use Agreement. Cost: None; Speaker: Judge Schawe; Backup: 34.
- 17. Discussion/Action regarding the Caldwell County Texas Capital Funds Committee's selection of a Grant Administrator for the Texas Capital Fund (TCF) grant program. Cost: TBD; Speaker: Commissioner Theriot/Jacque Thomas; Backup: 1.
- 18. Discussion/Action regarding process for County acceptance of ownership and maintenance on Greenhouse (private) Road. Cost: TBD; Speaker: Commissioner Theriot; Backup: None.
- 19. <u>EXECUTIVE SESSION</u> pursuant to Sections 551.071 and 551.087 of the Texas Government Code: consultation with counsel and deliberation regarding economic development negotiations associated with Economic Development Administration (EDA) Grant Projects. Possible action may follow in open court. Cost: TBD; Speaker: Commissioner Theriot/Mike Kamerlander; Backup: None.
- 20. Discussion/Action to authorize the County Judge to submit Economic Development Administration (EDA) Grants related to economic development. Cost: TBD; Speaker: Commissioner Theriot; Backup: None.

21. Adjournment.

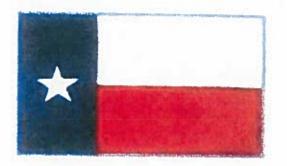
As authorized by Chapter 551 of the Texas Government Code, the Commissioners Court of Caldwell County, Texas reserves the right to adjourn into Executive Session at any time during the course of this meeting to discuss any of the matters listed above The Court may adjourn for matters that may relate to Texas Government Code Section 551 071(1) (Consultation with Attorney about pending or contemplated litigation or settlement offers), Texas Government Code Section 551 071(2) (Consultation with Attorney when the attorney's obligations under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas Conflicts with Chapter 551 of the Texas Government Code Section 551.073 (Deliberations about Gifts and Donations), Texas Government Code Section 551.074 (Personnel Matters), Texas Government Code Section 551.074 (Deliberations about Gifts and Donations), Texas Government Code Section 551.074 (Personnel Matters), Texas Government Code Section 551.074 (Deliberations about Gifts and Donations), Texas Government Code Section 551.074 (Personnel Matters), Texas Government Code Section 551.074 (Deliberations about a County Advisory Body), Texas Government Code Section 551.076 (Deliberations about Security Devices), and Texas Government Code Section 551.087 (Economic Development Negotations) In the event that the Court adjourns into Executive Session, the Court will announce under what section of the Texas Government Code the Commissioners Court is using as its authority to enter into an Executive Session. The meeting facility is wheelchair accessible and accessible

Pledge of Allegiance to the Flag.



(Texas Pledge: Honor the Texas flag; I pledge allegiance to thee, Texas, one state under God, one and indivisible).

Pledge to the Texas Flag



Honor the Texas Flag; I pledge allegiance to thee, Texas, one state under God, one and indivisible

Announcements:

Items or comments from Court Members or Staff

<u>Citizens' Comments:</u>

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CONSENT AGENDA.

(The following consent items may be acted upon in one motion).

1. Approve payment of County invoices in the amount of \$ 372,752.85.



Caldwell County, TX

Expense Approval Register Packet: APPKT02557 - 6/11/18 A/P RUN

Vendor Name	Payable Number	Description (Item)	Account Name	Account Number	Amount
Fund: 001 - GENERAL FUND					
FLEETCOR TECHNOLOGIES, I	NP53352279	CCAD - FUEL USAGE 4/3018	DUE FROM C C A D	001-1260	78.72
NET DATA	52018	MAY 2018	I TICKETS - NET DATA (neede	001-1281	1,480.00
GRAVES, HUMPHRIES, STAHL	52018	COLLECTIONS FOR MAY 201	DUE TO GRAVES, HUMPHRIE	001-2835	8,586.26
				-	10,144.98
Department : 2140 - TAX	ASSESSOR - COLLECTOR				
CALDWELL COUNTY APPRAIS	53118	CUST ID: XGCA COLLECT 20	PROFESSIONAL SERVICES	001-2140-4110	25,233.72
CALDWELL COUNTY APPRAIS	5312018	CUST ID: GCA 2018 QTR-3	PROFESSIONAL SERVICES	001-2140-4110	89,779.75
DARLA LAW	5312018	MILEAGE FOR 5/1 - 31/18	TRANSPORTATION	001-2140-4260	203.83
	3312010	Million 5/1 - 51/16		ASSESSOR - COLLECTOR Total:	115,217.30
			Department 2240-144	ASSESSOR COLLECTOR TOTAL	113,617.30
Department : 3200 - DIST					
FLEETCOR TECHNOLOGIES, I	NP53352279	DA - FUEL USAGE 4/3018-5/	TRANSPORTATION	001-3200-4260	153.93
			Department 32	00 - DISTRICT ATTORNEY Total:	153.93
Department : 3220 - DIST	RICT CLERK				
DEWITT POTH & SON	538323-0	CUST # 12430 TAPE, CORREC	OFFICE SUPPLIES	001-3220-3110	118.69
			Departmen	t 3220 - DISTRICT CLERK Total:	118.69
Department : 3230 - DIST	RICT JUDGE				
JANA CLIFT-WILLIAMS	17-FL-046 6	CAUSE # 17-FL-046 S.M.D.	ADULT - INDIGENT ATTORNE	001-3230-4160	84.00
JANA CLIFT-WILLIAMS	17-FL-184 1	CAUSE # 17-FL-184 M.M.	ADULT - INDIGENT ATTORNE	001-3230-4160	287.00
JANA CLIFT-WILLIAMS	17-FL-307 6	CAUSE # 17-FL-307 K.M.H. /	ADULT - INDIGENT ATTORNE	001-3230-4160	112.00
JANA CLIFT-WILLIAMS	17-FL-458 2	CAUSE # 17-FL-458 M.M.	ADULT - INDIGENT ATTORNE	001-3230-4160	133.00
JUDITH BOHR	18-FL-081 1	CAUSE # 18-FL-081 C.C.	ADULT - INDIGENT ATTORNE	001-3230-4160	463.40
THE LAW OFFICES OF CARRIE	18-FL-118 2	CAUSE # 18-FL-118 B.B.S.B.	ADULT - INDIGENT ATTORNE	001-3230-4160	434.00
JANA CLIFT-WILLIAMS	18-FL-163	CAUSE # 18-FL-163 M.A. / R.	ADULT - INDIGENT ATTORNE	001-3230-4160	119.00
ROBIN BRAME	5312018	DAY IN COURT 5/31/18 DOC	TRANSPORTATION	001-3230-4260	41.42
				3230 - DISTRICT JUDGE Total:	1,673.82
Department : 3240 - COU					
HOLLIS BURKLUND	17-J-2659	CAUSE # 17-J-2659 / 18-J-26	JUVENILE - INDIGENT ATTOR	001-3240-4180	3,000.00
COLIN WISE	2671-18CC	CAUSE # 2671-18CC S.P.	JUVENILE - INDIGENT ATTOR	001-3240-4180	275.00
THE LAW OFFICE OF TREY HI	2678-18CC	CAUSE # 2678-18CC P.D.M.	JUVENILE - INDIGENT ATTOR	001-3240-4180	300.00
DAN MCCORMACK	2681-18CC	CAUSE # 2681-18CC R.D.W.	JUVENILE - INDIGENT ATTOR	001-3240-4180	500.00
DAN MCCORMACK	2683-18CC	CAUSE # 2683-18CC V.V.	JUVENILE - INDIGENT ATTOR	001-3240-4180	300.00
AISHA WHITE-THOMPSON, C	14-672	CAUSE # 46530 DEWARD CU	ADULT - ATTY LITIGATION EX	001-3240-4080	464.50
	14 072	0.03. 1 40350 0201110 00		10 - COUNTY COURT LAW Total:	4,839.50
			beparentent se-		4,000100
Department : 4300 - COU					
OFFICE DEPOT	132756240001	ACCT # 43682634 DIVIDER, 1	OPERATING SUPPLIES	001-4300-3130	65.03
OFFICE DEPOT	132750453001	ACCT # 43682634 DIVIDER, I	OPERATING SUPPLIES	001-4300-3130	84,93
DEWITT POTH & SON	537239-0	CUST # 12430 SPOTPAPER	OPERATING SUPPLIES	001-4300-3130	208.50
OFFICE DEPOT	138779086001	ACCT # 43682634 MARKER,	OPERATING SUPPLIES	001-4300-3130	51.60
CALDWELL COUNTRY FORD	JKD11085	2018 FORD F-150 VIN # 1FTE	MACHINERY AND EQUIPME	001-4300-5310	42,796.00
SPRINT	122236591-110	ACCT # 122236591 4/17 - 5/	TELEPHONE	001-4300-4420	37,99
DEWITT POTH & SON	538655-0	CUST # 12430 SPOTPAPER	OPERATING SUPPLIES	001-4300-3130	208.50
CARD SERVICE CENTER	62018	ENDING WITH # 0057	TRAINING	001-4300-4810	3,102.70
FLEETCOR TECHNOLOGIES, I	NP53352279	CCSO - FUEL USAGE 4/3018-	TRANSPORTATION	001-4300-4260	8,476.57
BRIAN BARRINGTON	700446	CATCH 2 COWS ON CAT BRA	OPERATING SUPPLIES	001-4300-3130	500 00
CHIEF SUPPLY CORPORATIO	2454	ACCT # 217513 CLASSIC 6 S	River Patrol Equipment & Un	001-4300-4970	337.02
CAPITAL AREA COUNCIL OF	2018RTA 869	INTERACTING W/DRIVERS W	TRAINING	001-4300-4810	72.00
			Department	4300 - COUNTY SHERIFF Total:	55,940.84
	JNTY JAIL				
Department : 4310 - COL			ODEDATING CLIDDUIEC	001-4310-3130	308.39
Department : 4310 - COL GT DISTRIBUTORS, INC.	INV0657111	CUST # 000297 PEERLESS -	OPERATING SUPPLIES	001-4310-3130	500.55
•	INV0657111 104196	CUST # 000297 PEERLESS - BANANAS EA	FOOD SUPPLIES	001-4310-3100	56.80

Expense Approval Register

Vendor Name **Payable Number** PFG-TEMPLE 9144720 FERRIS JOSEPH PRODUCE, IN SYSCO CENTRAL TEXAS, INC UNIFIRST CORPORATION FERRIS JOSEPH PRODUCE, IN FERRIS JOSEPH PRODUCE, IN **PFG-TEMPLE** FLOWERS BAKING CO. OF SA FERRIS JOSEPH PRODUCE, IN SYSCO CENTRAL TEXAS, INC FERRIS JOSEPH PRODUCE, IN **PFG-TEMPLE** FERRIS JOSEPH PRODUCE, IN SYSCO CENTRAL TEXAS, INC FERRIS JOSEPH PRODUCE, IN FERRIS JOSEPH PRODUCE, IN **PFG-TEMPLE** FLOWERS BAKING CO. OF SA FERRIS JOSEPH PRODUCE, IN FERRIS JOSEPH PRODUCE, IN SYSCO CENTRAL TEXAS, INC SYSCO CENTRAL TEXAS, INC. M.B. HAMMO ENTERPRISES, FERRIS JOSEPH PRODUCE, IN FARMER BROTHERS. CO. **PFG-TEMPLE PFG-TEMPLE** FERRIS JOSEPH PRODUCE, IN SYSCO CENTRAL TEXAS, INC SYSCO CENTRAL TEXAS, INC CARD SERVICE CENTER CARD SERVICE CENTER UNIFIRST CORPORATION FERRIS JOSEPH PRODUCE, IN PEG-TEMPLE FLEETCOR TECHNOLOGIES, I FLOWERS BAKING CO. OF SA FERRIS JOSEPH PRODUCE, IN **OFFICE DEPOT** FLOWERS BAKING CO. OF SA FERRIS JOSEPH PRODUCE, IN ANITA ROSE MANCINI-MICH SYSCO CENTRAL TEXAS, INC SYSCO CENTRAL TEXAS, INC M.B. HAMMO ENTERPRISES, MARK'S PLUMBING PARTS

FLEETCOR TECHNOLOGIES, T	NP53552279
RYAN JAMES SANDERS	032312
Department : 4322 - CON	STARIES - PCT 2
separation involution	5170225-1012
FLEETCOR TECHNOLOGIES, I	NP53352279

Department: 4323 - CONSTABLES - PCT 3 FLEETCOR TECHNOLOGIES, I NP53352279

Department: 4324 - CONSTABLES - PCT 4 CARD SERVICE CENTER 62018

Packet: APPKT02557 - 6/11/18 A/P RUN

			,
 Description (Item)	Account Name	Account Number	Amount
CUST # 435577 DRY GROCE	FOOD SUPPLIES	001-4310-3100	701.32
PINK LADY 138 CT	OPERATING SUPPLIES	001-4310-3130	374.20
CUST # 043430 DAIRY / MEA	FOOD SUPPLIES	001-4310-3100	2,420.79
CUST # 222727 RTE # F6140	OPERATING SUPPLIES	001-4310-3130	59.30
BANANAS EA	FOOD SUPPLIES	001-4310-3100	155.80
BANANAS EA	FOOD SUPPLIES	001-4310-3100	128.30
CUST # 435577 DRY GROCER	FOOD SUPPLIES	001-4310-3100	710,94
CUST # 0040078309 MIC 20	FOOD SUPPLIES	001-4310-3100	318,24
POTATOES 5/10 LB BAGGED	FOOD SUPPLIES	001-4310-3100	29.00
CUST # 043430 DAIRY / MEA	FOOD SUPPLIES	001-4310-3100	2,326.09
BANANAS EA	FOOD SUPPLIES	001-4310-3100	131.55
CUST # 435577 DRY GROCER	FOOD SUPPLIES	001-4310-3100	574.53
ICEBERG 24 CT	FOOD SUPPLIES	001-4310-3100	295.20
CUST # 043430 DAIRY / MEA	FOOD SUPPLIES	001-4310-3100	2,658.57
25 LB X 5X5 TOMATOES XLG	FOOD SUPPLIES	001-4310-3100	151.50
BANANAS	FOOD SUPPLIES	001-4310-3100	144.80
CUST # 435577 DRY GROCE	FOOD SUPPLIES	001-4310-3100	572.62
CUST # 0040078309 MIC 20	FOOD SUPPLIES	001-4310-3100	318.24
FUJI APPLES 138 CT	FOOD SUPPLIES	001-4310-3100	47.00
BANANAS EA	FOOD SUPPLIES	001-4310-3100	47.0C 52.3C
CUST # 043430 CHEMICAL /	OPERATING SUPPLIES	001-4310-3130	
CUST # 043430 DAIRY / MEA	FOOD SUPPLIES	001-4310-3100	165.48
TOILET PAPER REGULAR / RO			2,555.00
RED CABBAGE LB	OPERATING SUPPLIES	001-4310-3130 001-4310-3100	512.93
ACCT # 6302473 ICETEA / C	FOOD SUPPLIES		92.80
CUST # 435577 DRY GROCE	FOOD SUPPLIES	001-4310-3100	511.00
	FOOD SUPPLIES	001-4310-3100	838.54
CUST # 435577 DRY GROCE	FOOD SUPPLIES	001-4310-3100	-35.62
ICEBERG 24 CT	FOOD SUPPLIES	001-4310-3100	340.50
CUST # 043430 DAIRY / MEA	FOOD SUPPLIES	001-4310-3100	2,638.96
CUST # 043430 CAN & DRY	FOOD SUPPLIES	001-4310-3100	11.45
ENDING WITH # 0057	OPERATING SUPPLIES	001-4310-3130	301.5E
ENDING WITH # 0057	OPERATING SUPPLIES	001-4310-3130	310.5€
CUST # 222727 RTE # F6140	OPERATING SUPPLIES	001-4310-3130	59.30
BANANAS EA	FOOD SUPPLIES	001-4310-3100	153.80
CUST # 435577 DRY GROCER	FOOD SUPPLIES	001-4310-3100	797.81
JAIL - FUEL USAGE 4/3018-5/	TRANSPORTATION	001-4310-4260	1,265.42
CUST # 0040078309 MIC 20	FOOD SUPPLIES	001-4310-3100	357.12
BANANAS EA	FOOD SUPPLIES	001-4310-3100	167.30
ACCT # 43682634 DRUM, M	OPERATING SUPPLIES	001-4310-3130	162.95
CUST # 0040078309 MIC 20		001-4310-3100	318.24
50 LB JUMBO YELLOW ONIO	FOOD SUPPLIES	001-4310-3100	38.00
EVALUATION L-3 - LOWE, BI	EMPLOYEE PHYSICALS	001-4310-4135	175.00
CUST # 043430 CHEMICAL &		001-4310-3130	298.70
CUST # 043430 DAIRY / MEA		001-4310-3100	3,048.79
TOILET PAPER REGULAR / RO		001-4310-3130	784.0:
CUST ID: 278898 CHICAGO	REPAIRS & MAINTENANCE		289.75
	Depar	tment 4310 - COUNTY JAIL Total:	29,235.9:
CONFT 1 FUEL DEADE 4 100	TRANSDORTATION	001 4334 4325	105 6
CONST 1 - FUEL USAGE 4/30		001-4321-4260	425.64
LIGHT INSTALL	MACHINERY AND EQUIPME		350.00
	Department	4321 - CONSTABLES - PCT 1 Total:	775.64
CONST 2 - FUEL USAGE 4/30	TRANSPORTATION	001-4322-4260	149.5;
CONST 2-FOEL 03AGE 4/30		4322 - CONSTABLES - PCT 2 Total:	149.5.
	vepartment	4522 - CONSTABLES - PUT 2 TOTAI:	143.2
CONST 3 - FUEL USAGE 4/30	TRANSPORTATION	001-4323-4260	601.80
-940 B - 1 0 - 1 0 - 1 0 - 1 20		4323 - CONSTABLES - PCT 3 Total:	601.8
	e charmidit		001.01
ENDING WITH # 0057	OFFICE SUPPLIES	001-4324-3110	35.3(
	erresserres	001-4754.9110	22,21

Expense Approval Register				Packet: APPKT02557 - 6/:	11/18 A/P RUN
Vendor Name	Payable Number	Description (Item)	Account Name	Account Number	Amount
FLEETCOR TECHNOLOGIES, I	NP53352279	CONST 4 - FUEL USAGE 4/30	TRANSPORTATION	001-4324-4260	417.12
100				24 - CONSTABLES - PCT 4 Total:	452.42
Department : 4325 - HIGI	HWAY PATROL				
APPLIED CONCEPTS, INC.	328583	COUNTING UNIT	RENTALS	001-4325-4610	287.50
			Department 4	325 - HIGHWAY PATROL Total:	287.50
Department : 6510 - NON	I-DEPARTMENTAL				
O'BANNON FUNERAL HOME	42918	JOHN JOSEPH GRIGAR III DO	AUTOPSY	001-6510-4123	550.00
DENTON NAVARRO ROCHA	23833	DNRB & Z ACCT # 25241 LEG	PROFESSIONAL SERVICES	001-6510-4110	2,575.00
CALDWELL COUNTY TAX ASS	1085	TITLE CHANGE FOR VIN 1085	MISCELLANEOUS	001-6510-4850	16.75
XEROX CORPORATION	1175723	CONTRACT # 010-0063777-0	RENTALS	001-6510-4610	3,824.00
XEROX CORPORATION	1175723	CONTRACT # 010-0063777-0	RENTALS	001-6510-4610	56.11
RICHARD AVILA	52018	STAR FUNK HOUSE DOS: 5/	AUTOPSY	001-6510-4123	300.00
			Department 6510	- NON-DEPARTMENTAL Total:	7,321.86
Department : 6520 - BUII	LDING MAINTENANCE				
JOHN DEERE FINANCIAL	1805-102788	ACCT # 1-99 WELD - I/M 1/4	BUILDING MAINTENANCE-LO	001-6520-3600	8.68
LOCKHART - TRUE VALUE	23534/1	HEX KEY	L.W.SCOTT ANNEX-LOCKHAR	001-6520-3540	58.60
LOCKHART - TRUE VALUE	23559/1	BALL VALVE, HOLE STRAP, SX	BUILDING MAINTENANCE-LO	001-6520-3600	42.87
LOCKHART - TRUE VALUE	23591/1	FORG BYPASS PRUNER	REPAIRS & MAINTENANCE	001-6520-4510	20.99
SMITH SUPPLY CO LOCKHA	770514	DRIP SOAKER, INLINE DRIPPE	JUDICIAL CENTER-LOCKHART	001-6520-3550	30.45
UNIFIRST CORPORATION	822 2077553	CUST # 222727 RTE # F2900	LULING ANNEX	001-6520-3510	42.85
CINTAS CORPORATION #86	086737392	BUILDING MAINT UNIFORMS	UNIFORMS	001-6520-3140	55.68
LOCKHART - TRUE VALUE	23616/1	PVC CUTTING TOOL, ELBOW,	CALDWELL CO. COURTHOUS	001-6520-5120	22.73
LOCKHART - TRUE VALUE	23618/1	STEPLADDER, LED STR LIGHT,	REPAIRS & MAINTENANCE	001-6520-4510	222.59
LOCKHART - TRUE VALUE LOCKHART - TRUE VALUE	23619/1	WHT 90DEG SXS EII, WHT SXS	CALDWELL CO. COURTHOUS	001-6520-5120	8.30
UNIFIRST CORPORATION	23634/1 822 2078821	V116 4X43/4 T PLATES, SCE CUST # 222727 RTE # G420	BUILDING MAINTENANCE-LO	001-6520-3600	83.53
AG-PRO COMPANIES	P18573	BLADE, TRAY	JP3 SIMON BUILDING-MAXW MACHINERY AND EQUIPME	001-6520-3500 001-6520-5310	39.05 89.40
CENTURY A/C SUPPLY	9285675	R-410A 25LB REFRIGERANT,	REPAIRS & MAINTENANCE	001-6520-4510	291.99
LOCKHART - TRUE VALUE	23675/1	2WY CONNECTOR, RUBB HO	JUDICIAL CENTER-LOCKHART	001-6520-3550	94.74
LOCKHART - TRUE VALUE	23679/1	4" FLT CORNER IRON, SCRE	REPAIRS & MAINTENANCE	001-6520-4510	8.19
CINTAS CORPORATION #86	086728205	UNIFORMS	UNIFORMS	001-6520-3140	48.35
DANIELLE M. PETROSKY	52018	MILEAGE FOR 4/23 - 5/9/18	TRANSPORTATION	001-6520-4260	75.87
LOCKHART - TRUE VALUE	23701/1	8X8X16 REGULAR BLOCK, YE	MARKET ST. ANNEX-LOCKHA	001-6520-3530	26.35
SMITH SUPPLY CO.+ LOCKHA	771411	BLICK 8X8X16 HEAVY, 2 HOL	MARKET ST. ANNEX-LOCKHA	001-6520-3530	10.80
UNIFIRST CORPORATION	822 2079823	CUST # 222727 RTE F2900 P	LULING ANNEX	001-6520-3510	42.85
LOCKHART + TRUE VALUE	CM0000563	8X8X16 REGULAR BLOCK - C	MARKET ST. ANNEX-LOCKHA	001-6520-3530	+13.93
LOCKHART - TRUE VALUE	23724/1	ACRY CANOP DIVERTHANDL	REPAIRS & MAINTENANCE	001-6520-4510	6.99
LOCKHART - TRUE VALUE	23739/1	NYL GDN HOSE, TOUNGE &	REPAIRS & MAINTENANCE	001-6520-4510	80.97
SMITH SUPPLY CO LOCKHA	771637	GELL CELL 12V 7AMP	REPAIRS & MAINTENANCE	001-6520-4510	67.80
SMITH SUPPLY CO LOCKHA	771643	12 VOLT BATTERY	CALDWELL CO. COURTHOUS	001-6520-5120	66.65
SMITH SUPPLY CO LOCKHA	771669	CROSS PVC, BUSING PVC, BA	BUILDING MAINTENANCE-LO	001-6520-3600	40.15
SMITH SUPPLY CO LOCKHA	771694	VINYL TUBING, HOSE, PVC NI	BUILDING MAINTENANCE-LO	001-6520-3600	24.00
SMITH SUPPLY CO LOCKHA	771717	ELL PVC, EXPND COMP COUP	BUILDING MAINTENANCE-LO	001-6520-3600	6.40
LOCKHART - TRUE VALUE LOCKHART - TRUE VALUE	23755/1	BPCHR LEV FAUCET/POP UP	LIWISCOTT ANNEX-LOCKHAR	001-6520-3540	59.99
SMITH SUPPLY CO LOCKHA	23761/1 771782	GDN HOSE, SOLV CEMENT, P BIFEN I/T 40Z	CALDWELL CO. COURTHOUS	001-6520-5120	75.41
SMITH SUPPLY CO LOCKHA	CM0000564	12 VOLT BATTERY, REF INV	REPAIRS & MAINTENANCE CALDWELL CO. COURTHOUS	001-6520-4510 001-6520-5120	15.95 -66.65
CARD SERVICE CENTER	62018	ENDING WITH # 0057	JUDICIAL CENTER-LOCKHART	001-6520-3550	135.68
UNIFIRST CORPORATION	822 2081711	CUST # 222727 RTE # F6110	CALDWELL CO. COURTHOUS	001-6520-5520	217.45
UNIFIRST CORPORATION	822 2082049	CUST # 222727 RTE # F2900	LULING ANNEX	001-6520-3510	42.8
FLEETCOR TECHNOLOGIES, I	NP53352279	MAINT - FUEL USAGE 4/3018	TRANSPORTATION	001-6520-4260	454.9:
ROBERT MADDEN, INC.	4286569	CUST # 2621 BORESCOPE	REPAIRS & MAINTENANCE	001-6520-4510	272.00
UNIFIRST CORPORATION	822 2083351	CUST # 222727 PRCT # 3	JP3 SIMON BUILDING-MAXW	001-6520-3500	39.05
LOCKHART - TRUE VALUE	23479/1	GE 2PK 32W K&b LGT BULB	L.W.SCOTT ANNEX-LOCKHAR	001-6520-3540	19.9
THYSSENKRUPP ELEVATOR	572018	CONTRACT # U533395 (C201	REPAIRS & MAINTENANCE	001-6520-4510	499.00
LOCKHART - TRUE VALUE	23498/1	AA BATTERY, FOIL TAPE, SxS	CALDWELL CO. COURTHOUS	001-6520-5120	30.9!
CINTAS CORPORATION #86	086732513	UNIFORMS	UNIFORMS	001-6520-3140	55.6
LOCKHART - TRUE VALUE	23513/1	DRYER CORD, FLUSH OUTLET	BUILDING MAINTENANCE-LO	001-6520-3600	33.0
LOCKHART - TRUE VALUE	23523/1	ARO COUPLER, NPTM PLUG,	BUILDING MAINTENANCE-LO	001-6520-3600	25.71

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Expense Approval Register Vendor Name	Payable Number	Description (Item)	Account Name	Packet: APPKT02557 - 6/1 Account Number	1/18 A/P RUN Amount
	•				
SMITH SUPPLY CO LOCKHA	769956	BREAKER 30 AMP	BUILDING MAINTENANCE-LO	001-6520-3600	23.95
CENTRAL TEXAS REFUSE, INC	118338	ACCT # 020545 SITE: 9675	JP3 SIMON BUILDING-MAXW	001-6520-3500	100.40
UNIFIRST CORPORATION	822 2084002	CUST # 222727 RTE # F6110	CALDWELL CO. COURTHOUS	001-6520-5120	220.71
			Department 6520 - 8	UILDING MAINTENANCE Total:	3,860.02
Department : 6550 - ELEC					
ELECTION SYSTEMS & SOFT	1044640	ACCT # C04192 ELECTION R	Ballot Supplies	001-6550-3115	3,023.71
ELECTION SYSTEMS & SOFT	1044640	ACCT # C04192 ELECTION R	Ballot Supplies	001-6550-3115	-206.00
DEWITT POTH & SON	538300-0	CUST # 12430 LGL CANARY Y	OFFICE SUPPLIES	001-6550-3110	139.50
			Depart	ment 6550 - ELECTIONS Total:	2,957.21
Department : 6570 - VET	ERAN SERVICE OFFICER				
CARD SERVICE CENTER	62018	ENDING WITH # 0057	TRAINING	001-6570-4810	198.46
AL DOS SANTOS	52518	TRAINING WITH TVC IN SAN	TRAINING	001-6570-4810	191.45
AL DOS SANTOS	53018	TRAINING W/ TVC IN SAN A	TRAINING	001-6570-4810	106.21
			Department 6570 - VE	TERAN SERVICE OFFICER Total:	496.12
Department : 6640 - COD	E INVESTIGATOR				
FLEETCOR TECHNOLOGIES, I	NP53352279	CODE ENF FUEL USAGE 4/3	TRANSPORTATION	001-6640-4260	258.30
			Department 664	0 - CODE INVESTIGATOR Total:	258.30
Department : 6650 - EME	ERG MGNT / HOMELAND SEC				
O'REILLY AUTOMOTIVE, INC.	0642-205888	CUST # 188092 ALTERNATO	REPAIRS & MAINTENANCE	001-6650-4510	-495.70
FLEETCOR TECHNOLOGIES, I	NP53352279	EMG MGMT - FUEL USAGE 4	TRANSPORTATION	001-6650-4260	404.27
O'REILLY AUTOMOTIVE, INC.	0642-203821	CUST # 188092 ALTERNATO	REPAIRS & MAINTENANCE	001-6650-4510	432.82
O'REILLY AUTOMOTIVE, INC.	0642-204364	CUST # 188092 ALTERNATO	REPAIRS & MAINTENANCE	001-6650-4510	62.88
O'REILLY AUTOMOTIVE, INC.	0642-204457	CUST # 188092 PULLER	REPAIRS & MAINTENANCE	001-6650-4510	78.98
O'REILLY AUTOMOTIVE, INC.	0642-204490	CUST # 188092 PULLER	REPAIRS & MAINTENANCE	001-6650-4510	-78.98
O'REILLY AUTOMOTIVE, INC.	0642-204713 R	CUST # 188092 WARRANTY	REPAIRS & MAINTENANCE	001-6650-4510	-0.01
O'REILLY AUTOMOTIVE, INC.	0642-204713	CUST # 188092 ORGIN INV #	REPAIRS & MAINTENANCE	001-6650-4510	0.01
			Department 6650 - EMERG	MGNT / HOMELAND SEC Total:	404.27
Department : 7600 - ANI	MAL CONTROL				
CITY OF LOCKHART	ASL 18-009	LEASE PAYMENT JUNE 2018	ANIMAL CONTROL EXPENSES	001-7600-4114	965.50
				7600 - ANIMAL CONTROL Total:	965.50
Department : 7610 - SAN	UTATION DEPARTMENT		•		
FLEETCOR TECHNOLOGIES, I	NP53352279	SANITATION - FUEL USAGE 4	TRANSPORTATION	001-7610-4260	115.4(
		SAMILATION - I DEE DEADE 4		NITATION DEPARTMENT Total:	115.4(
			bepartment rozo s		11,71
Department : 7620 - COL					
O'BANNON FUNERAL HOME	51018	MICHAEL WALKER, DOD: 5/1	INDIGENT FUNERAL	001-7620-4320	821.00
			Department	7620 - COUNTY WELFARE Total:	821.0(
Department : 8700 - COL	JNTY AGENT				
JULIE ZIMMERMAN	52418	STATE MEETING 5/21-23/1	MILEAGE REIMB- ADH DEMO	001-8700-4251	97.3
JULIE ZIMMERMAN	52418	STATE MEETING 5/21-23/1	TRANSPORTATION	001-8700-4260	97.3
JULIE ZIMMERMAN	52418	STATE MEETING 5/21 -23/1	TRAINING	001-8700-4810	51.00
JULIE ZIMMERMAN	52418	STATE MEETING 5/21-23/1	TRAINING	001-8700-4810	50.00
FLEETCOR TECHNOLOGIES, I	NP53352279	EXT AGENT - FUEL USAGE 4/	TRANSPORTATION	001-8700-4260	134.6
ELSIE LACY	53018	AGENT MEETING 5/23/18	TRAINING	001-8700-4810	101.00
			Departmen	t 8700 - COUNTY AGENT Total:	531.4;
			Fi	und 001 - GENERAL FUND Total:	237,322.9
Fund: 002 - UNIT ROAD FUND	>				
Department : 1101 - ADI	MINISTRATION				
HANSON EQUIPMENT	264453	O-RING FACE FEMALE, HOSE,	OPERATING SUPPLIES	002-1101-3130	101.4
HANSON EQUIPMENT	264460	SCREEN FUEL BOWL, CORSS	OPERATING SUPPLIES	002-1101-3130	123.3
SMITH SUPPLY CO LOCKHA	769019	CAR SCREW 5/16 X 3-1/4	OPERATING SUPPLIES	002-1101-3130	19.1
SCHMIDT & SONS, INC	0431031-IN	CUST # 05-CALDCO TEXAS L	FUEL	002-1101-3163	5,176.1
HANSON EQUIPMENT	264705	YOKE M6 1-3/4 20-SPL W/ZE	OPERATING SUPPLIES	002-1101-3130	176.6
HOFMANN'S SUPPLY	461397	CUST # 01734 75 ARG/25C0	RENTALS	002-1101-4610	348.3
LOCKHART - TRUE VALUE	235552 /1	CUST # 11239 1.88 X 54.6 Y	OPERATING SUPPLIES	002-1101-3130	75.9
LOCKHART - TRUE VALUE	23570 /1	CUST # 11239 12" 1/4" .043	OPERATING SUPPLIES	002-1101-3130	41.9
LOCKHART - TRUE VALUE	23571 /1	CUST # 11239 12" 1/4" .04	OPERATING SUPPLIES	002-1101-3130	-41.9
COLORADO MATERIALS, LTD.	250535	CUST # 1405 HOMANN ROA	AGGREGATE / GRAVEL	002-1101-3153	9,091.9

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Expense Approval Register				Packet: APPKT02557 - 6/11	L/18 A/P RUN
Vendor Name	Payable Number	Description (Item)	Account Name	Account Number	Amount
COLORADO MATERIALS, LTD.	250536	CUST # 1405 OLD KELLEY RO	AGGREGATE / GRAVEL	002-1101-3153	11,320.10
COLORADO MATERIALS, LTD.	250537	CUST # 1405 SPOKE HOLLO	AGGREGATE / GRAVEL	002-1101-3153	5,420.08
COLORADO MATERIALS, LTD.	250538	CUST # 1405 WILLIAMSON R	AGGREGATE / GRAVEL	002-1101-3153	9,156.72
SMITH SUPPLY CO LOCKHA	770575	18" X 30' METAL CULVERT 1	CULVERT PIPE	002-1101-3116	434.70
BRAUNTEX MATERIALS, INC.	93568	CMCL TYP, TYPE A/B	FLEX BASE MATERIALS	002-1101-3143	15,698.40
GLOSSERMAN AUTOMOTIVE	091673	CUST # 1010 32 PREMIUM B	LUBRICANTS	002-1101-3170	71.82
LOCKHART - TRUE VALUE	23601/1	LABOR, CLEANED GEAR HEA	OPERATING SUPPLIES	002-1101-3130	30.00
YOUNGBLOOD AUTOMOTIV	254657	SERVICE CALL	TIRES	002-1101-3190	1,940.45
HANSON EQUIPMENT	264823	EXPANSION COOLANT TANK	OPERATING SUPPLIES	002-1101-3130	41.29
HANSON EQUIPMENT	264843	FLASHER RELAY/4-WAY	OPERATING SUPPLIES	002-1101-3130	86.60
CINTAS CORPORATION #86	086737380	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	183.07
CINTAS CORPORATION #86	086737381	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	101.70
CINTAS CORPORATION #86	5716718	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	332.90
LOCKHART - TRUE VALUE	23651 /1	CUST # 11239 5/32 SWISS FI	OPERATING SUPPLIES	002-1101-3130	5.99
SMITH SUPPLY CO LOCKHA	770992	DEMON WP 4 - 9.5 CRM PER	OPERATING SUPPLIES	002-1101-3130	25.90
PATHMARK TRAFFIC PROD.	027547	6' GALV CHANNEL POST, 6X1	SIGNS	002-1101-3181	2,526.00
LOCKHART - TRUE VALUE	23671/1	PRUNER, SHELF BRACKET, TI	OPERATING SUPPLIES	002-1101-3130	672.64
SOUTHERN TIRE MART, LLC	63249833	CUST # 142726 TRANSFORC	TIRES	002-1101-3190	374.88
CINTAS CORPORATION #86	086728194	CONTRACT # 01681 ACC# 01	UNIFORMS	002-1101-2140	341.12
CINTAS CORPORATION #85	086728196	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	183.07
CINTAS CORPORATION #86	086728197	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	138.74
HANSON EQUIPMENT	264478	HOSE, O-RING FACE FEM, O-	OPERATING SUPPLIES	002-1101-3130	51.96
HANSON EQUIPMENT	264490	TIRE REPAIR, SHD SCREW M6	TIRES	002-1101-3190	37.13
COLORADO MATERIALS, LTD.	250859	CUST # 1405 HOMANN ROA	AGGREGATE / GRAVEL	002-1101-3153	9,186.21
COLORADO MATERIALS, LTD.	250860	CUST # 1405 SPOKE HOLLO	AGGREGATE / GRAVEL	002-1101-3153	8,638.03
SMITH SUPPLY CO LOCKHA	771374	CAR SCREW 5/16 X 2-1/2 10	OPERATING SUPPLIES	002-1101-3130	298.50
BRAUNTEX MATERIALS, INC.	93712	TPE A/B FLEX MATERIAL	FLEX BASE MATERIALS	002-1101-3143	11,221.20
SMITH SUPPLY CO LOCKHA	771485	CAR SCREW 5/16 X 3	OPERATING SUPPLIES	002-1101-3130	45.8C
CINTAS CORPORATION #86	086742429	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	306.02
CINTAS CORPORATION #86	086742430	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	183.07
CINTAS CORPORATION #86	086742431	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	138.74
HANSON EQUIPMENT	265034	JIC 37 FEM SWIV, HOSE, 14.9	OPERATING SUPPLIES	002-1101-3130	158.26
JOHN DEERE FINANCIAL	1805-112953	GRVLOCK PLIER SET	OPERATING SUPPLIES	002-1101-3130	23.99
LOCKHART - TRUE VALUE	23769 /1	CUST # 11239 .325 63G RA	OPERATING SUPPLIES	002-1101-3130	23.99
LOCKHART - TRUE VALUE	23770 /1	CUST # 11239 14" 1/4" .043	OPERATING SUPPLIES	002-1101-3130	24.95
SMITH SUPPLY CO LOCKHA	769259	POLY LEAF RAKE LP18	OPERATING SUPPLIES	002-1101-3130	8.95
SMITH SUPPLY CO LOCKHA	769272	CAR SCREW 5/16 X 3	OPERATING SUPPLIES	002-1101-3130	45.00
CINTAS CORPORATION #86	086747293	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	320.00
CINTAS CORPORATION #86	086747294	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	183.07
CINTAS CORPORATION #86	086747297	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	138.74
HANSON EQUIPMENT	264541	MOUNT TIRE	TIRES	002-1101-3190	10.00
HANSON EQUIPMENT	264579	GASKET/WATER PUMP, FLY	OPERATING SUPPLIES	002-1101-3130	1,394.90
HANSON EQUIPMENT	264614	FLAT TIRE REPAIR, RADIAL TI	TIRES	002-1101-3190	72.1{
CINTAS CORPORATION #86	086732496	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	406-82
CINTAS CORPORATION #86	086732497	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	185.32
CINTAS CORPORATION #86	086732498	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1101-2140	138.74
			Department	1101 - ADMINISTRATION Total:	97,440.61
Department : 1102 - VEH	ICLE MAINTENANCE				
O'REILLY AUTOMOTIVE, INC.	0642-200235	OIL FILTER	SUPPLIES & SMALL TOOLS	002-1102-3136	8.18
O'REILLY AUTOMOTIVE, INC.	CM0000561	OIL FILTER	SUPPLIES & SMALL TOOLS	002-1102-3136	-8.8!
O'REILLY AUTOMOTIVE, INC.	CM0000560	IGN COIL, SPARK PLUG CREDI	SUPPLIES & SMALL TOOLS	002-1102-3136	-50.84
O'REILLY AUTOMOTIVE, INC.	0642-203236	FUEL/WATER	SUPPLIES & SMALL TOOLS	002-1102-3136	13.0:
CAPITOL AUTO PARTS	07L05160	CUST # L310 EPA BATTERY F	SUPPLIES & SMALL TOOLS	002-1102-3136	1,499.6
CAPITOL AUTO PARTS	07L05231	CUST # L310 CORE RETURN	SUPPLIES & SMALL TOOLS	002-1102-3136	-251.0(
CAPITOL AUTO PARTS	07LO5322	CUST # 1310 EPA BATTERY F	SUPPLIES & SMALL TOOLS	002-1102-3136	161.9
CAPITOL AUTO PARTS	07LO5344	CUST # L310 BATTERY (HV)	SUPPLIES & SMALL TOOLS	002-1102-3136	-402.7(
GLOSSERMAN AUTOMOTIVE	091639	ACCT # 1010 GLASS CLEANE	SUPPLIES & SMALL TOOLS	002-1102-3136	182.7(
RDO EQUIPMENT CO.	P65036	ACCT # 7269004 LAMP	SUPPLIES & SMALL TOOLS	002-1102-3136	106.0
RDO EQUIPMENT CO.	P65037	ACCT # 7269004 WEATHERS	SUPPLIES & SMALL TOOLS	002-1102-3136	254.8
O'REILLY AUTOMOTIVE, INC.	0642-205723	VALVE	SUPPLIES & SMALL TOOLS	002-1102-3136	20.6

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Expense Approval Register

Expense Approval Register				Packet: APPKT02557 - 6/11	/18 A/P RUN
Vendor Name	Payable Number	Description (Item)	Account Name	Account Number	Amount
CAPITOL AUTO PARTS	07LO5828	CAUSE # L310 EPA BATTERY	SUPPLIES & SMALL TOOLS	002-1102-3136	161.99
GLOSSERMAN AUTOMOTIVE	091672	CUST # 1010 NAPAGOLD AIR	SUPPLIES & SMALL TOOLS	002-1102-3136	230.30
AG-PRO COMPANIES	P18557	WELDMENT, PIN, FLATWASH	SUPPLIES & SMALL TOOLS	002-1102-3136	227,80
AG-PRO COMPANIES	P18558	BLADE BOLT KIT	SUPPLIES & SMALL TOOLS	002-1102-3136	463.90
O'REILLY AUTOMOTIVE, INC.	0642-206071	O2 SENSOR	SUPPLIES & SMALL TOOLS	002-1102-3136	51.19
RUSH TRUCK CENTER	3010578127	CUST # 121177 SERIAL # 3FR	REPAIRS & MAINTENANCE	002-1102-4510	2,719.61
OVERALL SUPPLY, INC	IN00098839	CUST A/C # 166242 BRAKE	SUPPLIES & SMALL TOOLS	002-1102-3136	362.16
CAPITOL AUTO PARTS	07LO7770	CUST # L310 ORIG EQUIP AL	SUPPLIES & SMALL TOOLS	002-1102-3136	227.39
O'REILLY AUTOMOTIVE, INC.	0642-203378	CABLE TIE	SUPPLIES & SMALL TOOLS	002-1102-3136	17.98
O'REILLY AUTOMOTIVE, INC.	0642-206719	MINI LAMP	SUPPLIES & SMALL TOOLS	002-1102-3136	2.52
O'REILLY AUTOMOTIVE, INC.	0642-206946	HAND PUMP	SUPPLIES & SMALL TOOLS	002-1102-3136	70.09
GLOSSERMAN AUTOMOTIVE	091869	FLASHER - ELECTRONIC	SUPPLIES & SMALL TOOLS	002-1102-3136	33.40
BOEHM TRACTOR SALES, INC	CT166243	CC UNIT ROAD	SUPPLIES & SMALL TOOLS	002-1102-3136	46.42
O'REILLY AUTOMOTIVE, INC.	0642-207068	STARTER, CORE CHARGE	SUPPLIES & SMALL TOOLS	002-1102-3136	139.62
GLOSSERMAN AUTOMOTIVE	091904	FLASHER-ELECTRONIC	SUPPLIES & SMALL TOOLS	002-1102-3136	33.40
O'REILLY AUTOMOTIVE, INC.	CM0000562	CORE RETURN	SUPPLIES & SMALL TOOLS	002-1102-3136	-10.00
O'REILLY AUTOMOTIVE, INC. O'REILLY AUTOMOTIVE, INC.	0642-207223 0642-207271	BRAKE ROTOR OIL FILTER	SUPPLIES & SMALL TOOLS	002-1102-3136	202.44
O'REILLY AUTOMOTIVE, INC.	0642-207385	ADAPTER, CAPSULE	SUPPLIES & SMALL TOOLS SUPPLIES & SMALL TOOLS	002-1102-3136 002-1102-3136	14.07 54.52
O'REILLY AUTOMOTIVE, INC.	0642-208349	5-20 1QT MOTOR OIL, 10-30	SUPPLIES & SMALL TOOLS	002-1102-3136	129.24
O'REILLY AUTOMOTIVE, INC.	0642-203722	IGN COIL, SPARK PLUG 2002	SUPPLIES & SMALL TOOLS	002-1102-3136	50.84
O'REILLY AUTOMOTIVE, INC.	0642-203724	GREASE FTG	SUPPLIES & SMALL TOOLS	002-1102-3136	15.98
O'REILLY AUTOMOTIVE, INC.	0642-204277	80Z ANTISEIZE, 36MLTHRDL	SUPPLIES & SMALL TOOLS	002-1102-3136	31.98
O'REILLY AUTOMOTIVE, INC.	0642-204281	14 OZ. BRAKECLN	SUPPLIES & SMALL TOOLS	002-1102-3136	23.88
SOUTHSIDE WRECKER, INC.	593273	DUMP TRUCK LIC # 128557	REPAIRS & MAINTENANCE	002-1102-4510	327.00
				VEHICLE MAINTENANCE Total:	7,161.44
Department : 1103 - FLE			·		
CAPITOL AUTO PARTS	07LM7739	CUST # L10358 CRMCBRAKE	OPERATING SUPPLIES	002-1103-3135	-33.95
CAPITOL AUTO PARTS	07LN9750	CUST # L10358 BENDIX BRAK	OPERATING SUPPLIES	002-1103-3135	363.90
CAPITOL AUTO PARTS	07LN9991	CUST # L10358 AT FLTR KIT	OPERATING SUPPLIES	002-1103-3135	25.72
CAPITOL AUTO PARTS	07LO0001	CUST # L10358 LISLE	OPERATING SUPPLIES	002-1103-3135	29.99
HENRY'S TOWING SERVICE	02191	2014 FORD LIC # 117-6251	CONTRACT LABOR	002-1103-4529	45.00
CAPITOL AUTO PARTS	07LO6528	CUST # L10358 EXP VALVE /	OPERATING SUPPLIES	002-1103-3135	28.34
CINTAS CORPORATION #86	086737386	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1103-2140	67.20
LOCKHART MOTOR CO., INC.	C110925	2014 FOR EXPLORER REPAIR	CONTRACT LABOR	002-1103-4529	4,633.09
KJ'S AUTO ACCESSORIES	22022	CALDM MUD FLAP	OPERATING SUPPLIES	002-1103-3135	99.98
CINTAS CORPORATION #86	086728201	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1103-2140	65.68
CAPITOL AUTO PARTS	07LO8551	CUST # L10358 FILTER-CABI	OPERATING SUPPLIES	002-1103-3135	85.65
LULING CHEVROLET	100333	VALVE KIT	OPERATING SUPPLIES	002-1103-3135	156.00
GOODYEAR AUTO SERVICE C	226317	TIRES 245/55R18 103V EAGL	TIRES	002-1103-3190	1,105.92
LOCKHART MOTOR CO., INC.	T44024	OXYGEN SENSOR	OPERATING SUPPLIES	002-1103-3135	33.10
CAPITOL AUTO PARTS	07LP0077	CUST # L10358 FUEL CAP	OPERATING SUPPLIES	002-1103-3135	10.73
CINTAS CORPORATION #86	086742436	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1103-2140	65.68
CAPITOL AUTO PARTS	07L01172	CUST # L10358 MOTORCRAF	OPERATING SUPPLIES	002-1103-3135	34.5€
CAPITOL AUTO PARTS	07L01651	CUST # L10358 AIR FILTER -	OPERATING SUPPLIES	002-1103-3135	164.44
CAPITOL AUTO PARTS	07L02442	CUST # L10358 BENDIX SEM	OPERATING SUPPLIES	002-1103-3135	430.08
CAPITOL AUTO PARTS	07L02470	CUST # L10358 BENDIX PRE	OPERATING SUPPLIES	002-1103-3135	47.95
CAPITOL AUTO PARTS CAPITOL AUTO PARTS	07LO2473 07LO2731	CUST # L10358 BENDIX STO	OPERATING SUPPLIES	002-1103-3135	-31.49
CAPITOL AUTO PARTS	07L02909	CUST # L10358 COIL ON PLU CUST # L10358 LUCAS HEAV	OPERATING SUPPLIES OPERATING SUPPLIES	002-1103-3135 002-1103-3135	35.94 12.34
CINTAS CORPORATION #86	086732509	CONTRACT # 01681 ACCT # 0	UNIFORMS	002-1103-2140	64.92
	000/32302			3 - FLEET MAINTENANCE Total:	7,540.81
			·		
			Fur	d 002 - UNIT ROAD FUND Total:	112,142.97
Fund: 010 - GRANT FUND					
Department : 1000 - DEF		CNDIME MATH # 2017		010 1000 4950	40.55
CARD SERVICE CENTER	62018	ENDING WITH # 0057	MISCELLANEOUS-OTHER	010-1000-4850 - - DEPARTMENTS - Header Total:	12.78
.			Department 1000	- PERMINENTS - REAGER FOURI:	12.78
Department : 7700 - SH					
JONES & CARTER, INC.	0257251 #2	#CSJ 0914-22-068 JOB # 129	SH130 Project Fees	010-7700-4070	7,431.59

Expense Approval Register				Packet: APPKT02557 - 6/1	1/18 A/P RUN
Vendor Name	Payable Number	Description (Item)	Account Name	Account Number	Amount
SB CONTRACTORS, LLC	16	CSJ 0914-22-064 3/23 - 5/04	SH130 Project Fees	010-7700-4070 Department 7700 - SH130 Total: Fund 010 - GRANT FUND Total:	15,112.12 22,543.71 22,556.49
Fund: 019 - ADR System Fund CENTRAL TEXAS ALTERNATIV	52018	MAY 2018	DRC Program Fees	019-4000-0400	730.49
				Fund 019 - ADR System Fund Total:	730.49
				Grand Total:	372,752.85

Packet: APPKT02557 - 6/11/18 A/P RUN

Expense Approval Register

	Fund Summary	
Fund	•	Expense Amount
001 - GENERAL FUND		237,322.95
002 - UNIT ROAD FUND		112,142.92
010 - GRANT FUND		22,556.49
019 - ADR System Fund		730.49
	Grand Total:	372,752.85
	Account Summary	
Account Number	Account Name	Expense Amount
001-1260	DUE FROM C C A D	78.72
001-1281	I TICKETS - NET DATA (n	1,480.00
001-2140-4110	PROFESSIONAL SERVICE	115,013.47
001-2140-4260		203.83
001-2835 001-3200-4260	DUE TO GRAVES, HUMP TRANSPORTATION	8,586.26 153.93
001-3220-3110	OFFICE SUPPLIES	118.69
001-3230-4160	ADULT - INDIGENT ATTO	1,632,40
001-3230-4260	TRANSPORTATION	41.42
001-3240-4080	ADULT - ATTY LITIGATIO	464.50
001-3240-4180	JUVENILE - INDIGENT AT	4,375.00
001-4300-3130	OPERATING SUPPLIES	1,118.56
001-4300-4260	TRANSPORTATION	8,476.57
001-4300-4420	TELEPHONE	37.99
001-4300-4810	TRAINING	3,174.70
001-4300-4970	River Patrol Equipment	337.02
001-4300-5310	MACHINERY AND EQUIP	42,796.00
001-4310-3100	FOOD SUPPLIES	24,168.32
001-4310-3130	OPERATING SUPPLIES	3,337.40
001-4310-4135	EMPLOYEE PHYSICALS	175.00
001-4310-4260 001-4310-4510	TRANSPORTATION REPAIRS & MAINTENAN	1,265.42
001-4321-4260	TRANSPORTATION	289.77 425.64
001-4321-5310	MACHINERY AND EQUIP	350.00
001-4322-4260	TRANSPORTATION	149.52
001-4323-4260	TRANSPORTATION	601.80
001-4324-3110	OFFICE SUPPLIES	35.30
001-4324-4260	TRANSPORTATION	417.12
001-4325-4610	RENTALS	287.50
001-6510-4110	PROFESSIONAL SERVICE	2,575.00
001-6510-4123	AUTOPSY	850.00
001-6510-4610	RENTALS	3,880.11
001-6510-4850	MISCELLANEOUS	16.75
001-6520-3140	UNIFORMS	159.71
001-6520-3500	JP3 SIMON BUILDING-M	178.50
001-6520-3510	LULING ANNEX	128.55
001-6520-3530 001-6520-3540	MARKET ST. ANNEX-LOC L.W.SCOTT ANNEX-LOCK	23.22
001-6520-3550	JUDICIAL CENTER-LOCK	138.57 260.87
001-6520-3600	BUILDING MAINTENANC	288.40
001-6520-4260	TRANSPORTATION	530.78
001-6520-4510	REPAIRS & MAINTENAN	1,486.47
001-6520-5120	CALDWELL CO. COURTH	575.55
001-6520-5310	MACHINERY AND EQUIP	89.40
001-6550-3110	OFFICE SUPPLIES	139.50
001-6550-3115	Ballot Supplies	2,817.71
001-6570-4810	TRAINING	495.12
001-6640-4260	TRANSPORTATION	258.30
001-6650-4260	TRANSPORTATION	404.27
001-6650-4510	REPAIRS & MAINTENAN	0.00
001-7600-4114	ANIMAL CONTROL EXPE	965.50

Expense Approval Register

	Account Summary	
Account Number	Account Name	Expense Amount
001-7610-4260	TRANSPORTATION	115.40
001-7620-4320	INDIGENT FUNERAL	821.00
001-8700-4251	MILEAGE REIMB- ADH D	97.37
001-8700-4260	TRANSPORTATION	232.05
001-8700-4810	TRAINING	202.00
002-1101-2140	UNIFORMS	3,281.12
002-1101-3116	CULVERT PIPE	434.70
002-1101-3130	OPERATING SUPPLIES	3,435.26
002-1101-3143	FLEX BASE MATERIALS	26,919.60
002-1101-3153	AGGREGATE / GRAVEL	52,813.09
002-1101-3163	FUEL	5,176.10
002-1101-3170	LUBRICANTS	71.82
002-1101-3181	SIGNS	2,526.00
002-1101-3190	TIRES	2,434.64
002-1101-4610	RENTALS	348.34
002-1102-3136	SUPPLIES & SMALL TOO	4,114.83
002-1102-4510	REPAIRS & MAINTENAN	3,046.61
002-1103-2140	UNIFORMS	263.48
002-1103-3135	OPERATING SUPPLIES	1,493.32
002-1103-3190	TIRES	1,105.92
002-1103-4529	CONTRACT LABOR	4,678.09
010-1000-4850	MISCELLANEOUSOTHE	12.78
010-7700-4070	SH130 Project Fees	22,543.71
019-4000-0400	DRC Program Fees	730.49
	Grand Total:	372,752.85

Project Account Summary

Project Account Key		Expense Amount
None	18	372,752.85
	Grand Total:	372,752.85

Caldwell County, TX

Payment Register APPKT02557 - 6/11/18 A/P RUN

01 - Vendor Set 01

Bank: AP BNK - Po	oled Cash - Ope	aration				
		nation				
Vendor Number	Vendor Name					Total Vendor Amount
AG-PRO	AG-PRO COMP					781.10
Payment Type	Payment Num	ber			Payment Date	Payment Amount
Check					06/06/2018	781.10
Payable Num	ber	Description	Payable Date	Due Date	Discount Amount P	ayable Amount
<u>P18557</u>		WELDMENT, PIN, FLATWASHER, NUT SLOT	05/16/2018	06/11/2018	0.00	227.80
<u>P18558</u>		BLADE BOLT KIT	05/16/2018	06/11/2018	0.00	463.90
<u>P18573</u>		BLADE, TRAY	05/16/2018	06/11/2018	0.00	89.40
Vendor Number	Vendor Name					Total Vendor Amount
AISWHI	AISHA WHITE-1	THOMPSON, CSR, RPR				464.50
Payment Type	Payment Num	ber			Payment Date	Payment Amount
Check					06/06/2018	464.50
Payable Num	ber	Description	Payable Date	Due Date	Discount Amount P	ayable Amount
14-672		CAUSE # 46530 DEWARD CUMMINGS	05/30/2018	06/11/2018	0.00	464.50
Vendor Number	Vendor Name					Total Vendor Amoun
ALDOS	AL DOS SANTO	S				297.6 (
Payment Type	Payment Num	ber			Payment Date	Payment Amount
Check					06/06/2018	297.66
Payable Num	ber	Description	Payable Date	Due Date	Discount Amount P	ayable Amount
<u>52518</u>		TRAINING WITH TVC IN SAN ANTONIO ACCREDITATION T	05/28/2018	06/11/2018	0.00	191.45
<u>53018</u>		TRAINING W/ TVC IN SAN ANTONIO CERT TRAINING	05/30/2018	06/11/2018	0.00	106.21
Vendor Number	Vendor Name					Total Vendor Amoun
ANIMAN		ANCINI-MICHELL				175.0(
Payment Type	Payment Num	ber			Payment Date	
Check					06/06/2018	175.00
Payable Nurr	ıber	Description	Payable Date	Due Date	Discount Amount P	
<u>126</u>		EVALUATION L-3 - LOWE, BING	05/08/2018	06/11/2018	0.00	175.00
Mandan Blumbun						
Vendor Number	Vendor Name					Total Vendor Amoun
APPCON	APPLIED CONC					287.5(
Payment Type	Payment Num	ider			Payment Date	•
Check	- 1	Description	Devel-1 - Dete	D	06/06/2018	287.50
Payable Num	Inet	Description	Payable Date	Due Date	Discount Amount	-
328583		COUNTING UNIT	06/01/2018	06/11/2018	0.00	287.50
Vendor Number	Vendor Name					Total Mandas Amoun
BOETRA						Total Vendor Amoun 46.4
		TOR SALES, INC.			Berne and Date	
Payment Type	Payment Num	iber				Payment Amount
Check		Description	Devel-1- Dete	N. Data	06/06/2018	46.42
Payable Nun CT166243	nder	Description	Payable Date	Due Date	Discount Amount	•
01100245		CC UNIT ROAD	05/22/2018	06/11/2018	0.00	46.42
Vendor Number	Vendor Name					Total Vendor Amoun
BRAMAT		ATERIALS, INC.				
Payment Type	Payment Num				Doursest Date	26,919.6 Payment Amount
Check	, ayment wun	THE G.C.			Payment Date	•
Payable Nun	oher	Description	Pavabla Data	Due Date	06/06/2018 Discoupt Amount	26,919.60 Amount
93568	1164.61	CMCL TYP, TYPE A/B	Payable Date 05/14/2018	Due Date 06/11/2018	Discount Amount I	-
93712		TPE A/B FLEX MATERIAL		06/11/2018	0.00 0.00	15,698.40
33/12			05/21/2018	00/11/2018	0.00	11,221.20

Payment Register					АРРКТ025	57 - 6/11/18 A/P RUN
Vendor Number	Vendor Name	-				Total Vendor Amount
BRIBAR	BRIAN BARRIN					500.00
Payment Type Check	Payment Num	nber			Payment Date	Payment Amount
Payable Num	her	Description	Payable Date	Due Date	06/05/2018 Discount Amount P	500.00
700446	- Angl	CATCH 2 COWS ON CAT BRANCH	05/29/2018	06/11/2018	0.00	500.00
			,,			
Vendor Number	Vendor Name	2				Total Vendor Amount
CALDCO	CALDWELL CO					42,796.00
Payment Type	Payment Nun	nber			Payment Date	Payment Amount
Check Payable Nun	ahar	Description	Payable Date	Due Date	06/06/2018 Discount Amount F	42,796.00
JKD11085		2018 FORD F-150 VIN # 1FTEW1E53JKD11085	05/17/2018	06/11/2018	0.00	42,796.00
<u></u>			,-,	,,+		,,
Vendor Number	Vendor Name	2				Total Vendor Amount
CALAPP	CALDWELL CO	DUNTY APPRAISAL DIST				115,013.47
Payment Type	Payment Nun	nber			Payment Date	
Check Payable Nun	abar	Description	Payable Date	Due Date	06/06/2018 Discount Amount	25,233.72
53118	ibei	CUST ID: XGCA COLLECT 208 QTR-3	05/31/2018	06/11/2018	0.00	25,233.72
Check				00, 11, 2010		·
Payable Nun	nber	Description	Payable Date	Due Date	06/06/2018 Discount Amount	89,779.75 Pavable Amount
5312018		CUST ID: GCA 2018 QTR-3	05/31/2018	06/11/2018	0.00	89,779.75
				• -		·
Vendor Number	Vendor Name	•				Total Vendor Amount
CALTAX		DUNTY TAX ASSESSOR				16.75
Payment Type Check	Payment Nun	nber			Payment Date	•
Payable Nun	nber	Description	Payable Date	Due Date	06/06/2018 Discount Amount	16.75 Pavable Amount
1085		TITLE CHANGE FOR VIN 1085 -SO	05/22/2018	06/11/2018	0.00	16.75
Vendor Number	Vendor Name	e				Total Vendor Amoun
CAPCOG		A COUNCIL OF GOVERNMENTS				72.00
Payment Type	Payment Nur	nber			Payment Date	
Check Payable Nur	nher	Description	Payable Date	Due Date	06/06/2018 Discount Amount I	72.00
2018RTA_86		INTERACTING W/DRIVERS WHO ARE DEAF 3/22/3	•	06/11/2018	0.00	72.00
				,		
Vendor Number	Vendor Name	e				Total Vendor Amoun
AUTPAR	CAPITOL AUT					2,601.54
Payment Type	Payment Nur	mber			·	Payment Amount
Check Payable Nur	nhar	Description	Payable Date	Due Date	06/06/2018 Discount Amount	2,601.54
07LM7739		CUST # L10358 CRMCBRAKEPADS WHRDWR	04/03/2018	04/03/2018	0.00	-33.95
07LN9750		CUST # L10358 BENDIX BRAKE ROTOR	05/01/2018	06/11/2018	0.00	363.90
07LN9991		CUST # L10358 AT FLTR KIT	05/01/2018	06/11/2018	0.00	25.72
07L00001		CUST # L10358 LISLE	05/01/2018	06/11/2018	0.00	29.99
07L01172		CUST # L10358 MOTORCRAFT SPARK PULGS	05/03/2018	06/11/2018	0.00	34.56
07L01651 07L02442		CUST # L10358 AIR FILTER - PARTS PLUS CUST # L10358 BENDIX SEMI-MET BRAKE	05/04/2018	06/11/2018	0.00	164.44
07L02470		CUST # L10358 BENDIX SEMI-MET BRAKE	05/07/2018 05/07/2018	06/11/2018 06/11/2018	0.00 0.00	430.08 47.99
07L02473		CUST # L10358 BENDIX STOP PADS - SEMI	05/07/2018	05/07/2018	0.00	-31.49
07L02731		CUST # L10358 COIL ON PLUG	05/08/2018	06/11/2018	0.00	35.94
07LQ2909		CUST # L10358 LUCAS HEAVY DUTY OIL	05/08/2018	06/11/2018	0.00	12.34
07L05160		CUST # L310 EPA BATTERY FEE	05/14/2018	06/11/2018	0.00	1,499.63
07105231		CUST # 1310 CORE RETURN	05/14/2018	05/14/2018	0.00	-251.00
<u>07L05322</u> 07L05344		CUST # L310 EPA BATTERY FEE CUST # L310 BATTERY (HV)	05/14/2018 05/14/2018	06/11/2018 05/14/2018	0.00 0.00	161.99 -402.70
07L05828		CAUSE # L310 EPA BATTERY FEE	05/15/2018	06/11/2018	0.00	161.99
07LO6528		CUST # L10358 EXP VALVE / ORIFICE TUBE	05/16/2018	06/11/2018	0.00	28.34
07L07770		CUST # L310 ORIG EQUIP ALTERNATOR	05/18/2018	06/11/2018	0.00	227.39

Payment Register					APPKT025	57 - 6/11/18 A/P RUN
07L08551		CUST # L10358 FILTER-CABIN AIR	05/21/2018	06/11/2018	0.00	85.65
07LP0077		CUST # L10358 FUEL CAP	05/23/2018	06/11/2018	0.00	10.73
Vendor Number	Vendor Name					Total Vendor Amount
CARSER	CARD SERVICI	-				4.097.04
Payment Type	Payment Nun	nber			Payment Date	
Check					06/06/2018	4,097.04
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount P	ayable Amount
62018		ENDING WITH # 0057	05/25/2018	06/11/2018	0.00	4,097.04
Vendor Number	Vendor Name					Total Vendor Amount
CENDIS		- AS ALTERNATIVE DISPUTE RESOLUTION, I				730.49
Payment Type	Payment Nur	201 ·			Payment Date	
Check					06/06/2018	730.49
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount P	
52018		MAY 2018	06/05/2018	06/11/2018	0.00	730.49
Vendor Number	Vendor Name					Total Vendor Amount
CENREF		AS REFUSE, INC				100.40
Payment Type	Payment Nur	nber			Payment Date	Payment Amount
Check				B	06/06/2018	100.40
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount P	
<u>118338</u>		ACCT # 020545 SITE: 9675 HIGHWAY 142	06/01/2018	06/11/2018	0.00	100.40
Vendor Number	Vendor Nam	2				Total Vendor Amount
CENAIR	CENTURY A/C	SUPPLY				291.99
Payment Type	Payment Nu	nber			Payment Date	Payment Amount
Check	-				06/06/2018	291.99
Payable Nur	nber	Description	Payable Date	Due Date	Discount Amount P	ayable Amount
9285675		R-410A 25LB REFRIGERANT, THERMOMETER PISTOL	05/17/2018	06/11/2018	0.00	291.99
Vendor Number	Vendor Nam					Total Mandas Amount
CHISUP		= (CORPORATION				Total Vendor Amount 337.02
Payment Type	Payment Nu				Payment Date	
Check					06/06/2018	337.02
Payable Nur	nber	Description	Payable Date	Due Date	Discount Amount	ayable Amount
2454		ACCT # 217513 CLASSIC 6" SIDE-ZIP BOOT,	05/03/2018	06/11/2018	0.00	337.02
(e)						
Vendor Number	Vendor Nam	-				Total Vendor Amount
CINTAS Payment Type	Payment Nu	ORATION #86				
• • • •	Payment Nu					3,704.31
		nber			Payment Date	Payment Amount
Check Pavable Nur	•		Pavahle Nate	Due Date	06/06/2018	Payment Amount 3,704.31
Payable Nur	•	Description	Payable Date 05/02/2018	Due Date 06/11/2018	06/06/2018 Discount Amount	Payment Amount 3,704.31 Payable Amount
	•		05/02/2018	06/11/2018	06/06/2018 Discount Amount F 0.00	Payment Amount 3,704.31 Payable Amount 341.12
Payable Nur 086728194	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619			06/06/2018 Discount Amount	Payment Amount 3,704.31 Payable Amount 341.12 183.07
Payable Nur 086728194 086728196	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681	05/02/2018 05/02/2018	06/11/2018 06/11/2018	06/06/2018 Discount Amount F 0.00 0.00	Payment Amount 3,704.31 Payable Amount 341.12
Payable Nur 086728194 086728196 086728196	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682	05/02/2018 05/02/2018 05/02/2018	06/11/2018 06/11/2018 06/11/2018	06/06/2018 Discount Amount F 0.00 0.00 0.00	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74
Payable Nur 086728194 086728196 086728197 086728201	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 09387 CUST # 09387	05/02/2018 05/02/2018 05/02/2018 05/02/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018	05/05/2018 Discount Amount & 0.00 0.00 0.00 0.00 0.00	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68
Payable Nur 086728194 086728196 086728197 086728201 086728201	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 09387 CUST # 09387 UNIFORMS	05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/02/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	05/05/2018 Discount Amount 8 0.00 0.00 0.00 0.00 0.00 0.00	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68 48.35
Payable Nur 086728194 086728196 086728197 086728201 086728205 086732496 086732497 086732498	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 09387 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682	05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/09/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	05/05/2018 Discount Amount 8 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68 48.35 406.82 185.32 138.74
Payable Nur 086728194 086728196 086728197 086728201 086728205 086732496 086732497 086732498 086732509	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 09387 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682	05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/09/2018 05/09/2018 05/09/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	06/06/2018 Discount Amount 6 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68 48.35 406.82 185.32 138.74 64.92
Payable Nur 086728194 086728196 086728197 086728201 086728205 086732496 086732497 086732498 086732509 086732503	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 09387 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 09387 UNIFORMS	05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	06/06/2018 Discount Amount 6 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68 48.35 406.82 185.32 138.74 64.92 55.68
Payable Nur 086728194 086728196 086728197 086728201 086728205 086732496 086732497 086732498 086732509 086732513 086732513	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 09387 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 01681	05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	06/06/2018 Discount Amount 8 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68 48.35 406.82 185.32 138.74 64.92 55.68 183.07
Payable Nur 086728194 086728196 086728197 086728201 086728201 086728205 086732496 086732497 086732498 086732509 086732509 086732509 08673380 08673381	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CUST # 00000000000000000000000000000000000	05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/16/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	06/06/2018 Discount Amount 8 0.000 0.00	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68 48.35 406.82 185.32 138.74 64.92 55.68 183.07 101.70
Payable Nur 086728194 086728196 086728197 086728201 086728201 086728205 086732496 086732497 086732498 086732509 086732509 086732509 08673380 08673381 08673386	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682	05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/16/2018 05/16/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	06/06/2018 Discount Amount 8 0.000 0.00	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68 48.35 406.82 185.32 138.74 64.92 55.68 183.07 101.70 67.20
Payable Nur 086728194 086728196 086728197 086728201 086728205 086732496 086732496 086732498 086732509 086732513 086737380 086737381 086737386 086737392	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 09387 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01683 CUST # 016	05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/16/2018 05/16/2018 05/16/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	06/06/2018 Discount Amount 8 0.000 0.00	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68 48.35 406.82 185.32 138.74 64.92 55.68 183.07 101.70 67.20 55.68
Payable Nur 086728194 086728196 086728197 086728201 086728205 086732496 086732496 086732498 086732509 086732513 086737380 086737381 086737381 086737382 086737392 086737392	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 09387 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 09387 BUILDING MAINT UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619	05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/16/2018 05/16/2018 05/16/2018 05/16/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	06/06/2018 Discount Amount 8 0.00	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68 48.35 406.82 185.32 138.74 64.92 55.68 183.07 101.70 67.20 55.68 306.02
Payable Nur 086728194 086728196 086728197 086728201 086728205 086732496 086732496 086732498 086732509 086732513 08673380 086737381 086737382 086737381 086737382 086737384 086737384 086737384 086737384 086737384 086737384 086737384 086737384 086737384 086737384 086737384 086737384 086737384 086737384 086737384 086737384 086742430	•	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 09387 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 08619	05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/16/2018 05/16/2018 05/16/2018 05/16/2018 05/16/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	06/06/2018 Discount Amount 8 0.00	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68 48.35 406.82 185.32 138.74 64.92 55.68 183.07 101.70 67.20 55.68 306.02 183.07
Payable Nur 086728194 086728196 086728197 086728201 086728205 086732496 086732496 086732498 086732513 086732513 086732513 086737380 086737381 086737381 086737382 086737382 086742430 086742431	nber	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01681 C	05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/16/2018 05/16/2018 05/16/2018 05/16/2018 05/16/2018 05/23/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	06/06/2018 Discount Amount 8 0.00	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68 48.35 406.82 185.32 138.74 64.92 55.68 183.07 101.70 67.20 55.68 306.02 183.07 138.74
Payable Nur 086728194 086728196 086728197 086728201 086728205 086732496 086732496 086732498 086732509 086732513 086737380 086737381 086737381 086737382 086737392 086742430	nber	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 09387 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 08619	05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/16/2018 05/16/2018 05/16/2018 05/16/2018 05/23/2018 05/23/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	06/06/2018 Discount Amount B 0.00	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68 48.35 406.82 185.32 138.74 64.92 55.68 183.07 101.70 67.20 55.68 306.02 183.07 138.74 65.68
Payable Nur 086728194 086728196 086728197 086728201 086728205 086732496 086732496 086732497 086732498 086732509 086737380 086737381 086737392 086742429 086742430 086742436	nber	Description CONTRACT # 01681 ACC# 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 09387 UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 09387 BUILDING MAINT UNIFORMS CONTRACT # 01681 ACCT # 01681 CUST # 08619 CONTRACT # 01681 ACCT # 01681 CUST # 01681 CONTRACT # 01681 ACCT # 01681 CUST # 01682 CONTRACT # 01681 ACCT # 01681 CUST # 01682	05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/02/2018 05/09/2018 05/09/2018 05/09/2018 05/09/2018 05/16/2018 05/16/2018 05/16/2018 05/16/2018 05/16/2018 05/23/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	06/06/2018 Discount Amount 8 0.00	Payment Amount 3,704.31 Payable Amount 341.12 183.07 138.74 65.68 48.35 406.82 185.32 138.74 64.92 55.68 183.07 101.70 67.20 55.68 306.02 183.07 138.74

Development Development						
Payment Register					APPKT025	57 - 6/11/18 A/P RUN
086747294		CONTRACT # 01681 ACCT # 01681 CUST # 01681	05/30/2018	06/11/2018	0.00	183.07
086747297		CONTRACT # 01681 ACCT # 01681 CUST # 01682	05/30/2018	06/11/2018	0.00	138.74
<u>5716718</u>		CONTRACT # 01681 ACCT # 01681 CUST # 018619	05/16/2018	06/11/2018	0.00	332.90
Vendor Number	Vendor Name					Total Vendor Amount
CITLOC	CITY OF LOCK	HART				965.50
Payment Type	Payment Nun	nber			Payment Date	Payment Amount
Check	•				06/06/2018	965.50
Pavable Nun	nber	Description	Payable Date	Due Date	Discount Amount P	
ASL 18-009		LEASE PAYMENT JUNE 2018	06/01/2018	06/11/2018	0.00	965.50
Vendor Number	Vendor Name	3				Total Vendor Amount
COLWIS	COLIN WISE					275.00
Payment Type	Payment Nun	nber			Payment Date	Payment Amount
Check	•				06/06/2018	275.00
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount P	
2671-18CC		CAUSE # 2671-18CC S.P.	05/18/2018	06/11/2018	0.00	275.00
			03/10/2010	00,11,2010	0.00	275.00
Vendor Number	Vendor Name					Total Vendor Amount
COLMAT		IATERIALS, LTD.				52,813.09
Payment Type	Payment Nur	nber			Payment Date	Payment Amount
Check					06/06/2018	52,813.09
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount P	ayable Amount
<u>250535</u>		CUST # 1405 HOMANN ROAD	05/14/2018	06/11/2018	÷ 0.00	9,091.95
250536		CUST # 1405 OLD KELLEY ROD	05/14/2018	06/11/2018	0.00	11,320.10
250537		CUST # 1405 SPOKE HOLLOW RD	05/14/2018	06/11/2018	0.00	5,420.08
<u>250538</u>		CUST # 1405 WILLIAMSON RD & FM 1854	05/14/2018	06/11/2018	0.00	9,156.72
<u>250859</u>		CUST # 1405 HOMANN ROAD	05/21/2018	06/11/2018	0.00	9,186.21
250860		CUST # 1405 SPOKE HOLLOW RD	05/21/2018	06/11/2018	0.00	8,638.03
Vendor Number	Vendor Nam	8				Total Vendor Amount
DANMCC	DAN MCCORI	MACK				800.00
Payment Type	Payment Nur	nber			Payment Date	Payment Amount
Check	•				06/06/2018	800.00
Payable Nur	nber	Description	Payable Date	Due Date	Discount Amount P	
2681-18CC		CAUSE # 2681-18CC R.D.W.	05/18/2018	06/11/2018	0.00	500.00
2683-18CC		CAUSE # 2683-18CC V.V.	05/18/2018	06/11/2018	0.00	300.00
Vendor Number	Vendor Nam	e				Total Vendor Amount
DANPET	DANIELLE M.	PETROSKY				75.87
Payment Type	Payment Nur				Payment Date	Payment Amount
Check					06/06/2018	75.87
Payable Nur	nber	Description	Payable Date	Due Date	Discount Amount P	
<u>52018</u>		MILEAGE FOR 4/23 - 5/9/18	05/20/2018	06/11/2018	0.00	75.87
	Mar. 1. 14					
Vendor Number	Vendor Nam	8				Total Vendor Amount
DARLAW	DARLA LAW					203.83
Payment Type	Payment Nu	mber			Payment Date	•
Check					06/06/2018	203.83
Payable Nur	nber	Description	Payable Date	Due Date	Discount Amount F	Payable Amount
<u>5312018</u>		MILEAGE FOR 5/1 - 31/18	05/31/2018	06/11/2018	0.00	203.83
Vendor Number	Vendor Nam	e				Total Vendor Amount
DENNAV	DENTON NAV	/ARRO ROCHA BERNAL & ZECH, P.C.				2,575.00
Payment Type	Payment Nu	mber			Payment Date	Payment Amount
Check					06/06/2018	2,575.00
Payable Nur	mber	Description	Payable Date	Due Date	Discount Amount	
23833		DNRB & Z ACCT # 25241 LEGAL SERVICES	05/16/2018	06/11/2018	0.00	2,575.00

Payment Register					APPKT025	57 - 6/11/18 A/P RUN
Vendor Number	Vendor Name					Total Vendor Amount
DEWPOT	DEWITT POTH	& SON				675.19
Payment Type	Payment Num	ber			Payment Date	Payment Amount
Check					06/06/2018	675.19
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount P	ayable Amount
537239-0		CUST # 12430 SPOTPAPER	05/10/2018	05/11/2018	0.00	208.50
<u>538300-0</u>		CUST # 12430 LGL CANARY YELLOW	05/22/2018	05/11/2018	0.00	139.50
538323-0		CUST # 12430 TAPE, CORRECTIN, 10 PC	05/22/2018	06/11/2018	0.00	118.69
538655-0		CUST # 12430 SPOTPAPER	05/24/2018	06/11/2018	0.00	208.50
Vendor Number	Vendor Name					Total Vendor Amount
ELESYS		TEMS & SOFTWARE INC.				2,817,71
Payment Type	Payment Num				Payment Date	2,017.71 Payment Amount
Check	t ayment toom				06/06/2018	2,817.71
Payable Nun	nher	Description	Payable Date	Due Date	Discount Amount P	
1044640		ACCT # C04192 ELECTION REF: 6/30/2018	05/16/2018	06/11/2018	0.00	2,817.71
24			00/10/2010	00/11/2018	0.00	2,017.71
Vendor Number	Vendor Name					Total Vendor Amount
ELSLAC	ELSIE LACY					101.00
Payment Type	Payment Num	ber			Payment Date	Payment Amount
Check					06/06/2018	101.00
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount P	ayable Amount
<u>53018</u>		AGENT MEETING 5/23/18	05/30/2018	06/11/2018	0.00	101.00
Vendor Number	Vendor Name					Total Mandas Assessed
FARBRO	FARMER BROT					Total Vendor Amount
Payment Type	Payment Num				Dourseat Data	1,052.00
Check	Fayment wom				Payment Date	Payment Amount
Payable Nur	nhar	Description	Develate Dete	Due Dete	06/06/2018	1,052.00
67961750	IIUEI	ACCT # 6302473 ICE TEA / COFFEE	Payable Date	Due Date	Discount Amount P	
68000729		ACCT # 6302473 ICETEA / COFFEE	05/10/2018	06/11/2018	0.00	541.00
08000723		ACCT# 0302475 ICETEA7 COFFEE	05/24/2018	06/11/2018	0.00	511.00
Vendor Number	Vendor Name					Total Vendor Amount
FERJOS	FERRIS JOSEPH	PRODUCE, INC.				2,358.85
Payment Type	Payment Num	nber			Payment Date	Payment Amount
Check					06/05/2018	2,358.85
Payable Nur	nber	Description	Payable Date	Due Date	Discount Amount F	
104163		50 LB JUMBO YELLOW ONIONS	05/08/2018	06/11/2018	0.00	38.00
104196		BANANAS EA	05/10/2018	06/11/2018	0.00	56.80
104202		PINK LADY 138 CT	05/11/2018	06/11/2018	0.00	374.20
104249		BANANAS EA	05/12/2018	06/11/2018	0.00	155.80
104259		BANANAS EA	05/14/2018	06/11/2018	0.00	128.30
104269		POTATOES 5/10 LB BAGGED RUSSETS	05/15/2018	06/11/2018	0.00	29.00
104297		BANANAS EA	05/17/2018	06/11/2018	0.00	131.55
104306		ICEBERG 24 CT	05/18/2018	06/11/2018	0.00	295.20
104350		25 LB X 5X5 TOMATOES XLG	05/19/2018	06/11/2018	0.00	151.50
104358		BANANAS	05/21/2018	06/11/2018	0.00	144.80
104369		FUJI APPLES 138 CT	05/22/2018	06/11/2018	0.00	47.00
104380		BANANAS EA	05/23/2018	06/11/2018	0.00	52.30
104395		RED CABBAGE LB	05/24/2018	06/11/2018	0.00	92.80
<u>104405</u>		ICEBERG 24 CT	05/25/2018	06/11/2018	0.00	340.50
104442		BANANAS EA	05/26/2018	06/11/2018	0.00	153.80
104459		BANANAS EA	05/29/2018	06/11/2018	0.00	167.30
Vander Number	Vooder 81					Teast Mandala a
Vendor Number EUEMAN	Vendor Name) CHNOLOGIES, INC				Total Vendor Amoun 12,936.28
Payment Type	Payment Nun				Payment Date	•
Check	. Lymant Hall				06/06/2018	12,936.28
Payable Nu	mber	Description	Payable Date	Due Date	Discount Amount	
NP5335227		FUEL USAGE 4/3018-5/27/18	05/28/2018	06/11/2018	0.00	12,936.28
<u></u>	÷.		A21 501 5010	2011112010	0.00	12,330.20

Doumout Desist					
Payment Register					APPKT02557 - 6/11/18 A/P RUN
Vendor Number	Vendor Name				Total Vendor Amount
<u>BUTBAK</u> Payment Type	Payment Num	ING CO. OF SAN ANTONIO			1,311.84
Check	rayment num				Payment Date Payment Amount 06/06/2018 1.311.84
Payable Num	ber	Description	Payable Date	Due Date	06/06/2018 1,311.84 Discount Amount Payable Amount
103838630		CUST # 0040078309 MIC 20 7" FL TOR	05/08/2018	06/11/2018	0.00 318.24
1038386437		CUST # 0040078309 MIC 20 7" FL TOR	05/15/2018	06/11/2018	0.00 318.24
1038386564		CUST # 0040078309 MIC 20 7" FL TOR	05/22/2018	06/11/2018	0.00 318.24
1038386687		CUST # 0040078309 MIC 20 7" FL TOR	05/29/2018	06/11/2018	0.00 357.12
Vendor Number	Vendor Name				Total Vendor Amount
<u>GLOAUT</u>		AUTOMOTIVE CENTER			551.68
Payment Type	Payment Num	ber			Payment Date Payment Amount
Check Payable Nurr	har	Description	Develate Data	Due Dete	06/06/2018 551.68
091639	iber	ACCT # 1010 GLASS CLEANER 18 OZ	Payable Date	Due Date	Discount Amount Payable Amount
091672		CUST # 1010 BLASS CLEANER 18 02	05/14/2018 05/15/2018	06/11/2018 06/11/2018	0.00 182.76 0.00 230.30
091673		CUST # 1010 NAPAGOLD AIR PILTER CUST # 1010 32 PREMIUM BUG WASH	05/15/2018	06/11/2018	0.00 230.30 0.00 71.82
091869		CUST # 1010 52 FREMION BUG WASH	05/22/2018	06/11/2018	0.00 33.40
091904		FLASHER-ELECTRONIC	05/22/2018	06/11/2018	0.00 33.40
<u> </u>			00/20/2010	00/11/2010	5.50 53.40
Vendor Number	Vendor Name				Total Vendor Amount
GOOAUT	GOODYEAR AL	JTO SERVICE CENTER			1,105.92
Payment Type	Payment Num	ber			Payment Date Payment Amount
Check					06/06/2018 1,105.92
Payable Nun	nber	Description	Paγable Date	Due Date	Discount Amount Payable Amount
226317		TIRES 245/55R18 103V EAGLE	05/21/2018	06/11/2018	0.00 1,105.92
Vendor Number	Vendor Name				Total Vendor Amount
GHSLTD		PHRIES, STAHL, LTD			8,586.26
Payment Type	Payment Num	iber			Payment Date Payment Amount
Check					06/06/2018 8,586.26
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount Payable Amount
<u>52018</u>		COLLECTIONS FOR MAY 2018	06/05/2018	05/11/2018	0.00 8,586.26
Vendor Number	Vendor Name				Total Vendor Amount
GTDIST	GT DISTRIBUT				308.35
Payment Type	Payment Num				Payment Date Payment Amount
Check	-				06/06/2018 308.39
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount Payable Amount
INV0657111		CUST # 000297 PEERLESS - MODEL 700-STANDARD NICK		06/11/2018	0.00 308.39
					36
Vendor Number	Vendor Name				Total Vendor Amoun
HANEQU	HANSON EQU			C	2,253.78
Payment Type	Payment Nurr	iber			Payment Date Payment Amount
Check	-1				06/06/2018 2,253.78
Payable Nun 264453	nper	Description	Payable Date	Due Date	Discount Amount Payable Amount
		O-RING FACE FEMALE, HOSE, O-RING FACE MALE	05/01/2018	06/11/2018	0.00 101.49
<u>264460</u> <u>264478</u>		SCREEN FUEL BOWL, CORSS KIT, TIRE REPAIR HOSE, O-RING FACE FEM, O-RING FACE MALE	05/01/2018	05/11/2018	0.00 123.35
264490		TIRE REPAIR, SHD SCREW M6X15, TIRE PATCH	05/02/2018 05/02/2018	05/11/2018	0.00 51.96
264541		MOUNT TIRE	05/02/2018	06/11/2018 06/11/2018	0.00 37.13 0.00 10.00
264579		GASKET/WATER PUMP, FLYWHEEL, PTO CLUTCH CABLE	05/04/2018	06/11/2018	0.00 1,394.90
264614		FLAT TIRE REPAIR, RADIAL TIRE PATCH, SEAL	05/08/2018	06/11/2018	0.00 72.18
264705		YOKE M6 1-3/4 20-SPL W/ZERT	05/10/2018	06/11/2018	0.00 176.62
264823		EXPANSION COOLANT TANK	05/15/2018	06/11/2018	0.00 41.29
264843		FLASHER RELAY/4-WAY	05/15/2018	06/11/2018	0.00 86.60
265034		JIC 37 FEM SWIV, HOSE, 14.9-24 REPAIR, TUBE	05/23/2018	06/11/2018	0.00 158.26
		2			

Payment Register					APPKT02557 - 6/11/18 A/P RUN
Vendor Number	Vendor Name	2			Total Vendor Amount
HENTOW	HENRY'S TOW	/ING SERVICE			45.0C
Payment Type	Payment Nun	nber			Payment Date Payment Amount
Check		3			06/06/2018 45.00
Payable Num	iber	Description	Payable Date	Due Date	Discount Amount Payable Amount
<u>02191</u>		2014 FORD LIC # 117-6251	05/16/2018	06/11/2018	0.00 45.00
Vendor Number	Vendor Name	٩			Total Vendor Amount
HOFSUP	HOFMANN'S	_			348.34
Payment Type	Payment Nur	nber			Payment Date Payment Amount
Check	·				06/06/2018 348.34
Payable Num	ıber	Description	Payable Date	Due Date	Discount Amount Payable Amount
461397		CUST # 01734 75 ARG/25C02 277 CUFT	05/10/2018	06/11/2018	0.00 348.34
Vendor Number	Vendor Name	a			Total Vendor Amount
HOLBUR	HOLLIS BURKI	-			3,000.00
Payment Type	Payment Nur				Payment Date Payment Amount
Check					06/06/2018 3,000.00
Payable Nurr	ıber	Description	Payable Date	Due Date	Discount Amount Payable Amount
17 <u>J-2659</u>		CAUSE # 17-J-2659 / 18-J-2669 J.R.K.	05/18/2018	06/11/2018	0.00 3,000.00
<u> </u>			00/ 20/ 2020	00, 11, 2010	0.00 3,000.00
Vendor Number	Vendor Name	e			Total Vendor Amoun
JANWIL	JANA CLIFT-W	VILLIAMS			735.00
Payment Type	Payment Nur	mber			Payment Date Payment Amount
Check					06/06/2018 735.00
Payable Nurr	nber	Description	Payable Date	Due Date	Discount Amount Payable Amount
<u>17 FL 046 6</u>		CAUSE # 17-FL-046 S.M.D.	05/17/2018	06/11/2018	0.00 84.00
<u>17-FL-184 1</u>		CAUSE # 17-FL-184 M.M.	05/17/2018	06/11/2018	0.00 287.00
<u>17-FL-307 6</u>		CAUSE # 17-FL-307 K.M.H. / K.D.H.	05/17/2018	06/11/2018	0.00 112.00
<u>17-FL-458_2</u>		CAUSE # 17-FL-458 M.M.	05/17/2018	06/11/2018	0.00 133.00
<u>18-FL-163</u>		CAUSE # 18-FL-163 M.A. / R.A.	05/17/2018	06/11/2018	0.00 119.00
Vendor Number	Vendor Nam	e			Total Vendor Amoun
FARPLA	JOHN DEERE	FINANCIAL			32.6
Payment Type	Payment Nur	mber			Payment Date Payment Amount
Check	•				06/06/2018 32.67
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount Payable Amount
1805-102788	8	ACCT # 1-99 WELD - I/M 1/4 X 1/4" FNPT	05/10/2018	06/11/2018	0.00 8.68
1805-112953	3	GRVLOCK PLIER SET	05/24/2018	06/11/2018	0.00 23.99
Vendor Number	Vendor Nam	-			Total Vendor Amoun
JONCAR	JONES & CAR				7,431.5
Payment Type	Payment Nu	mber			Payment Date Payment Amount
Check					06/06/2018 7,431.59
Payable Nun		Description	Payable Date	Due Date	Discount Amount Payable Amount
<u>0257251 #2</u>		#CSJ 0914-22-068 JOB # 12942-001-00	05/17/2018	06/11/2018	0.00 7,431.59
Vendor Number	Vendor Nam	e S			Total Vendor Amoun
JUDBOH	JUDITH BOHR	-			463.4
Payment Type	Payment Nu				Payment Date Payment Amount
Check					06/06/2018 463.40
Payable Nur	nber	Description	Payable Date	Due Date	Discount Amount Payable Amount
<u>18-FL-081_1</u>		CAUSE # 18-FL-081 C.C.	05/17/2018	06/11/2018	0.00 463.40
Vendor Number	Vendor Nam				**
JULZIM	JULIE ZIMME				Total Vendor Amoun 295.7
Payment Type	Payment Nu				295.7 Payment Date Payment Amount
Check					06/06/2018 295.74
Payable Nur	nber	Description	Payable Date	Due Date	Discount Amount Payable Amount
52418		STATE MEETING 5/21-23/18	05/24/2018	06/11/2018	0.00 295.74
10 PR. 1 PR. 11					0.00 20014

Daymont Docistor					5 DD1/7007	
Payment Register	M				АРРКТО255	57 - 6/11/18 A/P RUN
Vendor Number KISAUT	Vendor Name KJ'S AUTO ACCI	ECCODIEC				Total Vendor Amount
Payment Type	Payment Numl				Payment Date	99.98 Payment Amount
Check	: ayment nam				06/06/2018	99.98
Payable Num	ber	Description	Payable Date	Due Date	Discount Amount Pa	
22022		CALDM MUD FLAP	05/18/2018	06/11/2018	0.00	99.98
Vendor Number	Vendor Name					Total Vendor Amount
LOCTRU	LOCKHART - TR					1,741.62
Payment Type	Payment Num	ber			Payment Date	Payment Amount
Check		Description	Designation Designation		06/06/2018	1,741.62
Payable Num		Description	Payable Date	Due Date	Discount Amount Pa	•
<u>23479/1</u> 23498/1		GE 2PK 32W K&b LGT BULB	05/07/2018	06/11/2018	0.00	19.98
23498/1		AA BATTERY, FOIL TAPE, SXS COUPLING	05/08/2018	06/11/2018	0.00	30.95
23513/1		DRYER CORD, FLUSH OUTLET, RISE COVER	05/09/2018	06/11/2018	0.00	33.06
23534/1		ARO COUPLER, NPTM PLUG, GALV HEX BUSHING, PVC AI		05/11/2018	0.00	25.76
<u>235552 /1</u>		HEX KEY, ALK BATTERY, ELONG WD TOIL SEAT CUST # 11239 1.88 X 54.6 YDS PACK TAPE	05/10/2018 05/11/2018	06/11/2018 06/11/2018	0.00	58.60 75.94
<u>23559/1</u> 23559/1		BALL VALVE, HOLE STRAP, SXSXS TEE, HOSE CLAMPS	05/11/2018	06/11/2018	0.00	75.94 42.87
23570 /1		CUST # 11239 12" 1/4" .043 PICCO MICRO LOOP	05/11/2018	06/11/2018	0.00	42.87
23570 /1		CUST # 11239 12 1/4 .043 PICCO MICRO LOOP	05/14/2018	05/11/2018	0.00	-41.98
23591/1		FORG BYPASS PRUNER	05/14/2018	05/14/2018	0.00	-41.98 20.99
23601/1		LABOR, CLEANED GEAR HEAD, OIL PUMP, TUNED UNIT	05/15/2018	06/11/2018	0.00	30.00
23616/1		PVC CUTTING TOOL, ELBOW, RUBB STOPPER, PIPE CEME	05/16/2018	06/11/2018	0.00	22.73
23618/1		STEPLADDER, LED STR LIGHT, ORNAM PULL, RESID TUBE	05/16/2018	06/11/2018	0.00	222.59
23619/1		WHT 90DEG SXS EII, WHT SXS COUPLING	05/16/2018	06/11/2018	0.00	8.30
23634/1		V116 4X43/4 T PLATES, SCEWS, NUTS & BOLTS	05/16/2018	06/11/2018	0.00	83.53
23651 /1		CUST # 11239 5/32 SWISS FILES	05/17/2018	06/11/2018	0.00	5.99
23671/1		PRUNER, SHELF BRACKET, TISSUE HOLDER, SHELF	05/18/2018	06/11/2018	0.00	672.64
23675/1		2WY CONNECTOR, RUBB HOSE WASHER, SOAKER HOSE	05/18/2018	06/11/2018	0.00	94.74
23679/1		4" FLT CORNER IRON, SCREWS, NUTS & BOLTS	05/18/2018	06/11/2018	0.00	8.19
23701/1		8X8X16 REGULAR BLOCK, YELLOW BIN	05/21/2018	06/11/2018	0.00	26.35
23724/1		ACRY CANOP DIVERTHANDLE	05/22/2018	06/11/2018	0.00	6.99
<u>23739/1</u>		NYL GDN HOSE, TOUNGE & GROOVE PLIER, WETDRY VAC		05/11/2018	0.00	80.97
23755/1		BPCHR LEV FAUCET/POP UP	05/24/2018	06/11/2018	0.00	59.99
23761/1		GDN HOSE, SOLV CEMENT, PRPL PRIMER, PLUG, GATE VA	05/24/2018	06/11/2018	0.00	75.41
23769 /1		CUST # 11239 .325 63G RAPID MICRO COMFORT 3	05/25/2018	06/11/2018	0.00	23.99
<u>23770 /1</u>		CUST # 11239 14" 1/4" .043 PICCO MICRO LOOP	05/25/2018	06/11/2018	0.00	24.99
<u>CM0000563</u>		8X8X16 REGULAR BLOCK - CREDIT RETURN	05/21/2018	05/21/2018	0.00	-13.93
Vendor Number	Vendor Name					Total Vendor Amount
LOCMOT	LOCKHART MC	DTOR CO., INC.				4,666.19
Payment Type	Payment Num	ber			Payment Date	Payment Amount
Check					06/06/2018	4,666.19
Payable Nurr	nber	Description	Payable Date	Due Date	Discount Amount P	ayable Amount
<u>C110925</u>		2014 FOR EXPLORER REPAIR	05/16/2018	06/11/2018	0.00	4,633.09
<u>T44024</u>		OXYGEN SENSOR	05/22/2018	06/11/2018	0.00	33.10
Vendor Number	Vendor Name					Total Vendor Amount
LULCHE	LULING CHEVR					156.0C
Payment Type	Payment Num	iber			Payment Date	Payment Amount
Check					06/06/2018	156.00
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount P	•
<u>100333</u>		VALVE KIT	05/21/2018	06/11/2018	0.00	156.00
Vendor Number	Vendor Name					Total Vendor Amoun
ICOJAN		ENTERPRISES, LLC				1,296.96
Payment Type	Payment Num	nber			Payment Date	
Check					06/06/2018	1,296.96
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount P	*
4951		TOILET PAPER REGULAR / ROSES	05/09/2018	06/11/2018	0.00	784.03

Payment Register					
					APPKT02557 - 6/11/18 A/P RUN
<u>5032</u>		TOILET PAPER REGULAR / ROSES	05/23/2018	06/11/2018	0.00 512.93
Vendor Number	Vendor Name				Total Vendor Amount
MARPLU	MARK'S PLUM	BING PARTS			289.77
Payment Type	Payment Num	ber			Payment Date Payment Amount
Check					06/06/2018 289.77
Payable Num		Description	Payable Date	Due Date	Discount Amount Payable Amount
INV00170846	52	CUST ID: 278898 CHICAGO MVP UPPER & LOWER CARTF	05/09/2018	06/11/2018	0.00 289.77
Vendor Number	Vendor Name				Total Vendor Amount
NETDAT	NET DATA				1,480.00
Payment Type	Payment Num	ber			Payment Date Payment Amount
Check					06/06/2018 1,480.00
Payable Num	iber	Description	Payable Date	Due Date	Discount Amount Payable Amount
<u>52018</u>		MAY 2018	06/05/2018	06/11/2018	0.00 1,480.00
Vendor Number	Vendor Name				Total Vendor Amount
OBAFUN	O'BANNON FU				1,371.00
Payment Type	Payment Num	ber			Payment Date Payment Amount
Check		B 1			06/06/2018 1,371.00
Payable Num	iper	Description	Payable Date	Due Date	Discount Amount Payable Amount
<u>42918</u> 51018		JOHN JOSEPH GRIGAR III DOD: 4/29/18 DOS: 4/29/18	04/29/2018	06/11/2018	0.00 550.00
21010		MICHAEL WALKER, DOD: 5/10/18 DOS: 5/25/18	05/10/2018	06/11/2018	0.00 821.00
Vendor Number	Vendor Name				Total Vendor Amount
OFFIDE	OFFICE DEPOT				364.51
Payment Type	Payment Num	ber			Payment Date Payment Amount
Check					06/06/2018 364.51
Payable Nun		Description	Payable Date	Due Date	Discount Amount Payable Amount
1327504530		ACCT # 43682634 DIVIDER, INDEX, 8 TAB/4PK, AST	04/30/2018	06/11/2018	0.00 84.93
1327562400		ACCT # 43682634 DIVIDER, IM, 8 TAB, CLEARVIEW	04/28/2018	06/11/2018	0.00 65.03
<u>1344954710</u> 1387790860		ACCT # 43682634 DRUM, MFC8300, DR400	05/03/2018	05/11/2018	0.00 162.95
1307730800	<u></u>	ACCT # 43682634 MARKER, CHISEL, SHARPIE, BL	05/16/2018	05/11/2018	0.00 51.60
Vendor Number	Vendor Name				Total Vendor Amount
<u>O'REIL</u>	O'REILLY AUTO				776.52
<u>O'REIL</u> Payment Type					776.52 Payment Date Payment Amount
O'REIL Payment Type Check	O'REILLY AUTO Payment Num	ber	Develle Deve	D	776.52 Payment Date Payment Amount 06/06/2018 776.52
<u>O'REIL</u> Payment Type Check Payable Nun	O'REILLY AUTO Payment Num	Description	Payable Date	Due Date	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount
O'REIL Payment Type Check Payable Nun 0642-200235	O'REILLY AUTO Payment Num	Description OIL FILTER	04/14/2018	06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18
O'REIL Payment Type Check Payable Nun 0642-200235 0642-203236	O'REILLY AUTO Payment Num	ber Description OIL FILTER FUEL/WATER	04/14/2018 05/01/2018	06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 13.03
O'REIL Payment Type Check Payable Nun 0642-200235 0642-203236 0642-203378	O'REILLY AUTO Payment Num	ber Description OIL FILTER FUEL/WATER CABLE TIE	04/14/2018 05/01/2018 05/02/2018	06/11/2018 06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 13.03 0.00 17.98
O'REIL Payment Type Check Payable Nun 0642-200235 0642-203236	O'REILLY AUTO Payment Num	ber Description OIL FILTER FUEL/WATER	04/14/2018 05/01/2018	06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 13.03 0.00 17.98 0.00 50.84
<u>O'REIL</u> Раумент Туре Check Рауаble Nun 0642-200235 0642-203236 0642-203378 0642-203378 0642-203722	O'REILLY AUTO Payment Num nber	ber OiL Filter FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8	04/14/2018 05/01/2018 05/02/2018 05/04/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 13.03 0.00 17.98 0.00 50.84 0.00 15.98
<u>O'REIL</u> Раутепt Туре Check Рауаble Nun 0642-200235 0642-203236 0642-203378 0642-203722 0642-203722	O'REILLY AUTO Payment Num	ber Description OiL FILTER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 13.03 0.00 17.98 0.00 50.84 0.00 15.98 0.00 432.82
<u>O'REIL</u> Раутепt Туре Check Рауаble Nun 0642-200235 0642-203236 0642-203378 0642-203722 0642-203724 0642-203724 0642-203825	O'REILLY AUTO Payment Num nber	ber Description OIL FILTER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 13.03 0.00 17.98 0.00 50.84 0.00 15.98
<u>O'REIL</u> Payment Type Check Payable Nun <u>0642-200235</u> <u>0642-203236</u> <u>0642-203725</u> <u>0642-203725</u> <u>0642-203725</u> <u>0642-203825</u> <u>0642-203825</u> <u>0642-204275</u>	O'REILLY AUTO Payment Num nber	ber Description OIL FILTER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018 05/07/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 13.03 0.00 17.98 0.00 50.84 0.00 15.98 0.00 432.82 0.00 31.98
<u>O'REIL</u> Payment Type Check Payable Nun 0642-200233 0642-203236 0642-203722 0642-203722 0642-203823 0642-203823 0642-204273 0642-204273 0642-204283	O'REILLY AUTO Payment Num nber	ber Description OIL FILTER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK 14 OZ. BRAKECLN	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018 05/07/2018 05/07/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 13.03 0.00 17.98 0.00 50.84 0.00 15.98 0.00 432.82 0.00 31.98 0.00 23.88
<u>O'REIL</u> Payment Type Check Payable Nun 0642-200235 0642-203236 0642-203722 0642-203722 0642-203722 0642-203825 0642-204267 0642-204267 0642-204364 0642-204455 0642-204455 0642-204496	O'REILLY AUTC Payment Num nber 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ber Description OiL FILTER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK 14 OZ. BRAKECLN CUST # 188092 ALTERNATOR CUST # 188092 PULLER CUST # 188092 PULLER	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018 05/07/2018 05/07/2018 05/07/2018 05/07/2018 05/08/2018 05/08/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 05/08/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 8.18 0.00 13.03 0.00 17.98 0.00 50.84 0.00 15.98 0.00 31.98 0.00 31.98 0.00 23.88 0.00 62.88 0.00 78.98
O'REIL Payment Type Check Payable Nun 0642-200235 0642-203236 0642-203722 0642-203722 0642-203722 0642-203825 0642-204267 0642-204267 0642-204364 0642-2044555 0642-204555 0642-204555 0642-204555 0642-204555 0	O'REILLY AUTO Payment Num nber 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ber Description OiL FILTER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK 14 OZ. BRAKECLN CUST # 188092 ALTERNATOR CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 ORGIN INV # 642-204364	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018 05/07/2018 05/07/2018 05/07/2018 05/07/2018 05/08/2018 05/08/2018 05/08/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 8.18 0.00 13.03 0.00 17.98 0.00 50.84 0.00 50.84 0.00 432.82 0.00 31.98 0.00 23.88 0.00 62.88 0.00 78.98 0.00 -78.98 0.00 0.01
O'REIL Payment Type Check Payable Nun 0642-200235 0642-203236 0642-203378 0642-203722 0642-203722 0642-203825 0642-204285 0642-204455 0642-204755 0642-204755 0642-204755 0642-204755 0642-204755 0642-204755 0642-204755 0642-204755 0642-204755 0642-204755 0642-204755 0642-204755 0642-204755 0642-204755 0642-204755 064555 0645555 0645555 06455555 0645555555 064555	O'REILLY AUTO Payment Num nber 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ber Description OiL FILTER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK 14 OZ. BRAKECLN CUST # 188092 ALTERNATOR CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 ORGIN INV # 642-204364 CUST # 188092 WARRANTY	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018 05/07/2018 05/07/2018 05/07/2018 05/07/2018 05/08/2018 05/08/2018 05/09/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 05/08/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 8.18 0.00 13.03 0.00 17.98 0.00 50.84 0.00 15.98 0.00 31.98 0.00 23.88 0.00 62.88 0.00 78.98 0.00 -78.98 0.00 0.01 0.00 -0.01
O'REIL Payment Type Check Payable Nun 0642-200235 0642-203236 0642-203375 0642-203375 0642-203725 0642-203725 0642-204285 0642-204455 0642-204455 0642-204455 0642-204455 0642-204455 0642-204713 00	O'REILLY AUTO Payment Num nber 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ber Description OiL FILTER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK 14 OZ. BRAKECLN CUST # 188092 ALTERNATOR CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 ORGIN INV # 642-204364 CUST # 188092 WARRANTY VALVE	05/01/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018 05/07/2018 05/07/2018 05/07/2018 05/08/2018 05/08/2018 05/08/2018 05/09/2018 05/09/2018 05/09/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 8.18 0.00 13.03 0.00 17.98 0.00 50.84 0.00 15.98 0.00 432.82 0.00 31.98 0.00 23.88 0.00 62.88 0.00 78.98 0.00 -78.98 0.00 0.01 0.00 -0.01 0.00 20.65
O'REIL Payment Type Check Payable Nun 0642-200235 0642-203236 0642-203375 0642-203375 0642-203375 0642-203375 0642-203375 0642-204287 0642-204455 0642-204455 0642-204455 0642-204455 0642-204455 0642-204455 0642-204455 0642-204455 0642-204455 0642-204715 0642-20475 0642-20575 0642-20575 0642-20575 0642-20575 0655 0555 0555 0555 0555 0555 0555 0555 0555 0555	O'REILLY AUTO Payment Num nber 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ber Description OiL FILTER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK 14 02. BRAKECLN CUST # 188092 ALTERNATOR CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 ORGIN INV # 642-204364 CUST # 188092 WARRANTY VALVE CUST # 188092 ALTERNATOR	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/07/2018 05/07/2018 05/07/2018 05/07/2018 05/08/2018 05/08/2018 05/09/2018 05/09/2018 05/09/2018 05/15/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 8.18 0.00 13.03 0.00 17.98 0.00 50.84 0.00 15.98 0.00 432.82 0.00 31.98 0.00 23.88 0.00 62.88 0.00 78.98 0.00 -78.98 0.00 0.01 0.00 -0.01 0.00 20.65 0.00 495.70
O'REIL Payment Type Check Payable Num 0642-200235 0642-203236 0642-203372 0642-203725 0642-203725 0642-203825 0642-204275 0642-204455 0642-204455 0642-204715 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-205725 0642-20575 0642-20575 0642-20575 0642-20575 0642-20575 0642-20575 0642-20575 0642-20575 0642-20575 0642-20575 0642-20575 0642-20575 0642-20575 0642-20575 0642-20575 0642-205575 06457575 0645757575 0645757575 064575757575 06457575	O'REILLY AUTO Payment Num nber 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ber Description OiL FILTER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK 14 OZ. BRAKECLN CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 ORGIN INV # 642-204364 CUST # 188092 WARRANTY VALVE CUST # 188092 ALTERNATOR OZ SENSOR	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018 05/07/2018 05/07/2018 05/07/2018 05/08/2018 05/08/2018 05/09/2018 05/09/2018 05/09/2018 05/15/2018 05/16/2018 05/17/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 05/16/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 8.18 0.00 13.03 0.00 13.03 0.00 17.98 0.00 50.84 0.00 50.84 0.00 432.82 0.00 31.98 0.00 23.88 0.00 62.88 0.00 78.98 0.00 -78.98 0.00 0.01 0.00 -0.01 0.00 20.65 0.00 -495.70 0.00 51.19
<u>O'REIL</u> Payment Type Check Payable Num 0642-200235 0642-203236 0642-203372 0642-203722 0642-203722 0642-203823 0642-204273 0642-204283 0642-204455 0642-204713 0642-204713 0642-204713 0642-204713 0642-204713 0642-205723 0642-205723 0642-205735 0642-205	O'REILLY AUTO Payment Num nber 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ber Description OiL FILTER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK 14 OZ. BRAKECLN CUST # 188092 ALTERNATOR CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 ORGIN INV # 642-204364 CUST # 188092 WARRANTY VALVE CUST # 188092 ALTERNATOR OZ SENSOR MINI LAMP	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018 05/07/2018 05/07/2018 05/07/2018 05/08/2018 05/08/2018 05/09/2018 05/09/2018 05/09/2018 05/15/2018 05/16/2018 05/17/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 8.18 0.00 13.03 0.00 13.03 0.00 15.98 0.00 15.98 0.00 31.98 0.00 23.88 0.00 62.88 0.00 78.98 0.00 -78.98 0.00 0.01 0.00 20.65 0.00 495.70 0.00 51.19 0.00 25.2
<u>O'REIL</u> Payment Type Check Payable Num 0642-200235 0642-203236 0642-203376 0642-203376 0642-203372 0642-203372 0642-203372 0642-203372 0642-204371 0642-204364 0642-204371 0642-204371 0642-204371 0642-204371 0642-204371 0642-204371 0642-204371 0642-204371 0642-20572 0642-20572 0642-20571 0642-20571 0642-206371 0642-206371 0642-206371 0642-206371 0642-206371 0642-206371 0642-206371 0642-206371 0642-205388 0642-2055988 0642-2055988 0642-2055988 0642-2055988 0642-205598 0642-20559888 0642-20559888 0642-20559888 0642-205598888 0642-205598888 0642-20559888 0642-205598888 0642-205598888 0642-20559888888 0642-205598888888 0642-2055988888888888888888888888888888888888	O'REILLY AUTO Payment Num nber 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ber Description Oil FiltER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK 14 OZ. BRAKECLN CUST # 188092 ALTERNATOR CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 ORGIN INV # 642-204364 CUST # 188092 WARRANTY VALVE CUST # 188092 ALTERNATOR OZ SENSOR MINI LAMP HAND PUMP	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018 05/07/2018 05/07/2018 05/07/2018 05/08/2018 05/08/2018 05/09/2018 05/09/2018 05/15/2018 05/15/2018 05/16/2018 05/17/2018 05/17/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 8.18 0.00 13.03 0.00 13.03 0.00 15.98 0.00 15.98 0.00 432.82 0.00 23.88 0.00 62.88 0.00 78.98 0.00 -78.98 0.00 0.01 0.00 20.65 0.00 495.70 0.00 51.19 0.00 25.2 0.00 76.93
<u>O'REIL</u> Payment Type Check Payable Num 0642-200235 0642-203236 0642-203376 0642-203376 0642-203372 0642-203372 0642-203372 0642-203372 0642-204277 0642-204277 0642-204455 0642-204455 0642-204455 0642-204577 0642-205725 0642-205725 0642-205715 0642-205715 0642-205715 0642-206715 0642-207065 0642-206	O'REILLY AUTC Payment Num nber 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ber Description Oil FiltER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK 14 OZ. BRAKECLN CUST # 188092 ALTERNATOR CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 ORGIN INV # 642-204364 CUST # 188092 WARRANTY VALVE CUST # 188092 ALTERNATOR OZ SENSOR MINI LAMP HAND PUMP STARTER, CORE CHARGE	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018 05/07/2018 05/07/2018 05/07/2018 05/08/2018 05/08/2018 05/09/2018 05/09/2018 05/15/2018 05/15/2018 05/16/2018 05/17/2018 05/17/2018 05/21/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 8.18 0.00 13.03 0.00 13.03 0.00 15.98 0.00 15.98 0.00 432.82 0.00 31.98 0.00 23.88 0.00 62.88 0.00 78.98 0.00 0.01 0.00 0.01 0.00 20.65 0.00 51.19 0.00 51.19 0.00 2.52 0.00 70.09 0.00 70.09
<u>O'REIL</u> Payment Type Check Payable Num 0642-200235 0642-203236 0642-203376 0642-203372 0642-203725 0642-203825 0642-204275 0642-204265 0642-204455 0642-204455 0642-204455 0642-204455 0642-204455 0642-204515 0642-205886 0642-205886 0642-205886 0642-205715 0642-207515 0642-207	O'REILLY AUTC Payment Num nber 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ber Description Oil FiltER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK 14 OZ. BRAKECLN CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 ORGIN INV # 642-204364 CUST # 188092 WARRANTY VALVE CUST # 188092 ALTERNATOR O2 SENSOR MINI LAMP HAND PUMP STARTER, CORE CHARGE BRAKE ROTOR	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018 05/07/2018 05/07/2018 05/07/2018 05/08/2018 05/08/2018 05/09/2018 05/09/2018 05/15/2018 05/15/2018 05/16/2018 05/17/2018 05/17/2018 05/21/2018 05/22/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 8.18 0.00 13.03 0.00 13.03 0.00 15.98 0.00 15.98 0.00 432.82 0.00 31.98 0.00 23.88 0.00 78.98 0.00 0.01 0.00 0.01 0.00 20.65 0.00 2.52 0.00 2.52 0.00 70.09 0.00 13.9.62
<u>O'REIL</u> Payment Type Check Payable Num 0642-200235 0642-203236 0642-203376 0642-203376 0642-203372 0642-203372 0642-203372 0642-203372 0642-203372 0642-204271 0642-204455 0642-204455 0642-204455 0642-204455 0642-204455 0642-204512 0642-20588 0642-20588 0642-20588 0642-20588 0642-205712 0642-20772 0	O'REILLY AUTC Payment Num nber 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ber Description Oil FiltER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK 14 OZ. BRAKECLN CUST # 188092 ALTERNATOR CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 ORGIN INV # 642-204364 CUST # 188092 WARRANTY VALVE CUST # 188092 ALTERNATOR OZ SENSOR MINI LAMP HAND PUMP STARTER, CORE CHARGE BRAKE ROTOR OIL FILTER	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018 05/07/2018 05/07/2018 05/07/2018 05/08/2018 05/08/2018 05/09/2018 05/15/2018 05/15/2018 05/15/2018 05/17/2018 05/21/2018 05/22/2018 05/22/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 8.18 0.00 13.03 0.00 13.03 0.00 15.98 0.00 15.98 0.00 432.82 0.00 31.98 0.00 23.88 0.00 62.88 0.00 78.98 0.00 0.01 0.00 20.65 0.00 20.65 0.00 51.19 0.00 2.52 0.00 70.09 0.00 70.09 0.00 139.62 0.00 202.44 0.00 14.07
<u>O'REIL</u> Payment Type Check Payable Num 0642-200235 0642-203236 0642-203376 0642-203372 0642-203725 0642-203825 0642-204275 0642-204265 0642-204455 0642-204455 0642-204455 0642-204455 0642-204455 0642-204515 0642-205886 0642-205886 0642-205886 0642-205715 0642-207515 0642-207	O'REILLY AUTC Payment Num nber 2 2 3 2 2 3 2 4 7 7 7 7 7 7 7 7 7 2 3 3 7 7 2 3 3 7 7 2 3 3 7 7 2 3 3 7 7 2 3 3 7 7 2 3 3 7 7 2 3 3 7 7 2 3 3 7 7 2 3 3 7 7 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	ber Description Oil FiltER FUEL/WATER CABLE TIE IGN COIL, SPARK PLUG 2002 FORD F-150 V8 GREASE FTG CUST # 188092 ALTERNATOR 802 ANTISEIZE, 36MLTHRDLOCK 14 OZ. BRAKECLN CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 PULLER CUST # 188092 ORGIN INV # 642-204364 CUST # 188092 WARRANTY VALVE CUST # 188092 ALTERNATOR O2 SENSOR MINI LAMP HAND PUMP STARTER, CORE CHARGE BRAKE ROTOR	04/14/2018 05/01/2018 05/02/2018 05/04/2018 05/04/2018 05/04/2018 05/07/2018 05/07/2018 05/07/2018 05/08/2018 05/08/2018 05/09/2018 05/09/2018 05/15/2018 05/15/2018 05/16/2018 05/17/2018 05/17/2018 05/21/2018 05/22/2018	06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018 06/11/2018	776.52 Payment Date Payment Amount 06/06/2018 776.52 Discount Amount Payable Amount 0.00 8.18 0.00 8.18 0.00 13.03 0.00 13.03 0.00 15.98 0.00 15.98 0.00 432.82 0.00 31.98 0.00 23.88 0.00 62.88 0.00 78.98 0.00 0.01 0.00 20.65 0.00 20.65 0.00 51.19 0.00 2.52 0.00 70.09 0.00 70.09 0.00 139.62 0.00 202.44

Payment Register					APPKT02557 - 6/11/18 A/P RUN
CM0000560		ICN COIL SDARY BLUG CREDIT	04/20/2018	04/20/2018	
CM0000561		IGN COIL, SPARK PLUG CREDIT OIL FILTER	04/30/2018	04/30/2018	0.00 -50.84
			04/14/2018	04/14/2018	0.00 -8.85
<u>CM0000562</u>		CORE RETURN	05/23/2018	05/23/2018	0.00 -10.00
Vendor Number	Vendor Name	2			Total Vendor Amount
OVESUP	OVERALL SUP	PLY, INC			362.16
Payment Type	Payment Nun	nber			Payment Date Payment Amount
Check					06/06/2018 362.16
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount Payable Amount
IN00098839		CUST A/C # 166242 BRAKE & PARTS CLN EARTH	05/17/2018	06/11/2018	0.00 362.16
Vendor Number	Vendor Name	2			Total Vendor Amount
PATMAR	PATHMARK T	RAFFIC PROD. OF TX INC			2,526.00
Payment Type	Payment Nun	nber			Payment Date Payment Amount
Check					06/06/2018 2,526.00
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount Payable Amount
027547		6' GALV CHANNEL POST, 6X12 ALUM BLANK	05/18/2018	06/11/2018	0.00 2,526.00
Mandanthumber	Manada a Maria				
Vendor Number	Vendor Name	2			Total Vendor Amount
PFGTEM	PFG-TEMPLE				4,160.14
Payment Type	Payment Nun	nder			Payment Date Payment Amount
Check					05/06/2018 4,160.14
Payable Nun	nper	Description	Payable Date	Due Date	Discount Amount Payable Amount
<u>9144720</u>		CUST # 435577 DRY GROCERY / FROZEN	05/10/2018	06/11/2018	0.00 701.32
<u>9147904</u>		CUST # 435577 DRY GROCERY / FROZEN	05/14/2018	06/11/2018	0.00 710.94
<u>9152057</u>		CUST # 435577 DRY GROCERY / FROZEN	05/17/2018	06/11/2018	0.00 574.53
<u>9155218</u>		CUST # 435577 DRY GROCERY / FROZEN	05/21/2018	06/11/2018	0.00 572.62
9159520		CUST # 435577 DRY GROCERY / FROZEN	05/24/2018	06/11/2018	0.00 802.92
<u>9162623</u>		CUST # 435577 DRY GROCERY / FROZEN	05/28/2018	06/11/2018	0.00 797.81
Vendor Number	Vendor Name	e			Total Vendor Amount
RDOEQU	RDO EQUIPM	IENT CO.			360.87
Payment Type	Payment Nur	mber			Payment Date Payment Amount
Check					06/06/2018 360.87
Payable Nur	nber	Description	Payable Date	Due Date	Discount Amount Payable Amount
P65036		ACCT # 7269004 LAMP	05/14/2018	06/11/2018	0.00 106.01
P65037		ACCT # 7269004 WEATHERSTR	05/14/2018	06/11/2018	0.00 254.86
Vendor Number	Vendor Nam				
TRATRA	RICHARD AVI				Total Vendor Amount
Payment Type	Payment Nur				300.00
Check	rayment nui	libel			Payment Date Payment Amount
Payable Nur	whor	Description	Develue Dete	Due Dete	06/06/2018 300.00
52018	IIDEI	STAR FUNK HOUSE DOS: 5/20/18	Payable Date	Due Date	Discount Amount Payable Amount
77770		STAR FORK HOUSE DOS: 5/20/18	06/01/2018	06/11/2018	0.00 300.00
Vendor Number	Vendor Nam	-			Total Vendor Amount
ROBMAD	ROBERT MAD	DDEN, INC.			272.00
Payment Type	Payment Nur	mber			Payment Date Payment Amount
Check					06/06/2018 272.00
Payable Nur	nber	Description	Payable Date	Due Date	Discount Amount Payable Amount
<u>4286569</u>		CUST # 2621 BORESCOPE	05/30/2018	06/11/2018	0.00 272.00
Vendor Number	Vendor Nam	e			Total Vendor Amount
ROBBRA	ROBIN BRAM	IE			41.42
Payment Type	Payment Nu	mber			Payment Date Payment Amount
Check					06/06/2018 41.42
Payable Nu	mber	Description	Payable Date	Due Date	Discount Amount Payable Amount
<u>5312018</u>		DAY IN COURT 5/31/18 DOCKET	05/31/2018	06/11/2018	0.00 41.42

Payment Register					APPKT0255	7 - 6/11/18 A/P RUN
Vendor Number	Vendor Name					Total Vendor Amount
RUSTRU	RUSH TRUCK C	ENTER				2,719.61
Payment Type	Payment Num	ber			Payment Date	Payment Amount
Check					06/06/2018	2,719.61
Payable Num	iber	Description	Payable Date	Due Date	Discount Amount Par	•
3010578127		CUST # 121177 SERIAL # 3FRXF75Z89V146229	05/17/2018	06/11/2018	0.00	2,719.61
Vendor Number	Vendor Name					Total Vendor Amount
RYASAN	RYAN JAMES S					350.00
Payment Type	Payment Num	iber			Payment Date	Payment Amount
Check	e .				06/06/2018	350.00
Payable Nurr	nber	Description	Payable Date	Due Date	Discount Amount Pa	yable Amount
032312		LIGHT INSTALL	05/31/2018	06/11/2018	0.00	350.00
Vendor Number	Vendor Name					Total Vendor Amount
SBCONT	SB CONTRACT	•				15,112.12
Payment Type Check	Payment Num	IDer			Payment Date	Payment Amount
Payable Nun	her	Description	Payable Date	Due Date	06/06/2018 Discount Amount Pa	15,112.12 wahla Amaunt
1 <u>6</u>	1021	CSJ 0914-22-064 3/23 - 5/04/18	05/04/2018	06/11/2018	0.00	15,112.12
			00/04/2020	00/11/2010	0.00	10,112.12
Vendor Number	Vendor Name					Total Vendor Amount
<u>SCHSON</u>	SCHMIDT & SC	DNS, INC				5,176.10
Payment Type	Payment Num	nber			Payment Date	Payment Amount
Check					06/06/2018	5,176.10
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount Pa	yable Amount
0431031-IN		CUST # 05-CALDCO TEXAS LOW EMISSION DIESEL FUEL	05/10/2018	06/11/2018	0.00	5,176.10
Vendor Number	Vendor Name					Total Vendor Amount
SMISUP		Y CO.+ LOCKHART				1,097.45
Payment Type	Payment Nun				Payment Date	Payment Amount
Check	•				06/06/2018	1.097.45
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount Pa	yable Amount
769019		CAR SCREW 5/16 X 3-1/4	05/01/2018	06/11/2018	0.00	19.10
769259		POLY LEAF RAKE LP18	05/03/2018	06/11/2018	0.00	8.95
769272		CAR SCREW 5/16 X 3	05/03/2018	06/11/2018	0.00	45.00
769956		BREAKER 30 AMP	05/09/2018	06/11/2018	0.00	23.95
770514		DRIP SOAKER, INLINE DRIPPERS, ADJ SPRAY	05/14/2018	06/11/2018	0.00	30.45
770575		18" X 30' METAL CULVERT 16GA	05/14/2018	06/11/2018	0.00	434.70
<u>770992</u> <u>771374</u>		DEMON WP 4 - 9.5 CRM PER PKG	05/17/2018	06/11/2018	0.00	25.90
771374		CAR SCREW 5/16 X 2-1/2 100/CTN BLICK 8X8X16 HEAVY, 2 HOLE	05/21/2018 05/21/2018	06/11/2018 06/11/2018	0.00 0.00	298.50 10.80
771485		CAR SCREW 5/16 X 3	05/22/2018	06/11/2018	0.00	45.80
771637		GELL CELL 12V 7AMP	05/23/2018	06/11/2018	0.00	67.80
And a second		12 VOLT BATTERY	05/23/2018	06/11/2018	0.00	66.65
771643		CROSS PVC, BUSING PVC, BALL VALVE, ADAPTER PVC	05/23/2018	06/11/2018	0.00	40.15
771643 771669						
		VINYL TUBING, HOSE, PVC NIPPLE, CONNECTORS	05/23/2018	06/11/2018	0.00	24.00
771669						
771669 771694 771717 771782		VINYL TUBING, HOSE, PVC NIPPLE, CONNECTORS	05/23/2018	06/11/2018	0.00	24.00
<u>771669</u> <u>771694</u> <u>771717</u>		VINYL TUBING, HOSE, PVC NIPPLE, CONNECTORS ELL PVC, EXPND COMP COUP, BRASS NIPPLE	05/23/2018 05/23/2018	06/11/2018 06/11/2018	0.00 0.00	24.00 6.40
771669 771694 771717 771782	Vendor Name	VINYL TUBING, HOSE, PVC NIPPLE, CONNECTORS ELL PVC, EXPND COMP COUP, BRASS NIPPLE BIFEN I/T 40Z 12 VOLT BATTERY, REF INV	05/23/2018 05/23/2018 05/24/2018	06/11/2018 06/11/2018 06/11/2018	0.00 0.00 0.00	24.00 6.40 15.95 -66.65
771669 771694 771717 771782 CM0000564		VINYL TUBING, HOSE, PVC NIPPLE, CONNECTORS ELL PVC, EXPND COMP COUP, BRASS NIPPLE BIFEN I/T 40Z 12 VOLT BATTERY, REF INV	05/23/2018 05/23/2018 05/24/2018	06/11/2018 06/11/2018 06/11/2018	0.00 0.00 0.00	24.00 6.40 15.95
771669 771694 771717 771782 CM0000564 Vendor Number		VINYL TUBING, HOSE, PVC NIPPLE, CONNECTORS ELL PVC, EXPND COMP COUP, BRASS NIPPLE BIFEN I/T 40Z 12 VOLT BATTERY, REF INV RE MART, LLC	05/23/2018 05/23/2018 05/24/2018	06/11/2018 06/11/2018 06/11/2018	0.00 0.00 0.00	24.00 6.40 15.95 -66.65 Total Vendor Amount
771669 771694 771717 771782 CM0000564 Vendor Number SOUTIR	SOUTHERN TI	VINYL TUBING, HOSE, PVC NIPPLE, CONNECTORS ELL PVC, EXPND COMP COUP, BRASS NIPPLE BIFEN I/T 40Z 12 VOLT BATTERY, REF INV RE MART, LLC	05/23/2018 05/23/2018 05/24/2018	06/11/2018 06/11/2018 06/11/2018	0.00 0.00 0.00 0.00 Payment Date 06/06/2018	24.00 6.40 15.95 -66.65 Total Vendor Amouni 374.88 Payment Amount 374.88
771669 771694 771717 771782 CM0000564 Vendor Number SOUTIR Payment Type	SOUTHERN TI Payment Nur	VINYL TUBING, HOSE, PVC NIPPLE, CONNECTORS ELL PVC, EXPND COMP COUP, BRASS NIPPLE BIFEN I/T 40Z 12 VOLT BATTERY, REF INV RE MART, LLC	05/23/2018 05/23/2018 05/24/2018	06/11/2018 06/11/2018 06/11/2018	0.00 0.00 0.00 0.00 Payment Date	24.00 6.40 15.95 -66.65 Total Vendor Amouni 374.88 Payment Amount 374.88

		19				
Payment Register					ADDKTOS	557 - 6/11/18 A/P RUN
	1/				AFFRIDZ.	
Vendor Number	Vendor Name					Total Vendor Amount
SOUWRE Baumont Tuno	SOUTHSIDE WI Payment Num	-			Dourse and Date	327.00
Payment Type Check	Payment wum	ber			Payment Date	•
Payable Nurr	har	Description	Payable Date	Due Date	06/06/2018 Discount Amount	327.00
593273	ibei	DUMP TRUCK LIC # 1285576	05/09/2018	06/11/2018	0.00	327.00
<u></u>		DOME 110CK DC# 1200070	03/09/2016	00/11/2018	0.00	527.00
Vendor Number	Vendor Name					Total Vendor Amount
SPRINT	SPRINT					37.99
Payment Type	Payment Num	ber			Payment Date	
Check					06/06/2018	37.99
Payable Num	ber	Description	Payable Date	Due Date	Discount Amount	
122236591-1		ACCT # 122236591 4/17 - 5/16/18	05/20/2018	06/11/2018	0.00	37.99
				,,	0.00	
Vendor Number	Vendor Name					Total Vendor Amount
SYSCO	SYSCO CENTRA	AL TEXAS, INC				16,123.87
Payment Type	Payment Num	ber			Payment Date	e Payment Amount
Check					06/06/2018	16,123.87
Payable Num	nber	Description	Payable Date	Due Date	Discount Amount	Payable Amount
213476118		CUST # 043430 CHEMICAL & JANITORIAL	05/09/2018	06/11/2018	0.00	298.70
<u>213476119</u>		CUST # 043430 DAIRY / MEATS / SEAFOOD/ POULTRY	05/09/2018	06/11/2018	0.00	3,048.79
<u>213482551</u>		CUST # 043430 DAIRY / MEATS / SEAFOOD / POULTRY	05/11/2018	06/11/2018	0.00	2,420.79
213495315		CUST # 043430 DAIRY / MEATS / SEAFOOD / POULTRY	05/16/2018	06/11/2018	0.00	2,326.09
213514049		CUST # 043430 CHEMICAL / JANITORIAL	05/23/2018	06/11/2018	0.00	165.48
213514050		CUST # 043430 DAIRY / MEATS / SEAFOOD / FROZEN /	05/23/2018	06/11/2018	0.00	2,555.00
<u>213520155</u>		CUST # 043430 DAIRY / MEATS / SEAFOOD / POULTRY /	05/25/2018	06/11/2018	0.00	2,638.96
<u>213520156</u>		CUST # 043430 CAN & DRY	05/25/2018	06/11/2018	0.00	11.49
<u>513501558</u>		CUST # 043430 DAIRY / MEATS / SEAFOOD / POULTRY	05/18/2018	06/11/2018	0.00	2,658.57
Vendor Number	Vendor Name					Total Vendor Amount
RICHIC		ICE OF TREY HICKS, PLLC			_	300.00
Payment Type	Payment Num	iber			Payment Dat	•
Check			n	D	06/06/2018	300.00
Payable Nun	iber	Description CAUSE # 2678-18CC P.D.M.	Payable Date	Due Date	Discount Amount	•
<u>2678-18CC</u>		CAUSE # 2078-18CC P.D.W.	05/18/2018	06/11/2018	0.00	300.00
Vendor Number	Vendor Name					Total Vendor Amoun
CARWAR		ICES OF CARRIE WARD PLLC				434.00
Payment Type	Payment Num				Payment Dat	
Check	i opnicite tion				06/06/2018	434.00
Payable Nun	nber	Description	Payable Date	Due Date	Discount Amount	
18-FL-118_2		CAUSE # 18-FL-118 B.B.S.B.	05/17/2018	06/11/2018	0.00	434.00
			,,		0100	
Vendor Number	Vendor Name	2			3	Total Vendor Amoun
THYSS	THYSSENKRUF	PP ELEVATOR				499.00
Payment Type	Payment Nun	nber			Payment Dat	e Payment Amount
Check					06/06/2018	499.00
Payable Nur	nber	Description	Payable Date	Due Date	Discount Amount	Payable Amount
572018		CONTRACT # US33395 (C201US)	05/07/2018	06/11/2018	0.00	499.00
Vendor Number	Vendor Name	2				Total Vendor Amoun
UNIFIR	UNIFIRST COR					763.4:
Payment Type	Payment Nun	nber			Payment Dat	e Payment Amount
Check					06/06/2018	763.41
Payable Nur		Description	Payable Date	Due Date	Discount Amount	•
822 207714	_	CUST # 222727 RTE # F6140 SHERIFF'S	05/11/2018	06/11/2018	0.00	59.30
822 207755	_	CUST # 222727 RTE # F2900 PRCT # 2	05/14/2018	06/11/2018	0.00	42.85
822 207882:	_	CUST # 222727 RTE # G4200 PRCT # 3	05/16/2018	06/11/2018	0.00	39.05
822 207982	_	CUST # 222727 RTE F2900 PRCT # 2	05/21/2018	06/11/2018	0.00	42.85
822 208164	—	CUST # 222727 RTE # F6140 SHERIFF'S	05/25/2018	06/11/2018	0.00	59.30
822 208171	_	CUST # 222727 RTE # F6110 COURT HOUSE	05/25/2018	06/11/2018	0.00	217.45
<u>822 208204</u>	2	CUST # 222727 RTE # F2900 PRCT # 2	05/28/2018	06/11/2018	0.00	42.85

6/6/2018 2:14:04 PM

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Payment Register					АРРКТО255	57 - 6/11/18 A/P RUN
<u>822 2083351</u>	<u>i.</u>	CUST # 222727 PRCT # 3	05/30/2018	06/11/2018	0.00	39.05
822 2084002	2	CUST # 222727 RTE # F6110 COURT HOUSE	06/01/2018	06/11/2018	0.00	220.71
Vendor Number	Vendor Name	<u>ê</u>				Total Vendor Amount
XERCOR	XEROX CORPO	DRATION				3,880.11
Payment Type	Payment Nun	nber			Payment Date	Payment Amount
Check					06/06/2018	3,880.11
Payable Nurr	nber	Description	Payable Date	Due Date	Discount Amount Pa	ayable Amount
<u>1175723</u>		CONTRACT # 010-0063777-001 4/30 - 5/29/18	05/23/2018	06/11/2018	0.00	3,880.11
Vendor Number	Vendor Name	e				Total Vendor Amount
YOUAUT	YOUNGBLOO	D AUTOMOTIVE & TIRE				1,940.45
Payment Type	Payment Nur	nber			Payment Date	Payment Amount
Check					06/06/2018	1,940.45
Payable Nun	nber 👘	Description	Payable Date	Due Date	Discount Amount Pa	ayable Amount
<u>254657</u>		SERVICE CALL	05/15/2018	06/11/2018	0.00	1,940.45

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Payment Register

APPKT02557 - 6/11/18 A/P RUN

Payment Summary

			Payable	Payment		
Bank Code	Туре		Count	Count	Discount	Payment
AP BNK	Check		265	79	0.00	372,752.85
		Packet Totals:	265	79	0.00	372,752.85

Payment Register

APPKT02557 - 6/11/18 A/P RUN Cash Fund Summary

Fund	Name		Amount
999	POOLED CASH		-372,752.85
		Packet Totals:	-372,752.85

2. Ratify re-occurring County payments in the amount of:

A. \$ 299,044.96 (Payroll for 05/16/2018 - 05/31/2018)



Caldwell County, TX

Detail Registe

Payroll Summar

Packet: PYPKT00988 - 05312018 payroll Payroll Set: 01 - Payroll Set 01

Pay Period: 05/16/2018 - 05/31/2018

ay Code Units Pay Amount Code Subject To Employee Employee 12 - Holiday 464.00 8,026.64 Federal W/H 360,707.35 29,489.06 0 55 Stipend w/RET 0.00 1,667.50 MC 382,595.74 5,547.71 5,547. T 5.00 143.67 SS 382,595.74 23,720.91 23,720.	ARNINGS			l Direct Deposits: l Check Amounts:	266,589.79 32,455.17 TAXES			Males P Females P Total Employe	aid: 12
12 - Holiday 464.00 8,026.64 Federal W/H 360,707.35 29,480.66 0 25 Stipend w/RET 0.00 1,667,50 MC 382,595,74 25,547,71 5,547 A Supplement 0.00 151,67 Unemployment 25,757,74 23,720,91			Linite	Day Amount					
S5 Stipend w/RET 0.00 1.667.50 MC 382,595.74 5.29,731 5.547.71 T 5.00 143,67 S5 382,595.74 5.29,731 23,720.91 23,720.91 A Supplement 0.00 151.67 Unemployment 365,572.74 0.00 0.00 ourly 955.75 13,018.24 Total: 58,757.68 29,268. d Stip 1.00 200.39 Total: 58,757.68 29,268. mgevity 955.75 13,018.24 Total: 58,757.68 29,268. VOP 60.00 -1,089.60 Total: 58,757.68 29,268. VB MCT 0.00 155.00 Total: 58,757.68 29,268. AL 146.50 372,504.11 372,504.11 372,504.11 acation 44.00 851.70 89,439.48 EDUCTIONS 200 0.00 155.46 0.00 300 0.00 1,840.75 398,439.48 50.00 311 0.00 3,261.55 0.00 520.99 320 0.00 156.15 0.00 321 0.00 2,60.70 0.00 320 0.00 156.00 0.00 320					Looe	ma da salasadas			
T 5.00 143.67 S3 332,595.74 23,720.91 23,720. A Supplement 0.00 151.67 Unemployment 365,572.74 0.00 0.00 ud Stip 1.00 200.39 Total: 58,757.68 29,268. MOP 60.00 -1,089.60 Total: 58,757.68 29,268. NOP 60.00 -1,089.60 Total: 58,757.68 29,268. R DIEM ALLOWANCE 0.00 105.00 44.00 851.70 R DIEM ALLOWANCE 0.00 105.00 44.00 851.70 At a 146.50 372,504.11 398,439.48 44.00 851.70 EDUCTIONS 44.00 851.70 398,439.48 44.00 Dide Subject To Employee Employee Employee Dide Subject To Employee Employee 50.00 300 0.00 1,827.38 0.00 52 0.00 52 0.00 520.49 0.00 520.09 0.00 53 0.00 2,508.17 1,821.03 52.07 301 0.00 2,508.70 0.00 520.69 0.00 52 0.00 2,508.45 0.00 5		FT				-		•	0.0
A Supplement 0.00 151.67 Unemployment 365,737.7 23,7031 23,700 0.00 ourly 955.75 13,018.24 Total: 58,757.68 29,268. ongevity w/RET 0.00 150.00 WOP 60.00 -1,089.60 T 119.00 1,765.54 ER DIEM ALLOWANCE 0.00 105.00 AL 146.50 372,504.11 cation 44.00 851.70 Total: 1,840.75 398,439.48 EDUCTIONS Defe Subject To Employee Employer Total: 1,840.75 398,439.48 EDUCTIONS Defe Subject To Employee Employer Do 389,686.37 19,484.39 17,302.18 D0 0.00 1,327.38 0.00 40 0.00 1,327.38 0.00 51 0.00 3,156.15 0.00 52 0.00 504.45 0.00 53 0.00 3,156.15 0.00 54 0.00 165.06 0.00 55 0.00 7,1,821.03 Defe Subject To Employer 0.00 52 0.00 2,404.00 0.00 53 0.00 3,156.15 0.00 54 0.00 3,156.15 0.00 55 0.00 2,00,0 7,1,821.03 Defe 0.00 166.00 0.00 26 0.00 3,156.15 0.00 27 0.00 2,308.45 0.00 28 0.00 3,156.15 0.00 29 0.00 3,156.15 0.00 20 0.00 166.00 0.00 20 0.00 3,156.15 0.00 20 0.00 3,156.15 0.00 20 0.00 166.00 0.00 20 0.00 166.00 0.00 20 0.00 166.00 0.00 20 0.00 3,156.15 0.00 20 0.00 166.00 0.00 20 0.00 166.00 0.00 20 0.00 166.00 0.00 20 0.00 3,156.15 0.00 20 0.00 166.00 0.00 20 0.00 166.00 0.00 20 0.00 166.00 0.00 20 0.00 3,156.15 0.00 20 0.00 3,156.15 0.00 20 0.00 166.00 0.00 20 0.00 166.00 0.00 20 0.00 3,156.15 0.00 20 0.00 3,15									5,547.7
ourly 955.75 13,018.24 d Stip 1.00 200.39 ngewity w/RET 0.00 150.00 WOP 60.00 -1,089.60 T 119.00 1,755.54 ER DIEM ALLOWANCE 0.00 105.00 45.50 344.62 AL 146.50 372,504.11 acation 44.00 851.70 Total: 1,840.75 398,499.48 EDUCTIONS Dde Subject To Employee Employer 100 389,686.37 19,484.39 17,302.18 200 0.00 2,404.00 0.00 300 0.00 1,327.38 0.00 501 0.00 385.51.5 0.00 502 0.00 98.45 0.00 503 0.00 3,156.15 0.00 504 0.00 3,156.15 0.00 505 0.00 98.45 0.00 502 0.00 75.00 0.00 503 0.00 75.00 0.00 504 0.00 3,156.15 0.00 505 0.00 98.45 0.00 505 0.00 98.45 0.00 506 0.00 75.00 0.00 507 0.00 3,156.15 0.00 508 0.00 75.00 0.00 509 0.00 3,156.15 0.00 500 0.00 3,156.15 0.00 501 0.00 3,156.15 0.00 502 0.00 3,156.15 0.00 503 0.00 75.00 0.00 504 0.00 75.00 0.00 505 0.00 75.00 0.00 505 0.00 75.00 0.00 504 0.00 3,156.15 0.00 505 0.00 3,156.15 0.00 505 0.00 75.00 0.00 504 0.00 3,156.15 0.00 505 0.00 3,156.15 0.00 505 0.00 75.00 0.00 504 0.00 3,156.15 0.00 505 0.00 75.00 0.00 505 0.00 75.00 0.00 506 0.00 75.00 0.00 507 0.00 1.55.45 0.00 508 0.00 75.00 0.00 509 0.00 3,156.15 0.00 500 0.00 3,156.15 0.00 500 0.00 3,156.15 0.00 500 0.00 75.00 0.00 500 0.00 75.00 0.00 500 0.00 1.55.00 0.00 500 0.00 75.00 0.00 0.00 0.00 0.00 0.0									23,720.9
d Stip 1.00 200.39 ngevity w/RET 0.00 150.00 WOP 60.00 -1,089.60 T 119.00 1,765.54 ER DIEM ALLOWANCE 0.00 105.00 AL 146.50 372,504.11 acation 44.00 851.70 Total: 1,840.75 398,439.48 EDUCTIONS Dde Subject To Employee Employer 10 389,686.37 19,484.39 17,302.18 20 0.00 2,404.00 0.00 30 0.00 1,527.38 0.00 30 0.00 3156.15 0.00 50 0.00 3524.49 0.00 51 0.00 3526.49 0.00 52 0.00 520.49 0.00 52 0.00 520.49 0.00 53 0.00 166.00 0.00 54 0.00 166.00 0.00 55 0.00 75.00 0.00 56 0.00 75.00 0.00 57 0.00 389.71 0.00 50 0.00 381.71 0.00 31.71 0.00 25.9 9 0.00 26.07 1.020 Total: 40,636.84 89,123.21 ECAP 01-PayrollSet 01						Unemployment	-		0.0
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		Τα	tal: 40,636.84	89,123.21					
	ECAP 01 - Pay	roli Set 01		,					
			fits: 0.00	Deductions:	40.636.84	Taxes:	58,757,68	Net Pav:	299,044,9
	siiiiiga. 39	0,407.40 Dene	nis: 0.00	Veductions:	40,636.84	Taxes:	58,757.68	Net Pay:	299,(



Caldwell County, TX

Detail Register

Department Summary

Packet: PYPKT00988 - 05312018 payroll Payroll Set: 01 - Payroll Set 01

Pay Period: 05/16/2018 - 05/31/2011

Department:	1000 -	Courthouse	Security	ſ
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			Direct Deposits: Theck Amounts:	7,729.17 0.00				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
165 Stipend w/RET		0.00	17.50	Federal W/H		9,375.90	688.32	0.00
Hourly		20.00	716.60	MC		9,888.02	143.37	143.37
SAL		6.00	9,508.40	SS		9,888.02	613.06	613.0
	Total:	26.00	10,242.50	Unemployment		10,198.25	0.00	0.00
DEDUCTIONS						Total:	1,444.75	756.43
	Culture To	Constants						
Code	Subject To	Employee	Employer					
400	10,242.50	512.12	454.78					
550	0.00	44.25	0.00					
551	0.00	59.00	0.00					
580	0.00	4.98	0.00					
590	0.00	172.93	2,087.68					
615	0.00	78.30	0.00					
620	0.00	197.00	0.00					
	Total:	1,068.58	2,542.46					
RECAP 1000 - Courthouse	Security							
Earnings: 10,242.50	Benefits:	0.00	Deductions:	1,068.58	Taxes:	1,444.75	Net Pay:	7,729.1
		Total (Check Amounts:	3,277.23				
EARNINGS				TAXES				_
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
165 Stipend w/RET		0.00	72.50	Federal W/H		31,556.08	2,525.82	0.0
SAL		24.00	35,211.07	MC		33,320.23	483.16	483.1
	Total:	24.00	35,283.57	SS		33,320.23	2,065.84	2,065.8
DEDUCTIONS				Unemployment		35,154.32	0.00	0.0
						Total:	5,074.82	2,549.0
Code	Subject To 35,283.57	Employee	Employer					
400		1,764.15	1,566.56					
530	0.00	0.00	0.00					
550	0.00	129.25	0.00					
551	0.00	66.66	0.00					
580	0.00	16.60	0.00					
590	0.00	1,603.53	8,040.92					
		0.00	0.00					
610	0.00	0.00						
610 615	0.00	163.90	0.00					
610								
610 615	0.00	163.90	0.00					
610 615	0.00	163.90 529.09	0.00					

Pay Period: 05/16/2018 - 05/31/2018

Department: 1102 - Vehicle Maintenance

			Direct Deposits: Check Amounts:	988.30 2,471.54				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
SAL		3.00	4,431.35	Federal W/H		4,128.23	333.98	0.0
	Total:	3.00	4,431.35	MC		4,349.80	63.07	63.0
				SS		4,349.80	269.68	269.6
DEDUCTIONS				Unemployment		4,417.30	0.00	0.0
Code	Subject To	Employee	Employer			Total:	666.73	332.7
400	4,431.35	221.57	196.75					
550	0.00	14.05	0.00					
551	0.00	50.00	0.00					
580	0.00	1.66	0.00					
590	0.00	0.00	1,035.66					
615	0.00	17.50	0.00					
	Total:	304.78	1,232.41					
	ehicle Maintenance ,431.35 Benefits:	0.00	Deductions:	304.78	Taxes:	666.73	Net Pay:	3,459.8
Earnings: 4				304.78	Taxes:	666.73	Net Pay:	3,459.8
Earnings: 4	,431.35 Benefits:	e	Deductions:		Taxes:	666.73	Net Pay:	3,459.8
Earnings: 4	,431.35 Benefits:	e Total (304.78 1,292.92 1,196.69	Taxes:	666.73	Net Pay:	3,459.8
Earnings: 4	,431.35 Benefits:	e Total (Deductions: Direct Deposits:	1,292.92	Taxes:	666.73	Net Pay:	3,459.8
Earnings: 4 artment: 1103	,431.35 Benefits:	e Total (Deductions: Direct Deposits:	1,292.92 1,196.69	Taxes:	666.73 Subject To	Net Pay: Employee	
Earnings: 4 artment: 1103 EARNINGS	,431.35 Benefits:	e Total (Total (Deductions: Direct Deposits: Check Amounts:	1,292.92 1,196.69 TAXES	Taxes:			Employe
Earnings: 4 artment: 1103 EARNINGS Pay Code	,431.35 Benefits:	e Total (Total (Units	Deductions: Direct Deposits: Check Amounts: Pay Amount	1,292.92 1,196.69 TAXES Code	Taxes:	Subject To	Employee	Employe 0.0
Earnings: 4 artment: 1103 EARNINGS Pay Code SAL	,431.35 Benefits: 8 - Fleet Maintenanc	e Total (Total) Units 2.00	Deductions: Direct Deposits: Check Amounts: Pay Amount 3,077.51	1,292.92 1,196.69 TAXES Code Federal W/H	Taxes:	Subject To 2,906.09	Employee 180.73	Employe 0.0 44.3
Earnings: 4 artment: 1103 EARNINGS Pay Code SAL DEDUCTIONS	,431.35 Benefits: 8 - Fleet Maintenanc Total:	e Total (Units 2.00 2.00	Deductions: Direct Deposits: Check Amounts: Pay Amount 3,077.51 3,077.51	1,292.92 1,196.69 TAXES Code Federal W/H MC	Taxes:	Subject To 2,906.09 3,059.96	Employee 180.73 44.37	Employe 0.0 44.3 189.7
Earnings: 4 artment: 1103 EARNINGS Pay Code SAL DEDUCTIONS Code	,431.35 Benefits: 3 - Fleet Maintenanc Total: Subject To	e Total (Total (Units 2.00 2.00 Employee	Deductions: Direct Deposits: Check Amounts: Pay Amount 3,077.51 3,077.51 Employer	1,292.92 1,196.69 TAXES Code Federal W/H MC SS	Taxes:	Subject To 2,906.09 3,059.96 3,059.96	Employee 180.73 44.37 189.72	Employe 0.0 44.3 189.7 0.0
Earnings: 4 artment: 1103 EARNINGS Pay Code SAL DEDUCTIONS	,431.35 Benefits: 3 - Fleet Maintenanc Total: Subject To 3,077.51	e Total (Units 2.00 2.00	Deductions: Direct Deposits: Check Amounts: Pay Amount 3,077.51 3,077.51	1,292.92 1,196.69 TAXES Code Federal W/H MC SS	Taxes:	Subject To 2,906.09 3,059.96 3,059.96 3,077.51	Employee 180.73 44.37 189.72 0.00	Employe 0.0 44.3 189.7 0.0
Earnings: 4 artment: 1103 EARNINGS Pay Code SAL DEDUCTIONS Code	,431.35 Benefits: 3 - Fleet Maintenanc Total: Subject To	e Total (Total (Units 2.00 2.00 Employee	Deductions: Direct Deposits: Check Amounts: Pay Amount 3,077.51 3,077.51 Employer	1,292.92 1,196.69 TAXES Code Federal W/H MC SS	Taxes:	Subject To 2,906.09 3,059.96 3,059.96 3,077.51	Employee 180.73 44.37 189.72 0.00	Employe 0.0 44.3 189.7 0.0
Earnings: 4 artment: 1103 EARNINGS Pay Code SAL DEDUCTIONS Code 400	,431.35 Benefits: 3 - Fleet Maintenanc Total: Subject To 3,077.51	e Total (Total (Units 2.00 2.00 2.00 Employee 153.87	Deductions: Direct Deposits: Check Amounts: Pay Amount 3,077.51 3,077.51 Employer 136.64	1,292.92 1,196.69 TAXES Code Federal W/H MC SS	Taxes:	Subject To 2,906.09 3,059.96 3,059.96 3,077.51	Employee 180.73 44.37 189.72 0.00	Employe 0.0 44.3 189.7 0.0
Earnings: 4 artment: 1103 EARNINGS Pay Code SAL DEDUCTIONS Code 400 580	,431.35 Benefits: 3 - Fleet Maintenanc Total: Subject To 3,077.51 0.00	e Total (Total (2.00 2.00 Employee 153.87 1.66	Deductions: Direct Deposits: Check Amounts: Pay Amount 3,077.51 3,077.51 3,077.51 Employer 136.64 0.00	1,292.92 1,196.69 TAXES Code Federal W/H MC SS	Taxes:	Subject To 2,906.09 3,059.96 3,059.96 3,077.51	Employee 180.73 44.37 189.72 0.00	3,459.8 Employe 0.0 44.3 189.7 0.0 234.0

RECAP 1103 - Fleet Maintenance

Earnings:	3,077.51	Benefits:	0.00	Deductions:	173.08	Taxes:	414.82	Net Pay:	2,489.61
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Pay Period: 05/16/2018 - 05/31/2018

Department: 2120 - County Treasurer

			Direct Deposits:	2,476.98				
		Total	Check Amounts:	0.00				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
S		8.00	146.99	Federal W/H		2,950.88	227.54	0.0
SAL		-6.00	3,374.40	MC		3,176.95	46.07	46.0
	Total:	2.00	3,521.39	SS		3,176.95	196.97	196.9
				Unemployment		1,592.42	0.00	0.0
DEDUCTIONS						Total:	470.58	243.0
Code	Subject To	Employee	Employer					
400	3,521.39	176.07	156.35					
520	0.00	50.00	0.00					
551	0.00	118.66	0.00					
580	0.00	3.32	0.00					
590	0.00	172.93	706.80					
615	0.00	52.85	0.00					
	Total:	573.83	863.15					
RECAP 2120 - County 1	Freasurer							
Earnings: 3,521.3 artment: 2130 - Co		0.00 Total	Deductions:	573.83	Taxes:	470.58	Net Pay:	2,476.9
		Total	Deductions: Direct Deposits: Check Amounts:	573.83 5,945.02 0.00	Taxes:	470.58	Net Pay:	2,476.9
		Total	Direct Deposits:	5,945.02 0.00	Taxes:	470.58	Net Pay:	2,476.9
artment: 2130 - Co		Total	Direct Deposits: Check Amounts:	5,945.02	Taxes:			
artment: 2130 - Co EARNINGS		Total Total	Direct Deposits:	5,945.02 0.00 TAXES Code	Taxes:	Subject To	Employee	Employe
artment: 2130 - Co EARNINGS Pay Code		Total Total Units	Direct Deposits: Check Amounts: Pay Amount	5,945.02 0.00 TAXES	Taxes:	Subject To 7,424.48		Employe 0.0
ertment: 2130 - Co EARNINGS Pay Code CT		Total Total Units 5.00	Direct Deposits: Check Amounts: Pay Amount 143.67	5,945.02 0.00 TAXES Code Federal W/H	Taxes:	Subject To 7,424.48 8,045.81	Employee 842.25	Employe 0.0 116.6
ertment: 2130 - Co EARNINGS Pay Code CT S		Total Total Units 5.00 2.50	Direct Deposits: Check Amounts: Pay Amount 143.67 57.29	5,945.02 0.00 TAXES Code Federal W/H MC SS		Subject To 7,424.48 8,045.81 8,045.81	Employee 842.25 116.66	Employe 0.0 116.6 498.8
EARNINGS Pay Code CT S SAL		Total Total Units 5.00 2.50 -27.50	Direct Deposits: Check Amounts: Pay Amount 143.67 57.29 7,775.08	5,945.02 0.00 TAXES Code Federal W/H MC		Subject To 7,424.48 8,045.81	Employee 842.25 116.66 498.85	Employe 0.0 116.6 498.8 0.0
EARNINGS Pay Code CT S SAL	unty Auditor	Total Total Units 5.00 2.50 -27.50 24.00	Direct Deposits: Check Amounts: Pay Amount 143.67 57.29 7,775.08 450.47	5,945.02 0.00 TAXES Code Federal W/H MC SS		Subject To 7,424.48 8,045.81 8,045.81 8,394.01	Employee 842.25 116.66 498.85 0.00	2,476.9 Employe 0.0 116.6 498.8 0.0 615.5
EARNINGS Pay Code CT S SAL Vacation	unty Auditor	Total Total Units 5.00 2.50 -27.50 24.00	Direct Deposits: Check Amounts: Pay Amount 143.67 57.29 7,775.08 450.47	5,945.02 0.00 TAXES Code Federal W/H MC SS		Subject To 7,424.48 8,045.81 8,045.81 8,394.01	Employee 842.25 116.66 498.85 0.00	Employe 0.0 116.6 498.8 0.0
EARNINGS Pay Code CT S SAL Vacation DEDUCTIONS	unty Auditor Total:	Total Total 5.00 2.50 -27.50 24.00 4.00	Direct Deposits: Check Amounts: Pay Amount 143.67 57.29 7,775.08 450.47 8,426.51	5,945.02 0.00 TAXES Code Federal W/H MC SS		Subject To 7,424.48 8,045.81 8,045.81 8,394.01	Employee 842.25 116.66 498.85 0.00	Employe 0.0 116.6 498.8 0.0
EARNINGS Pay Code CT S SAL Vacation DEDUCTIONS Code	unty Auditor Total: Subject To	Total Total Units 5.00 2.50 -27.50 24.00 4.00 Employee	Direct Deposits: Check Amounts: Pay Amount 143.67 57.29 7,775.08 450.47 8,426.51 Employer	5,945.02 0.00 TAXES Code Federal W/H MC SS		Subject To 7,424.48 8,045.81 8,045.81 8,394.01	Employee 842.25 116.66 498.85 0.00	Employe 0.0 116.6 498.8 0.0
EARNINGS Pay Code CT S SAL Vacation DEDUCTIONS Code 400	unty Auditor Total: Subject To 8,426.51	Total Total Units 5.00 2.50 -27.50 24.00 4.00 Employee 421.33	Direct Deposits: Check Amounts: Pay Amount 143.67 57.29 7,775.08 450.47 8,426.51 Employer 374.13	5,945.02 0.00 TAXES Code Federal W/H MC SS		Subject To 7,424.48 8,045.81 8,045.81 8,394.01	Employee 842.25 116.66 498.85 0.00	Employe 0.0 116.6 498.8 0.0
EARNINGS Pay Code CT S SAL Vacation DEDUCTIONS Code 400 520	unty Auditor Total: Subject To 8,426.51 0.00	Total Total Units 5.00 2.50 -27.50 24.00 4.00 Employee 421.33 200.00	Direct Deposits: Check Amounts: Pay Amount 143.67 57.29 7,775.08 450.47 8,426.51 Employer 374.13 0.00	5,945.02 0.00 TAXES Code Federal W/H MC SS		Subject To 7,424.48 8,045.81 8,045.81 8,394.01	Employee 842.25 116.66 498.85 0.00	Employ: 0.0 116.6 498.8 0.0
EARNINGS Pay Code CT S SAL Vacation DEDUCTIONS Code 400 520 550	unty Auditor Total: Subject To 8,426.51 0.00 0.00	Total Total 001ts 5.00 2.50 -27.50 24.00 4.00 4.00 Employee 421.33 200.00 32.50	Direct Deposits: Check Amounts: Pay Amount 143.67 57.29 7,775.08 450.47 8,426.51 Employer 374.13 0.00 0.00	5,945.02 0.00 TAXES Code Federal W/H MC SS		Subject To 7,424.48 8,045.81 8,045.81 8,394.01	Employee 842.25 116.66 498.85 0.00	Employe 0.0 116.6 498.8 0.0
EARNINGS Pay Code CT S SAL Vacation DEDUCTIONS Code 400 520 550 551 580	unty Auditor Total: Subject To 8,426.51 0.00 0.00 0.00 0.00	Total Total Units 5.00 2.50 -27.50 24.00 4.00 4.00 Employee 421.33 200.00 32.50 122.72 3.32	Direct Deposits: Check Amounts: Pay Amount 143.67 57.29 7,775.08 450.47 8,426.51 Employer 374.13 0.00 0.00 0.00 0.00 0.00	5,945.02 0.00 TAXES Code Federal W/H MC SS		Subject To 7,424.48 8,045.81 8,045.81 8,394.01	Employee 842.25 116.66 498.85 0.00	Employe 0.0 116.6 498.8 0.0
EARNINGS Pay Code CT S SAL Vacation DEDUCTIONS Code 400 520 550 551	unty Auditor Total: Subject To 8,426.51 0.00 0.00 0.00	Total Total 5.00 2.50 -27.50 24.00 4.00 Employee 421.33 200.00 32.50 122.72	Direct Deposits: Check Amounts: Pay Amount 143.67 57.29 7,775.08 450.47 8,426.51 Employer 374.13 0.00 0.00 0.00	5,945.02 0.00 TAXES Code Federal W/H MC SS		Subject To 7,424.48 8,045.81 8,045.81 8,394.01	Employee 842.25 116.66 498.85 0.00	Employe 0.0 116.6 498.8 0.0

RECAP 2130 - County Auditor

Total:

1,023.73

Earnings:	8,426.51	Benefits:	0.00	Deductions:	1,023.73	Taxes:	1,457.76	Net Pay:	5,945.02
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1,426.15

Pay Period: 05/16/2018 - 05/31/2018

Department: 2140 - Tax Assessor-Collector

)irect Deposits: heck Amounts:	6,491.27 0.00				
		TOLALC	meck Amounts;					
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
S		16.00	267.40	Federal W/H		7,754.41	622.95	0.0
SAL		-10.00	8,173.20	MC		8,281.83	120.08	120.0
Vacation	T -s-l.	8.00	107.69	SS		8,281.83	513.47	513.4
	Total:	14.00	8,548.29	Unemployment		6,638.55	0.00	0.0
DEDUCTIONS						Total:	1,250.50	633.5
Code	Subject To	Employee	Employer					
400	8,548.29	427.42	379.55					
520	0.00	100.00	0.00					
551	0.00	50.83	0.00					
580	0.00	6.64	0.00					
590	0.00	172.93	2,087.68					
615	0.00	42.70	0.00					
	Total:	800.52	2,467.23					
RECAP 2140 - Tax Assesso	or-Collector							
Earnings: 8,548.29	Benefits:	0.00	Deductions:	800.52	Taxes:	1,256.50	Net Pay:	6,491.2
	ity Clerk)irect Deposits:	8,870.68				
			Direct Deposits: Check Amounts:	8,870.68 940.75				
EARNINGS								
Pay Code		Total C Units	Check Amounts: Pay Amount	940.75		Subject To	Employee	Employe
		Total C Units 9.00	Pay Amount 12,544.47	940.75 TAXES		Subject To 11,624.02	Employee 791.29	
Pay Code	Total:	Total C Units	Check Amounts: Pay Amount	940.75 TAXES Code Federal W/H MC		-		0.0
Pay Code SAL		Total C Units 9.00	Pay Amount 12,544.47	940.75 TAXES Code Federal W/H MC SS		11,624.02 12,301.24 12,301.24	791.29 178.36 762.67	0.0 178.3
Pay Code SAL DEDUCTIONS	, Total:	Total (Units 9.00 9.00	Pay Amount 12,544.47 12,544.47	940.75 TAXES Code Federal W/H MC		11,624.02 12,301.24 12,301.24 10,524.17	791.29 178.36 762.67 0.00	0.0 178.3 762.6 0.0
Pay Code SAL DEDUCTIONS Code	Total: Subject To	Units 9.00 9.00 Employee	Pay Amounts: 12,544.47 12,544.47 Employer	940.75 TAXES Code Federal W/H MC SS		11,624.02 12,301.24 12,301.24	791.29 178.36 762.67	0.0 178.3 762.6 0.0
Pay Code SAL DEDUCTIONS Code 400	Total: Subject To 12,544.47	Total C Units 9.00 9.00 Employee 627.22	Pay Amounts: 12,544.47 12,544.47 Employer 556.97	940.75 TAXES Code Federal W/H MC SS		11,624.02 12,301.24 12,301.24 10,524.17	791.29 178.36 762.67 0.00	0.0 178.3 762.6 0.0
Pay Code SAL DEDUCTIONS Code 400 520	Total: Subject To 12,544.47 0.00	Total C Units 9.00 9.00 Employee 627.22 50.00	Pay Amounts: 12,544.47 12,544.47 556.97 0.00	940.75 TAXES Code Federal W/H MC SS		11,624.02 12,301.24 12,301.24 10,524.17	791.29 178.36 762.67 0.00	0.0 178.3 762.6 0.0
Pay Code SAL DEDUCTIONS Code 400 520 540	Total: Subject To 12,544.47 0.00 0.00	Total C Units 9.00 9.00 Employee 627.22 50.00 41.05	Pay Amounts: 12,544.47 12,544.47 556.97 0.00 0.00	940.75 TAXES Code Federal W/H MC SS		11,624.02 12,301.24 12,301.24 10,524.17	791.29 178.36 762.67 0.00	0.0 178.3 762.6 0.0
Pay Code SAL DEDUCTIONS Code 400 520 540 550	Total: Subject To 12,544.47 0.00 0.00 0.00 0.00	Total C Units 9.00 9.00 5.00 627.22 50.00 41.05 70.25	Pay Amounts: 12,544.47 12,544.47 12,544.47 556.97 0.00 0.00 0.00 0.00	940.75 TAXES Code Federal W/H MC SS		11,624.02 12,301.24 12,301.24 10,524.17	791.29 178.36 762.67 0.00	0.0 178.3 762.6 0.0
Pay Code SAL DEDUCTIONS Code 400 520 540 550 551	Total: Subject To 12,544.47 0.00 0.00 0.00 0.00 0.00	Total C Units 9.00 9.00 9.00 Employee 627.22 50.00 41.05 70.25 103.33	Pay Amounts: 12,544.47 12,544.47 12,544.47 556.97 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	940.75 TAXES Code Federal W/H MC SS		11,624.02 12,301.24 12,301.24 10,524.17	791.29 178.36 762.67 0.00	0.0 178.3 762.6 0.0
Pay Code SAL DEDUCTIONS Code 400 520 540 550 551 551 580	Total: Subject To 12,544.47 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Total C Units 9.00 9.00 627.22 50.00 41.05 70.25 103.33 9.96	Pay Amounts: 12,544.47 12,544.47 12,544.47 556.97 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	940.75 TAXES Code Federal W/H MC SS		11,624.02 12,301.24 12,301.24 10,524.17	791.29 178.36 762.67 0.00	0.0 178.3 762.6 0.0
Pay Code SAL DEDUCTIONS Code 400 520 540 550 551 551 580 590	Total: Subject To 12,544.47 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Total C Units 9.00 9.00 Employee 627.22 50.00 41.05 70.25 103.33 9.96 0.00	Pay Amounts: 12,544.47 12,544.47 12,544.47 556.97 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.761.76	940.75 TAXES Code Federal W/H MC SS		11,624.02 12,301.24 12,301.24 10,524.17	791.29 178.36 762.67 0.00	0.0 178.3 762.6 0.0
Pay Code SAL DEDUCTIONS Code 400 520 540 550 551 551 580 590 610	Total: Subject To 12,544.47 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Total C 9.00 9.00 9.00 Employee 627.22 50.00 41.05 70.25 103.33 9.96 0.00 29.26	Pay Amounts: 12,544.47 12,544.47 12,544.47 556.97 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	940.75 TAXES Code Federal W/H MC SS		11,624.02 12,301.24 12,301.24 10,524.17	791.29 178.36 762.67 0.00	0.0 178.3 762.6 0.0
Pay Code SAL DEDUCTIONS Code 400 520 540 550 551 551 580 590	Total: Subject To 12,544.47 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Total C Units 9.00 9.00 Employee 627.22 50.00 41.05 70.25 103.33 9.96 0.00 29.26 69.65	Pay Amounts: 12,544.47 12,544.47 12,544.47 12,544.47 Employer 556.97 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	940.75 TAXES Code Federal W/H MC SS		11,624.02 12,301.24 12,301.24 10,524.17	791.29 178.36 762.67 0.00	Employe 0.0 178.3 762.6 0.0 941.0
Pay Code SAL DEDUCTIONS Code 400 520 540 550 551 551 580 590 610	Total: Subject To 12,544.47 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Total C 9.00 9.00 9.00 Employee 627.22 50.00 41.05 70.25 103.33 9.96 0.00 29.26	Pay Amounts: 12,544.47 12,544.47 12,544.47 556.97 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	940.75 TAXES Code Federal W/H MC SS		11,624.02 12,301.24 12,301.24 10,524.17	791.29 178.36 762.67 0.00	0.0 178.3 762.6 0.0
Pay Code SAL DEDUCTIONS Code 400 520 540 550 551 551 580 590 610	Total: Subject To 12,544.47 0.000 0.000 0.000 0.000 0.000 0.0000	Total C Units 9.00 9.00 Employee 627.22 50.00 41.05 70.25 103.33 9.96 0.00 29.26 69.65	Pay Amounts: 12,544.47 12,544.47 12,544.47 12,544.47 Employer 556.97 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	940.75 TAXES Code Federal W/H MC SS		11,624.02 12,301.24 12,301.24 10,524.17	791.29 178.36 762.67 0.00	0.0 178.3 762.6 0.0

Pay Period: 05/16/2018 - 05/31/2018

Department: 3000 - County Clerk

				Direct Deposits: Check Amounts:	1,099.26 0.00				
EARNINGS					TAXES				
Pay Code			Units	Pay Amount	Code		Subject To	Employee	Employe
SAL			1.00	1,309.96	Federal W/H		1,201.46	2.85	0.0
		Total:	1.00	1,309.96	MC		1,276.96	18.52	18.5
				2,200100	SS		1,276.96	79.17	79.1
DEDUCTIONS					Unemployment		1,309.96	0.00	0.0
Code		Subject To	Employee	Employer			Total:	100.54	97.6
400		1,309.96	65.50	58.16					
520		0.00	10.00	0.00					
551		0.00	33.00	0.00					
580		0.00	1.66	0.00					
590		0.00	0.00	345.22					
		Total:	110.16	403.38					
RECAP 3000	- County Cler	k							
Earnings:	1,309.96	Benefits:	0.00	Deductions:	110.16	Taxes:	100.54	Net Pay:	1,099.2
-									-,
artment: 3	200 - Distri	ct Attorney							
			Totai I	Direct Deposits:	20,909.35				
			Total (Check Amounts:	147.77				
EARNINGS					TAXES				
Pay Code			Units	Pay Amount	Code		Subject To	Employee	Employe
165 Stipend w	v/RET		0.00	17.50	Federal W/H		25,798.98	2,636.65	0.0
DA Suppleme			0.00	151.67	MC		27,302.24	395.87	395.8
Longevity w/			0.00	150.00	SS		27,302.24	1,692.74	1,692.7
SAL			14.00	28,545.85	Unemployment		28,677.60	0.00	0.0
		Total:	14.00	28,865.02			Total:	4,725.26	2,088.6
DEDUCTIONS									
Code		Subject To	Employee	Employer					
400		28,865.02	1,443.26	1,281.59					
520		0.00	60.00	0.00					
550		0.00	18.25	0.00					
551		0.00	662.50	0.00					
552		0.00	104.16	0.00					
580		0.00	16.60	0.00					
590		0.00	691.72	4,553.30					
610		0.00	0.00	0.00					
615		0.00	86.15	0.00					
513		Total:	3,082.64	5,834.89					
			2,002.04	0,007.00					
RECAP 3200) - District Atte								
Earnings:	28,865.02	Benefits:	0.00	Deductions:	3,082.64	Taxes:	4,725.26	Net Pay:	21,057.1

Pay Period: 05/16/2018 - 05/31/2018

Department: 3220 - District Clerk

			irect Deposits: heck Amounts:	8,490.31 0.00				
		Total C	neck Amounts.	0.00				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
SAL		8.00	11,345.58	Federal W/H		10,110.84	798.68	0.0
	Total:	8.00	11,345.58	MC		10,678.12	154.82	154.8
				S 5		10,678.12	662.05	662.0
DEDUCTIONS				Unemployment		9,389.57	0.00	0.0
Code	Subject To	Employee	Employer			Total:	1,615.55	816.8
400	11,345.58	567.28	503.75					
551	0.00	58.00	0.00					
580	0.00	4.98	0.00					
590	0.00	534.51	2,450.16					
615	0.00	74.95	0.00					
	Total:	1,239.72	2,953.91					
RECAP 3220 - District Cler	rk							
Earnings: 11,345.58	Benefits:	0.00	Deductions:	1,239.72	Taxes:	1.615.55	Net Pay:	8,490.3
artment: 3230 - Distr	ict Judge		Direct Deposits:	2,193.77				
artment: 3230 - Distr	ict Judge		Direct Deposits: Check Amounts:	2,193.77 3,810.36			inter (
EARNINGS	ict Judge							
EARNINGS Pay Code	ict Judge	Total C Units		3,810.36		Subject To	Employee	Employe
EARNINGS Pay Code Hourly	ict Judge	Total C Units 1.00	Pay Amount 750.00	3,810.36 TAXES		Subject To 6,965.87	Employee 389.01	
EARNINGS Pay Code		Total (Units 1.00 8.00	heck Amounts: Pay Amount	3,810.36 TAXES Code		•		0.0
EARNINGS Pay Code Hourly	ict Judge Total:	Total C Units 1.00	Pay Amount 750.00	3,810.36 TAXES Code Federal W/H		6,965.87	389.01	Employe 0.0 108.2 462.8
EARNINGS Pay Code Hourly SAL		Total (Units 1.00 8.00	Pay Amounts: 750.00 7,233.35	3,810.36 TAXES Code Federal W/H MC		6,965.87 7,465.04	389.01 108.24 462.83 0.00	0.0 108.2 462.8 0.0
EARNINGS Pay Code Hourly SAL DEDUCTIONS	Total:	Total (Units 1.00 8.00 9.00	Pay Amounts: 750.00 7,233.35 7,983.35	3,810.36 TAXES Code Federal W/H MC SS		6,965.87 7,465.04 7,465.04	389.01 108.24 462.83	0.0 108.2
EARNINGS Pay Code Hourly SAL DEDUCTIONS Code	Total: Subject To	Total C Units 1.00 8.00 9.00 Employee	Pay Amounts: 750.00 7,233.35 7,983.35 Employer	3,810.36 TAXES Code Federal W/H MC SS		6,965.87 7,465.04 7,465.04 7,933.35	389.01 108.24 462.83 0.00	0.0 108.2 462.8 0.0
EARNINGS Pay Code Hourly SAL DEDUCTIONS Code 400	Total: Subject To 7,983.35	Total (Units 1.00 8.00 9.00 Employee 399.17	Pay Amounts: 7ay Amount 750.00 7,233.35 7,983.35 Employer 354.46	3,810.36 TAXES Code Federal W/H MC SS		6,965.87 7,465.04 7,465.04 7,933.35	389.01 108.24 462.83 0.00	0.0 108.2 462.8 0.0
EARNINGS Pay Code Hourly SAL DEDUCTIONS Code 400 520	Total: Subject To 7,983.35 0.00	Total (Units 1.00 8.00 9.00 Employee 399.17 100.00	Pay Amounts: 7ay Amount 750.00 7,233.35 7,983.35 Employer 354.46 0.00	3,810.36 TAXES Code Federal W/H MC SS		6,965.87 7,465.04 7,465.04 7,933.35	389.01 108.24 462.83 0.00	0.0 108.2 462.8 0.0
EARNINGS Pay Code Hourly SAL DEDUCTIONS Code 400 520 551	Total: Subject To 7,983.35 0.00 0.00	Total C Units 1.00 8.00 9.00 Employee 399.17 100.00 84.00	Pay Amounts: 7ay Amount 750.00 7,233.35 7,983.35 Employer 354.46 0.00 0.00	3,810.36 TAXES Code Federal W/H MC SS		6,965.87 7,465.04 7,465.04 7,933.35	389.01 108.24 462.83 0.00	0.0 108.2 462.8 0.0
EARNINGS Pay Code Hourly SAL DEDUCTIONS Code 400 520 551 580	Total: Subject To 7,983.35 0.00 0.00 0.00 0.00	Total C Units 1.00 8.00 9.00 Employee 399.17 100.00 84.00 1.66	Pay Amounts: 7ay Amount 750.00 7,233.35 7,983.35 Employer 354.46 0.00	3,810.36 TAXES Code Federal W/H MC SS		6,965.87 7,465.04 7,465.04 7,933.35	389.01 108.24 462.83 0.00	0.0 108.2 462.8 0.0
EARNINGS Pay Code Hourly SAL DEDUCTIONS Code 400 520 551	Total: Subject To 7,983.35 0.00 0.00 0.00 0.00 0.00	Total C Units 1.00 8.00 9.00 Employee 399.17 100.00 84.00	Pay Amounts: 7ay Amount 750.00 7,233.35 7,983.35 7,983.35 Employer 354.46 0.00 0.00 0.00 0.00 723.16	3,810.36 TAXES Code Federal W/H MC SS		6,965.87 7,465.04 7,465.04 7,933.35	389.01 108.24 462.83 0.00	0.0 108.2 462.8 0.0
EARNINGS Pay Code Hourly SAL DEDUCTIONS Code 400 520 551 580	Total: Subject To 7,983.35 0.00 0.00 0.00 0.00	Total C Units 1.00 8.00 9.00 Employee 399.17 100.00 84.00 1.66	Pay Amounts: 7ay Amount 750.00 7,233.35 7,983.35 Employer 354.46 0.00 0.00 0.00 0.00 0.00	3,810.36 TAXES Code Federal W/H MC SS		6,965.87 7,465.04 7,465.04 7,933.35	389.01 108.24 462.83 0.00	0.0 108.2 462.8 0.0
EARNINGS Pay Code Hourly SAL DEDUCTIONS Code 400 520 551 580 590	Total: Subject To 7,983.35 0.00 0.00 0.00 0.00 0.00	Total C Units 1.00 8.00 9.00 Employee 399.17 100.00 84.00 1.66 345.86	Pay Amounts: 7ay Amount 750.00 7,233.35 7,983.35 7,983.35 Employer 354.46 0.00 0.00 0.00 0.00 723.16	3,810.36 TAXES Code Federal W/H MC SS		6,965.87 7,465.04 7,465.04 7,933.35	389.01 108.24 462.83 0.00	0.0 108.2 462.8 0.0
EARNINGS Pay Code Hourly SAL DEDUCTIONS Code 400 520 551 580 590	Total: Subject To 7,983.35 0.00 0.00 0.00 0.00 0.00 0.00 Total:	Total C Units 1.00 8.00 9.00 9.00 Employee 399.17 100.00 84.00 1.66 345.86 88.45	Pay Amounts: 7ay Amount 750.00 7,233.35 7,983.35 5,983.35 Employer 354.46 0.00 0.00 723.16 0.00	3,810.36 TAXES Code Federal W/H MC SS		6,965.87 7,465.04 7,465.04 7,933.35	389.01 108.24 462.83 0.00	0.0 108.2 462.8 0.0

Department: 3240 - County Court Law

)irect Deposits: Theck Amounts:	2,171.46 3,788.19				
EARNINGS					TAXES				
Pay Code			Units	Pay Amount	Code		Subject To	Employee	Employe
Jud Stip			1.00	200.39	Federal W/H		7,361.35	726.82	0.0
SAL			2.00	9,012.69	MC		8,822.00	127.92	127.93
		Total:	3.00	9,213.08	SS		8,822.00	546.96	546.9
DEDUCTIONS					Unemployment		2,709.19	0.00	0.0
DEDUCTIONS		fublact To	Employee	Elaure			Total:	1,401.70	674.8
		Subject To	Employee	Employer					
400		9,213.08	460.65	409.06					
520		0.00	1,000.00	0.00					
550		0.00	29.50	0.00					
590		0.00	361.58	707.70					
		Total:	1,851.73	1,116.76					
RECAP 3240-	County Cour	rt Law							
Earnings:	9,213.08	Benefits:	0.00	Deductions:	1,851.73	Taxes:	1,401.70	Net Pay:	5,959.6
			100014	Check Amounts:	0.00				
EARNINGS Pay Code			Units	Day Amount	TAXES Code		Cuble of Ta	Fundamen	Frankrig
165 Stipend w/	DET		0.00	Pay Amount 17.50			Subject To	Employee	Employe
SAL	NUT		3.00	4,206.36	Federal W/H		3,166.46	228.45	0.0
345		Total:	3.00	4,206.36	MC SS		3,377.66	48.98	48.9
		rotai.	5.00	4,223.00			3,377.66	209.41 0.00	209.4
DEDUCTIONS					Unemployment		2,586.43 Total:	486.84	0.0
Code		Subject To	Employee	Employer			Total.	400.04	230.3
400		4,223.86	211.20	187.54					
550		0.00	41.38	0.00					
551		0.00	186.25	0.00					
560		0.00	75.00	0.00					
580		0.00	1.66	0.00					
590		0.00	539.52	1,064.31					
615		0.00	79.05	0.00					
		Total:	1,134.06	1,251.85					
		a sur presert	2,23,1100	-1-4-2444					
RECAP 3251 - Earnings:	- JP Prect. 1 4,223.86	Benefits:	0.00	Deductions:	1.134.06	Taxes:	486.84		2,602.9
								Net Pay:	

Department: 3252 - JP Prect. 2

			Direct Deposits: Check Amounts:	3,327.94 0.00				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
165 Stipend w/RET		0.00	17.50	Federal W/H		3,982.21	315.49	0.00
SAL		3.00	4,217-83	MC		4,193.98	60.81	60.81
	Total:	3.00	4,235.33	S 5		4,193.98	260.02	260.02
				Unemployment		2,609.15	0.00	0.0
DEDUCTIONS						Total:	636.32	320.8
Code	Subject To	Employee	Employer					
400	4,235.33	211.77	188.05					
580	0.00	3.32	0.00					
590	0.00	0.00	1,035.66					
610	0.00	14.63	0.00					
615	0.00	41.35	0.00					
	Total:	271.07	1,223.71					
RECAP 3252 - JP Prect. 2								
Earnings: 4,235.33	Benefits:	0.00	Deductions:	271.07	Taxes:	636.32	Net Pay:	3,327.9
partment: 3253 - JP Pro	ect. 3							
		Total	Direct Deposits:	2,141.58				
			Check Amounts:	0.00				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
165 Stipend w/RET		0.00	17.50	Federal W/H		2,476.96	134.63	0.0
SAL		2.00	2,926.60	MC		2,624.17	38.05	38.0
	Total:	2.00	2,944.10	SS		2,624.17	162.70	162.7
				Unemployment		1,317.92	0.00	0.0
DEDUCTIONS						Total:	335.38	200.7
Code	Subject To	Employee	Employer					
400	2,944.10	147.21	130.72					
550	0.00	14.75	0.00					
551	0.00	100.00	0.00					

590

615

Earnings:

RECAP 3253 - JP Prect. 3

2,944.10

0.00

0.00

Total:

Benefits:

172.93

32.25

467.14

0.00

706.80

837.52

0.00

Deductions:

467.14

Taxes:

335.38

2,141.58

Net Pay:

Department: 3254 - JP Prect. 4

			Direct Deposits:	1,735.08 0.00			
		totatt	neck Amounts:	0.00			
EARNINGS				TAXES			
Pay Code		Units	Pay Amount	Code	Subject To	Employee	Employer
165 Stipend w/RET		0.00	17.50	Federal W/H	2,427.18	195.11	0.00
SAL		2.00	2,926.60	MC	2,574.39	37.33	37.33
	Total:	2.00	2,944.10	SS	2,574.39	159.61	159.61
DEDUCTIONS				Unemployment	1,317.92	0.00	0.00
Code	Subject To	Employee	Employer		Total:	392.05	196.94
400	2,944.10	147.21	130.72				
530	0.00	262.50	0.00				
540	0.00	34.23	0.00				
580	0.00	3.32	0.00				
590	0.00	345.86	723.16				
615	0.00	23.85					
012			0.00				
	Total:	816.97	853.88				
RECAP 3254 - JP Prect. 4							
Earnings: 2,944.10	Benefits:	0.00	Deductions:	816.97 Taxe	es: 392.05	Net Pay:	1,735.08
			Direct Deposits: Check Amounts:	50,154.60 2,171.66			
EARNINGS							
Pay Code				TAXES			
		Units	Pay Amount	TAXES Code	Subject To	Employee	Employe
112 - Holiday		Units 176.00	Pay Amount 3,158.02	Code	Subject To 63,777.58	Employee 5,629.83	
					63,777.58	Employee 5,629.83 976.26	0.0
112 - Holiday		176.00	3,158.02	Code Federal W/H		5,629.83	0.0 976.2
112 - Holiday 165 Stipend w/RET		176.00 0.00	3,158.02 557.50	Code Federal W/H MC	63,777.58 67,327.94	5,629.83 976.26	0.00 976.20 4,174.29
112 - Holiday 165 Stipend w/RET Hourly	Total:	176.00 0.00 30.00	3,158.02 557.50 1,074.90	Code Federal W/H MC SS	63,777.58 67,327.94 67,327.94	5,629.83 976.26 4,174.29	0.0 976.2 4,174.2 0.0
112 - Holiday 165 Stipend w/RET Hourly	Total:	176.00 0.00 30.00 38.00	3,158.02 557.50 1,074.90 64,636.71	Code Federal W/H MC SS	63,777.58 67,327.94 67,327.94 66,128.75	5,629.83 976.26 4,174.29 0.00	0.00 976.20 4,174.29 0.00
112 - Holiday 165 Stipend w/RET Hourly SAL		176.00 0.00 30.00 38.00 244.00	3,158.02 557.50 1,074.90 64,636.71 69,427.13	Code Federal W/H MC SS	63,777.58 67,327.94 67,327.94 66,128.75	5,629.83 976.26 4,174.29 0.00	0.00 976.20 4,174.29 0.00
112 - Holiday 165 Stipend w/RET Hourly SAL DEDUCTIONS	Total: Subject To 69,427.13	176.00 0.00 30.00 38.00 244.00 Employee	3,158.02 557.50 1,074.90 64,636.71 69,427.13 Employer	Code Federal W/H MC SS	63,777.58 67,327.94 67,327.94 66,128.75	5,629.83 976.26 4,174.29 0.00	0.0 976.2 4,174.2 0.0
112 - Holiday 165 Stipend w/RET Hourly SAL DEDUCTIONS Code	Subject To	176.00 0.00 30.00 38.00 244.00	3,158.02 557.50 1,074.90 64,636.71 69,427.13	Code Federal W/H MC SS	63,777.58 67,327.94 67,327.94 66,128.75	5,629.83 976.26 4,174.29 0.00	0.0 976.2 4,174.2 0.0
112 - Holiday 165 Stipend w/RET Hourly SAL DEDUCTIONS Code 400 520	Subject To 69,427.13	176.00 0.00 30.00 38.00 244.00 Employee 3,471.36 79.00	3,158.02 557.50 1,074.90 64,636.71 69,427.13 Employer 3,082.57	Code Federal W/H MC SS	63,777.58 67,327.94 67,327.94 66,128.75	5,629.83 976.26 4,174.29 0.00	0.0 976.2 4,174.2 0.0
112 - Holiday 165 Stipend w/RET Hourly SAL DEDUCTIONS Code 400 520 530	Subject To 69,427.13 0.00 0.00	176.00 0.00 30.00 38.00 244.00 Employee 3,471.36 79.00 505.50	3,158.02 557.50 1,074.90 64,636.71 69,427.13 Employer 3,082.57 0.00 0.00	Code Federal W/H MC SS	63,777.58 67,327.94 67,327.94 66,128.75	5,629.83 976.26 4,174.29 0.00	0.0 976.2 4,174.2 0.0
112 - Holiday 165 Stipend w/RET Hourly SAL DEDUCTIONS Code 400 520 530 540	Subject To 69,427.13 0.00 0.00 0.00	176.00 0.00 30.00 38.00 244.00 Employee 3,471.36 79.00 505.50 38.13	3,158.02 557.50 1,074.90 64,636.71 69,427.13 Employer 3,082.57 0.00 0.00 0.00	Code Federal W/H MC SS	63,777.58 67,327.94 67,327.94 66,128.75	5,629.83 976.26 4,174.29 0.00	0.0 976.2 4,174.2 0.0
112 - Holiday 165 Stipend w/RET Hourly SAL DEDUCTIONS Code 400 520 530 540 550	Subject To 69,427.13 0.00 0.00 0.00 0.00	176.00 0.00 30.00 244.00 Employee 3,471.36 79.00 505.50 38.13 110.88	3,158.02 557.50 1,074.90 64,636.71 69,427.13 Employer 3,082.57 0.00 0.00 0.00 0.00	Code Federal W/H MC SS	63,777.58 67,327.94 67,327.94 66,128.75	5,629.83 976.26 4,174.29 0.00	Employe 0.00 976.20 4,174.20 0.00 5,150.50
112 - Holiday 165 Stipend w/RET Hourly SAL DEDUCTIONS Code 400 520 530 540	Subject To 69,427.13 0.00 0.00 0.00	176.00 0.00 30.00 38.00 244.00 Employee 3,471.36 79.00 505.50 38.13	3,158.02 557.50 1,074.90 64,636.71 69,427.13 Employer 3,082.57 0.00 0.00 0.00	Code Federal W/H MC SS	63,777.58 67,327.94 67,327.94 66,128.75	5,629.83 976.26 4,174.29 0.00	0.0 976.2 4,174.2 0.0

Earnings:	69,427.13	Benefits:	0.00	Deductions:	6,320.49	Taxes:	10,780.38
RECAP 430	0 - County Sheri	iff					
		Total:	6,320.49	14,934.57			
615		0.00	379.80	0.00			
610		0.00	102.41	0.00			
590		0.00	1,210.51	11,852.00			

52,326.26

Net Pay:

Department: 4310 - County Jail

			Direct Deposits: Theck Amounts:	63,061.99 4,570.86				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
112 - Holiday		288.00	4,868.62	Federal W/H		81,615.18	6,694.81	0.00
165 Stipend w/RET		0.00	215.00	MC		86,098.99	1,248.51	1,248.5
Hourly		8.00	132.35	55		86,098.99	5,338.18	5,338.1
LWOP		60.00	-1,089.60	Unemployment		87,530.84	0.00	0.00
SAL		56.00	83,548.47			Total:	13,281.50	6,586.6
	Total:	412.00	87,674.84				·	
DEDUCTIONS								
Code	Subject To	Employee	Employer					
400	87,674.84	4,383.81	3,892.87					
520	0.00	100.00	0.00					
530	0.00	429.38	0.00					
550	0.00	144.00	0.00					
551	0.00	116.33	0.00					
580	0.00	28.22	0.00					
590	0.00	691.72	18,016.88					
610	0.00	58.52	0.00					
615	0.00	623.80	0.00					
620	0.00	184.71	0.00					
020	Total:	6,760.49	21,909.75					
RECAP 4310 - County Jai	1							
Earnings: 87,674.84	Benefits:	0.00	Deductions:	6,760.49	Taxes:	13,281.50	Net Pay:	67,632.8
artment: 4321 - Con	stables-Pct. 1							
			Direct Deposits:	451.97				
		Total	Check Amounts:	871.79				
				TAXES				
EARNINGS Pay Code		Units	Pay Amount	Code		Subject To	Employee	• •
Pay Code 165 Stipend w/RET		0.00	17.50	Code Federal W/H		1,497.93	53.55	0.0
Pay Code 165 Stipend w/RET Hourly		0.00 41.50	17.50 518.75	Code Federal W/H MC		1,497.93 1,576.77	53.55 22.86	0.0 22.8
		0.00 41.50 1.00	17.50 518.75 1,040.52	Code Federal W/H MC SS		1,497.93 1,576.77 1,576.77	53.55 22.86 97.76	0.0 22.8 97.7
Pay Code 165 Stipend w/RET Hourly	Total:	0.00 41.50	17.50 518.75	Code Federal W/H MC		1,497.93 1,576.77 1,576.77 518.75	53.55 22.86 97.76 0.00	0.0 22.8 97.7 0.0
Pay Code 165 Stipend w/RET Hourly SAL	Total:	0.00 41.50 1.00	17.50 518.75 1,040.52	Code Federal W/H MC SS		1,497.93 1,576.77 1,576.77	53.55 22.86 97.76	0.0 22.8 97.7 0.0
Pay Code 165 Stipend w/RET Hourly SAL DEDUCTIONS Code	Subject To	0.00 41.50 1.00 42.50 Employee	17.50 518.75 1,040.52 1,576.77 Employer	Code Federal W/H MC SS		1,497.93 1,576.77 1,576.77 518.75	53.55 22.86 97.76 0.00	0.0 22.8 97.7 0.0
Pay Code 165 Stipend w/RET Hourly SAL DEDUCTIONS		0.00 41.50 1.00 42.50	17.50 518.75 1,040.52 1,576.77	Code Federal W/H MC SS		1,497.93 1,576.77 1,576.77 518.75	53.55 22.86 97.76 0.00	0.0 22.8 97.7 0.0
Pay Code 165 Stipend w/RET Hourly SAL DEDUCTIONS Code	Subject To	0.00 41.50 1.00 42.50 Employee	17.50 518.75 1,040.52 1,576.77 Employer	Code Federal W/H MC SS		1,497.93 1,576.77 1,576.77 518.75	53.55 22.86 97.76 0.00	0.0 22.8 97.7 0.0
Pay Code 165 Stipend w/RET Hourly SAL DEDUCTIONS Code	Subject To 1,576.77 Total:	0.00 41.50 1.00 42.50 Employee 78.84	17.50 518.75 1,040.52 1,576.77 Employer 70.01	Code Federal W/H MC SS		1,497.93 1,576.77 1,576.77 518.75	53.55 22.86 97.76 0.00	Employe 0.04 22.84 97.74 0.04 120.6

Pay Period: 05/16/2018 - 05/31/2018

Department: 4322 - Constables-Pct. 2

			Direct Deposits: Check Amounts:	1,511.71 0.00				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
165 Stipend w/RET		0.00	17.50	Federal W/H		1,887.34	223.61	0.00
Hourly		75.00	937,50	MC		1,987.12	28.81	28.8
SAL		1.00	1,040.52	SS		1,987.12	123.21	123.21
	Total:	76.00	1,995.52	Unemployment		1,995.52	0.00	0.00
			-,	onemployment		Total:	375.63	152.02
DEDUCTIONS						TOTAL.	373.03	132.01
Code	Subject To	Employee	Employer					
400	1,995.52	99.78	88.61					
590	0.00	0.00	345.22					
615	0.00	8.40	0.00					
	Total:	108.18	433.83					
	10181.	100.10						
RECAP 4322 - Constables-	-Pct. 2							
RECAP 4322 - Constables- Earnings: 1,995.52	•Pct. 2 Benefits:	0.00	Deductions:	108.18 T	Taxes:	375.63	Net Pay:	1,511.7
	Benefits:			108.18 T	Taxes:	375.63	Net Pay:	1,511.7
Earnings: 1,995.52	Benefits:	Total	Deductions: Direct Deposits: Check Amounts:		Taxes:	375.63	Net Pay:	1,511.7
Earnings: 1,995.52	Benefits:	Total	Direct Deposits:	1,744.24 0.00	Taxes:	375.63	Net Pay:	1,511.7
Earnings: 1,995.52 artment: 4323 - Consi EARNINGS	Benefits:	Total Total	Direct Deposits: Check Amounts:	1,744.24 0.00 TAXES	Taxes:			
Earnings: 1,995.52 artment: 4323 - Cons i EARNINGS Pay Code	Benefits:	Total Total Units	Direct Deposits: Check Amounts: Pay Amount	1,744.24 0.00 TAXES Code	Taxes:	Subject To	Employee	Employe
Earnings: 1,995.52 artment: 4323 - Const EARNINGS Pay Code 165 Stipend w/RET	Benefits:	Total Total Units 0.00	Direct Deposits: Check Amounts: Pay Amount 17.50	1,744.24 0.00 TAXES Code Federal W/H	Taxes:	Subject To 2,092.16	Employee 46.87	Employe 0.00
Earnings: 1,995.52 artment: 4323 - Const EARNINGS Pay Code 165 Stipend w/RET Hourly	Benefits:	Total Total Units 0.00 77.00	Direct Deposits: Check Amounts: Pay Amount 17.50 1,382.44	1,744.24 0.00 TAXES Code Federal W/H MC	Taxes:	Subject To 2,092.16 2,214.18	Employee 46.87 32.11	Employe 0.0 32.1
Earnings: 1,995.52 artment: 4323 - Const EARNINGS Pay Code 165 Stipend w/RET	Benefits: tables-Pct. 3	Total Total Units 0.00 77.00 1.00	Direct Deposits: Check Amounts: Pay Amount 17.50 1,382.44 1,040.52	1,744.24 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 2,092.16 2,214.18 2,214.18	Employee 46.87 32.11 137.28	Employe 0.0 32.1 137.2
Earnings: 1,995.52 artment: 4323 - Const EARNINGS Pay Code 165 Stipend w/RET Hourly	Benefits:	Total Total Units 0.00 77.00	Direct Deposits: Check Amounts: Pay Amount 17.50 1,382.44	1,744.24 0.00 TAXES Code Federal W/H MC	Taxes:	Subject To 2,092.16 2,214.18 2,214.18 2,410.96	Employee 45.87 32.11 137.28 0.00	Employe 0.0 32.1 137.2 0.0
Earnings: 1,995.52 artment: 4323 - Const EARNINGS Pay Code 165 Stipend w/RET Hourly	Benefits: tables-Pct. 3	Total Total Units 0.00 77.00 1.00	Direct Deposits: Check Amounts: Pay Amount 17.50 1,382.44 1,040.52	1,744.24 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 2,092.16 2,214.18 2,214.18	Employee 46.87 32.11 137.28	Employe 0.0 32.1 137.2 0.0
Earnings: 1,995.52 artment: 4323 - Cons t EARNINGS Pay Code 165 Stipend w/RET Hourly SAL	Benefits: tables-Pct. 3	Total Total Units 0.00 77.00 1.00	Direct Deposits: Check Amounts: Pay Amount 17.50 1,382.44 1,040.52	1,744.24 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 2,092.16 2,214.18 2,214.18 2,410.96	Employee 45.87 32.11 137.28 0.00	Employe 0.0 32.1 137.2 0.0
Earnings: 1,995.52 artment: 4323 - Cons EARNINGS Pay Code 165 Stipend w/RET Hourly SAL DEDUCTIONS	Benefits: tables-Pct. 3 Total:	Total Total Units 0.00 77.00 1.00 78.00	Direct Deposits: Check Amounts: Pay Amount 17.50 1,382.44 1,040.52 2,440.46	1,744.24 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 2,092.16 2,214.18 2,214.18 2,410.96	Employee 45.87 32.11 137.28 0.00	Employe 0.0 32.1 137.2 0.0
Earnings: 1,995.52 artment: 4323 - Const EARNINGS Pay Code 165 Stipend w/RET Hourly SAL DEDUCTIONS Code	Benefits: tables-Pct. 3 Total: Subject To	Total Total Units 0.00 77.00 1.00 78.00 Employee	Direct Deposits: Check Amounts: Pay Amount 17.50 1,382.44 1,040.52 2,440.46 Employer	1,744.24 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 2,092.16 2,214.18 2,214.18 2,410.96	Employee 45.87 32.11 137.28 0.00	Employe 0.0 32.1 137.2 0.0
Earnings: 1,995.52 artment: 4323 - Const EARNINGS Pay Code 165 Stipend w/RET Hourly SAL DEDUCTIONS Code 400	Benefits: tables-Pct. 3 Total: Subject To 2,440.46	Total Total Units 0.00 77.00 1.00 78.00 Employee 122.02	Direct Deposits: Check Amounts: Pay Amount 17.50 1,382.44 1,040.52 2,440.46 Employer 108.36	1,744.24 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 2,092.16 2,214.18 2,214.18 2,410.96	Employee 45.87 32.11 137.28 0.00	Employe 0.0 32.1 137.2
Earnings: 1,995.52 artment: 4323 - Const EARNINGS Pay Code 165 Stipend w/RET Hourly SAL DEDUCTIONS Code 400 530 550	Benefits: tables-Pct. 3 Total: Subject To 2,440.46 0.00 0.00	Total Total Units 0.00 77.00 1.00 78.00 Employee 122.02 130.00 29.50	Direct Deposits: Check Amounts: Pay Amount 17.50 1,382.44 1,040.52 2,440.46 Employer 108.36 0.00 0.00	1,744.24 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 2,092.16 2,214.18 2,214.18 2,410.96	Employee 45.87 32.11 137.28 0.00	Employe 0.0 32.1 137.2 0.0
Earnings: 1,995.52 artment: 4323 - Const EARNINGS Pay Code 165 Stipend w/RET Hourly SAL DEDUCTIONS Code 400 530	Benefits: tables-Pct. 3 Total: Subject To 2,440.46 0.00	Total Total Units 0.00 77.00 1.00 78.00 Employee 122.02 130.00	Direct Deposits: Check Amounts: Pay Amount 17.50 1,382.44 1,040.52 2,440.46 Employer 108.36 0.00	1,744.24 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 2,092.16 2,214.18 2,214.18 2,410.96	Employee 45.87 32.11 137.28 0.00	Employe 0.0 32.1 137.2 0.0

 RECAP
 4323 - Constables-Pct. 3

 Earnings:
 2,440.46
 Be

615

3 Benefits: 0.00

23.85

479.96

0.00

Total:

Deductions: 479.96

0.00

469.94

Taxes: 216.26

Net Pay: 1,744.24

Pay Period: 05/16/2018 - 05/31/2018

Department: 4324 - Constables-Pct. 4

				Direct Deposits:	1,460.87 0.00				
			Total C	neck Amounts:	0.00				
EARNINGS					TAXES				
Pay Code			Units	Pay Amount	Code		Subject To	Employee	Employe
165 Stipend v	v/RET		0.00	17.50	Federal W/H		1,714.04	112,60	0.00
Hourly			50.00	974.95	MC		1,815.69	26.33	26.3
SAL			1.00	1,040.52	S5		1,815.69	112.58	112.5
		Total:	51.00	2,032.97	Unemployment		974.95	0.00	0.0
							Total:	251.51	138.9
DEDUCTIONS Code		Subject To	Employee	Employer					
400		2,032.97	101.65	90.26					
550		0.00	20.50	0.00					
580		0.00	1.66	0.00					
590		0.00	172.93	361.58					
		0.00	23.85	0.00					
615									
		Total:	320.59	451.84					
		Data 4							
RELAP 4324	4 - Constables-	PCT. 4							
Earnings:	2,032.97	Benefits:	0.00	Deductions:	320.59	Taxes:	251.51	Net Pay:	1,460.8
Earnings:	2,032.97	Benefits:	0.00	Deductions:	320.59	Taxes:	251.51	Net Pay:	1,460.8
Earnings:		Benefits:				Taxes:	251.51	Net Pay:	1,460.8
Earnings:	2,032.97	Benefits:	Total I	Direct Deposits:	582.17	Taxes:	251.51	Net Pay:	1,460.8
Earnings:	2,032.97	Benefits:	Total I			Taxes:	251.51	Net Pay:	1,460.8
Earnings:	2,032.97	Benefits:	Total I	Direct Deposits:	582.17	Taxes:	251.51	Net Pay:	1,460.8
Earnings: artment: 4	2,032.97	Benefits:	Total I	Direct Deposits:	582.17 0.00	Taxes:	251.51 Subject To	Net Pay:	1,460.8 Employe
Earnings: artment: 4 EARNINGS	2,032.97	Benefits:	Total I Total (Direct Deposits: Check Amounts:	582.17 0.00 TAXES	Taxes:			Employe
Earnings: artment: 4 EARNINGS Pay Code	2,032.97	Benefits:	Total 1 Total (Units	Direct Deposits: Check Amounts: Pay Amount	582.17 0.00 TAXES Code	Taxes:	Subject To	Employee	
Earnings: artment: 4 EARNINGS Pay Code Hourly	2,032.97 1330 - Drive	Benefits: r's License	Total 1 Total 0 Units 56.00	Direct Deposits: Check Amounts: Pay Amount 686.00	582.17 0.00 TAXES Code Federal W/H	Taxes:	Subject To 651.70	Employee 17.05	Employe 0.0 9.9
Earnings: artment: 4 EARNINGS Pay Code Hourly DEDUCTIONS	2,032.97 1330 - Drive	Benefits: r's License	Total 1 Total 0 Units 56.00	Direct Deposits: Check Amounts: Pay Amount 686.00	582.17 0.00 TAXES Code Federal W/H MC		Subject To 651.70 686.00	Employee 17.05 9.95	Employe 0.0 9.9 42.5
Earnings: artment: 4 EARNINGS Pay Code Hourly	2,032.97 1330 - Drive	Benefits: r's License Total: Subject To	Total f Total (Units 56.00 56.00 Employee	Direct Deposits: Check Amounts: Pay Amount 686.00	582.17 0.00 TAXES Code Federal W/H MC SS		Subject To 651.70 686.00 686.00	Employee 17.05 9.95 42.53	Employe 0.0
Earnings: artment: 4 EARNINGS Pay Code Hourly DEDUCTIONS	2,032.97 1330 - Drive	Benefits: r's License Total:	Total f Total (Units 56.00 56.00	Direct Deposits: Check Amounts: Pay Amount 686.00 686.00	582.17 0.00 TAXES Code Federal W/H MC SS		Subject To 651.70 686.00 686.00 686.00	Employee 17.05 9.95 42.53 0.00	Employe 0.0 9.9 42.5 0.0
Earnings: artment: 4 EARNINGS Pay Code Hourly DEDUCTIONS Code	2,032.97 1330 - Drive	Benefits: r's License Total: Subject To	Total f Total (Units 56.00 56.00 Employee	Direct Deposits: Check Amounts: Pay Amount 686.00 686.00 Employer	582.17 0.00 TAXES Code Federal W/H MC SS		Subject To 651.70 686.00 686.00 686.00	Employee 17.05 9.95 42.53 0.00	Employe 0.0 9.9 42.5 0.0
Earnings: artment: 4 EARNINGS Pay Code Hourly DEDUCTIONS Code 400	2,032.97 1330 - Drive	Benefits: r's License Total: Subject To 686.00 Total:	Total f Total (Units 56.00 56.00 Employee 34.30	Direct Deposits: Check Amounts: Pay Amount 686.00 686.00 686.00 Employer 30.46	582.17 0.00 TAXES Code Federal W/H MC SS		Subject To 651.70 686.00 686.00 686.00	Employee 17.05 9.95 42.53 0.00	Employe 0.0 9.9 42.5 0.0

Department: 5401 - Juvenile Probation

)irect Deposits: heck Amounts:	14,318.67 0.00				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
165 Stipend w/RET		0.00	140.00	Federal W/H		17,062.91	1,336.77	0.0
PER DIEM ALLOWANCE		0.00	105.00	MĆ		18,311.43	265.52	265.5
SAL	T	9.00	19,825.55	SS		18,311.43	1,135.31	1,135.3
	Total:	9.00	20,070.55	Unemployment		20,070.55	0.00	0.0
DEDUCTIONS			£ 1			Total:	2,737.60	1,400.8
Code	Subject To	Employee	Employer					
400	20,070.55	1,003.52	891.15					
520	0.00	245.00	0.00					
551	0.00	521.00	0.00					
552	0.00	416.33	0.00					
580	0.00	6.64	0.00					
590	0.00	707.44	2,811.74					
615	0.00	114.35	0.00					
015	Total:	3,014.28	3,702.89					
		0,024.20	3,702.05					
RECAP 5401 - Juvenile Pro	obation							
Earnings: 20,070.55 artment: 6520 - Build	Benefits:	0.00	Deductions:	3,014.28	Taxes:	2,737.60	Net Pay:	14,318.6
Earnings: 20,070.55 artment: 6520 - Build		ance Total I	Direct Deposits:	6,793.88	Taxes:	2,737.60	Net Pay:	14,318.6
		ance Total I			Taxes:	2,737.60	Net Pay:	14,318.6
		ance Total I	Direct Deposits:	6,793.88	Taxes:	2,737.60	Net Pay:	14,318.6
artment: 6520 - Build		ance Total I	Direct Deposits:	6,793.88 0.00	Taxes:	2,737.60 Subject To	Net Pay:	
artment: 6520 - Build EARNINGS		ance Total I Total (Direct Deposits: Check Amounts:	6,793.88 0.00 TAXES	Taxes:			14,318.6 Employe
artment: 6520 - Build EARNINGS Pay Code		ance Total (Total (Units	Direct Deposits: Check Amounts: Pay Amount	6,793.88 0.00 TAXES Code	Taxes:	Subject To	Employee	Employe
artment: 6520 - Build EARNINGS Pay Code 165 Stipend w/RET		ance Total (Total (Units 0.00	Direct Deposits: Check Amounts: Pay Amount 52.50	6,793.88 0.00 TAXES Code Federal W/H	Taxes:	Subject To 8,099.96	Employee 631.62	Employ 0.0 123.7
EARNINGS Pay Code 165 Stipend w/RET SAL	ling Mainten	Total I Total (Units 0.00 6.00	Direct Deposits: Check Amounts: Pay Amount 52.50 8,617.80	6,793.88 0.00 TAXES Code Federal W/H MC	Taxes:	Subject To 8,099.96 8,533.49	Employee 631.62 123.74	Employ. 0.(123.7 529.(
EARNINGS Pay Code 165 Stipend w/RET SAL DEDUCTIONS	ling Maintena	Units 0.00 6.00	Direct Deposits: Check Amounts: Pay Amount 52.50 8,617.80 8,670.30	6,793.88 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 8,099.96 8,533.49 8,533.49	Employee 631.62 123.74 529.08	Employ 0.0 123.7 529.0 0.0
EARNINGS Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code	ling Maintena Total: Subject To	Total I Total (Units 0.00 6.00 6.00 Employee	Direct Deposits: Check Amounts: Pay Amount 52.50 8,617.80 8,670.30 Employer	6,793.88 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 8,099.96 8,533.49 8,533.49 8,623.92	Employee 631.62 123.74 529.08 0.00	Employ 0.0 123.7 529.0 0.0
EARNINGS Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400	Total: Subject To 8,670.30	Units 0.00 6.00 6.00 Employee 433.53	Direct Deposits: Check Amounts: Pay Amount 52.50 8,617.80 8,670.30 Employer 384.96	6,793.88 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 8,099.96 8,533.49 8,533.49 8,623.92	Employee 631.62 123.74 529.08 0.00	Employ 0.(123.7 529.(0.(
EARNINGS Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400 550	Total: Subject To 8,670.30 0.00	Total I Total 0 Units 0.00 6.00 6.00 6.00 Employee 433.53 46.38	Direct Deposits: Check Amounts: Pay Amount 52.50 8,617.80 8,670.30 Employer 384.96 0.00	6,793.88 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 8,099.96 8,533.49 8,533.49 8,623.92	Employee 631.62 123.74 529.08 0.00	Employ 0.(123.7 529.(0.(
EARNINGS Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400 550 551	Total: Subject To 8,670.30 0.00 0.00	Employee 433.53 46.38 64.53	Direct Deposits: Check Amounts: Pay Amount 52.50 8,617.80 8,670.30 Employer 384.96 0.00 0.00	6,793.88 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 8,099.96 8,533.49 8,533.49 8,623.92	Employee 631.62 123.74 529.08 0.00	Employ 0.0 123.7 529.0 0.0
EARNINGS Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400 550 551 580	Total: Subject To 8,670.30 0.00 0.00 0.00 0.00	Employee 433.53 46.38 6.64	Direct Deposits: Check Amounts: Pay Amount 52.50 8,617.80 8,670.30 Employer 384.96 0.00 0.00 0.00	6,793.88 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 8,099.96 8,533.49 8,533.49 8,623.92	Employee 631.62 123.74 529.08 0.00	Employ 0.0 123.7 529.0 0.0
EARNINGS Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400 550 551	Total: Subject To 8,670.30 0.00 0.00	Employee 433.53 46.38 64.53	Direct Deposits: Check Amounts: Pay Amount 52.50 8,617.80 8,670.30 Employer 384.96 0.00 0.00	6,793.88 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 8,099.96 8,533.49 8,533.49 8,623.92	Employee 631.62 123.74 529.08 0.00	Employ 0.(123.7 529.(0.(
EARNINGS Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400 550 551 580	Total: Subject To 8,670.30 0.00 0.00 0.00 0.00	Employee 433.53 46.38 6.64	Direct Deposits: Check Amounts: Pay Amount 52.50 8,617.80 8,670.30 Employer 384.96 0.00 0.00 0.00	6,793.88 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 8,099.96 8,533.49 8,533.49 8,623.92	Employee 631.62 123.74 529.08 0.00	Employ 0.0 123.7 529.0 0.0
EARNINGS Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400 550 551 580 590	Total: Subject To 8,670.30 0.00 0.00 0.00 0.00 0.00 0.00	Employee 433.53 6.64 0.00	Direct Deposits: Check Amounts: Pay Amount 52.50 8,617.80 8,670.30 Employer 384.96 0.00 0.00 0.00 0.00 2,071.32	6,793.88 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 8,099.96 8,533.49 8,533.49 8,623.92	Employee 631.62 123.74 529.08 0.00	Employ 0.0 123.7 529.0 0.0
EARNINGS Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400 550 551 580 590 610	Total: Subject To 8,670.30 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Employee 433.53 6.64 0.00 15.00	Direct Deposits: Check Amounts: Pay Amount 52.50 8,617.80 8,670.30 Employer 384.96 0.00 0.00 0.00 0.00 2,071.32 0.00	6,793.88 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 8,099.96 8,533.49 8,533.49 8,623.92	Employee 631.62 123.74 529.08 0.00	Employe 0.0
EARNINGS Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400 550 551 580 590 610	Total: Subject To 8,670.30 0.00	Employee 433.53 46.38 6.64 0.00 15.00 25.90	Direct Deposits: Check Amounts: Pay Amount 52.50 8,617.80 8,670.30 Employer 384.96 0.00 0.00 0.00 0.00 2,071.32 0.00 0.00 0.00	6,793.88 0.00 TAXES Code Federal W/H MC SS	Taxes:	Subject To 8,099.96 8,533.49 8,533.49 8,623.92	Employee 631.62 123.74 529.08 0.00	Employ 0.(123.7 529.(0.(

Department: 6550 - Elections

)irect Deposits: heck Amounts:	4,552.42 4,397.27				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
Hourly		597.25	5,844.75	Federal W/H		10,056.15	292.92	0.00
ÓТ		119.00	1,765.54	MC		10,305.19	149.44	149.44
SAL		2.00	3,089.88	SS		10,305.19	638.91	638.91
	Total:	718.25	10,700.17	Unemployment		10,662.92	0.00	0.00
DEDUCTIONS						Total:	1,081.27	788.3
Code	Subject To	Employee	Employer					
400	3,780.63	189.04	167.87					
520	0.00	60.00	0.00					
550	0.00	37.25	0.00					
551	0.00	125.60	0.00					
580	0.00	3.32	0.00					
590	0.00	172.93	706.80					
610	0.00	21.87	0.00					
615	0.00	59.20	0.00					
515	Total:	669.21	874.67					
RECAP 6550 - Elections								
Earnings: 10,700.17	Benefits:	0.00	Deductions:	669.21	Taxes:	1,081.27	Net Pay:	8,949.6
	nissioners Co		Direct Deposits:	6.134.90				
		Total I	Direct Deposits: Check Amounts:	6,134.90 3,152.21				
EARNINGS		Total I		3,152.21				
EARNINGS Pay Code		Total I				Subject To	Employee	Employe
-		Total I Total (Check Amounts:	3,152.21 TAXES Code		Subject To 11,056.11	Employee 868.40	
Pay Code		Total I Total (Units	Check Amounts: Pay Amount	3,152.21 TAXES		Subject To 11,056.11 11,729.07		0.0
Pay Code 165 Stipend w/RET S SAL		Total I Total (Units 0.00 11.00 -12.00	Pay Amount 230.00	3,152.21 TAXES Code Federal W/H		11,056.11	868.40	0.0 170.0
Pay Code 165 Stipend w/RET S		Total I Total 0 Units 0.00 11.00 -12.00 8.00	Pay Amounts: 230.00 212.97 11,861.68 154.89	3,152.21 TAXES Code Federal W/H MC		11,056.11 11,729.07	868.40 170.07	0.0 170.0 727.2
Pay Code 165 Stipend w/RET S SAL	Total:	Total I Total (Units 0.00 11.00 -12.00	Pay Amount 230.00 212.97 11,861.68	3,152.21 TAXES Code Federal W/H MC SS		11,056.11 11,729.07 11,729.07	868.40 170.07 727.21	0.0 170.0 727.2 0.0
Pay Code 165 Stipend w/RET S SAL Vacation DEDUCTIONS		Total I Total 0 Units 0.00 11.00 -12.00 8.00	Pay Amounts: 230.00 212.97 11,861.68 154.89	3,152.21 TAXES Code Federal W/H MC SS		11,056.11 11,729.07 11,729.07 6,664.21	868.40 170.07 727.21 0.00	0.0 170.0 727.2 0.0
Pay Code 165 Stipend w/RET S SAL Vacation		Total & Total & 0.00 11.00 -12.00 8.00 7.00 Employee	Pay Amounts: 230.00 212.97 11,861.68 154.89	3,152.21 TAXES Code Federal W/H MC SS		11,056.11 11,729.07 11,729.07 6,664.21	868.40 170.07 727.21 0.00	0.0 170.0 727.2 0.0
Pay Code 165 Stipend w/RET S SAL Vacation DEDUCTIONS	Total:	Total 8 Total 0 0.00 11.00 -12.00 8.00 7.00	Pay Amount 230.00 212.97 11,861.68 154.89 12,459.54	3,152.21 TAXES Code Federal W/H MC SS		11,056.11 11,729.07 11,729.07 6,664.21	868.40 170.07 727.21 0.00	0.0 170.0 727.2 0.0
Pay Code 165 Stipend w/RET S SAL Vacation DEDUCTIONS Code	Total: Subject To 12,459,54 0.00	Total & Total & 0.00 11.00 -12.00 8.00 7.00 Employee	Pay Amounts: Pay Amount 230.00 212.97 11,861.68 154.89 12,459.54 Employer 553.20 0.00	3,152.21 TAXES Code Federal W/H MC SS		11,056.11 11,729.07 11,729.07 6,664.21	868.40 170.07 727.21 0.00	Employe 0.0 170.0 727.2 0.0 897.2
Pay Code 165 Stipend w/RET S SAL Vacation DEDUCTIONS Code 400	Total: Subject To 12,459.54	Total & Total & 0.00 11.00 -12.00 8.00 7.00 Employee 622.96	Pay Amounts: Pay Amount 230.00 212.97 11,861.68 154.89 12,459.54 Employer 553.20	3,152.21 TAXES Code Federal W/H MC SS		11,056.11 11,729.07 11,729.07 6,664.21	868.40 170.07 727.21 0.00	0.0 170.0 727.2 0.0
Pay Code 165 Stipend w/RET S SAL Vacation DEDUCTIONS Code 400 520	Total: Subject To 12,459,54 0.00	Total & Total & 0.00 11.00 -12.00 8.00 7.00 Employee 622.96 50.00	Pay Amounts: Pay Amount 230.00 212.97 11,861.68 154.89 12,459.54 Employer 553.20 0.00	3,152.21 TAXES Code Federal W/H MC SS		11,056.11 11,729.07 11,729.07 6,664.21	868.40 170.07 727.21 0.00	0.0 170.0 727.2 0.0
Pay Code 165 Stipend w/RET S SAL Vacation DEDUCTIONS Code 400 520 550	Total: Subject To 12,459.54 0.00 0.00	Total & Total & 0.00 11.00 -12.00 8.00 7.00 Employee 622.96 50.00 18.25	Pay Amounts: Pay Amount 230.00 212.97 11,861.68 154.89 12,459.54 Employer 553.20 0.00 0.00	3,152.21 TAXES Code Federal W/H MC SS		11,056.11 11,729.07 11,729.07 6,664.21	868.40 170.07 727.21 0.00	0.0 170.0 727.2 0.0
Pay Code 165 Stipend w/RET S SAL Vacation DEDUCTIONS Code 400 520 550 551	Total: Subject To 12,459.54 0.00 0.00 0.00	Total I Total (0.00 11.00 -12.00 8.00 7.00 Employee 622.96 50.00 18.25 110.41	Pay Amount 230.00 212.97 11,861.68 154.89 12,459.54 Employer 553.20 0.00 0.00 0.00 0.00	3,152.21 TAXES Code Federal W/H MC SS		11,056.11 11,729.07 11,729.07 6,664.21	868.40 170.07 727.21 0.00	0.0 170.0 727.2 0.0
Pay Code 165 Stipend w/RET S SAL Vacation DEDUCTIONS Code 400 520 550 551 580	Total: Subject To 12,459.54 0.00 0.00 0.00 0.00	Total I Total (0.00 11.00 -12.00 8.00 7.00 Employee 622.96 50.00 18.25 110.41 3.32	Pay Amount 230.00 212.97 11,861.68 154.89 12,459.54 Employer 553.20 0.00 0.00 0.00 0.00 0.00 0.00 0.00	3,152.21 TAXES Code Federal W/H MC SS		11,056.11 11,729.07 11,729.07 6,664.21	868.40 170.07 727.21 0.00	0.0 170.0 727.2 0.0
Pay Code 165 Stipend w/RET S SAL Vacation DEDUCTIONS Code 400 520 550 551 580 590	Total: Subject To 12,459.54 0.00 0.00 0.00 0.00 0.00 0.00	Total I Total 0 Units 0.00 11.00 -12.00 8.00 7.00 Employee 622.96 50.00 18.25 110.41 3.32 534.51	Pay Amount 230.00 212.97 11,861.68 154.89 12,459.54 Employer 553.20 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	3,152.21 TAXES Code Federal W/H MC SS		11,056.11 11,729.07 11,729.07 6,664.21	868.40 170.07 727.21 0.00	0.0 170.0 727.2 0.0

Pay Period: 05/16/2018 - 05/31/2018

Department: 6570 - Veteran Service Officer

			Direct Deposits:	1,053.94 0.00				
EARNINGS		Total C	metr Amounts.					
Pay Code		14-14-	Paul Burgerund	TAXES Code				
SAL		Units 1.00	Pay Amount			Subject To	Employee	Employe
JAL	Total:	1.00	1,333.33	Federal W/H		1,266.66	109.06	0.0
	FOLDI:	1.00	1,333.33	MC		1,333.33	19.33	19.3
DEDUCTIONS				55		1,333.33	82.67	82.6
Code	Cublest To	F	Course of the second	Unemployment		1,333.33	0.00	0.0
	Subject To	Employee	Employer			Total:	211.06	102.0
400	1,333.33	66.67	59.20					
580		1.66	0.00					
	Total:	68.33	59.20					
RECAP 6570 - Ve	teran Service Officer							
Earnings: 1	,333.33 Benefits:	0.00	Deductions:	68.33	Taxes:	211.06	Net Pay:	1,053.9
artment: 6580	- Human Resource	s						
		Total I	Direct Deposits:	1,044.25				
			Check Amounts:	0.00				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employ
SAL		1.00	1.716.67	Federal W/H		1,622.44	447.51	0.0
	Total:	1.00	1,716.67	MC		1,708.27	24.77	24.7
			-,	SS		1,708.27	105.91	105.9
DEDUCTIONS				Unemployment		1,716.67	0.00	0.0
Code	Subject To	Employee	Employer			Total:	578.19	130.6
400	1,716.67	85.83	76.22					
615	0.00	8.40	0.00					
	Total:	94.23	76.22					
RECAP 6580 - Hi	uman Resources							
Earnings: 1	,716.67 Benefits:	0.00	Deductions:	94.23	Taxes:	578.19	Net Pay:	1,044.2
artment: 6600) - Eng. & Subdivisio	n						
	0		Direct Deposits:	2,422.32				
			Check Amounts:	0.00				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employ
165 Stipend w/RE	Т	0.00	37.50	Federal W/H		2,860.09	207.34	0.0
SAL		-3.00	2,865.52	MC		3,012.17	43.68	43.6
Vacation		4.00	138.65	SS		3,012.17	186.75	186.7
	Total:	1.00	3,041.67	Unemployment		3,012.17	0.00	0.0
DEDUCTIONS						Total:	437.77	230.4
Code	Subject To	Employee	Employer					
400	3,041.67	152.08	135.05					
550	0.00	29.50	0.00					
	Total:	181.58	135.05					
	101011							
RECAP 6600 - Ei Earnings: 3		0.00	Deductions:	181.58	Taxes:	437.77	Net Pay:	2,422.3

Pay Period: 05/16/2018 - 05/31/2018

Department: 6610 - IT-Technology

			Direct Deposits: Check Amounts:	3,404.34 0.00				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employer
165 Stipend w/RET		0.00	37.50	Federal W/H		4,147.84	389.63	0.00
S		8.00	259.97	MC		4,582.25	66.45	66.45
SAL		-6.00	4,390.71	SS		4,582.25	284.10	284.10
	Total:	2.00	4,688.18	Unemployment		4,641.80	0.00	0.00
DEDUCTIONS						Total:	740.18	350.55
Code	Subject To	Employee	Employer					
400	4,688.18	234.41	208.16					
520	0.00	200.00	0.00					
550	0.00	46.38	0.00					
551	0.00	42.00	0.00					
580	0.00	3.32	0.00					
590	0.00	0.00	690.44					
615	0.00	17.55	0.00					
015	Total:	543.66	898.60					
		545.00	050.00					
RECAP 6610 - IT-Technolo	֥							
Earnings: 4,688.18	Benefits:	0.00	Deductions:	543.66	Taxes:	740.18	Net Pay:	3,404.34
artment: 6640 - Code	Investigator							
Brithent, 0040 - 0046	mesugator							
			Direct Deposits:	1,309.74				
			Direct Deposits: Check Amounts:	1,309.74 0.00				
EARNINGS								
EARNINGS Pay Code				0.00		Subject To	Employee	Employer
		Total (Check Amounts:	0.00 TAXES		Subject To 1,522.38	Employee 88.31	
Pay Code		Total (Units	Check Amounts: Pay Amount	0.00 TAXES Code		•		Employer 0.00 23.25
Pay Code 165 Stipend w/RET	Total:	Total (Units 0.00	Pay Amount 37.50	0.00 TAXES Code Federal W/H		1,522.38	88.31	0.00
Pay Code 165 Stipend w/RET SAL	Total:	Units 0.00 1.00	Pay Amount 37.50 1,586.93	0.00 TAXES Code Federal W/H MC		1,522.38 1,603.60	88.31 23.25	0.00 23.25
Pay Code 165 Stipend w/RET SAL DEDUCTIONS		Total (Units 0.00 1.00 1.00	Check Amounts: Pay Amount 37.50 1,586.93 1,624.43	0.00 TAXES Code Federal W/H MC SS		1,522.38 1,603.60 1,603.60	88.31 23.25 99.42	0.00 23.25 99.42
Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code	Subject To	Total (Units 0.00 1.00 1.00 Employee	Pay Amounts: 77.50 1,586.93 1,624.43 Employer	0.00 TAXES Code Federal W/H MC SS		1,522.38 1,603.60 1,603.60 1,624.43	88.31 23.25 99.42 0.00	0.00 23.25 99.42 0.00
Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400	Subject To 1,624.43	Total (Units 0.00 1.00 1.00 Employee 81.22	Check Amounts: Pay Amount 37.50 1,586.93 1,624.43 Employer 72.12	0.00 TAXES Code Federal W/H MC SS		1,522.38 1,603.60 1,603.60 1,624.43	88.31 23.25 99.42 0.00	0.00 23.25 99.42 0.00
Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400 551	Subject To 1,624.43 0.00	Total (Units 0.00 1.00 1.00 Employee 81.22 20.83	Check Amounts: Pay Amount 37.50 1,586.93 1,624.43 Employer 72.12 0.00	0.00 TAXES Code Federal W/H MC SS		1,522.38 1,603.60 1,603.60 1,624.43	88.31 23.25 99.42 0.00	0.00 23.25 99.42 0.00
Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400	Subject To 1,624.43 0.00 0.00	Total (Units 0.00 1.00 1.00 Employee 81.22 20.83 1.66	Check Amounts: Pay Amount 37.50 1,586.93 1,624.43 Employer 72.12	0.00 TAXES Code Federal W/H MC SS		1,522.38 1,603.60 1,603.60 1,624.43	88.31 23.25 99.42 0.00	0.00 23.25 99.42 0.00
Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400 551	Subject To 1,624.43 0.00	Total (Units 0.00 1.00 1.00 Employee 81.22 20.83	Check Amounts: Pay Amount 37.50 1,586.93 1,624.43 Employer 72.12 0.00	0.00 TAXES Code Federal W/H MC SS		1,522.38 1,603.60 1,603.60 1,624.43	88.31 23.25 99.42 0.00	0.00 23.25 99.42 0.00
Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400 551 580	Subject To 1,624.43 0.00 0.00	Total (Units 0.00 1.00 1.00 Employee 81.22 20.83 1.66	Check Amounts: Pay Amount 37.50 1,586.93 1,624.43 Employer 72.12 0.00 0.00	0.00 TAXES Code Federal W/H MC SS		1,522.38 1,603.60 1,603.60 1,624.43	88.31 23.25 99.42 0.00	0.00 23.25 99.42 0.00
Pay Code 165 Stipend w/RET SAL DEDUCTIONS Code 400 551 580	Subject To 1,624.43 0.00 0.00 0.00 Total:	Total (Units 0.00 1.00 1.00 Employee 81.22 20.83 1.66 0.00	Check Amounts: Pay Amount 37.50 1,586.93 1,624.43 Employer 72.12 0.00 0.00 345.22	0.00 TAXES Code Federal W/H MC SS		1,522.38 1,603.60 1,603.60 1,624.43	88.31 23.25 99.42 0.00	0.00 23.25 99.42 0.00

Department: 6650 - Emerg Mgnt/Homeland Sec

			irect Deposits: heck Amounts:	2,857.26 0.00				
ADMINICO								
EARNINGS		11-14-	B	TAXES				
ay Code		Units	Pay Amount	Code		Subject To	Employee	Employer
L65 Stipend w/RET		0.00	75.00	Federal W/H		3,508.40	360.05	0.00
JAL		2.00	3,859.24	MC		3,805.11	55.17	55.17
	Total:	2.00	3,934.24	SS		3,805.11	235.92	235.92
DEDUCTIONS				Unemployment		3,902.61 Total:	0.00	0.00 291.09
Code	Subject To	Employee	Employer			i otali:	031.14	291.05
100	3,934.24	196.71	174.68					
520	0.00	100.00	0.00					
550	0.00	31.63	0.00					
551	0.00	62.50	0.00					
590	0.00	0.00	690.44					
615	0.00	35.00	0,00					
	Total:	425.84	865.12					
RECAP 6650 - Emerg Mgr	nt/Homeland Sec							
Earnings: 3,934.24	Benefits:	0.00	Deductions:	425.84	Taxes:	651.14	Net Pay:	2,857.26
artment: 7610 - Sanii	tation Depart	ment						
		Total D)irect Deposits:	0.00				
			heck Amounts:	1,658.85				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
165 Stipend w/RET		0.00	37.50	Federal W/H		1,902.20	36.47	0.0
SAL		1.00	1,964.82					
JAL	Tatal			MC		2,002.32	29.03	29.0
	Total:	1.00	2,002.32	SS		2,002.32	124.14	124.1
DEDUCTIONS				Unemployment		2,002.32 Total:	0.00	0.0
Code	Subject To	Employee	Employer			TOLEI.	105.04	133.1
400	2,002.32	100.12	88.90					
540	0.00	52.05	0.00					
551	0.00	0.00	0.00					
580	0.00	1.66	0.00					
590	0.00	0.00	345,22					
	Total:	153.83	434,12					
RECAP 7610 - Sanitation	Department							
Earnings: 2,002.32	Benefits:	0.00	Deductions:	153.83	Taxes:	189.64	Net Pay:	1,658.8
artment: 8700 - Coui	nty Agent							
			Direct Deposits: Check Amounts:	2,606.13 0.00				
EARNINGS				TAXES				
Pay Code		Units	Pay Amount	Code		Subject To	Employee	Employe
SAL		3.00	3,224.42			Subject To		Employ
ene.	Total:	3.00		Federal W/H		3,154.88	302.09	0.0
	- 17 LOIL	3.00	3,224.42	MC		3,224.42	46.75	46.7
DEDUCTIONS				SS		3,224.42	199.91	199.9
	C	Encalaria	P1	Unemployment		3,224.42	0.00	0.0
Code	Subject To	Employee	Employer			Total:	548.75	246.6
	1,390.85	69.54	61.75					
400	0.00	0.00	345,22					
400 590	0.00							
	Total:	69.54	406.97					
	Total:		406.97					

-

B. \$88,026.30 (Payroll Tax for 05/16/2018 - 05/31/2018)

C. \$ 31,720.54 (Utilities)

Bill Name	Location	May-18
Maxwell Water Supply Corp.	Hwy 142/CCR 239 & FM 1966 JP 3	31.71
	MAXWELL WATER SUPPLY CORP TOTAL	31.71
Polonia Water Supply Corp.	Caldwell County Unit Rd	32.61
Polonia Water Supply Corp.	Caldwell Co. Prect. 4-49 Civic Dr., Dale, TX	23.32
	POLONIA WATER SUPPLY CORP TOTAL	55.93
Texas Gas Service	Caldwell County Jail #2, 1204 Reed Rd CCSO	1,244.12
	Caldwell County 405 E. Market, Lockhart	55.16
	County Bldg Luling, 510 E Pierce, Luling	58.23
	Caldwell County #2, 401 E. Market, Lockhart	55.84
	Caldwell Cty Juy Prob Dept	57.43
	Caldwell Co. New Building-1703 S. Colorado	133.10
	TEXAS GAS SERVICE - TOTAL	1,603.88
City of Lockhart - CALDCO 01	Caldwell Co. Annex, 405 E. Market	307.97
	Caldwell Co. Annex, 405 E. Market	129.27
	CITY OF LOCKHART - CALDCO 01 -TOTAL	437.24
City of Lockhart - CALDCO 02	Caldwell Co. Annex, 110 S. Main	1,191.88
	Bkroom, 312 E. San Antonio SERVER RM	297.08
	CC Juvenile Prob. Dept, 312 E. San Antonio	575.20
	CC Annex, CC Courthouse, 401 E. Market	554.72
	CC District Resource Cent, 401 E. Market - DRC	406.88
	Caldwell Co. Annex, 110 S. Main-Sprinkler	38.83
	CC Judicial Center, 1703 S. Colorado	6,368.51
	CC Judicial Center, 1703 S. Colorado	98.28
	Caldwell Co. Annex, 1196 Reed DrBarn MAINT.	169.36
	Caldwell Co. Annex, Blackjack	1,226.31
	Caldwell Co. Annex, 1204 Reed Dr. CCSO	17,211.67
	Caldwell Co. Annex, 1403 Blackjack-LW School	214.65
	Caldwell Co. Annex, 1403 Blackjack-Maint Bldg	108.45
	CITY OF LOCKHART - CALDCO 02 - TOTAL	28,461.82
City of Luling - CALDWELL	Caldwell Co-JP/County Auditor, 508 N. Fannin St	274.71
Statement date usually end of	Caldwell Co-Adult/Juv Serv, 512 E. Fannin St.	64.56
the month.	Caldwell Co. Welfare Off, 505 E. Fannin St.	81.59
	Caldwell Co Prec. #2, 423 San Marcos Hwy.	51.28
	CITY OF LULING - CALDWELL - TOTAL	472.14
Bluebonnet Electric	Caldwell County Precint #3	147.62
	Caldwell County Prec 4	57.26
Bluebonnet Electric	Caldwell County URS	366.68
	Sanitation - meter no: 122860878/43673230	86.26
	BLUEBONNET ELECTRIC - TOTAL	657.82

Total Utilities Paid: 31,720.54

D. \$ 187,130.30 (Department of Motor Vehicle Fees)

Texas Department of Motor Vehicles

slomer 🐘 🕅	Contraction of the Annual Statement of the	and the second data and the se	Oplions Accoun	ling Inventory Fund	s Exil Help	
os mue sur	nmary ACC017	arrow keys and press ente			1. 	
	Due Date +05/03/2018 05/03/2018 05/03/2018 05/07/2018 05/05/2018 05/05/2018	Funds Report Date C4:30/2018 C5:01/2018 C5:02:2018 C5:03/2018 C5:03/2018 C5:05:2018	Reporting Date d%/30/2018 C5:01/2018 C5:02/2018 C5:03/2018 C5:04/2018 C5:05/2018 Totals:	Total Amount Due Remitt 639,09 272.00 410.00 672.00 386.00 72461 87 187130.30	ance Amount 0,00 0 00 0 00 0 00 0 00 0 00 0 00 0 00 0 00	
			Enfer Cencéi	en ander Regeleration der gesteren		

E. \$238,817.97 (Texas Motor Vehicle Sales/Use Tax and Surcharge)

(Rev.4-15/9)		
Texas Motor Vehicle Sales/Use Tax and Su	rcharge Report	
a. 🝙 17100	• Do not write in shade	ad areas.
c. Taxpayer number 32049986444 d. Filing period Month Ending	g 05/31/2018	f Due date 06/11/2018
g. Name and mailing address (Make any necessary name or address changes belo	ow.) h. IMPORTA	NT
The Honorable Daria Law (Caldwell County TAC) 110 S Main St Room 101 Lockhart, Texas 78644	has change	is box if your mailing address ed. Show changes t. printed information.
·		
You have certain rights under Chapters 552 and 559, Government Code, to review, request and correct information we have on file about you. Contact us at the address or phone number listed on this form.	st 14100 COL. I TAX CALCULATION	17100 COL. N SURCHARGE CALCULATION
1. Number of receipts issued (Including Voids)	1A. 🖬 949	_{18. ■} 13
 Gross Motor Vehicle Sales and Use Tax collected (Dollars & cents) 	389,259.08	2B.
3. 2.5% Surcharge collected for model years 1996 and prior (Dollars & cents).	3A.	3,440.61 38. ≡
4. 1.0% Surcharge collected for model years 1997 and later (Dollars & cents)	<u>4A.</u>	4B, 🗃
5. Gross Surcharge collected (Item 3B plus Item 4B)		5B, 🕿
6. Claim for dishonored payment		6B. 🔳
7. Commission not available from registration fees	7A = 153,441.11	78. 🖿
8. Commission available from Sales Tax/TERP Surcharge	8A. m	^{8B.} ■ 860.13
9. Net motor vehicle tax and/or surcharge collected (Item 2A minus Items 6A, 7A, and 8A; Item 5B minus Items 6B, 7B and 8B)	9A. <u>=</u>	9B. 🔳
10. Interest earned	10A. 🔳	108.m
11. TOTAL AMOUNT DUE (Ilem 9A plus Ilem 10A and Ilem 9B plus Ilem 10B)) <u>11A</u>	11B.w
14-)15 (Rev.4=15/9)		
	124	128.
12. Total amount of prepayments		2,580.48
13. Amount due (Item 11 A minus Item 12A and Item 11B minus 12B)	13A. ■ 100,011101	13B.W
14. TOTAL AMOUNT OF TAX AND SURCHARGE DUE AND PAYABLE(Item 13	3A plus Item 13B)	14. 238,398.45
Taxpayer name	(m.	
The Honorable Darla Law (Caldwell Coun		
E T Code E Taxpayer number E Parlod th	lectare that the information in this document a e best of my knowledge and belief. Ily authorized agent (PLEA SE PRINT NAME)	nd any altachments is true and correct to
17920 32049986444		
payable to P.O. Box 149360	sign) here)	08/07/2040
If you have any questions regarding Motor Vehicle Sales and Use Tax or Surcharge, call 1-800-252-1382	Business phone 512-398-1830	Date 06/07/2018
	A EEE	



TEXAS COMPTROLLER OF PUBLIC ACCOUNTS

P.O.Box 13528 • Austin, TX 78711-3528

April 9, 2018

THE HONORABLE DARLA LAW TAX ASSESSOR-COLLECTOR CALDWELL COUNTY 110 S MAIN ST STE 101 LOCKHART, TX 78644-2705

Dear Tax Assessor-Collector:

We are pleased to inform you of your county's **2018** annual commission for your efforts in collecting Motor Vehicle Sales Tax on behalf of the state, as provided by Texas Tax Code Section 152.123.

Your 2018 tax commission is \$154,301.24, which equals 5 percent of the tax and penalties collected for Motor Vehicle Sales and Use Tax, Motor Vehicle Seller-Financed Sales Tax and Texas Emissions Reduction Plan (TERP) Surcharge collections reported for your county during the 2017 calendar year.

You will draw your commission by retaining \$153,441.11 from the 2018 Motor Vehicle Sales Tax collections and \$860.13 from 2018 TERP Surcharge collections.

You will enter the commission amount retained on the Comptroller's Texas Motor Vehicle Sales/Use Tax Surcharge Report (Form 14-115). The commission amount retained from Motor Vehicle Sales and Use Tax collections, including Seller-Financed collections, must be entered in Item 8A. The commission retained from TERP Surcharge collections must be entered in Item 8B.

You may retain the commission amounts for the year on one month's tax report if there are sufficient collections for that month. Otherwise, retain the commission over several months until the total commission has been retained.

If you have any questions about your monthly reports, please contact Debra Stojanik or John Pollett in our Revenue Accounting Division. They can be reached by email at debra.stojanik@cpa.texas.gov or john.pollett@cpa.texas.gov. Or call 1-800-531-5441, ext. 3-4429 for Debra or ext. 3-4596 for John or ext. 3-4276 for the main line. F. \$ 17,693.31 (Texas Motor Vehicle Registration Surcharge/Title Application Fees)

Texas Motor Vehicle Registration and/or Title Application Fee Reg	n Surcharge	\bigstar		A management
a. T Code 12 21100		•		
c. Taxpayer number	d. Filing period		8.	f. Due date
a 32049986444	Month Ending 05/31	1/2018		06/11/2018
g. Name and mailing address (Make any ne The Honorable Daria Law (Caldwel 110 S. Main St Room 101 Lockhart , Texas 78644)	address has ch by the preprint Blacken this bo	ox If your mailing hanged. Show changes 1. led information. a

Who Must File

Texas County Tax Assessor-Collectors (TACs) must file this report with the Comptroller's office on a monthly basis.

Due Date

The report is due by the 10th day of the month after the reporting period.

Column B - Title Application Fee/Texas Mobility Fund Instructions

Non-attainment counties must remit \$20.00 of each title application fee to the Comptroller's office for the the Texas Mobility Fund. All other counties must remit \$15.00 of each title application fee for the fund.

*** Do not write in shaded areas.*** Registration Surcharge Title Application Fee Texas Mobility Fund 1. Number of registrations and/or title applications (Include any collections made on previous dishonored payments) 24 16.000 2. Total registration surcharge and/or title \$ 1,413.31 \$ 16,280.000	id
applications (Include any collections made on previous dishonored payments) 24 1a. 24 1b. 24 848	0.00
2 Total registration surcharge and/or title \$ 1,413,31 \$ 16,280.0	D.00
application fees collected 2a.	I
3. Claim for dishonored payment 3a. ■ 3b. ■	
4. Total surcharge and/or title application fee due (Item 2 minus Item 3) \$ \$	
*** DO NOT DETACH ***	
5. Prior payments (Include electronic funds submitted for this reporting period) \$ 5a. 5b.	
6. Total amount due and payable \$ 1,413.31 \$ 16,280.0 (Item 4 minus Item 5)6a. ■ 6b. = 6b. =	0.00
7. TOTAL AMOUNT OF MOTOR VEHICLE SURCHARGE AND/OR TITLE APPLICATION FEE DUE AND PAYABLE (Add Item 6a and Item 6b) 7. 7. 17,693.3	3.31
Taxpayer name]
T Code Taxpayer number Period I declare that the information in this document and any attachments is true a correct to the best of my knowledge and bellef.	ie and
Make check payable to STATE COMPTROLLER Sign here Taxpayer or duly authorized agent Mail to COMPTROLLER OF PUBLIC ACCOUNTS Business phone 512-398-1830 Date 06/07/2018	

P.O. Box 149360 Auslin, Texas 78714-9360

For assistance, contact us at www.comptroller.texas.gov or call 1-800-252-1382.

Form 14, 124 (Rev 11, 15/6)

G. \$ 1,856.67 (Texas Boat and Boat Motor Sales and Use Tax Report)

Texas Department of Motor Vehicles

JUN-07-18 08:29 AM

Texas Parks and Wildlife Department County Sales Tax Report

Page 1 of 1

Caldwell - Main

			05/01/2018 -	05/31/2018			
Order Id	Order Date	Asset	Total Transaction Amount Collected	Sales Tax Collected in Transaction	Less 5% Tax Retained by County	Total Donation Collected	Tax Amount Due Comptroller
12147714	05/04/2018	B4518JF	\$ 56.75	\$ 18.75	\$.94	0.00	\$ 17.81
12147714	05/04/2018	M6543EH	\$ 45.75	\$ 18.75	\$.94	0.00	\$ 17.81
12150762	05/07/2018	B3838BD	\$ 53.00	\$.00	\$.00	0.00	\$.00
12151221	05/07/2018	B5397FF	\$ 362.21	\$ 271.21	\$ 13.56	0.00	\$ 257.65
12154261	05/08/2018	B2926EB	\$ 59.00	\$.00	\$.00	0.00	\$.00
12156835	05/09/2018	B7283JV	\$ 1038.00	\$ 1000.00	\$ 50.00	0.00	\$ 950.00
12156835	05/09/2018	M9357ET	\$ 58.25	\$ 31.25	\$ 1.56	0.00	\$ 29.69
12156919	05/09/2018	B7283JV	\$.00	\$.00	\$.00	0.00	\$.00
12156939	05/09/2018	B7283JV	\$.00	\$.00	\$.00	0.00	\$.00
12156939	05/09/2018	M9357ET	\$.00	\$.00	\$.00	0.00	\$.00
12173032	05/17/2018	B9917BZ	\$ 32.00	\$.00	\$.00	0.00	\$.00
12173654	05/17/2018	B3024HX	\$ 53.00	\$.00	\$.00	0.00	\$.00
12184672	05/23/2018	B6084BK	\$.00	\$.00	\$.00	0.00	\$.00
12184700	05/23/2018	B6084BK	\$ 72.41	\$ 34.41	\$ 1.72	0.00	\$ 32.69
12184700	05/23/2018	M5190EF	\$ 61.41	\$= 34.41	\$ 1.72	0.00	\$ 32.69
12188080	05/24/2018	B5490JC	\$ 353.17	\$ 262.17	\$ 13.11	0.00	\$ 249.06
12188080	05/24/2018	M6739EE	\$ 310.44	\$ 283.44	\$ 14.17	0.00	\$ 269.27
12192599	05/25/2018	B4742HZ	\$ 53.00	\$.00	\$.00	0.00	\$.00
12201827	05/31/2018	86232HE	\$ 53.00	\$.00	\$.00	0.00	\$.00
Total Trans	action Amount C	ollected:	\$2,661.39				
Total Sales	a Tax Collected:			\$1,954.39			
Total Retai	ned by County:				\$97.72		
Total Dona	tions:					0.00	

Total Due Comptroller for this period:

\$1,856.67

3. Accept 2018-2019 Proposed Budget for the Asset Forfeiture Fund for the Caldwell County District Attorney's Office.

CRIMINAL DISTRICT ATTORNEY CALDWELL COUNTY, TEXAS

ASSET FORFEITURE FUND PROPOSED BUDGET 2018-2019

Revenue	\$30,000.00	
Expenses:		
Equipment	\$10,000.00	
Supplies	\$5,000.00	
Dues	\$2,500.00	
Legal Fees	\$7,500.00	
Travel	\$2,500.00	
Training	\$2,500.00	
Total Expenses	\$30,000.00	

4. Accept the Proposed 2019 Appraisal District and Collection Budgets submitted by the Caldwell County Appraisal District.

Caldwell County Appraisal District

DATE:	June 1, 2018			
TO:	All Taxing Unit Chief Administrators CCAD Board of Directors			
RE:	Proposed 2019 Appraisal District and Collection Budgets			

Appraisal Budget:

Enclosed you will find the proposed budget for the Caldwell County Appraisal District for the year January 1, 2019 through December 31, 2019. Also enclosed is the estimated cost of the proposed budget for each taxing unit. The cost estimation is based on the 2017 original tax levy. The final costs will be allocated according to the entities' actual 2018 tax levies. Entities that are considering substantial increases in tax levies for 2018 should be aware of the effect on the cost allocation of the appraisal district budget.

You will receive notice of the date and time of a public hearing to consider the budget at a later date. The Board of Directors must approve the appraisal budget by September 15th.

Please note that the Tax Code requires that a copy of the proposed budget be available for public inspection in the office of each governing body served by the appraisal district.

Collection Budget:

The collection budget and allocation only apply to the entities that the Caldwell County Appraisal District collects for. Enclosed you will find the proposed collection budget for the Caldwell County Appraisal District for the year January 1, 2019 through December 31, 2019. Also enclosed is the estimated cost of the proposed budget for each taxing unit. The cost estimation is based on the 2017 original tax levy. The final costs will be allocated according to the entities' actual 2018 tax levies.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Ramzinshi Manna

Shanna Ramzinski Interim Chief Appraiser

Encl: 2019 Proposed Appraisal District Budget Estimated Cost Allocation for appraisal budget 2019 Proposed Collection Budget Estimated Cost Allocation for collection budget



211 Bufkin Ln P.O. Box 900 Lockhart, Texas 78644 United States
 PHONE
 (512) 398-5550

 FAX
 (512) 398-5551

 E-MAIL
 general@caldwellcad.org

 WEB SITE
 www.caldwellcad.org

CALDWELL COUNTY APPRAISAL DISTRICT 2019 APPRAISAL BUDGET (PROPOSED)

	PERSONNEL	2018	2019
70101	Chief Appraiser	74,702.00	76,570.00
70102	Deputy Chief Appraiser	49,431.00	50,667.00
70103	GIS Mapper/System Mgr/IT	60,447.00	61,958.00
70105	Field Appraiser II	32,252.00	33,058.00
70106	Senior Appraiser I	41,720.00	42,763.00
70107	Senior Appraiser II	39,592.00	40,582.00
70108	Field Appraiser I	32,903.00	33,725.00
70109	Field Appraiser III	30,926.00	31,700.00
70111	Administrative Asst.	47,620.00	48,810.00
70112	Data entry technician	28,663.00	29,380.00
70113	Support data entry	34,995.00	35,870.00
70120	911/GIS	37,820.00	38,765.00
70130	Part time	0.00	0.00
70135	Payroll contingency	2,000.00	2,000.00
	SUBTOTAL	513,071.00	525,848.00
	DEDUCTIONS/BENEFITS		
71000	Payroll Tax	\$42,500.00	\$43,600.00
71002	Retirement/ employer	\$48,600.00	\$48,860.00
71004	Health benefits	\$94,000.00	\$93,720.00
71005	Worker comp	\$2,700.00	\$2,700.00
71006	Unemployment	\$4,000.00	\$4,000.00
<u> </u>	SUBTOTAL	191,800.00	192,880.00
	SERVICES		·
72000	Appr Engineers	\$42,000.00	\$42,000.00
72001	Appr Review Bd	\$13,500.00	\$18,750.00
72002	Audit	\$6,200.00	\$6,200.00
72003	Board of Directors	\$1,790.00	\$1,790.00
72004	Data Processing Services	\$46,900.00	\$50,400.00
72007	Janitorial service	\$6,200.00	\$6,200.00
72008	Legal	\$20,000.00	\$25,000.00
	SUBTOTAL	136,590.00	150,340.00

	GENERAL EXPENSES	2018	2019
72500	Bond- Chief - Notary	\$100.00	\$100.00
72501	Membership / Dues	\$3,700.00	\$3,710.00
72502	Computer supplies - data processing	\$6,400.00	\$6,900.00
72504	Education & fees	\$7,800.00	\$7,800.00
72505	Insurance - liability	\$1,400.00	\$1,500.00
72506	Insurance Building/ Equip - contents	\$3,900.00	\$4,000.00
72507	Legal notices/printing	\$14,450.00	\$14,450.00
72508	Maint - hardware/equip	\$8,700.00	\$8,700.00
72509	Maint -office equip	\$1,000.00	\$1,000.00
72510	Mileage & travel	\$6,500.00	\$5,000.00
72511	Office supplies	\$7,000.00	\$7,500.00
72512	Postage	\$23,150.00	\$25,000.00
72513	Postage meter/Box rental	\$4,425.00	\$4,425.00
72514	Publications Subcrip & books	\$7,020.00	\$6,700.00
72515	Rental - copier	\$2,650.00	\$2,650.00
72516	Electricity	\$9,000.00	\$9,000.00
72517	Telephone	\$12,270.00	\$13,000.00
72518	Water & sewer	\$3,250.00	\$3,500.00
72519	Mortgage	\$54,520.00	\$54,520.00
72520	Building Maint	\$4,820.00	\$5,000.00
72523	Fuel - Vehicle	\$6,000.00	\$6,000.00
72524	Maint - Vehicle	\$6,000.00	\$6,000.00
72525	Ins - vehicle	\$1,700.00	\$1,700.00
	SUBTOTAL	195,755.00	198,155.00
	CAPITAL INVESTMENTS		
79000	Office equipment	\$5,000.00	\$5,000.00
79001	Computer Equipment	\$11,000.00	\$11,000.00
79003	Vehicle	\$20,000.00	\$20,000.00
	SUBTOTAL	36,000.00	36,000.00
	CONTINGENCY		
79002	Building Expense	\$5,000.00	\$5,000.00
79990	Contingency	\$10,000.00	\$10,000.00
	SUBTOTAL	15,000.00	15,000.00
	TOTAL EXPENSES	1,088,216.00	1,118,223.00
GCA	911 EXPENSES PAID BY COUNTY	25,380.00	26,000.00
		1,062,836.00	1,092,223.00

PERSONNEL SALARY & BENEFIT EXPENSE 2019 APPRAISAL BUDGET (PROPOSED)

LINE ITEM	POSITION	SALARY	RETIREMENT	HEALTH INS	AD/LTD	TOTAL
70101	Chief Appraiser	76,570.00	7,113.35	7,400.00	500.00	91,583.35
70102	Deputy Chief Appraiser	50,667.00	4,706.96	7,400.00	450.00	63,223.96
70103	GIS Mapper/System Mgr/IT	61,958.00	5,755.90	7,400.00	460.00	75,573.90
70105	Field Appraiser II	33,058.00	3,071.09	7,400.00	245.00	43,774.09
70106	Senior Appraiser 1	42,763.00	3,972.68	7,400.00	295.00	_54,430.68
70107	Senior Appraiser II	40,582.00	3,770.07	7,400.00	270.00	52,022.07
70108	Field Appraiser I	33,725.00	3,133.05	7,400.00	345.00	44,603.05
70109	Field Appraiser III	31,700.00	2,944.93	7,400.00	250.00	42,294.93
70111	Administrative Asst	48,810.00	4,534.45	7,400.00	420.00	61,164.45
70112	Data entry technician	29,380.00	2,729.40	7,400.00	245.00	39,754.40
70113	Support data entry	35,870.00	3,332.32	7,400.00	260.00	46,862.32
70120	911/GIS	38,765.00	3,601.27	7,400.00	260.00	50,026.27
70135	Payroll contingency	2,000.00	0	0.00	0	2,000.00
		525,848.00	48,665.48	88,800.00	4,000.00	667,313.48

Note Payroll contingency to be used for staff certication. BY RPA

2019 APPRAISAL BUDGET ALLOCATION

Caldwell County Appraisal District PROPOSED Budget

ENTITIES	2017 TAX LEVY	RATIO %	2019 BUDGET	ASSESSMENT
CITY OF LOCKHART	\$4,295,179.62	8.961%	\$1,092,223.00	\$97,874.76
CITY OF LULING	\$1,152,543.76	2.405%	\$1,092,223.00	\$26,263.15
CITY OF MARTINDALE	\$296,860.13	0.619%	\$1,092,223.00	\$6,764.59
CITY OF MUSTANG RIDGE	\$124,155.23	0.259%	\$1,092,223.00	\$2,829.14
CITY OF NIEDERWALD	\$16,288.42	0.034%	\$1,092,223.00	\$371.17
CITY OF SAN MARCOS	\$128,634.64	0.268%	\$1,092,223.00	\$2,931.21
CITY OF UHLAND	\$22,174.94	0.046%	\$1,092,223.00	\$505.30
CALDWELL COUNTY	\$16,204,940.50	33.808%	\$1,092,223.00	\$369,263.89
LOCKHART ISD	\$16,399,511.91	34.214%	\$1,092,223.00	\$373,697.61
LULING ISD	\$3,953,058.95	8.247%	\$1,092,223.00	\$90,078.82
PRAIRIE LEA ISD	\$1,156,453.55	2.413%	\$1,092,223.00	\$26,352.24
PLUM CREEK CONS. DIST.	\$270,986.28	0.565%	\$1,092,223.00	\$6,175.00
PLUM CREEK UNDERGROUND	\$253,324.33	0.529%	\$1,092,223.00	\$5,772.53
HAYS ISD	\$446,721.64	0.932%	\$1,092,223.00	\$10,179.50
GONZALES ISD	\$320,089.32	0.668%	\$1,092,223.00	\$7,293.91
SAN MARCOS ISD	\$1,981,113.81	4.133%	\$1,092,223.00	\$45,143.87
WAELDER ISD	\$253,250.38	0.528%	\$1,092,223.00	\$5,770.85
CALDWELL-HAYS ESD1	\$332,412.26	0.694%	\$1,092,223.00	\$7,574.72
GONZALES COUNTY UWD	\$7,934.56	0.017%	\$1,092,223.00	\$180.81
CALDWELL ESD #2	\$100,407.80	0.209%	\$1,092,223.00	\$2,288.00
CALDWELL ESD #3	\$104,940.91	0.219%	\$1,092,223.00	\$2,391.30
CALDWELL ESD #4	\$81,629.38	0.170%	\$1,092,223.00	\$1,860.10
AUSTIN COMMUNITY COLLEGE	\$28,986.52	0.060%	\$1,092,223.00	\$660.52
TOTALS	\$47,931,598.84	100.00%	\$1,092,223.00	\$1,092,223.00

CALDWELL COUNTY APPRAISAL DISTRICT 2019 COLLECTION BUDGET (PROPOSED)

	TOTAL EXPENSES	286,546.00	286,918.00
	SUBTOTAL	5,200.00	<u> </u>
90-79990	Contingency	\$3,000.00	\$3,000.00
90-79002	Building Expense	2,200.00	2,200.00
00.70000			
[CONTINCENCY		
	SUBTOTAL	7,000.00	7,000.00
90-79001	Computer Equipment	5,000.00	5,000.00
90-79000	Office equipment	2,000.00	2,000.00
	CAPITAL INVESTMENTS		
	SUBTOTAL	69,275.00	71,700.00
90-72520	Building Maint	2,025.00	2,100.00
90-72519	Mortgage	16,500.00	16,500.00
90-72518	Water & sewer	1,000.00	1,200.00
90-72517		3,100.00	3,400.00
90-72516	Electricity	3,000.00	3,000.00
90-72515	Rental - copier	1,800.00	1,800.00
90-72513	Postage meter/Box rental	1,400.00	1,400.00
	Postage	13,800.00	14,000.00
90-72511 90-72512	Office supplies	2,800.00	3,000.00
90-72510	Mileage & travel	2,800.00	2,800.00
90-72509	Maint -office equip	1,200.00	1,400.00
90-72508	Maint - hardware/equip	2,600.00	2,600.00
90-72507	Legal notices/printing	9,900.00	9,900.00
90-72506	Insurance Building/ Equip - contents	1,150.00	1,200.00
90-72505	Insurance - liability		800.00
90-72504	Education & fees	2,250.00	3,400.00
90-72502	Computer supplies - data processing	2,300.00	2,300.00
90-72501	Membership / Dues	650.00	700.00
90-72500	Bond- Chief - Notary	200.00	200.00
00.0000	GENERAL EXPENSES		
			41,750.00
	SUBTOTAL	2,300.00	2,500.00
90-72008	Legal	2,500.00	2,500.00
90-72005	Janitorial service	15,500.00	16,500.00
90-72004	County employee contract	17,450.00	18,450.00
90-72002	Data Processing Services	1,800.00	1,800.00
90-72002	Audit	4 000 001	
	SERVICES		
	SUBTOTAL	47,890.00	48,550.00
90-71006	Unemployment	2,375.00	3,375.00
90-71005	Worker comp	775.00	775.00
90-71004	Health benefits	24,100.00	24,300.00
90-71002	Retirement/ employer	11,200.00	11,000.00
90-71000	Payroll Tax	9,440.00	9,100.00
	DEDUCTIONS/BENEFITS		
	SUBTOTAL	117,631.00	112,718.00
90-70135	Payroll contingency	0.00	0.00
90-70130	Part time	0.00	0.00
90-70126	Public Assist	31,120.00	26,650.00
90-70121	Collections Specialist	36,045.00	34,340.00
90-70120	Deputy Tax Collector	50,466.00	51,728.00
	PERSONNEL	2018	2019

PERSONNEL SALARY & BENEFIT EXPENSE 2019 COLLECTION BUDGET (PROPOSED)

LINE ITEM	POSITION	SALARY	RETIREMENT	HEALTH INS	AD/LTD	TOTAL
90-70120	Deputy Tax Collector	51,728.00	4,805.53	7,400.00	500.00	64,433.53
90-70121	Collection Specialist	34,340.00	3,190.19	7,400.00	400.00	45,330.19
90-70126	Public Asst. Specialist	26,650.00	2,475.79	7,400.00	400.00	36,925.79
90-70135	Payroll contingency	0.00	0.00	0.00	0.00	0.00
		112,718.00	10,471.50	22,200.00	1,300.00	146,689.50

2019 COLLECTION BUDGET ALLOCATION

Caldwell County Appraisal District PROPOSED Budget

ENTITIES	2017 TAX LEVY	RATIO %	2019 BUDGET	ASSESSMENT
CITY OF LOCKHART	\$4,295,179.62	9.336%	\$286,918.00	\$26,787.89
CITY OF LULING	\$1,181,907.56	2.569%	\$286,918.00	\$7,371.24
CITY OF MARTINDALE	\$296,860.13	0.645%	\$286,918.00	\$1,851.44
CITY OF MUSTANG RIDGE	\$124,155.23	0.270%	\$286,918.00	\$774.32
CITY OF NIEDERWALD	\$16,288.42	0.035%	\$286,918.00	\$101.59
CITY OF UHLAND	\$22,174.94	0.048%	\$286,918.00	\$138.30
CALDWELL ESD #2	\$100,407.80	0.218%	\$286,918.00	\$626.22
CALDWELL ESD #3	\$104,940.91	0.228%	\$286,918.00	\$654.49
CALDWELL ESD #4	\$81,629.38	0.177%	\$286,918.00	\$509.10
CALDWELL-HAYS ESD1	\$332,412.26	0.723%	\$286,918.00	\$2,073.17
CALDWELL COUNTY	\$16,204,940.50	35.225%	\$286,918.00	\$101,065.91
LOCKHART ISD	\$16,399,511.91	35.648%	\$286,918.00	\$102,279.40
LULING ISD	\$4,747,743.39	10.320%	\$286,918.00	\$29,610.41
PRAIRIE LEA ISD	\$1,564,126.51	3.400%	\$286,918.00	\$9,755.04
GONZALES COUNTY UWD	\$7,934.56	0.017%	\$286,918.00	\$49.49
PLUM CREEK CONS DIST	\$270,986.28	0.589%	\$286,918.00	\$1,690.07
PLUM CREEK UWD	\$253,324.33	0.551%	\$286,918.00	\$1,579.92
TOTALS	\$46,004,523.73	100.00%	\$286,918.00	\$286,918.00

5. Accept the 2017 US Form 990, Return of Organization Exempt from Income Tax, for Delhi Volunteer Fire Department for the tax year ending December 31, 2017.

Kevin Mills, CPA 1015 West San Antonio St, Suite A Lockhart, TX 78644 (512) 376-4212 kevin@kevinmillscpa.com

March 30, 2018

Delhi Volunteer Fire Department 6110 State Highway 304 Rosanky, TX 78953

Dear Client,

Enclosed is the 2017 U.S. Form 990, Return of Organization Exempt from Income Tax, for Delhi Volunteer Fire Department for the tax year ending December 31, 2017.

Your 2017 U.S. Form 990, Return of Organization Exempt from Income Tax, return will be electronically filed.

We very much appreciate the opportunity to serve you. If you have any questions regarding this return, please do not hesitate to call.

Sincerely,

Kevin Mills

2017 Exempt Organization Business Tax Return prepared for:

Delhi Volunteer Fire Department 6110 State Highway 304 Rosanky, TX 78953

Kevin Mills, CPA 1015 West San Antonio St, Suite A Lockhart, TX 78644 Kevin Mills, CPA 1015 West San Antonio St, Suite A Lockhart, TX 78644

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Delhi Volunteer Fire Department 6110 State Highway 304 Rosanky, TX 78953

Form	990
Form	220

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A	For th	e 2017 calendar year, or tax year beginning , 2017, and en	dina		10 Inspection
в	Check	If applicable: C Name of organization Delhi Volunteer Fire Department		D Employer	identification number
	Addres	is change Uoing business as		30-024	
	Name	change Number and street (or P.O. box if mail is not delivered to street address) Room	/suite	E Telephone	
	initial n				925-0763
	Final rel	tum/terminated City or town, state or province, country, and ZIP or foreign postal code		(J12):	725-0763
	Amend	led return Rosanky, TX 78953			
	Applica	ation pending F Name and address of principal officer:	lurstar	G Gross rece	
_		Cynthia Woolley, 6110 State Highway 304, Rosanky, TX 7		roup return for sub	ordinates? Yes X No
r I	Tax-ex	empt status: S01(c)(3) 501(c) () < (insert no.) 4947(a)(1) or 527	0903 H(b) Are all	Subordinates in	ncluded? L Yes No
J	Websit				
κ	Form of	forganization:		exemption nu	
P	art I	Summary	mation: 2004	4 M State of	legal domicile: TX
-	1	Briefly describe the organization's mission or most significant activities:	and Fire Benedarat		
8		emergency calls in Delhi Community	teer rite bebartrent	trained to opera	te rescue equipment and answer
Activities & Governance			************	********	
Lev	2	Check this box > if the organization discontinued its operations or dispose	d of more then	250/ -64-	
ĝ	3	Number of voting members of the governing body (Part VI, line 1a)	d of more than	3	
ed m	4	Number of independent voting members of the governing body (Part VI line 1	Ы	4	123
tie:	5	I otal number of individuals employed in calendar year 2017 (Part V. line 2a)		5	123
tivi	6	Total number of volunteers (estimate if necessary)	* * * * *	6	0
Ac	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	* * * * *		20
	b	Net unrelated business taxable income from Form 990-T, line 34		7a	0.
			Prior Ye	7b	0.
ø	8	Contributions and grants (Part VIII, line 1h)			Current Year
P.	9	Program service revenue (Part VIII, line 2g)			110,914.
Revenue	10	investment income (Part VIII, column (A), lines 3, 4, and 7d)			
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-	2,283.
	12	Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)			22,937.
1	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			136,134.
	14	Benefits paid to or for members (Part IX, column (A), line 4)			
5	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			
Å,	b	I Otal Tundraising expenses (Part IX, column (D), line 25) N		And and and	Contraction of the local division of the loc
Ш,	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	Car		24 500
	18	I otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)			24,590.
_	19	Revenue less expenses. Subtract line 18 from line 12			24,590.
2 8			Beginning of Cur	rent Year	111,544. End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)			
	21	Total liabilities (Part X, line 26)	412	,930.	446,978.
-	22	Net assets or fund balances. Subtract line 21 from line 20	412	,930.	445 070
Pa	irt II	Signature Block	412	, 950.	446,978.
Und	ter pena	ties of perjury. I declare that I have examined this return including accompanying extended and			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer	03/30/2018 Date
Here	Cynthia Woolley, Treasurer Type or print name and title	
Paid	Print/Type preparer's name Preparer's signature	PTIN
Preparer	Kevin Mills	Check X if /2018 self-employed P00274659
Use Only	<u>remisname</u> FRevin Mills, CPA	Fimi-FINEN 75 20010CC
May the IRS	Firm's address ▶ 1015 West San Antonio St, Suite A, Lockhart, TX 786 discuss this return with the preparer shown above? (see instructions)	44 Phone no. (512) 376-4212
For Paperwo	rk Reduction Act Notice, see the separate instructions. BAA REV 12/05/	

	990 (2017) Page 2
Par	Statement of Program Service Accomplishments
1	Check if Schedule O contains a response or note to any line in this Part III
•	To provide Volunteer and Emergency Services
	to the local Delhi Community
2	Did the organization undertake any significant program services during the year which were not listed on the
•	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(2) and 501(c)(2) are services are used in the section of its three largest program services.
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	(Code:) (Expenses \$ 13,655 including grants of \$ 0,) (Bruce of \$
	(Code:) (Expenses \$13,655. including grants of \$0.) (Revenue \$136,134.) Fire Fighting and Fire Prevention and Rescue Services
	······································
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	••••••••••••••••••••••••••••••••••••••
	\$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
-10	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	++++++++++++++++++++++++++++++++++++++

à.	
4d	Other program services (Describe in Schedule O.)
An	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses ► 13,655.

ra	t IV Checklist of Required Schedules		-	Page 3
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,		Yes	No
2		11	×	
3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes." complete Schedule O. P.	-	-	×
4	Section 501(c)(3) organizations. Did the organization ongane is labely in the section in		-	×
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that	4		×
	Part III			
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of any similar funds.	5	×	-
_	"Yes," complete Schedule D, Part I			
7	the environment, historic land areas, or historic structures? If "Yes," complete Schodule D. Bart "		-	×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II	7	-	×
9	Did the organization report an amount in Part X line 21 for another ways and the	8	-	×
10	debt negotiation services? If "Yes," complete Schedule D. Part IV	9		×
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Deba due D. R. Hitter	-		
11	VII, VIII, IX, or X as applicable.	10		×
а	complete Schedule D, Part VI	-	2	
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI	11a	×	-
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<u>11b</u>	-	×
d	reported in Part X, line 16? If "Yes," complete Schedule D. Part IX	<u>11c</u>		×
е	Did the organization report an amount for other liabilities in Part V lice 250, K more than the sector is the	11d	×	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e	-	×
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X .	11f		×
		12a		×
	"Yes," and if the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D. Parts Yi and Yi is applicable		1	
13	is the organization a school described in section 170/b)/1/(A)(ii)2 if #Vee # complete out out of	12b 13	-	×
148	or a the organization maintain an office, employees, or agents outside of the Linkert Oterano	14a	-	_
Q	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	TTG		×
15	ord the vigenized with reput to Parr IX column (A) line 2 more than 65 000 - (14b	-	×
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV	15	-	×
17	Did the organization report a total of more than \$15,000 of expenses for preference (i.e.)	16	-	×
18	Did the organization report more than \$15,000 total of fundmining quart (see instructions)	17	-	×
19	Did the organization report more than \$15,000 of gross income from the state	18	×	_
-	If "Yes," complete Schedule G, Part III	19		×

Form 990 (2017)

, F	art	IV Checklist of Required Schedules (continued)			ago I
	20 -	Did the organization accords and a to the tank a sum of the tank and t		Yes	No
1	b	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
4	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic evention of the second se	205	-	_
2	22	domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .	21	×	-
2	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	22		×
2		Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	23		×
	Ŭ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24a 24b	-	<u>×</u>
2	d 5a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d	-	_
		Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25a		×
2	6	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	25b		×
2	7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule I. Part III</i>	26		×
2	0	Part IV instructions for applicable filing thresholds, conditions, and exceptions);	27		×
	•	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	-	×
		An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. Part IV	28b 28c	+	×
2! 3(9)	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29	-	×
31	•	Part I	30	-	×
32	- (complete Schedule N, Part II	31	-	×
33	ו י	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R. Part I	33		×
	r 1 (or IV, and Part V, line 1	34		x
35	0 1	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes." complete Schedule R. Part V. line 2	35a	-	x
36	r i	section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	35b		_
37	E E F	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	36		×
38	i (Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	37	+	×
			30	-	X

Page 4

Part VIII Statement of Revenue

	Check if Schedule C		1	(A)			
	and the second			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
18	Federated campaigns	s1	a				512-514
E		1	b 3,075.				
i		1	THE OWNER AND ADDRESS OF ADDRESS	÷			
	Geverament empte (ess						
f		tributions) 1	6	ALC: A REAL	125	1.0	
1a L C C C C C C C C C C C C C C C C C C	and similar amounts not inc	luded above 1	f 79,418.				
9							
1 h	Total. Add lines 1a-1	<u>f</u>		110,914.		1	
			Business Code			The second second	
28							
b)						
c							-
	*******************		-				
1 7	***********************	****************	-				
e			-				
f	All other program serv	vice revenue .					
9		f	🕨	1		Second States	In the second
3	Investment income	(including div	idends, interest,			1	
1	and other similar amo	unts)	🕨	333.	333.	0.	
4	income from investment	t of tax-exempt	hond proceeds			0.	
5		•					
1		(I) Real	(ii) Personal				
0-	Orana marta	(i) i totali	(ii) reisonai	1		1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1	
6a					- 6.1		
b	Less: rental expenses	C					
c	Rental income or (loss)	1					
d	Net rental income or (loss)					
7a		(i) Securities	(ii) Other				
	assets other than inventory						
Ь			1,950.				
⁰				the second			
	and sales expenses .					2.55-501	
C			1,950.				
d	Net gain or (loss)	• • • •		1,950.	1,950.	0.	(
8a		28,421. d on line 1c).	a 28,421.				
b	Less: direct expenses		b 5,569.			the same of	
c				22,852.		-	00.011
	Gross income from ga See Part IV, line 19	ming activities		22,852.		0.	22,852
L							
b			b	and the second s			and the second second
l c	Gross sales of inv	ventory, less			Phil (1999)	- Part of the second	3.222.2
10a	made some man at all some some	s	a	12	A Carton and a carton	1941	
10a	returns and allowance	old	b	a contraction of	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
					and the second lies		the second second
	Less: cost of goods so						
b	Less: cost of goods so Net income or (loss) fr	om sales of in	iventory >				
b	Less: cost of goods so Net income or (loss) fr Miscallaneous Re	om sales of in					
b c 11a	Less: cost of goods so Net income or (loss) fr Miscellaneous Re	om sales of in	iventory >				
b c 11a b	Less: cost of goods so Net income or (loss) fr Miscellaneous Re	om sales of in	iventory >				an a ai
b c 11a	Less: cost of goods so Net income or (loss) fr Miscallaneous Re	rom sales of in evenue	iventory >				
b c 11a b	Less: cost of goods so Net income or (loss) fr Miscellaneous Re	rom sales of in evenue	iventory >	85.	85.	0.	
b c 11a b c	Less: cost of goods so Net income or (loss) fr Miscallaneous Re	rom sales of in evenue	iventory >	85.	85.	0.	

Form 990 (2017)

	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons	e or note to any lin	in ourier organization		
Don	ot include amounts reported on lines 6b. 7b.	(A) Total expenses	(B)	(C)	
ob, 9	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
a b					
C	Legal				
d	Lobbying		0.	325.	0.
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
-	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion			-	
13	Office expenses	743.	0.	743.	0.
14	Information technology				0.
15	Royalties				
18	Occupancy	1,689.	0.	1,689.	0.
17					0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,081.	1,081.	0.	0.
23		6,018.	6,018.	0.	0.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Auto & Truck	1 624	2 624	- Evel 1 - A	135 - 2 - <u>1</u>
b	Telephone	1,624.	1,624.	0.	0.
C	Supplies	64.	0.	4,057.	0.
d	Dues	50.	50.	64.	0.
е	All other expenses	8,939.	4,882.	4,057.	0.
25	Total functional expenses. Add lines 1 through 24e	24,590.	13,655.	10,935.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶			10, 535.1	0.

- 14	art X				
-	-	Check if Schedule O contains a response or note to any line in this Par	(A) Beginning of year	i i	(B) End of year
	1	Cash-non-interest-bearing		1	
	2	Savings and temporary cash investments	55,523.	2	92,944
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	and the second
S	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
אממנת	7	Notes and loans receivable, net		7	
₹	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or	10 M	3	
		other basis. Complete Part VI of Schedule D 10a 407, 191.			
1	b	Less: accumulated depreciation 10b 53, 157.	311,504.	10c	354,034
	11	Investments-publicly traded securities		11	301/031
	12	Investments-other securities. See Part IV, line 11		12	
	13	Investments-program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
1	15	Other assets. See Part IV, line 11	45,903.	15	0
+	16	Total assets. Add lines 1 through 15 (must equal line 34)	412,930.	16	446,978
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19			19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	Contraction of the local distance
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	23			22	
1	24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties		23	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X		24	
		of Schedule D		25	
+	26	Total liabilities. Add lines 17 through 25		26	
		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	412,930.	27	446,978.
3	28	Temporarily restricted net assets	0.	28	
	29	Permanently restricted net assets	0.	29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ► □ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Pald-in or capital surplus, or land, building, or equipment fund		31	
51	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	412,930.	33	446,978.
	34	Total liabilities and net assets/fund balances	412,930.	34	446,978.

Form 990 (2017)

Par	t XI Reconciliation of Net Assets	<u> </u>			<u>ge 12</u>
	Check if Schedule O contains a response or note to any line in this Part XI				-
1	Total revenue (must equal Part VIII, column (A), line 12)				
2	Total expenses (must equal Part IX, column (A), line 25)	+			34.
3	Revenue less expenses. Subtract line 2 from line 1	+			<u>90.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	+			<u>i44.</u>
5	Net unrealized gains (losses) on investments	╞───	4.	12,5	<u>30.</u>
6	Donated services and use of facilities	+			
7	Investment expenses	+			
8	Prior period adjustments				
9	Other changes in het assets or fund balances (explain in Schedule O)				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X line				
	33, column (B))		51		74
Part	Financial Statements and Reporting				74.
-	Check if Schedule O contains a response or note to any line in this Part XII				
			1	Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other	T	-	103	THU
	If the organization changed its method of accounting from a prior year or checked "Other" explain	in	12		
	Schedule O.		- 7	1	
2a	there are a semicarrow a microsoft statements complian of takinade by su independent second such	. [2a		×
	IT "Yes," check a box below to indicate whether the financial statements for the year were compiled	or T	1		
	reviewed on a separate basis, consolidated basis, or both:		1		
	Separate basis Consolidated basis Both consolidated and separate basis		- 4		
b	Were the organization's financial statements audited by an independent accountant?	. 1	2b	-	×
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on	a		in the second	
	separate basis, consolidated basis, or both:	1		1	
	Separate basis Consolidated basis Both consolidated and separate basis		4		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig	ht i	-		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant	2	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain	in T	1	-	
_	Schedule O.	1			SW
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	in			-
	the Single Audit Act and OMB Circular A-133?.		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	ne l	-		-
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	-	3b		

Form 990 Part IX, Line 24e

All Other Expenses

2017

Name Delhi Volunteer Fire D	epartment			Employer Identification No. 30-0246499
Description	(A) Totai	(B) Program services	(C) Managemer and genera	(D) nt Fundraising al
Telephone	4,057.	0.	4,05	57. 0.
Small Equipment	2,982.	2,982.		0. 0.
<u>Training</u>		1,900.		0
	=			
	-			
	-			
	-			
	-			
	•			
	-			
Total to Form 990, Part IX, line 24e	8,939.	4,882.	4,05	70.
				··· ···

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

(E) Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2017 Open to Public

OMB No. 1545-0047

	e of the organization				Employer identificatio	Inspection
Del	hi Volunteer Fire Depar	tment			30-0246400	
	rt I Reason for Public Cha	arity Status (A	Il organizations mus	t complete this	Dart) See instruction	ons
The	organization is not a private found	lation because i	t is: (For lines 1 throug	h 12. check only	one box)	
T	A church, convention of church	ches, or associa	tion of churches desc	ribed in section	170(b)(1)(A)(0	
2	A school described in section	n 170(b)(1)(A)(ii)	. (Attach Schedule E (Form 990 or 990	(F7))	
3	A hospital or a cooperative ho	ospital service o	rganization described	in section 170(b)(1)(A)(iii).	
4	A medical research organizat hospital's name, city, and sta	18.				
5	An organization operated for section 170(b)(1)(A)(iv). (Con	ipiete Part II.)				tal unit described ir
6	A federal, state, or local gove	mment or gover	nmental unit describe	d in section 170	(b)(1)(A)(v).	
7	An organization that normally described in section 170(b)(1	/ receives a sub	stantial part of its sur	oport from a gov	ernmental unit or from	n the general public
8	A community trust described	in section 170(I	b)(1)(A)(vi). (Complete	Part II.)		
9	An agricultural research organ or university or a non-land-gra university:	ant conege of ag	inculture (see instructi	ons). Enter the n	ame, city, and state of	f the college or
10	An organization that normally receipts from activities related support from gross investmen acquired by the organization a	t income and u	related business taxe	ertain exception	s, and (2) no more tha	p fees, and gross n 331/3% of its businesses
11	An organization organized and	operated exclu	isively to test for publi	alizi. (Complete i	rart III.) Mon 500(-)(4)	
12	An organization organized and	operated exclu	sively for the benefit of	f to perform the	functions of an in an	
	of one or more publicly supp Check the box in lines 12a thro	urteu organizati	ons described in sect	10 0 500(9)(1) or	eastion Englation ca	meet test
а	Type I. A supporting organization the supported organization supporting organization. Y	nization operate n(s) the power to	d, supervised, or contr regularly appoint or e	rolled by its supp elect a majority of	orted organization(a)	An and an affect the second states
b		nization supervi the supporting (sed or controlled in co organization vested in	nnection with its	supported organizations that control or many	on(s), by having age the supported
с	Type III functionally integ its supported organization	rated. A support	rting organization ope	rated in connecti lete Part IV, Sec	tions A, D, and E.	
d	Type III non-functionally that is not functionally inter requirement (see instruction)	integrated. A su grated. The orga ns). You must o	upporting organization anization generally mu complete Part IV, Sec	operated in con st satisfy a distrit ctions A and D, a	nection with its suppo oution requirement an and Part V.	d an attentiveness
0	Check this box if the organ functionally integrated, or 1	ization received	a written determinatio	on from the IPS +	hat it is a Turne I. Turne	II, Type III
f	Enter the number of supported a	organizations .				
9	Provide the following information	n about the sup	ported organization(s).			•••
	(I) Name of supported organization	(ii) EIN	(Hi) Type of organization (described on lines 1-10 above (see instructions))	(iv) is the organization listed in your governin document?	9 (V) Amount of monetary 9 support (see instructions)	(vi) Amount of other support (see instructions)
				Yes No		
(A)						
(B)						
(C)						
(D)						

Schedule A (Form 990 or 990-EZ) 2017

Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	19,291.	22,814.	78,738.	29,866.	82,493.	233,202.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	19,291.	22,814.	78,738.	29,866.	82,493.	233,202.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)			and and			
6	Public support. Subtract line 5 from line 4	50.000					233,202.
	on B. Total Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	19,291.	22,814.	78,738.	29,866.	82,493.	233,202.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	22,046.	21,594.	18,950.	22,751.	25,245.	110,586.
11	Total support. Add lines 7 through 10	for a local second	1.				343,788.
12 13	Gross receipts from related activities, etc. First five years. If the Form 990 is for the organization, check this box and stop her	e organization	's first, secon	d, third, fourth	, or fifth tax ye		
Secti	on C. Computation of Public Suppor	t Percentag	9		·		
14 15 16a	Public support percentage for 2017 (line 6 Public support percentage from 2016 Sch 33 ¹ /3% support test-2017. If the organi	edule A, Part	II, line 14			14 15	67.83% 65.37%
ь	box and stop here. The organization qual 331/3% support test-2016. If the organization	lifies as a publi zation did not	icly supported check a box o	organization n line 13 or 16	a, and line 15	is 33¹/₃% or m	ore, check
17a	this box and stop here. The organization 10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the " organization	017. If the orga eets the "facts- facts-and-circ	anization did n -and-circumsta umstances" te	ot check a box ances" test, ch st. The organiz	k on line 13, 10 leck this box a zation qualifies	6a, or 16b, and und <mark>stop here</mark> . s as a publicly	d line 14 is Explain in supported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization methods by the organization methods by the organization methods by the organization by	016. If the orga ition meets th neets the "fact	anization did n e "facts-and-c ts-and-circum:	iot check a bo circumstances" stances" test.	x on line 13, 1 ' test, check 1 The organizati	6a, 16b, or 17 this box and s on qualifies as	a, and line stop here. a publicly
18	Private foundation. If the organization dis instructions	d not check a	box on line 13	, 16a, 16b, 17a	, or 17b, chec	k this box and	see
							0 or 990-EZ) 2017

	t III Support Schedule for Organiz	Marra Deser					Page 3
		ations Desci	nded in Sec	tion 509(a)(2))		
	(Complete only if you checked the organization fails to qualify the organi	under the te	e to or Parci	f or if the orga	anization falle	d to qualify u	nder Part II.
Sec	tion A. Public Support		sis iisteu De	iow, please c	omplete Part	11.)	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(-1) 001C	1.1.0047	
1	Gifts, grants, contributions, and membership fees	(4) 2010	(0) 2014	10/2015	(d) 2016	(e) 2017	(f) Total
	received. (Do not include any "unusual grants,")		11000	1		1	
2	Gross receipts from admissions, merchandice						
	sold or services performed, or facilities furnished in any activity that is related to the	1.00				1.000	-
	organization's tax-exempt purpose			1			
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513			1			
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities					-	
-	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a							
b	Amounts included on lines 2 and 3		-				
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b			-			
8	Public support. (Subtract line 7c from		1 WF	13	15-05-04	1 T	
-	line 6.)					to a set	
	ion B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6		_				
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,			ļ			
L.	royalties, and income from similar sources .					1	
D	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975						
-	I				·		
	Add lines 10a and 10b						
11	Net income from unrelated business			i l			
	activities not included In line 10b, whether or not the business is regularly carried on						
10							
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
14	and 12.)						
1.4	First five years. If the Form 990 is for the	organization'	's first, secon	d, third, fourth,	, or fifth tax ye	ar as a sectior	1 501(c)(3)
Rooti	organization, check this box and stop her		• • • •	• • • •	· · · · ·	• • • • •	· · 🕨 🗖
<u>15</u>	on C. Computation of Public Support	Percentage)				
16	Public support percentage for 2017 (line 8	, column (f) div	ided by line 1	3, column (f))	• • • • •	15	%
	Public support percentage from 2016 Sch	edule A, Part II	I, line 15 .		• • <u>•</u> • • <u>-</u> -	16	%
17	on D. Computation of Investment Inc	ome Percen	tage				
18	Investment income percentage for 2017 (li	ne 10c, colum	n (f) divided by	y line 13, colun	nn (f))	17	%
19a	Investment income percentage from 2016	Schedule A, P	art III, line 17		• • • • •	_18	%
194	331/3% support tests-2017. If the organiz	ation did not (Check the box	on line 14, an	d line 15 is mo	pre than 331/3%	
ь	17 is not more than 331/3%, check this box a 331/3% support tests - 2016. If the organize	tion did not of	nie organizatio	n qualifies as a	publicly suppo	rted organizatio	in . 🕨 🔲
	331/3% support tests - 2016. If the organization line 18 is not more than 331/3% check this be	NOT UN THOM	eck a box on l	ine 14 or line 1	9a, and line 16	is more than 33	31/3%, and
20	line 18 is not more than 331/3%, check this b	not obselve to	re. me organi	Zadon qualities	as a publicly su	pported organiz	zation 🕨 🔲
	Private foundation. If the organization did	HOL CHECK & D	ox on line 14,	19a, or 19b, c	neck this box a	nd see instruc	tions 🕨 🗋

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

 Part IV
 Supporting Organizations

 (Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

 Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Schedule A (Form 990 or 990-EZ) 2017

Part	IV Supporting Organizations (continued)		F	Page 5
11	Has the organization accepted a gift or contribution from any of the following persons?	-	Yes	No
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization? A family member of a person described in (a) above?	11a		
_ C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. ion B. Type I Supporting Organizations	11b	-	-

- Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

Schedule A (Form 990 or 990-EZ) 2017

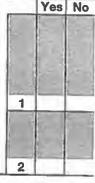
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Section D. All Type III Supporting Organizations

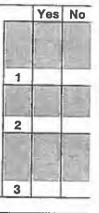
- 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s).
- 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a ____ The organization satisfied the Activities Test. Complete line 2 below.
- b The organization is the parent of each of its supported organizations. Complete line 3 below.
- c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- 2 Activities Test. Answer (a) and (b) below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.



	Yes	No
	-	
		100
	F	1
1		



Part V

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see Instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8	· · · · · · · · · · · · · · · · · · ·	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		Al anna leas	
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			A Contraction
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	·	
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8	· · · · · · · · · · · · · · · · · · ·	
Section C - Distributable Amount		1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		1
2 Enter 85% of line 1.	2		1
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4	House and the	
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2017

Pari	ule A (Form 990 or 990-EZ) 2017 Type III Non-Functionally Integrated 509(a)(2) Supporting Organi		Pag
	tion D - Distributions	s) Supporting Organ	zations (continued)	
1	Amounts paid to supported organizations to accomplish	overant aurageage		Current Year
2	Amounts paid to perform activity that directly furthers ex-	exempt purposes of suppo	arted	-
	organizations, in excess of income from activity	empt purposes of suppt	neu	
3	Administrative expenses paid to accomplish exempt pur	poses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets	eren er enpperten erge		
5	Qualified set-aside amounts (prior IRS approval required)	1		
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	ch the organization is res	ponsive	
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6	1000 C	State and the	
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required – explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017		Contraction of the second	the second
a				h the state
b	From 2013			
C	From 2014			and the second
d	From 2015			Contraction of the second
e	From 2016			
f	Total of lines 3a through e			the second s
g	Applied to underdistributions of prior years			1.4
h	Applied to 2017 distributable amount	George 1		
1	Carryover from 2012 not applied (see instructions)			C STATISTICS
1	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		Sector States	
4	Distributions for 2017 from Section D, line 7: \$			
8	Applied to underdistributions of prior years			NO DE DE
b	Applied to 2017 distributable amount		- With	
C	Remainder. Subtract lines 4a and 4b from 4.			2 No. 1 State State
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j and 4c.			
8	Breakdown of line 7:	STREET, STREET,		ta and the second
a	Excess from 2013			a heat a strain for
b				
C	Excess from 2015			the second second
d	Excess from 2016		describer of the second se	n in the second s
е	Excess from 2017	and the state of t	1223 Store Att 1	the second s

Schedule A (Form 990 or 990-EZ) 2017

	Form 990 or 990-EZ) 2017
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
See Sta	tement

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Delhi Volunteer Fire Department

Schedule A: Public Charity Status and Public Support

Part VI: Supplemental Information

Part VI: Supplemental Information Continuation Stateme						
Pt II Ln 10	Other Income Part II, Line 10 Description: 0 22046. 2014: 21594. 2015: 18950. 2016: 22751	Other Income 2013: L. 2017: 25245.				

	SCHEDULE C	1	Political Campaign a	and Lobhvin	g Activities	OMB No. 1545-0047						
	(Form 990 or 990-EZ)	Eor 0			-							
	Department of the Treasury		Irganizations Exempt From Income plete if the organization is described									
	Internal Revenue Service		► Go to www.irs.gov/Form990 for	instructions and th	n to Form 990 or Form 990 le latest information.	Inspection						
	If the organization ans	 If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. 										
	 Section 501(c)(3) or 	ganization	s: Complete Parts I-A and B. Do not co	mplete Part I-C.								
	 Section 527 organiz 	zations: Co	tion 501(c)(3)) organizations: Complete mplete Part I-A only.	Parts I-A and C belo	ow. Do not complete Part I-	3.						
	If the organization ans	wered "Ye	s," on Form 990, Part IV, line 4, or Fo	orm 990-EZ, Part Vi	, line 47 (Lobbying Activitie	es), then						
	 Section 501(C)(3) or 	ganizations	s that have filed Form 5768 (election un	der section 501(h)):	Complete Part II-A. Do not /	complete Bert II B						
		ganizations	s that have NOT filed Form 5768 (election	on under section 50	1/h)): Complete Part II.P. De	pot complete David II. 6						
	and free are set and the	account		y lax) (see separat	te instructions) or Form 99	IO-EZ, Part V, line 35c (Proxy						
	Section 501(c)(4), (5 Name of organization	5), or (6) org	anizations: Complete Part III.									
	Delhi Voluntee	r Fire	Department			entification number						
	Part I-A Comp	plete if th	e organization is exempt und	ler section 501	<u>30-0246</u>	499						
	1 Provide a des	cription d	of the organization's direct and ir	direct political ca	ampaign activities in Pa	t IV (see instructions for						
	deminion of p	onucai ca	impaign activities")			IL IV. (SEE INSUDCIONS TOP						
	 2 Political campa 3 Volunteer hour 	aign activi 's for polit	ity expenditures (see instructions)	•••••	• • • • • • • • •	\$						
	Part I-B Comp	ete if th	ical campaign activities (see instru ne organization is exempt und	er section 501/	<u> </u>							
	 Enter the amound 	unt of any	excise tax incurred by the organiz	ation under sectio	n 4955	\$						
	2 Enter the amou	unt of any	excise tax incurred by organization	n managers under	section 4955	\$						
	4a Was a correcti	on made?	red a section 4955 tax, did it file Fo	orm 4720 for this y	ear?							
	b If "Yes," descri	ibe in Parl	t IV.	* * * * * *		· · · L Yes L No						
	Part I-C Comp	lete if th	e organization is exempt und	er section 501(c), except section 50	1 (c)(3).						
	1 Enter the amo activities	unt direc	tly expended by the filing organiz	zation for section	527 exempt function	\$						
	2 Enter the amount 527 exempt fur	unt of the	e filing organization's funds contrib	outed to other org	anizations for section	***************************************						
	3 lotal exempt	function	expenditures. Add lines 1 and 2	. Enter here and	on Form 1120-POL,	P						
		rganizatio	n file Form 1120-POL for this year	· · · · · · · · · · · · · · · · · · ·								
	5 Enter the name	s, addres	ses and employer identification nu	mber (EIN) of all s	ection 527 political organ							
	organization m	aue paym	enus, For each organization listed.	enter the amount	naid from the filing organ	ization's funds. Also auto-						
		political C	ontributions received that were pro	motiv and directly	rielivered to a concerte r	political assessments at a second						
1	(a) Name	0 0	(b) Address	(c) EIN								
				(c) Env	(d) Amount paid from filing organization's	(e) Amount of political contributions received and						
					funds. If none, enter -0	promptly and directly delivered to a separate						
						political organization. If none, enter -0-,						
-	(1)											
-												
_	(2)											
	(3)					- <u></u>						
	(4)					<u> </u>						
	(5)											
-	(6)											
Ξ						<u> </u>						

Schedule C (Form 990 or 990-EZ) 2017

Doon	4
Page	4

Pa	art	I-A	Complete if the organization section 501(h)).	n is exempt under section 501(c)(3) and filed	d Form 5768 (elec	ction under
A	Ch	eck 🕨	if the filing organization belong address, EIN, expenses, and s	s to an affiliated group (and list in Part IV each affil hare of excess lobbying expenditures).	liated group membe	er's name,
8	Ch	eck 🕨	if the filing organization check	ed box A and "limited control" provisions apply.		
			Limits on Lobby	ving Expenditures	(a) Filing	(b) Affiliated
-				ans amounts paid or incurred.)	organization's totals	group totals
1	a		bbying expenditures to influence	public opinion (grass roots lobbying)		
	b	I otal lo	obbying expenditures to influence	a legislative body (direct lobbying)		
	C	Total lo	bbying expenditures (add lines 1a	and 1b)		
	d	Other e	exempt purpose expenditures 🔒			
	е	Total e	xempt purpose expenditures (add	lines 1 c and 1d)		
	f	Lobbyi	ng nontaxable amount. Enter ti	he amount from the following table in both		
	_	column	15			
		lf the an	nount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		12
		Not over	r \$500,000	20% of the amount on line 1e.		
	Ŀ	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		12-2-2
		Over \$1,	000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		10 C
		Over \$1,	500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		S
	_	Over \$1	7,000,000	\$1,000,000.		1
	g	Grassr	oots nontaxable amount (enter 259	% of line 1f)		
			ct line 1g from line 1a. If zero or les			
			ct line 1f from line 1c. If zero or les			
				on either line 1h or line 1i, did the organization	file Form 4720	
		reportir	ng section 4911 tax for this year?			Yes No
				ar Averaging Period Under section 501(b)	••••••	

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

_	Lobby	ying Expenditures	During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))			A Resident		
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

REV 12/20/17 PRO

Schedule C (Form 990 or 990-EZ) 2017

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

desc.	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	3)	1)	(b)
_	ription of the lobbying activity.	Yes	No	Amount
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?	11-20		
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?			1-6
d e	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body?			_
h I	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
j 2a	Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912	2008		24 - S.
d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	-		No. 1
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), 0	r seci	tion
1 2 3	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the p			1
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes."	prior y	/ear?	2 3 ion II-A, line 3
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes."	(5), a	/ear?	3
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	(5), a	r sect Part i	3
1 2 a	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year	(5), a	vear? or sect Part i 1 2a	3
1 2 a b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year	(5), a	r seci Part li 1 2a 2b	3
1 2 a	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	of	r seci Part I 1 2a 2b 2c	3
1 2 a b c	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of t excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbyi	(5), a (5), a (b) of	r seci Part li 1 2a 2b	3
1 2 b c 3 4	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of t excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbyi and political expenditure next year?	of	r seci Part li 2a 2b 2c 3 4	3
1 2 a b c	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of t excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbyi and political expenditures (see instructions)	of	r seci Part i 2a 2b 2c 3	3

SCHE (Form	DULE D 1 990)	► Complete if the or Part IV, line 6, 7, 8, 9, 1	al Financial Statements ganization answered "Yes" on Form 990 0, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12),	OMB No. 1545-0047
	ent of the Treasury Revenue Service		Attach to Form 990. 990 for instructions and the latest inform	nation.	Open to Public Inspection
	f the organization			Employer identific:	
Par		er Fire Department zations Maintaining Donor Adv	ised Funds or Other Similar Fun	30-0246499	
			'Yes" on Form 990, Part IV, line 6.		
			(a) Donor advised funds	(b) Funds	and other accounts
1		at end of year			
2		ue of contributions to (during year)		<u> </u>	
3 4		ue of grants from (during year) .	· · · · · · · · · · · · · · · · · · ·		
5		Je at end of year	advisors in writing that the assets h	ald in deper od	vised
•	funds are the	organization's property, subject to th	e organization's exclusive legal control		
6			and donor advisors in writing that gra		
	only for charit	able purposes and not for the benef	it of the donor or donor advisor, or f		
			• • • • • • • • • • • • •	• • • • • •	Yes 🗌 No
Part		rvation Easements.			
			'Yes" on Form 990, Part IV, line 7.		
1		conservation easements held by the	organization (check all that apply). tion or education) 🔲 Preservation o	f e bietestesikstes	
		of natural habitat		f a certified histo	
		on of open space			
2	Complete lines	s 2a through 2d if the organization he	eld a qualified conservation contribution	on in the form of	a conservation
	easement on t	he last day of the tax year.		Held	at the End of the Tax Year
a			• • • • • • • • • • • •		
Ь			5		
c d			historic structure included in (a) (c) acquired after 7/25/06, and not		
u			(c) acquired after 7725/06, and not		
3		-	sferred, released, extinguished, or terr		roanization during the
	tax year 🕨	· · · ·		······	
4		tes where property subject to conse			
5	Does the org	anization have a written policy reg	garding the periodic monitoring, ins	pection, handlir	ng of
6			sements it holds?		
0		eer noors devoted to monitoring, inspect	ting, handling of violations, and enforcing	conservation ease	ments during the year
7	Amount of exp	enses incurred in monitoring, inspectin	g, handling of violations, and enforcing	conservation eas	ements during the year
•	▶\$		grinalizing of fiolations, and officienty	00110011240011240	omonto during the year
8			2(d) above satisfy the requirements of		
9			conservation easements in its revenue		atement, and
	balance sheet	, and include, if applicable, the text of accounting for conservation easeme	of the footnote to the organization's fir	ancial statemen	ts that describes the
Dart			s of Art, Historical Treasures, or	Other Similar	Annota
- un			"Yes" on Form 990, Part IV, line 8.		A99613.
1 a			AS 116 (ASC 958), not to report in its		ent and balance sheet
	works of art,	historical treasures, or other similar	assets held for public exhibition, ea	ducation, or rese	arch in furtherance of
	-		ootnote to its financial statements that		
b	works of art, public service,	historical treasures, or other similar provide the following amounts relat		ducation, or rese	earch in furtherance of
	(i) Revenue in	cluded on Form 990, Part VIII, line 1		• • • •	\$
2	(ii) Assets include the organized	uded in Form 990, Part X	, historical treasures, or other similar	· · · · · ·	S
-			FAS 116 (ASC 958) relating to these i		ncial gain, provide the
а					\$
b	Assets include	ed in Form 990, Part X		🕨	\$
For Pa		tion Act Notice, see the Instructions for			Schedule D (Eorm 990) 2017

_	le D (Form 990) 2017					_				Page 2
Part	<u> </u>	Collections of	Art, His	torical 1	Freasures,	or Oth	ner Similar A	ssets (d	contin	ued)
3	Using the organization's acquisition, a collection items (check all that apply):	iccession, and of	her reco	rds, chec	k any of the	follow	ing that are a	significa	nt use	of its
а	Public exhibition				or exchange					
b	Scholarly research		8	Othe	r	******				
с 4	Preservation for future generations									
-	Provide a description of the organizati XIII.	on s conections a	ano expla	an now t	ney turther t	ne orga	anization's exe	mpt pur	pose II	n Part
5	During the year, did the organization	solicit or receive	donation	s of art,	historical tre	asures	, or other simi			
Part	assets to be sold to raise funds rather		aneo as j	Jan OI In	e organizatio	n's col			Yes [No
Tar	Complete if the organization 990, Part X, line 21.		" on For	m 990, I	Part IV, line	9, or r	eported an a	mount o	on For	m
1a	Is the organization an agent, trustee, included on Form 990, Part X?	custodian or oth	ier intern	nediary fo	or contributio	ons or	other assets r		Yes [
b	If "Yes," explain the arrangement in Pa									
C	Beginning balance					10	· · · · · · · · · · · · · · · · · · ·	anoun		
d	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amoun	t on Form 990, P	art X, line	21, for e	scrow or cu	stodial	account liabilit	y? 🗋 '	Yes [No
b	If "Yes," explain the arrangement in Pa	rt XIII. Check her	e if the e	planatio	n has been p	provide	d on Part XIII .	•••	<u> </u>]
Par			1 F	- 000 0	D	40				
	Complete if the organization	answered "Yes (a) Current year		m 990, I or year	c) Two years		(d) Three years bad			
1a	Beginning of year balance				(c) two years	Dack	(d) Three years bad	.K (e) PO	ur years	Dack
b	Contributions	<u>–</u>								
c	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
e	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the	ne current year er	id balanc	e (line 1g	, column (a))	held a	S:			
а	Board designated or quasi-endowmen	t 🕨	_%							
b	Permanent endowment	%								
C	Temporarily restricted endowment	%								
0-	The percentages on lines 2a, 2b, and 2	c should equal 1	00%.							
3a	Are there endowment funds not in the organization by:	possession of tr	ie organi	zation thi	at are held a	nd adn	ninistered for t	he		7
	(i) unrelated organizations							0-1	Yes	No
	(ii) related organizations							3a(i 3a(i		
b	If "Yes" on line 3a(ii), are the related on							36		
4	Describe in Part XIII the intended uses								-	<u> </u>
Part			-							
_	Complete if the organization	answered "Yes	" on For	m 990, l	Part IV, line	11a. S	See Form 990	, Part X	, line '	10.
	Description of property	(a) Cost or of (investm			or other basis ther)		ccumulated preciation	(d) B(ook valu	6
18	Land					-Hand				
b	Buildings	29	0,950.				7,562.		283,3	388.
C A	Leasehold improvements	11	6 241				46 605		70 4	- 4.5
d	Equipment		6,241.				45,595.		/0,6	646.
	Add lines 1a through 1e. (Column (d) m	ust equal Form 9	90, Part 2	K, columr	n (B), line 10c	.)			354,0	34.
BAA		R	EV 11/13/17 P	RO			Sch	edule D (F	Form 99	0) 2017

	Investments Other Securities. Complete if the organization answered "Yes" on Eq.	m 000 East IV Ve-		Page
	Complete if the organization answered "Yes" on Fo (a) Description of security or category (including name of security)	(b) Book value	11b. See Form 990, Part (c) Method of valuation Cost or end-of-year market	1:
(1) Financia			Cost of end-of-year market	value
	held equity interests			
(3) Other				
(A)				
(B)				
(C) (D)				
(D) (E)	***************************************			
(F)	==++++++++++++++++++++++++++++++++++++			
(G)	***************************************			
(H)				
Total. (Column I	b) must equal Form 990, Part X, col. (₿) line 12.) ►			
Part VIII	Investments-Program Related.	123		
	Complete if the organization answered "Yes" on For	m 990 Part IV line	11c See Form 000 Rost N	/ line 10
	(a) Description of investment	(b) Book value	(c) Method of valuation	
			Cost or end-of-year market	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)	and the second s			
(7)				
(8)				
Total. (Column (t) must equal Form 990, Part X, col. (B) line 13.) ►			
Part IX	Other Assets.	100		2 1
	Complete if the organization answered "Yes" on For	m 990. Part IV. line 1	1d See Form 990 Part V	line 15
	(a) Description		(b) Boo	
(1) Automo				
10) C	DILES			0
2 Constr	uction in Process			0.
(3)				<u>0.</u> 0.
(3) (4)				
(3) (4) (5)				
(3) (4) (5) (6)				
(3) (4) (5) (6) (7)				
(3) (4) (5) (6) (7) (8)				
(3) (4) (5) (6) (7) (8) (9)	uction in Process			
(3) (4) (5) (6) (7) (8) (9) Fotal. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 15.)			
(3) (4) (5) (6) (7) (8) (9)	nn (b) must equal Form 990, Part X, col. (B) line 15.)			0.
(3) (4) (5) (6) (7) (8) (9) Fotal. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 15.)	m 990, Part IV, line 1		0.
(3) (4) (5) (6) (7) (8) (9) Fotal. (Colum Part X	nn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25.	m 990, Part iV, line 1		0.
(3) (4) (5) (6) (7) (8) (9) Total. (Colum Part X	nn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value	m 990, Part IV, line 1		0.
(3) (4) (5) (6) (7) (8) (9) Fotal. (Colum Part X	nn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value	m 990, Part IV, line 1		0.
(3) (4) (5) (6) (7) (8) (9) Fotal. (Colum Part X (1) Federal ind (2) (3)	nn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value	m 990, Part IV, line 1		0.
(3) (4) (5) (6) (7) (8) (9) Fotal. (Colura Part X (1) Federal ind (2) (3) (4)	nn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value	m 990, Part IV, line 1		0.
(3) (4) (5) (6) (7) (8) (9) Total. (Colum Part X (1) Federal ind (2) (3) (4) (5)	nn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value	m 990, Part IV, line 1		0.
(3) (4) (5) (6) (7) (8) (9) Total. (Colum Part X (0) Federal ind (2) (3) (4) (5) (6)	nn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value	m 990, Part IV, line 1		0.
(3) (4) (5) (6) (7) (8) (9) Fotal. (Colum Part X (9) Fotal. (Colum Part X (3) (4) (5) (6) (7)	nn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value	m 990, Part IV, line 1		0.
(3) (4) (5) (6) (7) (8) (9) Fotal. (Colum Part X (1) Federal ind (2) (3) (4) (5) (6) (7) (8)	nn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value	m 990, Part IV, line 1		0.
(3) (4) (5) (6) (7) (8) (9) Fotal. (Colum Part X (9) Part X (1) Federal ind (2) (3) (4) (5) (6) (7) (8) (9)	nn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value come taxes	m 990, Part IV, line 1		0.
(3) (4) (5) (6) (7) (8) (9) Total. (Colum Part X (1) Federal ind (2) (3) (4) (5) (6) (7) (6) (7) (8) (9) otal. (Column (b)	nn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form line 25. (a) Description of liability (b) Book value		1e or 11f. See Form 990,	0. 0. Part X,

Schedule D (Form 990) 2017

Schedu	e D (Form 990) 2017		Page 4
Part			Return.
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
8	Net unrealized gains (losses) on investments	2a	2007
b	Donated services and use of facilities	2b	1000
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		10000
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1. 1.
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part	XII Reconciliation of Expenses per Audited Financial Stater		
a second second	Complete if the organization answered "Yes" on Form 990,		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		10 11
а	Donated services and use of facilities	2a	1019
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII.)		-
e	Add lines 2a through 2d		20
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1	3
- -	Investment expenses not included on Form 990, Part VIII, line 7b	40	
b	Other (Describe in Part XIII.)	- The second sec	
-			10
с 5	Add lines 4a and 4b	no 19 l	4c 5
_	XIII Supplemental Information.		3
	te the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par		

			*

•	***************************************	***************************************	

Department 9% Tisker P G to www.ks.gov/Form80 or the latest instruction. Department Name of the squalation End to www.ks.gov/Form80 or the latest instruction. End/www.ks.gov/Form80 or the latest instruction. End/www.ks.gov/Form80 or the latest instruction. Path.b Volumeer Fire Department Boold or the latest instruction. End/www.ks.gov/Form80 or the latest instruction. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. A 3 Image of the squalation of government grants G Solicitation of non-government grants 0 Phone solicitations g Solicitation of non-government grants Image of the squalation apply. 1 Indicate whether the organization raised fund through any of the following activities. Check all that apply. Image of the squalation of government grants 0 Phone solicitations g Solicitation of non-government grants 0 Interment and enail solicitations g Solicitation and the solicitation are write the organization are write or the solicitation are write the organization are write or the solicitation are write the organization frage organization are write the organization are wr	-	HEDULE G m 990 or 990-EZ)	Suppleme Complete if	ental information the organization an	on Regard	ing Fundra ' on Form 99	aising or Gamin ^{0, Part IV, line 17, 18,}	g Activities	OMB No. 1545-0047			
	Depa	rtment of the Treasury		► At	tach to Form	990 or Form	990-EZ.		Open to Public			
Delhi Volunteer Fire Department 20-0246499 Parti Fundaming Advitues. Complete this organization answerd "Yes" on Form 990, Part IV, Ine 17. 1 Indicate whether the organization related funds through any of the following activities. Check all that apply. a Image: State of the organization related funds through any of the following activities. Check all that apply. a Image: State of the organization related funds through any of the following activities. Check all that apply. b Immediate of the organization related funds through any of the following activities. Check all that apply. c Image: State of the organization related funds through any of the following activities. Check all that apply. c Immediate of the organization of a state of the organization of government grants c Immediate of the organization of a state of the organization of the organization of the organization of the organization. 0 Immediate of the organization. 1 Yee No 2 No			<u>.</u>						Inspection			
Bantul Fundraising Activities. Complete If the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ fires are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Male allocitations e b Internet and enail solicitations f c Phone solicitations f d Solicitation of government grants g 2a Dot the solicitations f d Solicitation of government grants g d Internet and enail solicitations f d Solicitation of government grants g d Internet and enail solicitations f d Dot the organization have a written or roal agreement with any individual (including officers, directors, trustess, or key employees listed in Form 990, Part IV) or entity in constrain to agreements under which the fundraliser is to be componated at least 50.00 by the organization. fit has and addees of bidixual or entities (undraliser provide to breactive by biodixes tably biodixes tably biodixes tably biodixes tably biodixes tably biodixes tably biodixes table or except for the biodixes table or except for th		-	r Fire Depar	tment								
Form 990-E2 files are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. ■ Mail solicitations e Solicitation of non-government grants • Phone solicitations f Solicitation of non-government grants • Phone solicitations f Solicitation of non-government grants • Phone solicitations g Special fundraising events • On the organization have a writen or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraisers (or key employees listed in Form 990, Part VII) or entity in connection with professional fundraisers (or they employees listed in Form 990, Part VII) or entity in connection with professional fundraisers (or they employees listed in Form 990, Part VII) or entity in connection with professional fundraisers (or they employees listed in Form 990, Part VII) or entity in connection with professional fundraisers (or they employees listed in Form 990, Part VII) or entity (or entity or entity in the fundraiser) portante to agreements under which the fundraisers (or they employees listed in Form 990, Part VII) or entity (or entity or entity in the fundraiser) portante to agreements under which the fundraisers (or entity in the fundraiser) portante to agreements under which the fundraiser) portante to a control of contained by interaction or entity (or entity or entity in the fundraiser) portante to a control of contained by interaction or entity (or entity or entity in the fundraiser) 1 Ve					e organiza	tion anev	vered "Ves" on					
Mail solicitations Mail solicitation		Form 990-EZ filers are not required to complete this part.										
b Internet and email solicitations f Solicitation of government grants c Phone solicitations g Special fundrating grants 2a Did the organization have a written or oral agreement with any individual (inducting officers, directors, trustees, or Key employees listed in form 990, Part VII) or entity in connection with professional fundrating services? \Box yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundratiser is to be compensated at least \$5,000 by the organization. (M) Amount paid to (or analogy or control) or mation or mations by organization. Image: Internet and enderse of individual internet with the states of the organization is an ender which the fundratiser is to be compensated at least \$5,000 by the organization. (M) Amount paid to (organize the bar or analogy or control) or mation or analogy or control or mations by organization. Image: Internet and enderse of individual internet with the organization. Image: Internet and enderse of individual internet with organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. Internet and enderse in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensin	1			on raised funds t		_	-					
C Phone solicitations G Special fundraising ovents G Concernso solicitations G Concernso solicitation G Concernsolicitation G Concernso solicita		a 🗌 Mail solicitations e 🗌 Solicitation of non-government grants										
d In-person solicitations Define the construction of the average of the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entities (fundraiser) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Image: Intermediate the organization and address of individual individuals or entities (fundraiser) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Image: Intermediate the organization is or esting (fundraiser) Image: Imag												
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or key employees [isted in Form 990, Part VII] or entity in connection with professional functialing services? Using intermediation of the function of the funct	2											
b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (I) Name and address of individual or entities (fundraiser have control of con		or key employ	ees listed in Form	990, Part VII) or	entity in co	onnection v	with professional	fundraising services	7 Yes No			
If Name and Rollings of injunctial or with (find activity) or antibility or control of contributions? (find activity) for activity or control of contributions or for activity or control of control o	1	b If "Yes," list th compensated	e 10 highest paid at least \$5,000 by	individuals or ei the organization	ntities (fund n.	iraisers) pu	ursuant to agreen	nents under which t	he fundraiser is to be			
If Name and Rollings of injunctial or with (find activity) or antibility or control of contributions? (find activity) for activity or control of contributions or for activity or control of control o												
Yes No 1 1 2 1 3 1 4 1 5 1 6 1 7 1 8 1 9 1 10 1 Total 1 3 Ust all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.		(i) Name and addre or entity (fun	ss of individual draiser)	(ii) Activity	custody o	r control of	(Iv) Gross receipts from activity	(or retained by) fundraiser listed in	(or retained by)			
2 3 4 5 6 7 8 9 10 Total 3 Ust all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.		<u> </u>		<u> </u>	Yes	No						
3 4 5 6 7 8 9 10 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.	1											
4	2		<u> </u>	- <u></u>								
4			<u> </u>									
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10 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.	8							·				
Total	9		· ···									
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	3	List all states i	in which the orga	nization is regist	tered or lic	ensed to s	olicit contribution	ns or has been notif	ied it is exempt from			
		registration of	noonailiy.									

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For Panerwork Reduction Act Notice, see the Instructions for Form 990 or 990-57			***************************************									

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Schedule G (Fr	orm 990 or	990-EZ) 2017
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	lule G t II	than \$15,000 of fundraisir	ng event contributions	on answered "Yes" or and gross income on	Form 990, Part IV, line Form 990-EZ, lines 1 a	Page 2 e 18, or reported more and 6b. List events with
		gross receipts greater tha	n \$5,000. (a) Event #1 Gun Raffle (event type)	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
	1	Gross receipts	20,000.			20,000.
	2 3	Less: Contributions Gross income (line 1 minus line 2)	20,000.			
t	4	Cash prizes	20,000.			20,000.
	5	Noncash prizes		<u></u>		<u>_</u>
	6	Rent/facility costs				, <u></u>
	7	Food and beverages				
	8	Entertainment	<u></u>			
	9	Other direct expenses .				
	10		d lines A through Q is a			
	11	Direct expense summary. Ad Net income summary. Subtra	act line 10 from line 3, c	olumn (d)		20,000.
317	<u>t 111 </u>	Gaming. Complete if the than \$15,000 on Form 99	e organization answe 30-EZ, line 6a.	red "Yes" on Form 99	90, Part IV, line 19, or	reported more
			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
	1	Gross revenue				
	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses .				
Γ	6	Volunteer labor	☐ Yes%	☐ Yes%	☐ Yes %	
	7	Direct expense summary. Ad	d lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summary	-			
a b	Er Is If	nter the state(s) in which the or the organization licensed to co	ganization conducts ga onduct gaming activitie	ming activities: s in each of these state	s?	🗌 Yes 🗌 No
b		"Yes," explain:				
BA	A	· · · · · · · · · · · · · · · · · · ·		REV 11/13/17 PRO	Schedul	e G (Form 990 or 990-EZ) 201

Schedu	ule G (Form 990 or 990-EZ) 2017 Page 3
11 12	Does the organization conduct gaming activities with nonmembers?
13	Indicate the percentage of gaming activity conducted in:
8	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
	records:
	Name 🕨
	Address ►
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the
	amount of gaming revenue retained by the third party > \$
C	If "Yes," enter name and address of the third party:
	Name ►
	Address >
16	Gaming manager information:
	Name ►
	Gaming manager compensation \$
	Description of services provided
	Director/officer
17	Mandatory distributions:
а	is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

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BAA	REV 11/13/17 PRO Schedule G (Form 990 or 990-EZ) 2017

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Department. 30-023.46.499 On on Grants and Assistance. 30-023.46.499 On on Grants and Assistance. 30-023.46.499 On on Grants and Assistance. 30-023.46.499 On on avaid the grants or assistance. 30-023.46.499 Assistance for Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on File Assistance is Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on File Assistance is Domestic Organizations [6] Annoni of non- [6] Method if the organization arswered "Yes" on File In applicatiol [6] Annoni of non- [6] Method if the organization are existance. [9] Propose of organization arswered "Yes" on File In application [9] Application [9] Annoni of non- [6] Method if the organization are existance. [9] Propose of organization are existance. In a statiance [10] Annoni of non- [10] Method if the organization are existance. [9] Propose of organization are existance. In a statiance [10] Annoni of non- [10] Method if the organization are existance. [9] Propose of organization are existance. In a statia	Department. 30-0246499 Tail or on Grantis and Assistance Sestance Tail or on Grantis or monitoring the use of grant functs in the Unried States. 30-0246499 Assistance to Domestic Organizations and Domestic Corpanization and National Information (Information States) Sestance of Domestic Organizations and Domestic Organizations (Information States) for any recipient that recordend for the grants of administration (Information States) Information (Information States) Information (Information States) for any recipient that recordend for the grant cash Information (Information States) Information (Information States) Information (Information States) for any recipient that recordend for the grant states Information (Information States) Information (Information States) Information (Information States) for any recipient of a cash (Information States) Information (Information States) Information (Information States) Information (Information States) for any recipient that recordend States Information (Information States) Information (Information States) Information (Information States)	Image: second			► Go to	www.irs.gov/Forms	o Form 990. 990 for the latest in	formation.		Open to Public Inspection
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and in records to substantiate the amount of the grants or assistance, the grantees 'eligibility for the grants or assistance, and a ward the grants for an estimation's procedures for monitoring the use of grant truths. Complete if the organization answered "Ves" on Fr. for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. The received more than \$5,000. Part II can be duplicated if additional space is needed. The received more than \$5,000. Part II can be duplicated if additional space is needed. The received more than \$5,000. Part II can be duplicated if additional space is needed. The received more than \$5,000. Part II can be duplicated if additional space is needed. The received more than \$5,000. Part II can be duplicated if additional space is needed. The received more than \$5,000. Part II can be duplicated if additional space is needed. The received more than \$5,000. Part II can be duplicated if additional space is needed. The received more than \$5,000. Part II can be duplicated if additional space is needed. The received more than \$5,000. Part II can be duplicated if additional space is needed. The received more than \$5,000. Part II can be duplicated if additional space is needed. The received more than astistance is needed. The received more than \$5,000. Part II can be duplicated if additional space is needed. The received more than \$5,000. Part II can be duplicated if additional part of the received more than \$5,000.	train records to substantiate the amount of the grants or assistance, the grants or assistance, and correction to assistance and correction and the grants or assistance and correction assistance is browned or grant funds in the United States. Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on File organization and the provide the provide the organization answered "Yes" on File organization and the provide the provide the organization and the provide the provide the provide the organization and the provide	The array of the grants or assistance, the grantees' eligibility for the grants or assistance, in the United States.	5	on Grants and	Assistance					C + 0 + 7 3
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		M3 PR0 M3 PR0		(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of noncash assistance	(h) Purpose of grant or assistance
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	J90 (2017)		r	Page 5
Par				
-	Check if Schedule O contains a response or note to any line in this Part V			
1a	Enter the number reported in Box 3 of Form 1006. Fator, 0. Key have the	-	Yes	No
b	Enter the number of Forms W 20 included in line 1 - 5 in a the applicable	נ		1
С	Did the organization comply with backup withholding rules for reportable payments to usual	2		
	repertuele garning (garnbing) withings to prize winners?		in the second	1
2a	Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax 1	10	-	-
	Statements, filed for the calendar year ending with or within the year covered by this return the			2
b	If at least one is reported on line 2a, did the organization file all required faderal amployment tax matures	2b	Consultant of	the state
3a	Note, if the suff of lines 1a and 2a is greater than 250, you may be required to e-file (son instructions)			1-1
b	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
4a	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O. At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3b		
	ever, a mancial account in a loreign country (such as a bank account, securities account, or other financial		201	
	accounty to the test of te			
b	If "Yes," enter the name of the foreign country:	4 a		×
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	1		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			- 1
b	Did any taxable party noting the organization that it was or is a party to a prohibited tax abeliar transportions	5a	-	×
c	in res to the 54 or 50, did the ordanization file Form 8886-T?	5b 5c	-	×
<u>6a</u>	bees the organization have annual gross receipts that are normally greater than \$100,000, and did the	00	-	-
b	organization solicit any contributions that were not tax deductible as chadtable contributioned	6a		×
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7	gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	6b		_
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for any la			
	and connects provided to the payor		-	2 -4
b	If "Yes," did the organization notify the donor of the value of the poods or somilate provide do	7a 7b	-+	×
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		-	-
d	If "Yes" indicate the number of Forme 2020 filed study of	7c	-	×
е	Did the organization receive any funds, directly or indirectly, to nay premiums on a personal baraft ecotion to	-		
f	bid the organization, during the year, pay premiums, directly or indirectly on a personal bonofit contract?	7e 7f	-+	×
g	in the organization received a contribution of qualified intellectual property did the organization file Form 2000 as required of	7g	+	~
h 8	in the organization received a contribution of cars, boats, aimlanes, or other vehicles, did the organization file a Form toop, on	7h	-	
0	opensoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
9	sponsoring organization have excess business holdings at any time during the year?	8		
а	Did the sponsoring organization make any taxable distributions under section 4966?			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b	-	-
10	Section 501(c)(7) organizations. Enter:	30	-	-
a b	Initiation fees and capital contributions included on Part VIII, line 12			
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b Section 501(c)(12) organizations. Enter:		1	
а	Gross income from members of characteristic		1	100
b	Gross income from other sources (Do not net amounts due or paid to other sources		- 1	1
	against amounts due or received from them.)		-	1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 900 in linu of Form 10/112	12a	- 15	
b	in res, enter the amount of tax-exempt interest received or accrued during the year	140		1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note. See the Instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			1
	the organization is licensed to issue qualified health plans		-	
	Enter the amount of reserves on hand			-
14a	Did the organization receive any payments for indoor tanning services during the tay year?	14a	- 10-	×
b	If "Yes" has it filed a Form 720 to report these means of 17 this in the	14a	-	-

|--|

Schedule I (F	Schedule I (Form 990) (2017)					Page 2
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	nestic Individua space is needed	als. Complete if the I.	organization answ	ared "Yes" on Form 990,	
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
-						
2						
സ						
4						
ស						
9					-	
7						
Part IV	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	he information re	quired in Part I, line	e 2; Part III, column	(b); and any other addition	onal information.
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BAA		REV 11/13/17 PRO				Schedule I (Form 990) (2017)

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Part	MI Governance Management and Disclosure For each W/rd with a fit of the			Page				
	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule 0.5	and	for a	"No				
	Check if Schedule O contains a response or note to any line in this Part VI	see in	Struci	tions.				
Sect	ion A. Governing Body and Management	• •	•	<u>. X</u>				
		0	Yes	No				
1a				-				
	If there are material differences in voting rights among members of the governing body, or			1				
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1.0		1				
b			-	F				
2	Enter the number of voting members included in line 1a, above, who are independent . 1b 123	4 3	ł	-				
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		1	1				
3	Did the organization delegate control over management duties customarily performed by or under the direct	2	-	×				
	supervision of officers, directors, or trustees, or key employees to a management company or other person?							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3	-	××				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?							
6	Did the organization have members or stockholders?							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	6		×				
	one or more members of the governing body?	7a		x				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders or persons other than the reversion bed.			-				
8	stockholders, or persons other than the governing body?	7b		×				
-	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		-	-				
а	The governing body?	in t	1					
ь	Each committee with authority to act on behalf of the governing body?	8a	×	-				
9	Is there any officer, director, trustee, or key employee listed in Part VII. Section A who cannot be reached at	8b	X	-				
	ure organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		×				
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	-				
			Yes	No				
10a b	Did the organization have local chapters, branches, or affiliates?	10a		×				
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,							
11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	-					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	×	-				
12a								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X					
C	Did the organization regularly and consistently monitor and enforce compliance with the policy of the second secon	12b	×	_				
	describe in Schedule O now this was done .	12c	x					
13	Did the organization have a written whistleblower policy?	13	x	-				
14 15	Did the organization have a written document retention and destruction policy?	14	x	-				
15	Did the process for determining compensation of the following persons include a review and approval by		1000					
а	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	and a	1					
b	The organization's CEO, Executive Director, or top management official	15a		×				
_	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b	-	×				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement							
	Will a laxable entry during the year?	16a						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate ite	108		×				
	participation in joint venture arrangements under applicable federal tax law, and take stops to polegy and the	1		34				
De att	organization's exempt status with respect to such arrangements?	16b						
<u>Secti</u> 17	Dh C. Disclosure	-						
17	List the states with which a copy of this Form 990 is required to be filed ► Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section							
	available for public inspection. Indicate how you made these available. Check all that apply.	501(a	c)(3)s	only)				
	y a mart and a mart and a mart apply.							

Own website Another's website Upon request Other (explain in Schedule O)

19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and
	financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records: > 20 Cynthia Woolley, 6110 State Highway 304, Rosanky, TN 78953 (512)925-0763

•	SCHEDULE O (Form 990 or 990-EZ)	CHEDULE 0 Supplemental Information to Form 990 or 990-EZ Form 990 or 990-EZ Complete to provide information for responses to specific questions on						
υ.	,	ns on	2017					
ų.	Department of the Treasury Internal Revenue Service	Open to Public Inspection						
	Name of the organization		Employer identific					
	Delhi Volunteer	Fire Department	30-0246499					
	See Statement		*****					
		****		***************************************				
	********			*********				
	*****		*************					

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	*****	***************************************		***************************************				

		Pgy.						
	******			······································				
	****	***************************************						

	******		****					

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Part VII Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII . .

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

· List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

 List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, offici or direct	unle: er an	Pos heck ss pe id a c	ersor direc	e than is boti tor/trus	h an tee)	(D) Reportable compensation	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated
			8			ated				<u> </u>
(1)Danney Rodgers Fire Chief	10.00			×				0.		
(2) Deborah Kortan Asst. Fire Chief	3.00			×				0.	0.	0.
(3) Dee Rodgers Secretary	10.00			×					0.	0.
(4) Cynthia Woolley Treasurer	10.00			×				0.	0.	0.
(5)								0.	0.	0.
(6)					_		_			
(7)			_							
(8)										
(9)										
(10)			_							
(11)				_			_			
(12)							_			
(13)										
(14)										
							_			

-_ _ -

Pa	rt VII Section A. Officers, Directors, Trus	tees, Key E	mplo	Vee	s. a	nd I		st C	Ompensated F				Page
					(C)	ngine			mployees (cont	nued)		_
(A) Name and title		(B) Position (do not check mathematic hours per officer and a dire week (list any				mon rson	e than is bot or/trus	h an tee)	(D) Reportable compensation from	(E) Reportable compensation from			
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	o a	other mpensai from the ganization ganization	n DN Hol
(15)							<u> </u>						
(16)													
(17)													
(18)					-								
(19)													
(20)				-				-				<u> </u>	
(21)				+	_			-					
(22)				+	-	\neg		-					
(23)			-		-	┥	_	-					
(24)					+	+		-				<u></u>	
(25)			\rightarrow	+	+	+							
1b c	Sub-total			<u> </u>			. 1		0.	0.			0.
d	Total from continuation sheets to Part V Total (add lines 1b and 1c)			• •	•	٠							
2	Total number of individuals (including but reportable compensation from the organize	not limited t	to tho	se l	: iste	d al	Dove)	wh	0.0 o received mor	0.) of	_	0.
3	Did the organization list any former offic employee on line 1a? If "Yes," complete Se	cer, directo chedule J fo	or, or	tru:	stee	e, ki	ey er	nplo	oyee, or highe	st compensated		Yes	No
4	For any individual listed on line 1a, is the sorganization and related organizations gindividual	sum of reor	setabl				- 47	and " C	d other competent of the second se	nsation from the	3		×
5	Did any person listed on line 1a receive or for services rendered to the organization?	accrue con	 Ipens molet	atio	In fr	• om	any i	Julie			4		×
Sectio	on B. Independent Contractors		-	-			_	-			5		×
1	Complete this table for your five highest co compensation from the organization. Repo year.	mpensated rt compens	l inde ation	pen for	der the	t co cal	ontrac endai	tor: yea	s that received ar ending with	more than \$100 or within the org),000 o anizati	f on's ta	x
	(A) Name and business addres	55							(B) Description of serv	ices	(C) Compens		
					_	_							
								_					
2	Total number of independent contractors received more than \$100,000 of compensati	(including	but orga	not niza	lim	ited	to 1	thos	e listed above	e) who			

Delhi Volunteer Fire Department

Schedule O

Supplemental Information

Continuation	Statement

300246499

Pt VI, Line 11b	990 is presented at Board Meeting an Approved	
Pt VI, Line 12c	Conflict of Inerest Policy is Monitored annually	
Pt VI, Line 15a	All volunteer. There is no compensation	

Form	8879-E0
------	---------

Department of the Treasury

Internal Revenue Service Name of exempt organization

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

				~	
For calendar y	ear 2017, o	r fiscal year beginn	ing	, 201	7, and ending

Do not send to the IRS. Keep for your records.
 Go to www.irs.gov/Form8879EO for the latest information.

201

Delhi Volunteer Fire Department

Employer Identification number 30-0246499

Name and title of officer

Cynthia Woolley, Treasurer

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

18	Form 990 check here b Total revenue , if any (Form 990, Part VIII, column (A), line 12)			46	100 104
2a	Form 990-EZ check here b b Total revenue if any (Form 000 EZ line a)	• •	•	10	130,134.
2-	Form 990-EZ check here ► □ b Total revenue, if any (Form 990-EZ, line 9).	• •		2b	
				-	
4a	Form 990-PF check here b b Tax based on investment income (Form 990-PF, Part VI, line 5)	• •	•		
50	Form 9969 shock born by C by Balance of intersection income (Form 990-PF, Part VI, line 5)		+	4b	
Ja	Form 8868 check here b Balance Due (Form 8868, line 3c)			5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize	ERO firm name to enter my Pl			as my signature
			umbe r all z	

on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

	Date > 03/30/2018
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.	7 4 8 5 1 5 3 0 0 3 1 Do not enter all zeros
I certify that the above numeric entry is my PIN, which is my signature of indicated above. I confirm that I am submitting this return in accordance Information for Authorized IRS <i>e-file</i> Providers for Business Returns.	n the 2017 electronically filed return for the organization with the requirements of Pub. 4163, Modernized e-File (MeF)
ERO's signature	Date► 03/30/2018
EDO Must Details This France	

ERO Must Retain This Form — See Instructions
 Do Not Submit This Form to the IRS Unless Requested To Do So

6. Accept ESD financial reporting from Emergency Services District No. 3 (ESD #3) for Fiscal Year Ending September 30, 2017.

AFFADAVIT

THE STATE OF TEXAS	§
	§
COUNTY OF CALDWELL	§

I hereby confirm that I, Bill Hamilton, am Secretary of the Emergency Services District #3, authorized by the Commissioners Court of Caldwell County, Texas. Attached is a Compiled Financial Statement pursuant to the requirements of the Health and Safety Code, Chapter 775, Section 775.0821.

I attest to the accuracy of the attached document and all the information contained herein.

SUBSCRIBED AND SWORN TO BEFORE ME, ON THE DAY OF June 2018.

NOTARY PUBLIC

Bill Hamilton, Secretary ESD #3

My Commission Expires: 12-16-2019



Caldwell County Emergency Services District #3 Profit & Loss

October 2016 through September 2017

	Oct '16 - Sep 17
Ordinary Income/Expense Income	
Property Tax	100,861.15
Grant Funds	12,000.00
Total Income	112,861.15
Expense	
LCRA Grant Expenses	11,022.94
Martindale Volunteer Fire Dept	35,016.69
CCAD Tax Collection Fee	2,878.60
Accounting / Audit	925.00
Post Office Box	48.00
Miscellaneous	33.48
Total Expense	49,924.71
Net Ordinary Income	62,936.44
Net Income	62,936.44

Caldwell County ESD #3

Balance Sheet

Date: 9/30/2017

Assets			ć	2016-17	
Current Assets					
	Cash Accounts receivable (Reim MVFD for unused fun Prepaid expenses Short-term investments		\$	126,546.35	
Fixed (Long-Term) Assets	10101		Ļ	120,540.55	
	Long-term investments Property, plant, and equip Intangible assets Tota	ment al fixed assets	_	-	
Other Assets		,			
	Other <i>Tota</i>	l Other Assets		-	-
Total Assets			\$	126,546.35	-
Liabilities and Equit	Υ				
Current Liabilities					
	Accounts payable (MVFD Service Agreeme Short-term loans Accrued salaries and wage Unearned revenue		\$	- 52,000.00	
	Current portion of long-ter				
	Total cur	rent liabilities	\$	52,000.00	-
Long-Term Liabilities	Long-term debt Other	1. 1. 11.		-	
Fauity	i otai iong-t	erm liabilities		-	-
Equity	Opening Balance Equity Unrestricted Net Assets Net Income	Total equity	\$ \$ \$ \$	- 11,609.91 62,936.44 74,546.35	-
Total Linkilition and To			ć		
Total Liabilities and Eq	uity		\$	126,546.35	-

5:08 PM

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05/08/18
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Туре	Date	Num	Name	Memo	Cir	Split	Original Amount	Paid Amount	Balance
Frost Bank Che	ecking Funds - LCRA Gi	ant							
Deposit	12/16/2016	unt		Deposit	х	Grant Funds	12,000.00	12.000.00	12.000.00
Check	02/13/2017	129	SETON	Medical Bags	x	LCRA Grant Expenses	-1,476.93	-1,476.93	10.523.07
Check	05/08/2017	133	RESCUE RESPONSE GE	3 THROW BAGS	x	LCRA Grant Expenses	-1,839.71	-1,839.71	8,683.36
Check	09/20/2017	140	CASCO INDUSTRIES, INC	THERMAL IMAGING CAMERA	x	LCRA Grant Expenses	-7,706.30	-7,706.30	977.06
	cted Funds - LCR	A Grant	, -				,	977.06	977.06
Frost Bank	Checking - Othe	r							
Deposit	10/03/2016	•		Deposit	х	Property Tax	9.44	9.44	9.44
Deposit	10/06/2016			Deposit	Х	Property Tax	16.79	16.79	26.23
Deposit	10/14/2016			Deposit	X	Property Tax	184.58	184.58	210.81
Check	10/18/2016	121	MARTINDALE VOLUNTEE	Service Agreement	X	Martindale Volunteer Fir	-10,532.50	-10,532.50	-10,321.69
Check	10/19/2016	122	LOCHART POST REGIST	2016 - 2017 TAX RATE NOTICE	X	Miscellaneous	-16.20	-16.20	-10,337.89
Deposit	10/21/2016			Deposit	X	Property Tax	94.35	94.35	-10,243.54
Deposit	10/21/2016			Deposit	x	Property Tax	188.68	188.68	-10.054.86
Deposit	10/27/2016			Deposit	x	Property Tax	978.52	978.52	-9.076.34
Deposit	10/28/2016			Deposit	x	Property Tax	260.22	260.22	-8,816.12
Deposit	11/04/2016			Deposit	x	Property Tax	1,755.60	1.755.60	-7.060.52
Deposit	11/08/2016			Deposit	x	Property Tax	749.91	749.91	-6.310.61
Check	11/09/2016	123	LAUREL SCHUELKE	BOOKKEEPING - OCT	x	Accounting / Audit	-100.00	-100.00	-6.410.61
Deposit	11/10/2016	120	EXONEE CONDEENE	Deposit	x	Property Tax	1,336.97	1,336.97	-5.073.64
Deposit	11/15/2016			Deposit	x	Property Tax	124.12	124.12	-4,949.52
Deposit	11/18/2016			Deposit	x	Property Tax	1,187.57	1,187.57	-3.761.95
Deposit	11/23/2016			Deposit	x	Property Tax Property Tax	1,840.48	1,840.48	-1,921.47
Deposit	11/25/2016			Deposit	x	Property Tax Property Tax	2,241.13	2.241.13	319.66
	11/30/2016				x		2,241.13	2,241.13	567.07
Deposit				Deposit	x	Property Tax	941.34	941.34	
Deposit	12/05/2016			Deposit		Property Tax			1,508.41
Deposit	12/07/2016			Deposit	Х	Property Tax	537.26	537.26	2,045.67
Deposit	12/12/2016			Deposit	Х	Property Tax	1,663.45	1,663.45	3,709.12
Deposit	12/13/2016			Deposit	Х	Property Tax	7,575.02	7,575.02	11,284.14
Deposit	12/14/2016			Deposit	Х	Property Tax	360.87	360.87	11,645.01
Deposit	12/16/2016			Deposit	Х	Property Tax	571.08	571.08	12,216.09
Deposit	12/20/2016			Deposit	Х	Property Tax	2,216.76	2,216.76	14,432.85
Deposit	12/21/2016			Deposit	Х	Property Tax	1,436.89	1,436.89	15,869.74
Deposit	12/22/2016			Deposit	Х	Property Tax	686.72	686.72	16,556.46
Deposit	12/23/2016			Deposit	Х	Property Tax	356.34	356.34	16,912.80
Deposit	12/28/2016			Deposit	Х	Property Tax	536.65	536.65	17,449.45
Check	12/28/2016	124	CALDWELL CAD	fee for collecting property taxes	Х	CCAD Tax Collection Fee	-772.58	-772.58	16,676.87
Deposit	12/29/2016			Deposit	Х	Property Tax	11,569.17	11,569.17	28,246.04
Deposit	12/30/2016			Deposit	Х	Property Tax	9,987.46	9,987.46	38,233.50
Deposit	01/03/2017			Deposit	Х	Property Tax	1,232.88	1,232.88	39,466.38
Deposit	01/04/2017			Deposit	Х	Property Tax	1,889.52	1,889.52	41,355.90
Deposit	01/06/2017			Deposit	Х	Property Tax	5,069.81	5,069.81	46,425.71
Deposit	01/10/2017			Deposit	Х	Property Tax	1,360.44	1,360.44	47,786.15
Deposit	01/13/2017			Deposit	Х	Property Tax	4,236.79	4,236.79	52,022.94
Check	01/17/2017	125	USPS		Х	Post Office Box	-48.00	-48.00	51,974.94
Check	01/17/2017	126	MARTINDALE VOLUNTEE	Service Agreement	Х	Martindale Volunteer Fir	-10,532.50	-10,532.50	41,442.44
Deposit	01/19/2017			Deposit	Х	Property Tax	2,469.00	2,469.00	43,911.44
Deposit	01/20/2017			Deposit	Х	Property Tax	442.41	442.41	44,353.85
Deposit	01/24/2017			Deposit	Х	Property Tax	1,455.40	1,455.40	45,809.25
Deposit	01/25/2017			Deposit	Х	Property Tax	2,532.78	2,532.78	48,342.03
Deposit	01/26/2017			Deposit	Х	Property Tax	1,802.43	1,802.43	50,144.46
Deposit	01/27/2017			Deposit	Х	Property Tax	1,600.80	1,600.80	51,745.26
Check	01/28/2017	127	LAUREL SCHUELKE	BOOKKEEPING	Х	Accounting / Audit	-150.00	-150.00	51,595.26
Deposit	01/30/2017			Deposit	Х	Property Tax	2,040.33	2,040.33	53,635.59

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Туре	Date	Num	Name	Мето	Clr	Split	Original Amount	Paid Amount	Balance
Deposit	01/31/2017			Deposit	х	Property Tax	2,460.41	2,460.41	56.096.00
Deposit	02/01/2017			Deposit	Х	Property Tax	2,360.19	2,360.19	58,456.19
Deposit	02/02/2017			Deposit	Х	Property Tax	4,545.49	4,545.49	63,001.68
Deposit	02/08/2017			Deposit	Х	Property Tax	4,727.68	4,727.68	67,729.36
Deposit	02/09/2017			Deposit	Х	Property Tax	528.89	528.89	68,258.25
Deposit	02/13/2017			Deposit	Х	Property Tax	23.64	23.64	68,281.89
Check	02/13/2017	128	LAUREL SCHUELKE	BOOKKEEPING	Х	Accounting / Audit	-75.00	-75.00	68,206.89
Deposit	02/17/2017			Deposit	Х	Property Tax	306.30	306.30	68,513.19
Deposit	02/24/2017			Deposit	Х	Property Tax	746.87	746.87	69,260.06
Deposit	03/01/2017			Deposit	Х	Property Tax	417.92	417.92	69,677.98
Deposit	03/06/2017			Deposit	Х	Property Tax	255.37	255.37	69,933.35
Deposit	03/08/2017			Deposit	Х	Property Tax	891.41	891.41	70,824.76
Deposit	03/15/2017			Deposit	Х	Property Tax	666.46	666.46	71,491.22
Deposit	03/22/2017			Deposit	Х	Property Tax	624.74	624.74	72,115.96
Check	03/22/2017	149	CALDWELL CAD	fee for collecting property taxes	Х	CCAD Tax Collection Fee	-772.58	-772.58	71,343.38
Check	03/22/2017	150	LAUREL SCHUELKE	BOOKKEEPING	Х	Accounting / Audit	-75.00	-75.00	71,268.38
Deposit	03/29/2017			Deposit	Х	Property Tax	977.33	977.33	72,245.71
Deposit	04/05/2017			Deposit	Х	Property Tax	211.99	211.99	72,457.70
Check	04/11/2017	130	LAUREL SCHUELKE	BOOKKEEPING	Х	Accounting / Audit	-75.00	-75.00	72,382.70
Deposit	04/11/2017			Deposit	Х	Property Tax	192.24	192.24	72,574.94
Check	04/12/2017	131	MARTINDALE VOLUNTEE	Service Agreement	Х	Martindale Volunteer Fir	-10,532.50	-10,532.50	62,042.44
Deposit	04/19/2017			Deposit	Х	Property Tax	286.43	286.43	62,328.87
Deposit	04/25/2017			Deposit	Х	Property Tax	52.48	52.48	62,381.35
Deposit	05/03/2017			Deposit	Х	Property Tax	601.83	601.83	62,983.18
Check	05/08/2017	132	LAUREL SCHUELKE	BOOKKEEPING	Х	Accounting / Audit	-75.00	-75.00	62,908.18
Deposit	05/10/2017			Deposit	Х	Property Tax	4.28	4.28	62,912.46
Deposit	05/16/2017			Deposit	Х	Property Tax	305.96	305.96	63,218.42
Deposit	05/23/2017			Deposit	Х	CCAD Tax Collection Fee	211.72	211.72	63,430.14
Deposit	05/24/2017			Deposit	Х	Property Tax	132.18	132.18	63,562.32
Deposit	06/02/2017			Deposit	Х	Property Tax	1,648.47	1,648.47	65,210.79
Deposit	06/08/2017			Deposit	Х	Property Tax	182.04	182.04	65,392.83
Check	06/14/2017	134	CALDWELL CAD	fee for collecting property taxes	Х	CCAD Tax Collection Fee	-772.58	-772.58	64,620.25
Check	06/14/2017	135	LAUREL SCHUELKE	BOOKKEEPING	Х	Accounting / Audit	-75.00	-75.00	64,545.25
Deposit	06/16/2017			Deposit	Х	Property Tax	239.31	239.31	64,784.56
Deposit	06/23/2017			Deposit	Х	Property Tax	96.08	96.08	64,880.64
Deposit	06/30/2017			Deposit	Х	Property Tax	0.99	0.99	64,881.63
Deposit	07/06/2017			Deposit	Х	Property Tax	6.94	6.94	64,888.57
Deposit	07/11/2017			Deposit	Х	Property Tax	86.73	86.73	64,975.30
Check	07/12/2017	137	MARTINDALE VOLUNTEE	Service Agreement	Х	Martindale Volunteer Fir	-10,532.50	-10,532.50	54,442.80
Check	07/12/2017	136	LAUREL SCHUELKE	BOOKKEEPING	Х	Accounting / Audit	-75.00	-75.00	54,367.80
Deposit	07/17/2017			Deposit	Х	Property Tax	82.25	82.25	54,450.05
Deposit	07/20/2017			Deposit	Х	Property Tax	76.51	76.51	54,526.56
Deposit	07/26/2017			Deposit	Х	Property Tax	152.89	152.89	54,679.45
Deposit	08/03/2017			Deposit	Х	Property Tax	723.56	723.56	55,403.01
Check	08/09/2017	138	LAUREL SCHUELKE	BOOKKEEPING	Х	Accounting / Audit	-75.00	-75.00	55,328.01
Deposit	08/10/2017			Deposit	Х	Property Tax	34.36	34.36	55,362.37
Deposit	08/17/2017			Deposit	Х	Property Tax	28.82	28.82	55,391.19
Deposit	08/25/2017			Deposit	Х	Property Tax	25.01	25.01	55,416.20
Deposit	09/01/2017			Deposit	Х	Property Tax	16.91	16.91	55,433.11
Deposit	09/07/2017			Deposit	Х	Property Tax	305.51	305.51	55,738.62
Deposit	09/13/2017			Deposit	Х	Property Tax	13.46	13.46	55,752.08
Check	09/13/2017	139	LAUREL SCHUELKE	BOOKKEEPING	Х	Accounting / Audit	-150.00	-150.00	55,602.08
Deposit	09/20/2017			Deposit	Х	Property Tax	26.74	26.74	55,628.82
Check	09/20/2017	141	LOCHART POST REGIST	2017 - 2018 TAX RATE NOTICE	Х	Miscellaneous	-17.28	-17.28	55,611.54
Check	09/20/2017	142	CALDWELL CAD	fee for collecting property taxes	Х	CCAD Tax Collection Fee	-772.58	-772.58	54,838.96
Deposit	09/29/2017			Deposit	Х	Property Tax	7.11	7.11	54,846.07
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Туре	Date	Num	Name	Memo	Cir	Split	Original Amount	Paid Amount	Balance
Deposit	09/30/2017			Deposit	X	Martindale Volunteer Fir	7,113.31	7,113.31	61,959.38
Total Frost I	Bank Checking - O	ther						61,959.38	61,959.38
Total Frost Ban	k Checking							62,936.44	62,936.44
Property Tax									
Deposit	10/03/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-9.44	-9.44	-9.44
Deposit	10/06/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-16.79	-16.79	-26.23
Deposit	10/14/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-184.58	-184.58	-210.81
Deposit	10/21/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-94.35	-94.35	-305.16
Deposit	10/21/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-188.68	-188.68	-493.84
Deposit	10/27/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-978.52	-978.52	-1,472.36
Deposit	10/28/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-260.22	-260.22	-1,732.58
Deposit	11/04/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-1,755.60	-1,755.60	-3,488.18
Deposit	11/08/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-749.91	-749.91	-4,238.09
Deposit Deposit	11/10/2016 11/15/2016		CALDWELL CO APPRAIS CALDWELL CO APPRAIS	Deposit Deposit		Frost Bank Checking Frost Bank Checking	-1,336.97 -124.12	-1,336.97 -124.12	-5,575.06 -5,699.18
Deposit	11/18/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-1,187.57	-1,187.57	-6,886.75
Deposit	11/23/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-1,840.48	-1,840.48	-8,727.23
Deposit	11/25/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-2,241.13	-2,241.13	-10,968.36
Deposit	11/30/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-247.41	-247.41	-11,215.77
Deposit	12/05/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-941.34	-941.34	-12,157.11
Deposit	12/07/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-537.26	-537.26	-12,694.37
Deposit	12/12/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-1,663.45	-1,663.45	-14,357.82
Deposit	12/13/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-7,575.02	-7,575.02	-21,932.84
Deposit	12/14/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-360.87	-360.87	-22,293.71
Deposit	12/16/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-571.08	-571.08	-22,864,79
Deposit	12/20/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-2,216.76	-2,216.76	-25,081.55
Deposit	12/21/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-1,436.89	-1,436.89	-26,518.44
Deposit	12/22/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-686.72	-686.72	-27,205.16
Deposit	12/23/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-356.34	-356.34	-27,561.50
Deposit	12/28/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-536.65	-536.65	-28,098.15
Deposit	12/29/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-11,569.17	-11,569.17	-39,667.32
Deposit	12/30/2016		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-9,987.46	-9,987.46	-49,654.78
Deposit	01/03/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-1,232.88	-1,232.88	-50,887.66
Deposit	01/04/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-1,889.52	-1,889.52	-52,777.18
Deposit	01/06/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-5,069.81	-5,069.81	-57,846.99
Deposit	01/10/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-1,360.44	-1,360.44	-59,207.43
Deposit	01/13/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-4,236.79	-4,236.79	-63,444.22
Deposit	01/19/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-2,469.00	-2,469.00	-65,913.22
Deposit	01/20/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-442.41	-442.41	-66,355.63
Deposit	01/24/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-1,455.40	-1,455.40	-67,811.03
Deposit	01/25/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-2,532.78	-2,532.78	-70,343.81
Deposit	01/26/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-1,802.43	-1,802.43	-72,146.24
Deposit	01/27/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-1,600.80	-1,600.80	-73,747.04
Deposit	01/30/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-2,040.33	-2,040.33	-75,787.37
Deposit	01/31/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-2,460.41	-2,460.41	-78,247.78
Deposit Deposit	02/01/2017 02/02/2017		CALDWELL CO APPRAIS CALDWELL CO APPRAIS	Deposit		Frost Bank Checking Frost Bank Checking	-2,360.19 -4,545.49	-2,360.19 -4,545.49	-80,607.97 -85,153.46
Deposit	02/08/2017		CALDWELL CO APPRAIS	Deposit Deposit		Frost Bank Checking	-4,545.49	-4,727.68	-89,881.14
	02/09/2017					5		-4,727.08 -528.89	-90,410.03
Deposit Deposit	02/09/2017		CALDWELL CO APPRAIS CALDWELL CO APPRAIS	Deposit Deposit		Frost Bank Checking Frost Bank Checking	-528.89 -23.64	-526.69 -23.64	-90,410.03
Deposit	02/17/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-306.30	-23.04 -306.30	-90,739.97
Deposit	02/24/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-746.87	-746.87	-91,486.84
Deposit	03/01/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-417.92	-417.92	-91,904.76
Deposit	03/06/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-255.37	-255.37	-92,160.13

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Туре	Date	Num	Name	Мето	Cir	Split	Original Amount	Paid Amount	Balance
Deposit	03/08/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-891.41	-891.41	-93,051.54
Deposit	03/15/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-666.46	-666.46	-93,718.00
Deposit	03/22/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-624.74	-624.74	-94,342.74
Deposit	03/29/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-977.33	-977.33	-95,320.07
Deposit	04/05/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-211.99	-211.99	-95,532.06
Deposit	04/11/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-192.24	-192.24	-95,724.30
Deposit	04/19/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-286.43	-286.43	-96,010.73
Deposit	04/25/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-52.48	-52.48	-96,063.21
Deposit	05/03/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-601.83	-601.83	-96,665.04
Deposit	05/10/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-4.28	-4.28	-96,669.32
Deposit	05/16/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-305.96	-305.96	-96,975.28
Deposit	05/24/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-132.18	-132.18	-97,107.46
Deposit	06/02/2017 06/08/2017		CALDWELL CO APPRAIS CALDWELL CO APPRAIS	Deposit Deposit		Frost Bank Checking	-1,648.47 -182.04	-1,648.47 -182.04	-98,755.93 -98,937.97
Deposit	06/06/2017			•		Frost Bank Checking	-182.04 -239.31	-182.04 -239.31	-99,177.28
Deposit Deposit	06/23/2017		CALDWELL CO APPRAIS CALDWELL CO APPRAIS	Deposit Deposit		Frost Bank Checking Frost Bank Checking	-239.31 -96.08	-239.31 -96.08	-99,177.20
Deposit	06/30/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-90.08 -0.99	-90.08	-99,273.30
Deposit	07/06/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-0.99 -6.94	-0.99 -6.94	-99,274.35
Deposit	07/11/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-86.73	-86.73	-99,368.02
Deposit	07/17/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-82.25	-82.25	-99,450.27
Deposit	07/20/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-76.51	-76.51	-99.526.78
Deposit	07/26/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-152.89	-152.89	-99.679.67
Deposit	08/03/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-723.56	-723.56	-100,403.23
Deposit	08/10/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-34.36	-34.36	-100,437.59
Deposit	08/17/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-28.82	-28.82	-100,466.41
Deposit	08/25/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-25.01	-25.01	-100,491.42
Deposit	09/01/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-16.91	-16.91	-100,508.33
Deposit	09/07/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-305.51	-305.51	-100,813.84
Deposit	09/13/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-13.46	-13.46	-100,827.30
Deposit	09/20/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-26.74	-26.74	-100,854.04
Deposit	09/29/2017		CALDWELL CO APPRAIS	Deposit		Frost Bank Checking	-7.11	-7.11	-100,861.15
Total Property Ta	х			•		Ŭ		-100,861.15	-100,861.15
Grant Funds									
Deposit	12/16/2016		LCRA	Deposit		Restricted Funds - LCR	-12,000.00	-12,000.00	-12,000.00
Total Grant Funds	S							-12,000.00	-12,000.00
LCRA Grant Exp	enses								
Check	02/13/2017	129	SETON	Medical Bags		Restricted Funds - LCR	1,476.93	1,476.93	1,476.93
Check	05/08/2017	133	RESCUE RESPONSE GE	3 THROW BAGS		Restricted Funds - LCR	1,839.71	1,839.71	3,316.64
Check	09/20/2017	140	CASCO INDUSTRIES, INC	THERMAL IMAGING CAMERA		Restricted Funds - LCR	7,706.30	7,706.30	11,022.94
Total LCRA Gran	t Expenses		,				,	11,022.94	11,022.94
Martindale Volu	nteer Fire Dept								
Check	10/18/2016	121	MARTINDALE VOLUNTEE	Service Agreement		Frost Bank Checking	10,532.50	10,532.50	10,532.50
Check	01/17/2017	126	MARTINDALE VOLUNTEE	Service Agreement		Frost Bank Checking	10,532.50	10,532.50	21,065.00
Check	04/12/2017	131	MARTINDALE VOLUNTEE	Service Agreement		Frost Bank Checking	10,532.50	10,532.50	31,597.50
Check	07/12/2017	137	MARTINDALE VOLUNTEE	4th Qtr Payment		Frost Bank Checking	10,532.50	10,532.50	42,130.00
Deposit	09/30/2017		MARTINDALE VOLUNTEE	Refund of unused funds		Frost Bank Checking	-7,113.31	-7,113.31	35,016.69
Total Martindale	/olunteer Fire Dep	ot						35,016.69	35,016.69
CCAD Tax Colle									
Check	12/28/2016	124	CALDWELL CAD	fee for collecting property taxes		Frost Bank Checking	772.58	772.58	772.58
Check	03/22/2017	149	CALDWELL CAD	fee for collecting property taxes		Frost Bank Checking	772.58	772.58	1,545.16
Deposit	05/23/2017		CALDWELL CAD	refund		Frost Bank Checking	-211.72	-211.72	1,333.44
Check	06/14/2017	134	CALDWELL CAD	fee for collecting property taxes		Frost Bank Checking	772.58	772.58	2,106.02

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09/20/2017 Collection Fee	142	CALDWELL CAD						
			fee for collecting property taxes		Frost Bank Checking	772.58	772.58	2,878.60
•••							2,878.60	2,878.60
dit								
11/09/2016	123	LAUREL SCHUELKE	BOOKKEEPING - OCT		Frost Bank Checking	100.00	100.00	100.00
01/28/2017	127	LAUREL SCHUELKE	BOOKKEEPING		Frost Bank Checking	150.00	150.00	250.00
02/13/2017	128	LAUREL SCHUELKE	BOOKKEEPING		Frost Bank Checking	75.00	75.00	325.00
03/22/2017	150	LAUREL SCHUELKE	BOOKKEEPING		Frost Bank Checking	75.00	75.00	400.00
04/11/2017	130	LAUREL SCHUELKE	BOOKKEEPING		Frost Bank Checking	75.00	75.00	475.00
05/08/2017	132	LAUREL SCHUELKE	BOOKKEEPING		Frost Bank Checking	75.00	75.00	550.00
06/14/2017	135	LAUREL SCHUELKE	BOOKKEEPING		Frost Bank Checking	75.00	75.00	625.00
07/12/2017	136	LAUREL SCHUELKE	BOOKKEEPING		Frost Bank Checking	75.00	75.00	700.00
08/09/2017	138	LAUREL SCHUELKE	BOOKKEEPING		Frost Bank Checking	75.00	75.00	775.00
09/13/2017	139	LAUREL SCHUELKE	BOOKKEEPING		Frost Bank Checking	150.00	150.00	925.00
/ Audit							925.00	925.00
01/17/2017	125	USPS			Frost Bank Checking	48.00	48.00	48.00
Box							48.00	48.00
10/19/2016	122	LOCHART POST REGIST	2016 - 2017 TAX RATE NOTICE		Frost Bank Checking	16.20	16.20	16.20
09/20/2017	141	LOCHART POST REGIST	2017 - 2018 TAX RATE NOTICE		Frost Bank Checking	17.28	17.28	33.48
ous							33.48	33.48
							0.00	0.00
	01/28/2017 02/13/2017 03/22/2017 04/11/2017 05/08/2017 06/14/2017 07/12/2017 08/09/2017 09/13/2017 / Audit 01/17/2017 Box 10/19/2016 09/20/2017	01/28/2017 127 02/13/2017 128 03/22/2017 150 04/11/2017 130 05/08/2017 132 06/14/2017 135 07/12/2017 136 08/09/2017 138 09/13/2017 139 / Audit 01/17/2017 125 Box 10/19/2016 122 09/20/2017 141	01/28/2017 127 LAUREL SCHUELKE 02/13/2017 128 LAUREL SCHUELKE 03/22/2017 150 LAUREL SCHUELKE 04/11/2017 130 LAUREL SCHUELKE 05/08/2017 132 LAUREL SCHUELKE 06/14/2017 135 LAUREL SCHUELKE 07/12/2017 136 LAUREL SCHUELKE 08/09/2017 138 LAUREL SCHUELKE 09/13/2017 139 LAUREL SCHUELKE 01/17/2017 125 USPS Box 10/19/2016 122 LOCHART POST REGIST	01/28/2017 127 LAUREL SCHUELKE BOOKKEEPING 02/13/2017 128 LAUREL SCHUELKE BOOKKEEPING 03/22/2017 150 LAUREL SCHUELKE BOOKKEEPING 04/11/2017 130 LAUREL SCHUELKE BOOKKEEPING 05/08/2017 132 LAUREL SCHUELKE BOOKKEEPING 06/14/2017 135 LAUREL SCHUELKE BOOKKEEPING 06/14/2017 135 LAUREL SCHUELKE BOOKKEEPING 06/14/2017 136 LAUREL SCHUELKE BOOKKEEPING 07/12/2017 138 LAUREL SCHUELKE BOOKKEEPING 08/09/2017 138 LAUREL SCHUELKE BOOKKEEPING 09/13/2017 139 LAUREL SCHUELKE BOOKKEEPING / Audit 01/17/2017 125 USPS Box 10/19/2016 122 LOCHART POST REGIST 2016 - 2017 TAX RATE NOTICE 09/20/2017 141 LOCHART POST REGIST 2016 - 2017 TAX RATE NOTICE	01/28/2017 127 LAUREL SCHUELKE BOOKKEEPING 02/13/2017 128 LAUREL SCHUELKE BOOKKEEPING 03/22/2017 150 LAUREL SCHUELKE BOOKKEEPING 04/11/2017 130 LAUREL SCHUELKE BOOKKEEPING 05/08/2017 132 LAUREL SCHUELKE BOOKKEEPING 06/14/2017 135 LAUREL SCHUELKE BOOKKEEPING 06/14/2017 136 LAUREL SCHUELKE BOOKKEEPING 07/12/2017 136 LAUREL SCHUELKE BOOKKEEPING 08/09/2017 138 LAUREL SCHUELKE BOOKKEEPING 09/13/2017 139 LAUREL SCHUELKE BOOKKEEPING 01/17/2017 125 USPS Book box - - 2016 - 2017 TAX RATE NOTICE 09/20/2017 141 LOCHART POST REGIST 2016 - 2017 TAX RATE NOTICE	01/28/2017127LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking02/13/2017128LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking03/22/2017150LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking04/11/2017130LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking05/08/2017132LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking06/14/2017135LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking06/14/2017136LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking07/12/2017136LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking08/09/2017138LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking09/13/2017139LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking01/17/2017125USPSFrost Bank CheckingBox10/19/2016122LOCHART POST REGIST2016 - 2017 TAX RATE NOTICEFrost Bank Checking09/20/2017141LOCHART POST REGIST2017 - 2018 TAX RATE NOTICEFrost Bank Checking	01/28/2017127LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking150.0002/13/2017128LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking75.0003/22/2017150LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking75.0004/11/2017130LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking75.0005/08/2017132LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking75.0006/14/2017135LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking75.0006/14/2017136LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking75.0007/12/2017136LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking75.0008/09/2017138LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking75.0009/13/2017139LAUREL SCHUELKEBOOKKEEPINGFrost Bank Checking75.0001/17/2017125USPSFrost Bank Checking150.008ox10/19/2016122LOCHART POST REGIST2016 - 2017 TAX RATE NOTICEFrost Bank Checking16.2009/20/2017141LOCHART POST REGIST2016 - 2017 TAX RATE NOTICEFrost Bank Checking17.28	01/28/2017 127 LAUREL SCHUELKE BOOKKEEPING Frost Bank Checking 150.00 150.00 02/13/2017 128 LAUREL SCHUELKE BOOKKEEPING Frost Bank Checking 75.00 75.00 03/22/2017 150 LAUREL SCHUELKE BOOKKEEPING Frost Bank Checking 75.00 75.00 03/22/2017 150 LAUREL SCHUELKE BOOKKEEPING Frost Bank Checking 75.00 75.00 04/11/2017 130 LAUREL SCHUELKE BOOKKEEPING Frost Bank Checking 75.00 75.00 05/08/2017 132 LAUREL SCHUELKE BOOKKEEPING Frost Bank Checking 75.00 75.00 06/14/2017 135 LAUREL SCHUELKE BOOKKEEPING Frost Bank Checking 75.00 75.00 07/12/2017 136 LAUREL SCHUELKE BOOKKEEPING Frost Bank Checking 75.00 75.00 08/09/2017 138 LAUREL SCHUELKE BOOKKEEPING Frost Bank Checking 75.00 75.00 01/17/2017 125 USPS Frost Bank Checking

ACTION AGENDA ITEMS

7. Discussion/Action regarding the burn ban. Cost: None; Speaker: Judge Schawe/Martin/Ritchey; Backup: None. 8. Discussion/Action to consider adopting an order to regulate certain fireworks in the unincorporated areas of the county during the Fourth of July Fireworks period. Cost: None; Speaker: Judge Schawe/ Martin Ritchey; Backup: 2.



FOURTH OF JULY FIREWORKS PERIOD (JUNE 24-MIDNIGHT, JULY 4) DEADLINE TO ADOPT ORDER: JUNE 14, 2018

Local Government Code, §352.051 authorizes the commissioners court to adopt an order regulating certain fireworks in the unincorporated areas of the county under drought conditions. The statute provides that the order must be adopted <u>before</u> June 15 of each year for the Fourth of July period.

If your county is designated a drought area, and your court wishes to adopt such an order, action must be taken before the deadline. To determine whether your county is designated a drought area, please visit the Texas Interagency Coordination Center website at tamu.edu/ticc/ or call the Texas Forest Service at (979) 458-7331. The Texas Forest Service has developed drought weblinks to assist your county in monitoring drought conditions more closely.

If the court decides to adopt an order, the order may prohibit or restrict the sale or use of "restricted fireworks", which are defined as "skyrockets with sticks" as classified in 49 Code of Federal Regulations, §173.100(r)(2) in effect on October 1, 1986 and as missiles with fins. A violation of the order is a Class C misdemeanor. Also, a citizen can file suit for an injunction to prevent a violation or threatened violation of the order. An order issued by your court based on a Texas Forest Service determination will expire when the Texas Forest Service finds that your county is no longer in a drought condition.

Under Local Government Code § 352.051(f), the county may also designate one or more "safe" areas where the use of restricted fireworks is not prohibited. In determining if an area may be considered "safe" the court should take into account whether adequate public safety and fire protection services are provided to the area.

A sample order is provided on the following page. If your court decides to designate "safe" areas, the order will need to be modified to include appropriate language. A copy of Local Government Code §352.051, the portions of the Occupation Code that define and explain permitted and prohibited fireworks, and copies of the Federal regulations referenced in the state law are available online at <u>county.org/fireworks</u>. If you have any questions, please contact the Legal Department toll-free at (888) 275-8224.

STATE OF TEXAS COUNTY OF

ORDER [PROHIBITING OR RESTRICTING] CERTAIN FIREWORKS IN UNINCORPORATED AREAS OF _____ COUNTY, TEXAS

WHEREAS, the Texas Forest Service has determined that drought conditions exist in _____ County; and

WHEREAS, on the _____ of _____, 2018, the Commissioners Court of _____ County has determined that the normal danger of fire in the unincorporated areas of ______ County is greatly enhanced by the extremely dry conditions now existing;

NOW, THEREFORE, the Commissioners Court of _____ County adopts this Order [prohibiting **OR** restricting] the sale or use of restricted fireworks in the unincorporated areas of _____ County.

- A. A person may not sell, detonate, ignite, or in any way use fireworks classified as "skyrockets with sticks" under 49 C.F.R. part. 173.100(r)(2) (10-01-86 edition) or missiles with fins in any portion of the unincorporated areas of ______ County.
- B. [Describe specific restrictions, if applicable.]
- C. This Order does not prohibit "permissible fireworks" as authorized in Occupations Code Section 2154.003(a).
- D. A person commits an offense if the person knowingly or intentionally violates a prohibition established by this Order. An offense under this order is a Class C. Misdemeanor.
- E. This order expires on the date the Texas Forest Service determines drought conditions no longer exist in the county or _____ [Insert date on or after July 4], whichever is earlier.

APPROVED this the _____ day of _____, 2018, by the _____ County Commissioners Court.

COUNTY JUDGE

Attest:

CLERK

9. Discussion/Action to consider renewing a license agreement with Camp Gladiator for use of the Caldwell County Justice Center parking lot. Cost: None; Speaker: Commissioner Wright; Backup: 4.



LICENSE AGREEMENT FOR USE OF THE JUSTICE CENTER GROUNDS

This License Agreement for Use of the Justice Center Grounds is made and entered between Caldwell County, Texas ("the County") and Camp Gladiator, Inc. (hereinafter "Licensee") for the Exercise Fitness Boot Camp event.

WHEREAS Licensee wishes to make use of the Caldwell County Justice Center Grounds (hereinafter "the Justice Center Grounds"), located at 1703 S. Colorado Street, Lockhart, Texas 78644 in Caldwell County, Texas.

WHEREAS the County, to promote a sense of community, does, from time to time, allow private and/or public entities temporary license to use the Justice Center Grounds.

NOW, THEREFORE, the County and Licensee agree to the following terms, conditions, rights, and duties:

I.

TERM, HOURS, AND NUMBER

This agreement is effective beginning the 11th day of June, 2018 and ending the 12th day of September, 2018 (hereinafter "the Term") and provides for Licensee's lawful use of the Justice Center Grounds between the hours of 5:00 am and 6:30 am, Monday through Friday (hereinafter "the Event Hours"), unless this Agreement is otherwise terminated under Section V of this Agreement. The temporary license granted by the County under this Agreement is expressly limited to the Term and the Event Hours cited above. Licensee agrees that it will make diligent efforts to limit the number of people allowed onto the Justice Center Grounds at any given time during the Term to fifty (50).

II.

CONSIDERATION

The parties to this Agreement recognize that ample consideration exists to bind them to the terms and obligations contained herein.

III. MANAGEMENT

Licensee shall be responsible for the management of the Justice Center Grounds during the Event Hours of the Term. Licensee's management responsibilities shall include, but not be limited to: 1) ensuring that the Justice Center Grounds are secure and safe during the Event Hours of the Term for any event(s) that Licensee wishes to have on the County's property, 2) ensuring that crowd control and other safety precautions are planned in advance of the event(s) and implemented during the event(s), 3) ensuring that any items, improvements, or personal property brought upon the Justice Center Grounds during the Term are safe and secure, considering that the public shall have access to said items, improvements, and/or personal property, 5) ensuring that all activities and/or materials related to the event(s) are properly and legally permitted by any governmental or private authority that has regulation powers over that activity or material, **and 6**) ensuring that all materials that are brought onto or left on the Justice Center Grounds.

IV.

WRITTEN NOTICE OF ACTIVITIES

No later than three (3) business days before the beginning of the Term, Licensee shall provide the County with a written, detailed overview of all events and activities that will occur on the Justice Center Grounds under this Agreement and during the Term. In said overview, Licensee shall also include information regarding: 1) the anticipated number of people attending the event(s) on the Justice Center Grounds and the anticipated times of the event(s), 2) security, if any, that will be provided or arranged by Licensee, and 3) any materials, items, or objects that Licensee intends to bring onto the Justice Center Grounds.

V.

RIGHTS OF THE COUNTY

The County reserves the following rights under this License Agreement: 1) to further limit the time, place, and manner of any activities on the Justice Center Grounds by providing Licensee with a written instruction of how that activity shall be conducted; 2) to prohibit, terminate, restrain, or enjoin any activity on the Justice Center Grounds that was not detailed in Licensee's Written Notice of Activities cited above in Section IV; 3) to prohibit the use of certain materials, items, or other objects that Licensee wishes to bring onto the Justice Center Grounds by providing written notice of that prohibition to Licensee; 4) to require certain action(s) by Licensee that further the health, safety, legality, and security of the Justice Center Grounds, Licensee's event(s) and those individuals attending Licensee's event(s) by providing written notice of that requirement to Licensee; 5) to change the Hours under this Agreement by providing written notice of that change to Licensee; 6) to change the Term under this

Agreement by providing written notice of that change to Licensee; 7) to enter and use the Justice Center Grounds for certain circumstances, to include emergencies, during the Hours and Term under this Agreement; and 8) to terminate the License issued under this Agreement by providing ten (10) business days written notice of that termination to Licensee. Licensee recognizes the County's reservation of the above rights, and agrees to comply with the County's written assertion of rights under this Section.

VI. DEPOSIT

Licensee shall remit payment of Two Hundred United States Dollars (\$200.00 USD) to the County in the form of a Cashier's Check or Money Order, said monies to be held in trust by the County during the Term. The Cashier's Check or Money Order may be deposited into a Caldwell County bank account if the County: 1) determines that Licensee's use of the Justice Center Grounds has caused the County to incur expenses or damages; 2) provides written notice to Licensee, within ten (10) business days of the end of the Term, that Licensee's use of the Justice Center Grounds during the Term has caused the County to incur expenses or damages; 3) provides a written accounting to Licensee, within ten (10) business days of the end of the Term, that details the expenses or damages incurred; and 4) refunds the remainder of the Licensee's deposit, if any, after subtracting any and all expenses and/or damages incurred from the deposit, such refund to occur within ten (10) business days of the end of the Term. If the County's written accounting to Licensee under this Section exceeds the amount deposited by Licensee, Licensee shall, within a reasonable time, pay the County the difference between the amount claimed by the County and the amount deposited by Licensee, such monies being considered liquidated damages by the parties hereto.

VII.

INSURANCE

Licensee is a Texas corporation which maintains a commercial general liability insurance policy with amount(s) sufficient to save, protect and insure Licensee, (or, County, if Licensee indemnifies the County under Section VIII, below) for the Authorized Activity being held in the License Area. Evidence of Licensee's general liability coverage will be provided to County upon request. Furthermore, Licensee agrees to add the License Area as an insured under its liability policy, before the Term is to commence. A copy of this insurance policy is attached as Exhibit "A" and is incorporated herein.

VIII. CONTRACTUAL RELATIONSHIP; INDEMNITY

The County and Licensee are independent contractors under the terms of this Agreement. Nothing in this Agreement shall be construed to mean that Licensee is an agent or employee of the County, nor that the County is an agent or employee of Licensee. Neither Licensee nor the County will be liable for the

actions of, or failure to act by, any employee, agent, volunteer, or officer of the other party. Licensee will be responsible for investigating, handling, responding to, and defending claims and causes of action arising from any act, omission or failure to act by Licensee under this agreement. The County will be responsible for investigating, handling, responding to, and defending claims and causes of action arising from any act, omission or failure to act by the County under this agreement. Licensee recognizes that claims and/or causes of action may arise in relation to materials, items, or other objects that are brought onto the Justice Center Grounds by Licensee. TO THE EXTENT ALLOWED BY APPLICABLE LAW, LICENSEE AGREES TO FULLY INDEMNIFY AND HOLD HARMLESS THE COUNTY AGAINST ANY CLAIM OF PREMISE LIABILITY, OR ANY OTHER CLAIMS, LOSSES, DAMAGES, CAUSES OF ACTION, SUITS, OR LIABILITY, IF SUCH CLAIM RELATES TO MATERIALS, ITEMS, OR OTHERS OBJECTS THAT ARE BROUGHT ONTO THE JUSTICE CENTER GROUNDS BY LICENSEE OR LICENSEE'S AGENTS, EMPLOYEES, VOLUNTEERS, OR OFFICERS.

The parties to this LICENSE AGREEMENT FOR USE OF JUSTICE CENTER GROUNDS hereby agree to the terms and conditions cited above, as is evidenced by their signatures, or the signatures of their lawful representatives, below.

Caldwell County Texas, Licensor	Camp G
By: Judge Ken Schawe	By:
County Judge	
110 S. Main Street, Room 201	
Lockhart, Texas 78644	

Camp Gladiator, Inc., Licensee	
By:	

10. Discussion/Action to execute the renewal of the Central Texas Alternative Dispute Resolution Services
 Agreement. Cost: None; Speaker: Judge Schawe; Backup: 5.

AGREEMENT FOR ALTERNATIVE DISPUTE RESOLUTION SERVICES

This Agreement for Alternative Dispute Resolution Services (hereinafter referred to as the "Agreement") is by and between Caldwell County, Texas, a political subdivision of the State of Texas (hereinafter referred to as the "County") and Central Texas Alternative Dispute Resolution, Inc., a Texas nonprofit corporation (hereinafter referred to as the "DRC"). In this Agreement, the County and the DRC sometimes are referred to jointly as the "Parties" and individually as a "Party."

WHEREAS, the DRC is a Texas nonprofit corporation serving Central Texas, whose principal purpose is to provide the citizens of the County and surrounding counties with access to affordable, quality, effective, alternative dispute resolution ("ADR") services, including mediation, negotiation, facilitation, and conciliation; and

WHEREAS, the DRC's other purposes include providing the citizens of the County and surrounding counties with education and training regarding ADR services, including mediation, negotiation, facilitation, and conciliation; and

WHEREAS, the County finds significant public benefit in providing a more-peaceable atmosphere in the community, relieving crowded court dockets, reducing the costs of litigation, and saving the County's taxpayers money by making available to the County's residents access to affordable, quality, effective ADR services, including mediation, negotiation, facilitation, and conciliation, as well as education and training regarding ADR services.

NOW THEREFORE, in consideration of the promises and covenants exchanged below, the Parties agree to the following:

I. **RESPONSIBILITIES OF THE DRC**

- **A. To Provide ADR Programs and Services.** The DRC will be responsible for providing ADR programs and services to the County's residents. The programs and services will include, but not be limited to, those described in this paragraph.
 - 1. Court-Annexed Mediations. The DRC's programs and services will include mediation, of court-referred civil cases from the district courts, county courts-atlaw, or justice of the peace courts, with particular emphasis being given to pro-se cases, cases involving at least one indigent party, cases involving an amount in dispute of \$50,000.00 or less, and divorce, child conservatorship, and child-support cases. There will be no cost to the referred parties of cases from the justice of the peace courts, however parties to district court or county court-at-law cases may incur a minimal fee. The intent of this program is to provide service for low income parties, such as, income and asset guidelines may be applied that are consistent with guidelines in other counties served by the DRC. The DRC's programs and services under this Agreement shall be provided at one or more convenient and accessible places located in Caldwell County. The Executive Director and other DRC staff will work in concert with the County's judges and

court coordinators to determine which cases are best suited and most appropriate for referral to mediation.

- 2. Community-Based Mediations. The DRC's programs and services will also encompass mediation of disputes that might arise between neighbors, employers and employees, landlords and tenants, consumers and merchants, or other parties seeking to resolve disputes without the use of litigation. The intent behind offering such services to the community is to make the County a more-peaceable community in which to live, work, and transact business.
- **3. Education and Training.** The DRC will provide programs to educate the County's citizens regarding the benefits of ADR techniques, and it will dispense information about resolving disputes in positive, non-violent ways. The DRC's programs and services will include the training of volunteer mediators to serve the community.
- **B.** To Provide Reporting, Requests for Payment, and Management of Programs and Services. The DRC will provide the County with reports of activities and requests for payment as follows:
 - 1. **Reports.** The DRC will provide the County with detailed quarterly and cumulative annual reports regarding (a) its activities, including sources, disposition, and/or current status of all cases completed or pending during each respective period, and (b) its financial status, including revenues and expenditures, for each of those same periods.
 - 2. Requests for Payment. The DRC will provide the County with monthly requests for funds to be paid to the DRC from the Alternative Dispute Resolution System Fund. Said monthly requests will contain such reasonable information and details regarding expenses and application of funds as the County Auditor, or his designee, deems necessary.
 - **3.** Management of Programs and Services. The DRC will manage its own programs and services and implement rules, procedures, and policies that control or direct all affairs of its programs and services. The DRC will also maintain and administer one or more operating accounts separate and distinct from the County's ADR System Fund. The DRC's operating account(s) may be funded by user fees, grants, donations, fundraising activities, and funds from other programs and services, in addition to any amounts provided by the County. The County Auditor shall have a right, upon provision of reasonable written notice to DRC, to review and audit all DRC accounts, regardless of the funding source(s) for those accounts. All reviewing and auditing of DRC accounts shall be performed during regular business hours.
- **C. To Maintain Insurance.** The DRC will maintain in full force and effect, during the entire term of this Agreement, a policy of general liability insurance in which the limits shall not be less than \$100,000.00 for each person and \$300,000.00 for each single occurrence for bodily injury or death and \$100,000.00 for each single occurrence for destruction of property. The policy will name the County and the DRC as insured parties, and it will

contain a clause that the insurer will not cancel or change the insurance without first giving the County at least ten days' prior written notice. The insurance will be from a company acceptable to the County, and a copy of the policy or certification of insurance will be delivered to the County.

II. RESPONSIBILITIES OF THE COUNTY

- **A. To Maintain and Administer an ADR System Fund.** In accordance with the provisions of Section 152.004 of the Texas Civil Practice and Remedies Code, the County has established and is administering, and will continue to administer during the term of this Agreement, an ADR system fund by collecting a fee of \$15.00 per filing, paid as other court costs, on all civil cases filed in the County at both the district and county court levels, and \$5.00 per filing on all civil cases filed in the justice of the peace courts, excluding (1) suits filed by the County, (2) suits for delinquent taxes, (3) condemnation proceedings under Chapter 21 of the Texas Property Code, and (4) proceedings under Subtitle C, Title 7, of the Texas Health and SafetyCode.
- **B.** To Compensate the DRC for ADR Programs and Services. The filing fees collected by the County pursuant to Section 152.004 of the Texas Civil Practice and Remedies Code are to be held in the County Treasury in the ADR System Fund. In exchange for the DRC's programs and services, the County will pay the fees held in the ADR system fund to the DRC on a monthly basis, in accordance with the monthly requests for payment that the DRC will submit to the County as provided in this Agreement. All payments, including payment amounts, are subject to the approval of the County Auditor before payment.

III. OTHER TERMS AND CONDITIONS

- **A.** Availability of Funds. Both Parties understand that the only funds available from the County for distribution to the DRC for services described in this Agreement will be the funds collected as fees pursuant to Section 152.004 of the Texas Civil Practice and Remedies Code and available in the ADR System Fund.
- **B.** Relationship of the Parties. At all times and for all purposes hereunder, the DRC will be an independent contractor, not a County employee. No statement contained in this Agreement will be construed so as to find any employee of the DRC an employee of the County. The DRC, its agents, employees, officers, and directors, will be entitled to none of the rights, privileges, or benefits of County employment unless the County so authorizes. The DRC is and will remain an independent agency with respect to all programs and services it performs under this Agreement.
- **C. DRC's Relationships with Others.** The DRC reserves the right to establish relationships with, and to provide ADR programs and services for, other public and private entities and individuals.

- **D. Term and Termination.** This Agreement will be in full force and effect from February 1, 2018 through January 31, 2019, unless otherwise terminated prior to that time by a Party as provided under the terms of this Agreement. A Party may terminate its performance under this Agreement either upondefault by the other Party or without fault by written consent of both parties to terminate the agreement. Should a default occur, the Party against whom the default has occurred shall have theright to terminate all or part of its duties under the terms of this Agreement as of the thirtieth (30th) day following the receipt, by the defaulting Party, of notice describing such default(s) and the intention of the other Party to terminate, provided that: 1) such termination will be ineffective if within said thirty-day period the defaulting Party cures the default, or 2) such termination may, at the sole election of the Party against whom the default.
- **E.** Non-Waiver. No waiver of any provision of this Agreement will be deemed or constitute a waiver of any other provision, nor will it be deemed or constitute a continuing waiver unless expressly provided for by a written amendment to this Agreement; nor will the waiver of any default under this Agreement be deemed a waiver of any subsequent defaults of the same type. The failure at any time to enforce this Agreement or covenant by any party or their respective heirs, successors or assigns, whether any violations thereof are known or not, will not constitute a waiver or estoppel of the right to do so.
- **F. Applicable Law.** This Agreement will be governed by and construed according to the laws of the State of Texas. Exclusive venue for any action or claim arising out of this agreement must be in a court of competent jurisdiction in Caldwell County, Texas.
- **G.** Notice. Any notice or other communication required or permitted hereunder shall be in writing and shall be deemed to have been given on the date of service if served personally, or three (3) days after the date of mailing if mailed, by first class mail, registered or certified, postage prepaid and addressed as follows:

COUNTY:	DRC:
County Judge	Director
110 S. Main Street	Central Texas Dispute Resolution Center
Lockhart, TX 78644	300 S. CM Allen Parkway, Suite 400
	San Marcos, Texas 78666

- **H. Ambiguities.** If there are any ambiguities in the interpretation or enforcement of any terms of this Agreement, those ambiguities will not be construed for, or against, any Party on the basis that said Party did not author same.
- I. Entire Agreement; Amendment. This Agreement contains all of the covenants and promises of the Parties relating to the subject matter hereof, and is the full expression of the contract between the Parties. Any amendment of this Agreement will be of no force or effect unless it is in writing and signed by both Parties.

- J. Severability. If one or more of the provisions contained in this Agreement is, for any reason, held to be invalid, illegal, or unenforceable in any respect, such invalidity, illegality, or unenforceability will not affect any other provision hereof, and this Agreement will be construed as if such invalid, illegal, or unenforceable provision had never been contained therein.
- **K.** Counterparts. This Agreement may be executed in two or more counterparts, each of which will be considered an original and all of which, taken together, will constitute one and the same instrument.
- L. Immunity. No provision of this agreement shall affect or waive any sovereign or governmental immunity available to the County and/or its elected officials, officers, employees and agents under Federal or Texas law nor waive any defenses or remedies at law available to the County and/or its elected officials, officers, employees and agents under Federal or Texas law.

CALDWELL COUNTY, TEXAS

CENTRAL TEXAS ALTERNATIVE DISPUTE RESOLUTION, INC.

By: ______Ken Schawe, County Judge

By: <u>Martha Joyce, Interim Director</u>

Date: _____

Date:

ATTEST:

By:

Carol Holcomb, County Clerk

11. Discussion/Action to consider borrowing funds to meet needs of the County. Cost: None; Speaker: Judge Schawe/Barbara Gonzales; Backup: 9.

RESOLUTION

A RESOLUTION BY THE COMMISSIONERS COURT OF CALDWELL COUNTY, TEXAS AUTHORIZING AND APPROVING PUBLICATION OF NOTICE OF INTENTION TO ISSUE CERTIFICATES OF OBLIGATION; COMPLYING WITH THE REQUIREMENTS CONTAINED IN SECURITIES AND EXCHANGE COMMISSION RULE 15c2-12; AND PROVIDING AN EFFECTIVE DATE

WHEREAS, the Commissioners Court (the Commissioners Court) of Caldwell County, Texas (the *County*) has determined that it is advisable and necessary to issue and sell one or more series of certificates of obligation (the Certificates) in an amount not to exceed \$6,000,000 as provided pursuant to the provisions of the Certificate of Obligation Act of 1971, as amended, Texas Local Government Code, Section 271.041 through Section 271.064, for the purpose of paying contractual obligations of the County to be incurred for making permanent public improvements and for other public purposes, to-wit: (1) purchasing election equipment; (2) acquiring, designing, purchasing, constructing, reconstructing, improving, renovating, enlarging, extending, and/or equipping the County Sheriff's Department, including improvements to the Sheriff's Office, for criminal justice and law enforcement purposes; (3) purchasing equipment and vehicles for public safety, maintenance, and other County administrative purposes; (4) the purchase of materials, supplies, equipment, machinery, landscaping, land, and rights-of-way for authorized County needs and purposes; and (5) the payment of professional services related to the design, construction, project management, and financing of the aforementioned projects. The certificates of obligation will be payable from the levy of an annual ad valorem tax, within the limitations prescribed by law, upon all taxable property within the County and from a lien on and pledge of certain revenues derived from the operation of the County Jail. The certificates of obligation are to be issued, and this notice is given, under and pursuant to the provisions of the Certificate of Obligation Act of 1971, as amended, Texas Local Government Code Section 271.041 through Section 271.064 and Section 361.052, as amended, Texas Local Government Code; and

WHEREAS, prior to the offering, sale, and issuance of the Certificates, the appropriate officials of the County must review and approve the distribution of a "deemed final" preliminary official statement (the *Official Statement*) in order to comply with the requirements contained in 17 C.F.R. §240.15c2-12 (the *Securities and Exchange Commission Rule*); and

WHEREAS, based upon their review of the Official Statement, the appropriate officials of the County must find to the best of their knowledge and belief, after reasonable investigation, that the representations of facts pertaining to the County contained in the Official Statement are true and correct and that, except as disclosed in the Official Statement, there are no facts pertaining to the County that would adversely affect the issuance of the Certificates or the County's ability to pay the debt service requirements on the Certificates when due; and

WHEREAS, the Commissioners Court will comply with the requirements contained in the Securities and Exchange Commission Rule concerning the creation of a contractual obligation between the County and the proposed purchaser(s) of the Certificates (the *Purchasers*) to provide the Purchasers with an Official Statement in a time and manner that will enable the Purchasers to comply with the distribution requirements and continuing disclosure requirements contained in the Securities and Exchange Commission Rule; and

WHEREAS, the Commissioners Court authorizes the County Judge, County Auditor, County Treasurer, County Clerk, and County Attorney, as appropriate, or their designees, to review, approve, and execute any document or certificate in order to allow the County to comply with the requirements contained in the Securities and Exchange Commission Rule; and

WHEREAS, prior to the issuance of the Certificates, the Commissioners Court is required to publish notice of its intention to issue the Certificates in a newspaper of general circulation in the County, such notice stating (i) the time and place the Commissioners Court tentatively proposes to pass the order authorizing the issuance of the Certificates, (ii) the maximum amount proposed to be issued, (iii) the purposes for which the Certificates are to be issued, (iv) and the manner in which the Commissioners Court proposes to pay the Certificates; and

WHEREAS, the Commissioners Court hereby finds and determines that such documents pertaining to the sale of the Certificates should be approved, and the County should proceed with the giving of notice of intention to issue the Certificates in the time, form, and manner provided by law; and

WHEREAS, the Commissioners Court hereby finds and determines that the adoption of this Resolution is in the best interests of the residents of the County; now, therefore,

BE IT RESOLVED BY THE COMMISSIONERS COURT OF CALDWELL COUNTY, TEXAS THAT:

SECTION 1. The County Clerk is hereby authorized and directed to cause notice to be published of the Commissioners Court's intention to issue the Certificates in an amount not to exceed \$6,000,000 for the purpose of paying contractual obligations of the County to be incurred for making permanent public improvements and for other public purposes, to-wit: (1) purchasing election equipment; (2) acquiring, designing, purchasing, constructing, reconstructing, improving, renovating, enlarging, extending, and/or equipping the County Sheriff's Department, including improvements to the Sheriff's Office, for criminal justice and law enforcement purposes; (3) purchasing equipment and vehicles for public safety, maintenance, and other County administrative purposes; (4) the purchase of materials, supplies, equipment, machinery, landscaping, land, and rights-of-way for authorized County needs and purposes; and (5) the payment of professional services related to the design, construction, project management, and financing of the aforementioned projects. The Certificates will be payable from the levy of an annual ad valorem tax, within the limitations prescribed by law, upon all taxable property within the County and are additionally secured by a lien on and pledge of certain revenues derived from the operation of the County Jail. The notice hereby approved and authorized to be published shall read substantially in the form and content of Exhibit A attached hereto, which notice is incorporated herein by reference as a part of this Resolution for all purposes.

SECTION 2. The County Clerk shall cause the notice described in Section 1 to be published in a newspaper of general circulation in the County, once a week for two consecutive weeks, the date of the first publication shall be at least thirty (30) days prior to the date stated therein for passage of the order authorizing the issuance of the Certificates.

SECTION 3. The County Judge, County Auditor, County Treasurer, County Clerk, and County Attorney, as appropriate, or their designees, are authorized to review and approve the Official Statement pertaining to the offering, sale, and issuance of the Certificates and to execute any document or certificate in order to comply with the requirements contained in the Securities and Exchange Commission Rule.

SECTION 4. The recitals contained in the preamble hereof are hereby found to be true, and such recitals are hereby made a part of this Resolution for all purposes and are adopted as a part of the judgment and findings of the Commissioners Court.

SECTION 5. All orders and resolutions, or parts thereof, which are in conflict or inconsistent with any provision of this Resolution are hereby repealed to the extent of such conflict, and the provisions of this Resolution shall be and remain controlling as to the matters resolved herein.

SECTION 6. This Resolution shall be construed and enforced in accordance with the laws of the State of Texas and the United States of America.

SECTION 7. If any provision of this Resolution or the application thereof to any person or circumstance shall be held to be invalid, the remainder of this Resolution and the application of such provision to other persons and circumstances shall nevertheless be valid, and the Commissioners Court hereby declares that this Resolution would have been enacted without such invalid provision.

SECTION 8. It is officially found, determined, and declared that the meeting at which this Resolution is adopted was open to the public and public notice of the time, place, and subject matter of the public business to be considered at such meeting, including this Resolution, was given, all as required by Chapter 551, as amended, Texas Government Code.

SECTION 9. This Resolution shall be in force and effect from and after the date of its adoption, and it is so resolved.

[The remainder of this page intentionally left blank.]

PASSED AND APPROVED, this the 11th day of June, 2018.

CALDWELL COUNTY, TEXAS

County Judge

ATTEST:

County Clerk and Ex-Officio Clerk of the Commissioners Court

(SEAL OF COMMISSIONERS COURT)

Exhibit A

NOTICE OF INTENTION TO ISSUE CALDWELL COUNTY, TEXAS CERTIFICATES OF OBLIGATION

TAKE NOTICE that the Commissioners Court (the *Court*) of Caldwell County, Texas (the County), shall convene at 9:00 o'clock A.M. on the 23rd day of July, 2018, at its regular meeting place in Caldwell County Courthouse, and, during such meeting, the Court will consider the passage of an order authorizing the issuance of certificates of obligation (the Certificates) in an amount not to exceed \$6,000,000 for the purpose or purposes of paying contractual obligations of the County to be incurred for making permanent public improvements and for other public purposes, to-wit: (1) purchasing election equipment; (2) acquiring, designing, purchasing, constructing, reconstructing, improving, renovating, enlarging, extending, and/or equipping the County Sheriff's Department, including improvements to the Sheriff's Office, for criminal justice and law enforcement purposes; (3) purchasing equipment and vehicles for public safety, maintenance, and other County administrative purposes; (4) the purchase of materials, supplies, equipment, machinery, landscaping, land, and rights-of-way for authorized County needs and purposes; and (5) the payment of professional services related to the design, construction, project management, and financing of the aforementioned projects. The Certificates will be payable from the levy of an annual ad valorem tax, within the limitations prescribed by law, upon all taxable property within the County and from a lien on and pledge of certain revenues derived by the County from the operation of the County Jail. The Certificates are to be issued, and this notice is given, under and pursuant to the provisions of the Certificate of Obligation Act of 1971, as amended, Texas Local Government Code Section 271.041 through Section 271.064 and Section 361.052, as amended, Texas Local Government Code.

> /s/ Carol Holcomb County Clerk and Ex-Officio Clerk of the Commissioners Court of Caldwell County, Texas

NOTICE OF INTENTION TO ISSUE CALDWELL COUNTY, TEXAS CERTIFICATES OF OBLIGATION

TAKE NOTICE that the Commissioners Court (the Court) of Caldwell County, Texas (the *County*), shall convene at 9:00 o'clock A.M. on the 23rd day of July, 2018, at its regular meeting place in Caldwell County Courthouse, and, during such meeting, the Court will consider the passage of an order authorizing the issuance of certificates of obligation (the Certificates) in an amount not to exceed \$6,000,000 for the purpose or purposes of paying contractual obligations of the County to be incurred for making permanent public improvements and for other public purposes, to-wit: (1) purchasing election equipment; (2) acquiring, designing, purchasing, constructing, reconstructing, improving, renovating, enlarging, extending, and/or equipping the County Sheriff's Department, including improvements to the Sheriff's Office, for criminal justice and law enforcement purposes; (3) purchasing equipment and vehicles for public safety, maintenance, and other County administrative purposes; (4) the purchase of materials, supplies, equipment, machinery, landscaping, land, and rights-of-way for authorized County needs and purposes; and (5) the payment of professional services related to the design, construction, project management, and financing of the aforementioned projects. The Certificates will be payable from the levy of an annual ad valorem tax, within the limitations prescribed by law, upon all taxable property within the County and from a lien on and pledge of certain revenues derived by the County from the operation of the County Jail. The Certificates are to be issued, and this notice is given, under and pursuant to the provisions of the Certificate of Obligation Act of 1971, as amended, Texas Local Government Code Section 271.041 through Section 271.064 and Section 361.052, as amended, Texas Local Government Code.

> /s/ Carol Holcomb County Clerk and Ex-Officio Clerk of the Commissioners Court of Caldwell County, Texas

AFFIDAVIT OF PUBLICATION

THE STATE OF TEXAS	§
	§
COUNTY OF CALDWELL	§

BEFORE ME, the undersigned authority, a Notary Public in and for the State of Texas, on this day personally appeared _______, who, after being by me duly sworn, upon oath says that he/she is the publisher/editor of the _______, a newspaper of general circulation in Caldwell County, Texas, which newspaper satisfies each of the requirements of Subchapter C, Chapter 2051, as amended, Texas Government Code, so as to constitute an official publication in which legal notices may be published as set forth in Subchapter C, Chapter 2051, as amended, Texas Government Code, and that there was published in said newspaper a true and correct copy of the attached NOTICE OF INTENTION to issue certificates of obligation on the following dates:

Publisher/Editor

SUBSCRIBED AND SWORN TO before me, the undersigned authority, on the ______ day of ______, 2018.

Notary Public in and for the State of Texas

(NOTARY SEAL)

CERTIFICATE OF COUNTY CLERK

THE STATE OF TEXAS	§
	§
COUNTY OF CALDWELL	§

THE UNDERSIGNED HEREBY CERTIFIES that:

The Commissioners Court (the *Court*) of Caldwell County, Texas (the *County*), convened on the 11th day of June, 2018 in regular session in the regular meeting place of the Court in the County Courthouse (the *Meeting*), which Meeting was at all times open to the public, the duly constituted officers and members of the Court being as follows:

Ken Schawe	County Judge
Terry Wright	Commissioner, Precinct No. 1
Eddie Moses	Commissioner, Precinct No. 2
Edward "Ed" Theriot	Commissioner, Precinct No. 3
Joe Roland	Commissioner, Precinct No. 4

and all of such persons were present at the Meeting, except the following: ______, thus constituting a quorum. Among other business considered at the Meeting, the attached resolution (the *Resolution*) entitled:

A RESOLUTION BY THE COMMISSIONERS COURT OF CALDWELL COUNTY, TEXAS AUTHORIZING AND APPROVING PUBLICATION OF NOTICE OF INTENTION TO ISSUE CERTIFICATES OF OBLIGATION; COMPLYING WITH THE REQUIREMENTS CONTAINED IN SECURITIES AND EXCHANGE COMMISSION RULE 15c2-12; AND PROVIDING AN EFFECTIVE DATE

was introduced for the due consideration of the Court. After presentation and discussion of the Resolution, a motion was made by Commissioner ______ that the Resolution be passed and adopted. The motion was seconded by Commissioner ______ and carried by the following vote:

_____voted "For" _____voted "Against" _____ "Abstained"

all as shown in the official Minutes of the Court for the Meeting.

2. The attached Resolution is a true and correct copy of the original on file in the official records of the County; the duly qualified and acting members of the Court on the date of the Meeting are those persons shown above, and, according to the records of my office, each member of the Court was given actual notice of the time, place, and purpose of the Meeting and had actual notice that the Resolution would be considered; and the Meeting and deliberation of the aforesaid public business, was open to the public and written notice of said meeting including the subject of the Resolution, was posted and given in advance thereof in compliance with the provisions of Chapter 551, as amended, Texas Government Code.

IN WITNESS WHEREOF, I have signed my name officially and affixed the seal of the Commissioners Court, this 11th day of June, 2018.

County Clerk and Ex-Officio Clerk of the Commissioners Court of Caldwell County, Texas

(SEAL OF COMMISSIONERS COURT)

12. Discussion/Action regarding County IT Department and hiring IT consultant to review and discuss various needs of the County. Cost: None; Speaker: Judge Schawe; Backup: None. 13. Discussion/Action to designate the Purchasing Agent to report to Commissioners Court. Cost: None; Speaker: Judge Schawe; Backup: None.

14. DiscussionAction authorizing the County Judge to execute the Feral Hog Program Professional Services Agreement with Texas State Meadows Center for Water and Environment and authorizing the County Judge to execute the Interlocal Agreement by and between Caldwell County and Texas A&M AgriLife Extension Service for the Feral Hog Abatement Program. Cost: Not to exceed \$10,000.00; Speaker: Judge Schawe/Nick Dornak; Backup: 19.

INTERLOCAL AGREEMENT by and between CALDWELL COUNTY and TEXAS A&M AGRILIFE EXTENSION SERVICE

This Interlocal Agreement (hereafter termed "Agreement") is made pursuant to Chapter 791, Texas Government Code, *Interlocal Cooperation Contract*, and is entered into by and between the **Caldwell County** (hereafter referred to as "COUNTY"), a county within the State of Texas and **Texas A&M AgriLife Extension Service** (hereafter referred to as "AGRILIFE EXTENSION"), a member of The Texas A&M University System, an agency of the State of Texas. COUNTY and AGRILIFE EXTENSION may be referred to herein individually as "Party" or collectively as the "Parties".

SECTION 1 PURPOSE

- **1.01** In accordance with Senate Bill 1, 85th Regular Legislative Session, 2017, (General Appropriations Act) Article III, page 238, rider 8, funds were appropriated to AGRILIFE EXTENSION for the Feral Hog Abatement Program (the "Program") to implement feral hog abatement technologies. As part of the Program, AGRILIFE EXTENSION shall use a portion of the appropriated funds to fund grants for county feral hog eradication projects in Texas.
- **1.02** AGRILIFE EXTENSION requested grant applications in support of the Program from Texas counties setting forth the County's proposed feral hog abatement eradication project (the "Project"). COUNTY has proposed to complete the Project as set out in the COUNTY's Application including a Description of Activities (collectively "Application") attached hereto as Attachment A and fully incorporated herein by reference.
- **1.03** AGRILIFE EXTENSION desires to have COUNTY complete the Project to accomplish the goals of responding and complying with the Program. Accordingly, AGRILIFE EXTENSION and COUNTY enter into this Agreement as follows:

SECTION 2 TERM

- **2.01** *Fixed Term*: This Agreement commences on October 1, 2017 and will terminate on August 31, 2018, unless extended or cancelled according to sections 2.02 or 2.03 of this Agreement.
- **2.02** *Extension*: Upon written, mutual consent of the Parties, this Agreement may be extended for a maximum of one (1) calendar year, after the date of expiration of the Fixed Term.

2.03 *Cancellation*: This Agreement may be cancelled prior to the expiration of the Fixed Term or any Extension Term by either Party, upon thirty (30) calendar days written notice to the other Party, sent to the address indicated in Section 5.01 of this Agreement.

SECTION 3 COUNTY OBLIGATIONS

- **3.01** *Performance*: COUNTY shall implement the feral hog abatement technologies as set out in the Application.
- **3.02** *Subcontractors:* Any delegation by the COUNTY to a subcontractor regarding any duties and responsibilities imposed by this Agreement must be approved in advance by AGRILIFE EXTENSION and shall not relieve the COUNTY of its responsibilities to AGRILIFE EXTENSION for its performance.
- **3.03** *Progress Reports*: COUNTY shall submit to AGRILIFE EXTENSION quarterly progress reports reflecting progress of work completed on the Project as well as financial progress.
- **3.04** *Records:* COUNTY must keep a separate bookkeeping account with a complete record of all expenditures relating to the Project. Project records shall be maintained by COUNTY for seven (7) years after the completion of the Project, or as otherwise agreed upon with AGRILIFE EXTENSION. AGRILIFE EXTENSION and the Texas State Auditor's Office ("State Auditor") reserve the right to examine all books, documents, records, and accounts relating to the Project at any time throughout the duration of the Agreement and for three years immediately following completion of the Project. If any litigation, claim, negotiation, audit or other action is initiated prior to the expiration of the retention period, then the records must be retained until authorized by AGRILIFE EXTENSION. AGRILIFE EXTENSION and the State Auditor shall have access to the physical locations related to Project activities.
- **3.05** *Audit:* If the COUNTY has a financial audit performed during the time the COUNTY is receiving funds from AGRILIFE EXTENSION for the Project, upon request, AGRILIFE EXTENSION shall have access to information about the audit, including the audit transmittal letter, management letter, and any schedules in which the COUNTY's funds are included.
- **3.06** *Compliance:* At all times during the term of this Agreement, COUNTY must comply with *Texas Government Code*, Chapter 783, Uniform Grant and Contract Management, and the Uniform Grant Management Standards (UGMS) and 2 CFR Part 200.

SECTION 4 COMPENSATION

- **4.01** *Fee*: This is a cost reimbursable Agreement. AGRILIFE EXTENSION agrees to pay COUNTY up to <u>\$12,000</u> for performance of the Project. Payment shall be cost reimbursable based on actual costs incurred by COUNTY in accordance with the Application but will not exceed \$12,000 total. Payment shall be made within thirty (30) days after receipt of invoice in accordance with Chapter 2251, *Texas Government Code*.
- **4.02** *Invoices*: COUNTY may submit cost reimbursable invoices to AGRILIFE EXTENSION quarterly, but in no event shall invoice be submitted any later than September 30, 2018. The invoice(s) must include sufficient detail and relevant supporting documentation. Backup detail may include, but is not limited to, documentation of personnel expenses, or copies of invoices. The combined amount of the invoices submitted by COUNTY may not exceed \$12,000. All invoices shall be submitted to the following address:

Texas A&M AgriLife Extension Services Attn: Gina D. Chairez-Blochlinger P.O. Box 690170 San Antonio, TX 78249 (a copy may be sent by Email to: <u>Gina.D.Chairez@aphis.usda.gov</u>)

- **4.03** *Payment Schedule:* Up to 90% of the total grant award may be reimbursed provided the work for which payment is requested has been completed and proper documentation has been submitted. The remaining 10% will only be disbursed once all reporting requirements have been met, including, but not limited to, the final performance report.
- **4.04** *Eligible Expenses:* Generally, expenses that are necessary and reasonable for proper and efficient performance and administration of the Project are eligible. Examples of eligible expenditures include:
 - 1. Personnel costs, including salary and benefits related to temporary or event staff; grant funds may <u>not</u> be used to pay for existing employees in the performance of their day-to-day duties.
 - 2. Direct operating expenses that directly relate to Project activities; this may include facility rental or other workshop related expenses (note: meals, food, or beverages of any kind are not considered an eligible expense).
 - 3. Supplies that cost less than \$5,000, such as office supplies, printing services, and materials needed to accomplish the proposed Project.
 - 4. Vendor contracts (i.e. agreements made with a third-party to perform a portion of the Project services).
 - 5. Controlled assets, which are defined as certain items valued \$500.00 \$4,999.99 which must also be inventoried, see: https://fmx.cpa.texas.gov/fmx/pubs/spaproc/appendices/appa/index.php.
 - 6. If grant funds are proposed by COUNTY to be used to fund bounty efforts, COUNTY must have a written policy implemented to prevent the intentional

breeding and raising of feral hogs for the purpose of meeting bounty requirements. In addition, bounty-related grant fund reimbursement is limited to 50% of the bounty paid and a maximum of \$5.00 per feral hog.

- **4.05** *Ineligible Expenses:* Expenses prohibited by state or federal law or determined to be ineligible by Program guidelines will not be reimbursed. Examples of these ineligible expenditures include, but are not limited to the following:
 - 1. Alcoholic beverages;
 - 2. Entertainment;
 - 3. Contributions, charitable or political;
 - 4. Expenses falling outside of the contract period;
 - 5. Items not listed in the project budget or an approved amendment;
 - 6. Expenses that are not adequately documented;
 - 7. Travel, including but not limited to mileage reimbursement, meals and lodging; and
 - 8. Meals, food or beverage costs of any kind, including those associated with an educational workshop.

4.06 *Non-expended grant funds:* If COUNTY fails to incur cost reimbursable expenses in the amount specified in Paragraph 4.01 during the term of this Agreement and properly invoice for same in accordance with the terms hereof, COUNTY shall not be entitled to such unspent funds. Any unspent funds will remain with AGRILIFE EXTENSION.

SECTION 5 MISCELLANEOUS

5.01 *Notices*: Fee payment or notices required under this Agreement may be sent by United States Postal Service regular surface mail, certified mail, registered mail, overnight delivery, or hand delivery. Written notice delivery is deemed made when the notice is deposited into a USPS mail receptacle, or deposited with an overnight carrier, or hand delivered. Either Party can change the notice address by sending to the other Party written indication of the new address. Notices should be addressed as follows:

COUNTY:	Caldwell County Attn: Judge Ken Schawe, County Judge 110 S. Main Street Lockhart, TX 78644
AGRILIFE EXTENSION:	Texas A&M AgriLife Extension Service ATTN: Michael Bodenchuk, State Director
By U.S. mail:	P.O. Box 690170 San Antonio, TX 78269
By courier:	5730 Northwest Parkway San Antonio, TX 78249

- **5.02** *Force Majeure*: Any and all duties, obligations, and covenants of this Agreement will be suspended during time of natural disaster, war, acts of terrorism, or other "Acts of God", which prevent a Party from fulfilling any and all duties, obligations, and/or covenants of this Agreement. If a Party is prevented from fulfilling a duty, obligation, and/or covenant of this Agreement, due to Force Majeure, the Party prevented from fulfilling will notify the other Party in writing, sent pursuant to Section 5.01 Agreement, within fourteen (14) calendar business days of the Force Majeure event.
- **5.03** *Parties Relationship*: Nothing in the Agreement should be construed as creating a partnership, joint venture, agency relationship, or any other relationship other than, between COUNTY and AGRILIFE EXTENSION.
- **5.04** *Applicable Law*: This Agreement is construed under and in accordance with the laws of the State of Texas.
- **5.05** *Cumulative Rights*: All rights, options, and remedies contained in this Agreement and held by COUNTY and AGRILIFE EXTENSION are cumulative and the exercising of one will not exclude exercising another. COUNTY and AGRILIFE EXTENSION each have the right to pursue any remedy or relief which may be provided by law, in equity, or by the stipulations of this Lease.
- **5.06** *Non-waiver*: A waiver by either COUNTY or AGRILIFE EXTENSION, or both, of any obligation, duty, or covenant of this Agreement will not constitute a waiver of any other breach of any obligation, duty, or covenant of this Agreement.
- **5.07** *Counterparts*: This Agreement can be executed in multiple counterparts, each of which is declared an original.
- **5.08** *Severability*: If any clause of provision of this Agreement is illegal, invalid or unenforceable under present or future law, COUNTY and AGRILIFE EXTENSION intend that the remaining clauses or provisions of this Agreement will not be affected and will remain in full force and effect.
- **5.09** *Entire Agreement*: This Agreement contains the final and entire agreement between COUNTY and AGRILIFE EXTENSION, and will not be amended, explained, or superseded by any oral or written communications; unless done so in a subsequent, written, and mutually agreed upon amendment.
- **5.10** *Successors and Assigns*: All the obligations, duties, covenants, and rights contained in this Agreement and performable by COUNTY will be applicable and binding upon respective successors and assigns, including any successor by merger or consolidation; however, nothing in this provision shall be construed to be consent of Assignment of this Agreement.
- 5.11 *Nondiscrimination*: COUNTY and AGRILIFE EXTENSION, and their agents or employees, are prohibited from discriminating on the basis of race, color, sex, age,

religion, national origin, or handicap, in the performance of the terms, conditions, covenants and obligations of this Agreement.

5.12 *Dispute Resolution*: Any dispute between COUNTY and AGRILIFE EXTENSION regarding this Agreement will be governed by Texas Government Code, Chapter 2009, *Alternative Dispute Resolution for Use by Governmental Bodies*, and any applicable Model Rules promulgated by the Office of the Attorney General, the State of Texas. Any notice of dispute tendered by COUNTY should be to Ralph Stevens, Director of Procurement, AGRILIFE EXTENSION.

AGREED and EXECUTED on the dates indicated below, by COUNTY's and AGRILIFE EXTENSION's duly authorized representatives.

CALDWELL COUNTY

TEXAS A&M AGRILIFE EXTENSION SERVICE

By: _____ Name: Ken Schawe Title: County Judge Date: _____

By: ______ Name: Dr. Parr Rosson Title: Interim Director Date: ______

RECOMMEND APPROVAL:

By: _____ Name: Title:

ATTACHMENT A

Application must be received by: <u>Friday, March 30, 2018</u>. Late or incomplete applications will not be considered.

		County In	formation		
County Name	Caldwell County				· · · · · · · · · · · · · · · · ·
failing Address:	110 S. Main Stree Street Address	et			
	Lockhart		тх		78644
	City			State	Zip Code
hysical Address:	110 S. Main Stree	et			1
	Street Address				
	Lockhart		тх		78644
	City			State	Zip Code
		Contact I)	-	
1) Name of Prima	ry Program Conta	act (This person	can answer da	ty-to-day que	stions about the project.)
Full Name: <u>Mr. Ni</u>	ck Dornak				
Position Title: <u>\</u> Email Address: <u>n</u>	Watershed Services nickdornak@txstate.	.edu			
Email Address: <u>n</u>	Watershed Services			<u>for Water an</u>) 213 -	
Position Title: <u>N</u> Email Address: <u>n</u> Phone: <u>(512</u> (2) Name of Autho	Watershed Services nickdornak@txstate.) 245 - 6697	.edu Ext. s person is autho	_Alt #: <u>(512</u>) 213 -	7389 reements on behalf of the
Position Title: <u>N</u> Email Address: <u>n</u> Phone: <u>(512</u> (2) Name of Author organization. <u>This</u>	Watershed Services hickdornak@txstate.) 245 - 6697 prized Official (This person's name will o	.edu Ext. s person is autho	_Alt #: <u>(512</u>) 213 - into legal ag t for signatur	7389 preements on behalf of the re.)
Position Title: <u>N</u> Email Address: <u>n</u> Phone: <u>(512</u> (2) Name of Author organization. <u>This</u>	Watershed Services hickdornak@txstate.) 245 - 6697 prized Official (This person's name will o	.edu Ext. s person is autho	_Alt #: <u>(512</u>) 213 - into legal ag t for signatur	7389 reements on behalf of the
Position Title: <u>N</u> Email Address: <u>n</u> Phone: <u>(512</u> (2) Name of Author Drganization. <u>This p</u> Full Name: <u>Judge</u>	Watershed Services hickdornak@txstate.) 245 - 6697 prized Official (This person's name will o	.edu Ext. s person is autho	_Alt #: <u>(512</u>) 213 - into legal ag t for signatur	7389 preements on behalf of the re.)
Position Title: <u>N</u> Email Address: <u>n</u> Phone: <u>(512</u> (2) Name of Author organization. <u>This</u> Full Name: <u>Judge</u> Position Title: <u>(</u>	Watershed Services hickdornak@txstate.) 245 - 6697 orized Official (This person's name will of Ken Schawe	edu Ext. s person is autho appear on the gr	_Alt #: <u>(512</u>) 213 - into legal ag t for signatur	7389 preements on behalf of the re.)
Position Title: <u>N</u> Email Address: <u>n</u> Phone: <u>(512</u> (2) Name of Author organization. <u>This p</u> Full Name: <u>Judge</u> Position Title: <u>C</u> Email Address: <u>k</u>	Watershed Services hickdornak@txstate.) 245 - 6697 Drized Official (This person's name will of Ken Schawe County Judge	edu Ext. s person is autho appear on the gr	_Alt #: <u>(512</u>) 213 - into legal ag t for signatur	7389 preements on behalf of the re.)

Previous Participation		
 Has your County previously participated in the feral hog abatement grants? 	X Yes	No No
• If yes, what years? 2012-2017	_	
 Has your County previously received a grant through any TDA feral hog abatemen program? 	X Yes*	
• If yes, what years? 2013, 2014, 2015, 2016		

Project Summary

Caldwell County is requesting a Texas A&M AgriLife Extension Service, Wildlife Services (WS) program County Feral Hog Abatement Grant (grant) in the amount of \$20,000.

Grant funds will be used to develop stakeholder engagement programs and to purchase supplies and equipment toward the goal of reducing the damage and extent of feral hog (*Sus scrofa*) activity in Caldwell County, Texas. This effort will be strengthened and enhanced by Caldwell County's participation in a co-managed, regional feral hog abatement effort with cooperating counties including, Guadalupe and Hays. The grant will enable Caldwell County to take advantage of a regional communication network and share resources with partner counties while also implementing specific mitigation efforts designed for the cultural and land use priorities that make Caldwell County unique.

Caldwell County and its partners are not alone in suffering millions of dollars in damages to property and natural resources from feral hog activity. What sets Caldwell County and our partners apart, however, are the tools and experience each county possesses in grant management, stakeholder engagement and watershed protection that will serve to ensure grant funds achieve program goals. Four watershed protection plans (WPP) are currently being implemented in the three-county region: Cypress Creek WPP and Upper San Marcos River WPP (Hays); Plum Creek WPP (Hays-Caldwell); Geronimo-Alligator Creek WPP (Caldwell). Historic and ongoing impacts to water quality from feral hogs in these watersheds have been well documented. A 12-month Bacterial Source Tracking (BST) study completed for Plum Creek in 2018 demonstrated that non-avian wildlife was the most dominant source of *E. coli* throughout the watershed (Figure 1). Feral hogs are highly suspected to be the driver of wildlife *E. coli* in Plum Creek as well as Geronimo and Alligator Creeks in Guadalupe County due to their active population, biology and behavioral patterns that keep them close to the cool, vegetated riparian areas along streams. More information on the Plum Creek Watershed Protection Plan can be found at http://plumcreek.tamu.edu/.

Each partner county in the proposed regional effort has successfully participated in feral hog management activities, most notable being Caldwell County's Feral Hog Task Force established in 2013, whose ongoing outreach, education and direct abatement efforts have led to the documented removal of over 12,000 feral hogs in Caldwell County and the Plum Creek Watershed.

The establishment of a regional feral hog abatement program for Caldwell, Guadalupe and Hays County through this grant program will produce the following deliverables: (1) a *Central Texas Feral Hog Action and Sustainability Plan;* (2) a centralized website, <u>www.feralhogtaskforce.com</u>, for sharing information about feral hog programs, tracking progress and announcing upcoming opportunities throughout the region with links to existing resources as well as dedicated pages for each partner county; (3) development and allocation of shared resources for participating counties including: a <u>formalized county-level damage</u> <u>assessment</u>, miscellaneous program forms (ex. landowner surveys, bounty participation forms, etc.); (4) equipment sharing cooperatives (ex. remote operated traps); (5) cost-sharing incentive programs (ex.

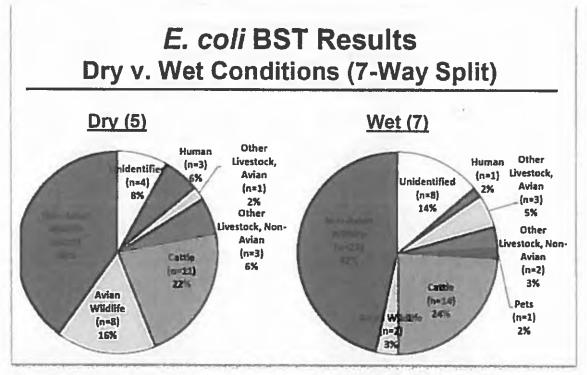


Figure 1. Results of 12-month Plum Creek Watershed, Bacterial Source Tracking Study (Wet versus Dry Conditions) completed by the Plum Creek Watershed Partnership, Hays-Blanco River Authority and the Texas A&M Soil and Aquatic Microbiologic Laboratory.

<u>trapping supplies</u>); (6) coordinated educational programming including <u>three subject-specific webinars</u> AND <u>one county-based workshop for each partner county</u>; and (7) a dynamic social media campaign to enhance program success and expand program reach. Partner counties may also participate in <u>bounty programs</u> and <u>aerial hunting contracts</u>.

Public-private partnerships will serve as a catalyst for greater program impact by leveraging grant funds to expand projects and incentivize stakeholder ownership in the feral hog abatement effort.

Caldwell County and our cooperating partners, Guadalupe Co. and Hays Co., will work with county staff, AgriLife, Texas State University – Meadows Center for Water and the Environment, local business, NGOs and others to coordinate efforts and deliver feral hog abatement programs with <u>a goal of the documented</u> removal of 6,000 feral hogs throughout the region during the project period.

ACTIVITY	WHO IS COMPLETING	TIMELINE	
	THE ACTIVITY	START DATE	END DATE
Grant administration	Caldwell County	5/1/2018	8/31/2018
General project management	Memorandum of Agreement with Texas State University – Meadows Center for Water and the Environment (Meadows)	5/1/2018	8/31/2018

Work Plan

ACTIVITY	WHO IS COMPLETING	TIMELINE	
	THE ACTIVITY	START DATE	END DATE
Four (4) landowner outreach events	Caldwell County, Meadows, Caldwell County AgriLife Extension will coordinate one (1) Caldwell Co. Feral Hog Abatement Workshop. Meadows will develop three (3) 1-hour subject specific webinars.	5/1/2018	8/31/2018
Website development and social media campaign	Meadows	5/1/2018	8/31/2018
Caldwell County Feral Hog Removal Tracking including a County Level Damage and Control Assessment	Meadows (assisted by Caldwell County AgriLife Extension)	5/1/2018	8/31/2018
Remote-operated feral hog trap sharing cooperative	Caldwell County Feral Hog Task Force (assisted by Meadows)	5/1/2018	8/31/2018
Cost-sharing incentive programs including trapping supplies and aerial hunting	Meadows (assisted by Caldwell County AgriLife Extension)	5/1/2018	8/31/2018
Caldwell County Feral Hog Bounty Program	Caldwell County AgriLife Extension (trained and assisted by Meadows)	5/1/2018	8/31/2018
Development of Final Report: Central Texas Feral Hog Action and Sustainability Plan	Meadows	5/1/2018	8/31/2018

Project Results

Documentation of harvested feral hogs through voluntary reporting, grant-funded bounty, equipment sharing and/or aerial hunting programs will be completed by Meadows. This includes a harvest log.

- Remote-operated feral hog trap sharing cooperative Estimated number of hogs to be taken = 100
- Cost-sharing incentive program: trapping supplies Estimated number of hogs to be taken = 120
- Cost-sharing incentive program: professional aerial hunting Services (6 hours) Estimated number of hogs to be taken = 150
- Caldwell County Feral Hog Bounty Program Estimated number of hogs to be taken = 3,000
- Voluntary Reporting Estimated number of hogs to be taken = 200

Total feral hogs estimated to be taken through use of grant funds = 3,570

NOTES: This grant provides a very short timeframe for implementation. <u>Results listed above are for the grant project period only</u>, however, the investment in infrastructure with grant funds will yield results far beyond the reporting period.

Project Oversight

Nick Dornak, Watershed Services Coordinator - Meadows

Nick Dornak is currently the Watershed Services Coordinator for Meadows, has served as Coordinator of the Plum Creek Watershed Partnership from 2012 through 2018 and is the founder and administrator of the Caldwell County Feral Hog Task Force established in 2013. Mr. Dornak has written and/or managed over 25 local, state and federal grants since 2012. A MOA between each partner county (Caldwell, Guadalupe and Hays County, respectively) and Meadows will secure Mr. Dornak's services for regional feral hog abatement network development and project management.

The Caldwell County Auditor's Office will oversee financial terms of the grant. Any payments and reimbursements must be approved by the Caldwell County Judge and/or Caldwell County Commissioners.

Project Budget

Category	Amount	Description
Personnel	\$0.00	n/a
Equipment	\$0.00	n/a
Supplies	\$2,700.00	\$2,000 = Provide up to \$200 toward trapping supplies for 10 program participants. Partner with local retailer. Supplies may include panels, posts, mechanical components, game camera/modem combinations.
		\$700 = Apple iPad with business software and warranty for stakeholder interface when conducting bounty program, surveys, damage reports, workshops, etc. (pilot program).
Contractual	\$3,000.00	Provide up to \$500 per hour toward an aerial hunting services contract. Program participants will be required to cover additional charges.

Total \$7,500. Total \$20,000.00 Projected \$5.60 per feral hog removed		Other	\$14,300.00	 \$5,600 = MOA with Texas State - Meadows Center for Water and the Environment (Meadows) to provide professional services toward the following: Project management; Assistance in coordinating one (1) Caldwell Co. workshop; Development of three (3) 1-hour webinars; Website development and management (utilize and expand existing Guadalupe County Feral Hog Task Force website, www.feralhogtaskforce.com); Develop and manage social media campaign; Feral hog removal tracking; Development and delivery of County Level Damage and Control Assessment; iPad setup, testing and training; Implementation of cost-sharing incentive programs including trapping supplies and aerial control; Assistance with Caldwell County Bounty Program; Development of Final Report. \$1,200 = FY2018 annual service contract for Two (2) Remote-Operated Traps \$7,500 = 50% of bounties paid on 3,000 feral hogs removed from Caldwell County at \$5 per hog. Caldwell County will cover additional
	\bigcirc	Total	\$20,000,00	•

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CALDWELL COUNTY 2018 FERAL HOG PROGRAM PROFESSIONAL SERVICES AGREEMENT

This Caldwell County 2018 Feral Hog Program Professional Services Agreement (hereinafter "Agreement") is entered into on June 15, 2018 and will continue through August 31, 2018, between Caldwell County ("COUNTY"), a political subdivision of the State of Texas, and Texas State University ("TXSTATE") to be performed by the Meadows Center for Water and the Environment.

TXSTATE. Subject to the terms and conditions of this Agreement, the COUNTY hereby engages TXSTATE to perform the services set forth herein and further defined in the Scope of Work, included as "Attachment A" and incorporated herein for all purposes, and TXSTATE hereby accepts such engagement.

Duties, Term, and Compensation. TXSTATE's duties, term of engagement, compensation and provisions for payment thereof shall be as set forth in the attached Scope of Work and the Addendum to Contract, included as "Attachment B", which may be amended in writing and signed by both parties from time to time if agreeable to the COUNTY and TXSTATE.

Expenses. During the term of this Agreement, TXSTATE shall invoice the COUNTY each month, beginning on July 15, 2018, and the COUNTY shall reimburse TXSTATE for reasonable and approved out-of-pocket expenses which are incurred in connection with the performance of the duties hereunder. All Payments should be made in accordance with attached Scope of Work.

Written Reports. The COUNTY may request that project plans, progress reports be provided by TXSTATE on a monthly basis. A final report shall be due at the conclusion of this Agreement and shall be submitted to the COUNTY in a written report at such time. The final report shall be in such form and setting forth such information and data as is reasonably requested by the COUNTY.

Inventions. Any and all inventions, discoveries, developments and innovations conceived by TXSTATE during this engagement relative to the duties under this Agreement shall be the exclusive property of the COUNTY; and TXSTATE hereby assigns all right, title, and interest in the same to the COUNTY. Any and all inventions, discoveries, developments and innovations conceived by TXSTATE prior to the term of this Agreement and utilized by TXSTATE in rendering duties to the COUNTY are hereby licensed to the COUNTY for use in its operations and for an infinite duration. This license is non-exclusive and may be assigned without TXSTATE's prior written approval by the COUNTY to a wholly-owned subsidiary of the COUNTY.

Confidentiality. TXSTATE acknowledges that during the term of this Agreement TXSTATE will have access to and become acquainted with various trade secrets, inventions, innovations, processes; information, records and specifications owned or licensed by the COUNTY and/or used by the COUNTY in connection with the operation of its business including, without limitation, the COUNTY's business and product processes, methods,

customer lists, accounts and procedures. TXSTATE agrees that TXSTATE will not disclose any of the aforesaid, directly or indirectly, or use any of them in any manner, either during the term of this Agreement or at any time thereafter, except as required during this engagement with the COUNTY. All files, records, documents, blueprints, specifications, information, letters, notes, media lists, original artwork/creative, notebooks, and similar items relating to the business of the COUNTY, whether prepared by TXSTATE or otherwise coming into TXSTATE's possession, shall remain the exclusive property of the COUNTY, TXSTATE shall not retain any copies of the foregoing without the COUNTY's prior written permission. Upon the expiration or earlier termination of this Agreement, or whenever requested by the COUNTY, TXSTATE shall immediately deliver to the COUNTY all such files, records, documents, specifications, information, and other items in TXSTATE's possession or under TXSTATE's control. TXSTATE further agrees that TXSTATE will not disclose the terms of this Agreement to any person without the prior written consent of the COUNTY and shall at all times preserve the confidential nature of TXSTATE's relationship to the COUNTY and of the services hereunder.

Conflicts of Interest. TXSTATE represents that TXSTATE is free to enter into this Agreement, and that it does not violate the terms of any agreement between TXSTATE and any third party. Further, TXSTATE, in rendering TXSTATE's duties shall not utilize any invention, discovery, development, improvement, innovation, or trade secret in which TXSTATE does not have a proprietary interest. During the term of this Agreement, TXSTATE shall devote as much of TXSTATE's productive time, energy and abilities to the performance of TXSTATE's duties hereunder as is necessary to perform the required duties in a timely and productive manner. TXSTATE is expressly free to perform services for other parties while performing services for the COUNTY.

Right to Injunction. The parties hereto acknowledge that the services to be rendered by TXSTATE under this Agreement and the rights and privileges granted to the COUNTY under the Agreement are of a special, unique, unusual, and extraordinary character which gives them a peculiar value, the loss of which cannot be reasonably or adequately compensated by damages in any action at law, and the breach by TXSTATE of any of the provisions of this Agreement will cause the COUNTY irreparable injury and damage. TXSTATE expressly agrees that the COUNTY shall be entitled to injunctive and other equitable relief in the event of, or to prevent, a breach of any provision of this Agreement by TXSTATE. Resort to such equitable relief, however, shall not be construed to be a waiver of any other rights or remedies that the COUNTY under this Agreement, or otherwise. The various rights and remedies of the COUNTY under this Agreement, or otherwise, shall be construed to be cumulative, and no one of them shall be exclusive of any other or of any right or remedy allowed by law.

Termination. The COUNTY may terminate this Agreement at any time by 10 working days' written notice to TXSTATE in accordance with the "Notices" section below. In addition, if TXSTATE is convicted of any crime or offense, fails or refuses to comply with the written policies or reasonable directive of the COUNTY, is guilty of serious misconduct in connection with performance hereunder, or materially breaches provisions of this Agreement, the COUNTY at any time may terminate the engagement of TXSTATE immediately and without prior written notice to TXSTATE.

Independent Contractor. This Agreement shall not render TXSTATE an employee, partner, agent of, or joint venture with the COUNTY for any purpose. TXSTATE is and will remain an independent contractor in TXSTATE's relationship to the COUNTY. The COUNTY shall not be responsible for withholding taxes with respect to TXSTATE's compensation hereunder. TXSTATE shall have no claim against the COUNTY hereunder or otherwise for vacation pay, sick leave, retirement benefits, social security, worker's compensation, health or disability benefits, unemployment insurance benefits, or employee benefits of any kind.

Choice of Law. The laws of the state of Texas shall govern the validity of this Agreement, the construction of its terms and the interpretation of the rights and duties of the parties hereto.

Waiver. Waiver by one party hereto of breach of any provision of this Agreement by the other shall not operate or be construed as a continuing waiver.

Assignment. TXSTATE shall not assign any of TXSTATE's rights under this Agreement, or delegate the performance of any of TXSTATE's duties hereunder, without the prior written consent of the COUNTY.

Notices. Any and all notices, demands, or other communications required or desired to be given hereunder by any party shall be in writing and shall be validly given or made to another party if personally served, or if deposited in the United States mail, certified or registered, postage prepaid, return receipt requested. If such notice or demand is served personally, notice shall be deemed constructively made at the time of such personal service. If such notice, demand or other communication is given by mail, such notice shall be conclusively deemed given five days after deposit thereof in the United States mail addressed to the party to whom such notice, demand or other communication is to be given as follows:

Professional Services to be provided by:

Texas State University The Meadows Center for Water and the Environment 601 University Dr. San Marcos, TX 78666

Email: <u>sharla@txstate.edu</u>, <u>nickdornak@txstate.edu</u> Phone: 512-245-9201

Professional Services acquired by:

Caldwell County Attn: County Judge's Office 110 S. Main Street Lockhart, TX 78644

Email: <u>k.schawe@co.caldwell.tx.us</u>, <u>Barbara.gonzales@co.caldwell.tx.us</u>, <u>Jacque.thomas@co.caldwell.tx.us</u> Phone: 512-398-1809

Any party hereto may change its address for purposes of this paragraph by written notice given in the manner provided above.

Modification or Amendment. No amendment, change or modification of this Agreement shall be valid unless in writing and signed by the parties hereto.

Entire Understanding. This Agreement and any attachments or exhibits attached hereto constitute the entire understanding and agreement of the parties, and any and all prior agreements, understandings, and representations are hereby terminated and canceled in their entirety and are of no further force and effect.

Unenforceability of Provisions. If any provision of this Agreement, or any portion thereof, is held to be invalid and unenforceable, then the remainder of this Agreement shall nevertheless remain in full force and effect.

IN WITNESS WHEREOF the undersigned have executed this Agreement as of the day and year first written above. The parties hereto agree that facsimile signatures shall be as effective as if originals.

TEXAS STATE:

CALDWELL COUNTY:

Dan Alden, Director of Procurement and Strategic Sourcing Texas State University Ken Schawe Caldwell County Judge

ATTACHMENT A Scope of Work

Texas State University, the Meadows Center for Water and the Environment ("TXSTATE") will support Caldwell County ("COUNTY") in the completion of deliverables for "Texas A&M AgriLife Extension Feral Hog Abatement Grant – Caldwell County" toward fulfillment of the Interlocal Agreement by and between Caldwell County and Texas A&M AgriLife Extension Service as executed by Caldwell County June 11, 2018.

It is estimated that the Meadows Center can complete the proposed services outlined below for \$2,600, that includes approximately 50 hours of TXSTATE staff time. TXSTATE will bill the COUNTY monthly for work performed.

Specifically, as mutually agreed to in the project's Work Plan timeline and as part of the overarching project tasks, TXSTATE will:

- General Project Management: Project oversight and coordination including progress reports and coordination among County staff for project deliverables.
- Website Development/Social Media Campaign: Revise and update current Caldwell County Feral Hog Task Force website and social media platform.
- Four (4) Landowner Outreach Events: Coordination of one (1) one-hour webinar. Feral Hog Abatement Workshop removed from Scope of Work and Webinars reduced from three to one due to constricted timeline and budgetary changes from original proposal. Extensive feral hog educational workshops have been conducted in Caldwell County over the past 10 years.
- Caldwell County Feral Hog Removal Tracking including a County Level Damage Assessment: With assistance from Caldwell County AgriLife Extension, develop and deliver tracking tool and County Level Damage and Control Assessment. Damage and Control Assessment will be reduced in scope due to constricted timeline and budgetary changes from original proposal.
- **Remote-operated feral hog trap sharing cooperative:** Assist Caldwell County Feral Hog Task Force to update tracking tool for trap sharing cooperative program currently being implemented by the Caldwell County Feral Hog Task Force.
- **Cost-sharing incentive programs trapping supplies and aerial hunting:** PROGRAM REMOVED *due to constricted timeline and budgetary changes from original proposal.*
- Caldwell County Feral Hog Bounty Program: Train and assist Caldwell County AgriLife Extension on conducting Bounty Program. Set up and incorporate new Apple iPad to be purchased by the Caldwell County as a user interface for the Bounty Program.
- Development of Final Report: Central Texas Feral Hog Action and Sustainability Plan: Final Report will be reduced in scope due to constricted timeline and budgetary changes from original proposal.

ATTACHMENT B Addendum to Contract

APPLICABLE LAW: THE LAWS AND CONSTITUTION OF THE STATE OF TEXAS SHALL APPLY.

LIMITATIONS:

The parties acknowledge that they are aware that there are constitutional and statutory limitations on the authority of Texas State University ("Texas State" or "University") to enter into certain terms and conditions of an agreement, including, but not limited to:

- those terms and conditions relating to liens on University's property;
- disclaimers and limitations of warranties;
- disclaimers and !imitations of liability for damages; waivers, disclaimers and limitations of legal rights, remedies, requirements and processes;
- limitations of periods to bring legal action; granting control of litigation or settlement to another party;
- liability for acts or omissions of third parties;
- payment of attorneys' fees; dispute resolution; indemnities; and,
- confidentiality (collectively, the "Limitations").

Terms and conditions related to these "Limitations" will not be binding except to the extent authorized by the laws and Constitution of the State of Texas.

WAIVER OF SOVEREIGN IMMUNITY:

Upon award, the parties specifically agree that (i) neither the execution of the Agreement, nor any other conduct, action or inaction of any representative of Texas State relating to the Agreement constitutes, or is intended to constitute, a waiver of Texas State's, or the state's, sovereign immunity to suit; and (ii) the University has not waived its right to seek redress in the courts.

INDEMNIFICATION:

This section shall apply only to the extent permitted by Texas law. Texas State does not waive any of its constitutional statutory or common law rights, privileges, immunities or defenses under Texas law.

DISPUTE RESOLUTION:

To the extent that Chapter 2260, *Texas Government Code*, is applicable to any resulting agreement and is not preempted by other applicable law, the dispute resolution process provided for in Texas Government Code Chapter 2260 and the related rules adopted by the Texas Attorney General pursuant to Chapter 2260, will be used by the parties to attempt to resolve any claim for breach of contract made that cannot be resolved in the ordinary course of business.

NOTE: In accordance with Texas Education Code, Chp. 51, Sec. 51.9335, Subsection (h): "in any contract for the acquisition of goods and services to which an institution of higher education is a party, a provision required by applicable law to be included in the contract is considered to be part of the executed contract without regard to (1) whether the provisions appear on the face of the contract; or (2) whether the contract includes any provisions to the contrary."

ADHERENCE TO UNIVERSITY POLICIES:

By executing the Agreement, the COUNTY agrees to comply with all University Policies including but not limited to the following and, at a minimum, shall apply to the COUNTY's employees and subcontractors while on the Texas State campus:

- a. On-campus driving and parking;
- b. Prohibition on smoking or tobacco use;
- c. Fire safety;
- d. Hazardous Materials;
- e. Drug-free workplace; and,
- f. Prohibition of sexual harassment, or harassment or discrimination based on race, color, national origin, age, sex, religion, disability, or sexual orientation.

PUBLIC INFORMATION:

University strictly adheres to all statutes, court decisions and the opinions of the Texas Attorney General with respect to disclosure of public information under the Texas Public Information Act, Chapter 552, Texas Government Code. Sponsor is required to make any information created or exchanged with the state pursuant to this contract, which is not otherwise excepted from disclosure under the Texas Public Information Act, available in a format that is accessible by the public at no additional charge to the state. The following format(s) shall be deemed to be in compliance with this provision: electronic files in Word, PDF, or similar generally accessible format.

NONDISCRIMINATION:

In their execution of this agreement, all contractors, subcontractors, their respective employees, and others acting by or through them shall comply with all federal, state, University and the Texas State University System policies and laws prohibiting discrimination, harassment, and sexual misconduct. Any breach of this covenant may result in termination of this agreement.

PAYMENT TERMS:

University will pay for Work performed in accordance with Texas Government Code; Section 2251 "Prompt Payment".

University, an agency of the State of Texas, is exempt from Texas Sales & Use Tax on the Work in accordance with Section 151.309, Texas Tax Code, and Title 34 Texas Administrative Code ("TAC") Section 3.322.

15. Discussion/Action authorizing the County Judge to execute the Caldwell County Justice Center Low Impact Development Education Professional Services Agreement with Texas State Meadows Center for Water and the Environment. Cost: None; Speaker: Judge Schawe/Nick Dornak; Backup: 7.

CALDWELL COUNTY JUSTICE CENTER LOW IMPACT DEVELOPMENT EDUCATION PROFESSIONAL SERVICES AGREEMENT

This Caldwell County Justice Center Low Impact Development Education Professional Services Agreement (hereinafter "Agreement") is entered into on June 15, 2018 and will continue through March 31, 2019, between Caldwell County ("COUNTY"), a political subdivision of the State of Texas, and Texas State University ("TXSTATE") to be performed by the Meadows Center for Water and the Environment.

TXSTATE. Subject to the terms and conditions of this Agreement, the COUNTY hereby engages TXSTATE to perform the services set forth herein and further defined in the Scope of Work, included as "Attachment A" and incorporated herein for all purposes, and TXSTATE hereby accepts such engagement.

Duties, Term, and Compensation. TXSTATE's duties, term of engagement, compensation and provisions for payment thereof shall be as set forth in the attached Scope of Work and the Addendum to Contract, included as "Attachment B", which may be amended in writing and signed by both parties from time to time if agreeable to the COUNTY and TXSTATE.

Expenses. During the term of this Agreement, TXSTATE shall invoice the COUNTY each quarter, beginning on August 15, 2018, and the COUNTY shall reimburse TXSTATE for reasonable and approved out-of-pocket expenses which are incurred in connection with the performance of the duties hereunder. All Payments should be made in accordance with attached Scope of Work.

Written Reports. The COUNTY may request that project plans, progress reports be provided by TXSTATE on a monthly basis. A final report shall be due at the conclusion of this Agreement and shall be submitted to the COUNTY in a written report at such time. The final report shall be in such form and setting forth such information and data as is reasonably requested by the COUNTY.

Inventions. Any and all inventions, discoveries, developments and innovations conceived by TXSTATE during this engagement relative to the duties under this Agreement shall be the exclusive property of the COUNTY; and TXSTATE hereby assigns all right, title, and interest in the same to the COUNTY. Any and all inventions, discoveries, developments and innovations conceived by TXSTATE prior to the term of this Agreement and utilized by TXSTATE in rendering duties to the COUNTY are hereby licensed to the COUNTY for use in its operations and for an infinite duration. This license is non-exclusive and may be assigned without TXSTATE's prior written approval by the COUNTY to a wholly-owned subsidiary of the COUNTY.

Confidentiality. TXSTATE acknowledges that during the term of this Agreement TXSTATE will have access to and become acquainted with various trade secrets, inventions, innovations, processes; information, records and specifications owned or licensed by the COUNTY and/or used by the COUNTY in connection with the operation of its business including, without limitation, the COUNTY's business and product processes, methods, customer lists, accounts and procedures. TXSTATE agrees that TXSTATE will not disclose any of the aforesaid, directly or indirectly, or use any of them in any manner, either during the term of this Agreement or at any time thereafter, except as required during this engagement with the COUNTY. All files, records, documents, blueprints, specifications, information, letters, notes, media lists, original artwork/creative, notebooks, and similar items relating to the business of the COUNTY, whether prepared by TXSTATE or otherwise coming into TXSTATE's possession, shall remain the exclusive property of the COUNTY, TXSTATE shall not retain any copies of the foregoing without the COUNTY's prior written permission. Upon the expiration or earlier termination of this Agreement, or whenever requested by the COUNTY, TXSTATE shall immediately deliver to the COUNTY all such files, records, documents, specifications, information, and other items in TXSTATE's possession or under TXSTATE's control. TXSTATE further agrees that TXSTATE will not disclose the terms of this Agreement to any person without the prior written consent of the COUNTY and shall at all times preserve the confidential nature of TXSTATE's relationship to the COUNTY and of the services hereunder.

Conflicts of Interest. TXSTATE represents that TXSTATE is free to enter into this Agreement, and that it does not violate the terms of any agreement between TXSTATE and any third party. Further, TXSTATE, in rendering TXSTATE's duties shall not utilize any invention, discovery, development, improvement, innovation, or trade secret in which TXSTATE does not have a proprietary interest. During the term of this Agreement, TXSTATE shall devote as much of TXSTATE's productive time, energy and abilities to the performance of TXSTATE's duties hereunder as is necessary to perform the required duties in a timely and productive manner. TXSTATE is expressly free to perform services for other parties while performing services for the COUNTY.

Right to Injunction. The parties hereto acknowledge that the services to be rendered by TXSTATE under this Agreement and the rights and privileges granted to the COUNTY under the Agreement are of a special, unique, unusual, and extraordinary character which gives them a peculiar value, the loss of which cannot be reasonably or adequately compensated by damages in any action at law, and the breach by TXSTATE of any of the provisions of this Agreement will cause the COUNTY irreparable injury and damage. TXSTATE expressly agrees that the COUNTY shall be entitled to injunctive and other equitable relief in the event of, or to prevent, a breach of any provision of this Agreement by TXSTATE. Resort to such equitable relief, however, shall not be construed to be a waiver of any other rights or remedies that the COUNTY under this Agreement, or otherwise. The various rights and remedies of the COUNTY under this Agreement, or otherwise, shall be construed to be cumulative, and no one of them shall be exclusive of any other or of any right or remedy allowed by law.

Termination. The COUNTY may terminate this Agreement at any time by 10 working days' written notice to TXSTATE in accordance with the "Notices" section below. In addition, if TXSTATE is convicted of any crime or offense, fails or refuses to comply with the written policies or reasonable directive of the COUNTY, is guilty of serious misconduct in connection with performance hereunder, or materially breaches provisions of this Agreement, the COUNTY at any time may terminate the engagement of TXSTATE immediately and without prior written notice to TXSTATE.

Independent Contractor. This Agreement shall not render TXSTATE an employee, partner, agent of, or joint venture with the COUNTY for any purpose. TXSTATE is and will remain an independent contractor in TXSTATE's relationship to the COUNTY. The COUNTY shall not be responsible for withholding taxes with respect to TXSTATE's compensation hereunder. TXSTATE shall have no claim against the COUNTY hereunder or otherwise for vacation pay, sick leave, retirement benefits, social security, worker's compensation, health or disability benefits, unemployment insurance benefits, or employee benefits of any kind.

Choice of Law. The laws of the state of Texas shall govern the validity of this Agreement, the construction of its terms and the interpretation of the rights and duties of the parties hereto.

Waiver. Waiver by one party hereto of breach of any provision of this Agreement by the other shall not operate or be construed as a continuing waiver.

Assignment. TXSTATE shall not assign any of TXSTATE's rights under this Agreement, or delegate the performance of any of TXSTATE's duties hereunder, without the prior written consent of the COUNTY.

Notices. Any and all notices, demands, or other communications required or desired to be given hereunder by any party shall be in writing and shall be validly given or made to another party if personally served, or if deposited in the United States mail, certified or registered, postage prepaid, return receipt requested. If such notice or demand is served personally, notice shall be deemed constructively made at the time of such personal service. If such notice, demand or other communication is given by mail, such notice shall be conclusively deemed given five days after deposit thereof in the United States mail addressed to the party to whom such notice, demand or other communication is to be given as follows:

Professional Services to be provided by:

Texas State University The Meadows Center for Water and the Environment 601 University Dr. San Marcos, TX 78666

Email: <u>sharla@txstate.edu</u>, <u>nickdornak@txstate.edu</u> Phone: 512-245-9201

Professional Services acquired by:

Caldwell County Attn: County Judge's Office 110 S. Main Street Lockhart, TX 78644

Email: <u>k.schawe@co.caldwell.tx.us</u>, <u>Barbara.gonzales@co.caldwell.tx.us</u>, <u>Jacque.thomas@co.caldwell.tx.us</u> Phone: 512-398-1809

Any party hereto may change its address for purposes of this paragraph by written notice given in the manner provided above.

Modification or Amendment. No amendment, change or modification of this Agreement shall be valid unless in writing and signed by the parties hereto.

Entire Understanding. This Agreement and any attachments or exhibits attached hereto constitute the entire understanding and agreement of the parties, and any and all prior agreements, understandings, and representations are hereby terminated and canceled in their entirety and are of no further force and effect.

Unenforceability of Provisions. If any provision of this Agreement, or any portion thereof, is held to be invalid and unenforceable, then the remainder of this Agreement shall nevertheless remain in full force and effect.

IN WITNESS WHEREOF the undersigned have executed this Agreement as of the day and year first written above. The parties hereto agree that facsimile signatures shall be as effective as if originals.

TEXAS STATE:

CALDWELL COUNTY:

Dan Alden, Director of Procurement and Strategic Sourcing Texas State University Ken Schawe Caldwell County Judge

ATTACHMENT A Scope of Work

Texas State University, the Meadows Center for Water and the Environment ("TXSTATE") will support Caldwell County ("COUNTY") in the completion of deliverables for "Plum Creek Watershed Protection Plan Implementation of Low Impact Development (LID) for the Caldwell County Justice Center" toward fulfillment of TCEQ Contract No. 582-16-60279 as amended and executed December 15, 2017.

It is estimated that the Meadows Center can complete the proposed services outlined below for \$12,000, which includes approximately 200 hours of TXSTATE staff time. TXSTATE will invoice the COUNTY on a quarterly basis for work performed.

Specifically, as mutually agreed to in the project's Quarterly Progress Report (QPR) timeline and as part of the overarching project tasks, TXSTATE will:

- Task 3: develop a tri-fold brochure about the project detailing individual LID components implemented at the Caldwell County Justice Center
- Task 3: develop permanent signage that provides information about LID components implemented at the Caldwell County Justice Center
- Task 3: organize and conduct two site tours for schools in the watershed and surrounding area
- Task 4: final Report

List of Deliverables:

- Design and print tri-fold brochures (500)
- Design and purchase permanent signage
 - 20 5in. by 8in. plastic signs for native plant identification
 - 5 1ft. by 1ft. engraved metal signs, one for each LID component
 - 1 framed poster to be displayed in lobby of CCJC
- Documentation of two site tours for schools
- Final Report
 - Draft Final Report
 - Address TCEQ/EPA Comments
 - Final Report

ATTACHMENT B Addendum to Contract

APPLICABLE LAW: THE LAWS AND CONSTITUTION OF THE STATE OF TEXAS SHALL APPLY.

LIMITATIONS:

The parties acknowledge that they are aware that there are constitutional and statutory limitations on the authority of Texas State University ("Texas State" or "University") to enter into certain terms and conditions of an agreement, including, but not limited to:

- those terms and conditions relating to liens on University's property;
- disclaimers and limitations of warranties;
- disclaimers and !imitations of liability for damages; waivers, disclaimers and limitations of legal rights, remedies, requirements and processes;
- limitations of periods to bring legal action; granting control of litigation or settlement to another party;
- liability for acts or omissions of third parties;
- payment of attorneys' fees; dispute resolution; indemnities; and,
- confidentiality (collectively, the "Limitations").

Terms and conditions related to these "Limitations" will not be binding except to the extent authorized by the laws and Constitution of the State of Texas.

WAIVER OF SOVEREIGN IMMUNITY:

Upon award, the parties specifically agree that (i) neither the execution of the Agreement, nor any other conduct, action or inaction of any representative of Texas State relating to the Agreement constitutes, or is intended to constitute, a waiver of Texas State's, or the state's, sovereign immunity to suit; and (ii) the University has not waived its right to seek redress in the courts.

INDEMNIFICATION:

This section shall apply only to the extent permitted by Texas law. Texas State does not waive any of its constitutional statutory or common law rights, privileges, immunities or defenses under Texas law.

DISPUTE RESOLUTION:

To the extent that Chapter 2260, *Texas Government Code*, is applicable to any resulting agreement and is not preempted by other applicable law, the dispute resolution process provided for in Texas Government Code Chapter 2260 and the related rules adopted by the Texas Attorney General pursuant to Chapter 2260, will be used by the parties to attempt to resolve any claim for breach of contract made that cannot be resolved in the ordinary course of business.

NOTE: In accordance with Texas Education Code, Chp. 51, Sec. 51.9335, Subsection (h): "in any contract for the acquisition of goods and services to which an institution of higher education is a party, a provision required by applicable law to be included in the contract is considered to be part of the executed contract without regard to (1) whether the provisions appear on the face of the contract; or (2) whether the contract includes any provisions to the contrary."

ADHERENCE TO UNIVERSITY POLICIES:

By executing the Agreement, the COUNTY agrees to comply with all University Policies including but not limited to the following and, at a minimum, shall apply to the COUNTY's employees and subcontractors while on the Texas State campus:

- a. On-campus driving and parking;
- b. Prohibition on smoking or tobacco use;
- c. Fire safety;
- d. Hazardous Materials;
- e. Drug-free workplace; and,
- f. Prohibition of sexual harassment, or harassment or discrimination based on race, color, national origin, age, sex, religion, disability, or sexual orientation.

PUBLIC INFORMATION:

University strictly adheres to all statutes, court decisions and the opinions of the Texas Attorney General with respect to disclosure of public information under the Texas Public Information Act, Chapter 552, Texas Government Code. Sponsor is required to make any information created or exchanged with the state pursuant to this contract, which is not otherwise excepted from disclosure under the Texas Public Information Act, available in a format that is accessible by the public at no additional charge to the state. The following format(s) shall be deemed to be in compliance with this provision: electronic files in Word, PDF, or similar generally accessible format.

NONDISCRIMINATION:

In their execution of this agreement, all contractors, subcontractors, their respective employees, and others acting by or through them shall comply with all federal, state, University and the Texas State University System policies and laws prohibiting discrimination, harassment, and sexual misconduct. Any breach of this covenant may result in termination of this agreement.

PAYMENT TERMS:

University will pay for Work performed in accordance with Texas Government Code; Section 2251 "Prompt Payment".

University, an agency of the State of Texas, is exempt from Texas Sales & Use Tax on the Work in accordance with Section 151.309, Texas Tax Code, and Title 34 Texas Administrative Code ("TAC") Section 3.322.

 16. Discussion/Action to execute the Department of State Access contract and HHS Enterprise Data Use Agreement. Cost: None; Speaker: Judge Schawe; Backup: 34.

Contract Number: HHSREV100000785

DEPARTMENT OF STATE HEALTH SERVICES



Contract number HHSREV100000785 (the "Contract"), is entered into by Department of State Health Services ("DSHS") Vital Statistics Section and Caldwell County ("Contractor"). DSHS and Contractor are collectively referred to herein as the "Parties."

- I. <u>Purpose of the Contract.</u> DSHS agrees to provide access to the DSHS Vital Event Electronic Registration System for the purpose of issuing individual birth certificates.
- II. <u>Term of the Contract.</u> This Contract will begin on September 1, 2018, and end on August 31, 2023.
- **III.** <u>Authority.</u> The Parties enter into this Contract under the authority of Texas Health and Safety Code Chapter 191 and Texas Government Code Chapter 791.

IV. Statement of Work.

- A. DSHS agrees to provide on-line computer services in support of Contractor from 7:00 a.m. to 6:00 p.m. (CST) Monday through Friday, except holidays. In the event of an emergency or computer application error, DSHS may temporarily suspend services without advance notice.
- **B.** Contractor may search DSHS databases, locate data, and issue Certifications of Birth to authorized individuals requesting such data. The certifications will be in a format formally approved by DSHS. Contractor will take reasonable efforts to ensure use of the DSHS Vital Event Electronic Registration System is not abused by its staff. Abuse of the access to confidential information in the DSHS Vital Event Electronic Registration System may be cause for termination of this Contract in accordance with Section IX.K.
- C. Contractor will acquire the necessary data processing equipment, communications, hardware or software, and purchase "bank note" paper, as specified by DSHS. DSHS will assist in connection of the equipment, furnish software program and provide technical assistance, if necessary.
- **D.** Contractor will complete the DSHS Vital Event Electronic Registration System registration forms as specified by DSHS. Contractor will remain in compliance with any requirements specified by DSHS for accessing the DSHS Vital Event Electronic Registration System. Contractor will not be required to pay an additional fee pursuant to this Subsection.
- **E.** Contractor acknowledges that records may not be located in the searching process instituted by Contractor, or records which are located may have errors due to:

VSS Remote Birth Access Page 1

- 1. Normal key-entry errors in spellings;
- 2. Accidental failure on the part of the DSHS to update a file for an amendment or paternity determination; and
- 3. The event year does not exist on the system.
- **F.** Contractor will notify DSHS in writing, at least monthly of errors or suspected errors that exist on the database information.
- **G.** Contractor is to maintain an inventory control and account for each document produced on "bank note" paper, including voided documents.
- H. Contractor will issue Certificates of Birth utilizing remote access to the DSHS system in conformance with Health and Safety Code Chapters 191, 192 and 195, as well as 25 Tex. Admin. Code Chapter 181.
- I. The Parties are required to comply with all applicable state and federal laws relating to the privacy and confidentiality of this data and records, which includes Texas Government Code Section 552.115.
- J. The Parties will use confidential records and information obtained under this Contract only for purposes as described in this Contract and as otherwise allowed by law.

V. Fees.

Contractor agrees to pay DSHS ONE DOLLAR AND EIGHTY-THREE CENTS (\$1.83) for each Certification of Vital Record printed as a result of searches of the database. Contractor agrees to charge the same base search fee for a birth certificate as DSHS. Additional fees may only be charged as authorized by Texas Health and Safety Code Chapter 191 and 25 Tex. Admin. Code Chapter 181.

VI. Billing.

A. DSHS will send an itemized billing to Contractor on a monthly basis for each Certification of Birth printed. This billing will be sent through the U.S. Postal Service to the Contractor at:

Name:	Caldwell County Clerk's Office
Address:	1703 S. Colorado St., Box 1, Ste. 1200 Lockhart, TX 78644

B. Contractor will direct any billing inquiries either by phone to 512-776-7206 or email to <u>vsubusinessservices@dshs.state.tx.us</u>.

VII. Payment Method.

- A. Contractor will remit payment to DSHS within thirty days after a billing is received by them. Payment by the Contractor will be considered made on the date postmarked.
- **B.** Contractor will send payments to DSHS at:

Texas Department of State Health Services Cash Receipts Branch MC 2096 P.O. Box 149347 Austin, TX 78714-9347

- C. Contractor will make payment to DSHS out of its current revenues.
- VIII. <u>Representatives</u>. The following will act as the Representative authorized to administer activities under this Contract on behalf of their respective Party.

Caldwell County Clerk's Office	DSHS
Caldwell County	Texas Department of State Health Services
Caldwell County Clerk	Contract Management Section
Attn: Carol Holcomb	Attn: Kathleen Uptmor
	Mail Code 1990
1703 S. Colorado St., Box 1, Ste. 1200	P.O. Box 149347
Lockhart, TX 78644	Austin, TX 78714-9347
Phone: (512) 398-1824	Phone: (512) 776-3945
Email: carol.holcomb@co.caldwell.tx.us	Email: Kathleen.Uptmor@dshs.texas.gov

IX. General Terms and Conditions.

- A. <u>Governing Law.</u> Regarding all issues related to this Contract's formation, performance, interpretation, and any issues that may arise in any dispute between the parties, the Contract will be governed by and construed in accordance with the laws of the State of Texas.
- **B.** <u>Amendment.</u> This Contract may be modified by written amendment signed by the Parties.

C. Confidentiality.

The Parties are required to comply with all applicable state and federal laws relating to the privacy and confidentiality of records that contain Personal Identifying Information (PII) or Personally Sensitive Information (PSI) or other information or records made confidential by law, including Tex. Bus. & Comm. Code Section 521.002. The attached Data Use Agreement (Attachment A) applies to this Contract.

VSS Remote Birth Access Page 3

- **D.** <u>Exchange of Personal Identifying Information</u>. This Contract concerns personal identifying information. Except as prohibited by other law, Contractor and DSHS may exchange PII without consent, in accordance with Chapter 191 of the Health and Safety Code.
- E. <u>Records Retention</u>. DSHS will retain records in accordance with DSHS State of Texas Records Retention Schedule at <u>http://www.dshs.texas.gov/records/schedules.shtm</u>, Department Rules and other applicable state and federal statutes and regulations governing medical, mental health, and substance abuse information.
- **F.** <u>Severability</u>. If any provision of this Contract is construed to be illegal or invalid, the illegal or invalid provision will be deemed stricken and deleted to the same extent and effect as if never incorporated, but all other provisions will continue.
- G. <u>Notice</u>. Any notice required or permitted to be given under this Contract will be in writing and sent to the respective Party's Representative in Section VIII. Notice will be deemed to have been received by a Party on the third business day after the date on which it was mailed to the Party at the address specified in writing by the Party to the other Party, or, if sent by certified mail, on the date of receipt.
- **H.** <u>Waiver</u>. Acceptance by either Party of partial performance or failure to complain of any action, non-action or default under this Contract will not constitute a waiver of either Party's rights under the Contract.
- I. <u>Assignment.</u> Neither DSHS nor Contractor will transfer, assign, or sell its interest, in whole or in part, in this Contract without prior written consent by both Parties.
- J. <u>Suspension of Services Under This Contract</u>. In the event of an emergency or information technology system failure, DSHS may temporarily suspend services without advance notice. Use of services for purposes inconsistent with applicable law may also result in a suspension of services.

K. <u>Termination</u>.

- 1. Convenience. This Contract may be terminated by mutual agreement of the Parties. Either Party may terminate this Contract without cause by giving 30 days written notice of its intent to terminate to the non-terminating Party.
- 2. Cause. This Contract may be terminated for cause by either Party for breach or failure to perform an essential requirement of the Contract. Use of services for purposes inconsistent with applicable law may be cause for Contract termination.
- 3. Notice of Termination. Written notice may be sent by any method that provides verification of receipt, which will be calculated from the date of receipt by the non-terminating Party's Representative provided in Section VIII.

Contract Number: HHSREV100000785

4. Equitable Settlement. At the end of the Term of this Contract or termination as provided for in this Section, the Parties will equitably settle their respective accrued interests or obligations incurred prior to termination.

By signing below, the Parties agree that this Contract constitutes the entire legal and binding agreement between them. The Parties acknowledge that they have read the Contract and agree to its terms, and that the persons whose signatures appear below have the authority to execute this Contract on behalf of their respective Party.

DEPARTMENT OF STATE HEALTH SERVICES

Manda Hall, M.D. Associate Commissioner Department of State Health Services

CALDWELL COUNTY

Carol Holcomb County Clerk Caldwell County

Date

THE FOLLOWING ATTACHMENTS ARE ATTACHED AND INCORPORATED AS PART OF THE CONTRACT HHSREV100000785:

ATTACHMENT A- DATA USE AGREEMENT

ATTACHMENT A - DATA USE AGREEMENT

DATA USE AGREEMENT BETWEEN THE TEXAS HEALTH AND HUMAN SERVICES ENTERPRISE AND CALDWELL COUNTY ("CONTRACTOR")

This Data Use Agreement ("DUA") is incorporated into System Agency Contract No. HHSREV100000785 (the "Base Contract") between the Texas Department of State Health Services ("System Agency") and Caldwell County ("Contractor").

ARTICLE 1. PURPOSE; APPLICABILITY; ORDER OF PRECEDENCE

ATTACHMENT 1. The purpose of this DUA is to facilitate creation, receipt, maintenance, use, disclosure or access to <u>Confidential Information</u> with Contractor, and describe Contractor's rights and obligations with respect to the <u>Confidential Information</u> and the limited purposes for which the Contractor may create, receive, maintain, use, disclose or have access to <u>Confidential Information</u>. 45 CFR 164.504(e)(1)-(3). This DUA also describes System Agency's remedies in the event of Contractor's noncompliance with its obligations under this DUA. This DUA applies to both <u>Business Associates</u> and contractors who are not <u>Business Associates</u> who create, receive, maintain, use, disclose or have access to <u>Confidential Information</u>.

As of the Effective Date of the Contract, if any provision of the Base Contract, including any General Provisions or Uniform Terms and Conditions, conflicts with this DUA, this DUA controls.

ARTICLE 2. DEFINITIONS

For the purposes of this DUA, **capitalized**, **underlined terms have the meanings set forth in the following:** Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 (42 U.S.C. §1320d, *et seq.*) and regulations thereunder in 45 CFR Parts 160 and 164, including all amendments, regulations and guidance issued thereafter; The Social Security Act, including Section 1137 (42 U.S.C. §§ 1320b-7), Title XVI of the Act; The Privacy Act of 1974, as amended by the Computer Matching and Privacy Protection Act of 1988, 5 U.S.C. § 552a and regulations and guidance thereunder; Internal Revenue Code, Title 26 of the United States Code and regulations and publications adopted under that code, including IRS Publication 1075; OMB Memorandum 07-18; Texas Business and Commerce Code Ch. 521; Texas Government Code, Ch. 552, and Texas Government Code §2054.1125. In addition, the following terms in this DUA are defined as follows:

"<u>Authorized Purpose</u>" means the specific purpose or purposes described in the <u>Scope of Work</u> of the Base Contract for Contractor to fulfill its obligations under the Base Contract, or any other purpose expressly authorized by System Agency in writing in advance.

"Authorized User" means a Person:

(1) Who is authorized to create, receive, maintain, have access to, process, view, handle, examine, interpret, or analyze <u>Confidential Information</u> pursuant to this DUA;

(2) For whom Contractor warrants and represents has a demonstrable need to create, receive, maintain, use, disclose or have access to the <u>Confidential Information</u>; and

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(3) Who has agreed in writing to be bound by the disclosure and use limitations pertaining to the <u>Confidential Information</u> as required by this DUA.

"<u>Confidential Information</u>" means any communication or record (whether oral, written, electronically stored or transmitted, or in any other form) provided to or made available to Contractor or that Contractor may create, receive, maintain, use, disclose or have access to on behalf of System Agency that consists of or includes any or all of the following:

(1) <u>Client Information;</u>

(2) <u>Protected Health Information</u> in any form including without limitation, <u>Electronic</u> <u>Protected Health Information</u> or <u>Unsecured Protected Health Information</u>;

(3) <u>Sensitive Personal Information defined by Texas Business and Commerce Code Ch. 521;</u>

(4) <u>Federal Tax Information;</u>

(5) <u>Personally Identifiable Information;</u>

(6) <u>Social Security Administration Data</u>, including, without limitation, Medicaid information;

(7) All privileged work product;

(8) All information designated as confidential under the constitution and laws of the State of Texas and of the United States, including the Texas Health & Safety Code and the Texas Public Information Act, Texas Government Code, Chapter 552.

"Legally Authorized Representative" of the Individual, as defined by Texas law, including as provided in 45 CFR 435.923 (Medicaid); 45 CFR 164.502(g)(1) (HIPAA); Tex. Occ. Code § 151.002(6); Tex. H. & S. Code §166.164; Estates Code Ch. 752 and Texas Prob. Code § 3.

ARTICLE 3. CONTRACTOR'S DUTIES REGARDING CONFIDENTIAL INFORMATION

Section 3.01 Obligations of Contractor

Contractor agrees that:

(A) Contractor will exercise reasonable care and no less than the same degree of care Contractor uses to protect its own confidential, proprietary and trade secret information to prevent any portion of the <u>Confidential Information</u> from being used in a manner that is not expressly an <u>Authorized Purpose</u> under this DUA or as <u>Required by Law</u>. 45 CFR 164.502(b)(1); 45 CFR 164.514(d)

(B) Contractor will not, without System Agency's prior written consent, disclose or allow access to any portion of the <u>Confidential Information</u> to any <u>Person</u> or other entity, other than <u>Authorized User's</u> <u>Workforce</u> or <u>Subcontractors</u> of Contractor who have completed training in confidentiality, privacy, security and the importance of promptly reporting any <u>Event</u> or <u>Breach</u> to Contractor's management, to carry out the <u>Authorized Purpose</u> or as <u>Required by Law</u>.

System Agency, at its election, may assist Contractor in training and education on specific or unique System Agency processes, systems or requirements. Contractor will produce evidence of completed training to System Agency upon request. 45 C.F.R. 164.308(a)(5)(i); Texas Health & Safety Code §181.101

(C) Contractor will establish, implement and maintain appropriate sanctions against any member of its <u>Workforce</u> or <u>Subcontractor</u> who fails to comply with this DUA, the Base Contract or applicable law. Contractor will maintain evidence of sanctions and produce it to System Agency upon request. 45 C.F.R. 164.308(a)(1)(ii)(C); 164.530(e); 164.410(b); 164.530(b)(1)

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(D) Contractor will not, without prior written approval of System Agency, disclose or provide access to any <u>Confidential Information</u> on the basis that such act is <u>Required by Law</u> without notifying System Agency so that System Agency may have the opportunity to object to the disclosure or access and seek appropriate relief. If System Agency objects to such disclosure or access, Contractor will refrain from disclosing or providing access to the <u>Confidential Information</u> until System Agency has exhausted all alternatives for relief. *45 CFR 164.504(e)(2)(ii)(A)*

(E) Contractor will not attempt to re-identify or further identify <u>Confidential Information</u> or <u>De-identified</u> Information, or attempt to contact any <u>Individuals</u> whose records are contained in the <u>Confidential Information</u>, except for an <u>Authorized Purpose</u>, without express written authorization from System Agency or as expressly permitted by the Base Contract. 45 CFR 164.502(d)(2)(i) and (ii) Contractor will not engage in prohibited marketing or sale of <u>Confidential Information</u>. 45 CFR 164.501, 164.508(a)(3) and (4); Texas Health & Safety Code Ch. 181.002

(F) Contractor will not permit, or enter into any agreement with a <u>Subcontractor</u> to, create, receive, maintain, use, disclose, have access to or transmit <u>Confidential Information</u>, on behalf of Contractor without requiring that <u>Subcontractor</u> first execute the Form Subcontractor Agreement, <u>Attachment 1</u>, which ensures that the <u>Subcontractor</u> will comply with the identical terms, conditions, safeguards and restrictions as contained in this DUA for PHI and any other relevant <u>Confidential Information</u> and which permits more strict limitations; and 45 CFR 164.502(e)(1)(1)(ii); 164.504(e)(1)(i) and (2)

(G) Contractor is directly responsible for compliance with, and enforcement of, all conditions for creation, maintenance, use, disclosure, transmission and <u>Destruction</u> of <u>Confidential Information</u> and the acts or omissions of <u>Subcontractors</u> as may be reasonably necessary to prevent unauthorized use. 45 CFR 164.504(e)(5); 42 CFR 431.300, et seq.

(H) If Contractor maintains <u>PHI</u> in a <u>Designated Record Set</u>, Contractor will make <u>PHI</u> available to System Agency in a <u>Designated Record Set</u> or, as directed by System Agency, provide <u>PHI</u> to the <u>Individual</u>, or <u>Legally Authorized Representative</u> of the <u>Individual</u> who is requesting <u>PHI</u> in compliance with the requirements of the <u>HIPAA Privacy Regulations</u>. Contractor will make other <u>Confidential Information</u> in Contractor's possession available pursuant to the requirements of <u>HIPAA</u> or other applicable law upon a determination of a <u>Breach</u> of <u>Unsecured PHI</u> as defined in <u>HIPAA</u>. 45 CFR 164.524 and 164.504(e)(2)(ii)(E)

(I) Contractor will make <u>PHI</u> as required by <u>HIPAA</u> available to System Agency for amendment and incorporate any amendments to this information that System Agency directs or agrees to pursuant to the <u>HIPAA</u>. 45 CFR 164.504(e)(2)(ii)(E) and (F)

(J) Contractor will document and make available to System Agency the <u>PHI</u> required to provide access, an accounting of disclosures or amendment in compliance with the requirements of the <u>HIPAA Privacy Regulations</u>. 45 CFR 164.504(e)(2)(ii)(G) and 164.528

(K) If Contractor receives a request for access, amendment or accounting of <u>PHI</u> by any <u>Individual</u> subject to this DUA, it will promptly forward the request to System Agency; however, if it would violate <u>HIPAA</u> to forward the request, Contractor will promptly notify of the request and of Contractor's response. Unless Contractor is prohibited by law from forwarding a request, System Agency will respond to all such requests, unless System Agency has given prior written consent for Contractor to respond to and account for all such requests. 45 CFR 164.504(e)(2)

(L) Contractor will provide, and will cause its <u>Subcontractors</u> and agents to provide, to System Agency periodic written certifications of compliance with controls and provisions relating to information privacy, security and breach notification, including without limitation information related to

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data transfers and the handling and disposal of <u>Confidential Information</u>. 45 CFR 164.308; 164.530(c); 1 TAC 202

(M) Except as otherwise limited by this DUA, the Base Contract, or law applicable to the <u>Confidential Information</u>, Contractor may use or disclose <u>PHI</u> for the proper management and administration of Contractor or to carry out Contractor's legal responsibilities if: 45 CFR 164.504(e)(ii)(1)(A)

(1) Disclosure is <u>Required by Law</u>, provided that Contractor complies with Section 3.01(D);

(2) Contractor obtains reasonable assurances from the <u>Person</u> to whom the information is disclosed that the <u>Person</u> will:

(a) Maintain the confidentiality of the Confidential Information in accordance with this DUA;

(b) Use or further disclose the information only as <u>Required by Law</u> or for the <u>Authorized</u> <u>Purpose</u> for which it was disclosed to the <u>Person</u>; and

(c) Notify Contractor in accordance with Section 4.01 of any <u>Event</u> or <u>Breach</u> of <u>Confidential</u> <u>Information</u> of which the <u>Person</u> discovers or should have discovered with the exercise of reasonable diligence. 45 CFR 164.504(e)(4)(ii)(B)

(N) Except as otherwise limited by this DUA, Contractor will, if requested by System Agency, use <u>PHI</u> to provide data aggregation services to System Agency, as that term is defined in the <u>HIPAA</u>, 45 C.F.R. §164.501 and permitted by <u>HIPAA</u>. 45 CFR 164.504(e)(2)(i)(B)

(0)Contractor will, on the termination or expiration of this DUA or the Base Contract, at its expense, return to System Agency or Destroy, at System Agency's election, and to the extent reasonably feasible and permissible by law, all Confidential Information received from System Agency or created or maintained by Contractor or any of Contractor's agents or Subcontractors on System Agency's behalf if that data contains Confidential Information. Contractor will certify in writing to System Agency that all the Confidential Information that has been created, received, maintained, used by or disclosed to Contractor, has been Destroyed or returned to System Agency, and that Contractor and its agents and Subcontractors have retained no copies thereof. Notwithstanding the foregoing, Contractor acknowledges and agrees that it may not Destroy any Confidential Information if federal or state law, or System Agency record retention policy or a litigation hold notice prohibits such <u>Destruction</u>. If such return or Destruction is not reasonably feasible, or is impermissible by law, Contractor will immediately notify System Agency of the reasons such return or Destruction is not feasible, and agree to extend indefinitely the protections of this DUA to the Confidential Information and limit its further uses and disclosures to the purposes that make the return of the Confidential Information not feasible for as long as Contractor maintains such Confidential Information. 45 CFR 164.504(e)(2)(ii)(J)

(P) Contractor will create, maintain, use, disclose, transmit or <u>Destroy</u> <u>Confidential</u> <u>Information</u> in a secure fashion that protects against any reasonably anticipated threats or hazards to the security or integrity of such information or unauthorized uses. 45 CFR 164.306; 164.530(c)

(Q) If Contractor accesses, transmits, stores, or maintains <u>Confidential Information</u>, Contractor will complete and return to System Agency at <u>infosecurity@hhsc.state.tx.us</u> the System Agency information security and privacy initial inquiry (SPI) at Attachment 2. The SPI identifies basic privacy and security controls with which Contractor must comply to protect System Agency <u>Confidential Information</u>. Contractor will comply with periodic security controls compliance assessment and monitoring by System Agency as required by state and federal law, based on the type of <u>Confidential Information</u> Contractor creates, receives, maintains, uses, discloses or has access to and the <u>Authorized Purpose</u> and level of risk. Contractor's security controls will be based on the National Institute of Standards and Technology (NIST) Special Publication 800-53. Contractor will update its security controls assessment whenever there are significant changes in security controls for System Agency

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<u>Confidential Information</u> and will provide the updated document to System Agency. System Agency also reserves the right to request updates as needed to satisfy state and federal monitoring requirements. 45 CFR 164.306

(R) Contractor will establish, implement and maintain any and all appropriate procedural, administrative, physical and technical safeguards to preserve and maintain the confidentiality, integrity, and availability of the <u>Confidential Information</u>, and with respect to <u>PHI</u>, as described in the <u>HIPAA</u> <u>Privacy and Security Regulations</u>, or other applicable laws or regulations relating to <u>Confidential Information</u> as long as Contractor has such <u>Confidential Information</u> in its actual or constructive possession. 45 CFR 164.308 (administrative safeguards); 164.310 (physical safeguards); 164.312 (technical safeguards); 164.530(c)(privacy safeguards)

(S) Contractor will designate and identify, subject to System Agency approval, a <u>Person</u> or <u>Persons</u>, as Privacy Official 45 CFR 164.530(a)(1) and Information Security Official, each of whom is authorized to act on behalf of Contractor and is responsible for the development and implementation of the privacy and security requirements in this DUA. Contractor will provide name and current address, phone number and e-mail address for such designated officials to System Agency upon execution of this DUA and prior to any change. 45 CFR 164.308(a)(2)

(T) Contractor represents and warrants that its <u>Authorized Users</u> each have a demonstrated need to know and have access to <u>Confidential Information</u> solely to the minimum extent necessary to accomplish the <u>Authorized Purpose</u> pursuant to this DUA and the Base Contract, and further, that each has agreed in writing to be bound by the disclosure and use limitations pertaining to the <u>Confidential Information</u> contained in this DUA. 45 CFR 164.502; 164.514(d)

(U) Contractor and its Subcontractors will maintain an updated, complete, accurate and numbered list of <u>Authorized Users</u>, their signatures, titles and the date they agreed to be bound by the terms of this DUA, at all times and supply it to System Agency, as directed, upon request.

(V) Contractor will implement, update as necessary, and document reasonable and appropriate policies and procedures for privacy, security and <u>Breach</u> of <u>Confidential Information</u> and an incident response plan for an <u>Event</u> or <u>Breach</u>, to comply with the privacy, security and breach notice requirements of this DUA prior to conducting work under the DUA. 45 CFR 164.308; 164.316; 164.514(d); 164.530(i)(1)

(W) Contractor will produce copies of its information security and privacy policies and procedures and records relating to the use or disclosure of <u>Confidential Information</u> received from, created by, or received, used or disclosed by Contractor on behalf of System Agency for System Agency's review and approval within 30 days of execution of this DUA and upon request by System Agency the following business day or other agreed upon time frame. 45 CFR 164.308; 164.514(d)

(X) Contractor will make available to System Agency any information System Agency requires to fulfill System Agency's obligations to provide access to, or copies of, PHI in accordance with <u>HIPAA</u> and other applicable laws and regulations relating to <u>Confidential Information</u>. Contractor will provide such information in a time and manner reasonably agreed upon or as designated by the <u>Secretary</u>, or other federal or state law. 45 CFR 164.504(e)(2)(i)(I)

(Y) Contractor will only conduct secure transmissions of <u>Confidential Information</u> whether in paper, oral or electronic form. A secure transmission of electronic <u>Confidential Information</u> in motion includes secure File Transfer Protocol (SFTP) or <u>Encryption</u> at an appropriate level or otherwise protected as required by rule, regulation or law. <u>System Agency Confidential Information</u> at rest requires <u>Encryption</u> unless there is adequate administrative, technical, and physical security, or as otherwise

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protected as required by rule, regulation or law. All electronic data transfer and communications of <u>Confidential Information</u> will be through secure systems. Proof of system, media or device security or <u>Encryption</u> must be produced to System Agency no later than 48 hours after System Agency's written request in response to a compliance investigation, audit or the <u>Discovery</u> of an <u>Event</u> or <u>Breach</u>. Otherwise, requested production of such proof will be made as agreed upon by the parties. Deidentification of <u>System Agency Confidential Information</u> is a means of security. With respect to deidentification of <u>PHI</u>, "secure" means de-identified according to <u>HIPAA Privacy</u> standards and regulatory guidance. 45 CFR 164.312; 164.530(d)

(Z) Contractor will comply with the following laws and standards *if applicable to the type of* <u>Confidential Information</u> and Contractor's <u>Authorized Purpose</u>:

- Title 1, Part 10, Chapter 202, Subchapter B, Texas Administrative Code;
- The Privacy Act of 1974;
- OMB Memorandum 07-16;
- The <u>Federal Information Security Management Act of 2002</u> (FISMA);
- The Health Insurance Portability and Accountability Act of 1996 (<u>HIPAA</u>) as defined in the DUA;
- Internal Revenue <u>Publication 1075</u> Tax Information Security Guidelines for Federal, State and Local Agencies;
- National Institute of Standards and Technology (NIST) <u>Special Publication 800-66 Revision</u> <u>1</u> – An Introductory Resource Guide for Implementing the Health Insurance Portability and Accountability Act (HIPAA) Security Rule;
- NIST <u>Special Publications 800-53 and 800-53A</u> Recommended Security Controls for Federal Information Systems and Organizations, as currently revised;
- NIST <u>Special Publication 800-47</u> Security Guide for Interconnecting Information Technology Systems;
- NIST Special Publication 800-88, <u>Guidelines for Media Sanitization</u>;
- NIST Special Publication 800-111, Guide to Storage of Encryption Technologies for End User Devices containing PHI; and
- Any other State or Federal law, regulation, or administrative rule relating to the specific System Agency program area that Contractor supports on behalf of System Agency.

ARTICLE 4. BREACH NOTICE, REPORTING AND CORRECTION REQUIREMENTS

Section 4.01. Breach or Event Notification to System Agency. 45 CFR 164.400-414

(A) Contractor will cooperate fully with System Agency in investigating, mitigating to the extent practicable and issuing notifications directed by System Agency, for any <u>Event</u> or <u>Breach</u> of <u>Confidential Information</u> to the extent and in the manner determined by System Agency.

(B) Contractor'S obligation begins at the <u>Discovery</u> of an <u>Event</u> or <u>Breach</u> and continues as long as related activity continues, until all effects of the Event are mitigated to System Agency's satisfaction (the "incident response period"). 45 CFR 164.404

- (C) Breach Notice:
 - Initial Notice.

1.

System Agency Data Use Agreement V.8.3 HIPAA Omnibus Compliant April 1, 2015 Page 6 of 11 a. For federal information, including without limitation, <u>Federal Tax Information</u>, <u>Social Security</u> <u>Administration Data</u>, and Medicaid <u>Client Information</u>, within the first, consecutive clock hour of <u>Discovery</u>, and for all other types of <u>Confidential Information</u> not more than 24 hours after <u>Discovery</u>, or in a timeframe otherwise approved by System Agency in writing, initially report to System Agency's Privacy and Security Officers via email at: <u>privacy@System</u> <u>AgencyC.state.tx.us</u> and to the System Agency division responsible for this DUA; and IRS Publication 1075; Privacy Act of 1974, as amended by the Computer Matching and Privacy Protection Act of 1988, 5 U.S.C. § 552a; OMB Memorandum 07-16 as cited in System AgencyC-CMS Contracts for information exchange.

b. Report all information reasonably available to Contractor about the <u>Event</u> or <u>Breach</u> of the privacy or security of <u>Confidential Information</u>. 45 CFR 164.410

c. Name, and provide contact information to System Agency for, Contractor's single point of contact who will communicate with System Agency both on and off business hours during the incident response period.

2. 48-Hour Formal Notice. No later than 48 consecutive clock hours after <u>Discovery</u>, or a time within which <u>Discovery</u> reasonably should have been made by Contractor of an <u>Event</u> or <u>Breach</u> of <u>Confidential Information</u>, **provide** formal notification to the State, including all reasonably available information about the <u>Event</u> or <u>Breach</u>, and Contractor's investigation, including without limitation and to the extent available: *For (a) - (m) below: 45 CFR 164.400-414*

a. The date the Event or Breach occurred;

b. The date of Contractor's and, if applicable, Subcontractor's Discovery;

c. A brief description of the <u>Event</u> or <u>Breach</u>; including how it occurred and who is responsible (or hypotheses, if not yet determined);

d. A brief description of Contractor's investigation and the status of the investigation;

e. A description of the types and amount of Confidential Information involved;

f. Identification of and number of all <u>Individuals</u> reasonably believed to be affected, including first and last name of the individual and if applicable the, <u>Legally authorized representative</u>, last known address, age, telephone number, and email address if it is a preferred contact method, to the extent known or can be reasonably determined by Contractor at that time;

g. Contractor's initial risk assessment of the <u>Event</u> or <u>Breach</u> demonstrating whether individual or other notices are_required by applicable law or this DUA for System Agency approval, including an analysis of whether there is a low probability of compromise of the <u>Confidential</u> <u>Information</u> or whether any legal exceptions to notification apply;

h. Contractor's recommendation for System Agency's approval as to the steps <u>Individuals</u> or Contractor on behalf of Individuals, should take to protect the Individuals from potential harm, including without limitation Contractor's provision of notifications, credit protection, claims monitoring, and any specific protections for a <u>Legally Authorized Representative</u> to take on behalf of an <u>Individual</u> with special capacity or circumstances;

i. The steps Contractor has taken to mitigate the harm or potential harm caused (including without limitation the provision of sufficient resources to mitigate);

j. The steps Contractor has taken, or will take, to prevent or reduce the likelihood of recurrence of a similar <u>Event</u> or <u>Breach</u>;

System Agency Data Use Agreement V.8.3 HIPAA Omnibus Compliant April 1, 2015 Page 7 of 11 k. Identify, describe or estimate of the <u>Persons</u>, <u>Workforce</u>, <u>Subcontractor</u>, or <u>Individuals</u> and any law enforcement that may be involved in the <u>Event</u> or <u>Breach</u>;

1. A reasonable schedule for Contractor to provide regular updates to the foregoing in the future for response to the <u>Event</u> or <u>Breach</u>, but no less than every three (3) business days or as otherwise directed by System Agency, including information about risk estimations, reporting, notification, if any, mitigation, corrective action, root cause analysis and when such activities are expected to be completed; and

m. Any reasonably available, pertinent information, documents or reports related to an <u>Event</u> or <u>Breach</u> that System Agency requests following <u>Discovery</u>.

<u>Section 4.02</u> Investigation, Response and Mitigation. For A-F below: 45 CFR 164.308, 310 and 312; 164.530

(A) Contractor will immediately conduct a full and complete investigation, respond to the <u>Event</u> or <u>Breach</u>, commit necessary and appropriate staff and resources to expeditiously respond, and report as required to and by System Agency for incident response purposes and for purposes of System Agency's compliance with report and notification requirements, to the satisfaction of System Agency.

(B) Contractor will complete or participate in a risk assessment as directed by System Agency following an <u>Event</u> or <u>Breach</u>, and provide the final assessment, corrective actions and mitigations to System Agency for review and approval.

(C) Contractor will fully cooperate with System Agency to respond to inquiries and proceedings by state and federal authorities, <u>Persons</u> and <u>Individuals</u> about the <u>Event</u> or <u>Breach</u>.

(D) Contractor will fully cooperate with System Agency's efforts to seek appropriate injunctive relief or otherwise prevent or curtail such <u>Event</u> or <u>Breach</u>, or to recover or protect any <u>Confidential Information</u>, including complying with reasonable corrective action or measures, as specified by System Agency in a Corrective Action Plan if directed by System Agency under the Base Contract.

<u>Section 4.03</u> Breach Notification to <u>Individuals</u> and Reporting to Authorities. Tex. Bus. & Comm. Code §521.053; 45 CFR 164.404 (Individuals), 164.406 (Media); 164.408 (Authorities)

(A) System Agency may direct Contractor to provide <u>Breach</u> notification to <u>Individuals</u>, regulators or third-parties, as specified by System Agency following a <u>Breach</u>.

(B) Contractor must obtain System Agency's prior written approval of the time, manner and content of any notification to <u>Individuals</u>, regulators or third-parties, or any notice required by other state or federal authorities. Notice letters will be in Contractor's name and on Contractor's letterhead, unless otherwise directed by System Agency, and will contain contact information, including the name and title of Contractor's representative, an email address and a toll-free telephone number, for the Individual to obtain additional information.

(C) Contractor will provide System Agency with copies of distributed and approved communications.

(D) Contractor will have the burden of demonstrating to the satisfaction of System Agency that any notification required by System Agency was timely made. If there are delays outside of Contractor's control, Contractor will provide written documentation of the reasons for the delay.

(E) If System Agency delegates notice requirements to Contractor, System Agency shall, in the time and manner reasonably requested by Contractor, cooperate and assist with Contractor's information requests in order to make such notifications and reports.

ARTICLE 5. SCOPE OF WORK

<u>Scope of Work</u> means the services and deliverables to be performed or provided by Contractor, or on behalf of Contractor by its <u>Subcontractors</u> or agents for System Agency that are described in detail in the Base Contract. The <u>Scope of Work</u>, including any future amendments thereto, is incorporated by reference in this DUA as if set out word-for-word herein.

ARTICLE 6. GENERAL PROVISIONS

Section 6.01 Ownership of Confidential Information

Contractor acknowledges and agrees that the <u>Confidential Information</u> is and will remain the property of System Agency. Contractor agrees it acquires no title or rights to the <u>Confidential Information</u>.

Section 6.02 System Agency Commitment and Obligations

System Agency will not request that Contractor create, maintain, transmit, use or disclose <u>PHI</u> in any manner that would not be permissible under <u>applicable law</u> if done by System Agency.

Section 6.03 System Agency Right to Inspection

At any time upon reasonable notice to Contractor, or if System Agency determines that Contractor has violated this DUA, System Agency, directly or through its agent, will have the right to inspect the facilities, systems, books and records of Contractor to monitor compliance with this DUA. For purposes of this subsection, System Agency's agent(s) include, without limitation, the System Agency Office of the Inspector General or the Office of the Attorney General of Texas, outside consultants or legal counsel or other designee.

Section 6.04 Term; Termination of DUA; Survival

This DUA will take effect with the Base Contract, and will terminate upon termination of the Base Contract and as set forth herein. If the Base Contract is extended or amended, this DUA is updated automatically concurrent with such extension or amendment.

(A) System Agency may immediately terminate this DUA and Base Contract upon a material violation of this DUA.

(B) Termination or Expiration of this DUA will not relieve Contractor of its obligation to return or <u>Destroy</u> the <u>Confidential Information</u> as set forth in this DUA and to continue to safeguard the <u>Confidential Information</u> until such time as determined by System Agency.

(D) If System Agency determines that Contractor has violated a material term of this DUA; System Agency may in its sole discretion:

1. Exercise any of its rights including but not limited to reports, access and inspection under this DUA or the Base Contract; or

2. Require Contractor to submit to a corrective action plan, including a plan for monitoring and plan for reporting, as System Agency may determine necessary to maintain compliance with this DUA; or

System Agency Data Use Agreement V.8.3 HIPAA Omnibus Compliant April 1, 2015 Page 9 of 11 3. Provide Contractor with a reasonable period to cure the violation as determined by System Agency; or

4. Terminate the DUA and Base Contract immediately, and seek relief in a court of competent jurisdiction in Travis County, Texas.

Before exercising any of these options, System Agency will provide written notice to Contractor describing the violation and the action it intends to take.

(E) If neither termination nor cure is feasible, System Agency shall report the violation to the <u>Secretary</u>.

(F) The duties of Contractor or its <u>Subcontractor</u> under this DUA survive the expiration or termination of this DUA until all the <u>Confidential Information</u> is <u>Destroyed</u> or returned to System Agency, as required by this DUA.

Section 6.05 Governing Law, Venue and Litigation

(A) The validity, construction and performance of this DUA and the legal relations among the Parties to this DUA will be governed by and construed in accordance with the laws of the State of Texas.

(B) The Parties agree that the courts of Travis County, Texas, will be the exclusive venue for any litigation, special proceeding or other proceeding as between the parties that may be brought, or arise out of, or in connection with, or by reason of this DUA.

Section 6.06 Injunctive Relief

(A) Contractor acknowledges and agrees that System Agency may suffer irreparable injury if Contractor or its <u>Subcontractor</u> fails to comply with any of the terms of this DUA with respect to the <u>Confidential Information</u> or a provision of <u>HIPAA</u> or other laws or regulations applicable to <u>Confidential Information</u>.

(B) Contractor further agrees that monetary damages may be inadequate to compensate System Agency for Contractor's or its <u>Subcontractor's</u> failure to comply. Accordingly, Contractor agrees that System Agency will, in addition to any other remedies available to it at law or in equity, be entitled to seek injunctive relief without posting a bond and without the necessity of demonstrating actual damages, to enforce the terms of this DUA.

Section 6.07 Indemnification

To the extent permitted by law, Contractor will indemnify, defend and hold harmless System Agency and its respective Executive Commissioner, employees, <u>Subcontractors</u>, agents (including other state agencies acting on behalf of System Agency) or other members of its <u>Workforce</u> (each of the foregoing hereinafter referred to as "Indemnified Party") against all actual and direct losses suffered by the Indemnified Party and all liability to third parties arising from or in connection with any breach of this DUA or from any acts or omissions related to this DUA by Contractor or its employees, directors, officers, <u>Subcontractors</u>, or agents or other members of its Workforce. The duty to indemnify, defend and hold harmless is independent of the duty to insure and continues to apply even in the event insurance coverage required, if any, in the DUA or Base Contract is denied, or coverage rights are reserved by any insurance carrier. Upon demand, Contractor will reimburse System Agency for any and all losses, liabilities, lost profits, fines, penalties, costs or expenses (including reasonable attorneys' fees) which may for any reason be imposed upon any Indemnified Party by reason of any suit, claim, action, proceeding or demand by any third party to the extent caused by and which results from the Contractor's failure to meet any of its obligations under this DUA. To the extent permitted

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by law, Contractor's obligation to defend, indemnify and hold harmless any Indemnified Party will survive the expiration or termination of this DUA.

Section 6.08 Insurance

(A) Contractor represents and warrants that it maintains either self-insurance or commercial insurance with policy limits sufficient to cover any liability arising from any acts or omissions by Contractor or its employees, directors, officers, <u>Subcontractors</u>, or agents or other members of its Workforce under this DUA. Contractor warrants that System Agency will be a loss payee and beneficiary for any such claims.

(B) Contractor will provide System Agency with written proof that required insurance coverage is in effect, at the request of System Agency.

Section 6.09 Fees and Costs

Except as otherwise specified in this DUA or the Base Contract, including but not limited to requirements to insure or indemnify System Agency, if any legal action or other proceeding is brought for the enforcement of this DUA, or because of an alleged dispute, contract violation, <u>Event</u>, <u>Breach</u>, default, misrepresentation, or injunctive action, in connection with any of the provisions of this DUA, each party will bear their own legal expenses and the other cost incurred in that action or proceeding.

<u>Section 6.10</u> Entirety of the Contract

This Data Use Agreement is incorporated by reference into the Base Contract and, together with the Base Contract, constitutes the entire agreement between the parties. No change, waiver, or discharge of obligations arising under those documents will be valid unless in writing and executed by the party against whom such change, waiver, or discharge is sought to be enforced.

Section 6.11 Automatic Amendment and Interpretation

Upon the effective date of any amendment or issuance of additional regulations to <u>HIPAA</u>, or any other law applicable to <u>Confidential Information</u>, this DUA will automatically be amended so that the obligations imposed on System Agency or Contractor remain in compliance with such requirements. Any ambiguity in this DUA will be resolved in favor of a meaning that permits System Agency and Contractor to comply with <u>HIPAA</u> or any other law applicable to <u>Confidential Information</u>.

ATTACHMENT 1. SUBCONTRACTOR AGREEMENT FORM System Agency CONTRACT NUMBER HHSREV100000785

The DUA between System Agency and Contractor establishes the permitted and required uses and disclosures of <u>Confidential Information</u> by Contractor.

Contractor has subcontracted with ________ (SUBContractor) for performance of duties on behalf of CONTACTOR which are subject to the DUA. SUBContractor acknowledges, understands and agrees to be bound by the identical terms and conditions applicable to Contractor under the DUA, incorporated by reference in this Agreement, with respect to System Agency <u>Confidential Information</u>. Contractor and SUBContractor agree that System Agency is a third-party beneficiary to applicable provisions of the subcontract.

System Agency has the right but not the obligation to review or approve the terms and conditions of the subcontract by virtue of this Subcontractor Agreement Form.

Contractor and SUBContractor assure System Agency that any <u>Breach</u> or <u>Event</u> as defined by the DUA that SUBContractor <u>Discovers</u> will be reported to System Agency by Contractor in the time, manner and content required by the DUA.

If Contractor knows or should have known in the exercise of reasonable diligence of a pattern of activity or practice by SUBContractor that constitutes a material breach or violation of the DUA or the SUBContractor's obligations Contractor will:

- 1. Take reasonable steps to cure the violation or end the violation, as applicable;
- 2. If the steps are unsuccessful, terminate the contract or arrangement with SUBContractor, if feasible;
- 3. Notify System Agency immediately upon reasonably discovery of the pattern of activity or practice of SUBContractor that constitutes a material breach or violation of the DUA and keep System Agency reasonably and regularly informed about steps Contractor is taking to cure or end the violation or terminate SUBCONTACTOR's contract or arrangement.

This Subcontractor Agreement Form is executed by the parties in their capacities indicated below.

CONTRACTOR		SUBCONTRACTOR
BY:		BY:
NAME:		NAME:
TITLE:		TITLE:
DATE	,201	DATE:

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HHS Enterprise Data Use Agreement - Attachment 2 SECURITY AND PRIVACY INITIAL INQUIRY (SPI)

NGO .	Services				
res cor or i rela	ou are a bidder for a new procurement/contract, in order to par ponses in sections B and C prior to the contract award date. If y rected any "No" answers in Sections B and C below prior to perf renewals with "No" responses, there must be an action plan for ated contracts and 90 calendar days from the date the form is si	ou are an applicant for orming any work on be remediation of Section gned for all non-HIPAA	an open enrollment, yo half of any HHS agency B and C within 30 caler contracts.	u mus . For ex	t have kisting contracts
SE	CTION A: APPLICANT/BIDDER INFORMATION (To be co	mpleted by Applicar	nt/Bidder)		
1.	Does the applicant/bidder access, create, disclose, rece Confidential Information in electronic systems (e.g., la device, database, server, etc.)? IF NO, STOP. THE SPI	ptop, personal use	computer, mobile		O Yes O No
2.	Entity or Applicant/Bidder Legal Name	Legal Name:			
		Legal Entity Tax Id (TIN) (Last Four No	entification Number umbers Only):	r	
		Procurement/Con	tract#:		
		Address:			
		City:	State:	ZIP:	
		Telephone #:			
		Email Address:			
3.	Number of Employees, at all locations, in Applicant Bidder's Workforce "Workforce" means all employees, volunteers, trainees, and other Persons whose conduct is under the direct control of Applicant/Bidder, whether or not they are paid by Applicant/ Bidder. If Applicant/Bidder is a sole proprietor, the workforce may be only one employee.	Total Employees:			
4.	Number of Subcontractors (if Applicant/Bidder will not use subcontractors, enter "0")	Total Subcontracto	rs:		
5.	Name of Information Technology Security Official	A. Security Official	•		
	and Name of Privacy Official for Applicant/Bidder	Legal Name:			
	(Privacy and Security Official may be the same person.)	Address:			
		City:	State:	ZIP:	
		Telephone #:			
		Email Address:			
		B. Privacy Official			
		Legal Name:			
		Address:			
		City:	State:	ZIP:	
		Telephone #:			
		Email Address:			

6. Type(s) of HHS Confidential Information the Entity or HIPAA CIIS IRS FT Applicant/Bidder will create, receive, maintain, use,	CMS SSA PII
disclose or have access to: (Check all that apply) Health Insurance Portability and Accountability Act (HIPAA) data Criminal Justice Information Services (CJIS) data Internal Revenue Service Federal Tax Information (IRS FTI) data Centers for Medicare & Medicaid Services (CMS) Social Security Administration (SSA) Personally Identifiable Information (PII) 	
 7.Number of Storage Devices for HHS Confidential Information (as defined in the H Use Agreement (DUA)) Cloud Services involve using a network of remote servers hosted on the Internet to store, manage, process data, rather than a local server or a personal computer. A Data Center is a centralized repository, either physical or virtual, for the storage, management, a dissemination of data and information organized around a particular body of knowledge or pertain 	and (Sum a-d) 0
 a particular business. a. Devices. Number of personal user computers, devices or drives, including mobile devices and mobile drives. 	ile
b. Servers. Number of Servers that are not in a data center or using Cloud Service	<u></u> S.
c. Cloud Services. Number of Cloud Services in use.	
d. Data Centers. Number of Data Centers in use.	
8. Number of unduplicated individuals for whom Applicant/Bidder reasonably exp handle HHS Confidential Information during one year:	ects to Select Option
 a. 499 individuals or less b. 500 to 999 individuals c. 1,000 to 99,999 individuals d. 100,000 individuals or more 	O a. O b. O c. O d.
9. HIPAA Business Associate Agreement	Yes or No
a. Will Applicant/Bidder use, disclose, create, receive, transmit or maintain prot health information on behalf of a HIPAA-covered HHS agency for a HIPAA-co function?	
b. Does Applicant/Bidder have a Privacy Notice prominently displayed on a Web Public Office of Applicant/Bidder's business open to or that serves the public HIPAA requirement. Answer "No" if not applicable, such as for agencies not covered I	? (This is a ONO
10. Subcontractors. If the Applicant/Bidder responded "0" to Question 4 (indicating subcontractors), check "No" for both 'a.' and 'b.' to indicate "N/A."	no Yes or No
a. Does Applicant/Bidder require subcontractors to execute the DUA Attachmen Subcontractor Agreement Form?	t 1 O Yes O No
b. Will Applicant/Bidder obtain written approval from an HHS agency before en any agreements with subcontractors to handle HHS Confidential Information of Applicant/Bidder?	÷ U

1. Does Applicant/Bidder have any Optional Insurance currently in place?	O Yes
Optional Insurance provides coverage for: (1) Network Security and Privacy; (2) Data Breach; (3) Cyber	Ŏ No
Liability (lost data, lost use or delay/suspension in business, denial of service with e-business, the Internet,	0 110
networks and informational assets, such as privacy, intellectual property, virus transmission, extortion,	
sabotage or web activities); (4) Electronic Media Liability; (5) Crime/Theft; (6) Advertising Injury and Personal	
Injury Liability; and (7) Crisis Management and Notification Expense Coverage.	

Section B: PRIVACY RISK ANALYSIS AND ASSESSMENT (To be completed by Applicant/Bidder)

For any questions answered "No", an Action Plan for Compliance with a timeline must be documented in the designated area below the question. The timeline for compliance with HIPAA related items is 30 calendar days, PII related items is 90 calendar days.

1.	Written Policies & Procedures. Does Applicant/Bidder have current written privacy and security policies and procedures that, at a minimum:	Yes or No
	a. Does Applicant/Bidder have current written privacy and security policies and procedures that identify Authorized Users and Authorized Purposes (as defined in the DUA) relating to creation, receipt, maintenance, use, disclosure, access or transmission of HHS Confidential Information?	O Yes O No
-	Action Plan for Compliance with a Timeline:	Compliance Date:
	b. Does Applicant/Bidder have current written privacy and security policies and procedures that require Applicant/Bidder and its Workforce to comply with the applicable provisions of HIPAA and other laws referenced in the DUA, relating to creation, receipt, maintenance, use, disclosure, access or transmission of HHS Confidential Information on behalf of an HHS agency?	O Yes O No
	Action Plan for Compliance with a Timeline:	Compliance Date:
	c. Does Applicant/Bidder have current written privacy and security policies and procedures that limit use or disclosure of HHS Confidential Information to the minimum that is necessary to fulfill the Authorized Purposes?	O Yes O No
	Action Plan for Compliance with a Timeline:	Compliance Date:
	 d. Does Applicant/Bidder have current written privacy and security policies and procedures that respond to an actual or suspected breach of HHS Confidential Information, to include at a minimum (if any responses are "No" check "No" for all three): Immediate breach notification to the HHS agency, regulatory authorities, and other required Individuals or Authorities, in accordance with Article 4 of the DUA; Following a documented breach response plan, in accordance with the DUA and applicable law; & Notifying Individuals and Reporting Authorities whose HHS Confidential Information has been breached, as directed by the HHS agency? 	O Yes O No

Action Plan for Compliance with a Timeline:	Compliance Date:
e. Does Applicant/Bidder have current written privacy and security policies and procedures that conduct annual workforce training and monitoring for and correction of any training delinquencies?	O Yes O No
Action Plan for Compliance with a Timeline:	<u>Compliance Date:</u>
f. Does Applicant/Bidder have current written privacy and security policies and procedures that permit or deny individual rights of access, and amendment or correction, when appropriate?	O Yes O No
Action Plan for Compliance with a Timeline:	Compliance Date:
g. Does Applicant/Bidder have current written privacy and security policies and procedures that permit only Authorized Users with up-to-date privacy and security training, and with a reasonable and demonstrable need to use, disclose, create, receive, maintain, access or transmit the HHS Confidential Information, to carry out an obligation under the DUA for an Authorized Purpose, unless otherwise approved in writing by an HHS agency?	O Yes O No
Action Plan for Compliance with a Timeline:	Compliance Date:
h. Does Applicant/Bidder have current written privacy and security policies and procedures that establish, implement and maintain proof of appropriate sanctions against any Workforce or Subcontractors who fail to comply with an Authorized Purpose or who is not an Authorized User, and used or disclosed HHS Confidential Information in violation of the DUA, the Base Contract or applicable law?	O Yes O No
Action Plan for Compliance with a Timeline:	Compliance Date:
i. Does Applicant/Bidder have current written privacy and security policies and procedures that require updates to policies, procedures and plans following major changes with use or disclosure of HHS Confidential Information within 60 days of identification of a need for update?	O Yes O No
Action Plan for Compliance with a Timeline:	Compliance Date:

j. Does Applicant/Bidder have current written privacy and security policies and procedures that restrict permissions or attempts to re-identify or further identify de-identified HHS Confidential Information, or attempt to contact any Individuals whose records are contained in the HHS Confidential Information, except for an Authorized Purpose, without express written authorization from an HHS agency or as expressly permitted by the Base Contract?	O Yes O No
Action Plan for Compliance with a Timeline:	<u>Compliance Date:</u>
k. If Applicant/Bidder intends to use, disclose, create, maintain, store or transmit HHS Confidential Information outside of the United States of America, will Applicant/Bidder obtain the express prior written permission from the HHS agency and comply with the HHS agency conditions for safeguarding offshore HHS Confidential Information?	O Yes O No
Action Plan for Compliance with a Timeline:	<u>Compliance Date</u> :
I. Does Applicant/Bidder have current written privacy and security policies and procedures that require cooperation with HHS agencies' or federal regulatory inspections, audits or investigations related to compliance with the DUA or applicable law?	O Yes O No
Action Plan for Compliance with a Timeline:	Compliance Date:
m. Does Applicant/Bidder have current written privacy and security policies and procedures that require appropriate standards and methods to destroy or dispose of HHS Confidential Information?	O Yes O No
Action Plan for Compliance with a Timeline:	Compliance Date:
n. Does Applicant/Bidder have current written privacy and security policies and procedures that prohibit disclosure of Applicant/Bidder's work product done on behalf of HHS pursuant to the DUA, or to publish HHS Confidential Information without express prior approval of the HHS agency?	O Yes O No
 Action Plan for Compliance with a Timeline:	Compliance Date:
Does Applicant/Bidder have a current Workforce training program? Training of Workforce must occur at least once every year, and within 30 days of date of hiring a new Workforce member who will handle HHS Confidential Information. Training must include: (1) privacy and security policies, procedures, plans and applicable requirements for handling HHS Confidential Information, (2) a requirement to complete training before access is given to HHS Confidential Information, and (3) written proof of training and a procedure for monitoring timely completion of training.	O Yes O No

	Action Plan for Compliance with a Timeline:	Compliance Date:
3.	Does Applicant/Bidder have Privacy Safeguards to protect HHS Confidential Information in oral, paper and/or electronic form? "Privacy Safeguards" means protection of HHS Confidential Information by establishing, implementing and maintaining required Administrative, Physical and Technical policies, procedures, processes and controls, required by the DUA, HIPAA (45 CFR 164.530), Social Security Administration, Medicaid and laws, rules or regulations, as applicable. Administrative safeguards include administrative protections, policies and procedures for matters such as training, provision of access, termination, and review of safeguards, incident	O Yes O No
	management, disaster recovery plans, and contract provisions. Technical safeguards include technical protections, policies and procedures, such as passwords, logging, emergencies, how paper is faxed or mailed, and electronic protections such as encryption of data. Physical safeguards include physical protections, policies and procedures, such as locks, keys, physical access, physical storage and trash.	
	Action Plan for Compliance with a Timeline:	Compliance Date:
4.	Does Applicant/Bidder and all subcontractors (if applicable) maintain a current list of Authorized Users who have access to HHS Confidential Information, whether oral, written or electronic?	O Yes O No
	Action Plan for Compliance with a Timeline:	Compliance Date:
5.	Does Applicant/Bidder and all subcontractors (if applicable) monitor for and remove terminated employees or those no longer authorized to handle HHS Confidential Information from the list of Authorized Users?	O Yes O No
	Action Plan for Compliance with a Timeline:	<u>Compliance Date:</u>

ection C: SECURITY RISK ANALYSIS AND ASSESSMENT (to be completed by Applicant/Bidder)		
This section is about your electronic system. If your business DOES NOT store, access, or transmit HHS Confidential Information in electronic systems (e.g., laptop, personal use computer, mobile device, database, server, etc.) select the box to the right, and "YES" will be entered for all questions in this section.	No Electronic Systems	
For any questions answered "No", an Action Plan for Compliance with a timeline must be doo designated area below the question. The timeline for compliance with HIPAA related items is PII related items is 90 calendar days.		
 Does the Applicant/Bidder ensure that services which access, create, disclose, receive, transmit, maintain, or store HHS Confidential Information are maintained IN the United States (no offshoring) unless ALL of the following requirements are met? a. The data is encrypted with FIPS 140-2 compliant encryption b. The offshore provider does not have access to the encryption keys c. The Applicant/Bidder maintains the encryption key within the United States d. The Applicant/Bidder maintains the encryption key within the United States d. The Application/Bidder has obtained the express prior written permission of the HHS agency For more information regarding FIPS 140-2 encryption products, please refer to: http://csrc.nist.gov/groups/STM/cmvp/documents/140-1/140vgl-all.htm 	O Yes O No	
Action Plan for Compliance with a Timeline:	<u>Compliance Date:</u>	
2. Does Applicant/Bidder utilize an IT security-knowledgeable person or company to maintain or oversee the configurations of Applicant/Bidder's computing systems and devices?	O Yes O No	
Action Plan for Compliance with a Timeline:	<u>Compliance Date:</u>	
3. Does Applicant/Bidder monitor and manage access to HHS Confidential Information (e.g., a formal process exists for granting access and validating the need for users to access HHS Confidential Information, and access is limited to Authorized Users)?	O Yes O No	
Action Plan for Compliance with a Timeline:	<u>Compliance Date:</u>	
4. Does Applicant/Bidder a) have a system for changing default passwords, b) require user password changes at least every 90 calendar days, and c) prohibit the creation of weak passwords (e.g., require a minimum of 8 characters with a combination of uppercase, lowercase, special characters, and numerals, where possible) for all computer systems that access or store HHS Confidential Information. If yes, upon request must provide evidence such as a screen shot or a system report.	O No	
Action Plan for Compliance with a Timeline:	Compliance Date:	

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HHS Enterprise Data Use Agreement, Attachment 2: SECLIRITY AND PRIVACY INITIAL INOLINY (SDI)

5.	Does each member of Applicant/Bidder's Workforce who will use, disclose, create, receive, transmit or maintain HHS Confidential Information have a unique user name (account) and private password?	O Yes O No
-	Action Plan for Compliance with a Timeline:	<u>Compliance Date:</u>
6.	Does Applicant/Bidder lock the password after a certain number of failed attempts and after 15 minutes of user inactivity in all computing devices that access or store HHS Confidential Information?	O Yes O No
	Action Plan for Compliance with a Timeline:	Compliance Date:
7.	Does Applicant/Bidder secure, manage and encrypt remote access (including wireless access) to computer systems containing HHS Confidential Information? (e.g., a formal process exists for granting access and validating the need for users to remotely access HHS Confidential Information, and remote access is limited to Authorized Users). Encryption is required for all HHS Confidential Information. Additionally, FIPS 140-2 compliant encryption is required for Health Insurance Portability and Accountability Act (HIPAA) data, Criminal Justice Information Services (CIIS) data, Internal Revenue Service Federal Tax Information (IRS FTI) data, and Centers for Medicare & Medicaid Services (CMS) data. For more information regarding FIPS 140-2 encryption products, please refer to: http://csrc.nist.gov/groups/STM/cmvp/documents/140-1/140val-all.htm	O Yes O No
	Action Plan for Compliance with a Timeline:	Compliance Date:
8.	Does Applicant/Bidder implement computer security configurations or settings for all computers and systems that access or store HHS Confidential Information? (e.g., non-essential features or services have been removed or disabled to reduce the threat of breach and to limit exploitation opportunities for hackers or intruders, etc.)	O Yes O No
	Action Plan for Compliance with a Timeline:	Compliance Date:
9.	Does Applicant/Bidder secure physical access to computer, paper, or other systems containing HHS Confidential Information from unauthorized personnel and theft (e.g., door locks, cable locks, laptops are stored in the trunk of the car instead of the passenger area, etc.)?	O Yes O No
_	Action Plan for Compliance with a Timeline:	<u>Compliance Date:</u>

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10.	Does Applicant/Bidder use encryption products to protect HHS Confidential Information that is <u>transmitted</u> over a public network (e.g., the Internet, WiFi, etc.).	O Yes O No
	If yes, upon request must provide evidence such as a screen shot or a system report. Encryption is required for all HHS Confidential Information. Additionally, FIPS 140-2 compliant encryption is required for Health Insurance Portability and Accountability Act (HIPAA) data, Criminal Justice Information Services (CIIS) data, Internal Revenue Service Federal Tax Information (IRS FTI) data, and Centers for Medicare & Medicaid Services (CMS) data.	
	For more information regarding FIPS 140-2 encryption products, please refer to: http://csrc.nist.gov/groups/STM/cmvp/documents/140-1/140val-all.htm	
	Action Plan for Compliance with a Timeline:	Compliance Date:
11.	Does Applicant/Bidder use encryption products to protect HHS Confidential Information <u>stored</u> on end user devices (e.g., laptops, USBs, tablets, smartphones, external hard drives, desktops, etc.)?	O Yes O No
	If yes, upon request must provide evidence such as a screen shot or a system report. Encryption is required for all HHS Confidential Information. Additionally, FIPS 140-2 compliant encryption is required for Health Insurance Portability and Accountability Act (HIPAA) data, Criminal Justice Information Services (CIIS) data, Internal Revenue Service Federal Tax Information (IRS FTI) data, and Centers for Medicare & Medicaid Services (CMS) data.	
	For more information regarding FIPS 140-2 encryption products, please refer to: http://csrc.nist.gov/groups/STM/cmvp/documents/140-1/140val-all.htm	
	Action Plan for Compliance with a Timeline:	Compliance Date:
12	Does Applicant/Bidder require Workforce members to formally acknowledge rules outlining their responsibilities for protecting HHS Confidential Information and associated systems containing HHS Confidential Information before their access is provided?	O Yes O No
	Action Plan for Compliance with a Timeline:	Compliance Date:
13	Is Applicant/Bidder willing to perform or submit to a criminal background check on Authorized Users?	O Yes O No
	Action Plan for Compliance with a Timeline:	Compliance Date:
14	Does Applicant/Bidder prohibit the access, creation, disclosure, reception, transmission, maintenance, and storage of HHS Confidential Information with a subcontractor (e.g. cloud services, social media, etc.) unless HHS has approved the subcontractor agreement which must include compliance and liability clauses with the same requirements as the Applicant/Bidder?	O Yes O No
	Action Plan for Compliance with a Timeline:	Compliance Date:

15. Does Applicant/Bidder keep current on security updates/patches (including firmware, software and applications) for computing systems that use, disclose, access, create, transmit, maintain or store HHS Confidential Information?	O Yes O No
Action Plan for Compliance with a Timeline:	Compliance Date:
16. Do Applicant/Bidder's computing systems that use, disclose, access, create, transmit, maintain or store HHS Confidential Information contain up-to-date anti-malware and antivirus protection?	O Yes O No
Action Plan for Compliance with a Timeline:	Compliance Date:
17. Does the Applicant/Bidder review system security logs on computing systems that access or store HHS Confidential Information for abnormal activity or security concerns on a regular basis?	O Yes O No
Action Plan for Compliance with a Timeline:	Compliance Date:
18. Notwithstanding records retention requirements, does Applicant/Bidder's disposal processes for HHS Confidential Information ensure that HHS Confidential Information is destroyed so that it is unreadable or undecipherable?	O Yes O No
Action Plan for Compliance with a Timeline:	Compliance Date:
	я́
Section D: Signature and Submission	

Section D: Signature and Submission

Please sign the form digitally, if possible. If you can't, provide a handwritten signature.

1. I certify that all of the information provided in this form is truthful and correct to the best of my knowledge. If I learn that any such information was not correct, I agree to notify HHS of this immediately.

2. Signature	3. Title	4. Date:

To submit the completed, signed form:

• Email the form as an attachment to the appropriate HHS Contract Manager.

HHS Enterprise Data Use Agreement, Attachment 2: SECHRITY AND PRIVACY INITIAL INCHIRY (SDI)

Section E: To Be Completed by H	IHS Agency Staff:		
Agency(s): HHSC: DADS: DFP:		Requesting Departm	nent(s):
Legal Entity Tax Identification Num	per (TIN) (Last four Only):	PO/Contract(s) #:	
Contract Manager:	Contract Manager	Email Address:	Contract Manager Telephone #:

INSTRUCTIONS FOR COMPLETING THE SECURITY AND PRIVACY INITIAL INQUIRY (SPI) Attachment 2 to the HHS Enterprise Data Use Agreement

Below are instructions for Applicants, Bidders and Contractors for Health and Human Services requiring the Attachment 2, Security and Privacy Inquiry (SPI) to the Data Use Agreement (DUA). Instruction item numbers below correspond to sections on the SPI form.

If you are a bidder for a new procurement/contract, in order to participate in the bidding process, you must have corrected any "No" responses in sections B and C prior to the contract award date. If you are an applicant for an open enrollment, you must have corrected any "No" answers in Sections B and C below prior to performing any work on behalf of any HHS agency. For existing contracts or renewals with "No" responses, there must be an action plan for remediation of Section B and C within 30 calendar days for HIPAA related contracts and 90 days for others from the date the form is signed

SECTION A. APPLICANT /BIDDER INFORMATION

Item #1. Only contractors that access, transmit, store, and/or maintain Confidential Information will complete and email this form as an attachment to the appropriate HHS Contract Manager.

Item #2. Entity or Applicant/Bidder Legal Name. Provide the legal name of the business (the name used for legal purposes, like filing a federal or state tax form on behalf of the business, and is not a trade or assumed named "dba"), the legal tax identification number (last four numbers only) of the entity or applicant/bidder, the address of the corporate or main branch of the business, the telephone number where the business can be contacted regarding questions related to the information on this form and the website of the business, if a website exists.

Item #3. Number of Employees, at all locations, in Applicant/Bidder's workforce. Provide the total number of individuals, including volunteers, subcontractors, trainees, and other persons who work for the business. If you are the only employee, please answer "1."

Item #4. Number of Subcontractors. Provide the total number of subcontractors working for the business. If you have none, please answer "0" zero.

Item #5. Number of unduplicated individuals for whom Applicant/Bidder reasonably expects to handle HHS Confidential Information during one year. Select the radio button that corresponds with the number of clients/consumers for whom you expect to handle HHS Confidential Information during a year. Only count clients/consumers once, no matter how many direct services the client receives during a year.

Item #5. Name of Information Technology Security Official and Name of Privacy Official for Applicant/Bidder. As with all other fields on the SPI, this is a required field. This may be the same person and the owner of the business if such person has the security and privacy knowledge that is required to implement the requirements of the DUA and respond to questions related to the SPI. In 4.A. provide the name, address, telephone number, and email address of the person whom you have designated to answer any security questions found in Section C and in 4.B. provide this information for the person whom you have designated as the person to answer any privacy questions found in Section B. The business may contract out for this expertise; however, designated individual(s) must have knowledge of the business's devices, systems and methods for use, disclosure, creation, receipt, transmission and maintenance of HHS Confidential Information and be willing to be the point of contact for privacy and security questions.

Item #6. Type(s) of HHS Confidential Information the Entity or Applicant/Bidder Will Create, Receive, Maintain, Use, Disclose or Have Access to: Provide a complete listing of all HHS Confidential Information that the Contractor will create, receive, maintain, use, disclose or have access to. The DUA section Article 2, Definitions, defines HHS Confidential Information as:

"Confidential Information" means any communication or record (whether oral, written, electronically stored or transmitted, or in any other form) provided to or made available to CONTRACTOR or that CONTRACTOR may create, receive, maintain, use, disclose or have access to on behalf of HHS that consists of or includes any or all of the following:

 (1) Client Information;
 (2) Protected Health Information in any form including without limitation, Electronic Protected Health Information or Unsecured Protected Health Information;
 (3) Sensitive Personal Information defined by Texas Business and Commerce Code Ch. 521;

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(4) Federal Tax Information;

(5) Personally Identifiable Information;

(6) Social Security Administration Data, including, without limitation, Medicaid information; (7) All privileged work product;

(8) All information designated as confidential under the constitution and laws of the State of Texas and of the United States, including the Texas Health & Safety Code and the Texas Public Information Act, Texas Government Code, Chapter 552.

Definitions for the following types of confidential information can be found the following sites:

- Health Insurance Portability and Accountability Act (HIPAA) <u>http://www.hhs.gov/hipaa/index.html</u>
- Criminal Justice Information Services (CJIS) <u>https://www.fbi.gov/services/cjis/cjis-security-policy-resource-center</u>
- Internal Revenue Service Federal Tax Information (IRS FTI) <u>https://www.irs.gov/pub/irs-pdf/p1075.pdf</u>
- Centers for Medicare & Medicaid Services (CMS) <u>https://www.cms.gov/Regulations-and-Guidance/Regulations-and-</u> <u>Guidance.html</u>
- Social Security Administration (SSA) <u>https://www.ssa.gov/regulations/</u>
- Personally Identifiable Information (PII) <u>http://csrc.nist.gov/publications/nistpubs/800-122/sp800-122.pdf</u>

Item #7. Number of Storage devices for HHS Confidential Information. The total number of devices is automatically calculated by exiting the fields in lines a - d. Use the <Tab> key when exiting the field to prompt calculation, if it doesn't otherwise sum correctly.

- Item 7a. Devices. Provide the number of personal user computers, devices, and drives (including mobile devices, laptops, USB drives, and external drives) on which your business stores or will store HHS Confidential Information.
- Item 7b. Servers. Provide the number of servers not housed in a data center or "in the cloud," on which HHS Confidential Information is stored or will be stored. A server is a dedicated computer that provides data or services to other computers. It may provide services or data to systems on a local area network (LAN) or a wide area network (WAN) over the Internet. If none, answer "0" (zero).
- Item 7c. Cloud Services. Provide the number of cloud services to which HHS Confidential Information is stored. Cloud Services
 involve using a network of remote servers hosted on the Internet to store, manage, and process data, rather than on a local
 server or a personal computer. If none, answer "0" (zero.)
- Item 7d. Data Centers. Provide the number of data centers in which you store HHS Confidential Information. A Data Center is a centralized repository, either physical or virtual, for the storage, management, and dissemination of data and information organized around a particular body of knowledge or pertaining to a particular business. If none, answer "0" (zero).

Item #8. Number of unduplicated individuals for whom Applicant/Bidder reasonably expects to handle Confidential Information during one year. Select the radio button that corresponds with the number of clients/consumers for whom you expect to handle Confidential Information during a year. Only count clients/consumers once, no matter how many direct services the client receives during a year.

Item #9. HIPAA Business Associate Agreement.

- Item #9a. Answer "yes" if your business will use, disclose, create, receive, transmit, or store information relating to a client/consumer's healthcare on behalf of the Department of State Health Service, the Department of Disability and Aging Services, or the Health and Human Services commission for treatment, payment, or operation of Medicaid or Medicaid clients. If your contract does not include HIPAA covered information, respond "no."
- Item #9b. Answer "yes" if your business has a notice of privacy practices (a document that explains how you protect and use a client/consumer's healthcare information) displayed either on a website (if one exists for your business) or in your place of business (if that location is open to clients/consumers or the public). If your contract does not include HIPAA covered information, respond "no."

Item #10. Subcontractors. If your business responded "0" to question 3 (number of subcontractors), Answer "no" to Items 9a and 9b to indicate not applicable.

- Item #10a. Answer "yes" if your business requires that all subcontractors sign Attachment 1 of the DUA.
- Item #10b. Answer "yes" if your business obtains HHS approval before permitting subcontractors to handle HHS Confidential Information on your business's behalf.

Item #11. Optional Insurance. Answer "yes" if applicant has optional insurance in place to provide coverage for a Breach or any

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HHS Enterprise Data Use Agreement, Attachment 2:

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other situations listed in this question. If you do not have this optional coverage, answer "no."

SECTION B. PRIVACY RISK ANALYSIS AND ASSESSMENT

Reasonable and appropriate written Privacy and Security policies and procedures are required, even for sole proprietors who are the only employee, to demonstrate how your business will safeguard HHS Confidential Information and respond in the event of a Breach of HHS Confidential Information. To ensure that your business is prepared, all of the items below must be addressed in your written Privacy and Security policies and procedures.

For any question Section B or Section C question that is answered "no", an explanation of how compliance will be corrected and a date when compliance will be complete in the designated areas below the question.

Item #1. Answer "yes" if you have written policies in place for each of the areas (a-o).

- Item #1a. Answer "yes" if your business has written policies and procedures that identify everyone, including
 subcontractors, who are authorized to use HHS Confidential Information. The policies and procedures should also identify
 the reason why these Authorized Users need to access the HHS Confidential Information and this reason must align with
 the Authorized Purpose described in the Scope of Work or description of services in the Base Contract with the HHS
 agency.
- Item #1b. Answer "yes" if your business has written policies and procedures that require your employees (including yourself), your volunteers, your trainees, and any other persons whose work you direct, to comply with the requirements of HIPAA, if applicable, and other confidentiality laws as they relate to your handling of HHS Confidential Information. Refer to the laws and rules that apply, including those referenced in the DUA and Scope of Work or description of services in the Base Contract.
- Item #1c. Answer "yes" if your business has written policies and procedures that limit the HHS Confidential Information
 you disclose to the minimum necessary for your workforce and subcontractors (if applicable) to perform the obligations
 described in the Scope of Work or service description in the Base Contract. (e.g., if a client/consumer's Social Security
 Number is not required for a workforce member to perform the obligations described in the Scope of Work or service
 description in the Base Contract, then the Social Security Number will not be given to them.) If you are the only employee
 for your business, policies and procedures must not include a request for, or use of, HHS Confidential Information that is
 not required for performance of the services.
- Item #1d. Answer "yes" if your business has written policies and procedures that explain how your business would respond to an actual or a suspected breach of HHS Confidential Information. The written policies and procedures, at a minimum, must include the three items below. If any response to the three items below are no, answer "no."
 - Item #1di. Answer "yes" if your business has written policies and procedures that require your business to immediately notify HHS, the HHS Agency, regulatory authorities, or other required Individuals or Authorities of a Breach as described in Article 4, Section 4 of the DUA.
 Refer to Article 4, Section 4.01:

Initial Notice of Breach must be provided in accordance with HHS and DUA requirements with as much information as possible about the Event/Breach and a name and contact who will serve as the single point of contact with HHS both on and off business hours. Time frames related to Initial Notice include:

- within one hour of Discovery of an Event or Breach of Federal Tax Information, Social Security Administration Data, or Medicaid Client Information
- within 24 hours of all other types of HHS Confidential Information **48-hour Formal Notice** must be provided no later than 48 hours after Discovery for protected health information, sensitive personal information or other non-public information and must include applicable information as referenced in Section 4.01 (C) 2. of the DUA.
- Item #1dii. Answer yes, if your business has written policies and procedures require you to have and follow a written breach response plan as described in Article 4 Section 4.02 of the DUA.
- Item #1diii. Answer "yes", if your business has written policies and procedures require you to notify Reporting Authorities and Individuals whose HHS Confidential Information has been breached as described in Article 4 Section 4.03 of the DUA.
- Item #1e. Answer "yes", if your business has written policies and procedures requiring annual training of your entire
 workforce on matters related to confidentiality, privacy, and security, stressing the importance of promptly reporting any

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Event or Breach, outlines the process that you will use to require attendance and track completion for employees who failed to complete annual training.

- Item #1f. Answer "yes", if your business has written policies and procedures requiring you to allow individuals (clients/consumers) to access their individual record of HHS Confidential Information, and allow them to amend or correct that information, if applicable.
- Item #1g. Answer "yes", if your business has written policies and procedures restricting access to HHS Confidential Information to only persons who have been authorized and trained on how to handle HHS Confidential Information
- Item #1h. Answer "yes", if your business has written policies and procedures requiring sanctioning of any subcontractor, employee, trainee, volunteer, or anyone whose work you direct when they have accessed HHS Confidential Information but are not authorized to do so, and that you have a method of proving that you have sanctioned such an individuals. If you are the only employee, you must demonstrate how you will document the noncompliance, update policies and procedures if needed, and seek additional training or education to prevent future occurrences.
- Item #1i. Answer "yes", if your business has written policies and procedures requiring you to update your policies within 60 days after you have made changes to how you use or disclose HHS Confidential Information.
- Item #1j. Answer "yes" if your business has written policies and procedures requiring you to restrict attempts to take deidentified data and re-identify it or restrict any subcontractor, employee, trainee, volunteer, or anyone whose work you direct, from contacting any individuals for whom you have HHS Confidential Information except to perform obligations under the contract, or with written permission from HHS.
- Item #1k. Answer "yes" if your business has written policies and procedures prohibiting you from using, disclosing, creating, maintaining, storing or transmitting HHS Confidential Information outside of the United States.
- Item #11. Answer "yes", if your business has written policies and procedures requiring your business to cooperate with HHS agencies or federal regulatory entities for inspections, audits, or investigations related to compliance with the DUA or applicable law.
- Item #1m. Answer "yes" if your business has written policies and procedures requiring your business to use appropriate standards and methods to destroy or dispose of HHS Confidential Information. Policies and procedures should comply with HHS requirements for retention of records and methods of disposal.

• Item #1n. Answer "yes" if your business has written policies and procedures prohibiting the publication of the work you created or performed on behalf of HHS pursuant to the DUA, or other HHS Confidential Information, without express prior written approval of the HHS agency.

Item #2. Answer "yes" if your business has a current training program that meets the requirements specified in the SPI for you, your employees, your subcontractors, your volunteers, your trainees, and any other persons under you direct supervision.

Item #3. Answer "yes" if your business has privacy safeguards to protect HHS Confidential Information as described in the SPI.

Item #4. Answer "yes" if your business maintains current lists of persons in your workforce, including subcontractors (if applicable), who are authorized to access HHS Confidential Information. If you are the only person with access to HHS Confidential Information, please answer "yes."

Item #5. Answer "yes", if your business and subcontractors (if applicable) monitor for and remove from the list of Authorized Users, members of the workforce who are terminated or are no longer authorized to handle HHS Confidential Information. If you are the only one with access to HHS Confidential Information, please answer "yes".

SECTION C. SECURITY RISK ANALYSIS AND ASSESSMENT

This section is about your electronic systems. If you DO NOT store HHS Confidential Information in electronic systems (e.g., laptop, personal computer, mobile device, database, server, etc.), select the "No Electronic Systems" box and respond "yes" for all questions in this section.

Item #1. Answer "yes" if your business does not "offshore" or use, disclose, create, receive, transmit or maintain HHS Confidential Information outside of the United States. If you are not certain, contact your provider of technology services (application, cloud, data center, network, etc.) and request confirmation that they do not off-shore their data.

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Item #2. Answer "yes" if your business uses a person or company who is knowledgeable in IT security to maintain or oversee the configurations of your business's computing systems and devices. You may be that person, or you may hire someone who can provide that service for you.

Item #3. Answer "yes" if your business monitors and manages access to HHS Confidential Information (i.e., reviews systems to ensure that access is limited to Authorized Users; has formal processes for granting, validating, and reviews the need for remote access to Authorized Users to HHS Confidential Information, etc.). If you are the only employee, answer "yes" if you have implemented a process to periodically evaluate the need for accessing HHS Confidential Information to fulfill your Authorized Purposes.

Item #4. Answer "yes" if your business has implemented a system for changing the password a system initially assigns to the user (also known as the default password), and requires users to change their passwords at least every 90 days, and prohibits the creation of weak passwords for all computer systems that access or store HHS Confidential Information (e.g., a strong password has a minimum of 8 characters with a combination of uppercase, lowercase, special characters, and numbers, where possible). If your business uses a Microsoft Windows system, refer to the Microsoft website on how to do this, see example: http://windows.microsoft.com/en-us/windows/change-password-policy-settings#1TC=windows-7

Item #5. Answer "yes" if your business assigns a unique user name and private password to each of your employees, your subcontractors, your volunteers, your trainees and any other persons under your direct control who will use, disclose, create, receive, transmit or maintain HHS Confidential Information.

Item #6. Answer "yes" if your business locks the access after a certain number of failed attempts to login and after 15 minutes of user inactivity on all computing devices that access or store HHS Confidential Information. If your business uses a Microsoft Windows system, refer to the Microsoft website on how to do this, see example: <u>http://windows.microsoft.com/en-us/windows/change-password-policy-settings#1TC=windows-7</u>

Item #7. Answer "yes", if your business secures, manages, and encrypts remote access, such as: using Virtual Private Network (VPN) software on your home computer to access HHS Confidential Information that resides on a computer system at a business location or, if you use wireless, ensuring that the wireless is secured using a password code. If you do not access systems remotely or over wireless, answer "yes."

Item #8. Answer "yes" if your business updates the computer security settings for all your computers and electronic systems that access or store HHS Confidential Information to prevent hacking or breaches (e.g., non-essential features or services have been removed or disabled to reduce the threat of breach and to limit opportunities for hackers or intruders to access your system). For example, Microsoft's Windows security checklist:

http://windows.microsoft.com/en-us/windows7/Security-checklist-for-Windows-7

Item #9. Answer "yes" if your business secures physical access to computer, paper, or other systems containing HHS Confidential Information from unauthorized personnel and theft (e.g., door locks, cable locks, laptops are stored in the trunk of the car instead of the passenger area, etc.). If you are the only employee and use these practices for your business, answer "yes."

Item #10. Answer "yes" if your business uses encryption products to protect HHS Confidential Information that is transmitted over a public network (e.g., the Internet, WIFI, etc.) or that is stored on a computer system that is physically or electronically accessible to the public (FIPS 140-2 compliant encryption is required for Health Insurance Portability and Accountability Act (HIPAA) data, Criminal Justice Information Services (CJIS) data, Internal Revenue Service Federal Tax Information (IRS FTI) data, and Centers for Medicare & Medicaid Services (CMS) data.) For more information regarding FIPS 140-2 encryption products, please refer to: http://csrc.nist.gov/groups/STM/cmvp/documents/140-1/140val-all.htm).

Item #11. Answer "yes" if your business stores HHS Confidential Information on encrypted end-user electronic devices (e.g., laptops, USBs, tablets, smartphones, external hard drives, desktops, etc.) and can produce evidence of the encryption, such as, a screen shot or a system report (FIPS 140-2 encryption is required for Health Insurance Portability and Accountability Act (HIPAA) data, Criminal Justice Information Services (CJIS) data, Internal Revenue Service Federal Tax Information (IRS FTI) data, and Centers for Medicare & Medicaid Services (CMS) data.) . For more information regarding FIPS 140-2 compliant encryption products, please refer to: http://csrc.nist.gov/groups/STM/cmvp/documents/140-1/140val-all.htm). If you do not utilize end-

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user electronic devices for storing HHS Confidential Information, answer "yes."

Item #12. Answer "yes" if your business requires employees, volunteers, trainees and other workforce members to sign a document that clearly outlines their responsibilities for protecting HHS Confidential Information and associated systems containing HHS Confidential Information before they can obtain access. If you are the only employee answer "yes" if you have signed or are willing to sign the DUA, acknowledging your adherence to requirements and responsibilities.

Item #13. Answer "yes" if your business is willing to perform a criminal background check on employees, subcontractors, volunteers, or trainees who access HHS Confidential Information. If you are the only employee, answer "yes" if you are willing to submit to a background check.

Item #14. Answer "yes" if your business prohibits the access, creation, disclosure, reception, transmission, maintenance, and storage of HHS Confidential Information on Cloud Services or social media sites if you use such services or sites, and there is an HHS approved subcontractor agreement that includes compliance and liability clauses with the same requirements as the Applicant/Bidder. If you do not utilize Cloud Services or media sites for storing HHS Confidential Information, answer "yes."

Item #15. Answer "yes" if your business keeps current on security updates/patches (including firmware, software and applications) for computing systems that use, disclose, access, create, transmit, maintain or store HHS Confidential Information. If you use a Microsoft Windows system, refer to the Microsoft website on how to ensure your system is automatically updating, see example:

http://windows.microsoft.com/en-US/windows7/products/features/windows-update

Item #16. Answer "yes" if your business's computing systems that use, disclose, access, create, transmit, maintain or store HHS Confidential Information contain up-to-date anti-malware and antivirus protection. If you use a Microsoft Windows system, refer to the Microsoft website on how to ensure your system is automatically updating, see example: http://windows.microsoft.com/en-US/windows7/products/features/windows-update

Item #17. Answer "yes" if your business reviews system security logs on computing systems that access or store HHS Confidential Information for abnormal activity or security concerns on a regular basis. If you use a Microsoft Windows system, refer to the Microsoft website for ensuring your system is logging security events, see example: <u>http://windows.microsoft.com/en-us/windows/what-information-event-logs- event-viewer#1TC=windows-7</u>

Item #18. Answer "yes" if your business disposal processes for HHS Confidential Information ensures that HHS Confidential Information is destroyed so that it is unreadable or undecipherable. Simply deleting data or formatting the hard drive is not enough; ensure you use products that perform a secure disk wipe. Please see NIST SP 800-88 R1, *Guidelines for Media Sanitization* and the applicable laws and regulations for the information type for further guidance.

SECTION D. SIGNATURE AND SUBMISSION

Click on the signature area to digitally sign the document. Email the form as an attachment to the appropriate HHS Contract Manager.

17. Discussion/Action regarding the Caldwell County Texas Capital Funds Committee's selection of a Grant Administrator for the Texas Capital Fund (TCF) grant program. Cost: TBD; Speaker: Commissioner Theriot/Jacque Thomas; Backup: 1. Caldwell County Texas Capital Funds Consultant Selection Committee



June 7, 2018

Dear Mr. Hartzell,

Thank you for submitting in response to the Caldwell County Texas Capital Funds Consultant Selection Committee solicitation. The Committee has reviewed and ranked all submittals and is pleased to inform you that Grant Works has been selected.

We looked forward to working with you on our TCF project and appreciate the expertise you bring to help us navigate this process. Our next steps include informing the Caldwell County Commissioners Court of the Committee's selection which will occur on June 11th at 9am. We will then contact you to schedule initial meeting to kick off the project. In the meantime, should you have any questions, please feel free to contact me.

Regards,

Jacquely M. Thomas

Jacquelyn Thomas, P.E. County Engineer 18. Discussion/Action regarding process for County acceptance of ownership and maintenance on Greenhouse (private) Road. Cost: TBD; Speaker: Commissioner Theriot; Backup: None.

19. <u>EXECUTIVE SESSION</u> pursuant to Sections 551.071 and 551.087 of the Texas Government Code: consultation with counsel and deliberation regarding economic development negotiations associated with Economic Development Administration (EDA) Grant Projects. Possible action may follow in open court. Cost: TBD; Speaker: Commissioner Theriot/Mike Kamerlander; Backup: None. 20. Discussion/Action to authorize the County Judge to submit Economic Development Administration (EDA) Grants related to economic development. Cost: TBD; Speaker: Commissioner Theriot; Backup: None.

21. Adjournment.

As authorized by Chapter 551 of the Texas Government Code, the Commissioners Court of Caldwell County, Texas reserves the right to adjourn into Executive Session at any time during the course of this meeting to discuss any of the matters listed above The Court may adjourn for matters that may relate to Texas Government Code Section 551.071(1) (Consultation with Attorney about pending or contemplated litigation or settlement offers); Texas Government Code Section 551.071(2) (Consultation with Attorney when the attorney's obligations under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas conflicts with Chapter 551 of the Texas Government Code); Texas Government Code Section 551.072 (Deliberations about Real Property); Texas Government Code Section 551.073 (Deliberations about Gifts and Donations); Texas Government Code Section 551.074 (Personnel Matters); Texas Government Code Section 551.0745 (Deliberations about a County Advisory Body); Texas Government Code Section 551.076 (Deliberations about Security Devices); and Texas Government Code Section 551.087 (Economic Development Negotiations). In the event that the Court adjourns into Executive Session, the Court will announce under what section of the Texas Government Code the Commissioners Court is using as its authority to enter into an Executive Session. The meeting facility is wheelchair accessible and accessible parking spaces are available. Request for accommodations or interpretive services must be made 48 hours prior to this meeting. Please contact the County Judge's office at 512-398-1808 for further information. www.co.caldwell.tx.us