



Otsego County Board of Commissioners

225 West Main Street • Gaylord, Michigan 49735

989-731-7520 • Fax 989-731-7529

NOTICE OF MEETING

The Otsego County Board of Commissioners will hold a regular meeting on Tuesday, August 28, 2018 beginning at 9:30 a.m., at the County Building at 225 W. Main Street, Room 100, Gaylord, Michigan 49735.

AGENDA

Call to Order

Invocation

Pledge of Allegiance

Roll Call

Consent Agenda

- A. Regular Minutes of August 14, 2018 w/attachments - Motion to Approve
- B. Library Board Reappointment (Bonnie Byram) - Motion to Approve
- C. OCR 18-23 Housing Grant - 7 Single Family Residential Housing Projects
- D. Security Resource Officer (SRO) Agreement and Budget Amendment

Department Head Reports

- A. Clerk, Suzy DeFeyter, Director

Special Presentations

- A. Health Department of Northwest Michigan, 2017 Annual Report - by Jennifer Kenney

Committee Reports

- A. Budget & Finance Committee
 1. Prosecutor Budget Amendment
 2. Ambulance Purchase - Public Hearing

Administrator's Report

City Liaison, Township & Village Representatives

Correspondence

New Business

- A. Financials
 1. Aug 15, 2018 Warrant
 2. Aug 21, 2018 Warrant
 3. Aug 28, 2018 Warrant

B. Other Business

Public Comment

Board Remarks, Announcements, and Informal Discussions

Adjournment

**OTSEGO COUNTY
Board of Commissioners**



EXECUTIVE SUMMARY

AGENDA ITEM: Regular Minutes of August 14, 2018 with attachments.	AGENDA DATE: Aug 14, 2018
AGENDA PLACEMENT: Consent Agenda, Item A.	ACTION REQUESTED: Motion to Approve
STAFF CONTACT(S): Rachel Frisch, County Administrator	ATTORNEY REVIEW: No

BACKGROUND/DISCUSSION:

The County Board places its minutes of the former meeting on the current Consent Agenda. If there is a correction needed, the minutes will be removed from the Consent Agenda for discussion at a later time during the meeting.

RECOMMENDATION:

Staff requests approval of the Regular Minutes of August 14, 2018 with attachments.

August 14, 2018

The regular meeting of the Otsego County Board of Commissioners was held at the County Building at 225 West Main Street, Room 100, Gaylord, Michigan. The meeting was called to order at 9:30 a.m. by Chairman Ken Borton. Invocation by Commissioner Ken Glasser, followed by the Pledge of Allegiance led by Captain Brian Webber.

Roll Call:

Present: Julie Powers, Paul Beachnau, Paul Liss, Duane Switalski, Rob Pallarito, Ken Glasser, Doug Johnson, Ken Borton.

Excused: Bruce Brown.

The 7-24-18 regular minutes were corrected to read, Commissioner Paul Beachnau reported on Chronic wasting disease.

Consent Agenda:

Motion by Commissioner Julie Powers, seconded by Commissioner Ken Glasser, to approve the Regular Minutes of July 24, 2018 with attachments. Ayes: Unanimous. Motion carried.

Motion by Commissioner Julie Powers, seconded by Commissioner Ken Glasser, to approve the Otsego County Employee Handbook changes as presented. Ayes: Unanimous. Motion carried. (see attached)

Motion to approve the reappointment of Bonnie Byram to the Otsego County Library Board of Trustees was postponed to 8-28-18 meeting.

Department Head Reports:

Jim Mouch reported on the Land Use department; the Board of Commissioners have approved the reduction of permit fees by 5%; elimination of the camping permit, demolition permit fee, door replacement permit, fence permit, home occupation permit and the window replacement permit. Various zoning ordinances have been amended.

Special Presentations:

Frances Whitney from Northeast Michigan Community Service Agency (NEMCSA) presented the 2017 annual report; 50th year anniversary this year; 50.18% Federal funded, 41.71% State funded, 8.11% in kind funded; offer various programs; 3,049 children received early childhood services; 8,949 food boxes; 612,374 meals for senior and homebound individuals; 2,276 youth enhanced their academic careers, partnered with the school systems; 283,133 hours donated to the programs; \$459,464.00 emergency payments for housing and utility assistance.

Committee Reports:

Motion by Commissioner Paul Liss, seconded by Commissioner Rob Pallarito, to approve the 2019 Wings Over Northern Michigan Airshow for the dates of June 15-16 2019, and to support financial commitment should the 2019 Airshow operate at a loss greater than the carryforward fund balance in the Airshow Fund (fund 282). Ayes: Unanimous. Motion carried.

Administrator's Report:

Rachel Frisch reported 4 new buses were received, 3 are on the road and the 4th one staff is getting training on the equipment in the bus. Funded by the State; Housing was awarded a grant for \$192,500 for the upcoming 2019 fiscal year; library expansion project on track, set up a tour for the Commissioner; working with I.T. to get internet connection and camera's out at the Conservation District nature and garden center; trail construction completion date is 11-15-18; attending the MAC conference Sunday-Thursday; congratulated Ken Borton as the new president for MAC.

City Liaison, Township and Village Representative:

Commissioner Julie Powers introduced City Council member Alan Witt.

Correspondence:

Commissioner Rob Pallarito reported Up North Prevention has a substance abuse meeting scheduled for 8-21& 8-22, 2018.

Commissioner Ken Glasser received an email regarding the Manistee Nature River permit, replacing culvers.

New Business:

Motion by Commissioner Rob Pallarito, seconded by Commissioner Doug Johnson, to approve the July 24, 2018 Warrant in the total amount of \$11,040.78. Ayes: Unanimous. Motion carried.

Motion by Commissioner Ken Glasser, seconded by Commissioner Duane Switalski, to approve the July 26, 2018 Warrant in the amount of \$284,401.37. Ayes: Unanimous. Motion carried.

Motion by Commissioner Duane Switalski, seconded by Commissioner Paul Liss, to approve the July 31, 2018 Warrant in the amount of \$171,787.18. Ayes: Julie Powers, Paul Beachnau, Paul Liss, Duane Switalski, Rob Pallarito, Doug Johnson, Ken Borton. Nays: None. Abstain: Ken Glasser. Motion carried.

Motion by Commissioner Doug Johnson, seconded by Commissioner Rob Pallarito, to approve the August 7, 2018 Warrant in the amount of \$387,004.08. Ayes: Julie Powers, Paul Beachnau, Duane Switalski, Rob Pallarito, Doug Johnson, Ken Borton. Nays: None. Abstain: Ken Glasser, Paul Liss. Motion carried.

Motion by Commissioner Julie Powers, seconded by Commissioner Duane Switalski, to approve the August 14, 2018 Warrant in the amount of \$542,027.86. Ayes: Julie Powers, Paul Beachnau, Duane Switalski, Rob Pallarito, Doug Johnson, Ken Borton. Nays: None. Abstain: Ken Glasser, Paul Liss. Motion carried.

Chairman Ken Borton opened up the meeting for public comment.

Board Remarks:

Commissioner Paul Beachnau had no report.

Commissioner Julie Powers gave kudos to the work crew.

Commissioner Duane Switalski attending the NAI open house next week; Attended the Charlton Township meeting, fire department personnel needed.

Commissioner Rob Pallarito attended the Joint Land Use Study meeting last week, setting up meeting in October. Roll out rewritten study.

Commissioner Ken Glasser attended the Joint Land Use Study meeting; Conservation District meeting, security cameras were discussed; Bagley Township meeting, application for commercial rehabilitation zone; ORV signs added; 218-unit apartment building request.

Commissioner Paul Liss had no report.

Commissioner Doug Johnson reported on the Parks and Recreation meeting; Northern Michigan engineering doing a septic system at the park; looking at 2 -1 acre lots for purchase, letters sent to the landowners; space cleared to move the ranger's station; quotes for the ranger station at the Groen nature preserve; seats taken out and replaced at the Community Center; Construction company rebuilding the windmill at the Groen Nature Preserve.

Commissioner Ken Borton attending the MAC Conference next week.

Meeting adjourned at 10:53 a.m.

Kenneth C. Borton, Chairman

Susan I. DeFeyter, Otsego County Clerk

From the chilly waters of the rivers, which flow through the area to its many lakes, to the miles of untainted forest area, Otsego County represents not only clear waters but clean living and community pride.

-1-

MISSION AND VISION STATEMENT AND CORE VALUES

MISSION STATEMENT

The mission of Otsego County Government is to provide effective services to all our citizens in the most efficient manner to enhance the quality of life for all.

VISION STATEMENT

Our vision is to guide future growth for the betterment of the entire County. To enable us to do this, we will respond in an innovative and progressive manner. Individuals will be trained to become cooperative team members and will be guided by strong role models that will display commitment, cooperation and communication. By promoting a workforce that will provide leadership, both internally and externally, we will be able to facilitate the development of a staff that will meet the needs of emerging technology and ever-changing job requirements.

CORE VALUES

We believe that structure should not conflict with what is best for our employees. We believe in a structure that will allow individuals the maximum amount of freedom to perform and participate. We feel that this will stimulate initiative, innovation and a spirit that we believe will become the cornerstone of our success as a County.

We will communicate regularly with our employees and our constituents in the County. Quality is expected from every employee in all forms of work they perform.

We will re-evaluate ways we are doing things today; rather than defend the ways we have always done things.

EMPLOYMENT PROCEDURES

EQUAL EMPLOYMENT OPPORTUNITY

It is the policy of the County to provide equal employment opportunities to all individuals. The policy is that an individual's race, color, religion, national origin, sex, marital status, age, disability, or other protected classification under State and Federal law are not and will not be considered in any personnel or management decisions. All employment decisions will be based solely on the applicant's qualifications such as knowledge, skills and abilities as well as previous work experience including demonstrated ability, performance, length of employment and attendance.

Otsego County will comply with the Michigan Handicapper's Civil Rights Act and the Americans with Disabilities Act. The County will make reasonable accommodations for qualified individuals with known disabilities unless doing so would result in undue hardship. Any employee with a disability which requires accommodation pursuant to the Michigan Handicapper's Civil Rights Act must notify their department manager and the Human Resources Director in writing immediately but not later than 182 days after the need for accommodation becomes known.

NEW EMPLOYEE ORIENTATION

To enable a new employee to become familiar with their employment with the County, they will be required to meet with the Human Resources Director on or before their first day of employment to receive and complete the necessary orientation and benefits information as outlined in this handbook. Department specific training and orientation is to be arranged by the department manager.

JOB VACANCIES

Department managers are to notify the Human Resources Director of impending vacancies or job openings within their departments as early as possible. To fill an open position, Department Managers must complete an Otsego County Employment Requisition per Resolution No. OCR 06-18.

All non-union positions will be posted on the Otsego County website under employment opportunities.

All union positions will be posted as provided by the specific union contract.

The following information will be provided when posting a job position for the County:

- Position Title
- Job Description
- Minimal, desired, and/or preferred background experience required
- Salary Range
- Equal Employment Opportunity Statement
- Closing Date

All applicants should apply for employment on the County website at www.otsegocountymi.gov. The Human Resources Director will review all employment applications and resumes and facilitate the competitive hiring process with the Department Manager.

DEPARTMENT HEAD HIRING PROCESS

PURPOSE

The purpose of this policy is to set procedures for the hiring of non-elected department heads.

PROCESS

1. The County Administrator and the Human Resources Director will review applications, and possibly conduct an initial interview to determine qualified applicants.
2. The County Administrator will form a committee to interview qualified applicants. The committee will be up to six members, made up of the following: County Administrator, Human Resources Director, Chairman of the Personnel Committee, County Commissioner liaison to the department committee (if relevant), other members will be appointed at the discretion of the County Administrator. The purpose of the committee is to provide recommendations to the County Administrator concerning the hiring of the department head.
3. The County Administrator may conduct an additional interview at his/her discretion.
4. The final decision on hiring department heads rests with the County Administrator.

PROMOTION

Insofar as it is practicable and in the best interest of the County, vacancies may be filled by the promotion of current, qualified employees.

All promoted employees shall be placed on probation. The probationary period will be twelve (12) months.

PHYSICAL EXAMINATION, DRUG TEST AND BACKGROUND CHECK

Each new County employee must pass a pre-employment background check and drug screen and post offer physical examination. Depending on position, a driving record check and post offer psychological examination may also be required. All costs are borne by the County. Under no circumstances will a paycheck be issued until all pre-employment and post-offer checks are in the employee's file.

RESIGNATION PROCEDURES

The Board authorizes department managers to accept employee resignations on behalf of the Board of Commissioners.

Employees who desire to resign will be asked to submit a letter of resignation stating the effective date and the reason for leaving at least 2 weeks prior to the effective date. The employee's last day of employment will be the last day they are actively at work. An employee may not extend their termination date by utilizing paid time such as vacation, personal or compensatory time. Employees are responsible for returning any County property that may be in their possession prior to receiving a final paycheck.

EMPLOYEE STATUS

PROBATIONARY

The probationary period shall be regarded as an integral part of the selection process and shall be utilized for observing the employee's work. It shall be used for securing the most effective adjustment of the new employee to his or her position, and for rejecting any employee whose performance does not meet the required work standards. The probationary period shall last for twelve (12) months; if the employee falls under a union contract the time stipulated in the contract will be the probationary period.

At any time during the probationary period, a department manager or the Board of Commissioners in consultation with the Human Resources Director may terminate or demote an employee whose performance is deemed deficient and the employee notified.

Newly hired probationary employees may be eligible for fringe benefits unless otherwise specifically indicated elsewhere in this handbook.

REGULAR FULL-TIME

The employees of the County are hired as full-time employees, unless otherwise designated. They are regularly scheduled to work 37½ or 40 hours per week, whichever is considered to be the normal departmental workweek, and can become eligible for County benefits.

Departments that work a 37½ hour week include:

Administrator	Friend of the Court
Circuit Court	Equalization
Probate Court	Treasurer
County Clerk/Register of Deeds	Land Use Service
MSU Co-Op Extension	Housing/Veteran Affairs
Prosecuting Attorney (except Office Manager position)	

Departments that work a 40 hour week include:

Prosecuting Attorney (Office Manager position)	
Animal Control	Jail
Sheriff	Parks
Airport	

REGULAR PART-TIME

These employees are regularly scheduled to work less than the number of workweek hours that are considered to be the normal departmental workweek. Regular part-time employees that work 20 or more regularly scheduled hours per week are eligible for pro-rated fringe benefits as provided in the employee handbook. Regular part-time employees that work less than 20 regularly scheduled hours per week are only covered by Social Security and workers' compensation and are not eligible for any other County fringe benefits.

When potentially dangerous weather develops during the day and a decision is made by the County Administrator to close before your normal department closing time, you will be compensated as if you had worked to the end of your regularly scheduled hours for that day. If you elect to leave prior to a decision being made by Otsego County to close early, you will be required to use accrued time at the same rate as if you arrived after your scheduled start time.

If the County is closed by the County Administrator before the official start of the business day, employees will be paid for the hours they were scheduled to work that day. If the County is able to reopen during the day, employees will be expected to report to work when contacted by the department manager.

Union employees should consult their union contract regarding inclement weather.

This policy does not apply to the Sheriff's Department employees or 911 Dispatch employees as those departments will not close during emergencies or inclement weather.

PAYDAY

The County will provide for bi-weekly pay periods, which will end at midnight every other Sunday. Paydays will be the following Thursday by 4:00 p.m. There will be 26 pay periods per calendar year. Any questions relative to payment of wages should be directed to the department manager.

HEALTH AND SAFETY

To assure that the health and safety of employees has a high County priority, a Safety Committee will be established with members from various departments. The Human Resources Director will represent the Board.

Meetings will be called as needed, typically quarterly, to consider issues such as:

Accident and/or injury involving employees, Commission vehicles, equipment, or property.

Inspection of buildings, facilities, premises and equipment.

Safety issues, hazards and suggestions reported by employees or the public.

Short and long-term safety training needs, resources and opportunities.

Minutes of meetings shall be kept and a report made when requested to the County Administrator or the Board of Commissioners by the Human Resources Director.

SAFETY BOOT ALLOWANCE POLICY

Regular full-time and regular part-time employees that are in the following job classifications which require steel-toed safety boots: Parks and Recreation Community Center Monitors and Parks Rangers (excludes seasonal employees), Bus Mechanics, Building Inspectors, and Jail Cook are eligible for reimbursement up to \$50.00 annually for the purchase of steel-toed safety boots with submission of receipts through the normal expense reimbursement procedure. Positions that are already covered by a uniform, clothing or equipment allowance are not eligible for the safety boot allowance.

WORKPLACE ACCIDENTS

All Otsego County employees are covered under Otsego County's worker's compensation insurance policy. If an on-duty injury occurs, employees should immediately report the injury to their supervisor who will secure authorization for treatment when required, from Human Resources and complete the necessary administrative paperwork to document the injury. For injuries not requiring emergency treatment, employees must go to the Occupational Health Division of the Otsego Memorial Walk-In Clinic. If an employee does not go to the approved occupational health provider, payment for services is not guaranteed by our worker's compensation vendor.

VIOLENCE FREE WORKPLACE POLICY

It is Otsego County's policy to provide a workplace that is safe and free from all threatening and intimidating conduct. Therefore, Otsego County will not tolerate violence or threats of violence of any form in the workplace, at work-related functions, or outside of work if it affects the workplace. This policy applies to Otsego County employees, clients, customers, guests, vendors, and persons doing business with Otsego County.

GENERAL INFORMATION

ATTIRE AND APPEARANCE

During normal business hours, employees are expected to present themselves in a clean and neat manner and to dress in accordance to the requirements of their position. Some employees will be subject to department-specific dress codes that may include style and color of uniform. Department managers will instruct their employees on the standards of dress within their department.

Some guidelines to consider:

Employees should use common sense rules in neatness, good taste, and comfort.

Provocative clothing is prohibited, as are extreme fads.

Skirts/Shorts must be a sensible length.

Clothing should not constitute a safety hazard.

Name badges must be worn at all times.

Fridays will be considered a "casual dress day" and, if permitted by department manager, jeans may be worn.

A manager may require an employee to leave the workplace, without pay, if the employee's attire or appearance is inappropriate. The employee will not be compensated for their time away from the workplace and they must return to work as soon as possible.

EMPLOYEE IDENTIFICATION CARD

Each employee will receive a picture identification card that among other data will indicate their name and department. These cards must be worn at all times when representing the County. If an employee should lose the card they are to notify their department manager. Upon leaving County employment these cards are to be returned to the department manager.

KEYS

All employees are responsible for the security of issued keys. If keys are lost, the employee must notify their department manager immediately. All keys must be returned to department managers upon termination of employment.

PERSONNEL FILES

The Human Resources Department will maintain a personnel file on the employment of each employee. In accordance with State law, all of the information in these files is available to the employee and authorized personnel only. The file will be kept in a manner consistent with State or Federal law. If an employee wishes to view their file, they may contact the Human Resources Director to schedule an appointment during normal business hours.

**OTSEGO COUNTY
Board of Commissioners**



EXECUTIVE SUMMARY

AGENDA ITEM: Library Board Reappointment Bonnie Byram	AGENDA DATE: Aug 14, 2018
AGENDA PLACEMENT: Consent Agenda, Item B.	ACTION REQUESTED: Motion to Approve
STAFF CONTACT(S): Rachel Frisch, County Administrator	ATTORNEY REVIEW: No

BACKGROUND/DISCUSSION:

The Library Board passed a motion at the regular month trustee meeting on August 21, 2018 to recommend that the Board of Commissioners reappoint Bonnie Byram for a 5-year term ending August 31, 2023.

RECOMMENDATION:

Staff requests approval of reappointment of Bonnie Byram to continue serving on the Library Board for a 5-year term until August 31, 2023.

To which committee, board or commission are you seeking appointment? Fill out one form for each committee/board/commission.

Re-appointment to the Otsego County Library Board

Have you ever attended this committee/board meeting?

- Yes

Name

Bonnie Byram

Address

317 Glen Woods Trl
Gaylord, Michigan 49735-8146
United States
[Map It](#)

Phone

(989) 732-3204

Email

bbyram2@hotmail.com

Date available for appointment

08/06/2018

County Commission District

Nine

I am a registered voter in Otsego County

- Yes

In which township, city or village?

Elmira

Community Service

List boards, commissions, committees or community service organizations that you are currently serving or have served upon, offices held and in what municipality or county

Currently serving as a trustee of Otsego County Library.

Additional Information previously provided in initial application.

List any employment experience or education that, in your opinion, best qualifies you for this appointment. List job titles, duties (current and past), level of education and any certificates or degrees you have obtained

Education-Bachelors of Science in Nursing from the University of Maine
Certified Disability Case Manager
Certified Professional Health Care Risk Manager
Officer in the US Navy-8 years
Most recent employment-Otsego Memorial Hospital-16 years Director of Risk Management and Corporate Compliance

Rules of law and ethics prohibit appointees from participating in and voting on matters in which they may have a direct or indirect financial interest.

I am aware of the time commitment necessary to serve on the committee, board and/or commission to which I seek appointment and will have such time

- Yes

Please provide information about specific training, education, experience or interests you possess that qualify you as an appointee to the position you seek

I am requesting reappointment to the Library Board. I served on the Board as we developed our strategic goals with input from the community, and moved forward with plans for the expansion of the library. I have been actively involved with decision making during the construction period, and believe continuing to serve will be beneficial during completion of the project. I feel I can continue to fulfill the duties of a trustee.

I hereby certify that the preceding information is correct and to the best of my knowledge

- Yes

**OTSEGO COUNTY
Board of Commissioners**



EXECUTIVE SUMMARY

AGENDA ITEM: OCR 18-23 Housing Grant	AGENDA DATE: August 28, 2018
AGENDA PLACEMENT: Consent Agenda, Item C.	ACTION REQUESTED: Motion to Approve
STAFF CONTACT(S): Marlene Hopp, Housing Director	ATTORNEY REVIEW: No

BACKGROUND/DISCUSSION:

The Otsego County Housing Committee has approved a Michigan State Housing Development Authority (MSHDA) HOME grant application #HRF-2016-812-02 with leveraging funding totaling \$204,000 to administer and improve seven (7) existing single-family residential housing projects in the City of Gaylord that fits program guidelines at an affordable deferred mortgage of 0% interest rate, with 50% forgiven in 5 years and remaining 50% payable in 20 years. Owners may leverage project cost with various programs for assistance with the MSHDA PIP, Federal Home Loan Bank DHHS home repair, and Otsego County Veterans' Relief fund may be the leveraging programs. The County Administrator will sign all necessary grant documents and Housing Director to prepare and submit to MSHDA.

RECOMMENDATION:

Staff requests Board approval on the OCR 18-23 Housing Grant.

Minutes of a regular meeting of the Otsego County Board of Commissioners, held in Room 100 at the County Building, 225 W. Main St., Gaylord, Michigan on the 28th day of August, 2018 beginning at 9:30 a.m.

PRESENT: _____

ABSENT: _____

The following preamble and resolution was offered by Commissioner: _____.

RESOLUTION NO. OCR 18-23
AUTHORIZING RESOLUTION
OTSEGO COUNTY BOARD OF COMMISSIONERS
August 28, 2018

GRANT RESOLUTION

WHEREAS, the County of Otsego is interested in the continuing effort to improve seven (7) single-family low income residential dwellings in the City of Gaylord; and

WHEREAS, the County of Otsego has demonstrated a need for this assistance with data outlined in the attached Michigan State Housing Development Authority (MSHDA) grant application #HRF-2016-812-02 housing activities are considered categorically excluded in 24 CFR section 58.5 with tiered review screening for statutory compliance factors, and improvements to existing structures without a change in land use; and

WHEREAS, the County of Otsego intends to meet this need by submission of documents to the Michigan State Housing Development Authority (MSHDA) HOME and leverage funding totaling \$204,000 with MSHDA's state funded Property Improvement Program (PIP), Federal Home Loan Bank's Neighborhood Impact Program and Accessibility Modifications Programs, Department of Health & Human Services (DHHS) - state emergency relief home repair funds, and Otsego County Veterans Affairs - Veterans' Relief Fund, Act 214 of 1899, will be coordinated with these projects, thus meeting more needs; and

WHEREAS, the Otsego County Board of Commissioners accepts the recommendation of the Otsego County Housing Committee to apply for MSHDA HOME funding in the amount of \$115,500. City of Gaylord home owners may apply per Otsego County Housing Committee guidelines at or below 80% area median gross household income, with having a fixed mortgage deferred loan rate at 0%, with 50% forgiven after 5 years of occupancy and remaining 50% payable in 20 years.

County/AMI %	Household Size							
Otsego: 2018	1	2	3	4	5	6	7	8
80%	\$33,950	\$38,800	\$43,650	\$48,500	\$52,400	\$56,300	\$60,150	\$64,050

now, therefore, be it

RESOLVED, that the Otsego County Administrator, Rachel Frisch and/or Chief Elected Chairman on behalf of the Otsego County Board of Commissioners, be the Certifying Officer to sign and submit said MSHDA's federal grant application documents and Marlene K. Hopp, Director of the Otsego County Housing Committee be the Agency Administrator to prepare the grant and submit documents as required.

A ROLL CALL VOTE WAS TAKEN AS FOLLOWS:

YES: _____

NO: _____

ABSTAIN: _____

THE RESOLUTION WAS DECLARED ADOPTED.

Kenneth C. Borton, Chairman

Susan I. DeFeyter, County Clerk

STATE OF MICHIGAN)
 §
COUNTY OF OTSEGO)

The undersigned, being the duly qualified and acting Clerk of the County of Otsego, hereby certifies that the foregoing is a true and complete copy of a resolution duly adopted by the Otsego County Board of Commissioners at its regular meeting held on the 28th day of August, 2018, at which meeting a quorum was present and remained throughout and that an original thereof is on file in the records of the County. I further certify that the meeting was conducted, and public notice thereof was given, pursuant to and in full compliance with Act No. 267, Public Acts of Michigan, 1976, as amended, and that the minutes of such meeting were kept and will be or have been made available as required thereby.

Susan I. DeFeyter, County Clerk

DATED: _____, 2018

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Application Components

Apply Component

Homebuyer Assistance

Acquisition Development Resale

Homebuyer Purchase Rehabilitation

Down Payment Assistance

Homeowner Assistance

Rental Rehabilitation

Residential Blight Elimination

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Application Information

I. APPLICATION INFORMATION

Name: Otsego County Housing Committee

Address: 225 W. Main Street, Room 213

City: Gaylord

State: Michigan

Zip: 49735-0000

Main Contact:

Phone: (989) 731-7570

Fax: (989) 731-7599

Email: mhopp@otsegocountymi.gov

MSHDA Org #: 812

Federal ID: 386004882

Agency Class:

Local Unit of Government in a non-PJ area
Non-Profit (501c3)
Land Bank

MSHDA CHDO:

Yes No

Population (if local government):

There are additional items indicated within this application submission that are being faxed or mailed in separately. I acknowledge that all documentation must be received prior to the application being reviewed as a complete submission, please check here:

Identify all outstanding documents to be submitted post-submission:

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Project/Program Description

Program Title: Otsego County Housing Committee

The purpose of this statement is to briefly describe the most important elements of the proposal in the spaces below. The project described below should relate to the "Desired Results" shown in Section II of this application, if applicable.

1. For housing activities, describe the entire project, including affordable housing units that will be produced(homebuyer, homeowner, rental), the activities involved (rehabilitation or new construction), indicate the numberof units, the other funding sources in the project, and the overall impact.

The Otsego County Housing Committee will assist seven (7) existing single-family residential homeowners receive rehabilitation with MSHDA HOME funding in the City of Gaylord, of Otsego County's Place-Based Targeted Strategies neighborhood-based. Leveraging funding may also apply for assistance with the MSHDA PIP, Federal Home Loan Bank, DHHS home repair, and Otsego County Veterans' Relief fund may be the leveraging programs.

2. If other non-housing activities are planned with HRF funds briefly describe what activities will be completed, the number of units involved (blight removal), the other funding sources in the project, and the overall impact. N/A. If public improvements should arise, they will be a priority and will be impacted to improve and enhance the local aspects of the neighborhood.

3. Briefly describe any activities conducted by other partners from other funding sources which will be coordinated with this project to support successful results for the target area.

Leveraging funds from MSHDA's state funded Property Improvement Program (PIP), Federal Home Loan Bank's Neighborhood Impact Program and Accessibility Modifications Programs, Department of Health & Human Services (DHHS) - state emergency relief home repair funds, and Otsego County Veterans Affairs - Veterans' Relief Fund, Act 214 of 1899 will be the leveraging programs and will be coordinated with these projects to support successful results.

4. Indicate the most important measure(s) applicant will use to determine whether the project has accomplished the results intended and identify key success measures.

With the current economy of costs rising, low income homeowners are stressed with multiple mortgages, credit card debts and increasingly costs of utilities that they cannot afford. With MSHDA HOME funds and leveraging funding, approximately seven (7) dwellings are expected to receive home energy efficiency standards with the total rehabilitation repairs and improvements, thus providing affordable housing expenses to the homeowner dwelling costs.

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Application Budget

Estimated Start Date: 11/1/2018
Estimated Completion 11/1/2020
Date:

Component-Activity	HRF Funds Requested	Proposed No. of HRF Units	Proposed No. of Non-HRF Units	Leveraged Funds
Homeowner Assistance				
Rehabilitation	\$105,000	7	4	\$88,500
Sub-Total	\$105,000	7	4	\$88,500
Homebuyer Assistance				
Rehabilitation	\$0	0	0	\$0
New Construction	\$0	0	0	\$0
Down Payment Assistance	\$0		0	\$0
Sub-Total	\$0	0	0	\$0
Residential HDF Assistance				
HDF Activity	\$0	0	0	\$0
Sub-Total	\$0	0	0	\$0
TOTAL	<u>\$105,000</u>	<u>7</u>	<u>4</u>	<u>\$88,500</u>

Proposed Budget Leveraged Funds

Source	Contact Person	Telephone	Status	Amount
1. Michigan State Housing Development Authority - Property Improvement Program	Ann Grambau	(517) 373-8870	✓ Secured by supporting documentation Committed Other	\$48,000
<p>Narrative: The Michigan State Housing Development Authority - Property Improvement Program offers a 4, 6, or 8 percent interest rate loan with monthly payments and mortgage up to \$25,000 to single-family homes. These funds may also be a stand-alone source of funding.</p>				
2. Federal Home Loan Bank, Neighborhood Impact Program & Accessibility Modifications Program	Patricia Lindsey	(989) 992-6878	✓ Secured by supporting documentation Committed Other	\$32,500
<p>Narrative: The Federal Home Loan Bank of Indianapolis - Neighborhood Impact Program assists existing homeowners below 80% AMI for home repairs up to \$7,500. the Accessibility Modifications Program funds up to \$10,000 for accessibilities.</p>				
3. Department of Health and Human Services - State	Jody Schlaufman	(989) 732-1702	✓ Secured by supporting documentation	\$6,000

Proposed Budget Leveraged Funds

Emergency Relief Funds

Committed

Other

Narrative: The Department of Health and Human Services, State Emergency Relief fund provides home repair assistance to correct unsafe conditions and restore essential services. Repairs include furnace, water heaters or septic systems.

- 4. Otsego County Veterans Affairs - Soldier & Sailor Relief funds William Ahrenberg, Chairman (989) 731-7575 ✓ Secured by supporting documentation \$2,000

Committed

Other

Narrative: The Otsego County Veterans Affairs provides soldier and sailor relief funds through Act 214 of 1899. This fund may provide relief of honorably discharged Veterans of all wars or military expeditions and their surviving spouses. Relief can be in the form of home repairs and emergency relief, providing a leverage with the HOME grant.

- 5. Secured by supporting documentation
- Committed

Other

Narrative:

- 6. Secured by supporting documentation
- Committed

Other

Proposed Budget Leveraged Funds

Narrative:

7.	Secured by supporting documentation Committed	
	Other	

Narrative:

8.	Secured by supporting documentation Committed	
	Other	

Narrative:

9.	Secured by supporting documentation Committed	
	Other	

Narrative:

10.	Secured by supporting documentation Committed	
	Other	

Narrative:

TOTAL (this must match the total leveraged funds on the budget page):	\$88,500	\$88,500
---	----------	----------

Planning Grid

Step	Guidance	Response
1. Identify the organization's housing mission.	Why does the organization exist? What elements of the organization's mission directly support the proposed project? Is this area a center of commerce with retail, other services, employers and other amenities within or adjacent to its boundaries?	The mission of the Otsego County Housing Committee and Board of Commissioners is to provide safe housing for moderate to very low-income individuals and families below 80% average median income. In order to rehabilitate residential dwellings, which may be substandard, affordable deferred and loans will be made available to residents that have existing single-family dwellings. The targeted area is the City of Gaylord, MI, vastly populated and amenities throughout, serving convenient direct pedestrian sidewalk access to many services and amenities of commercial, retail, employers, hospitals, recreational facilities, churches and much more.
2. Identify the proposed assisted area(s) (attach a map & label anchors and key areas). Provide documentation if the	Is the proposed assisted area size appropriate to scale of project? Are housing units within walking distance to	Based on the vast residential housing within the City of Gaylord, more

Planning Grid

proposed areas and/or sites are located in a local and/or state designated investment or incentive target area (NEZ, MainStreet, Blueprint, NPP, HUD Sustainable/Resilient areas, Redevelopment Readiness areas, Rising Tide areas, etc.) that are supported by current or previous neighborhood-based community involved plans.

commercial and public services (shopping, jobs and public facilities)? Is the area strategically important because of location, high visibility, etc.?

MSHDA HOME funding is greatly needed for rehabilitation to aged dwellings. The targeted area is the City of Gaylord, MI, vastly populated with northern Michigan gateway to active central Interstate I-75 corridor and amenities throughout. A map identifies the target areas attached, serving convenient direct pedestrian sidewalk access to commercial, retail, employers, hospitals, recreational facilities, churches, schools, restaurants, banks, parks, city water and sewer system and many more vast amenities.

3. Describe the housing market.

What does the data analysis from the study of the market indicate? Are there statistics or data that demonstrate trends?

Due to the vast amenities and employment in the City of Gaylord, we continue to observe large population growth, demonstrating the great need for new single-family housing to construct and rental development opportunities. Market values of homes in

Planning Grid

4. State the reason for selecting the proposed assisted area(s). Indicate what is known about the area that has led the applicant to identify this proposed project priority.

Why did you choose this area? What makes this area important? Why is this area important to residents and potential residents? Who have you talked to? What have you observed? How does this fit into the community plan? Is there any synergy you can capture? Is the safety of the residents of the area(s) currently an issue? If so, how will this project address those issues?

the City of Gaylord have maintained or increased value due to the high demand of housing.

The City of Gaylord is the largest developed community with all vast amenities, city water/sewer system, major employment opportunities and aged single-family residential dwellings in Otsego County. The MSHDA HOME rehabilitation program will continue to revitalize the targeted area, creating owner investment and a successful vibrant community. Affordable housing and employment are key factors that meet the residents need when transitioning to the City of Gaylord. Public meetings/planning, are held with housing improvement/development being a great need. Employment in Gaylord has enormous diversities. There are no safety concerns to address.

Planning Grid

5. Describe what else is happening in the built community.

What are the outside influences? Are there job or economic changes in the built community? Are there new investments or disinvestments? What are the area's strengths and assets? How will increasing the number/quality of affordable units benefit the community, lower-wage workers in particular?

Job growth in Gaylord is rated at 2.6%, higher than U.S. being 1.6%. Future job growth over the next ten years is predicted to be 39.8%, higher than the US average of 38.0%. Strengths and assets are vast employment opportunities, manufacturing, public and private infrastructure, health care/social assistance, public administration, community resource support and retail trade. Rehabilitation to these aged dwellings will greatly reduce energy costs, making it affordable to continue to live, invest and work. The community has invested in a new bike and snow trailhead that will create a new pavilion downtown Gaylord for all to gather and enjoy.

6. State the Desired Results for the target area.

What can you improve in the assisted area? What opportunities exist for change? What makes these challenges or problems take priority? Are you

Continual support of home improvement programs to the aging dwellings in the City of Gaylord is vital.

Planning Grid

building on the strengths of the area or trying to "fix" its biggest problem? Who else is working in the area and what are they doing? Will real estate improvements in the target area have a direct benefit on neighboring units?

Limited amount of funding to make mass impact to the community. Homeowner debts that reduce their credit score are unable to qualify for another mortgage. We will continue to market and educate the targeted areas of these affordable loan programs of what they have to offer. Thus providing a successful program by strengthening and revitalizing our community. The Economic Alliance continues to apply for grants for the downtown and demonstrates collaboration with the county and city government for main street efforts and creation of businesses.

7. State the Desired Results for the area.

What will be different in terms of image, market, physical conditions and/or neighborhood management? How will people in the area be different? Does the area support smart growth in the area by making use of existing infrastructure capacity, protecting ground water quality, and promoting wise land use? How?

Planning Grid

8. List how the Desired Results will be measured.

How will you and MSHDA know that you have succeeded? How will the local government and/or community in the area protect the health and safety of the residents and alleviate neighborhood issues?

Projection of large scale rehabilitation projects in the targeted area to be revitalized and be successfully completed. The Land Use Department, City of Gaylord & Northwest Community Health Agency actively enforces ordinances, building codes related to property safety and maintenance. Our law enforcement and EMS continue to protect all health/safety concerns. The City takes action on properties due to any sudden hazardous conditions/blight. It is our desire to measure success by collaborating our efforts with these agencies to ensure that our communities continue to look and feel safe for the residents to live /work in a healthy environment.

9. List the steps, strategy and/or products you will use to achieve your desired results.

What has to be done? What does progress toward success look like? How will you move toward your Desired Results?

Various and mass marketing will prompt awareness of the program to move toward our desired

Planning Grid

success and apply for additional funding. Funding resources and leverage funding are a huge factor to promote residence to act and apply for funding. Homeowners once verified, are promptly waiting and anticipating completion of project. We will continue to utilize and promote woman and minority and local contractors to bid projects. Continue to seek and apply for funding to create a larger impact in area.

10. Identify your customer(s).

Whose condition, satisfaction or behavior do you want to impact in order to achieve your desired results? Please provide documentation if proposed areas/sites are located in local and/or state designated investment or incentive areas that are supported by neighborhood-based community involved plans.

Our customers are those that reside permanently in their single-family dwellings in the targeted area - City of Gaylord. Whose gross household income are at or below 80% area median income and the aged home is in need of dire total home rehabilitation and at an affordable loan. A reduction of energy costs and needed rehabilitation improvements promote affordability to continue occupancy, thus achieving

Planning Grid

11. Describe staff capacity and partnering.

Who are the staff, stakeholders, and partners (schools, econ. dev., local partners) that will carry out the project? What will they do? What kind of community support and other resources will help you achieve your desired results?

our desired results.

The Otsego County Housing Committee and staff will have the primary oversight responsibility of the program. Marlene Hopp, Housing Director has 26 years experience; Housing Clerk, Cynthia Polena 13 years experience and Contractual Inspector, Kevan Flory 30 years construction experience/15 years State of MI Building Inspector. We have a close work relationship with the County Boards, Administrator, Land Use Department; City Offices; and Economic Alliance. Together we are an experienced work group with state and federal funded infrastructure and development projects.

12. Other.

What are other factors that are important/special about the proposed projects that haven't been addressed?

We are in dire need of more funding with the MSHDA and MEDC programs. We have worked with all programs

Planning Grid

that have been offered including rehabilitation, emergency repair, MSHDA PIP with local lenders, local funding resources and grant administration. Also, previous ADR and massive development of rental rehabilitation units in the downtown City of Gaylord with the enforcement of the davis bacon act and certificates.

Administrative Guidelines

Review the MSHDA and/or HUD requirements listed below which are relevant to HRF funding and respond by checking the appropriate boxes. **These guidelines will be incorporated in any Grant Agreement executed pursuant to this application. Failure to adhere to these guidelines may result in findings, disallowed costs, and/or withdrawal of funding.** If applicant does not understand any of these provisions, contact your HID Specialist.

Local Program Guidelines. All applicants receiving funding must adhere to certain state and federal requirements outlined in these guidelines and those specified for each proposed component. Check the boxes below in acceptance of these requirements:

- ✓ The applicant will publish a document of local Program Guidelines, consistent with the guidelines for the component(s) for which funding is awarded. These Program Guidelines will be in proposed final form and submitted for approval by MSHDA prior to the disbursement of grant funds. Program Guidelines shall be shared with program applicants/beneficiaries and should include FHEO logos.

Applicant must choose the method of submission from the list below.

I will/have faxed this attachment

I will/have mailed this attachment

- ✓ I will/have uploaded this attachment

https://mshda-matt.org/_Upload/1446103_1124756_1-3.PROGGUIDELINESAPPLICANTREQUIREMENTSNEW2018MSHDAHOMEREHABILITATION.pdf

Project Soft Costs

- ✓ The local program will be in compliance with MSHDA's requirement that project soft costs be reasonable and necessary and, except as noted below, these costs will be included within the limits described for soft costs in "Project Administration" in the "Administrative Guidelines" Section and Policy Bulletin #21.

Grant/Project Administration.

- ✓ I understand that administrative costs must be documented and charged for allowable costs within allowable limits as outlined in the chart below.

Grant Administration

Project Costs

Amounts in these three columns + project hard

Administrative Guidelines

costs cannot exceed total project maximum allowances

Component	Funding Source	Program Admin	Soft Costs	Activity Delivery Costs (ADC)	Developer Fee
Homeowner Rehab	HOME & MSHDA	10% of grant	No limit, include in total project costs on line A2 of proforma	10% of total project cost (A5)	N/A
	CDBG & CDBG PI	18% for both grant and PI dollars	No limit, include in total project costs on line A2 of proforma	10% of total project cost (A5)	N/A
Rental Rehab	HOME & MSHDA	10% of grant	10% of HOME/MSHDA funded project costs (line B10)	N/A	N/A
	CDBG & CDBG PI	18% for both grant and PI dollars	2% of CDBG funded costs (line B10)	N/A	N/A
HDF Assistance	MSHDA	10% of grant	N/A	N/A	N/A
Homebuyer (HOME only)					
ADR (New Const or substantial rehab (\$25,000 or more))		N/A	All costs must be itemized; NA if taking Developer Fee	N/A	15% total hard costs (line A7)
ADR (Moderate rehab, <\$25,000)		N/A	All costs must be itemized; NA if taking Developer Fee	N/A	10% total hard costs

Administrative Guidelines

					(line A7)
HPR		N/A	All costs must be itemized; NA if taking Developer Fee	N/A	8% total hard costs (line A7)
DPA	HOME	10% of grant		N/A	N/A

*Grant administration pays for the administration of the program (not projects): publications, marketing, office expenses, staff time, for working on the program.

*ADC pays for staff time on projects: inspections, spec writing, income verification, SHPO clearance, etc. (if performed by grant administrator).

Note: All program administration expenses, soft costs and activity delivery costs require documentation; developer fee does not.

Procurement of Administrative Services.

Applicant must check one of the three boxes below.

- ✓ Employees of the applicant will administer the program.

The program will be administered on behalf of the applicant by employees of a local unit of government or government agency. Applicants contracting for grant administration services must complete a Third party Administrator Management Plan (see Downloads section). Once a grant is awarded, this document must be completed and signed by the grantee and submitted to MSHDA prior to the disbursement of funds. A copy of the applicant's contract with the administering government agency must also be submitted to MSHDA prior to the disbursement of funds.

The program will be administered by non-government third party administrator. Applicants contracting for grant administration services must complete a Third Party Administrator Management Plan (see Downloads section). Once a grant is awarded, this document must be completed and signed by the grantee and submitted to MSHDA prior to the disbursement of funds. (If this option is checked, the applicant must also choose one of the options below):

Applicant will solicit Request for Proposals (RFP) from at least three qualified sources. The RFP will include all significant

Administrative Guidelines

evaluation factors and their importance, including the cost. The RFP will include the method of evaluation. Evaluation of proposals will be documented. The process will provide for maximum free and open competition.

OR

Applicant proposes using the same non-government third party administrator The third party administrator identified below will provide documentation of previous experience with Federal and/or MSHDA funds. The applicant also must choose the method of submission from the list and identify all current grants as instructed below

Name of Third Party Administrator:

I will/have faxed this attachment

I will/have mailed this attachment

I will/have uploaded this attachment

Applicant is required at a minimum to perform a formal RFP procurement process every three years to select the non-government third-party administrator.

If the procurement occurred within the past three years for the same grant type, the terms of the previous RFP (scope of services and amount of compensation) will remain in effect for the new grant, if awarded. Enter the date the current administrator was procured:

List all current grants and pending applications from MSHDA, HUD, or other housing funding agencies to be administered by applicant and contracted administrator named above.

We have no current funding at this time with MSHDA. We currently have program income funding and projects managed with Michigan Economic Development Corporation (MEDC).

Environmental Review. All proposals receiving federal funding from HUD must complete an Environmental Review.

Should the proposed project receive funding, the applicant must choose the type of Environmental Review to be completed prior to committing any funds to the project:

Initially the project will be classified as Categorical Excluded. All units/properties that will be assisted with grant funds have been identified in this application. The Statutory Checklist will be completed to determine if further review is required. If no further review is required, this

Administrative Guidelines

project will be Reclassified to Exempt. This classification can only be used for applications with identified project site(s). Most HRF applications do not have sites identified in advance of funding. HID Staff will be contacted to ensure this classification is appropriate.

- ✓ The project is assumed to be Categorical Excluded; therefore, the Statutory Checklist and publishing an NOI/RROF will be completed.

The project is assumed to require an Environmental Assessment; therefore, the Statutory Checklist and Environmental Assessment Checklist will be completed. Note: An Environmental Assessment is most commonly required for new construction of five (5) or more units, in downtown revitalization projects, and infrastructure projects.

The project involves a multi-family or mixed use building and is required to have a Phase I Environmental Site Assessment and a Phase II Environmental Site Assessment, if recommended. MSHDA Environmental Officer will be contacted for guidance.

I am not sure, and need clarification from MSHDA.

Fair Housing and Equal Opportunity. See HID Complaint Procedure Policy plus attachments.

Actions to Further Housing Choice. Check all of the following:

- ✓ Applicant will adopt a Fair Housing Policy.
- ✓ The applicant will maintain and continuously update a listing of Fair Housing Resources.
- ✓ The applicant will use the Fair Housing logo on all materials relating to housing programs distributed to general public.
- ✓ The following individual (staff person or contractor) is appointed as the Fair Housing contact person, and will be available during normal business hours:
 Name: Cynthia Polena
 Phone: (989) 731-7570
- ✓ The Fair Housing contact person indicated above will maintain a running log to record fair housing issues, complaints, and actions taken to promote fair housing. Check one of the boxes below.

Applicant must check one of the following.

Administrative Guidelines

The agency will use the logs provided in HID, Fair Housing, Attachment C;
OR

✓ The agency will use its own log format. Sample will be submitted to MSHDA via the following method:

If the second option is selected, the applicant must choose the method of submission from the list below.

I will/have faxed this attachment

I will/have mailed this attachment

✓ I will/have uploaded this attachment

https://mshda-matt.org/_Upload/1446103_1123589-FAIRHOUSINGLOGSAMPLE1.xls

Other actions that will be taken to promote Fair Housing choice:

Outreach and information on Fair Housing:

The applicant must check one of the following two boxes indicating how Fair Housing materials will be distributed.

- ✓ The applicant will distribute Fair Housing information and materials provided by MSHDA and/or HUD (or locally designed but approved by MSHDA) to area agencies and organizations and at public events, per Policy Bulletin #22. Indicate how, when, and to whom this information will be distributed. (Actual distribution of materials will be tracked in the Fair Housing log described above.)

Planned Distribution of Fair Information:

How	When	To Whom	Est. # of Contacts
Board & Housing Meetings	7/24/2018	board members / public	250
Continuum of Care Meetings	10/2018	board members / public	25
Hand out and Marketing ads	2018 - 2019	Clients, newspaper & radio ads	Clients, newspaper & radio ads

The table above does not reflect our planned planned distribution strategy. The plan for the distribution of Fair Housing materials is being submitted via the method below:

Administrative Guidelines

- I will/have faxed this attachment
- I will/have mailed this attachment
- I will/have uploaded this attachment

- ✓ The applicant will implement a complaint procedure (see HID Complaint Procedure Policy).
- ✓ The applicant will provide all prospective program participants and contractors with a copy of its complain procedure.

Upon receiving a Fair Housing complaint from a program participant, prospective program participant, or contractor, the applicant will immediately take all of the following required steps. Check all of the boxes below:

- ✓ Record the complaint in the running log.
- ✓ Inform the claimant that he/she may go directly to the Michigan Department of Civil Rights, HUD, or the local Fair Housing Center.
- ✓ Forward a copy of the complaint to the HID Specialist at MSHDA.

Applicants must conduct business from a barrier-free facility or make reasonable accommodations for persons with impaired mobility.

Check one of the following:

- ✓ All of our facilities are barrier-free.

OR

One or more of our facilities is not barrier-free. Describe reasonable accommodation for persons impaired mobility below:

Assurance of Equal Access to Program Benefits.

The applicant must check one of the following two boxes to describe outreach strategies to households.

- ✓ Equal access will be assured through effective outreach indicated below:

Strategy	Planned Contractor Outreach	# of Households Reached
Public radio station advertisements		7500
Local newspapers advertisements		10000

Administrative Guidelines

Public meetings and housing web-site 2500

The table above does not reflect our planned outreach to households strategy. The plan for program outreach is being submitted via the method below:

- I will/have faxed this attachment
- I will/have mailed this attachment
- I will/have uploaded this attachment

Assurance of Fair Selection of Contractors.

All qualified contractors have access to opportunities provided by the program through the following means: Check all that apply:

- ✓ A reasonable number of qualified contractors will be invited to bid on the project or appropriate parts of the project.
- ✓ All qualified contractors will be invited to bid on each unit.
- ✓ All qualified contractors will be on a master list to be invited to bid a few at a time on a rotating basis.
- ✓ All qualified contractors will be on a master list provided to homeowners.
- ✓ All contracts exceeding \$50,000 for improvements/activities undertaken on publicly owned-buildings require a performance and payment bond to be obtained.

Homeowner Rehabilitation only: The applicant plans to evaluate housing units facing health and safety emergencies; if the unit can be feasibly brought up to Michigan Rehabilitation Standards within the maximum per unit limits, that housing unit will receive priority over other units to receive rehab. If this box is checked, the applicant must assure fair access by clearly spelling out in the Program Guidelines the nature of the health and safety emergencies that will give the housing unit this priority.

Homebuyer-ADR only: Properties will be marketed at fair market value to all eligible homebuyers.

- ✓ Households served will be taken on a first-come first-served basis.

Households will be selected through a lottery to be conducted from applications received during an application period, publicized in

Administrative Guidelines

advance following the outreach measures shown above.

Homeowner Rehabilitation only: The applicant plans to evaluate housing units facing health and safety emergencies; if the unit can be feasibly brought up to Michigan Rehabilitation Standards within the maximum per unit limits, that housing unit will receive priority over other units to receive rehab. If this box is checked, the applicant must assure fair access by clearly spelling out in the Program Guidelines the nature of the "health and safety emergencies" that will give the housing unit this priority.

Other:

Minimum Contractor Qualifications. All work paid with HRF funds will be conducted under the direct supervision of a person or company which, at a minimum (check all that apply):

- ✓ Holds a valid Residential Builders License.
- ✓ Holds a valid license as required by law for any other skilled trades in which they are engaged (electrical, plumbing, etc.).
- ✓ Has in force insurance coverage (liability, workers' compensation, etc.) as required by law.
- ✓ Is not on the current HUD list of debarred contractors.
- ✓ Will secure a building permit for all work for which a permit is required.
- ✓ Has appropriate lead based paint training and/or certifications.

Section 3. all proposals receiving HUD funding from HID must adopt and implement a Section 3 Implementation Action Plan and certify they will comply with HUD's Section 3 requirements as follows:

- ✓ Applicant will adopt a Section 3 Implementation Action Plan before spending any grant dollars.
- ✓ Applicant will implement procedures designed to notify Section 3 residents about training and employment opportunities generated by Section 3 covered assistance and Section 3 business concerns about contracting opportunities generated by Section 3 covered assistance.

Administrative Guidelines

- ✓ Applicant will notify potential contractors for Section 3 covered projects of the requirements of this part, and incorporating the Section 3 clause in all solicitations and contracts.
- ✓ Applicant will facilitate the training and employment of Section 3 residents and the award of contracts to Section 3 business concerns by undertaking activities, as appropriate, to reach the HUD minimum numerical goals. Grant recipients, at their own discretion, may establish reasonable numerical goals for the training and employment of Section 3 residents and award contracts to Section 3 business concerns that exceed those specified minimum numerical goals.
- ✓ The applicant will assist and actively cooperate with the HUD in obtaining the compliance of contractors and subcontractors with the Section 3 requirements, and refrain from entering into any contact with any contractor where the grant recipient has notice or knowledge that the contractor has been found in violation of the regulations.
- ✓ Applicant will document actions taken to comply with the Section 3 requirements, the result of actions taken and impediments, if any.
- ✓ Applicant will obtain, from their contractors, subcontractors, and non-construction professional contractors, time records and any new certification documentation for Section 3 residents and business concerns with each payment request in order to accurately report Section 3 data on OPAL.
- ✓ Applicant will submit their current Section 3 Implementation Action Plan with this application.

https://mshda-matt.org/_Upload/1446103_1124725-OTSEGOCOUNTYSECTION3PLAN2018updated862018.pdf

Labor Standards. If any of the following apply, the requirements of Davis-Bacon and Related Acts (DBRA) are triggered. Check all boxes for any provisions that apply:

- ✓ Labor standards are not applicable.

The applicant plans to use HRF funds for the construction or rehabilitation of 12 or more assisted units under a single construction contract (DBRA will be triggered if HOME funds are used).

Lead Paint Requirements. If federal HOME funds are used to fund the proposed project, HUD lead paint regulations will apply. The applicant will assure compliance, as follows (check all that apply):

Administrative Guidelines

- ✓ The applicant employs staff members who have been trained in the HUD Lead Paint Requirements at 24 CFR Part 35. The names of these staff persons are:

Kevan Flory is our contracted Housing Inspector that has been trained in the HUD lead paint requirements of 24 CFR part 35.
- ✓ In order to assure that lead paint standards are met, the applicant has identified the following person(s) or company(ies) in the area who are qualified to conduct lead paint risk assessments:

Robert Peters Jr., State of Michigan lead inspector and risk assessor #P00013, employed by Otwell mawby, P.C. located in Traverse City, MI.
- ✓ The applicant expects to implement projects involving the use of \$5,000 or more per unit in federal funds for rehabilitation of properties constructed before 1978. In order to assure that work is completed in accordance with HUD-approved procedures for lead paint hazard reduction, the applicant has identified the following employees and/or contractors who have been trained in interim control measures:

Otsego County Housing Inspector, Kevan Flory; Simmons & Sons Builders; Big Red Construction; Sylvester Construction, Inc.; Bruce Construction.
- ✓ The applicant expects to implement projects involving the use of \$25,000 or more per unit in federal funds for rehabilitation of properties constructed before 1978. In order to assure that work is completed in accordance with HUD-approved procedures for lead paint hazard reduction, the applicant has identified the following employees and/or contractors who are certified for lead-paint abatement:

Otsego County Housing Inspector, Kevan Flory; Simmons & Sons Builders; Big Red Construction; Sylvester Construction, Inc.; Bruce Construction.
- ✓ Applicant is aware of the HUD lead hazard rule (24 CFR Part 35), and the MSHDA requirement that a lead supervisor be onsite for setup and clean up of every MSHDA/HUD interim control project OR that every worker on-site is certified by the EPA as a "Certified Lead Renovator". Applicant will comply with this requirement.

Complaint Procedure. The applicant will maintain a complaint referral system for complaints other than Fair Housing, as indicated below. The applicant's complaint procedure will (check all the elements below).

Administrative Guidelines

- ✓ Be provided in writing to all participating households and contractors.
- ✓ Ensure that a program administrator or staff responds to the initial complaint within 15 working days.
- ✓ Require that the CEO or Executive be informed of any complaint that the program administrator fails to resolve.
- ✓ Provide for the establishment of a review committee of at least three persons, including a community representative and a person with building/construction experience.
- ✓ Assure that the claimant may appear before the review committee either in person or in writing.
- ✓ Ensure that the review committee responds with a decision within 15 working days of the hearing.

- ✓ Where a complaint is still unresolved, the applicant will seek the services of the closest Dispute Resolution/Mediation program (see HID Grantee Tools, Complaint Procedure Policy for a link to the list of Community Mediation centers).

Local Government Citizen Participation Requirements. Local government applicants shall provide for and encourage citizen participation from all potential beneficiaries including low and moderate income persons, and minority and other traditionally disadvantaged citizens.

- ✓ The applicant has solicited comment and feedback from potential beneficiaries, and has provided reasonable advance notice of, and opportunity to comment on the proposed activities. This shall include notification of the public hearing dates, times, and locations. The hearings shall be held at times and locations convenient to meet the anticipated needs (handicapped, non-English speaking, etc.).
- ✓ The applicant has conducted at least one public hearing on the activities proposed in the application and at least one public hearing on the status of previously funded activities. (Current grantees may combine public hearings by reporting on the status of a previous grant while announcing the activities proposed in a new application.)
- ✓ The hearing on proposed activities included a review of (a) how the need for the proposed activities was identified, (b) how the proposed activities will be funded, including (to the extent known) the anticipated source of funds, (c) the date the application will be submitted, (d) requested amount of federal funds, (e) estimated portion of the federal funds that will benefit low and moderate income persons, (f) where the proposed activities will be conducted, (g) plans to minimize displacement of persons and businesses as a result of funded activities, (h) plans to assist persons actually displaced, and (i) the nature of the proposed activities.

Administrative Guidelines

- ✓ The hearing on the status of funded activities including (a) a general description of accomplishments to date, (b) a summary of expenditure to date, (c) a general description of remaining work, and (d) a general description of changes made to the project budget, performance targets, activity schedules, project scope, location, objectives, or beneficiaries.
- ✓ A summary of the hearing(s) is attached, showing the date, the number of persons attending, and a summary description of substantive comments.

Applicant must choose the method of submission from the list below.

I will/have faxed this attachment

I will/have mailed this attachment

✓ I will/have uploaded this attachment

https://mshda-matt.org/_Upload/1446103_1124715-MEETINGFORM.docx

Notice of the hearing was published in (a newspaper of local general circulation) on

.

- ✓ The applicant will ensure reasonable access to all local meetings, project records and information relating to the proposed and actual use of federal funds.
- ✓ The applicant will conduct all related public meetings or hearings in public buildings or facilities that are accessible to persons with disabilities, and provide accommodation upon request.
- ✓ The applicant has passed an official resolution authorizing the submission of the application; a copy of the resolution is attached.
https://mshda-matt.org/_Upload/1446103_1124732-MEETINGFORM.docx
 All local governments must identify (a) community development and housing needs, including the needs of low and moderate income persons, and (b) activities that will be undertaken to meet these needs, at least every two years. Within the last two years the applicant has done one of the following:

Applicant must check one of the following two boxes.

The applicant has conducted a Community Development and Housing Needs Assessment by discussing (at a city council meeting, public hearing or during a community planning process) and recording (a) major housing and community development needs of low and moderate

 Administrative Guidelines

income residents of the community (b) other major housing and community development needs of the whole community (or residents who are not of low and moderate income), and (c) planned or potential activities to address the needs in (a) and (b) above. A Community Development and Housing Needs Assessment will be submitted in the following manner:

I will/have faxed this attachment

I will/have mailed this attachment

✓ I will/have uploaded this attachment

https://mshda-matt.org/_Upload/1446103_1124737-2018OTSEGOSTRATEGYFINAL.pdf

- ✓ The applicant has a current strategic or community plan in place titled Otsego County Place-Based Targeting Strategy which was approved by HID on 7/24/2018 which meets this requirement.

Consultation Requirements for Nonprofit Applicants or Consortium applicants. Nonprofit applicants or Consortium Applicants must consult with each local government of the community where the proposed project will be conducted.

Upload a copy of the letters of consultation sent to each local unit of government.

Each local government of the community where the proposed project will be conducted has determined and documented that (a) the project is consistent with local plans and ordinances; (b) the community is aware of the potential impact of the project; (c) the planned activities are consistent with the local Consolidated Plan for Housing and Community Development (if applicable); and (d) the local government is disclosing the full extent of its current commitment to cooperate and coordinate with the Placemaking strategy project (e.g., coordination of repairs to streets, sidewalks and alleys, cooperation for signage placement, assurance of continued maintenance of improved areas, commitment of funds for redevelopment of demolition sites, complementary activities being implemented in the target area, etc.).

The project will be conducted in a local HOME Participating Jurisdiction. The local government letter indicates that the PJ is aware that eligibility for HOME funds from the HRF requires that the local government contributes funding to the project equal to 100% of the HRF funds to be expended within the local HOME PJ. For this project, % of the funding will be expended within a local HOME PJ. (The local PJ contribution should be shown and documented under the "Leverage" totals in Section I of this application. All these requirements may be included in the same letter.)

Audit. Check all that apply.

Administrative Guidelines

- ✓ The applicant agrees to adhere to the HID's Supplemental Audit Guide by sharing the Guide with the appropriate internal finance staff as well as the applicant's auditor.
- ✓ The applicant is a local government or nonprofit expected to expend \$750,000 or more annually in combined federal funds during the fiscal years covered by the grant, and will have an audit conducted by an eligible CPA firm or local government audit organization in accordance with OMB 2 CFR Part 200 Subpart F § 200.501 pursuant to the Single Audit Act Amendments of 1996.

OR

The applicant is a local government or nonprofit expected to expend less than \$750,000 annually in combined federal funds and will, at a minimum, be subject to the completion of an audit by an eligible CPA firm resulting in the preparation of audited financial statements

- ✓ Records will be available for review or audit by appropriate officials of HUD, MSHDA, and/or the General Accounting Office (GAO).
- ✓ The applicant recognizes that this provision does not limit the authority of federal agencies or MSHDA to conduct or arrange for an audit (e.g., financial audit, performance audit, evaluation, inspection, or review).
- ✓ The applicant understands that a reasonably proportionate share of the costs of audits required by, and performed in accordance with the Single Audit Act Amendments of 1996 (31 U.S.C. 7501-7507), as implemented by requirements of OMB 2 CFR Part 200 Subpart F are allowable.

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Implementation and Capacity

- ✓ Progress on the proposed program will meet the requirements for the commitment and expenditure of funds as outlined with in the grant agreement.
- ✓ The applicant acknowledges that funding may be reduced if expenditures fall behind the above targets.

Work Plan Time Frames. Complete the work plan below. Indicate activities under the grant and production targets which, when accomplished, will complete the project or program.

Activities / Production Targets. In the first column, list the activities and production targets relevant to achieving the "Desired Results" proposed in this applicant. Include the following activities below if relevant to the proposal. Add production targets to this list as appropriate (example: projected dates for completion of units throughout the grant period, dates for accomplishment of key local program objectives. etc.)

- Environmental Review
- Outreach and Public Information
- Processing Applications for Assistance
- Selecting Property to be Acquired
- Performing Property Inspections
- Supervising Construction Activities
- Awarding Project Bids
- Supervising Construction Bids
- Financial Management
- Processing Mortgage/Lien Documents
- Homeownership Counseling
- Proposed Development Team
- Other activities necessary to achieve the desired results identified by the applicant

Responsible Individual. Indicate the person primarily responsible for accomplishing the activity or production target.

" X or R " column. Simply indicate " X " if the Responsible Individual has worked on previous similar HID projects. MSHDA will consider the track record of these individuals, based on previous MSHDA grants, in evaluating this proposal. Indicate " R " if the individual has no prior experience with HID-funded grants in this capacity.

Beginning and ending dates. Indicate when the activity begins and ends, or the days by which listed production targets will be met.

Applicant must complete the table below:

Activities/Production Targets	Responsible Individual	X or R	Begin	End
	Marlene Hopp /	✓ X R	8/7/2018	8/15/2019

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Implementation and Capacity

Outreach and Public Information / Marketing	Cindee Polena Marlene Hopp	✓ X R	10/1/2018	9/15/2020
Processing Applications for Assistance	Cindee Polena	✓ X R	10/1/2018	9/15/2020
Fair Housing	Cindee Polena	✓ X R	8/7/2018	9/15/2020
Project Environmental Reviews	Cindee Polena / Marlene Hopp	✓ X R	10/1/2018	9/15/2020
Performing UPCS Property Inspections	Kevan Flory	✓ X R	11/1/2018	9/15/2020
Supervising Rehabilitation Activities	Kevan Flory	✓ X R	11/1/2018	9/15/2020
Awarding Project Bids	Housing Committee / Owners	✓ X R	12/1/2018	9/15/2020
Financial Management	Marlene Hopp	✓ X R	12/1/2018	10/15/2020
Processing Mortgage/Lien Document	Cindee Polena	✓ X R	12/15/2018	9/15/2020
Grant Admin / Management	Marlene Hopp	✓ X R	11/1/2018	12/31/2020

Where "R" has been indicated, please submit a resume or statement of qualifications for all individuals. Indicate below how these documents will be submitted.

- I will/have faxed this attachment
- I will/have mailed this attachment
- I will/have uploaded this attachment

Reporting Results.

✓ The applicant understands that the Final Outcome Report must be submitted prior to the submission of the final Financial Status Report. the form will be provided via MATT and include:

- a. A listing of the Desired Results identified in the original Planning Grid.
- b. The actual indicators used to measure the results.
- c. How the indicators were measured.
- d. The "findings" of the measurement.
- e. Lessons learned.

Technical Assistance.

The applicant is currently receiving technical assistance provided or paid for by a third party as follows:

Tehnical Assistance Currently Received

Type of TA	Provider	Funding Source
-------------------	-----------------	-----------------------

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Implementation and Capacity

Organization's Track Record. HID will evaluate the proposal based on past experience working with applicant on similar projects. Please select one of the following below which best describes the way HID should assess its previous experience working with applicant, and attach one page, if applicable to the option selected.

Applicant must select one of the following:

✓ Applicant has **past experience with HID grants similar projects which applicant believes fairly reflects the ability to complete this project.** The successful experience on these projects indicates a high likelihood to successfully complete the project proposed, achieving the "Desired Results" stated in Part II of this application and to producing the units proposed in Part I (Budget). (No attachment necessary.)

Applicant has **successful past experience with HID grants, implementing projects that are somewhat different** in type or scope than the proposed project.

Applicant must choose the method of submission from the list below:

- I will/have faxed this attachment
- I will/have mailed this attachment
- I will/have uploaded this attachment

Applicant has **past experience with HID grants which applicant believes does not fairly reflect the ability to complete this grant**, because the unusual difficulties unique to the previous project, difficulties encountered with a first-time project, lack of cooperation from other partners, etc. **One page is attached** which establishes why this project will be successful based on lesson learned, changes in local approach, this project is more well-suited to achieving the desired outcomes in the local market, etc.

Applicant must choose the method of submission from the list below:

- I will/have faxed this attachment
- I will/have mailed this attachment
- I will/have uploaded this attachment

Applicant has **no past experience with HID grants. One page is attached** which establishes capacity to do this project, based on any of the following: successful projects undertaken from other funding sources (describe the project and provide references), qualifications of persons implementing the project or program, etc.

Applicant must choose the method of submission from the list below:

- I will/have faxed this attachment
- I will/have mailed this attachment
- I will/have uploaded this attachment

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Implementation and Capacity

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Homeowner Assistance

Eligible Applicant: The applicant is:

Applicant must check one of the following

- A non-CDBG-entitled unit of local government.

A nonprofit that has produced CDD-funded homebuyer or rental units located in a local and/or state designated investment or incentive target area (NEZ, MainStreet, Blueprint, NPP, HUD Sustainable/Resilient areas, Redevelopment Readiness areas, etc.) that are supported by current or previous neighborhood-based community involved plans.

A nonprofit that can demonstrate capacity via partnerships and/or third party assistance to effectively implement CDD-funded activities.

Eligible Households: Benefits must be targeted to households with incomes that do not exceed 80% of Area Median Income (AMI). Complete the statement below:

- Benefits of the proposed program will be targeted to households with income that do not exceed 80 % AMI.

Select the county(s) and the income limit table will be filled in automatically when you click the "Save" button on the page, for the selected county(s) and the AMI % typed in above:

Please contact the CDS if household size is greater than 8 persons.

	1 Person HH	2 Person HH	3 Person HH	4 Person HH
Otsego	\$32,200	\$36,800	\$41,400	\$46,000
County				
	5 Person HH	6 Person HH	7 Person HH	8 Person HH
	\$49,700	\$53,400	\$57,050	\$60,750
	1 Person HH	2 Person HH	3 Person HH	4 Person HH
		\$36,800	\$41,400	\$46,000
	5 Person HH	6 Person HH	7 Person HH	8 Person HH
	\$49,700	\$53,400	\$57,050	\$60,750

Prospective participating households will be treated fairly. The characteristics determining eligibility for program benefits are listed below. Check all that apply:

- Income level not greater than the amounts shown on the table above.
- Current residents of the target area, who meet the minimum requirements assuring the security of their interest in the property (current property taxes, homeowners insurance, home mortgage, etc) as described in Program Guidelines to be published by the applicant.

Other:

The benefits available to eligible households are fairly applied to all participants. Check all that apply:

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Homeowner Assistance

A sliding scale based on income will determine repayment terms and/or individual project leverage expectations.

Eligible rehabilitation measures that are clearly described in local Program Guidelines will be consistently applied.

Other:

Eligible Properties: All properties assisted under this component must comply with the following.

Check all the boxes below:

- ✓ All properties served will be single family, condominium, mobile and manufactured homes on fee simple lots.
- ✓ If HOME funds are used the after-rehab value of assisted units will not exceed HOME Homeownership Value Limits. If CDBG/MSHDA funds are used the after-rehab value of assisted units will not exceed the HUD Single Family Value (FHA 203(b)) limit. Refer to the Value Limits posted on OPAL.
- ✓ All HOME-assisted units must receive at least \$1,000 which is secured by a lien.
- ✓ All units assisted will receive a maximum of \$40,000 in HRF assistance, inclusive of all hard, soft, lead remediation, or other associated costs.

Rehabilitation Standard. Except as noted under "Emergency Repairs", all HRF-assisted housing units will meet (check all that apply):

- ✓ The current Michigan Residential Code published by Michigan Department of Licensing and Regulatory Affairs, Bureau of Construction Codes.

The current Michigan Rehabilitation Code of Existing Buildings published by Michigan Department of Licensing and Regulatory Affairs, Bureau of Construction Codes.

Housing Quality Standards (HQS) set forth in 24 CFR 982.251.

The current International Property Maintenance Code per 24 CFR 92.251.

- ✓ Uniform Physical Conditions Standards (UPCS)

Applicant must include applicable minimum rehabilitation standards in locally published Program Guidelines.

- ✓ Applicant will include in the Program Guidelines a written minimum Rehabilitation Standard consistent with the above standard (s).

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Homeowner Assistance

Eligible Rehabilitation Measures are the actual costs of rehabilitating housing, according to local guidelines applied consistently to all applicants, (check all that apply to local program)

- ✓ Costs to meet applicable rehabilitation standards.
- ✓ Energy-related repairs or improvements.
- ✓ Improvements necessary for persons with disabilities.
- ✓ Abatement of lead-based paint hazards.

Other:

Eligible Landscaping. Applicants may use up to \$1,000 per unit which is not subject to lien requirements, only if the program complies with all the following provisions (check all the boxes below and provide the required information if applicant wishes to make this option available to assisted households):

The applicant agency wishes to make up to \$1,000 per unit in landscaping improvements available to assisted households;

The applicant has identified the following experienced landscape designer/architect (called the "Designer") who will support the program.

Name of Designer/Company/Title:

Documentation as attached from the person referenced above certifying the following:

The designer will work with assisted property owners who agree to the conditions below to design the landscape project, assist the property owner in planting/installing the materials, and provide one year of follow-up hands-on assistance with the property owner as needed for plant and lawn care, including specific instructions for watering and pruning.

The designer understands that the total cost of plant material and any fees for design services, training, and follow-up cannot exceed \$1,000 per unit charged to grant funds.

I will/have faxed this attachment

I will/have mailed this attachment

I will/have uploaded this attachment

All plant materials charged to grant funds will be visible from the street.

Emergency Repairs. Applicants may use request up to 15% of Homeowner rehabilitation funds for

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Homeowner Assistance

emergency repairs. Eligible repairs include repair or restoration activities necessary only to control or arrest the effects from disasters or imminent threats to the health and safety of a household. If emergency repairs are proposed, check the box and complete the statement:

Costs to address housing emergencies for housing units which do not meet UPCS upon completion will not exceed % of rehab funds expended.

The applicant's local Program Guidelines will stipulate that these funds are reserved for projects to arrest the effects from disasters or imminent threats to the health and safety of assisted households.

Refinancing and Closing Cost Assistance. Applicants may allow closing and other costs related to the refinance of a first mortgage as an eligible CDBG project cost, but only when this refinancing is needed in conjunction with a homeowner rehabilitation project. The closing and related costs can be up to \$3,500. These costs are included in the maximum \$40,000 allowable in a homeowner rehabilitation project (see Policy Bulletin #9). Homeowners are required to receive counseling from a MSHDA approved LINKS Counselor prior to receiving assistance.

The applicant will adhere to the details and standards for the new first mortgage as set forth in Policy Bulletin #10, Attachment F.

Relocation Costs. MSHDA does not permit permanent displacement. Check the box below:

The applicant understands that temporary relocation may result from program activities and costs thereof, as set forth in the Uniform Relocation Act and Section 104(d) of Housing and Community Development Act of 1974 may be paid from grant funds as part of the rehabilitation cost. (See Policy Bulletin, #24.)

Required Leveraged. Additional funds will be leveraged in the amount of at least 25% of homeowner assistance funds. Future funding may be denied for applicants that do not meet this leverage requirement. The applicant plans to meet this leverage requirement from the following sources:

Applicant must check at least one of the following:

MSHDA PIP loans on projects NOT assisted with this grant.

MSHDA PIP loans on projects assisted with this grant.

Cash contributions by property owners assisted with this grant (including home improvement loans other than PIP).

Weatherization funds used on projects assisted with this grant.

USDA Rural Development funds used on projects assisted with this grant.

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Homeowner Assistance

✓ Federal Home Loan Bank of Indianapolis.

Local PJ funds for homeowner assistance in the eligilbe target area.

Local public funds (other than CDBG housing grant program income) used on projects assisted with this grant.

Other:

Other:

Loan Terms. MSHDA requires that repayment of assistance be based on the ability to repay. All homeowners with incomes greater than 60% Area Median Income (AMI) must finance a portion of the costs with funds outside this grant OR amortize a portion of the loan; this non-grant or amortized portion must increase with higher incomes.

Applicant is required to check one of the following:

✓ For projects with grant assistance exceeding \$2,5000, the applicant proposes to offer assistance according to the table below, which will be part of local program guidelines. Check appropriate box for desired heading and complete table below.

% of AMI	% of CDD Funds for Project	% of Leverage Funds
%	%	%
%	%	%
%	%	%
%	%	%
%	%	%

The table above is not applicable for applicant's program. An alternate table will be submitted for CDD prior approval.

I will/have faxed this attachment

I will/have mailed this attachment

I will/have uploaded this attachment

Additional Loan Terms. All of the following are required. Check each box below:

✓ Costs associated with compliance with federal Lead Based Paint regulations in excess of \$5,000 will be included within the lien.

✓ The local program will place a lien on all projects where the amount of grant assistance exceeds \$2,500. This lien will enforce a loan that is either (a) repayable in full upon sale or transfer or if no longer occupied by the

HRF Application

Organization: Otsego County Housing Committee

HRF-2016-812-02

Homeowner Assistance

borrower, (b) amortized under the terms described above, or (c) forgivable through a 5-year lien when \$5,000 or less in CDBG funds is used for rehabilitation and 100% leverage is brought to the project.

If the property is sold, the amount of assistance will be recaptured as Program Income under the terms above. The applicant understands if sales proceeds from a transaction at fair market value are insufficient to repay the loan, the applicant may discharge its lien in return for the full proceeds of sale.

✓ If the applicant is receiving funds under a Housing Resource Fund grant, the applicant understands that MSHDA will be the mortgagee and all funds recaptured will be retained by MSHDA.

The mortgage and mortgage note securing this lien will be on forms provided or approved by MSHDA.

✓ The mortgage will be properly recorded.

✓ The applicant will require all homeowners to execute the "Homeowner Certification and Program Agreement" which is Policy Bulletin #16, Attachment E.

CERTIFYING OFFICER DESIGNATION
(for Local Units of Government)

The Certifying Officer, responsible for compliance with all environmental review requirements, is usually the chief elected official for the responsible entity/jurisdiction in which the project is located, or his/her designee. The designee should be an official with the legal authority to unilaterally sign a contract which obligates the grantee. The original of this executed form must be included in the Environmental Review Record.

Designation:

Rachel Frisch, Administrator, of Otsego County is the Certifying Officer as defined in 24 CFR Sec. 58.13 for the Environmental Review requirements of MSHDA HOME funds, Grant Number: HRF-2016-812-02

Date: 8/16/2018

Designated by:

Rachel Frisch
Rachel Frisch, Administrator

Acknowledgement:

I, Rachel Frisch, Administrator, accept the responsibilities of the Certifying Officer for Otsego County, as defined in 24 CFR 58.13. I consent to assume the status of "responsible Federal official" as that term is used in section 102 of the National Environmental Policy Act of 1969 and understand that I am responsible for all the requirements of section 102 of NEPA and the related provisions in 40 CFR parts 1500 through 1508, and 24 CFR part 58, including the related Federal authorities listed in Sec. 58.5 insofar as the provisions of these laws apply to the HUD responsibilities for environmental review, decision-making and action that have been assumed by the responsible entity.

On behalf of the recipient, I personally accept the jurisdiction of the Federal courts for enforcement of all these responsibilities, in my capacity as certifying officer of the responsible entity.

Certifying Officer Signature:

Rachel Frisch
Rachel Frisch
Otsego County Administrator

Date: August 16, 2018

Michigan State Housing Development Authority
Housing Initiatives Division

**PROGRAM DETERMINATION: CATEGORICALLY EXCLUDED
SUBJECT TO 58.5 (Sec. 58.35a)**

Responsible Entity (Grantee): Otsego County MSHDA Grant # HRF-2016-812-02
Contact Person: Marlene Hopp Phone: (989) 731-7570 E-mail:
mhopp@otsegoctymt.gov

Program: HOME Program Name: Otsego County Housing Committee

HID Federal Funds for Project Activities	\$105,000	Source: <u>MSHDA HOME</u>
HID Federal Funds for Administration	\$ 10,500	Source: <u>MSHDA HOME</u>
Other MSHDA	\$ 48,000	Source: <u>MSHDA PIP</u>
Other Funds:	\$ 38,500	Source: <u>DHHS & FHLB repairs</u>
	\$ 2,000	Source: <u>VA relief</u>
Total Program Amount:	\$204,000	

PROGRAM DESCRIPTION. Otsego County Housing Committee will provide homeowner rehabilitation to seven (7) single-family residential dwellings within the targeted area of the City of Gayord with MSHDA HOME and leveraging funding as listed above. The project will include administration funding.

- HID Federal funding includes administrative and management activities which are determined to be Exempt from NEPA pursuant to 24 CFR 58.34(a)(3).

PROGRAM DETERMINATION: It is determined that the overall grant program is classified as: Categorically Excluded Subject to 58.5 pursuant to Sec. 58.35a:

1. Acquisition, repair, improvement, reconstruction, or rehabilitation of public facilities and improvements (other than buildings) when the facilities and improvements are in place and will be retained in the same use without change in size or capacity of more than 20 percent (e.g., replacement of water or sewer lines, reconstruction of curbs and sidewalks, repaving of streets).
2. Special projects directed to the removal of material and architectural barriers that restrict the mobility of and accessibility to elderly and handicapped persons.

Rehabilitation of buildings and improvements when the following conditions are met:

- 3.i. In the case of a building for residential use (with one to four units), the density is not increased beyond four units, the land use is not changed, and the footprint of the building is not increased in a floodplain or in a wetland;
- 3.ii. In the case of multifamily residential buildings:
- A. Unit density is not changed more than 20 percent;
 - B. The project does not involve changes in land use from residential to non-residential; and
 - C. The estimated cost of rehabilitation is less than 75 percent of the total estimated cost of replacement after rehabilitation.
- 3.iii. In the case of non-residential structures, including commercial, industrial, and public buildings:
- A. The facilities and improvements are in place and will not be changed in size or capacity by more than 20 percent; and
 - B. The activity does not involve a change in land use, such as from non-residential to residential, commercial to industrial, or from one industrial use to another.
4. i. An individual action on up to four dwelling units where there is a maximum of four units on any one site. The

units can be four 1-unit buildings or one 4-unit building or any combination in between; or

- 4.ii. An individual action on a project of five or more housing units developed on scattered sites when the sites are more than 2,000 feet apart and there are not more than four housing units on any one site.
- 4.iii. Paragraphs (a)(4)(i) and (ii) of this section do not apply to rehabilitation of a building for residential use (with one to four units) (see paragraph (a)(3)(i) of this section).
- 5. Acquisition (including leasing) or disposition of, or equity loans on an existing structure, or acquisition (including leasing) of vacant land provided that the structure or land acquired, financed, or disposed of will be retained for the same use.
- 6. Combinations of the above activities.

By signing below the Responsible Entity certifies in writing that each activity or project is Categorically Excluded Subject to 58.5 and meets the conditions specified for such determination per section 24 CFR 58.35(a) and that all projects will be reviewed for compliance with authorities in sec. 58.6. Please keep a copy of this determination in your ERR or project files.

Signed by:



Marlene K. Hopp, Director, Otsego County Housing Committee

Date: 8/16/2018

Responsible Entity Signature:

Local government: Grantee Certifying Officer signs, retains original; sends copy to HID Staff.

Nonprofit: Leave this section blank. Preparer signs, sends original to MSHDA for signature; an executed copy will be returned for Grantee's ERR. HID Staff reviews/signs.



Rachel Frisch, Administrator, Otsego County

Date: 8-16-18

**ENVIRONMENTAL REVIEW FOR ACTIVITY/PROJECT THAT IS
CATEGORICALLY EXCLUDED SUBJECT TO SECTION 58.5
PURSUANT TO 24 CFR 58.35(A)
(Statutory Checklist)**

Project Information

Project Name	Otsego County Housing Committee
Responsible Entity	Otsego County
Grant Recipient (if different than Responsible Entity)	
Preparer	Marlene K. Hopp, Director, Otsego County Housing Committee (989) 731-7570 mhopp@otsegocountymi.gov
Certifying Officer Name and Title	Rachel Frisch, Administrator
Consultant (if applicable)	
Direct Comments to	Marlene K. Hopp, Director
Project Location (Target area, city, county)	Targeted area, City of Gaylord
Description of the Proposed Project [24 CFR 50.12 & 58.32; 40 CFR 1508.25]	Rehabilitation to seven (7) neighboring single-family residential dwellings. Cat Excluded 58.35(a)(3)
Level of Environmental Review Determination: Categorically Excluded per 24 CFR 58.35(a), and subject to laws and authorities at §58.5	Categorically Excluded Subject to 58.35(a)(3)

Funding Information: See Program Determination for complete list of non-HUD funds.

Grant Number	HUD Program	Funding Amount
HRF-2016-812-02	MSHDA HOME	\$ 115,500
		\$
		\$
		\$
		\$

Estimated HUD Funded Amount		\$ 115,500
Estimated Total Project Cost (All HUD and non-HUD funds combined) [24 CFR 58.32(d)]		\$ 204,000

Compliance with 24 CFR 50.4, 58.5, and 58.6 Laws and Authorities

Record below the compliance or conformance determinations for each statute, executive order, or regulation. Provide credible, traceable, and supportive source documentation for each authority. Where applicable, complete the necessary reviews or consultations and obtain or note applicable permits of approvals. Clearly note citations, dates/names/titles of contacts, and page references. Attach additional documentation to support conclusions.

Compliance Factors Statutes, Executive Orders, and Regulations listed at 24 CFR §58.5 and §58.6	Are formal compliance steps or mitigation required?	Compliance determinations
STATUTES, EXECUTIVE ORDERS, AND REGULATIONS LISTED AT 24 CFR 50.4 and 58.6		
Airport Hazards - 24 CFR Part 51 Subpart D	Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>	The Gaylord Regional Airport is not a civilian, commercial services airport or within 15,000 feet of a military airfield within the targeted area of the City of Gaylord, EPA NEPA Assist maps and list of airports attached.
Coastal Barrier Resources - Coastal Barrier Resources Act, as amended by the Coastal Barrier Improvement Act of 1990 [16 USC 3501]	Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>	The City of Gaylord located in Otsego County is not located in a coastal area. See attached CBRS map dated 3/14/2016 with Otsego County indicated.
Flood Insurance - Flood Disaster Protection Act of 1973 and National Flood Insurance Reform Act of 1994 [42 USC 4001-4128 and 42 USC 5154a]	Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>	The rehabilitation projects in the City of Gaylord, Michigan are not located in a FEMA Flood Insurance Rate Map Special Flood Hazard Area (SFHA). FEMA flood map service center with map attached.
STATUTES, EXECUTIVE ORDERS, AND REGULATIONS LISTED AT 24 CFR 50.4 & 58.5		
Clean Air - Clean Air Act, as amended, particularly section 176(c) & (d); 40 CFR Parts 6, 51, 93	Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>	The City of Gaylord is not in a non attainment zone. See attached Attainment Status map from the MI Department of Environmental Quality.
Coastal Zone Management - Coastal Zone Management Act, sections 307(c) & (d)	Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>	The City of Gaylord is not located in a coastal county. See attached print screen of CZMA web page with no listing for Otsego County.
Contamination and Toxic Substances - 24 CFR Part 50.3(i) & 58.5(i)(2)	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>	Within the City of Gaylord are no landfills, being 11.6 miles away. However, Tier II review required on each rehabilitation project for lead-based paint, asbestos and nearby underground storage tanks, within the City of Gaylord. See EPA NEPA Assist map with locations.
Endangered Species - Endangered Species Act of 1973, particularly section 7; 50 CFR Part 402	Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>	Project activities will only include rehabilitation of existing homes and therefore will not disturb the grounds of endangered species habitat. List of endangered species in Otsego County attached.
Explosive and Flammable Hazards - 24 CFR Part 51	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>	Projects are rehabilitation to existing homes and explosives and flammable hazards require

Subpart C		a Tier II review on each project due to holding tanks that pose explosive and flammable hazards in the City of Gaylord.
Farmlands Protection - Farmland Protection Policy Act of 1981, particularly sections 1504(b) and 1541; 7 CFR Part 658	Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>	Projects are rehabilitation to existing homes in the City of Gaylord, a urban community that has no farmlands to be affected, see EPA NEPAassist map attached.
Floodplain Management - Executive Order 11988, particularly section 2(a); 24 CFR Part 55	Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>	There are no floodplains in the City of Gaylord or Otsego County. See attached FEMA Flood map attached, not mapped.

Historic Preservation, SHPO - National Historic Preservation Act of 1966, particularly sections 106 and 110; 36 CFR Part 800	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Tier II review required on each project. Residential dwellings are over 50+ years of age, SHPO will be required to be notified.
Historic Preservation, Native American Tribes – National Historic Preservation Act of 1966, section 106	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Project contains only home rehabilitation, no ground disturbances will be performed, as the City of Gaylord has city water/sewer throughout, therefore contact with the Native American Tribes are not necessary.
Noise Abatement and Control - Noise Control Act of 1972, as amended by the Quiet Communities Act of 1978; 24 CFR Part 51 Subpart B	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Tier II review required on each project. Active railroad running north and south in the City of Gaylord.
Sole Source Aquifers - Safe Drinking Water Act of 1974, as amended, particularly section 1424(e); 40 CFR Part 149	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	There are no sole source aquifers in Michigan. See attached EPA NEPAAssist sole source aquifer map.
Wetlands Protection - Executive Order 11990, particularly sections 2 and 5	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Tier II review required on each project, as there are few wetlands in the City of Gaylord. see attached EPA NEPAAssist map.
Wild and Scenic Rivers - Wild and Scenic Rivers Act of 1968, particularly section 7(b) and (c)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	There are no federally-designated Wild and Scenic Rivers in the City of Gaylord or Otsego County. See attached map and list of federally-designated Wild and Scenic Rivers in Michigan.
ENVIRONMENTAL JUSTICE		
Environmental Justice - Executive Order 12898	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Tier II review required. Rehabilitation only to existing homes in the City of Gaylord.

Field Inspection (Date and completed by)	
Summary of Findings and Conclusions	

Additional Mitigation Measures and Conditions

Summarize below additional mitigation measures adopted by the Responsible Entity to reduce, avoid, or eliminate adverse environmental impacts and to avoid non-compliance or non-conformance with related authorities and factors. These measures/conditions must be incorporated into project contracts, development agreements, and other relevant documents. Review MI DEQ permit checklist as a reference and add any additional items below needed to ensure compliance with applicable laws.

Law, Authority, or Factor	Mitigation Measure
Lead-based Paint	Interim Control or Abatement

Asbestos	Abatement

Determination:

- This non-tiered categorically excluded activity/project converts to **EXEMPT** per Section 58.34(a)(12), because it does not require any mitigation for compliance with any listed statutes or authorities, nor requires any formal permit or license; **Funds may be committed and drawn down after certification of this part** for this (now) EXEMPT project; OR
- This non-tiered categorically excluded activity/project cannot convert to Exempt status because one or more statutes or authorities listed at Section 58.5 requires formal consultation or mitigation. Complete consultation/mitigation protocol requirements, **publish NOI/RROF and obtain "Authority to Use Grant Funds"** (HUD 7015.16) per Section 58.70 and 58.71 before committing or drawing down any funds; OR
- After conducting a Tier I Environmental review on the project/program target area, it has been determined that this categorically excluded activity/project cannot convert to exempt status because one or more statutes or authorities listed at Section 58.5 requires formal consultation or mitigation. Formal consultation/mitigation will occur as project sites are identified in a Tier II Site-Specific Environmental Review process. All identified actions/mitigation measures required by the Tier II review will be completed and endorsed by the governing compliance agency before committing or drawing down any funds for the project; OR
- This project is not categorically excluded OR, if originally categorically excluded, is now subject to a full Environmental Assessment according to Part 58 Subpart E due to extraordinary circumstances (Section 58.35(c)).

Preparer Signature: Marlene K. Hopp Date: 8/16/2018

Name/Title/Organization: **Marlene K. Hopp, Director, Otsego County Housing Committee**

Responsible Entity Agency Official Signature:

Rachel Frisch Date: 8-16-18

Name/Title: **Rachel Frisch, Administrator, Otsego County**

This original, signed document and related supporting material must be retained on file by the Responsible Entity in an Environmental Review Record (ERR) for the activity/project (ref: 24 CFR Part 58.38) and in accordance with recordkeeping requirements for the HUD program(s).

TIERED REVIEW STRATEGY

Grantee: Otsego County Housing Committee
2016-812-02

HID Grant No. HRF-

Jurisdiction: City of Gaylord, Michigan

Source of Federal Funds: HOME

Program Type: Homeowner Rehabilitation

The Responsible Entity has determined that a tiered environmental review will be conducted on this grant's program activities because not all project sites have been identified at the time the Environmental Review process is being undertaken. The tiered review will allow for 1) the broad analysis of environmental impacts that may or may not occur on a typical site within the geographic area covered by these activities (Tier I) and 2) follow up analysis of individual sites as they are identified (Tier II). No funds will be committed to any one project site until both levels of the tiered review are completed for that project.

Tier I Review:

The Tier I Review covers the geographic area defined as: **The City of Gaylord**. All environmental compliance factors on the **Statutory Checklist** applicable to this target/geographic area have been reviewed for compliance and all supporting documentation is provided. The 58.6 environmental factors have have not been included in the Tier I Statutory Checklist. Environmental impacts that will vary by site have been identified as needing a "site-specific review" and will be resolved in the Tier II review when specific project locations are known.

Upon completion of the Tier I Review, Local Units of Government will publish or post the **Notice of Intent to RROF** for public review with comment(s) and the Request for Release of Funds and Certification will be forwarded to **MSHDA**. Nonprofits will forward documentation that the Tier I Review has been completed and MSHDA will publish and Request Release of Funds from HUD.

The anticipated Release of Funds date (HUD form 7015.16) is: September 21, 2018.

Tier II Review:

The Tier II, site-specific review will be undertaken on individual project sites as they are selected for assistance using the *Tier II Site-Specific Checklist form*. This form will be created to address the following unresolved **58.5** factors identified during the Tier I Review of this grant program:

- | | | |
|---|--|--|
| <input type="checkbox"/> Clean Air Act | <input type="checkbox"/> Coastal Zone Management | <input checked="" type="checkbox"/> Cont. & Toxic Substances |
| <input type="checkbox"/> Endangered Species | <input checked="" type="checkbox"/> Explosive & Flam. Operations | <input type="checkbox"/> Farmlands Protection |
| <input type="checkbox"/> Floodplain Management | <input checked="" type="checkbox"/> Historic Pres., SHPO | <input type="checkbox"/> Historic Pres., Tribal |
| <input checked="" type="checkbox"/> Noise Abatement/Control | <input checked="" type="checkbox"/> Wetlands Protection | <input type="checkbox"/> Wild & Scenic Rivers |
| <input checked="" type="checkbox"/> Environmental Justice | | |

The following section **58.6** environmental factors will also be included in the Tier II checklist.

- Airport Hazards Coastal Barriers Resources Flood Insurance

No program funds will be committed to a specific site until the Tier II review has been completed for the site.

If impacts are identified during the Tier II Review that cannot be fully mitigated or corrected for a specific site, the site will be treated as a separate project and the process of environmental review and publishing and requesting release of funds will be undertaken specifically for that site.

If there are no impacts or impacts will be fully mitigated during construction on an individual site, the project will proceed without further notice to the public.

Site specific environmental analyses will be available for review at: **225 West Main Street, room 213, Gaylord MI 49735 (989) 731-7570**

Prepared by: **Marlene K. Hopp**

Date: **August 15, 2018**

Responsible Entity Signature:	
Local government:	Grantee Certifying Officer signs, retains original, sends copy to HID Staff.
Nonprofit:	Leave this section blank. Preparer signs, sends original to MSHDA for signature; an executed copy will be returned for Grantee's ERR.
<i>Rachel Frisch</i>	Date: <i>8.16.18</i>
Rachel Frisch, Otsego County Administrator	

DETERMINING DATES FOR NOTICE OF INTENT

Complete all shaded areas.

NOTE: The ROF date calculated here is for use in the NOI/RROF publication. The actual ROF date may differ depending on the date notices are actually received by HUD or MSHDA. The actual ROF date will be the date indicated on HUD form 7015.16, Authority to Use Grant Funds, issued by MSHDA (for local governments) or HUD (for nonprofits).

	Days of Comment Periods	Date	Comments	Reference in NOI/RROF
First Comment Period Comments are to be directed to the local unit of government that is the grantee, or, if a nonprofit grantee, to MSHDA	Date of Publication:	8/24/2018	Enter Date of publication. Save the entire newspaper page to send to MSHDA/HUD with the Request for Release of Funds (RROF). Keep extra copy for Environmental Review Record (ERR) file.	Top left hand corner of p.1
	Day 1	8/25/2018	Day 1 of 1 st comment period is the day after publication.	Not Applicable
	2	8/26/2018	List successive dates after Day 1 in the shaded "Date" column.	
	3	8/27/2018		
	4	8/28/2018		
	5	8/29/2018		
	6	8/30/2018		
	7	8/31/2018 (Stop!)	Is day 7 a business day? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, enter this date on the next line as the last day of 1 st comment period. If no, enter the next business day after day 7 on the next line as the last day of 1 st comment period.	
Last day of 1st comment period	8/31/2018	Do not send the RROF to HUD/MSHDA prior to close of business on this day. The public is entitled to 7 full days to make comments	In ¶ entitled "Public Comments"	
Second Comment Period Comments are directed to MSHDA or HUD (in the case of nonprofits)	On or About Date:	9/4/2018	Date MSHDA/HUD is expected to receive the RROF. RROF may be faxed or mailed. If using U.S. mail, allow extra days for delivery and receipt.	1 st sentence of Notice
	Day 1	9/5/2018	Day 1 of the 2 nd comment period is the day after the "on or about date," i.e., the day after RROF is received by MSHDA or HUD.	Not Applicable
	2	9/6/2018	List successive dates after Day 1 in the shaded "Date" column.	
	3	9/7/2018		
	4	9/8/2018		
	5	9/9/2018		
	6	9/10/2018		
	7	9/11/2018		
	8	9/12/2018		
	9	9/13/2018		
	10	9/14/2018		
	11	9/15/2018		
	12	9/16/2018		
	13	9/17/2018		
	14	9/18/2018		
15	9/19/2018 (Stop!)	Is day 15 a business day? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, enter this date on the next line as the last day of 2 nd comment period. If no, enter the next business day after day 15 on the next line as the last day of 2 nd comment period.		
Last day of 2nd Comment Period:	9/20/2018	The last day of the 2 nd comment period must be a business day.	The last sentence in Notice	
Release of Funds (ROF) Date:	9/21/2018	The day after last day of 2 nd comment period. This date does not have to be a business day, but it cannot be a federal holiday. If a federal holiday, use the day after the holiday as the ROF date. This ROF date is calculated here for use in the publication. DO NOT INCUR PROJECT COSTS until HUD 7015.16 is received from CD Specialist informing the grantee of the actual ROF date.		

NOTICE OF INTENT TO REQUEST RELEASE OF FUNDS

August 24, 2018

Otsego County Housing Committee
225 W. Main Street, room 213
Gaylord MI 49735
(989) 731-7570

On or about September 21, 2018, Otsego County Housing Committee will request the Michigan State Housing Development Authority (MSHDA) to release the following program funds:

- CDBG under Title I of the Housing and Community Development Act of 1974
- HOME under Title II (HOME Investment Partnership Act) of the Cranston-Gonzalez National Affordable Housing Act of 1990
- Other:

Program funds will be used to undertake a project known as Otsego County Housing Committee for the purpose of rehabilitation seven (7) single-family residential owner-occupied dwellings within the targeted area of the City of Gaylord in the amount of \$115,500, including administration funding from Michigan State Housing Development Authority HOME funds and leveraging funding in the amount of \$88,500 through various agencies. The activities proposed are categorically excluded under HUD regulations at 24 CFR Part 58 from National Environmental Policy Act (NEPA) requirements.

For tiered review projects. The Tier I broad assessment of the project area revealed no serious environmental adverse impacts for: Airport Hazards, Coastal Barrier Resources, Flood Insurance, Clean Air Act, Coastal Zone Management, Endangered Species, Farmlands Protection, Floodplain Management, Historic Preservation - Native American Tribes, Sole Source Aquifers, Wild and Scenic Rivers. Tier II site-specific environmental analyses will be conducted as project sites are identified and will include the following factors: Contamination and Toxic Substances, Lead-Based Paint, Asbestos, Explosive and Flammable Hazards, Historic Preservation - State Historic Preservation Office, Noise Abatement and Control, Wetlands, Environmental Justice.

An Environmental Review Record (ERR) that documents the environmental determinations for this project is on file at Otsego County Housing Committee 225 West Main Street, room 213, Gaylord MI 49735. The record is available for review and may be examined or copied weekdays, 8:00 a.m. to 12:00 p.m. and 1:00 p.m. to 3:00 p.m.

PUBLIC COMMENTS

Any individual, group, or agency may submit written comments on the ERR to Otsego County Housing Committee 225 West Main Street, room 213, Gaylord MI 49735. All comments received by August 31, 2018 will be considered prior to requesting a release of funds

ENVIRONMENTAL CERTIFICATION

Otsego County certifies to MSHDA that Otsego County Housing Committee and Rachel Frisch in his/her capacity as Otsego County Administrator and Certifying Officer consent to accept the jurisdiction of the Federal Courts if an action is brought to enforce responsibilities in relation to the environmental review process and that these responsibilities have been satisfied. MSHDA's approval

of the certification satisfies its responsibilities under NEPA and related laws and authorities, and allows Otsego County Housing Committee to use Program funds.

OBJECTIONS TO RELEASE OF FUNDS

HUD will accept objections to its release of funds and MSHDA's certification for a period of fifteen days following the anticipated submission date or its actual receipt of the request (whichever is later) only if they are on one of the following bases: (a) the certification was not executed by the Certifying Officer of MSHDA; (b) MSHDA has omitted a step or failed to make a decision or finding required by HUD regulations at 24 CFR Part 58; (c) the grant recipient has committed funds or incurred costs not authorized by 24 CFR Part 58 before approval of a release of funds by HUD; or (d) another Federal agency acting pursuant to 40 CFR Part 1504 has submitted a written finding that the project is unsatisfactory from the standpoint of environmental quality. Objections must be prepared and submitted in accordance with the required procedures (24 CFR Part 58, Sec. 58.76) and shall be addressed to the U.S. Department of Housing and Urban Development—Detroit Field Office, Patrick V. McNamara Federal Building, 477 Michigan Avenue, Room 1710, Detroit, Michigan 48226-2592, Attn: Keith Hernandez, Director. Potential objectors should contact HUD to verify the actual last day of the objection period.

Rachel Frisch, Otsego County Administrator, Certifying Officer



AN EQUAL OPPORTUNITY HOUSING PROGRAM



**OTSEGO COUNTY
Board of Commissioners**



EXECUTIVE SUMMARY

AGENDA ITEM: Security Resource Officer (SRO) Agreement and Budget Amendment	AGENDA DATE: August 28, 2018
AGENDA PLACEMENT: Consent Agenda, Item D.	ACTION REQUESTED: Motion to Approve
STAFF CONTACT(S): Rachel Frisch, County Administrator	ATTORNEY REVIEW: No

BACKGROUND/DISCUSSION:

Otsego County proposes to enter into an Intergovernmental Agreement with the Gaylord School District to provide a Sheriff Deputy to serve as a school resource officer.

RECOMMENDATION:

Staff requests Board approval on Hiring a SRO and approval of the Budget Amendment to do so.

INTER-GOVERNMENTAL AGREEMENT
RE: SCHOOL DISTRICT RESOURCE OFFICER

THIS INTER-GOVERNMENTAL AGREEMENT RE: SCHOOL DISTRICT RESOURCE OFFICER ("Agreement") is made as of September 1, 2018 (the "Effective Date"), by and between GAYLORD COMMUNITY SCHOOLS, a Michigan general powers school district, whose address is 615 S. Elm Street, Gaylord, Michigan 49735 (the "School District"), and OTSEGO COUNTY, a Michigan municipal corporation, whose address is 225 W. Main Street, Gaylord, Michigan 49735 (the "County"). The School District and County may each be referred to herein as a "Party" and collectively as the "Parties."

Recitals

- A. The School District is a public school district and as such does not maintain its own law enforcement agency.
- B. The County operates a school resource officer program (hereinafter referred to as "Program") under which it contracts with school districts to provide school resource officer services in addition to those services which are provided throughout the County by the Otsego County Sheriff's Department (the "Sherriff's Department).
- C. County agrees to provide the Services and associated equipment to the School District in accordance with the terms and conditions of this Agreement.

NOW THEREFORE, in consideration of the foregoing and the mutual covenants set forth herein, the Parties agree as follows:

I. SCHOOL RESOURCE OFFICER SERVICES

- A. **School Resource Officer.** In addition to general law enforcement services provided throughout the County, County shall provide the School District with one (1) school resource officer (the "SRO") to provide the services outlined in Section I.B. hereof, or as otherwise agreed to by the Parties in writing (the "Services"). The SRO shall be assigned by the County to provide Services to the School District for a maximum of forty (40) hours per week during the School District's 2018-19 school year, while school is in session, as agreed upon by the Parties in writing during the Term of this Agreement. The Parties agree, however, that the County shall provide Services for the School District activities and events at School District facilities at times outside of the normal school day (e.g., evenings, Saturdays and Sundays) through the use of flex scheduling, when possible and without additional charge. The performance of services under Agreement will be law enforcement and School Resource Officer related and will not be those typically performed by School District employees.
- B. **Scope of Services.** The Services to be provided by the SRO shall consist of investigations of on and off campus incidents that might affect the security of the School District facilities and campuses, staff and students; early intervention, security, long-term problem solving for existing criminal and safety concerns; and using education, community resources, dialogue and compromise to achieve solutions tailored to changing concerns and issues within the School District. The Sheriff's Department shall cooperate

with the School District identifying issues to be addressed by SRO while performing the Services.

- C. **Scheduling.** The Sheriff's Department shall determine which of its law enforcement officers shall staff the school resource officer position. The Sheriff's Department will coordinate with the District when selecting the school resource officer. The Primary Contact Persons shall mutually agree on the location or locations at which the SRO will be stationed within the School District. The Parties' intent is to establish the location schedule at least 14 days or 2 calendar weeks in advance and to communicate that schedule to SRO and the School District personnel in charge of the location at which the school resource officer is to be stationed. The Primary Contact Persons will work together to adjust the established schedule to address emergent issues and needs.
- D. **Confidentiality.** All information that is identified as confidential or proprietary information and is submitted by a Party to the other Party or obtained by a Party in connection with Services performed under this Agreement shall be kept confidential by the receiving party to the extent permitted by applicable law. In performing the Services, the County and the Sheriff's Department shall abide by the Family Educational Rights and Privacy Act of 1974, as amended ("FERPA").

II. AGREEMENT DURATION AND TERMINATION

- A. **Initial Term.** The term of this Agreement shall be for the 2018-19 school year, commencing on September 4, 2018 and ending June 15, 2019 (the "Initial Term").
- B. **Renewal Term(s).** The Parties may extend or renew this Agreement for subsequent school years only upon the written agreement of the Parties (each a "Renewal Term").
- C. **Termination for Cause.** Should a Party commit to breach or default under this Agreement, and should such breach or default not be corrected within ten (10) days after receipt by the Party of written notice from the non-breaching party specifying the breach or default, this Agreement may be terminated without further notice by the non-breaching Party.
- D. **Termination for Convenience.** Notwithstanding Section II.C. above, this Agreement may be terminated without cause by either Party upon thirty (30) days written notice to the other Party.

III. PRICING AND PAYMENT TERMS

- A. **Fees for Services.** As consideration for the Services, the School District will be charged, on a monthly basis, a Total Program Cost during each month school is in session during the School District's school year. Each month, the Sheriff's Department shall compute the Total Program Cost, which shall be the sum of all hours of Services at the rate of ~~\$31.69~~ ^{46.88} per hour of Services ("Total Program Cost"). The parties agree that the Total Program Cost for the service to be provided to the School District during the initial term under this Agreement shall be between \$49,113 - \$73,132.50.
- B. **Payments.** Payment of each invoice shall be made within thirty (30) days of receipt.
- C. **Rate Adjustment.** Rates for the Services for any Renewal Term will be determined upon the mutual written agreement of the Parties.

IV. SUPPLIES & EQUIPMENT

A. All law enforcement vehicles, equipment and supplies used by County in the performance of this Agreement shall remain the property of County.

V. COMPLIANCE WITH LAWS AND SCHOOL DISTRICT POLICIES

A. **Compliance with Laws.** While performing the Services or while in or on the School District buildings and facilities, the County and the SRO shall comply with all applicable federal; state and local laws, rules, regulations and ordinances while providing the Services. The SRO will abide by policy Governing contracted services under the Gaylord Area Schools.

VI. INSURANCE, LIABILITY AND GOVERNMENTAL IMMUNITY

A. **Insurance Requirements.** County shall either maintain sufficient assets to self-insure, or purchase insurance, at County's option, so that it is able to provide liability protection for the actions of County employees and officers under this Agreement, for the purposes and in the amounts set forth below. The School District shall be named as additional insured for the minimum limits listed below and these coverages and limits are to be considered minimum requirements under this Agreement and shall in no way limit the liability or obligations of the County under any other provision of this Agreement.

<u>Policy Type</u>	<u>Minimum Limits</u>
Workers' Compensation	Statutory
Commercial General Liability*	
Bodily Injury	\$1,000,000 each person \$1,000,000 each occurrence
Property Damage	\$1,000,000 each occurrence
Commercial Automobile Liability	
Bodily Injury	\$1,000,000 each person \$1,000,000 each occurrence
Property Damage	\$1,000,000 each occurrence
Employer's Liability	\$500,000 each occurrence

B. **Liability.** Each Party shall be responsible for the acts or omissions of its employees and agents in performing its respective obligations under this Agreement.

C. **Governmental Immunity.** Neither the School District nor County waive their governmental immunity by entering into this Agreement and each party fully retains all immunities and defenses provided by law with respect to any action based upon or occurring as a result of this Agreement.

VII. RELATIONSHIP OF THE PARTIES

A. It is expressly agreed between County and the School District that the County and Sheriff's Department are the employer of the School Resource Officer in the performance of all services under this Agreement and under no circumstances shall any of the

employees of one Party be deemed the employees of the other Party for any purpose. Accordingly, the County shall meet all of its obligations and responsibilities for payment of all taxes including Federal, State and Local taxes arising out of the Services in accordance with this Agreement, including by way of illustration but not limitation, Federal and State income tax, FICA, FUTA, Social Security tax, Unemployment Insurance taxes, Workers' Compensation Insurance and any other taxes or business license fees as required.

- B. The Sheriff's Department shall have sole and absolute control over the supervision, operation and conduct of its law enforcement officers. Law enforcement officers assigned to perform in accordance with this Agreement shall be employees of the Sheriff's Department, and shall be hired, assigned, scheduled, disciplined, and terminated by the Sheriff's Department according to its policies. The Sheriff's Department shall be responsible for all wages and benefits for all school resource officers who provide Services under this Agreement.

VIII. COMMUNICATION AND NOTICES

- A. Each of the Parties shall designate a primary contact person ("Primary Contact Person") who shall administer this Agreement on a day-to-day basis on behalf of the Party; provided, however, that all legal notices shall be given in the manner set forth in Section VIII.B. below. The identity of a party's Primary Contact Person may be changed at any time by written notice delivered to all other parties in the manner set forth in Section VIII.B. below. The County hereby designates the _____ as the initial Primary Contact Person for School District. The School District hereby designates the School District's David Parsell as its initial Primary Contact Person for the Sheriff's Department.
- B. **Notices.** Unless otherwise provided in this Agreement, all notices, requests, demands and other communications shall be in writing and are effective three (3) days after deposit in the U.S. mail, certified and postage paid, or upon receipt if personally delivered or sent by next-business-day delivery via a nationally recognized overnight courier to the addresses set forth below. The School District or the County may from time to time designate any other address for this purpose by providing written notice to the other Party.
 - 1. **To the School District.** All required notices to the School District shall be delivered to the Superintendent, Gaylord Community Schools, 615 S. Elm Avenue, Gaylord, Michigan 49735-1253.
 - 2. **To the County.** All required notices to the County shall be delivered to: Otsego County, Attn: Otsego County Sheriff, 124 S. Court Avenue, Gaylord, Michigan 49735.

IX. MISCELLANEOUS

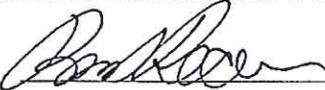
- A. **Governing Law.** This Agreement shall be governed by and construed in accordance with the laws of the State of Michigan. The parties hereby agree to the exclusive jurisdiction and venue of courts sitting in Otsego County, Michigan.

- B. **No Assignment or Sub-Contracting.** This Agreement shall not be assigned, transferred, or subcontracted, in whole or in part, by the County without the prior written consent of the School District.
- C. **No Waiver.** No waiver of any term or condition of this Agreement shall be valid or binding on either Party unless the same shall have been mutually assented to in writing by both Parties. The failure of either Party to enforce at any time any of the provisions of this Agreement, or the failure to require at any time performance by the other Party of any of the provisions of this Agreement, shall in no way be construed to be a present or future waiver of such provisions, nor in any way affect the validity of either Party to enforce each and every such provision thereafter.
- D. **Severability.** In the event any provision(s) of this Agreement shall be illegal or invalid for any reason, said provision(s) shall be deemed to be fully severable without affecting the remaining provisions of this Agreement and this Agreement shall be construed and enforced as if said illegal or invalid provision(s) had never been inserted herein.
- E. **Counterparts.** This Agreement may be executed in two or more counterparts, each of which shall be deemed an original and all of which together shall constitute one instrument.
- F. **Entire Agreement.** This instrument contains the entire Agreement entered into between the Parties hereto, its terms may not be modified except in writing signed by the County and the School District. This Agreement supersedes and takes the place of all prior contracts, and/or understandings, whether written or oral between the School District and the County.
- G. **Non-Appropriation of Funds.** The provision of County Services is conditioned upon the availability of government funds appropriated or allocated for such services. If funds are not allocated and available for continuance of the Services performed herein by the County or payment of the fees by the School District, either party may terminate this Agreement at the end of the period for which funds are available. The respective Party shall notify the other Party at the earliest possible time of the Services that will or may be affected by the shortage of funds. No penalty shall accrue to either Party in the event this provision is exercised, and neither Party shall be obligated or liable for any further payments due or for any damages as a result of termination under this Section.

WHEREAS, the Parties have executed this School Resource Officer Agreement as of the Effective Date.

GAYLORD COMMUNITY SCHOOLS

OTSEGO COUNTY

By: 

By: _____

Its: Superintendent

Its: _____

Date: 8/14/19

Date: _____



OTSEGO COUNTY BUDGET AMENDMENT

FUND/DEPARTMENT: General

As provided for in the Uniform Budget and Accounting Act of 1978, as amended, and consistent with Otsego County Policy, the Administrator and Finance Director are hereby authorized to record the following adjustments to the budget.

Fund Type: General Special Revenue Debt Service Capital Project Business-Type (Enterprise or Internal Svc)

DESCRIPTION SRO Gaylord Community Schools

REVENUE

Account Number	Decrease	Increase
101-301-676.010-SCHOOLDEPT Reimbursement -General	\$	\$ 19,361
101-941-999.010 Contingency	\$	\$ 6,454
	\$	\$
	\$	\$
Total	\$	\$

EXPENDITURE

Account Number	Increase	Decrease
101-301-703.030-SCHOOLDEPT Regular - Hourly	\$ 14,609	\$
101-301-704.110-SCHOOLDEPT Hospitalization	\$ 4,724	\$
101-301-704.140-SCHOOLDEPT Life & Disability	\$ 166	\$
101-301-704.200-SCHOOLDEPT Social Security Contributions	\$ 1,118	\$
101-301-704.300-SCHOOLDEPT Retirement Contributions	\$ 5,003	\$
101-301-704.301-SCHOOLDEPT Post Emplmt Hlth Care Savings	\$ 160	\$
Total	\$	\$

Department Head Signature _____

Date _____

Rachel Trusch
Administrator's Signature

8.22.18
Date

Finance Department

Entered:

By:

Board Approval Date (if necessary) _____

Budget Adjustment # _____

Posting Number _____



OTSEGO COUNTY BUDGET AMENDMENT

FUND/DEPARTMENT: General

As provided for in the Uniform Budget and Accounting Act of 1978, as amended, and consistent with Otsego County Policy, the Administrator and Finance Director are hereby authorized to record the following adjustments to the budget.

Fund Type: General Special Revenue Debt Service Capital Project Business-Type (Enterprise or Internal Svc)

DESCRIPTION SRO Gaylord Community Schools

REVENUE

Account Number	Decrease	Increase
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Total	\$	\$

EXPENDITURE

Account Number	Increase	Decrease
101-301-704.600-SCHOOLDEPT Workers Compensation	\$ 35	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Total	\$ 25,815	\$ 25815

Department Head Signature Date

Administrator's Signature Date

Finance Department
Entered:
By:

Board Approval Date (if necessary) Budget Adjustment # Posting Number

DEPARTMENT REPORT FOR COMMISSIONER'S MEETING

MEETING DATE: 08/28/2018

DEPARTMENT: Clerk

PRESENTER: Susan DeFeyter

**OTSEGO COUNTY
Board of Commissioners**



EXECUTIVE SUMMARY

AGENDA ITEM: Health Department of Northwest Michigan, 2017 Annual Report – By Jennifer Kenney	AGENDA DATE: Aug 28, 2018
AGENDA PLACEMENT: Special Presentations, Item A.	ACTION REQUESTED: Motion to Approve
STAFF CONTACT(S): Rachel Frisch, County Administrator	ATTORNEY REVIEW:

BACKGROUND/DISCUSSION:

10-15 minute discussion from Ms. Kenney on Annual Report of the Health Department of Northwest Michigan.

RECOMMENDATION:

Staff requests Approval on 2017 Annual Report.

**OTSEGO COUNTY
Board of Commissioners**



EXECUTIVE SUMMARY

AGENDA ITEM: Prosecutor Budget Amendment	AGENDA DATE: Aug 28, 2018
AGENDA PLACEMENT: Committee Reports, Item A. 1.	ACTION REQUESTED: Motion to Approve
STAFF CONTACT(S): Rachel Frisch, County Administrator	ATTORNEY REVIEW:

BACKGROUND/DISCUSSION:

Prosecutor Wage Adjustments for staffing, to add in a few extra hours of staff time due to increased caseload.

RECOMMENDATION:

Staff requests Approval on Prosecutor Wage Adjustments and Budget Amendment.



**OTSEGO COUNTY
BUDGET AMENDMENT**

FUND/DEPARTMENT: General

As provided for in the Uniform Budget and Accounting Act of 1978, as amended, and consistent with Otsego County Policy, the Administrator and Finance Director are hereby authorized to record the following adjustments to the budget.

Fund Type: General Special Revenue Debt Service Capital Project Business-Type (Enterprise or Internal Svc)

DESCRIPTION Prosecutor Wage Adjustments

REVENUE

Account Number	Decrease	Increase
101-267-607.225 FEE- FOIA REQUETS	\$	\$ 790
101-267-676.040 REIMBURSEMENT - GENERAL	\$	\$ 225
	\$	\$
	\$	\$
Total	\$	\$

EXPENDITURE

Account Number	Increase	Decrease
101-267-703.060 WAGES - PART TIME/TEMP	\$ 875	\$
101-267-703.070 WAGES - OVERTIME	\$ 1,775	\$
101-267-704.200 SOCIAL SEC CONTRIBUTIONS	\$ 225	\$
101-267-704.300 RETIREMENT CONTRIBUTIONS	\$ 225	\$
101-267-704.600 WORKERS COMPENSATION	\$ 3	\$
101-267-930.941 EXPERT SERVICES	\$	\$ 500
Total	\$	\$

Department Head Signature _____ Date _____

Rachel Trisch *8-22-18*

Administrator's Signature _____ Date _____

Finance Department
Entered:
By:

Board Approval Date (if necessary) _____ Budget Adjustment # _____ Posting Number _____

**OTSEGO COUNTY
Board of Commissioners**



EXECUTIVE SUMMARY

AGENDA ITEM: Ambulance Purchase – Public Hearing USDA Grant	AGENDA DATE: Aug 28, 2018
AGENDA PLACEMENT: Committee Reports, Item A. 2.	ACTION REQUESTED: Motion to Approve
STAFF CONTACT(S): Rachel Frisch, County Administrator	ATTORNEY REVIEW:

BACKGROUND/DISCUSSION:

EMS Director Mr. Jon Deming has presented information to purchase a new ambulance from Crestline, the low bidder, for \$196,482. A \$50,000 USDA grant will be used to offset the purchase price. EMS will make a down payment of \$19,468 and the remainder of the cost (\$127,014) will be funded through a loan from the Public Improvement Fund (245) with interest being charged at 4% for 5 years, according to County policy.

RECOMMENDATION:

Staff requests Approval for EMS purchase of Ambulance.



Quotation: US Summit 170

126 Wheeler Street, Saskatoon, SK Canada S7P 0A9
Phone (306) 934-8844 | Fax (306) 242-5838
Toll Free in North America (888) 887-6886
www.crestlinecoach.com | info@crestlinecoach.com

Quote ID # QWQQ2600
Date Jul 31, 2018
Quote Expiry Date Aug 31, 2018

Table with 3 columns: Proposal For, Ship To, Your Sales Rep. Includes contact info for Otsego County EMS and Jeff Grasto.

Table with 3 columns: Payment Terms (COD), Ship Via (Truck), Shipping Terms (FOB Shipping Point Freight Prepaid).

Main table with columns: Mfg #, Qty, Description. Lists various items like COMPLIANCE, DISCOUNTS & FEES, warranties, and vehicle specifications.

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

Mfg #	Qty	Description
<i>CUSTOM</i>	1	<i>Custom Modification</i> Gooseneck light in cab on console. Installed near dash on the passenger side. See SU-11139
<i>CUSTOM</i>	1	<i>Custom Modification</i> (1) 12V Outlet behind Passenger seat in cab. Wired direct to battery.
CHA618R	1	Ford Velvac Mirrors Chrome with Convex, Remote Switch and Heated Glass Qty 1 Ford Velvac Mirrors Chrome with Convex With Remote and Heat Deluxe Head
<i>CUSTOM</i>	1	<i>Custom Modification</i> Add Zone Defense lane change cameras to the exterior mirrors. Refer to SU-9892.
CHA5010	1	Supply a 200,000 candle power handheld spotlight, mounted on passenger side in the cab.
<i>CUSTOM</i>	1	<i>Custom Modification</i> Big Tex Chrome Grill Guard with Headlight wraps for Ford E450. Go Industries #77531
<i>CON</i>	1	<i>CONVERSION</i>
CON046R0N	1	US Summit 170 T3, 2018 Model Year, 170 inches long X 96 inches wide, with 72 inch interior headroom, With Dual step side entry door, and Eberhard Handles.
CON706R	1	Ford Gas Acetech Multiplex electrical system with ECO Run, utilizing programmable switches and microprocessor based technology (US Summit 170 T3).
CON100S		As Built electrical schematics with printed copy installed inside exterior electrical compartment and supplied in electronic digital owners manual.
CON201S		Acetech automatic Sure Start System. The CPU monitors the battery voltage and if the batteries are too low for starting it automatically connects the conversion batteries to the chassis batteries. When voltage is at the proper level they are automatically isolated.
<i>CUSTOM</i>		<i>Custom Modification</i> Acetech system to include additional switch panel rear on curbside.
CON102S		Anti Theft system allows chassis keys to be removed with engine running, while activated transmission is locked in park and Cab Doors can be locked.
CON103S		Backup alarm with momentary cut out switch.
CON104S		Power door locks on cab doors, all patient access doors and all exterior compartments. Lock/Unlock from cab door switches or key FOB.
CON105S		(1) 10 Amp circuit 'On' when the engine is running or the timer circuit is activated, mounted in ECC (Electrical Component Compartment) and wire routed to behind drivers seat.
CON106S		(1) 20 Amp Two Way radio circuit wired direct to battery behind driver seat, mounted in ECC (Electrical Component Compartment) and wire routed to behind drivers seat.
CON207S		Acetech automatic timer for patient unloading. When the side or rear doors are opened, this will turn on the corresponding scene lights and the left bank of cot lights on low. These will stay on for five minutes and then the system will shut them back down.
CON110S		Hidden unlock switch for power door locks in the front grill.

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

Mfg #	Qty	Description
CON111S		Install a Whelen 295HFS2 Siren with Public Address, Manual, Wail, Yelp, Air horn, and Piercer tone. Cast Aluminum Siren Speakers mounted in bumper ends.
<i>CUSTOM</i>	1	<i>Custom Modification</i> Install AceTech wi-fi system, install a ATT wireless and include router part# 39037, Modem Part #39038 and Antenna Part #39039 Customer Supplied SIM Card Jon Demming 989-732-9085 jon@ocems.com
<i>CUSTOM</i>	1	<i>Custom Modification</i> Acetech sytem to include Driver ID and Driver Feedback per previous units. Make sure the Acetech system is set up for Verizon Wireless.
<i>CUSTOM</i>	1	<i>Custom Modification</i> Install a Federal EQ2B siren in addition to the Whelen Siren. The EQ2B to be wired through the horn ring. Install the Crestline Voltmeter to the right of the Acetech panel with the EQ siren head to the right of the Whelen head. See photos and SU-11139. Federal BP200 speaker and Electric 'F' Grill to be centered in the bottom bumper.
<i>EXT</i>	1	<i>EXTERIOR</i>
EXT101S		Front and rear tire Splash Guards
EXT102S		Front and rear Diamond Plate stone guards
EXT103S		Open grate cab running boards
EXT104S		Full width 10" open grate flip up rear bumper
EXT105S		Rear rubber bumper guards
EXT111S		Mounted to the underside of the rear bumper shall be tow hooks.
EXT107S		Wheelwells lined with sound deadening material
EXT108S		Polished aluminum Fender Flares over rear wheels.
EXT181S		Sweep out style compartments with black drideck on compartment bottom. (US Summit 170 T3).
EXT182S		All compartments have gas shock hold opens. (US Summit 170 T3).
EXT183S		Oxygen Compartment to have to have 4" LED all other compartments have LED rope lighting
EXT184S		All compartments have Eberhard floating point latches with power door locks. (US Summit 170 T3).
EXT201S		Streetside most forward compartment for oxygen bottle storage (US Summit 170 T3).

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

Mfg #	Qty	Description
EXT202S		Streetside forward of wheel well compartment, upper portion for vehicle power distribution (ECC), lower section for miscellaneous storage (US Summit 170 T3).
EXT203S		Streetside rearward of wheel well compartment, upper portion interior access to cabinets with adjustable shelves, lower portion for spare tire storage (US Summit 170 T3).
EXT205S		Rear entrance doors, includes fixed windows with thermo pane glass, plunger type hold opens, split inner door panels and safety release catches (US Summit 170 T3).
EXT207S		Curbside rearward of wheel well compartment, for storage of backboards and folding stretchers, include vertical divider and fixed shelf with strap to hold backboards in place. (US Summit 170 T3).
EXT208S		Curbside entrance door, includes vertical sliding window with thermo pane glass, spring loaded hold open, split inner door panel and safety release catches (US Summit 170 T3).
EXT209S		Curbside most forward compartment, upper portion for jump kit storage with inside/outside access and lower portion has vehicle batteries on a slide out tray(US Summit 170 T3).
<i>CUSTOM</i>	1	<i>Custom Modification</i> Center the divider in the curbside rear compartment so there is at least 8" of space for backboards on the left. Same as SU-11139
<i>CUSTOM</i>	1	<i>Custom Modification</i> Install a Lexan cover over the electrical componants in the exterior compartment. Include low profile thumb screws. Same as SU-11139
<i>CUSTOM</i>	1	<i>Custom Modification - *NEW 2018*</i> (2) adjustable shelf in the rear inside/outside compartment on the streetside. Unistrut to be full height. Centered in cabinet.
<i>CUSTOM</i>	1	<i>Custom Modification</i> Add black Dri Deck with retaining lip in curbsid well. Both steps.
EXT1240	1	Install a stainless steel splash plate just below fuel filler (US Summit 170 T3 only).
EXT1260	1	Install (4) stainless steel wheel covers.
EXT1270,	1	Install stainless steel braided valve extension kit for inside dual wheel. Airmax AP4.
EXT1230	1	Install rub rails to lower module skirts box pan formed diamond plate.
<i>LIT</i>	1	<i>EMERGENCY LIGHTING & EQUIPMENT</i>

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

Mfg #	Qty	Description
LIT131R	1	Whelen LED M-Series flasher/scene lights/backup lights with flanges and Clear lens. (US Summit 170 T3). (7) Flashers front of module, (4) side flashers, (2) turn signals on fenders, (2) flashers rear, (1) center flasher rear (6) scene lights, (2) Arrow turns on rear and (2) backup lights. Qty 3 Front Individual Clearance Amber ICC Lights Qty 3 Front Whelen-M9-Series LED Clear Light With Flange Assembly Qty 4 Front Whelen-M9-Series LED Light Red Steady Burn With Flange Assembly Qty 4 SideWhelen-M9-Series LED Clear Scene Light With Flange Assembly Qty 4 Side Whelen-M9-Series LED Light Red Steady Burn With Flange Assembly Qty 2 Side Whelen-M7-Series LED Light Red With Flange Assembly Qty 3 Rear Individual Clearance Red LED ICC Lights Qty 2 Rear Whelen-M9-Series LED Clear Scene Light With Flange Assembly Qty 2 Rear Whelen-M9-Series LED Light Red Steady Burn With Flange Assembly Qty 2 Rear Whelen-M9-Series LED Amber Arrow Signal Light With Flange Assembly Qty 2 Rear Whelen-M6-Series LED Back-Up Light Clear With Flange Assembly Qty 1 Whelen-M7-Series LED Light Amber With Flange Assembly
LIT124R	1	Whelen LED M7 Series Lighting Package, 500 Grille; 500 Wig Wags and M7 Intersection for Ford (all US models) Qty 1 430535R00 Grille Whelen-500-Series White LED Light With Ford Flange Assembly Qty 1 430537R00 Grille Whelen-500-Series Red LED Light With Ford Flange Assembly Qty 2 430546R00 Intersection Whelen-M7-Series LED Light Red With Flange Assembly
LIT18200.25	1	Install (2) Whelen-M9-Series LED Red lights on ear to show through windows. Lights to flash with upper center M7.
<i>CUSTOM</i>	1	Custom Modification Change rear Brake, Tail, to Whelen M6. Turn Signal to be M9 with arrows Change center front and rear marker lights to 3/4" LED. Change side lights on rear compartment doors to 3/4" LED. Marker light top, Turn Signal bottom. Same as SU-11139
<i>CUSTOM</i>	1	Custom Modification Install 4" diameter, flush mount Running Board lights. Lights to be LED with Clear Lens and activated with cab doors. These are to be installed on the front of the box in the diamond plate to illuminate the running boards when the chassis doors are opened. Refer to SU-11139.
<i>CUSTOM</i>	1	Custom Modification Flash pattern to match SU-11139.
<i>CUSTOM</i>	1	Custom Modification All Emergency lights to have Clear lens and Chrome trim ring.
<i>DEC</i>	1	PAINT & DECALS
DEC601S	1	Powdercoat entire module White to match the chassis.
DEC6260	1	Install a Red/White reflective decal tape to rear bumper.
<i>CUSTOM</i>	1	Custom Modification Add an upward pointing Chevron to the rear of the unit. Diamond Grade to be 6" Red 983-72 and Green/Yellow 983-23. Outsourced Chris Jozwiak

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

Mfg #	Qty	Description
		New Century Signs LLC sales@newcenturysigns.net 989-732-8636
OXY	1	OXYGEN & SUCTION
OXY133R	1	O2 to Go- Oxygen Loading System With Detachable Ramp for 'M' size cylinder (US Summit 170 T3).
OXY137R	1	Tank Brackets for (4) 'D' size bottles adjustable for Portable Oxygen or Entonox bottles (US Summit 170 T3).
OXY503S	1	Standard Oxygen Features (US models only) Oxygen Outlet Assembly at Action Area
OXY4010	1	Regulator 50 PSI (ship loose with vehicle)
OXY4020	1	Oxygen Shut-Off System Electric Solenoid and Bypass Valve on Action Wall
OXY4030	1	Oxygen Wrench and Footman Loop Assembly mounted in Oxygen Compartment
OXY4080	1	Quick Disconnect Oxygen Outlet Assembly on Curbside forward wall.
OXY4090	1	Quick Disconnect Oxygen Outlet Assembly in ceiling.
OXY4100	1	Quick Disconnect Oxygen Outlet Assembly at Action Wall (MCC).
OXY204R	1	S-SCOR Suction Container and Face Plate Assembly in Action wall (MCC) includes remote mounted suction pump.
KIT	1	JUMP KIT
KIT123R	1	Front Passenger Kit Cabinet With Entry and Upper Storage (Summit) Metal Doors with lexan Windows
CUSTOM	1	Custom Modification Make sure the latch for the drug cabinet is locking. Same as previous builds for dimensions for drug box. Last unit was wrong dimensions.
SQB	1	SQUAD BENCH
SQB112R	1	High mobility seating in lieu of standard squadbench, (US Summit 170 T3) Includes two seats with three point seat belts. Forward seat is side sliding on 36 inch track and rotates forward or side facing. Rear seat is forward facing only. Both seats flip down for carrying second patient.
CUSTOM	1	Custom Modification Install a 1790 EVS Flip-down seat on the streetside in lieu of CPR seat. Forward facing only. Same seat configuration as SU-11139. There will be no sliding track due to the new SAE retention requirements within KKK standards. Forward seat on curbside will be a fixed position.
CUSTOM	1	Custom Modification Streetside and Curbside seats to include flip down counters
CUSTOM	1	Custom Modification Curbside seats to include Aircraft hardware and belting to secure a second patient.

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

Mfg #	Qty	Description
<i>ATT</i>	1	<i>ATTENDANT SEATING</i>
ATT116R	1	Attendant seat Red with 3 point harness, fold out child transport feature, arm rests and mounted on a non-swiveling style metal seat base. Qty 1 Red Child - Non-reclining Attendant Seat - Boxl Base - Arm Rests
<i>COT</i>	1	<i>COT HOLDERS</i>
<i>CUSTOM</i>	1	<i>Custom Modification</i> Install a Stryker Power load system #6390 from medical below. Center mount position to line line up with standard center mount location. No wheel guide required provided center of cot bar is 18" away from streetside cabinet.
<i>INT</i>	1	<i>INTERIOR</i>
INT1150	1	Left side wall cabinets to include a CPR seat with hinged lid and storage underneath. Includes Cabinets to the rear with Flip up option. (US Summit 170 T3 only).
<i>CUSTOM</i>	1	<i>Custom Modification</i> Install a flip out cabinet below streetside cabinets aft the CPR seat. Same as SU-11139
INT506S		83" Ceiling grab rail centered over cot, Yellow powder coat.
INT710S		Flooring rolled up leftside wall.
INT801S		Vacuum formed seamless upholstery
INT901S		Full height Safety Net positioned at rearward edge of side entrance door with aircraft mounts on three sides, removable for cleaning
INT902S		'L' Bars on patient entrance doors, Yellow Powder Coat for safety
INT604S		Glove box holders for (3) sets of gloves mounted on streetside wall.
INT104S		Angled coat closet cabinet at forward streetside interior with dual full height doors.
<i>CUSTOM</i>	1	<i>Custom Modification</i> Action wall counter to be stainless steel with retaining lip.
<i>CUSTOM</i>	1	<i>Custom Modification</i> Lexan framing in interior cabinets to be Aluminum Extrusion. Door handles to be full lenght Aluminum Extrusion, use 2 different thicknesses of handles for each window. Same as SU-11139.
INT204O	1	Install (2) Cast product dual rubber IV holder in ceiling.
<i>CUSTOM</i>	1	<i>Custom Modification</i> Install a Chrome I-Med bar on the streetside cabinet to the rear of the seat.
INT218O	1	Install a 5lb Fire Extinguisher with bracket in cab on bulkhead wall.

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

Mfg #	Qty	Description
<i>CUSTOM</i>	1	<i>Custom Modification</i> Install a 5lb Fire Extinguisher with bracket in Coat Cabinet..
INT2200	1	Install a bracket on side entrance door to accommodate Stair Chair or EZ Glide.
INT2230	1	Install a fluid barrier at Cab to Mod walk through.
<i>COL</i>	1	<i>INTERIOR COLORS</i>
COL104R	1	Interior flooring color, Black Loncoin anti-microbial and anti-skid flooring.
COL204R	1	All interior upholstery will be covered in matching red vinyl (Desert Rose) with Yellow head bolster pads on side and rear entry doors
<i>CUSTOM</i>	1	<i>Custom Modification</i> Ceiling to be White. Interior cabinets, wall panels, etc. to be Gray as in previous units.
<i>ELC</i>	1	<i>ELECTRICAL</i>
ELC203S		(10) LED Ceiling lights, (4) over cot, (4) over squad bench switched Hi/Off/Lo and (2) center, 3-way switched front and rear.
ELC202S		LED interior cabinet lighting with switch on rear switch panel.
ELC502S		(3) antenna access plates with coax routed behind driver seat
ELC503S		Single AM/FM radio speaker rear ceiling with volume control on Action Wall.
ELC702S		Insulated Heat A/C duct full length of module with (7) adjustable vents
ELC703S		324 CFM Exhaust Fan with 2 speed switch at Action Wall.
ELC503O	1	Install a second AM/FM radio speaker rear ceiling.
<i>CUSTOM</i>	1	<i>Custom Modification</i> Digital Clock Blue at Action Wall.
<i>CUSTOM</i>	1	<i>Custom Modification</i> Digital 15 Minute Timer on Curbside Door wired direct to battery for Restocking (for Acetech).
ELC1020	1	Install a 1050 watt Vanner Inverter with 50 amp battery charger, includes: (1) 110v Hospital grade outlet located in the forward Action area (MCC) (1) 110v Hospital grade outlet located in Jumpkit cabinet (Kit Tree) (1) 110v Hospital grade outlet located in Heart Monitor area
<i>CUSTOM</i>	1	<i>Custom Modification</i> 110V Outlets as follows, (2) Action Wall, (1) behind flip down counter on curbside, (1) between seats on curbside and (1) in Jump Kit area centrally located.
ELC2010	1	Drivers Intention LED Lights, rear ceiling only.

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

Mfg #	Qty	Description
ELC2030	1	Install an LED light to the step well compartment.
ELC1040	1	Install a 15 amp Auto-Eject Shoreline and (1) outlet in action wall area.
<i>CUSTOM</i>	1	<i>Custom Modification</i> Amber LED Shore 'On' Indicator above Shoreline.
ELC7020	1	Install a 7 inch Colour Zone Defence monitor in cab headliner with (2) cameras one mounted on the exterior above the rear doors and second one mounted in interior above rear doors.
ELC7110	1	Install an AT AVL Gen 3.0 (Auto Vehicle Logger) allows for satellite tracking of vehicles and activity logging. When combined with the ACETECH Multiplex System, it can read all vehicle CAN(controller area network) messages. This data can then be transmitted live by GPRS or GS
<i>CUSTOM</i>	1	<i>Custom Modification</i> 12V Outlets as follows: (1) in cab behind passenger seat in side filler panel, (1) centrally located in Jump Kit cabinet, (2) Action Wall. All wired direct to battery.
FUL001S	1	Fill tank full with fuel
<i>FUL</i>	1	<i>FUEL</i>
<i>MED</i>	1	<i>MEDICAL EQUIPMENT</i>
43661	1	Power LOAD Model 6390 Stryker USD for US Customers
43988	1	Install Stryker for Power/Performance Loads
35154	1	Cot Model 6506 Power PRO XT Stryker
36383	1	Power Load Compatibility for Stryker Cot Model 6506
37090	1	Rail Side XPS for Stryker Model 6506 Cot Wider Mattress included
31935	1	I.V. Pole 3 Stage (Patient Right) Stryker 6506
30551	1	Hook Equipment For Power Pro Cot Stryker
39253	1	Platform Defibrillator for Model 6505 Stryker Cot
34388	1	Knee-Gatch/Trendelenburg Stryker Power PRO
37867	1	Retractable Head End Oxygen Bottle Holder
31471	1	Storage Base Net Stryker Power-PRO XT
31999	1	Pocketed Back Rest Pouch Stryker

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

Mfg #	Qty	Description
31470	1	Storage Flat Head End Stryker Power- PRO XT
37002	1	Steer-Lock for Stryker Cot - Aftermarket
24985	1	Chair Stair Stryker #6252
36076	1	Bracket Mounting SMRT Charger Stryker_Included with cot
XXXXX	1	SMRT Power System (Includes 1 SMRT Charger, 2 SMRT PAK's & 120V AC Power Cord_Included with cot

Where Crestline has included the cost of a dash mounted docking station in this quotation. The final position will need to be confirmed before the vehicle build to ensure compliance with the chassis manufacturers' airbag deployment zones. Crestline would be happy to assist in your decision making process to ensure a safe, ergonomic installation suitable for your equipment and operation

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

CRESTLINESM Quotation Summary: US Summit 170

126 Wheeler Street, Saskatoon, SK Canada S7P 0A9
 Phone (306) 934-8844 | Fax (306) 242-5838
 Toll Free in North America (888) 887-6886
 www.crestlinecoach.com | info@crestlinecoach.com

Quote ID # **QWQQ2600**
 Date **Jul 31, 2018**
 Quote Expiry Date **Aug 31, 2018**

Proposal For Otsego County EMS Jon Demming 100 Mclouth Road Gaylord, MI 49735 USA	Ship To Otsego County EMS Jon Demming 100 Mclouth Road Gaylord, MI 49735 USA	Your Sales Rep Jeff Grasto jgrasto@crestlinecoach.com Direct T: 306-986-5638
Phone 989-732-9085 Fax Email jon@ocems.com	Phone 989-732-9085 Fax Email jon@ocems.com	

Payment Terms COD	Shipping Terms FOB Shipping Point Freight Prepaid	Ship Via Truck
-----------------------------	---	--------------------------

Number of Units:	1	1
Description:	Quotation Summary: US Summit 170	
Chassis (Incl Freight):	\$34,904.00	\$34,904.00
Conversion:	\$149,041.25	\$149,041.25
Tire Recycling Fee:	\$0.00	\$0.00
Delivery:	\$2,025.00	\$2,025.00
Discount(s):	(\$4,600.00)	(\$4,600.00)
Discount(s):	(\$35,425.00)	(\$35,425.00)
Total Ambulance(s) Price:	\$145,945.25	\$145,945.25
Medical Equipment:	50,536.00	50,536.00
Total Price With Medical Equipment:	196,481.25	196,481.25
Trade-In::	(\$0.00)	(\$0.00)
Down Payment:	(\$0.00)	(\$0.00)
Total Amount Due (US Funds):	\$196,481.25	\$196,481.25

Chassis: GPC or CPA
 (Chev Up-Fitter Discount)

Customer Acceptance (Signature): _____
 Purchase Order #: _____
 Requested Delivery Date: _____

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach



Quotation: US Summit 170

126 Wheeler Street, Saskatoon, SK Canada S7P 0A9
 Phone (306) 934-8844 | Fax (306) 242-5838
 Toll Free in North America (888) 887-6886
 www.crestlinecoach.com | info@crestlinecoach.com

Quote ID # **QWQQ2600**
 Date **Jul 31, 2018**
 Quote Expiry Date **Aug 31, 2018**

Proposal For	Ship To	Your Sales Rep
Otsego County EMS Jon Demming 100 Mclouth Road Gaylord, MI 49735 USA	Otsego County EMS Jon Demming 100 Mclouth Road Gaylord, MI 49735 USA	Jeff Grasto jgrasto@crestlinecoach.com Direct T: 306-986-5638
Phone 989-732-9085 Fax	Phone 989-732-9085 Fax	

Payment Terms	Ship Via	Shipping Terms
COD	Truck	FOB Shipping Point Freight Prepaid

Mfg #	Qty	Description
COM us	1	COMPLIANCE, DISCOUNTS & FEES
COM011S	1	Crestline 2018 Warranty Summary: (Please see Warranty Policy for full details) Conversion Warranty - 5 Years or 150,000 Km / 95,000 Miles Supplier Manufactured Components Warranty - 3 Years or 90,000 Km / 55,000 Miles Structural Body Warranty - Lifetime unlimited mileage CrestCoat Paint Warranty - Lifetime unlimited mileage
COM005R	1	Vehicle meets all FMVSS Standards and Regulation Requirements.
COM002R	1	KKK-A-1822F - USA Government Federal Specification for a Star-of-Life Ambulance
COM03	1	Discount
COM01DIS	1	US Ford GPC discount. Must provide GPC number
CHA	1	CHASSIS
CHA1223U	1	2019 US Ford Gas E-450 158" WB 14,500 lbs GVWR, With Ambulance Prep Package
CHA943R	1	Modify conversion for a Ford gas chassis (US Summit 170 T3).
CHA501S		Cab console, with flat surface for Laptop, switch panel and accommodations for (2) radio mounts
CHA502S		Map/Run Book storage between cab seats with dividers and dual cup holders
CHA504S		Ceiling mounted LED map light, Red/ White, centered over passenger seat.

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

Mfg #	Qty	Description
CON111S		Install a Whelen 295HFS2 Siren with Public Address, Manual, Wail, Yelp, Air horn, and Piercer tone. Cast Aluminum Siren Speakers mounted in bumper ends.
<i>CUSTOM</i>	1	<i>Custom Modification</i> Install AceTech wi-fi system, install a ATT wireless and include rourter part# 39037, Modem Part #39038 and Antenna Part #39039 Customer Supplied SIM Card Jon Demming 989-732-9085 jon@ocems.com
<i>CUSTOM</i>	1	<i>Custom Modification</i> Acetech sytem to include Driver ID and Driver Feedback per previous units. Make sure the Acetech system is set up for Verizon Wireless.
<i>CUSTOM</i>	1	<i>Custom Modification</i> Install a Federal EQ2B siren in addition to the Whelen Siren. The EQ2B to be wired through the horn ring. Install the Crestline Voltmeter to the right of the Acetech panel with the EQ siren head to the right of the Whelen head. See photos and SU-11139. Federal BP200 speaker and Electric 'F' Grill to be centered in the bottom bumper.
<i>EXT</i>	1	<i>EXTERIOR</i>
EXT101S		Front and rear tire Splash Guards
EXT102S		Front and rear Diamond Plate stone guards
EXT103S		Open grate cab running boards
EXT104S		Full width 10" open grate flip up rear bumper
EXT105S		Rear rubber bumper guards
EXT111S		Mounted to the underside of the rear bumper shall be tow hooks.
EXT107S		Wheelwells lined with sound deadening material
EXT108S		Polished aluminum Fender Flares over rear wheels.
EXT181S		Sweep out style compartments with black drideck on compartment bottom. (US Summit 170 T3).
EXT182S		All compartments have gas shock hold opens. (US Summit 170 T3).
EXT183S		Oxygen Compartment to have to have 4" LED all other compartments have LED rope lighting
EXT184S		All compartments have Eberhard floating point latches with power door locks. (US Summit 170 T3).
EXT201S		Streetside most forward compartment for oxygen bottle storage (US Summit 170 T3).

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

Mfg #	Qty	Description
LIT131R	1	Whelen LED M-Series flasher/scene lights/backup lights with flanges and Clear lens. (US Summit 170 T3). (7) Flashers front of module, (4) side flashers, (2) turn signals on fenders, (2) flashers rear, (1) center flasher rear (6) scene lights, (2) Arrow turns on rear and (2) backup lights. Qty 3 Front Individual Clearance Amber ICC Lights Qty 3 Front Whelen-M9-Series LED Clear Light With Flange Assembly Qty 4 Front Whelen-M9-Series LED Light Red Steady Burn With Flange Assembly Qty 4 SideWhelen-M9-Series LED Clear Scene Light With Flange Assembly Qty 4 Side Whelen-M9-Series LED Light Red Steady Burn With Flange Assembly Qty 2 Side Whelen-M7-Series LED Light Red With Flange Assembly Qty 3 Rear Individual Clearance Red LED ICC Lights Qty 2 Rear Whelen-M9-Series LED Clear Scene Light With Flange Assembly Qty 2 Rear Whelen-M9-Series LED Light Red Steady Burn With Flange Assembly Qty 2 Rear Whelen-M9-Series LED Amber Arrow Signal Light With Flange Assembly Qty 2 Rear Whelen-M6-Series LED Back-Up Light Clear With Flange Assembly Qty 1 Whelen-M7-Series LED Light Amber With Flange Assembly
LIT124R	1	Whelen LED M7 Series Lighting Package, 500 Grille; 500 Wig Wags and M7 Intersection for Ford (all US models) Qty 1 430535R00 Grille Whelen-500-Series White LED Light With Ford Flange Assembly Qty 1 430537R00 Grille Whelen-500-Series Red LED Light With Ford Flange Assembly Qty 2 430546R00 Intersection Whelen-M7-Series LED Light Red With Flange Assembly
LIT18200.25	1	Install (2) Whelen-M9-Series LED Red lights on ear to show through windows. Lights to flash with upper center M7.
CUSTOM	1	Custom Modification Change rear Brake, Tail, to Whelen M6. Turn Signal to be M9 with arrows Change center front and rear marker lights to 3/4" LED. Change side lights on rear compartment doors to 3/4" LED. Marker light top, Turn Signal bottom. Same as SU-11139
CUSTOM	1	Custom Modification Install 4" diameter, flush mount Running Board lights. Lights to be LED with Clear Lens and activated with cab doors. These are to be installed on the front of the box in the diamond plate to illuminate the running boards when the chassis doors are opened. Refer to SU-11139.
CUSTOM	1	Custom Modification Flash pattern to match SU-11139.
CUSTOM	1	Custom Modification All Emergency lights to have Clear lens and Chrome trim ring.
DEC	1	PAINT & DECALS
DEC601S	1	Powdercoat entire module White to match the chassis.
DEC626O	1	Install a Red/White reflective decal tape to rear bumper.
CUSTOM	1	Custom Modification Add an upward pointing Chevron to the rear of the unit. Diamond Grade to be 6" Red 983-72 and Green/Yellow 983-23. Outsourced Chris Jozwiak

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

Mfg #	Qty	Description
ATT	1	ATTENDANT SEATING
ATT116R	1	Attendant seat Red with 3 point harness, fold out child transport feature, arm rests and mounted on a non-swiveling style metal seat base. Qty 1 Red Child - Non-reclining Attendant Seat - Boxl Base - Arm Rests
COT	1	COT HOLDERS
CUSTOM	1	Custom Modification Install a Stryker Power load system #6390 from medical below. Center mount position to line line up with standard center mount location. No wheel guide required provided center of cot bar is 18" away from streetside cabinet.
INT	1	INTERIOR
INT1150	1	Left side wall cabinets to include a CPR seat with hinged lid and storage underneath. Includes Cabinets to the rear with Flip up option. (US Summit 170 T3 only).
CUSTOM	1	Custom Modification Install a flip out cabinet below streetside cabinets aft the CPR seat. Same as SU-11139
INT506S		83" Ceiling grab rail centered over cot, Yellow powder coat.
INT710S		Flooring rolled up leftside wall.
INT801S		Vacuum formed seamless upholstery
INT901S		Full height Safety Net positioned at rearward edge of side entrance door with aircraft mounts on three sides, removable for cleaning
INT902S		'L' Bars on patient entrance doors, Yellow Powder Coat for safety
INT604S		Glove box holders for (3) sets of gloves mounted on streetside wall.
INT104S		Angled coat closet cabinet at forward streetside interior with dual full height doors.
CUSTOM	1	Custom Modification Action wall counter to be stainless steel with retaining lip.
CUSTOM	1	Custom Modification Lexan framing in interior cabinets to be Aluminum Extrusion. Door handles to be full lenght Aluminum Extrusion, use 2 different thicknesses of handles for each window. Same as SU-11139.
INT2040	1	Install (2) Cast product dual rubber IV holder in ceiling.
CUSTOM	1	Custom Modification Install a Chrome I-Med bar on the streetside cabinet to the rear of the seat.
INT2180	1	Install a 5lb Fire Extinguisher with bracket in cab on bulkhead wall.

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

Mfg #	Qty	Description
ELC2030	1	Install an LED light to the step well compartment.
ELC1040	1	Install a 15 amp Auto-Eject Shoreline and (1) outlet in action wall area.
<i>CUSTOM</i>	1	<i>Custom Modification</i> Amber LED Shore 'On' Indicator above Shoreline.
ELC7020	1	Install a 7 inch Colour Zone Defence monitor in cab headliner with (2) cameras one mounted on the exterior above the rear doors and second one mounted in interior above rear doors.
ELC7110	1	Install an AT AVL Gen 3.0 (Auto Vehicle Logger) allows for satellite tracking of vehicles and activity logging. When combined with the ACETECH Multiplex System, it can read all vehicle CAN(controller area network) messages. This data can then be transmitted live by GPRS or GS
<i>CUSTOM</i>	1	<i>Custom Modification</i> 12V Outlets as follows: (1) in cab behind passenger seat in side filler panel, (1) centrally located in Jump Kit cabinet, (2) Action Wall. All wired direct to battery.
FUL001S	1	Fill tank full with fuel
<i>FUL</i>	1	<i>FUEL</i>
<i>MED</i>	1	<i>MEDICAL EQUIPMENT</i>
43661	1	Power LOAD Model 6390 Stryker USD for US Customers
43988	1	Install Stryker for Power/Performance Loads
35154	1	Cot Model 6506 Power PRO XT Stryker
36383	1	Power Load Compatibility for Stryker Cot Model 6506
37090	1	Rail Side XPS for Stryker Model 6506 Cot Wider Mattress included
31935	1	I.V. Pole 3 Stage (Patient Right) Stryker 6506
30551	1	Hook Equipment For Power Pro Cot Stryker
39253	1	Platform Defibrillator for Model 6505 Stryker Cot
34388	1	Knee-Gatch/Trendelenburg Stryker Power PRO
37867	1	Retractable Head End Oxygen Bottle Holder
31471	1	Storage Base Net Stryker Power-PRO XT
31999	1	Pocketed Back Rest Pouch Stryker

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach Ltd.

CRESTLINE[®] Quotation Summary: US Summit 170

126 Wheeler Street, Saskatoon, SK Canada S7P 0A9
 Phone (306) 934-8844 | Fax (306) 242-5838
 Toll Free in North America (888) 887-6886
 www.crestlinecoach.com | info@crestlinecoach.com

Quote ID # QWQQ2600
Date Jul 31, 2018
Quote Expiry Date Aug 31, 2018

Proposal For

Otsego County EMS
 Jon Demming
 100 Mclouth Road
 Gaylord, MI 49735
 USA

Phone 989-732-9085

Fax

Email jon@ocems.com

Ship To

Otsego County EMS
 Jon Demming
 100 Mclouth Road
 Gaylord, MI 49735
 USA

Phone 989-732-9085

Fax

Email jon@ocems.com

Your Sales Rep

Jeff Grasto
 jgrasto@crestlinecoach.com
 Direct T: 306-986-5638

Payment Terms

COD

Shipping Terms

FOB Shipping Point Freight Prepaid

Ship Via

Truck

Number of Units:	1	1
Description:	Quotation Summary: US Summit 170	
Chassis (Incl Freight):	\$34,904.00	\$34,904.00
Conversion:	\$149,041.25	\$149,041.25
Tire Recycling Fee:	\$0.00	\$0.00
Delivery:	\$2,025.00	\$2,025.00
Discount(s):	(\$4,600.00)	(\$4,600.00)
Discount(s):	(\$35,425.00)	(\$35,425.00)
Total Ambulance(s) Price:	\$145,945.25	\$145,945.25
Medical Equipment:	<u>50,536.00</u>	<u>50,536.00</u>
Total Price With Medical Equipment:	196,481.25	196,481.25
Trade-In::	(\$0.00)	(\$0.00)
Down Payment:	(\$0.00)	(\$0.00)
Total Amount Due (US Funds):	\$196,481.25	\$196,481.25

Chassis: GPC or CPA
 (Chev Up-Fitter Discount)

Customer Acceptance (Signature): _____

Purchase Order #: _____

Requested Delivery Date: _____

Any changes to this order may result in a change to the pricing. ALL taxes are extra and will be applied at the time of invoicing.

This document contains confidential or proprietary information and shall not be disclosed, communicated or used for any purpose other than to carry out the intent under which this information was delivered, unless written consent is obtained from Crestline Coach

OTSEGO COUNTY
Board of Commissioners



EXECUTIVE SUMMARY

AGENDA ITEM: August 15, 2018 Warrant	AGENDA DATE: August 28, 2018
AGENDA PLACEMENT: New Business, A. Financials, Item 1	ACTION REQUESTED: Motion to Approve
STAFF CONTACT(S): Tim Hanley, Finance Director/Assistant County Administrator	ATTORNEY REVIEW: No

BACKGROUND/DISCUSSION:

The County issues a check disbursement report (Warrant) every week for County payables as well as occasional unavoidable supplemental warrants. The following warrant will be on the agenda.

The August 15, 2018 warrant is in the amount of \$1,000.

RECOMMENDATION:

Staff requests approval of the warrant detailed above with a total amount of \$1,000.

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
CHECK NUMBER 72462

Check Date	Bank	Check #	Payee	Description	GL #	Amount
08/15/2018	AP	72462	GREEN MEADOWS	#03-2018 COUNTY VETERAN ASSISTANCE, JULY & AUGUST RENT	293-689-930.999	1,000.00
			TOTAL - ALL FUNDS	TOTAL OF 1 CHECKS		1,000.00

**OTSEGO COUNTY
Board of Commissioners**



EXECUTIVE SUMMARY

AGENDA ITEM: August 21, 2018 Warrant	AGENDA DATE: August 28, 2018
AGENDA PLACEMENT: New Business, A. Financials, Item 2	ACTION REQUESTED: Motion to Approve
STAFF CONTACT(S): Tim Hanley, Finance Director/Assistant County Administrator	ATTORNEY REVIEW: No

BACKGROUND/DISCUSSION:

The County issues a check disbursement report (Warrant) every week for County payables as well as occasional unavoidable supplemental warrants. The following warrant will be on the agenda.

The August 21, 2018 warrant is in the amount of \$504,303.89.

- \$377,512.50 – Huntington National Bank – 2018 Library Bond payment

RECOMMENDATION:

Staff requests approval of the warrant detailed above with a total amount of \$504,303.89.

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
08/21/2018	AP	1929(E)	CHARTER COMMUNICATIONS	PHONE AND INTERNET 2 MONTHS	208-751-930.210	212.95
		1929(E)		CABLE AND PHONE	208-752-726.000	10.00
		1929(E)		CABLE AND PHONE	208-752-930.210	26.49
		1929(E)		AIRPORT TV, INTERNET, PHONES	281-537-920.410	349.77
						599.21
08/21/2018	AP	1930(E)	CONSUMERS ENERGY	CENTER ELECTRIC BILL 100031389081	208-752-930.620	252.65
		1930(E)		103015852710/100000163053	637-265-930.620-CRTHS00000	4,068.76
		1930(E)		103015852710/100000163053	637-265-930.620-INFO CTR00	34.03
		1930(E)		ACCT 1000 2119 0929, DUE 8/27/18	637-265-930.620-SILLI00000	33.57
						4,389.01
08/21/2018	AP	1931(E)	DTE ENERGY	GAS BILL	208-752-930.610	34.88
		1931(E)		ANIMAL CONTROL JULY 2018	212-430-930.610	57.06
						91.94
08/21/2018	AP	1932(E)	FLEETCOR SUPERFLEET MASTERCARD	ACCT #FB115, BILLING DATE 8/1/18	101-301-930.660	432.35
		1932(E)		ACCT #FB115, BILLING DATE 8/1/18	101-331-930.660	36.65
		1932(E)		ACCT #FB115, BILLING DATE 8/1/18	101-648-930.660	21.96
		1932(E)		ACCT #FB115, BILLING DATE 8/1/18	101-721-930.660	21.21
		1932(E)		ACCT #FB115, BILLING DATE 8/1/18	205-301-930.660	39.64
		1932(E)		ACCT #FB115, BILLING DATE 8/1/18	210-651-700.000	718.59
		1932(E)		ACCT #FB115, BILLING DATE 8/1/18	212-430-930.660	41.67
		1932(E)		ACCT #FB115, BILLING DATE 8/1/18	249-371-930.660	7.07
						1,319.14
08/21/2018	AP	72463	7TH PROBATE FAMILY COURT	15-20-DL PLACEMENT 7/1/18 TO 7/31/18	292-662-930.810	4,240.00
08/21/2018	AP	72464	AIRGAS USA LLC	AIRPORT CYLINDER RENTAL # 9954956281	281-537-920.410	29.37
08/21/2018	AP	72465	AMELIA POHUTSKY	REFUND FOR OVERPAYMENT MADE ON 2017 TAX YEAR FOR PARCEI516-000-001.001		36.00
08/21/2018	AP	72466	AMERICAN WASTE	2614101	212-430-920.410	72.10
08/21/2018	AP	72467	APRIL KELLEY	17-65-NA PLACEMENT 7/2/18 TO 7/31/18	292-662-930.700	667.20
08/21/2018	AP	72468	APRIL KELLY	17-85-NA PLACEMENT 7/2/18 TO 7/31/18	292-662-930.700	667.20
08/21/2018	AP	72469	AUTO OWNERS INSURANCE CO	TOBER	701-000-271.000	100.00
08/21/2018	AP	72470	BEVERLY ENTERPRISES	EVANS	701-000-271.000	25.00
08/21/2018	AP	72471	BLUE CARE NETWORK	00182055 SEPTEMBER 2018 COURT MEDICAL	101-131-704.110	1,727.55
		72471		00182055 SEPTEMBER 2018 COURT MEDICAL	101-148-704.110	1,212.94

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
		72471		00182055 SEPTEMBER 2018 COURT MEDICAL	215-141-704.110	5,955.66
		72471		00182055 SEPTEMBER 2018 COURT MEDICAL	292-662-704.110	1,703.83
		72471		00182055 SEPTEMBER 2018 COURT MEDICAL	704-000-231.261	2,649.99
						13,249.97
08/21/2018	AP	72472	BLUE CROSS BLUE SHIELD OF MICHIGAN	ASC INVOICE 7/1-7/31/2018	101-351-930.470	1,307.97
08/21/2018	AP	72473	BRADLEY J BUTCHER	REST PMT BY CONNIE ROSE JOSEPH 05-16547-FY-3	701-000-271.130	100.00
08/21/2018	AP	72474	CATHERINE ISBELL	17-87-DL TRANSPORT ON 7/26/18	101-134-930.500	182.70
		72474		17-87-DL TRANSPORT ON 7/26/18	101-134-940.010	81.00
		72474		17-34-DL TRANSPORT ON 8/9/18	292-662-930.500	24.53
		72474		17-87-DL TRANSPORT ON 7/26/18	292-662-930.830	21.00
						309.23
08/21/2018	AP	72475	CHARLES ISBELL	17-87-DL TRANSPORT ON 7/26/18	101-134-940.010	81.00
		72475		17-87-DL TRANSPORT ON 7/26/18	292-662-930.500	16.35
		72475		17-87-DL TRANSPORT ON 7/26/18	292-662-930.830	21.00
						118.35
08/21/2018	AP	72476	CHILD & FAMILY SERVICES OF NW MI	17-26-NA PLACEMENT 7/1/18 TO 7/31/18	292-662-930.810	689.44
08/21/2018	AP	72477	CITIZENS INSURANCE	MOSHER	701-000-271.000	40.00
08/21/2018	AP	72478	CITY OF GAYLORD	001254-0000-02 JULY	588-697-920.200	61.86
08/21/2018	AP	72479	CONNIE MURPHY	DHHS BD MTG; TRAV EXP VOUCHER; 7/19/18	290-670-703.040	50.00
		72479		DHHS BD MTG; TRAV EXP VOUCHER; 7/19/18	290-670-930.500	27.00
						77.00
08/21/2018	AP	72480	CORECOMM	115039078 - AUGUST 2018 COURT INTERNET	101-131-930.210	21.95
08/21/2018	AP	72481	CRAWFORD COUNTY TREASURER	APRIL 2018 TRI-COUNTY EXPENSE	101-131-940.111	22,427.02
		72481		APRIL 2018 TRI-COUNTY EXPENSE	215-141-940.111	633.08
		72481		JUNE 2018 TRI-COUNTY EXPENSE	269-145-726.210	258.40
						23,318.50
08/21/2018	AP	72482	CROSSROADS INDUSTRIES	TUSZYNSKI	701-000-271.000	100.00
08/21/2018	AP	72483	DANIELLE FOX	18-12-NA PLACEMENT 7/1/18 TO 7/24/18	292-662-930.700	907.92
08/21/2018	AP	72484	DARYL MILLSAP	BOND REFUND LESS 10%	701-000-265.000	180.00
08/21/2018	AP	72485	DAVID ALLEN WRIGHT	16-109-DL RESTITUTION PAYMENT BY G.ROUX	701-000-271.148	110.00

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
08/21/2018	AP	72486	DAVID W. BLAKE	BOND REFUND LESS 10%	701-000-265.000	270.00
08/21/2018	AP	72487	DAWN FANT	17-87-DL TRANSPORT ON 7/24/18	101-134-940.010	69.00
		72487		17-87-DL TRANSPORT ON 7/24/18	292-662-930.830	51.00
						<hr/> 120.00
08/21/2018	AP	72488	DAWN TUILETA	18-49-NA PLACEMENT 7/20/18 TO 7/31/18	292-662-930.700	206.88
08/21/2018	AP	72489	DAWN TUILETA	18-49-NA PLACEMENT 7/20/18 TO 7/31/18	292-662-930.700	206.88
08/21/2018	AP	72490	DE LAGE LANDEN PUBLIC FINANCE	INVOICE 60162552, DUE 9/1/18	101-257-920.410	178.12
08/21/2018	AP	72491	DEKETO LLC	THERMAL LABELS AND THERMAL RIBBON	256-215-726.000	224.00
08/21/2018	AP	72492	DENISE SOCIA	BUNING	701-000-271.000	20.00
08/21/2018	AP	72493	DEPARTMENT OF NATURAL RESOURCES	211D RESTITUTION PAYMENT BY STEPHAN COBB 18-35671-SM-3	701-000-271.130	195.00
08/21/2018	AP	72494	DUNNS	885679;885798;885815;886275;886789;886805;887303	101-215-726.000	185.51
		72494		885679;885798;885815;886275;886789;886805;887303	256-215-726.000	32.75
						<hr/> 218.26
08/21/2018	AP	72495	EMPIRIC SOLUTIONS INC	INVOICE #7768 DATED 7/31/18	101-131-801.020	904.15
		72495		INVOICE #7768 DATED 7/31/18	101-228-801.030	5,321.85
		72495		INVOICE #7770 DATED 7/31/18	594-228-700.000	1,699.00
						<hr/> 7,925.00
08/21/2018	AP	72496	FARM BUREAU INSURANCE	WEBBER 4 PYMTS @ \$40	701-000-271.000	160.00
08/21/2018	AP	72497	FIFTH THIRD BANK	12-123-DL RESTITUTION PAYMENT BY T.KWAPIS	701-000-271.148	10.00
08/21/2018	AP	72498	FRONTIER	ACCT #98973297520322105, DUE 8/28/18	261-427-930.210	50.95
08/21/2018	AP	72499	GASLIGHT MEDIA	INVOICE #56957 8/12/18	101-228-930.240	50.00
08/21/2018	AP	72500	GAYLORD CITY TREASURER	211D JULY 2018 DISTRICT COURT MONTH END	701-000-221.000	392.70
08/21/2018	AP	72501	GEORGE T. JOHNSON	COUNTY BURIAL ALLOWANCE, SPOUSE OF DECEASED VETERAN	101-681-930.960	252.00
08/21/2018	AP	72502	GORDON FOOD SERVICES	788229246 GARBAGE BAGS	208-751-726.025	109.98
08/21/2018	AP	72503	HUNTINGTON NATIONAL BANK	2018 LIBRARY BOND PAYMENT	569-906-990.100	360,000.00
		72503		2018 LIBRARY BOND PAYMENT	569-906-990.200	17,512.50
						<hr/> 377,512.50
08/21/2018	AP	72504	JANET ASTRID FLINT	CANVASS 8-7-18 ELECTION	101-262-703.040	50.00
		72504		CANVASS 8-7-18 ELECTION	101-262-930.500	0.50

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
						50.50
08/21/2018	AP	72505	JEFFREY MARKOZ	12-123-DL RESTITUTION PAYMENT BY T.KWAPIS	701-000-271.148	10.00
08/21/2018	AP	72506	JIM WERNIG INC	REST PMT BY MICHAEL MARSH 15-32123-FY-3	701-000-271.130	200.00
08/21/2018	AP	72507	JOHN FANT	17-87-DL TRANSPORT ON 7/24/18	101-134-930.500	164.24
		72507		17-87-DL TRANSPORT ON 7/24/18	101-134-940.010	69.00
		72507		17-87-DL TRANSPORT ON 7/24/18	292-662-930.500	87.20
		72507		17-87-DL TRANSPORT ON 7/24/18	292-662-930.830	51.00
						371.44
08/21/2018	AP	72508	JOHN LAFAVE	08/16/18 HOUSING MEETING PER DIEM, MILEAGE REIMBURSEMENT	233-690-703.040	50.00
		72508		08/16/18 HOUSING MEETING PER DIEM, MILEAGE REIMBURSEMENT	233-690-930.500	6.27
						56.27
08/21/2018	AP	72509	JOHNSON OIL COMPANY	CL38654 FUEL	588-699-930.660	6,692.12
		72509		PRUSAKIEWICZ	701-000-271.000	330.00
						7,022.12
08/21/2018	AP	72510	JONATHON YANG	REST PMT BY BRITNEY MCCARTHY 17-35351-ST-3	701-000-271.130	200.00
08/21/2018	AP	72511	JOSEPH WAMBOLD	08/16/18 HOUSING MEETING PER DIEM	233-690-703.040	50.00
08/21/2018	AP	72512	JULIE DANKERT	18-42-NA PLACEMENT 7/1/18 TO 7/31/18	292-662-930.700	534.44
08/21/2018	AP	72513	JULIE DANKERT	18-42-NA PLACEMENT 7/1/18 TO 7/31/18	292-662-930.700	534.44
08/21/2018	AP	72514	JULIE DANKERT	18-42-NA PLACEMENT 7/1/18 TO 7/31/18	292-662-930.700	534.44
08/21/2018	AP	72515	LAKE MI CREDIT UNION	12-123-DL RESTITUTION PAYMENT BY T.KWAPIS	701-000-271.148	10.00
08/21/2018	AP	72516	LARRY A CORELL	CANVASS 8-7-18 ELECTION	101-262-703.040	50.00
		72516		CANVASS 8-7-18 ELECTION	101-262-930.500	12.50
						62.50
08/21/2018	AP	72517	LISA ELLIOT	RESTITUTION X2 \$80	701-000-271.000	120.00
08/21/2018	AP	72518	LUTHERAN CHILD & FAMILY SERVICES	17-65-NA PLACEMENT 7/1/18 TO 7/31/18	292-662-930.810	5,278.40
08/21/2018	AP	72519	M BANK	REST PMT BY JOY MILLER 06-184410-FY-3	701-000-271.130	40.00
08/21/2018	AP	72520	MAAE	CONFERENCE 2018	281-537-930.600	225.00
08/21/2018	AP	72521	MATTHEW GREEN	REGHI	701-000-271.000	50.00

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
08/21/2018	AP	72522	MIDLAND COUNTY JUVENILE CARE CENTER	17-87-DL PRESCRIPTION REIMBURSEMENT	292-662-930.810	33.57
08/21/2018	AP	72523	NETWORKFLEET INC	OSV000001484466	212-430-920.410	37.90
08/21/2018	AP	72524	NICHOLAS JAMES ANTHONY	AUGUST 2018 WEEKEND DRUG TESTER: AUG 4, 5, 11, 12	101-133-940.010	160.00
08/21/2018	AP	72525	OMH MEDICAL GROUP & MEDCAR WALKIN	NEW EMPLOYEE PHYSICALS	101-301-940.010	106.00
		72525		NEW EMPLOYEE PHYSICALS	101-351-940.010	65.00
		72525		NEW EMPLOYEE PHYSICALS	588-699-940.010	188.00
		72525		NEW EMPLOYEE PHYSICALS	645-270-940.010	65.00
						424.00
08/21/2018	AP	72526	OTSEGO COUNTY	ATTACHED	701-000-265.000	2,100.00
08/21/2018	AP	72527	OTSEGO COUNTY BUS SYSTEM	JULY 2018 DRUG COURT BUS	101-133-930.500	240.00
		72527		JULY 2018 JUVENILE BUS - EDGE/HEALTHY LIVING	292-662-930.500	519.00
						759.00
08/21/2018	AP	72528	OTSEGO COUNTY FRIEND OF COURT	12-14613 BREWER;16-16267 BREWER;02-9854 CHURCHES	701-000-265.000	1,900.00
08/21/2018	AP	72529	OTSEGO COUNTY JUDICIAL SYSTEM	ADDITIONAL STARTUP FUNDS FOR HRA CLAIMS ACCOUNT	101-131-704.110	524.00
		72529		8/15/18 HRA REIMBURSEMENT CHECK REGISTER	292-662-704.110	6.00
						530.00
08/21/2018	AP	72530	OTSEGO COUNTY ROAD COMMISSION	REST PMT BY KEVIN STEVENS 16-33574-SM-3	701-000-271.130	400.00
08/21/2018	AP	72531	OTSEGO COUNTY TREASURER	POSTAGE	516-253-930.450	13.57
08/21/2018	AP	72532	PINEVIEW HOMES	15-90-DL PLACEMENT 7/1/18 TO 7/31/18	292-662-930.810	11,283.84
08/21/2018	AP	72533	PROTECTION ONE	8/28/18 TO 9/27/18 DC/FAMILY WING MONITORING	101-131-940.010	85.89
		72533		8/28/18 TO 9/27/18 ADMIN/PA WING MONITORING	101-267-920.410	25.05
		72533		8/28/18 TO 9/27/18 ADMIN/PA WING MONITORING	101-267-930.983	3.58
		72533		8/28/18 TO 9/27/18 FOC WING MONITORING	215-141-940.010	45.80
						160.32
08/21/2018	AP	72534	RACHEL RUSHLOW	REFUND FOR OVERPAYMENT MADE ON 2017 TAX YEAR FOR PARCEI516-000-001.001		23.30
08/21/2018	AP	72535	REDWOOD TOXICOLOGY LABORATORY INC	JULY 2018 DRUG COURT DRUG TESTING	101-133-940.010	7.50
		72535		JULY 2018 JUVENILE DRUG TESTING	292-662-801.030	79.00
						86.50
08/21/2018	AP	72536	SAM CANDELA	CANVASS 8-7-18 ELECTION	101-262-703.040	50.00
		72536		CANVASS 8-7-18 ELECTION	101-262-930.500	4.00

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
						54.00
08/21/2018	AP	72537	SANE	SAN-97-16	701-000-271.000	348.00
08/21/2018	AP	72538	SATELLITE TRACKING OF PEOPLE LLC	JULY 2018 JUVENILE TETHER	292-662-940.010	161.50
08/21/2018	AP	72539	SAULT STE MARIE TRIBE - CHIPPEWA IN	17-87-DL PLACEMENT 7/21/18 TO 7/24/18	292-662-930.810	1,800.00
08/21/2018	AP	72540	SCRUBS-R-US	MARTIN	701-000-271.000	50.00
08/21/2018	AP	72541	SEAN MUELLER	REST PMT BY DANIEL SEIBEL 18-35982-SM-3	701-000-271.130	100.00
08/21/2018	AP	72542	SHELL GAS STATION	REST PMT BY BENJAMIN DEEMS 18-35992-SM-3	701-000-271.130	70.00
08/21/2018	AP	72543	SHERRY S HUFF	DHHS BD MTG; 7/19/18 TRV EXP VOUCHER	290-670-703.040	100.00
		72543		DHHS BD MTG; 7/19/18 TRV EXP VOUCHER	290-670-930.500	69.00
						169.00
08/21/2018	AP	72544	STATE OF MICHIGAN	JULY 2018 NEW AND RENEWAL CPL PERMITS	701-000-228.016	1,871.00
08/21/2018	AP	72545	STATE OF MICHIGAN	211D JULY 2018 DISTRICT COURT MONTH END	701-000-228.020	12.00
		72545		211D JULY 2018 DISTRICT COURT MONTH END	701-000-228.030	271.67
		72545		211D JULY 2018 DISTRICT COURT MONTH END	701-000-228.037	3,404.54
		72545		211D JULY 2018 DISTRICT COURT MONTH END	701-000-228.042	250.00
		72545		211D JULY 2018 DISTRICT COURT MONTH END	701-000-228.057	291.66
		72545		211D JULY 2018 DISTRICT COURT MONTH END	701-000-228.058	4,326.00
		72545		211D JULY 2018 DISTRICT COURT MONTH END	701-000-228.059	13,289.05
		72545		211D JULY 2018 DISTRICT COURT MONTH END	701-000-228.560	1,175.00
						23,019.92
08/21/2018	AP	72546	STATE OF MICHIGAN DHHS	HAAS	701-000-271.000	100.00
08/21/2018	AP	72547	SZUBA & ASSOCIATES PLLC	REFUND MOTION FEE: 15-29331-GC-3 FORD MOTOR CREDIT CO V DA	701-000-286.002	20.00
08/21/2018	AP	72548	TAMMY LABOUEF	08/16/18 HOUSING MEETING PER DIEM	233-690-703.040	50.00
08/21/2018	AP	72549	THOMAS LAUBER	17-74-NA PLACEMENT 7/1/18 TO 7/23/18	292-662-930.700	396.52
08/21/2018	AP	72550	TONYA KLEE-JURCZYK	WISELEY	701-000-271.000	30.00
08/21/2018	AP	72551	TRACTOR SUPPLY CO-DEPT 30-120262666	6035 3012 0346 2336 DUMP CART	208-751-726.050	199.99
08/21/2018	AP	72552	UCMAN	7880	212-430-920.410	400.00
08/21/2018	AP	72553	UNIFIRST CORPORATION	AIRPORT CARPET RENTALS # 1530037761X	281-537-920.410	45.89
08/21/2018	AP	72554	UP NORTH GROWERS SUPPLY	12-123-DL RESTITUTION PAYMENT BY T.KWAPIS	701-000-271.148	10.00

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
08/21/2018	AP	72555	VAN ISLER	12-123-DL RESTITUTION PAYMENT BY T.KWAPIS	701-000-271.148	4.50
08/21/2018	AP	72556	VANDERBILT AREA SCHOOLS	16-93-DL RESTITUTION PAYMENT BY S.STOCKS	701-000-271.148	26.66
08/21/2018	AP	72557	WAL-MART STORES ASSET PROTECTION	REST PMT BY LOGAN ODYKIRK 16-33844-SM-3	701-000-271.130	809.65
08/21/2018	AP	72558	WALMART	MCCLURE	701-000-271.000	49.50
08/21/2018	AP	72559	WEST PAYMENT CENTER	JULY 2018 FOC SKIP TRACING FEES	215-141-940.010	135.50
08/21/2018	AP	72560	WEST PAYMENT CENTER	JULY 2018 COURT SKIP TRACING FEES	101-131-940.010	125.08
08/21/2018	AP	72561	WILLIAM LIGHT	CANVASS 8-7-18 ELECTION	101-262-703.040	50.00
		72561		CANVASS 8-7-18 ELECTION	101-262-930.500	15.00
						65.00
			TOTAL - ALL FUNDS	TOTAL OF 103 CHECKS		504,303.89

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	Account	Dept	Amount
Fund: 101 GENERAL FUND							
08/21/2018	AP	1932(E)*#	FLEETCOR SUPERFLEET MASTERCARD	ACCT #FB115, BILLING DATE 8/1/18	930.660	301	432.35
				ACCT #FB115, BILLING DATE 8/1/18	930.660	331	36.65
				ACCT #FB115, BILLING DATE 8/1/18	930.660	648	21.96
				ACCT #FB115, BILLING DATE 8/1/18	930.660	721	21.21
				CHECK AP 1932(E) TOTAL FOR FUND 101:			<u>512.17</u>
08/21/2018	AP	72471*#	BLUE CARE NETWORK	00182055 SEPTEMBER 2018 COURT MEDICAL	704.110	131	1,727.55
				00182055 SEPTEMBER 2018 COURT MEDICAL	704.110	148	1,212.94
				CHECK AP 72471 TOTAL FOR FUND 101:			<u>2,940.49</u>
08/21/2018	AP	72472	BLUE CROSS BLUE SHIELD OF MICHIGAN	ASC INVOICE 7/1-7/31/2018	930.470	351	1,307.97
08/21/2018	AP	72474*#	CATHERINE ISBELL	17-87-DL TRANSPORT ON 7/26/18	930.500	134	133.65
				17-37-DL TRANSPORT ON 8/9/18	930.500	134	49.05
				17-87-DL TRANSPORT ON 7/26/18	940.010	134	60.00
				17-37-DL TRANSPORT ON 8/9/18	940.010	134	21.00
				CHECK AP 72474 TOTAL FOR FUND 101:			<u>263.70</u>
08/21/2018	AP	72475*#	CHARLES ISBELL	17-87-DL TRANSPORT ON 7/26/18	940.010	134	60.00
				17-37-DL TRANSPORT ON 8/9/18	940.010	134	21.00
				CHECK AP 72475 TOTAL FOR FUND 101:			<u>81.00</u>
08/21/2018	AP	72480	CORECOMM	115039078 - AUGUST 2018 COURT INTERNET	930.210	131	21.95
08/21/2018	AP	72481*#	CRAWFORD COUNTY TREASURER	APRIL 2018 TRI-COUNTY EXPENSE	940.111	131	10,632.27
				JUNE 2018 TRI-COUNTY EXPENSE	940.111	131	11,794.75
				CHECK AP 72481 TOTAL FOR FUND 101:			<u>22,427.02</u>
08/21/2018	AP	72487*#	DAWN FANT	17-87-DL TRANSPORT ON 7/24/18	940.010	134	36.00
				18-23-DL TRANSPORT ON 7/25/18	940.010	134	33.00
				CHECK AP 72487 TOTAL FOR FUND 101:			<u>69.00</u>
08/21/2018	AP	72490	DE LAGE LANDEN PUBLIC FINANCE	INVOICE 60162552, DUE 9/1/18	920.410	257	178.12
08/21/2018	AP	72494*	DUNNS	885679;885798;885815;886275;886789;886805;887303	726.000	215	185.51
08/21/2018	AP	72495*#	EMPIRIC SOLUTIONS INC	INVOICE #7768 DATED 7/31/18	801.020	131	904.15

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	Account	Dept	Amount
Fund: 101 GENERAL FUND							
				INVOICE #7768 DATED 7/31/18	801.030	228	5,321.85
				CHECK AP 72495 TOTAL FOR FUND 101:			<u>6,226.00</u>
08/21/2018	AP	72499	GASLIGHT MEDIA	INVOICE #56957 8/12/18	930.240	228	50.00
08/21/2018	AP	72501	GEORGE T. JOHNSON	COUNTY BURIAL ALLOWANCE, SPOUSE OF DECEASED VETERAN	930.960	681	252.00
08/21/2018	AP	72504	JANET ASTRID FLINT	CANVASS 8-7-18 ELECTION	703.040	262	50.00
				CANVASS 8-7-18 ELECTION	930.500	262	0.50
				CHECK AP 72504 TOTAL FOR FUND 101:			<u>50.50</u>
08/21/2018	AP	72507*	JOHN FANT	17-87-DL TRANSPORT ON 7/24/18	930.500	134	82.12
				18-23-DL TRANSPORT ON 7/25/18	930.500	134	82.12
				17-87-DL TRANSPORT ON 7/24/18	940.010	134	36.00
				18-23-DL TRANSPORT ON 7/25/18	940.010	134	33.00
				CHECK AP 72507 TOTAL FOR FUND 101:			<u>233.24</u>
08/21/2018	AP	72516	LARRY A CORELL	CANVASS 8-7-18 ELECTION	703.040	262	50.00
				CANVASS 8-7-18 ELECTION	930.500	262	12.50
				CHECK AP 72516 TOTAL FOR FUND 101:			<u>62.50</u>
08/21/2018	AP	72524	NICHOLAS JAMES ANTHONY	AUGUST 2018 WEEKEND DRUG TESTER: AUG 4, 5, 11, 12	940.010	133	160.00
08/21/2018	AP	72525*	OMH MEDICAL GROUP & MEDCAR WALKIN	NEW EMPLOYEE PHYSICALS	940.010	301	106.00
				NEW EMPLOYEE PHYSICALS	940.010	351	65.00
				CHECK AP 72525 TOTAL FOR FUND 101:			<u>171.00</u>
08/21/2018	AP	72527*	OTSEGO COUNTY BUS SYSTEM	JULY 2018 DRUG COURT BUS	930.500	133	240.00
08/21/2018	AP	72529*	OTSEGO COUNTY JUDICIAL SYSTEM	ADDITIONAL STARTUP FUNDS FOR HRA CLAIMS ACCOUNT	704.110	131	500.00
				8/15/18 HRA REIMBURSEMENT CHECK REGISTER	704.110	131	24.00
				CHECK AP 72529 TOTAL FOR FUND 101:			<u>524.00</u>
08/21/2018	AP	72533*	PROTECTION ONE	8/28/18 TO 9/27/18 DC/FAMILY WING MONITORING	940.010	131	57.26
				8/28/18 TO 9/27/18 ADMIN/PA WING MONITORING	940.010	131	28.63
				8/28/18 TO 9/27/18 ADMIN/PA WING MONITORING	920.410	267	25.05
				8/28/18 TO 9/27/18 ADMIN/PA WING MONITORING	930.983	267	3.58

Check Date	Bank	Check #	Payee	Description	Account	Dept	Amount
Fund: 101 GENERAL FUND							
				CHECK AP 72533 TOTAL FOR FUND 101:			114.52
08/21/2018	AP	72535*#	REDWOOD TOXICOLOGY LABORATORY INC	JULY 2018 DRUG COURT DRUG TESTING	940.010	133	7.50
08/21/2018	AP	72536	SAM CANDELA	CANVASS 8-7-18 ELECTION	703.040	262	50.00
				CANVASS 8-7-18 ELECTION	930.500	262	4.00
				CHECK AP 72536 TOTAL FOR FUND 101:			54.00
08/21/2018	AP	72560	WEST PAYMENT CENTER	JULY 2018 COURT SKIP TRACING FEES	940.010	131	125.08
08/21/2018	AP	72561	WILLIAM LIGHT	CANVASS 8-7-18 ELECTION	703.040	262	50.00
				CANVASS 8-7-18 ELECTION	930.500	262	15.00
				CHECK AP 72561 TOTAL FOR FUND 101:			65.00
				Total for fund 101 GENERAL FUND			36,322.27
Fund: 205 WORK CAMP							
08/21/2018	AP	1932(E)*#	FLEETCOR SUPERFLEET MASTERCARD	ACCT #FB115, BILLING DATE 8/1/18	930.660	301	39.64
				Total for fund 205 WORK CAMP			39.64
Fund: 208 PARKS AND RECREATION							
08/21/2018	AP	1929(E)*#	CHARTER COMMUNICATIONS	PHONE AND INTERNET 2 MONTHS	930.210	751	212.95
				CABLE AND PHONE	726.000	752	10.00
				CABLE AND PHONE	930.210	752	26.49
				CHECK AP 1929(E) TOTAL FOR FUND 208:			249.44
08/21/2018	AP	1930(E)*#	CONSUMERS ENERGY	CENTER ELECTRIC BILL 100031389081	930.620	752	252.65
08/21/2018	AP	1931(E)*#	DTE ENERGY	GAS BILL	930.610	752	34.88
08/21/2018	AP	72502	GORDON FOOD SERVICES	788229246 GARBAGE BAGS	726.025	751	109.98
08/21/2018	AP	72551	TRACTOR SUPPLY CO-DEPT 30-120262666	6035 3012 0346 2336 DUMP CART	726.050	751	199.99
				Total for fund 208 PARKS AND RECREATION			846.94
Fund: 210 AMBULANCE SERVICES							
08/21/2018	AP	1932(E)*#	FLEETCOR SUPERFLEET MASTERCARD	ACCT #FB115, BILLING DATE 8/1/18	700.000	651	718.59
				Total for fund 210 AMBULANCE SERVICES			718.59
Fund: 212 ANIMAL CONTROL							

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	Account	Dept	Amount
Fund: 212 ANIMAL CONTROL							
08/21/2018	AP	1931(E)*#	DTE ENERGY	ANIMAL CONTROL JULY 2018	930.610	430	57.06
08/21/2018	AP	1932(E)*#	FLEETCOR SUPERFLEET MASTERCARD	ACCT #FB115, BILLING DATE 8/1/18	930.660	430	41.67
08/21/2018	AP	72466	AMERICAN WASTE	2614101	920.410	430	72.10
08/21/2018	AP	72523	NETWORKFLEET INC	OSV000001484466	920.410	430	37.90
08/21/2018	AP	72552	UCMAN	7880	920.410	430	400.00
Total for fund 212 ANIMAL CONTROL							608.73
Fund: 215 FRIEND OF THE COURT							
08/21/2018	AP	72471*#	BLUE CARE NETWORK	00182055 SEPTEMBER 2018 COURT MEDICAL	704.110	141	5,955.66
08/21/2018	AP	72481*#	CRAWFORD COUNTY TREASURER	APRIL 2018 TRI-COUNTY EXPENSE	940.111	141	292.77
				JUNE 2018 TRI-COUNTY EXPENSE	940.111	141	340.31
CHECK AP 72481 TOTAL FOR FUND 215:							633.08
08/21/2018	AP	72533*#	PROTECTION ONE	8/28/18 TO 9/27/18 FOC WING MONITORING	940.010	141	45.80
08/21/2018	AP	72559	WEST PAYMENT CENTER	JULY 2018 FOC SKIP TRACING FEES	940.010	141	135.50
Total for fund 215 FRIEND OF THE COURT							6,770.04
Fund: 233 HUD GRANT FUND							
08/21/2018	AP	72508	JOHN LAFAVE	08/16/18 HOUSING MEETING PER DIEM, MILEAGE REIMBURSEMENT	703.040	690	50.00
				08/16/18 HOUSING MEETING PER DIEM, MILEAGE REIMBURSEMENT	930.500	690	6.27
CHECK AP 72508 TOTAL FOR FUND 233:							56.27
08/21/2018	AP	72511	JOSEPH WAMBOLD	08/16/18 HOUSING MEETING PER DIEM	703.040	690	50.00
08/21/2018	AP	72548	TAMMY LABOUEF	08/16/18 HOUSING MEETING PER DIEM	703.040	690	50.00
Total for fund 233 HUD GRANT FUND							156.27
Fund: 249 BUILDING INSPECTION FUND							
08/21/2018	AP	1932(E)*#	FLEETCOR SUPERFLEET MASTERCARD	ACCT #FB115, BILLING DATE 8/1/18	930.660	371	7.07
Total for fund 249 BUILDING INSPECTION FUND							7.07
Fund: 256 REGISTER OF DEEDS AUTOMATION							
08/21/2018	AP	72491	DEKETO LLC	THERMAL LABELS AND THERMAL RIBBON	726.000	215	224.00
08/21/2018	AP	72494*	DUNNS	885679;885798;885815;886275;886789;886805;887303	726.000	215	32.75

Check Date	Bank	Check #	Payee	Description	Account	Dept	Amount
Fund: 256 REGISTER OF DEEDS AUTOMATION							
				Total for fund 256 REGISTER OF DEEDS AUTOMATION			256.75
Fund: 261 911 SERVICE FUND							
08/21/2018	AP	72498	FRONTIER	ACCT #98973297520322105, DUE 8/28/18	930.210	427	50.95
				Total for fund 261 911 SERVICE FUND			50.95
Fund: 269 LAW LIBRARY							
08/21/2018	AP	72481*#	CRAWFORD COUNTY TREASURER	JUNE 2018 TRI-COUNTY EXPENSE	726.210	145	258.40
				Total for fund 269 LAW LIBRARY			258.40
Fund: 281 AIRPORT							
08/21/2018	AP	1929(E)*#	CHARTER COMMUNICATIONS	AIRPORT TV, INTERNET, PHONES	920.410	537	349.77
08/21/2018	AP	72464	AIRGAS USA LLC	AIRPORT CYLINDER RENTAL # 9954956281	920.410	537	29.37
08/21/2018	AP	72520	MAAE	CONFERENCE 2018	930.600	537	225.00
08/21/2018	AP	72553	UNIFIRST CORPORATION	AIRPORT CARPET RENTALS # 1530037761X	920.410	537	45.89
				Total for fund 281 AIRPORT			650.03
Fund: 290 SOCIAL WELFARE FUND							
08/21/2018	AP	72479	CONNIE MURPHY	DHHS BD MTG; TRAV EXP VOUCHER; 7/19/18	703.040	670	50.00
				DHHS BD MTG; TRAV EXP VOUCHER; 7/19/18	930.500	670	27.00
				CHECK AP 72479 TOTAL FOR FUND 290:			<u>77.00</u>
08/21/2018	AP	72543	SHERRY S HUFF	DHHS BD MTG; 7/19/18 TRV EXP VOUCHER	703.040	670	100.00
				DHHS BD MTG; 7/19/18 TRV EXP VOUCHER	930.500	670	69.00
				CHECK AP 72543 TOTAL FOR FUND 290:			<u>169.00</u>
				Total for fund 290 SOCIAL WELFARE FUND			246.00
Fund: 292 CHILD CARE FUND							
08/21/2018	AP	72463	7TH PROBATE FAMILY COURT	15-20-DL PLACEMENT 7/1/18 TO 7/31/18	930.810	662	4,240.00
08/21/2018	AP	72467	APRIL KELLEY	17-65-NA PLACEMENT 7/2/18 TO 7/31/18	930.700	662	667.20
08/21/2018	AP	72468	APRIL KELLY	17-85-NA PLACEMENT 7/2/18 TO 7/31/18	930.700	662	667.20
08/21/2018	AP	72471*#	BLUE CARE NETWORK	00182055 SEPTEMBER 2018 COURT MEDICAL	704.110	662	1,703.83
08/21/2018	AP	72474*#	CATHERINE ISBELL	17-34-DL TRANSPORT ON 8/9/18	930.500	662	24.53
				17-87-DL TRANSPORT ON 7/26/18	930.830	662	9.00
				17-34-DL TRANSPORT ON 8/9/18	930.830	662	12.00

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	Account	Dept	Amount
Fund: 292 CHILD CARE FUND							
				CHECK AP 72474 TOTAL FOR FUND 292:			45.53
08/21/2018	AP	72475*#	CHARLES ISBELL	17-87-DL TRANSPORT ON 7/26/18	930.500	662	16.35
				17-87-DL TRANSPORT ON 7/26/18	930.830	662	9.00
				17-37-DL TRANSPORT ON 8/9/18	930.830	662	12.00
				CHECK AP 72475 TOTAL FOR FUND 292:			37.35
08/21/2018	AP	72476	CHILD & FAMILY SERVICES OF NW MI	17-26-NA PLACEMENT 7/1/18 TO 7/31/18	930.810	662	689.44
08/21/2018	AP	72483	DANIELLE FOX	18-12-NA PLACEMENT 7/1/18 TO 7/24/18	930.700	662	907.92
08/21/2018	AP	72487*#	DAWN FANT	17-87-DL TRANSPORT ON 7/24/18	930.830	662	24.00
				18-023-DL TRANSPORT ON 7/25/18	930.830	662	27.00
				CHECK AP 72487 TOTAL FOR FUND 292:			51.00
08/21/2018	AP	72488	DAWN TUILETA	18-49-NA PLACEMENT 7/20/18 TO 7/31/18	930.700	662	206.88
08/21/2018	AP	72489	DAWN TUILETA	18-49-NA PLACEMENT 7/20/18 TO 7/31/18	930.700	662	206.88
08/21/2018	AP	72507*#	JOHN FANT	17-87-DL TRANSPORT ON 7/24/18	930.500	662	43.60
				18-023-DL TRANSPORT ON 7/25/18	930.500	662	43.60
				17-87-DL TRANSPORT ON 7/24/18	930.830	662	24.00
				18-023-DL TRANSPORT ON 7/25/18	930.830	662	27.00
				CHECK AP 72507 TOTAL FOR FUND 292:			138.20
08/21/2018	AP	72512	JULIE DANKERT	18-42-NA PLACEMENT 7/1/18 TO 7/31/18	930.700	662	534.44
08/21/2018	AP	72513	JULIE DANKERT	18-42-NA PLACEMENT 7/1/18 TO 7/31/18	930.700	662	534.44
08/21/2018	AP	72514	JULIE DANKERT	18-42-NA PLACEMENT 7/1/18 TO 7/31/18	930.700	662	534.44
08/21/2018	AP	72518	LUTHERAN CHILD & FAMILY SERVICES	17-65-NA PLACEMENT 7/1/18 TO 7/31/18	930.810	662	534.44
				17-66-NA PLACEMENT 7/1/18 TO 7/31/18	930.810	662	534.44
				17-82-NA PLACEMENT 7/1/18 TO 7/31/18	930.810	662	534.44
				17-65-NA PLACEMENT 7/1/18 TO 7/31/2018 & CLOTHING ALLOWANCE	930.810	662	744.44
				17-65-NA 6/27/18 TO 6/30/18	930.810	662	68.96
				17-66-NA PLACEMENT 7/1/18 TO 7/31/18	930.810	662	689.44
				18-43-NA PLACEMENT 6/11/18 TO 6/30/18	930.810	662	344.80
				18-43-NA PLACEMENT 7/1/18 TO 7/31/18	930.810	662	534.44
				18-43-NA PLACEMENT 6/18/18 TO 6/30/18	930.810	662	224.12

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	Account	Dept	Amount
Fund: 292 CHILD CARE FUND							
				18-43-NA PLACEMENT 7/1/18 TO 7/31/18	930.810	662	534.44
				16-108-NA PLACEMENT 7/1/18 TO 7/31/18	930.810	662	534.44
				CHECK AP 72518 TOTAL FOR FUND 292:			<u>5,278.40</u>
08/21/2018	AP	72522	MIDLAND COUNTY JUVENILE CARE CENTER	17-87-DL PRESCRIPTION REIMBURSEMENT	930.810	662	33.57
08/21/2018	AP	72527*#	OTSEGO COUNTY BUS SYSTEM	JULY 2018 JUVENILE BUS - EDGE/HEALTHY LIVING	930.500	662	519.00
08/21/2018	AP	72529*#	OTSEGO COUNTY JUDICIAL SYSTEM	8/15/18 HRA REIMBURSEMENT CHECK REGISTER	704.110	662	6.00
08/21/2018	AP	72532	PINEVIEW HOMES	15-90-DL PLACEMENT 7/1/18 TO 7/31/18	930.810	662	6,477.76
				12-83-DL PLACEMENT 7/1/18 TO 7/23/18	930.810	662	4,806.08
				CHECK AP 72532 TOTAL FOR FUND 292:			<u>11,283.84</u>
08/21/2018	AP	72535*#	REDWOOD TOXICOLOGY LABORATORY INC	JULY 2018 JUVENILE DRUG TESTING	801.030	662	79.00
08/21/2018	AP	72538	SATELLITE TRACKING OF PEOPLE LLC	JULY 2018 JUVENILE TETHER	940.010	662	161.50
08/21/2018	AP	72539	SAULT STE MARIE TRIBE - CHIPPEWA IN	17-87-DL PLACEMENT 7/21/18 TO 7/24/18	930.810	662	360.00
				17-44-DL PLACEMENT 7/10/18 TO 7/15/18	930.810	662	600.00
				18-23-DL PLACEMENT 7/25/18 TO 7/31/18	930.810	662	840.00
				CHECK AP 72539 TOTAL FOR FUND 292:			<u>1,800.00</u>
08/21/2018	AP	72549	THOMAS LAUBER	17-74-NA PLACEMENT 7/1/18 TO 7/23/18	930.700	662	396.52
				Total for fund 292 CHILD CARE FUND			30,722.58
Fund: 516 DELINQUENT TAX REVOLVING							
08/21/2018	AP	72465	AMELIA POHUTSKY	REFUND FOR OVERPAYMENT MADE ON 2017 TAX YEAR FOR PARCEL 001.001		000	36.00
08/21/2018	AP	72531	OTSEGO COUNTY TREASURER	POSTAGE	930.450	253	13.57
08/21/2018	AP	72534	RACHEL RUSHLOW	REFUND FOR OVERPAYMENT MADE ON 2017 TAX YEAR FOR PARCEL 001.001		000	23.30
				Total for fund 516 DELINQUENT TAX REVOLVING			72.87
Fund: 569 DEBT SERVICE							
08/21/2018	AP	72503	HUNTINGTON NATIONAL BANK	2018 LIBRARY BOND PAYMENT	990.100	906	360,000.00
				2018 LIBRARY BOND PAYMENT	990.200	906	17,512.50
				CHECK AP 72503 TOTAL FOR FUND 569:			<u>377,512.50</u>
				Total for fund 569 DEBT SERVICE			377,512.50

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	Account	Dept	Amount
Fund: 588 TRANSPORTATION FUND							
08/21/2018	AP	72478	CITY OF GAYLORD	001254-0000-02 JULY	920.200	697	61.86
08/21/2018	AP	72509*#	JOHNSON OIL COMPANY	CL38654 FUEL	930.660	699	6,692.12
08/21/2018	AP	72525*#	OMH MEDICAL GROUP & MEDCAR WALKIN	NEW EMPLOYEE PHYSICALS	940.010	699	188.00
Total for fund 588 TRANSPORTATION FUND							6,941.98
Fund: 594 UC METROPOLITAN AREA NETWORK							
08/21/2018	AP	72495*#	EMPIRIC SOLUTIONS INC	INVOICE #7770 DATED 7/31/18	700.000	228	1,699.00
Total for fund 594 UC METROPOLITAN AREA NETWORK							1,699.00
Fund: 637 BUILDING AND GROUNDS							
08/21/2018	AP	1930(E)*#	CONSUMERS ENERGY	103015852710/100000163053	930.620	265	4,068.76
				103015852710/100000163053	930.620	265	34.03
				ACCT 1000 2119 0929, DUE 8/27/18	930.620	265	33.57
CHECK AP 1930(E) TOTAL FOR FUND 637:							4,136.36
Total for fund 637 BUILDING AND GROUNDS							4,136.36
Fund: 645 ADMINISTRATIVE SERVICES							
08/21/2018	AP	72525*#	OMH MEDICAL GROUP & MEDCAR WALKIN	NEW EMPLOYEE PHYSICALS	940.010	270	65.00
Total for fund 645 ADMINISTRATIVE SERVICES							65.00
Fund: 701 GENERAL AGENCY							
08/21/2018	AP	72469	AUTO OWNERS INSURANCE CO	TOBER	271.000	000	100.00
08/21/2018	AP	72470	BEVERLY ENTERPRISES	EVANS	271.000	000	25.00
08/21/2018	AP	72473	BRADLEY J BUTCHER	REST PMT BY CONNIE ROSE JOSEPH 05-16547-FY-3	271.130	000	100.00
08/21/2018	AP	72477	CITIZENS INSURANCE	MOSHER	271.000	000	40.00
08/21/2018	AP	72482	CROSSROADS INDUSTRIES	TUSZYNSKI	271.000	000	100.00
08/21/2018	AP	72484	DARYL MILLSAP	BOND REFUND LESS 10%	265.000	000	180.00
08/21/2018	AP	72485	DAVID ALLEN WRIGHT	16-109-DL RESTITUTION PAYMENT BY G.ROUX	271.148	000	110.00
08/21/2018	AP	72486	DAVID W. BLAKE	BOND REFUND LESS 10%	265.000	000	270.00
08/21/2018	AP	72492	DENISE SOCIA	BUNING	271.000	000	20.00
08/21/2018	AP	72493	DEPARTMENT OF NATURAL RESOURCES	211D RESTITUTION PAYMENT BY STEPHAN COBB 18-35671-SM-3	271.130	000	195.00
08/21/2018	AP	72496	FARM BUREAU INSURANCE	WEBBER 4 PYMTS @ \$40	271.000	000	160.00

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	Account	Dept	Amount
Fund: 701 GENERAL AGENCY							
08/21/2018	AP	72497	FIFTH THIRD BANK	12-123-DL RESTITUTION PAYMENT BY T.KWAPIS	271.148	000	10.00
08/21/2018	AP	72500	GAYLORD CITY TREASURER	211D JULY 2018 DISTRICT COURT MONTH END	221.000	000	392.70
08/21/2018	AP	72505	JEFFREY MARKOZ	12-123-DL RESTITUTION PAYMENT BY T.KWAPIS	271.148	000	10.00
08/21/2018	AP	72506	JIM WERNIG INC	REST PMT BY MICHAEL MARSH 15-32123-FY-3	271.130	000	200.00
08/21/2018	AP	72509#	JOHNSON OIL COMPANY	PRUSAKIEWICZ	271.000	000	330.00
08/21/2018	AP	72510	JONATHON YANG	REST PMT BY BRITNEY MCCARTHY 17-35351-ST-3	271.130	000	200.00
08/21/2018	AP	72515	LAKE MI CREDIT UNION	12-123-DL RESTITUTION PAYMENT BY T.KWAPIS	271.148	000	10.00
08/21/2018	AP	72517	LISA ELLIOT	RESTITUTION X2 \$80	271.000	000	120.00
08/21/2018	AP	72519	M BANK	REST PMT BY JOY MILLER 06-184410-FY-3	271.130	000	40.00
08/21/2018	AP	72521	MATTHEW GREEN	REGHI	271.000	000	50.00
08/21/2018	AP	72526	OTSEGO COUNTY	ATTACHED	265.000	000	2,100.00
08/21/2018	AP	72528	OTSEGO COUNTY FRIEND OF COURT	12-14613 BREWER;16-16267 BREWER;02-9854 CHURCHES	265.000	000	1,900.00
08/21/2018	AP	72530	OTSEGO COUNTY ROAD COMMISSION	REST PMT BY KEVIN STEVENS 16-33574-SM-3	271.130	000	200.00
				REST PMT BY CARL SCHAUB 17-35340-SD-3	271.130	000	200.00
				CHECK AP 72530 TOTAL FOR FUND 701:			<u>400.00</u>
08/21/2018	AP	72537	SANE	SAN-97-16	271.000	000	348.00
08/21/2018	AP	72540	SCRUBS-R-US	MARTIN	271.000	000	50.00
08/21/2018	AP	72541	SEAN MUELLER	REST PMT BY DANIEL SEIBEL 18-35982-SM-3	271.130	000	100.00
08/21/2018	AP	72542	SHELL GAS STATION	REST PMT BY BENJAMIN DEEMS 18-35992-SM-3	271.130	000	70.00
08/21/2018	AP	72544	STATE OF MICHIGAN	JULY 2018 NEW AND RENEWAL CPL PERMITS	228.016	000	1,871.00
08/21/2018	AP	72545	STATE OF MICHIGAN	211D JULY 2018 DISTRICT COURT MONTH END	228.020	000	12.00
				211D JULY 2018 DISTRICT COURT MONTH END	228.030	000	271.67
				211D JULY 2018 DISTRICT COURT MONTH END	228.037	000	3,404.54
				211D JULY 2018 DISTRICT COURT MONTH END	228.042	000	250.00
				211D JULY 2018 DISTRICT COURT MONTH END	228.057	000	291.66
				211D JULY 2018 DISTRICT COURT MONTH END	228.058	000	4,326.00

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/21/2018 - 08/21/2018

Check Date	Bank	Check #	Payee	Description	Account	Dept	Amount
Fund: 701 GENERAL AGENCY							
				211D JULY 2018 DISTRICT COURT MONTH END	228.059	000	13,289.05
				211D JULY 2018 DISTRICT COURT MONTH END	228.560	000	1,175.00
				CHECK AP 72545 TOTAL FOR FUND 701:			<u>23,019.92</u>
08/21/2018	AP	72546	STATE OF MICHIGAN DHHS	HAAS	271.000	000	100.00
08/21/2018	AP	72547	SZUBA & ASSOCIATES PLLC	REFUND MOTION FEE: 15-29331-GC-3 FORD MOTOR CREDIT CO V DA	286.002	000	20.00
08/21/2018	AP	72550	TONYA KLEE-JURCZYK	WISELEY	271.000	000	30.00
08/21/2018	AP	72554	UP NORTH GROWERS SUPPLY	12-123-DL RESTITUTION PAYMENT BY T.KWAPIS	271.148	000	10.00
08/21/2018	AP	72555	VAN ISLER	12-123-DL RESTITUTION PAYMENT BY T.KWAPIS	271.148	000	4.50
08/21/2018	AP	72556	VANDERBILT AREA SCHOOLS	16-93-DL RESTITUTION PAYMENT BY S.STOCKS	271.148	000	26.66
08/21/2018	AP	72557	WAL-MART STORES ASSET PROTECTION	REST PMT BY LOGAN ODYKIRK 16-33844-SM-3	271.130	000	61.72
				REST PMT BY PATRICE TUCKER 18-35799-SM-3	271.130	000	37.00
				REST PMT BY AARON FOUCCART 18-35803-SM-3	271.130	000	35.68
				REST PMT BY DESTINY MAY 14-30522-SM-3	271.130	000	50.00
				REST PMT BY KEAYR GRIFFIN 17-35125-SM-3	271.130	000	62.50
				REST PMT BY DON FLESHMAN 17-35412-SM-3	271.130	000	25.00
				REST PMT BY CHRISTINA DUVALL 18-35595-SM-3	271.130	000	15.00
				REST PMT BY AMANDA JARMAN 18-35623-SM-3	271.130	000	126.22
				REST PMT BY BROOKE BRUNK 18-35637-SM-3	271.130	000	94.00
				REST PMT BY MARIAH CHEEK 18-35648-SM-3	271.130	000	152.53
				REST PMT BY TARA MULLETT 18-35795-SM-3	271.130	000	150.00
				CHECK AP 72557 TOTAL FOR FUND 701:			<u>809.65</u>
08/21/2018	AP	72558	WALMART	MCCLURE	271.000	000	25.00
				GERKE	271.000	000	24.50
				CHECK AP 72558 TOTAL FOR FUND 701:			<u>49.50</u>
				Total for fund 701 GENERAL AGENCY			33,571.93
Fund: 704 PAYROLL IMPREST FUND							
08/21/2018	AP	72471*#	BLUE CARE NETWORK	00182055 SEPTEMBER 2018 COURT MEDICAL	231.261	000	2,649.99
				Total for fund 704 PAYROLL IMPREST FUND			2,649.99
			TOTAL - ALL FUNDS				<u>504,303.89</u>

**-INDICATES CHECK DISTRIBUTED TO MORE THAN ONE FUND

*-INDICATES CHECK DISTRIBUTED TO MORE THAN ONE DEPARTMENT

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
CHECK NUMBER 1901

Check Date	Bank	Check #	Payee	Description	GL #	Amount
07/17/2018	AP	1901(E)	CONSUMERS ENERGY	ACCT#1000000278521		** VOIDED **
			TOTAL - ALL FUNDS	TOTAL OF 1 CHECKS (1 voided)		0.00
-- GL TOTALS --			TOTAL		0.00	

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
CHECK NUMBER 72562 - 72564

Check Date	Bank	Check #	Payee	Description	GL #	Amount
08/17/2018	AP	72562	VOID	** VOIDED **		** VOIDED **
08/17/2018	AP	72563	VOID	** VOIDED **		** VOIDED **
08/17/2018	AP	72564	VOID	** VOIDED **		** VOIDED **
			TOTAL - ALL FUNDS	TOTAL OF 3 CHECKS (3 voided)		0.00
— GL TOTALS —			TOTAL		0.00	

OTSEGO COUNTY
Board of Commissioners



Otsego
COUNTY
ESTABLISHED 1875 M I C H I G A N

EXECUTIVE SUMMARY

AGENDA ITEM: August 28, 2018 Warrant	AGENDA DATE: August 28, 2018
AGENDA PLACEMENT: New Business, A. Financials, Item 3	ACTION REQUESTED: Motion to Approve
STAFF CONTACT(S): Tim Hanley, Finance Director/Assistant County Administrator	ATTORNEY REVIEW: No

BACKGROUND/DISCUSSION:

The County issues a check disbursement report (Warrant) every week for County payables as well as occasional unavoidable supplemental warrants. The following warrant will be on the agenda.

The August 28, 2018 warrant is in the amount of \$213,051.93. Major expenditures in the warrant include:

- \$46,675.70 – Blue Care Network – September 2018 premium
- \$45,069.34 – BCBSM – September 2018 premium

RECOMMENDATION:

Staff requests approval of the warrant detailed above with a total amount of \$213,051.93.

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/28/2018 - 08/28/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
08/28/2018	AP	1933(E)	CONSUMERS ENERGY	SEPT 7, 2018 BILLING	637-265-930.620-ALPCT00000	5,638.74
		1933(E)		SEPT 7, 2018 BILLING	637-265-930.620-LNDUS00000	490.61
						6,129.35
08/28/2018	AP	1934(E)	FIRST BANKCARD	ACCT #5477259313594207; 9/7/2018	101-101-704.400	1,775.00
		1934(E)		ACCT #5477259313594207; 9/7/2018	101-101-930.600	78.00
		1934(E)		ACCT #5477259313594207; 9/7/2018	101-131-930.450	220.08
		1934(E)		ACCT #5477259313594207; 9/7/2018	101-131-930.500	454.70
		1934(E)		TREAS ACTIVITY 7/11/18-8/10/18	101-133-726.000	38.04
		1934(E)		TREAS ACTIVITY 7/11/18-8/10/18	101-262-726.000	46.92
		1934(E)		ACCT #5477259313594207; 9/7/2018	101-267-801.020	10.00
		1934(E)		TREAS ACTIVITY 7/11/18-8/10/18	101-267-930.500	240.75
		1934(E)		ACCT #5477259313594207; 9/7/2018	101-268-930.450	165.00
		1934(E)		SHERIFF ACTIVITY 7/11/18 THRU 8/9/18	101-301-726.000	303.04
		1934(E)		SHERIFF ACTIVITY 7/11/18 THRU 8/9/18	101-301-726.050	7.12
		1934(E)		SHERIFF ACTIVITY 7/11/18 THRU 8/9/18	101-302-726.050	7.12
		1934(E)		SHERIFF ACTIVITY 7/11/18 THRU 8/9/18	101-320-704.400	100.00
		1934(E)		SHERIFF ACTIVITY 7/11/18 THRU 8/9/18	101-351-726.000	205.98
		1934(E)		SHERIFF ACTIVITY 7/11/18 THRU 8/9/18	101-351-920.400	7.12
		1934(E)		SHERIFF ACTIVITY 7/11/18 THRU 8/9/18	101-351-970.435	529.00
		1934(E)		SHERIFF ACTIVITY 7/11/18 THRU 8/9/18	205-301-726.050	7.11
		1934(E)		ACCT #5477259313594207; 9/7/2018	209-751-726.050	940.48
		1934(E)		ACCT #5477259313594207; 9/7/2018	645-172-704.400	370.00
		1934(E)		ACCT #5477259313594207; 9/7/2018	645-172-930.600	12.99
1934(E)	ACCT #5477259313594207; 9/7/2018	645-270-726.000	14.98			
						5,533.43
08/28/2018	AP	1935(A)	GARY GELOW	SEPTEMBER 2018 CAA CONTRACT PAYMENT	101-131-801.021	12,302.49
08/28/2018	AP	1936(A)	GAYLORD ARFF INC	AIRPORT CONTRACT AND AFTER HOURS	281-537-940.010	14,217.50
08/28/2018	AP	72565	123NET	INV #389560, DATED 8/1/18	637-265-930.210	1,333.00
08/28/2018	AP	72566	44NORTH	JULY/AUGUST 2018 COBRA/TELADOC/HRA/MEDICARE PART D NOTIC	101-131-704.110	1,188.28
		72566		JULY/AUGUST 2018 COBRA/TELADOC/HRA/MEDICARE PART D NOTIC	101-133-704.110	1.90
		72566		JULY/AUGUST 2018 COBRA/TELADOC/HRA/MEDICARE PART D NOTIC	101-148-704.110	52.05
		72566		JULY/AUGUST 2018 COBRA/TELADOC/HRA/MEDICARE PART D NOTIC	215-141-704.110	312.30
		72566		JULY/AUGUST 2018 COBRA/TELADOC/HRA/MEDICARE PART D NOTIC	292-662-704.110	81.92
						1,636.45
08/28/2018	AP	72567	AMERICAN FIDELITY ASSURANCE CO	AUGUST 2018 FLEX SPENDING ACCOUNT	704-000-231.285	1,069.12
08/28/2018	AP	72568	AMERICAN FIDELITY ASSURANCE COMPANY	AUGUST 2018 CANCER/LIFE/DISABILITY	704-000-231.285	606.61

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/28/2018 - 08/28/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
08/28/2018	AP	72569	ASHLEAH C WILLIAMS	2017 CHARGEBACKS 103-360-005-008-00	516-000-026.021	607.15
08/28/2018	AP	72570	BAGLEY TOWNSHIP	2018 SUMMER TAX FED EX	281-537-940.010	1,227.01
08/28/2018	AP	72571	BENISTAR HARTFORD - 6795	INV #09012018 ACCT#06218 (18)	647-851-704.110	7,405.88
08/28/2018	AP	72572	BLUE CARE NETWORK	INV #182190056540 9/01-9/30/2018	647-851-704.110	46,675.70
08/28/2018	AP	72573	BLUE CROSS BLUE SHIELD OF MICHIGAN	GROUP 007041908 9/1-9/30/18	647-851-704.110	25,069.34
08/28/2018	AP	72574	BONNY MILLER	PER DIEM, TRAVEL AUGUST MEETING	208-752-703.040	50.00
		72574		PER DIEM, TRAVEL AUGUST MEETING	208-752-930.500	20.60
						70.60
08/28/2018	AP	72575	BORDERS, LINSEY & VICKI	CHARGEBACK FOR 2017 PRE WITH THE CORRECT PARCEL OWNER	516-000-026.021	1,352.58
08/28/2018	AP	72576	BRUCE TILLINGER	SERVICES 08/09/18 THRU 08/16/18	249-371-801.027	830.00
		72576		SERVICES 08/09/18 THRU 08/16/18	249-371-801.028	950.00
						1,780.00
08/28/2018	AP	72577	C.F. FICK AND SONS, INC.	DIESEL, GASOLINE	209-751-930.660	1,919.80
08/28/2018	AP	72578	CAROL ROBINSON	2016 CHARGEBACKS 103-240-000-002-00	516-000-026.021	1,740.55
08/28/2018	AP	72579	CATHOLIC HUMAN SERVICES INC	JULY 2018 MENTAL HEALTH COUNSELING	101-133-940.010	245.00
08/28/2018	AP	72580	CCP INDUSTRIES INC	IN02144631 ACID CLEANER// SHOP	588-699-726.050	145.93
08/28/2018	AP	72581	CDW GOVERNMENT INC	MICROSOFT OFFICE STANDARD 2016 LICENSE	215-141-970.440	263.00
08/28/2018	AP	72582	CENTURY LINK	INV# 1447051472; AUG 3, 2018	261-427-930.210	336.08
08/28/2018	AP	72583	CHARLES WILLIAM CASWELL	2016+2017 CHARGEBACKS 103-351-000-017-00	516-000-026.021	1,322.27
08/28/2018	AP	72584	CHOSEN ELECTRIC INCORPORATED	SERVICES 08/02/18 THRU 08/21/18	101-721-801.020	50.00
		72584		SERVICES 08/02/18 THRU 08/21/18	249-371-801.026	3,490.00
						3,540.00
08/28/2018	AP	72585	CHRIS MAHAFFY	#1835 MILEAGE FOR TRAINING	588-699-930.500	105.00
08/28/2018	AP	72586	CITY OF GAYLORD	WATER BILLS DUE 9/10/2018	637-265-920.200-ALPCT00000	508.60
		72586		WATER BILLS DUE 9/10/2018	637-265-920.200-CRTHS00000	697.85
		72586		WATER BILLS DUE 9/10/2018	637-265-920.200-INFO CTR00	38.76
		72586		WATER BILLS DUE 9/10/2018	637-265-920.200-SILLI00000	318.04
						1,563.25

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/28/2018 - 08/28/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
08/28/2018	AP	72587	CRAWFORD COUNTY TREASURER	MAY 2018 TRI-COUNTY EXPENSE	101-131-940.111	12,418.82
		72587		MAY 2018 TRI-COUNTY EXPENSE	215-141-940.111	362.04
		72587		MAY 2018 TRI-COUNTY EXPENSE	269-145-726.210	258.40
						13,039.26
08/28/2018	AP	72588	CUMMINGS, MCCLOREY, DAVIS & ACHO P	INV #250636 & 250637, 7/20/2018	260-270-801.020	3,417.10
		72588		INV #250636 & 250637, 7/20/2018	260-270-801.020-ZONING	248.00
						3,665.10
08/28/2018	AP	72589	CYNTHIA HILLING	AIRPORT FLOWER PURCHASE MULTIPLE RECEIPTS	281-537-726.050	233.28
08/28/2018	AP	72590	DAMIAN MITCHELL	CAMPING REFUND	208-440-652.030	198.00
08/28/2018	AP	72591	DAVE BARAGREY	PER DIEM, TRAVEL AUGUST MEETING	208-752-703.040	50.00
		72591		PER DIEM, TRAVEL AUGUST MEETING	208-752-930.500	3.10
						53.10
08/28/2018	AP	72592	DE LAGE LANDEN PUBLIC FINANCE	INV #60325517, 8/18/2018	101-257-920.410	69.81
		72592		AUGUST 2018 FOC COPY MACHINE LEASE	215-141-920.520	118.58
						188.39
08/28/2018	AP	72593	DE LAGE LANDEN PUBLIC FINANCE	AUGUST 2018 COURT COY MACHINE LEASE PAYMENT	101-131-920.520	130.99
08/28/2018	AP	72594	DEARBORN NATIONAL	EAB2G00106-1M FOR 9/1-9/30/18	704-000-231.870	2,510.02
08/28/2018	AP	72595	DELL MARKETING LP	MONITOR	209-751-726.000	198.79
		72595		FOC POWEREDGE T130 SERVER	215-141-970.440	3,064.20
						3,262.99
08/28/2018	AP	72596	DELTA DENTAL OF MICHIGAN	INV #RIS0001960226, 9/1/18	647-851-704.110	5,647.87
08/28/2018	AP	72597	DELTA DENTAL OF MICHIGAN	0001160001 - SEPTEMBER 2018 COURT DENTAL	101-131-704.110	539.87
		72597		0001160001 - SEPTEMBER 2018 COURT DENTAL	101-148-704.110	116.06
		72597		0001160001 - SEPTEMBER 2018 COURT DENTAL	215-141-704.110	513.76
		72597		0001160001 - SEPTEMBER 2018 COURT DENTAL	292-662-704.110	161.18
		72597		0001160001 - SEPTEMBER 2018 COURT DENTAL	704-000-231.261	334.38
						1,665.25
08/28/2018	AP	72598	DELUXE BUSINESS CHECKS	FOC DEPOSIT BOOKS	215-141-726.000	93.97
08/28/2018	AP	72599	DEREK QUICK	2015-2016 CHARGEBACKS 010-034-100-015-04	516-000-026.021	1,880.95
08/28/2018	AP	72600	DOUG KASSUBA	SET UP FOR H.BARRESI'S NEW DESK; 201806	266-901-970.430	200.00
		72600		INV #201805 8/9/2018	645-270-940.010	300.00

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/28/2018 - 08/28/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
						500.00
08/28/2018	AP	72601	DR MICHAEL MCNAMARA DO	MEDICAL EXAMINER 01/01-12/31/2018	101-648-801.020	10,000.00
08/28/2018	AP	72602	DUNNS	TAPE, WALLET FOLDERS, STAPLE REMOVERS	101-131-726.000	70.37
		72602		CLASP ENVELOPES	101-131-940.010	18.50
		72602		INV# 3603; 8/1/18, MSU EXT.	101-261-726.000	85.47
		72602		ACCT #1738, 8/1/18 887438/887740	101-267-726.000	44.72
		72602		ROAD PATROL SUPPLIES	101-301-726.000	89.85
		72602		ACCT #1738, 8/1/18 887438/887740	101-864-726.000	363.74
		72602		INV# 3603; 8/1/18, MSU EXT.	101-864-920.410	265.44
		72602		ACCT #1738, 8/1/18 887438/887740	212-430-726.000	62.31
		72602		RULED PADS, STAPLES, HIGHLIGHTERS, MARKERS, COLORED PAPE	215-141-726.000	50.37
		72602		ACCT #1738, 8/1/18 887438/887740	249-371-726.000	349.68
		72602		888684-0; FRONT DESK RM 203 & RM 208	266-901-970.430	5,490.06
		72602		ACCT #1738, 8/1/18 887438/887740	281-537-726.000	58.44
		72602		8883050 PAPER CLIPS	588-697-726.000	2,250.75
		72602		ACCT #1738, 8/1/18 887438/887740	645-201-726.000	139.79
						9,339.49
08/28/2018	AP	72603	FRONTIER	ACCT #989-732-2373-030804-5; DUE 8/31/18	637-265-930.210	51.43
08/28/2018	AP	72604	GALLS INC AN ARAMARK CO	010439562	212-430-726.046	140.54
08/28/2018	AP	72605	GAYLORD HERALD TIMES	COURT IN-SERVICE TRAINING NOTICE OF CLOSING	101-131-930.450	41.63
		72605		FOC ANNUAL PUBLICATION	215-141-930.450	109.60
						151.23
08/28/2018	AP	72606	GAYLORD VETERINARY SERVICES	JULY 2018	212-430-930.471	950.62
		72606		JULY 2018	212-430-930.980	1,440.00
						2,390.62
08/28/2018	AP	72607	GENESEE COUNTY MEDICAL EXAMINER	INV #1810305 DATED 8/21/2018	101-648-930.920	1,328.00
08/28/2018	AP	72608	GILL ROYS HARDWARE	SUPPLIES	208-751-726.025	14.36
		72608		SUPPLIES	209-751-726.000	101.97
		72608		SUPPLIES	209-751-726.050	136.35
		72608		AIRPORT MULTIPLE INVOICES	281-537-920.400	67.36
						320.04
08/28/2018	AP	72609	HALL VETERINARY CLINIC	100347 100391	212-430-930.980	158.00
08/28/2018	AP	72610	IMAGE FACTORY INC	44035/43989/43972	209-751-726.046	678.40

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/28/2018 - 08/28/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
08/28/2018	AP	72611	IMPREST CASH, OTSEGO COUNTY BUS SYS	1114, 1115 CLEANING SUPPLIES	588-698-726.025	40.81
08/28/2018	AP	72612	JAMES AND SARAH PRUSAKIEWICZ	2017 CHARGEBACKS 081-100-000-024-00	516-000-026.021	734.01
08/28/2018	AP	72613	JAMES J. PHILLIPS	DEFERMENT HEARING ON 8/14/18	101-131-801.022	75.00
08/28/2018	AP	72614	JAMIE FITAK	SUPPLIES - HEALTHY LIVING COOKING CLASS ON 8/9/18	292-662-726.000	32.91
08/28/2018	AP	72615	JIM WERNIG INC	69-13 INVOICE 23902	101-301-726.050	70.00
08/28/2018	AP	72616	JIM'S ALPINE AUTOMOTIVE	5150 OCBS 1-753826 SHOP	588-699-726.050	19.82
08/28/2018	AP	72617	JIM'S ALPINE AUTOMOTIVE	5150 1-753558; ***1-753572 SHERIFF #69-006	588-699-726.051	148.03
08/28/2018	AP	72618	JOHN JORDAN	#1390 MILEAGE FOR TRAINING	588-699-930.500	50.00
08/28/2018	AP	72619	JUDITH JARECKI	PER DIEM, TRAVEL AUGUST MEETING	208-752-703.040	50.00
		72619		PER DIEM, TRAVEL AUGUST MEETING	208-752-930.500	14.00
						64.00
08/28/2018	AP	72620	JUSTIN WING	PER DIEM, TRAVEL AUGUST MEETING	208-752-703.040	50.00
		72620		PER DIEM, TRAVEL AUGUST MEETING	208-752-930.500	20.70
						70.70
08/28/2018	AP	72621	KAMP OIL INC	HYDROLIC FLUID # 493028	281-537-726.050	102.10
08/28/2018	AP	72622	KERRIE JO DAENZER	GUARDIANSHIP REVIEW ON 8/16/18	101-131-930.500	17.90
		72622		GUARDIANSHIP REVIEW ON 8/16/18	101-131-930.830	30.00
						47.90
08/28/2018	AP	72623	LAKE STATE & SAGINAW BAY RAILWAY CO	INV #122411, 8/22/18	101-101-940.010	250.00
08/28/2018	AP	72624	LARRY KENT	SERVICES 08/08/18 THRU 08/15/18	249-371-801.024	2,250.00
08/28/2018	AP	72625	LINCOLN FINANCIAL	CICOTSEGOC-BL-954784 - SEPTEMBER 2018	101-131-704.140	483.64
		72625		CICOTSEGOC-BL-954784 - SEPTEMBER 2018	101-133-704.140	41.56
		72625		CICOTSEGOC-BL-954784 - SEPTEMBER 2018	215-141-704.140	214.03
		72625		CICOTSEGOC-BL-954784 - SEPTEMBER 2018	292-662-704.140	100.25
						839.48
08/28/2018	AP	72626	LOWES	99003054766	209-751-726.000	86.98
		72626		99003054766	209-751-726.050	370.55
						457.53
08/28/2018	AP	72627	MAKE IT MINE DESIGN	5915	212-430-726.046	55.00

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/28/2018 - 08/28/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
08/28/2018	AP	72628	MAXIMUM SECURITY	INVOICE #15245, DATED 8/1/18	637-265-920.410	89.97
08/28/2018	AP	72629	MICHIGAN MUNICIPAL LEAGUE	INVOICE 17701, 7/31/2018	101-721-930.300	30.54
		72629		INVOICE 17701, 7/31/2018	249-371-930.300	30.54
		72629		INVOICE 17701, 7/31/2018	637-265-930.300	30.54
		72629		INVOICE 17701, 7/31/2018	645-172-930.300	30.54
						122.16
08/28/2018	AP	72630	MICHIGAN STATE POLICE BFS-CASHIERS	JULY SOR FEES	701-000-228.018	60.00
08/28/2018	AP	72631	NETWORKFLEET INC	JULY MONTHLY SERVICE	101-301-920.410	75.80
		72631		JULY MONTHLY SERVICE	101-302-920.410	18.95
		72631		JULY MONTHLY SERVICE	101-334-920.410	18.95
		72631		JULY MONTHLY SERVICE	101-351-920.410	18.95
						132.65
08/28/2018	AP	72632	NORTH COUNTRY COMMUNITY MENTAL HEAL	GROUP CRISIS INTER. & INDIVIDUAL CRISIS INTER. COURSES	101-267-930.983	65.00
08/28/2018	AP	72633	NORTHERN ENERGY, INC	38412 SHOP/ DELO 15W40	588-699-726.050	943.93
08/28/2018	AP	72634	NORTHERN MICHIGAN REVIEW	ADS	208-751-726.000	99.00
		72634		ADS	208-751-930.300	200.00
		72634		ADS	208-752-930.300	299.00
						598.00
08/28/2018	AP	72635	NORTHERN PUMP SERVICE INC	INV # 25444 JET A TRUCK REPAIR	281-537-920.400	759.82
08/28/2018	AP	72636	OMS COMPLIANCE SERVICES INC	PREEMPLOYMENT DRUG TEST INV# 91681	101-253-940.010	80.00
08/28/2018	AP	72637	OTSEGO COUNTY BUS SYSTEM	INVOICE 18-00007945	101-301-726.050	805.93
08/28/2018	AP	72638	OTSEGO COUNTY SHERIFF DEPT	IMPREST CASH	101-301-930.500	24.00
		72638		IMPREST CASH	205-301-726.000	85.00
						109.00
08/28/2018	AP	72639	PAK MAIL CENTERS OF AMERICA	J-16-038-NA TO MI COURT OF APPEALS - HALL OF JUSTICE	101-131-930.450	15.53
08/28/2018	AP	72640	PAY THE BILLS, LLC	FIREWOOD	208-751-726.000	540.00
08/28/2018	AP	72641	PRESQUE ISLE ELECTRIC AND GAS CO-OP	GAS BILL	209-751-930.610	208.54
08/28/2018	AP	72642	QUILL CORPORATION	TONER	215-141-726.000	252.27
08/28/2018	AP	72643	RANDY STULTS	PER DIEM, TRAVEL	208-752-703.040	50.00
		72643		PER DIEM, TRAVEL	208-752-930.500	11.90

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
 CHECK DATE FROM 08/28/2018 - 08/28/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
						61.90
08/28/2018	AP	72644	SAFETY KLEEN	77424062 WASHER SOLVENT	588-699-726.050	248.75
08/28/2018	AP	72645	SCOTT COURTERIER	PER DIEM, TRAVEL AUGUST MEETING	208-752-703.040	50.00
		72645		PER DIEM, TRAVEL AUGUST MEETING	208-752-930.500	6.00
						56.00
08/28/2018	AP	72646	SHEILA SCHMIDT	#1848 MILEAGE FOR TRAINING	588-699-930.500	44.00
08/28/2018	AP	72647	SHOEMAKER, INC.	2646202 AIR FILTERS	588-698-726.025	43.58
08/28/2018	AP	72648	STANDARD ELECTRIC COMPANY	SUPPLIES	208-751-726.050	130.50
		72648		SUPPLIES	209-751-726.000	24.60
						155.10
08/28/2018	AP	72649	STATE OF MICHIGAN	INV 18-001799 ACCT #69-003 2018-08-15	261-427-940.010	500.00
08/28/2018	AP	72650	STEPHIE MARIE JOHNSON	GUARDIANSHIP REVIEW HEARING ON 8/8/18	101-131-930.830	30.00
08/28/2018	AP	72651	TELE-RAD	887164 STOCK	588-699-726.050	357.50
08/28/2018	AP	72652	TENURGY, LLC	INV #OTGO -106 & 107 DATED 7/16/8/14/2018 NATURAL GAS	212-430-930.610	18.36
		72652		INV #OTGO -106 & 107 DATED 7/16/8/14/2018 NATURAL GAS	281-537-930.610	270.66
		72652		INV #OTGO -106 & 107 DATED 7/16/8/14/2018 NATURAL GAS	637-265-930.610-CRTHS00000	2.31
						291.33
08/28/2018	AP	72653	THOMSON WEST	ACCT 1000715367; INV 838748949, 838748948, 838658579	101-267-726.200	431.23
		72653		INV 838643186; ACCT 1000242483; CLEAR INFO CHGS JUL '18	101-268-726.200	197.03
						628.26
08/28/2018	AP	72654	TITLE CHECK LLC	AUGUST PARCEL ADMIN FEES INV# 1808-17	516-253-920.410	2,306.33
08/28/2018	AP	72655	UNEMPLOYMENT CONSULTANTS INC	3RD & 4TH QTR COMP SVC	704-000-228.027	1,400.00
08/28/2018	AP	72656	VERIZON WIRELESS	INV #9812505082 9/2/18	261-427-930.210	299.79
08/28/2018	AP	72657	WASH N GO MANAGEMENT INC	11402	212-430-920.410	10.00
08/28/2018	AP	72658	WEST PAYMENT CENTER	MI CRIMINAL LAWS & RULES 2018	101-131-726.200	208.00
08/28/2018	AP	72659	WILBER AUTOMOTIVE SUPPLY INC	AIRPORT MULTIPLE INVOICES	281-537-920.400	160.32
08/28/2018	AP	72660	WILLIAM HOLEWINSKI	PER DIEM, TRAVEL AUGUST MEETING	208-752-703.040	50.00
		72660		PER DIEM, TRAVEL AUGUST MEETING	208-752-930.500	6.00
						56.00

CHECK DISBURSEMENT REPORT FOR COUNTY OF OTSEGO
CHECK DATE FROM 08/28/2018 - 08/28/2018

Check Date	Bank	Check #	Payee	Description	GL #	Amount
08/28/2018	AP	72661	WILLIAM ZEWATSKI TRUST	2017 CHARGEBACKS 091-135-000-017-01	516-000-026.021	23.63
08/28/2018	AP	72662	WINN TELECOM	989-705-1786 AUGUST	588-697-930.210	257.34
			TOTAL - ALL FUNDS	TOTAL OF 102 CHECKS		213,051.93