

**DECEMBER 26, 2017  
MCLEOD COUNTY  
BOARD MEETING  
WILL BE HELD AT  
THE GLENCOE  
CITY CENTER  
1107 11<sup>TH</sup> STREET E  
GLENCOE, MN**

**McLEOD COUNTY  
BOARD OF COMMISSIONERS  
PROPOSED MEETING AGENDA  
DECEMBER 26, 2017**

**1 9:00 CALL TO ORDER**

**PLEDGE OF ALLEGIANCE**

**2 9:03 CONSIDERATION OF AGENDA ITEMS\***

**3 9:08 CONSENT AGENDA\***

- A. December 15, 2017 Auditor's Warrants.
- B. December 18, 2017 Auditor's Warrants.
- C. December 20, 2017 Auditor's Warrants.
- D. Approve renewal of NSI Auto Store Software for \$8,644 for 2 years. This is software on copy machines that allows scanning and storing of documents.
- E. Approve proposal from AKO Electric, Inc. (Glencoe, MN) for \$7,675 for replacement of outside courthouse lights.
- F. Approve Amendment (Renewal) to PrimeWest Health Behavioral Health Participation Agreement (new rates for Targeted Case Management for Childrens' and Adults' for 2018.
- G. Approve 2018 Children's Mental Health Screening Grant of \$51,937 (split Child Welfare Social Services \$36,189 and Juvenile Justice \$15,749).
- H. Approve State of Minnesota Department of Human Services County Grant Contract for Mobile Mental Health Crisis Response Services.

**4 PAYMENT OF BILLS - COMMISSIONER WARRANT LIST\***

**5 PAYMENT OF BILLS - ADDITIONAL MISCELLANEOUS BILLS TO BE PAID BY AUDITORS WARRANTS\***

**6 9:05 COURT ADMINISTRATION – Administrator Karen Messner**

- A. Consider approval to upgrade the sound system in Courtroom #2 at a cost not to exceed \$28,000 with funding coming from Capital Assets Fund.\*

The County Board of Commissioners tabled this request at their December 19, 2017 meeting to allow more time to review quotes.

**7 9:10 SOIL AND WATER CONSERVATION DISTRICT – District Manager Ryan Freitag**

- A. Consider approval of the following drainage projects:\*

CD #35, Project 112, JD #8 McS, Project 111 and JD #8 McS, Project 113

**8 9:15 AUDITOR-TREASURER – Auditor-Treasurer Cindy Schultz Ford**

- A. Consider approval for removal of beaver as a standard expense of \$50 per beaver to the drainage system affected.\*
- B. Consider approval of re-determination of ditch benefits and damages on County Ditch No. 21.\*

The drainage authority determined that the original benefits or damages do not reflect reasonable present day land values according to Minnesota Statute Chapter 103E, Section 103E.351.

- C. Consider appointment of Ditch Viewers to re-determine benefits and damages.\*

Suggested viewers include: Ron Ringquist of Redwood Falls, John Dotolo of Scandia, Brad Wick of Hutchinson and Allen Kerber of Arlington, who have all worked as Ditch Viewers in McLeod County. Viewers cannot be part of the ditch system nor have an interest in the system.

- D. Consider approval of re-determination of ditch benefits and damages on County Ditch No. 16.\*

The drainage authority determined that the original benefits or damages do not reflect reasonable present day land values according to Minnesota Statute Chapter 103E, Section 103E.351.

- E. Consider appointment of Ditch Viewers to re-determine benefits and damages.\*

Suggested viewers include: Ron Ringquist of Redwood Falls, John Dotolo of Scandia, Brad Wick of Hutchinson and Allen Kerber of Arlington, who have all worked as Ditch Viewers in McLeod County. Viewers cannot be part of the ditch system nor have an interest in the system.

- F. Consider adoption of Resolution 17-CB-43 Sale of Tax Forfeited Land to the City of Brownston for public use in the future.\*

- G. Consider adoption of Resolution 17-CB-44 Sale of Tax Forfeited Land to the City of Stewart for public use to construct a roadway to connect North Street and Mill Street. Parcel 20.067.0170.\*

- H. Consider adoption of Resolution 17-CB-45 Sale of Tax Forfeited Land to the City of Stewart for public use to construct a roadway to connect North Street and Mill Street. Parcel 20.067.0160.\*
- I. Consider adoption of Resolution 17-CB-46 Sale of Tax Forfeited Land to the City of Stewart for public use to construct a roadway to connect North Street and Mill Street. Parcel 20.067.0150.\*
- J. Consider issuing a permit for outdoor fireworks January 13, 2018 from 6:00 p.m. to 9:00 p.m. for Northern Lighter Pyrotechnics Inc., from Forest Lake, MN at the location of 22232 Garden Ave, Silver Lake, MN.\*

An Outdoor Public Fireworks Display Application from Northern Lighter Pyrotechnics of Forest Lake, MN was received to test fireworks from 6:00 p.m. to 9:00 p.m. on January 13, 2018 for a single non-profit event. This fireworks demonstration is to test firework products and provide safety training and would not be open to the public. The fireworks products will not go any higher than 200 feet and the organizers have provided a certificate of insurance. The location for the display is 22232 Garden Ave, Silver Lake, MN on the Mike Mickolich property.

- K. Consider approval of the 2018 Tax Levy and Budget.\*

## **9 COUNTY ADMINISTRATION**

- Review of Commissioners Calendar
- Commissioner reports of committee meetings attended since December 19, 2017.

- A. Considering setting the 2018 elected officials salaries.\*

## **OTHER**

Open Forum  
Press Relations

## **RECESS**

Next board meeting January 2, 2018 at 9:00 a.m. at the Glencoe City Center.

\*\*\*\*\* McLeod County IFS \*\*\*\*\*

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10:05AM

Audit List for Board AUDITOR'S VOUCHERS ENTRIES



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Print List in Order By: 2      1 - Fund (Page Break by Fund)      Page Break By: 1      1 - Page Break by Fund  
2 - Department (Totals by Dept)      2 - Page Break by Dept  
3 - Vendor Number  
4 - Vendor Name

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Paid on Behalf Of Name  
on Audit List?: N

Type of Audit List: D      D - Detailed Audit List  
S - Condensed Audit List

Save Report Options?: N

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1 GENERAL REVENUE FUND

Audit List for Board AUDITOR'S VOUCHERS ENTRIES

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	Vendor Name		Rpt	Warrant Description		Invoice #	Account/Formula Description
	No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
0	DEPT				...		
	1969	SUN LIFE FINANCIAL					
374		01-000-000-0000-2051		380.68	DENTAL PREMIUM 12/01/2017 12/31/2017	C247881 0	DENTAL INSURANCE PAYABLE
375		01-000-000-0000-2054		330.00	DENTAL PREMIUM 12/01/2017 12/31/2017	C247881 0	COBRA DENTAL INSURANCE PAYABLE
	1969	SUN LIFE FINANCIAL		710.68	2 Transactions		
0	DEPT Total:			710.68	...	1 Vendors	2 Transactions
5	DEPT				BOARD OF COUNTY COMMISSIONERS		
	658	MCLEOD PUBLISHING INC					
329		01-005-000-0000-6241		765.00	PRINT 2016 FINANCIAL STATEMENT		PRINTING AND PUBLISHING
	658	MCLEOD PUBLISHING INC		765.00	1 Transactions		
	6412	VERIZON WIRELESS					
310		01-005-000-0000-6203		35.01	CELL PHONE USE 12/03/2017 01/02/2018	58374352-00001 0	COMMUNICATIONS
313		01-005-000-0000-6203		35.01	I PAD USE 12/03/2017 01/02/2018	58374352-00001 0	COMMUNICATIONS
316		01-005-000-0000-6203		35.01	CELL PHONE USE 12/03/2017 01/02/2018	58374352-00001 0	COMMUNICATIONS
319		01-005-000-0000-6203		22.86	MACHINE ACTIVITY 12/03/2017 01/02/2018	58374352-00001 0	COMMUNICATIONS
	6412	VERIZON WIRELESS		127.89	4 Transactions		
5	DEPT Total:			892.89	BOARD OF COUNTY COMMISSIONERS	2 Vendors	5 Transactions
13	DEPT				COURT ADMINISTRATOR'S		
	812	GAVIN WINTERS DONLEY & OSTLUND LT					
175		01-013-000-0000-6272		487.50	COURT APPT AP/RJ JV-16-140	20160222-000M	COURT APPT ATTY-DEP/NEG/TER
173		01-013-000-0000-6272		146.25	COURT APPT MA/NP JV-16-175	20160256-000M	COURT APPT ATTY-DEP/NEG/TER
169		01-013-000-0000-6272		37.50	COURT APPT AS/TS JV-16-176	20160274-000M	COURT APPT ATTY-DEP/NEG/TER
177		01-013-000-0000-6272		150.00	COURT APPT MH/JH JV-17-172	20170004-000M	COURT APPT ATTY-DEP/NEG/TER
171		01-013-000-0000-6272		75.00	COURT APPT JR/NR JV-17-6	20170009-000M	COURT APPT ATTY-DEP/NEG/TER
179		01-013-000-0000-6272		82.50	COURT APPT MK/MN/LK/JH JV-17-5	20170010-000M	COURT APPT ATTY-DEP/NEG/TER
174		01-013-000-0000-6272		101.25	COURT APPT BQ/LQ JV-17-46	20170053-000M	COURT APPT ATTY-DEP/NEG/TER
180		01-013-000-0000-6273		15.00	COURT APPT DB PR-17-437	20170075-000M	COURT APPT ATTY-OTHER

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<u>No.</u>	<u>Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
167	01-013-000-0000-6272		195.00	COURT APPT AC/JS JV-17-67	20170098-000M	COURT APPT ATTY-DEP/NEG/TER
181	01-013-000-0000-6273		18.75	COURT APPT NR PR-17-760	20170111-000M	COURT APPT ATTY-OTHER
176	01-013-000-0000-6272		30.00	COURT APPT RM/PF/DM JV-15-92	20170161-000M	COURT APPT ATTY-DEP/NEG/TER
178	01-013-000-0000-6272		18.75	COURT APPT BE/BP JV-17-136	20170165-001M	COURT APPT ATTY-DEP/NEG/TER
168	01-013-000-0000-6272		131.25	COURT APPT MT/EB JV-17-62	20170190-000M	COURT APPT ATTY-DEP/NEG/TER
170	01-013-000-0000-6272		26.25	COURT APPT GS/JS JV-16-225	20170227-000M	COURT APPT ATTY-DEP/NEG/TER
164	01-013-000-0000-6272		262.50	COURT APPT EB/DJ JV-17-235	20170242-000M	COURT APPT ATTY-DEP/NEG/TER
163	01-013-000-0000-6272		101.25	COURT APPT KR/RB/SS JV-16-227	20170258-000M	COURT APPT ATTY-DEP/NEG/TER
183	01-013-000-0000-6273		187.50	COURT APPT JR PR-17-1818	20170266-000M	COURT APPT ATTY-OTHER
165	01-013-000-0000-6272		150.00	COURT APPT BH/NC JV-17-256	20170271-000M	COURT APPT ATTY-DEP/NEG/TER
182	01-013-000-0000-6273		202.50	COURT APPT DC PR-17-1861	20170272-000M	COURT APPT ATTY-OTHER
166	01-013-000-0000-6272		393.75	COURT APPT JB/DB/LK JV-17-247	20170275-000M	COURT APPT ATTY-DEP/NEG/TER
172	01-013-000-0000-6272		266.25	COURT APPT AS/JJ/DB JV-16-209	20170298-000M	COURT APPT ATTY-DEP/NEG/TER
812	GAVIN WINTERS DONLEY & OSTLUND LT		3,078.75	21 Transactions		
13	DEPT Total:		3,078.75	COURT ADMINISTRATOR'S	1 Vendors	21 Transactions
31	DEPT			COUNTY ADMINISTRATOR'S		
137	HUTCHINSON LEADER					
325	01-031-000-0000-6241		383.26	ADV HELP WANTED	1117363597	PRINTING AND PUBLISHING
137	HUTCHINSON LEADER		383.26	1 Transactions		
10515	TOTAL COMPLIANCE SOLUTIONS INC					
337	01-031-000-0000-6350		118.00	PRE-EMP/RAND D & A TEST	54403	OTHER SERVICES & CHARGES
10515	TOTAL COMPLIANCE SOLUTIONS INC		118.00	1 Transactions		
31	DEPT Total:		501.26	COUNTY ADMINISTRATOR'S	2 Vendors	2 Transactions
41	DEPT			COUNTY AUDITOR-TREASURER'S		
658	MCLEOD PUBLISHING INC					
326	01-041-000-0000-6241		47.13	AG TAX REMINDER		PRINTING AND PUBLISHING
				11/01/2017 11/01/2017	0	
327	01-041-000-0000-6241		47.13	AG TAX REMINDER		PRINTING AND PUBLISHING
				11/08/2017 11/08/2017	0	
658	MCLEOD PUBLISHING INC		94.26	2 Transactions		
41	DEPT Total:		94.26	COUNTY AUDITOR-TREASURER'S	1 Vendors	2 Transactions

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	Vendor Name	Rpt		Warrant Description	Invoice #	Account/Formula Description
	No. Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
65	DEPT			INFORMATION TECHNOLOGY		
	984 MN OFFICE OF ENTERPRISE TECHNOLOG					
224	01-065-000-0000-6321		1,700.00	MNET COLLAB & HATS	DV17110455	MAINTENANCE AGREEMENTS
				11/01/2017 11/30/2017	0	
	984 MN OFFICE OF ENTERPRISE TECHNOLOG		1,700.00	1 Transactions		
	6412 VERIZON WIRELESS					
305	01-065-000-0000-6203		176.43	CELL PHONE USE	58374352-00001	COMMUNICATIONS
				12/03/2017 01/02/2018	0	
	6412 VERIZON WIRELESS		176.43	1 Transactions		
65	DEPT Total:		1,876.43	INFORMATION TECHNOLOGY	2 Vendors	2 Transactions
76	DEPT			CENTRAL SERVICES-COUNTY WIDE		
	576 FINKEN WATER CENTERS					
60	01-076-000-0000-6350		203.50	WATER COOLER RENTAL	0401513	OTHER SERVICES & CHARGES
				12/01/2017 12/31/2017	0	
	576 FINKEN WATER CENTERS		203.50	1 Transactions		
	1857 METRO SALES INC					
210	01-076-000-0000-6321		312.00	COPIER MAINT RICOH2020D-VSO	INV9545965	MAINTENANCE AGREEMENTS
213	01-076-000-0000-6321		1,923.62	COPIER MAINT MPC5501-PH	INV956006	MAINTENANCE AGREEMENTS
212	01-076-000-0000-6321		429.23	COPIER MAINT RICOH MPC5501-CS	INV956007	MAINTENANCE AGREEMENTS
211	01-076-000-0000-6321		612.78	COPIER MAINT RICOH MC5501-SO	INV956008	MAINTENANCE AGREEMENTS
	1857 METRO SALES INC		3,277.63	4 Transactions		
	49020 NEOPOST USA INC					
228	01-076-000-0000-6402		385.00	POSTAL MACHINE SERVICE	1001781	OFFICE SUPPLIES
227	01-076-000-0000-6402		280.00	POSTAL MACHINE SUPPLIES INK	15272269	OFFICE SUPPLIES
	49020 NEOPOST USA INC		665.00	2 Transactions		
	63420 SPEE DEE DELIVERY					
255	01-076-000-0000-6205		68.38	SPEEDEE CHARGES	3418116	POSTAGE AND POSTAL BOX RENTAL
				11/01/2017 11/30/2017	0	
	63420 SPEE DEE DELIVERY		68.38	1 Transactions		
76	DEPT Total:		4,214.51	CENTRAL SERVICES-COUNTY WIDE	4 Vendors	8 Transactions

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	<u>No. Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
91	DEPT			COUNTY ATTORNEY'S		
	60963 SEVEN COUNTY PROCESS SERVERS LLC					
333	01-091-000-0000-6350		55.00	SVC OF DOC	20171937	OTHER SERVICES & CHARGES
334	01-091-000-0000-6350		55.00	SVC OF DOC	20171938	OTHER SERVICES & CHARGES
335	01-091-000-0000-6350		15.00	SVC OF DOC	20171946	OTHER SERVICES & CHARGES
	60963 SEVEN COUNTY PROCESS SERVERS LLC		125.00	3 Transactions		
	79 SIBLEY COUNTY SHERIFF					
252	01-091-000-0000-6350		100.00	SVC OF DOC	1641	OTHER SERVICES & CHARGES
	79 SIBLEY COUNTY SHERIFF		100.00	1 Transactions		
91	DEPT Total:		225.00	COUNTY ATTORNEY'S	2 Vendors	4 Transactions
101	DEPT			COUNTY RECORDER'S		
	3791 ACCESS					
342	01-101-000-0000-6350		1,910.99	VAULT STORAGE FOR MICROFILM	2352270	OTHER SERVICES & CHARGES
343	01-101-000-0000-6350		779.41-	CREDIT	2352270	OTHER SERVICES & CHARGES
	3791 ACCESS		1,131.58	2 Transactions		
	6009 INNOVATIVE OFFICE SOLUTIONS LLC					
120	01-101-000-0000-6402		108.24	POST ITS/TONER/CALENDARS	IN1850220	OFFICE SUPPLIES
	6009 INNOVATIVE OFFICE SOLUTIONS LLC		108.24	1 Transactions		
101	DEPT Total:		1,239.82	COUNTY RECORDER'S	2 Vendors	3 Transactions
103	DEPT			COUNTY ASSESSOR'S		
	1930 HERALD JOURNAL PUBLISHING INC					
91	01-103-000-0000-6450		189.60	NOTICE TO HOMESTEAD PROPERTY		SUBSCRIPTIONS
	1930 HERALD JOURNAL PUBLISHING INC		189.60	1 Transactions		
	658 MCLEOD PUBLISHING INC					
194	01-103-000-0000-6450		46.31	HOMESTEAD AD IN PAPER		SUBSCRIPTIONS
	658 MCLEOD PUBLISHING INC		46.31	1 Transactions		
103	DEPT Total:		235.91	COUNTY ASSESSOR'S	2 Vendors	2 Transactions
107	DEPT			COUNTY PLANNING AND ZONING		
	137 HUTCHINSON LEADER					

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<u>Vendor Name</u>		<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>	
<u>No.</u>	<u>Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
102	01-107-000-0000-6241		37.84	LGL PUBL (BOA)	1117300846	PRINTING AND PUBLISHING
	137 HUTCHINSON LEADER		37.84	1 Transactions		
	658 MCLEOD PUBLISHING INC					
195	01-107-000-0000-6241		58.51	LGL PUBL (BOA)		PRINTING AND PUBLISHING
	658 MCLEOD PUBLISHING INC		58.51	1 Transactions		
107	DEPT Total:		96.35	COUNTY PLANNING AND ZONING	2 Vendors	2 Transactions
111	DEPT			COURTHOUSE BUILDING		
	8187 G & K SERVICES					
64	01-111-000-0000-6415		20.42	CLEANING SUPPLIES	6043103218	CLEANING SUPPLIES
65	01-111-000-0000-6415		20.42	CLEANING SUPPLIES	6043114678	CLEANING SUPPLIES
66	01-111-000-0000-6415		18.27	CLEANING SUPPLIES	6043126231	CLEANING SUPPLIES
63	01-111-000-0000-6415		20.42	CLEANING SUPPLIES	6043891817	CLEANING SUPPLIES
	8187 G & K SERVICES		79.53	4 Transactions		
	2469 SAMS CLUB					
247	01-111-000-0000-6415		32.54	DISINFECTING WIPES	60460020317553	CLEANING SUPPLIES
250	01-111-000-0000-6425		272.35	NEW TRACH CANS	60460020317553	REPAIR AND MAINTENANCE SUPPLIES
	2469 SAMS CLUB		304.89	2 Transactions		
	6412 VERIZON WIRELESS					
306	01-111-000-0000-6203		22.03	CELL PHONE USE	58374352-00001	COMMUNICATIONS
				12/03/2017 01/02/2018	0	
	6412 VERIZON WIRELESS		22.03	1 Transactions		
	4147 WEST CENTRAL SANITATION INC					
276	01-111-000-0000-6257		240.47	8 YARD ROLL SERVICE	11067994	SEWER, WATER AND GARBAGE
				11/01/2017 11/30/2017	0	
	4147 WEST CENTRAL SANITATION INC		240.47	1 Transactions		
111	DEPT Total:		646.92	COURTHOUSE BUILDING	4 Vendors	8 Transactions
112	DEPT			NORTH COMPLEX BUILDING		
	539 CENTERPOINT ENERGY, INC.					
17	01-112-000-0000-6255		413.00	GAS BILL NC	5987110-3	NATURAL GAS
				11/03/2017 12/05/2017	0	

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Vendor	Name	Rpt	Warrant Description	Invoice #	Account/Formula Description	
No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
539	CENTERPOINT ENERGY, INC.		413.00	1 Transactions		
2469	SAMS CLUB					
248	01-112-000-0000-6415		32.54	DISINFECTING WIPES	60460020317553	CLEANING SUPPLIES
2469	SAMS CLUB		32.54	1 Transactions		
4147	WEST CENTRAL SANITATION INC					
277	01-112-000-0000-6257		86.32	GARBAGE REMOVAL	11067993	SEWER, WATER AND GARBAGE
				11/01/2017 11/30/2017	0	
4147	WEST CENTRAL SANITATION INC		86.32	1 Transactions		
112	DEPT Total:		531.86	NORTH COMPLEX BUILDING	3 Vendors	3 Transactions
116	DEPT			HEALTH AND HUMAN SERVICES BUILDII		
539	CENTERPOINT ENERGY, INC.					
18	01-116-000-0000-6255		1,551.56	GAS BILL HHS	6008184-1	NATURAL GAS
				11/03/2017 12/05/2017	0	
19	01-116-000-0000-6255		153.63	GAS BILL ANNEX	7484082-8	NATURAL GAS
				11/03/2017 12/05/2017	0	
539	CENTERPOINT ENERGY, INC.		1,705.19	2 Transactions		
2469	SAMS CLUB					
249	01-116-000-0000-6415		32.54	DISINFECTING WIPES	60460020317553	CLEANING SUPPLIES
2469	SAMS CLUB		32.54	1 Transactions		
4147	WEST CENTRAL SANITATION INC					
275	01-116-000-0000-6257		172.65	2 YARD ROLL SERVICE	11067992	SEWER, WATER AND GARGABE REMOVAL
				11/01/2017 11/30/2017	0	
4147	WEST CENTRAL SANITATION INC		172.65	1 Transactions		
116	DEPT Total:		1,910.38	HEALTH AND HUMAN SERVICES BUILI	3 Vendors	4 Transactions
117	DEPT			FAIRGROUNDS		
4316	ACTIVE NETWORK LLC					
2	01-117-000-0000-6350		2,019.94	CAMPING RESERVATION SYSTEM	4100158427	OTHER SERVICES & CHARGES
				12/01/2017 11/30/2018	0	
4316	ACTIVE NETWORK LLC		2,019.94	1 Transactions		

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No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
134	CITY OF HUTCHINSON				
321	01-117-000-0000-6257	147.75	WATER SEWER GARBAGE	13008200300	SEWER, WATER AND GARBAGE REMOVAL
			11/01/2017 11/30/2017	0	
322	01-117-000-0000-6257	563.94	WATER SEWER GARBAGE	13008600400	SEWER, WATER AND GARBAGE REMOVAL
			11/01/2017 11/30/2017	0	
323	01-117-000-0000-6257	182.65	WATER SEWER GARBAGE	13008601200	SEWER, WATER AND GARBAGE REMOVAL
			11/01/2017 11/30/2017	0	
324	01-117-000-0000-6257	42.23	WATER SEWER GARBAGE	13008602000	SEWER, WATER AND GARBAGE REMOVAL
			11/01/2017 11/30/2017	0	
134	CITY OF HUTCHINSON	936.57	4 Transactions		
651	COMMISSIONER OF REVENUE				
358	01-117-000-0000-6402	9.00	NOVEMBER USE TAX		OFFICE SUPPLIES
			11/01/2017 11/30/2017	0	
359	01-117-000-0000-6425	1.00	NOVEMBER USE TAX		REPAIR AND MAINTENANCE SUPPLIES
			11/01/2017 11/30/2017	0	
360	01-117-000-0000-6612	288.00	NOVEMBER USE TAX		CAPITAL - \$100-\$5,000 (INVENTORY)
			11/01/2017 11/30/2017	0	
651	COMMISSIONER OF REVENUE	298.00	3 Transactions		
136	HUTCHINSON CO-OP				
96	01-117-000-0000-6455	4.94-	CREDIT	588131	MOTOR FUELS AND LUBRICATION
95	01-117-000-0000-6455	30.00	GAS	875154	MOTOR FUELS AND LUBRICATION
136	HUTCHINSON CO-OP	25.06	2 Transactions		
32875	HUTCHINSON UTILITIES COMMISSION				
110	01-117-000-0000-6253	10.74	ELECTRIC 898 CENTURY AVE SW	436962-045052	ELECTRICITY
			11/01/2017 12/01/2017	0	
104	01-117-000-0000-6253	722.36	ELECTRIC GRANDSTAND	436972-045045	ELECTRICITY
			10/31/2017 12/01/2017	0	
105	01-117-000-0000-6253	1,093.63	ELECTRIC ADMIN BUILDING	436973-045045	ELECTRICITY
			11/01/2017 12/01/2017	0	
106	01-117-000-0000-6253	509.50	ELETRIC AGRIBITION	436974-045045	ELECTRICITY
			11/01/2017 12/01/2017	0	
113	01-117-000-0000-6255	1,342.06	GAS AGRIBITION	436974-045045	NATURAL GAS
			11/01/2017 12/01/2017	0	
107	01-117-000-0000-6253	251.33	ELECTRIC FAIRGROUNDS	436975-045045	ELECTRICITY
			11/01/2017 12/01/2017	0	
108	01-117-000-0000-6253	29.27	ELECTRIC MAINT BUILDING	436976-045045	ELECTRICITY

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No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
114	01-117-000-0000-6255	83.56	11/01/2017 12/01/2017 GAS MAINT BUUILDING	0 436976-045045	NATURAL GAS
115	01-117-000-0000-6255	1,848.73	11/01/2017 12/01/2017 GAS FAIRGROUNDS	0 436978-045045	NATURAL GAS
111	01-117-000-0000-6253	385.05	11/01/2017 12/01/2017 ELECTRIC 820 CENTURY AVE SW	0 436979-045045	ELECTRICITY
116	01-117-000-0000-6255	107.60	11/01/2017 12/01/2017 GAS 820 CENTURY AVE SE	0 436979-045045	NATURAL GAS
109	01-117-000-0000-6253	39.56	11/01/2017 12/01/2017 ELECTRIC SIGN	0 436981-045045	ELECTRICITY
112	01-117-000-0000-6253	74.59	11/01/2017 12/01/2017 ELECTRIC 816 CENTURY AVE SW	0 437020-045045	ELECTRICITY
32875	HUTCHINSON UTILITIES COMMISSION	6,497.98	11/01/2017 12/01/2017 13 Transactions	0	
119	142 HUTCHINSON WHOLESALE SUPPLY COMI 01-117-000-0000-6425	9.65	RELAY	315051	REPAIR AND MAINTENANCE SUPPLIES
	142 HUTCHINSON WHOLESALE SUPPLY COMI	9.65	1 Transactions		
239	268 QUADE ELECTRIC INC 01-117-000-0000-6425	138.00	LIGHT BULBS	95618	REPAIR AND MAINTENANCE SUPPLIES
	268 QUADE ELECTRIC INC	138.00	1 Transactions		
117	DEPT Total:	9,925.20	FAIRGROUNDS	7 Vendors	25 Transactions
121	DEPT		VETERAN SERVICES		
	6009 INNOVATIVE OFFICE SOLUTIONS LLC				
121	01-121-000-0000-6402	23.64	OFFICE SUPPLIES	IN1850184	OFFICE SUPPLIES
	6009 INNOVATIVE OFFICE SOLUTIONS LLC	23.64	1 Transactions		
	6412 VERIZON WIRELESS				
307	01-121-000-0000-6203	29.27	CELL PHONE USE	58374352-00001	COMMUNICATIONS
	6412 VERIZON WIRELESS	29.27	12/03/2017 01/02/2018 1 Transactions	0	
121	DEPT Total:	52.91	VETERAN SERVICES	2 Vendors	2 Transactions
201	DEPT		COUNTY SHERIFF'S OFFICE		

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No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
3	4297 ADVANCED GUNSLINGER ARMAMENT					
	01-201-000-0000-6457		125.00	RIFLE SLING & ATTACHMENTS	S12268	ERU EXPENSES
	4297 ADVANCED GUNSLINGER ARMAMENT		125.00	1 Transactions		
4	1424 ALPHA WIRELESS COMMUNICATIONS					
	01-201-000-0000-6321		2,487.75	EQUIPMENT MAINTENANCE	692919	MAINTENANCE AGREEMENTS
				12/01/2017 01/01/2018	0	
	1424 ALPHA WIRELESS COMMUNICATIONS		2,487.75	1 Transactions		
5	135 ATCO INTERNATIONAL					
	01-201-000-0000-6402		124.00	QUICK SAN II	I0498309	OFFICE SUPPLIES
	135 ATCO INTERNATIONAL		124.00	1 Transactions		
6	604 B & B TIRE AND AUTO REPAIR LLC					
	01-201-000-0000-6327		32.30	#150 O/C	13190	GENERAL AUTO MAINTENANCE
7	01-201-000-0000-6327		34.53	#156 O/C	13192	GENERAL AUTO MAINTENANCE
	604 B & B TIRE AND AUTO REPAIR LLC		66.83	2 Transactions		
15	2748 CDW GOVERNMENT INC					
	01-201-000-0000-6612		565.00	DOCKING STATION #150	KXH7671	CAPITAL - \$100-\$5,000 (INVENTORY)
16	01-201-000-0000-6612		565.00	DOCKING STATION SPARE	KXK4684	CAPITAL - \$100-\$5,000 (INVENTORY)
	2748 CDW GOVERNMENT INC		1,130.00	2 Transactions		
24	134 CITY OF HUTCHINSON					
	01-201-000-0000-6455		184.01	FUEL	0000042421	MOTOR FUELS AND LUBRICATION
				11/01/2017 11/30/2017	0	
	134 CITY OF HUTCHINSON		184.01	1 Transactions		
303	5270 DRIVER & VEHICLE SERVICES					
	01-201-000-0000-6327		11.00	#110 LICENSE PLATE FEE	C07307366	GENERAL AUTO MAINTENANCE
	5270 DRIVER & VEHICLE SERVICES		11.00	1 Transactions		
89	5863 HENNEPIN COUNTY MEDICAL CENTER					
	01-201-000-0000-6262		1,200.00	LH SARS 17015520 HPD	53265	COSTS OF MEDICAL EXAMINATION MS 6
	5863 HENNEPIN COUNTY MEDICAL CENTER		1,200.00	1 Transactions		
124	6009 INNOVATIVE OFFICE SOLUTIONS LLC					
	01-201-000-0000-6402		11.35	OFFICE SUPPLIES	IN1841858	OFFICE SUPPLIES

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6009	INNOVATIVE OFFICE SOLUTIONS LLC		11.35	1 Transactions		
1129	KDUZ AM KARP FM RADIO					
141	01-201-000-0000-6241		78.00	HOLIDAY GREETINGS	36382-1	PRINTING AND PUBLISHING
142	01-201-000-0000-6241		111.00	HOLIDAY GREETINGS	36524-1	PRINTING AND PUBLISHING
140	01-201-000-0000-6241		41.00	HOLIDAY GREETINGS	36624-1	PRINTING AND PUBLISHING
1129	KDUZ AM KARP FM RADIO		230.00	3 Transactions		
1502	KEEPRS INC					
148	01-201-000-0000-6145		75.37	INITIAL UNIFORM-K HILDREMYR	362857	UNIFORM ALLOWANCE
149	01-201-000-0000-6145		136.01	INITIAL UNIFORM-K HILDREMYR	362857-01	UNIFORM ALLOWANCE
145	01-201-000-0000-6145		123.40	INITIAL UNIFORM-J GRAUPMANN	362900	UNIFORM ALLOWANCE
146	01-201-000-0000-6145		4.50	INITIAL UNIFORM-J GRAUPMANN	362900-01	UNIFORM ALLOWANCE
147	01-201-000-0000-6145		152.00	INITIAL UNIFORM-J GRAUPMANN	362900-02	UNIFORM ALLOWANCE
1502	KEEPRS INC		491.28	5 Transactions		
162	KEVINS AUTO SERVICE INC					
151	01-201-000-0000-6327		36.24	#168 O/C	29639	GENERAL AUTO MAINTENANCE
152	01-201-000-0000-6327		35.94	#163 O/C	29677	GENERAL AUTO MAINTENANCE
153	01-201-000-0000-6327		61.66	#153 O/C	29686	GENERAL AUTO MAINTENANCE
154	01-201-000-0000-6327		876.88	#153 FRONT & REAR BRAKES	29721	GENERAL AUTO MAINTENANCE
155	01-201-000-0000-6324		145.00	ICR 17-12560 TOW	29767	TOWING
162	KEVINS AUTO SERVICE INC		1,155.72	5 Transactions		
6443	KWIK TRIP INC					
158	01-201-000-0000-6327		22.50	CAR WASHES	111417	GENERAL AUTO MAINTENANCE
				11/01/2017 11/30/2017	0	
159	01-201-000-0000-6327		22.50	CAR WASHES	112117	GENERAL AUTO MAINTENANCE
				11/01/2017 11/30/2017	0	
6443	KWIK TRIP INC		45.00	2 Transactions		
1947	MINNESOTA DEPARTMENT OF TRANSPC					
226	01-201-000-0000-6321		400.00	FACILITY USE AGREEMENT	00000053056	MAINTENANCE AGREEMENTS
1947	MINNESOTA DEPARTMENT OF TRANSPC		400.00	1 Transactions		
4275	MINNESOTA SHERIFFS ASSN					
225	01-201-204-0000-6336		120.00	ADVANCED GUN LAW-GRONLUND	154600	MEALS, LODGING, PARKING & MISCELLAN
4275	MINNESOTA SHERIFFS ASSN		120.00	1 Transactions		

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1457	PRO AUTO & TRANSMISSION REPAIR INC					
236	01-201-000-0000-6327		88.50	#158 MNT & BAL TIRES	3066611	GENERAL AUTO MAINTENANCE
237	01-201-000-0000-6327		212.64	#161 BATTERY	3066616	GENERAL AUTO MAINTENANCE
1457	PRO AUTO & TRANSMISSION REPAIR INC		301.14	2 Transactions		
7821	SIRCHIE FINGER PRINT LABORATORIES					
254	01-201-204-0000-6402		201.18	EVIDENCE BAGS & SCALPELS	0326528-IN	INVESTIGATIONS OFFICE SUPPLIES
7821	SIRCHIE FINGER PRINT LABORATORIES		201.18	1 Transactions		
3752	STAR GROUP LLC					
258	01-201-000-0000-6402		19.35	TOOLS	972269	OFFICE SUPPLIES
259	01-201-000-0000-6327		13.49	HEADLIGHT BULB #148	975111	GENERAL AUTO MAINTENANCE
3752	STAR GROUP LLC		32.84	2 Transactions		
4274	SUBURBAN TIRE WHOLESALE INC					
263	01-201-000-0000-6327		570.20	245/55R18 V EAGLE UG GW3 #158	10150430	GENERAL AUTO MAINTENANCE
4274	SUBURBAN TIRE WHOLESALE INC		570.20	1 Transactions		
2579	TRANS UNION LLC					
268	01-201-000-0000-6265		11.65	CREDIT REPORT-RM	11708949	PROFESSIONAL SERVICES
2579	TRANS UNION LLC		11.65	1 Transactions		
2342	TRANSUNION RISK & ALTERNATIVE					
269	01-201-000-0000-6265		25.00	DATA PERSON SEARCH	545393	PROFESSIONAL SERVICES
2342	TRANSUNION RISK & ALTERNATIVE		25.00	1 Transactions		
1083	WEX BANK					
281	01-201-000-0000-6455		6,499.32	FUEL	52207689	MOTOR FUELS AND LUBRICATION
				11/01/2017 11/30/2017	0	
1083	WEX BANK		6,499.32	1 Transactions		
201	DEPT Total:		15,423.27	COUNTY SHERIFF'S OFFICE	22 Vendors	37 Transactions
251	DEPT			COUNTY JAIL		
3510	BOB BARKER COMPANY INC					
9	01-251-000-0000-6461		783.67	PRINTED SWEATSHIRTS	UT1000439873	INMATE SUPPLIES
10	01-251-000-0000-6461		321.33	THERMALS & SOAP	WEB000513502	INMATE SUPPLIES
11	01-251-000-0000-6461		137.42	SHAMPOO	WEB000513850	INMATE SUPPLIES

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No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
3510	BOB BARKER COMPANY INC		1,242.42	3 Transactions	
58	4556 DRAIN PROS INC				
	01-251-000-0000-6303		150.00	TOILET PLUGGED F-3	REPAIR AND MAINTENANCE SERVICES
				11/21/2017 11/21/2017 0	
	4556 DRAIN PROS INC		150.00	1 Transactions	
304	5270 DRIVER & VEHICLE SERVICES				
	01-251-000-0000-6327		11.00	#144 LICENSE PLATE FEE	GENERAL AUTO MAINTENANCE
	5270 DRIVER & VEHICLE SERVICES		11.00	1 Transactions	
90	4158 HP INC				
	01-251-000-0000-6612		424.00	PRINTER CLERICAL	CAPITAL - \$100-\$5,000 (INVENTORY)
	4158 HP INC		424.00	1 Transactions	
233	743 PLUNKETTS PEST CONTROL INC				
	01-251-000-0000-6321		67.49	GENERAL PEST CONTROL	MAINTENANCE AGREEMENTS
	743 PLUNKETTS PEST CONTROL INC		67.49	1 Transactions	
251	61660 SHOPKO LLC				
	01-251-000-0000-6268		38.45	LAUNDRY DETERGENT	MEDICAL AID TO PRISONERS
	61660 SHOPKO LLC		38.45	1 Transactions	
264	1470 THRIFTY WHITE PHARMACY				
	01-251-000-0000-6268		267.19	JAIL STOCK MEDS	MEDICAL AID TO PRISONERS
	1470 THRIFTY WHITE PHARMACY		267.19	1 Transactions	
308	6412 VERIZON WIRELESS				
	01-251-000-0000-6203		25.50	CELL PHONE USE	COMMUNICATIONS
				12/03/2017 01/02/2018 0	
	6412 VERIZON WIRELESS		25.50	1 Transactions	
282	1083 WEX BANK				
	01-251-000-0000-6455		601.46	FUEL	MOTOR FUELS AND LUBRICATION
				11/01/2017 11/30/2017 0	
	1083 WEX BANK		601.46	1 Transactions	
251	DEPT Total:		2,827.51	COUNTY JAIL	9 Vendors 11 Transactions

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255	DEPT		COUNTY COURT SERVICES		
8564	OFFICE DEPOT INC				
232	01-255-000-0000-6402	165.15	OFFICE SUPPLIES	9846429680017	OFFICE SUPPLIES
231	01-255-000-0000-6402	39.99	OFFICE SUPPLIES	9846442160013	OFFICE SUPPLIES
330	01-255-000-0000-6402	54.34	OFFICE SUPPLIES	9868116820011	OFFICE SUPPLIES
8564	OFFICE DEPOT INC	259.48	3 Transactions		
255	DEPT Total:	259.48	COUNTY COURT SERVICES	1 Vendors	3 Transactions
281	DEPT		EMERGENCY MANAGEMENT		
6009	INNOVATIVE OFFICE SOLUTIONS LLC				
123	01-281-000-0000-6402	55.28	OFFICE SUPPLIES	IN1841858	OFFICE SUPPLIES
122	01-281-000-0000-6402	320.73	OFFICE SUPPLIES	IN1852988	OFFICE SUPPLIES
6009	INNOVATIVE OFFICE SOLUTIONS LLC	376.01	2 Transactions		
281	DEPT Total:	376.01	EMERGENCY MANAGEMENT	1 Vendors	2 Transactions
485	DEPT		COUNTY PUBLIC HEALTH NURSING		
52052	GOLDEN TONGUE CONSULTANTS INC				
86	01-485-000-0000-6269	1,387.80	45 HRS NOV @ \$30.84		CONTRACTS
87	01-485-000-0000-6335	40.60	116 MILEAGE NOV		MILEAGE EXPENSE
52052	GOLDEN TONGUE CONSULTANTS INC	1,428.40	2 Transactions		
3763	KUNZE/DAVID				
157	01-485-490-0000-6047	240.64	CHORE SERVICES	ID#824989.01	CHORE SERVICES
			09/04/2017	11/16/2017	0
3763	KUNZE/DAVID	240.64	1 Transactions		
38530	LANGUAGE LINE SERVICES				
160	01-485-000-0000-6265	18.20	SPANISH (DOT)		PROFESSIONAL SERVICES
			11/01/2017	11/30/2017	0
161	01-485-000-0000-6265	8.40	SPANISH (CTC)		PROFESSIONAL SERVICES
			11/01/2017	11/30/2017	0
38530	LANGUAGE LINE SERVICES	26.60	2 Transactions		
8191	MEDTOX LABORATORIES				
196	01-485-000-0000-6368	32.76	LEAD BLOOD	1120171695588	MEDICAL AND BLOOD TESTS

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8191	MEDTOX LABORATORIES		32.76	1 Transactions		
4317	PROGRESSIVE PREFERRED INSURANCE					
238	01-485-000-0000-6350		375.65	AUTO INSURANCE		OTHER SERVICES & CHARGES
4317	PROGRESSIVE PREFERRED INSURANCE		375.65	1 Transactions		
6412	VERIZON WIRELESS					
309	01-485-000-0000-6203		216.19	CELL PHONE USE	58374352-00001	COMMUNICATIONS
				12/03/2017 01/02/2018	0	
318	01-485-000-0000-6203		48.23-	CREDIT ERIC BODER	58374352-00001	COMMUNICATIONS
				12/03/2017 01/02/2018	0	
6412	VERIZON WIRELESS		167.96	2 Transactions		
485	DEPT Total:		2,272.01	COUNTY PUBLIC HEALTH NURSING	6 Vendors	9 Transactions
520	DEPT			COUNTY PARK'S		
4316	ACTIVE NETWORK LLC					
1	01-520-000-0000-6350		2,019.94	CAMPING RESERVATION SYSTEM	4100158427	OTHER SERVICES & CHARGES
				12/01/2017 11/30/2018	0	
4316	ACTIVE NETWORK LLC		2,019.94	1 Transactions		
651	COMMISSIONER OF REVENUE					
361	01-520-000-0000-6303		27.00	NOVEMBER USE TAX		REPAIR AND MAINTENANCE SERVICES
				11/01/2017 11/30/2017	0	
362	01-520-000-0000-6425		7.00	NOVEMBER USE TAX		REPAIR AND MAINTENANCE SUPPLIES
				11/01/2017 11/30/2017	0	
651	COMMISSIONER OF REVENUE		34.00	2 Transactions		
136	HUTCHINSON CO-OP					
100	01-520-000-0000-6303		30.32	REPAIR TIRE	888175	REPAIR AND MAINTENANCE SERVICES
97	01-520-000-0000-6455		24.01	FUEL	890175	MOTOR FUELS AND LUBRICATION
98	01-520-000-0000-6455		15.00	FUEL	892201	MOTOR FUELS AND LUBRICATION
99	01-520-000-0000-6455		25.01	FUEL	893800	MOTOR FUELS AND LUBRICATION
136	HUTCHINSON CO-OP		94.34	4 Transactions		
1102	JAY MALONE MOTORS					
134	01-520-000-0000-6303		1,288.99	REPAIR MOTOR MOUNTS	25696	REPAIR AND MAINTENANCE SERVICES
1102	JAY MALONE MOTORS		1,288.99	1 Transactions		

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213	MCLEOD COOP POWER ASSN				
188	01-520-000-0000-6253	49.81	521 POWER	205200	ELECTRICITY
192	01-520-000-0000-6253	270.73	526 POWER HOUSE	416900	ELECTRICITY
191	01-520-000-0000-6253	57.05	524 POWER	424600	ELECTRICITY
190	01-520-000-0000-6253	46.68	523 POWER	483200	ELECTRICITY
189	01-520-000-0000-6253	39.86	522 POWER	518000	ELECTRICITY
193	01-520-000-0000-6253	35.80	525 POWER	572300	ELECTRICITY
213	MCLEOD COOP POWER ASSN	499.93	6 Transactions		
2825	MENARDS HUTCHINSON				
203	01-520-000-0000-6423	22.76	SHOP SUPPLIES INV#25919	ACCT#31550303	LANDSCAPING MATERIALS
204	01-520-000-0000-6423	22.09	SHOP SUPPLIES INV#26103	ACCT#31550303	LANDSCAPING MATERIALS
205	01-520-000-0000-6423	35.97	SHOP SUPPLIES INV#25706	ACCT#31550303	LANDSCAPING MATERIALS
206	01-520-000-0000-6423	34.98	SHOP SUPPLIES INV#25726	ACCT#31550303	LANDSCAPING MATERIALS
2825	MENARDS HUTCHINSON	115.80	4 Transactions		
268	QUADE ELECTRIC INC				
240	01-520-000-0000-6303	4,180.00	#525 SPLIT ELECTIRCAL SYSTEM	7888	REPAIR AND MAINTENANCE SERVICES
268	QUADE ELECTRIC INC	4,180.00	1 Transactions		
6412	VERIZON WIRELESS				
314	01-520-000-0000-6203	35.01	PARKS LM SHOP	58374352-00001	COMMUNICATIONS
			12/03/2017 01/02/2018	0	
6412	VERIZON WIRELESS	35.01	1 Transactions		
520	DEPT Total:	8,268.01	COUNTY PARK'S	8 Vendors	20 Transactions
603	DEPT		COUNTY EXTENSION		
576	FINKEN WATER CENTERS				
61	01-603-000-0000-6321	18.50	RENTAL EQUIPMENT	401568	MAINTENANCE AGREEMENTS
			12/01/2017 12/31/2017	0	
576	FINKEN WATER CENTERS	18.50	1 Transactions		
137	HUTCHINSON LEADER				
103	01-603-000-0000-6203	268.75	LAND RENT WORKSHOP ADV	1117300295	COMMUNICATIONS
137	HUTCHINSON LEADER	268.75	1 Transactions		
5900	REGENTS OF THE UNIVERSITY OF MINNE				
242	01-603-000-0000-6265	17,607.75	4-H COLE	300019374	PROFESSIONAL SERVICES

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1 GENERAL REVENUE FUND

Audit List for Board AUDITOR'S VOUCHERS ENTRIES

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Vendor Name		Rpt	Warrant Description		Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
243	01-603-000-0000-6265		16,970.25	AFE JOHNSON	300019374	PROFESSIONAL SERVICES
	5900 REGENTS OF THE UNIVERSITY OF MINNE		34,578.00	2 Transactions		
603	DEPT Total:		34,865.25	COUNTY EXTENSION	3 Vendors	4 Transactions
615	DEPT			ISTS COMMITTEE		
	278 RADTKE/DUANE					
241	01-615-000-0000-6350		2,050.00	NOV 2017 SSTS INSP SVCS		OTHER SERVICES & CHARGES
	278 RADTKE/DUANE		2,050.00	1 Transactions		
615	DEPT Total:		2,050.00	ISTS COMMITTEE	1 Vendors	1 Transactions
1	Fund Total:		92,574.67	GENERAL REVENUE FUND		182 Transactions

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3 ROAD & BRIDGE FUND

Audit List for Board AUDITOR'S VOUCHERS ENTRIES

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	<u>Vendor</u>	<u>Name</u>		<u>Rpt</u>		<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>
	<u>No.</u>	<u>Account/Formula</u>		<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
0	DEPT					...		
	1969	SUN LIFE FINANCIAL						
376		03-000-000-0000-2051			535.00	DENTAL PREMIUM 12/01/2017 12/31/2017	C247881 0	DENTAL INSURANCE PAYABLE
	1969	SUN LIFE FINANCIAL			535.00	1 Transactions		
0	DEPT Total:				535.00	...	1 Vendors	1 Transactions
105	DEPT					COUNTY SURVEYING & GIS		
	5211	HOUSTON ENGINEERING INC						
94		03-105-000-0000-6265			159.50	PROFESSIONAL SERVICES	37259	Professional Services
	5211	HOUSTON ENGINEERING INC			159.50	1 Transactions		
105	DEPT Total:				159.50	COUNTY SURVEYING & GIS	1 Vendors	1 Transactions
310	DEPT					HIGHWAY MAINTENANCE		
	134	CITY OF HUTCHINSON						
32		03-310-000-0000-6503			1.07	SHOP SUPPLIES 11/01/2017 11/30/2017	0000042427 0	TRAFFIC SIGNS & POST
	134	CITY OF HUTCHINSON			1.07	1 Transactions		
	8187	G & K SERVICES						
72		03-310-000-0000-6145			69.75	UNIFORM SERVICES GLENCOE	6043108964	UNIFORM ALLOWANCE
67		03-310-000-0000-6145			18.76	UNIFORM SERVICES SLATS	6043108966	UNIFORM ALLOWANCE
73		03-310-000-0000-6145			18.76	UNIFORM SERVICES GLENCOE	6043114685	UNIFORM ALLOWANCE
68		03-310-000-0000-6145			23.56	UNIFORM SERVICES SLATS	6043114687	UNIFORM ALLOWANCE
78		03-310-000-0000-6145			54.89	UNIFORM SERVICES HATS	6043116007	UNIFORM ALLOWANCE
74		03-310-000-0000-6145			18.76	UNIFORM SERVICES GLENCOE	6043120489	UNIFORM ALLOWANCE
69		03-310-000-0000-6145			13.10	UNIFORM SERVICES SLATS	6043120491	UNIFORM ALLOWANCE
79		03-310-000-0000-6145			69.79	UNIFORM SERVICES HATS	6043121785	UNIFORM ALLOWANCE
75		03-310-000-0000-6145			18.76	UNIFORM SERVICES GLENCOE	6043126237	UNIFORM ALLOWANCE
70		03-310-000-0000-6145			17.90	UNIFORM SERVICES SLATS	6043126239	UNIFORM ALLOWANCE
80		03-310-000-0000-6145			68.59	UNIFORM SERVICES HATS	6043127543	UNIFORM ALLOWANCE
76		03-310-000-0000-6145			19.11	UNIFORM SERVICES GLENCOE	6043132035	UNIFORM ALLOWANCE
71		03-310-000-0000-6145			13.10	UNIFORM SERVICES SLATS	6043132037	UNIFORM ALLOWANCE
81		03-310-000-0000-6145			68.59	UNIFORM SERVICES HATS	6043133327	UNIFORM ALLOWANCE
	8187	G & K SERVICES			493.42	14 Transactions		

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No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
85	273 GOPHER STATE ONE-CALL 03-310-000-0000-6254		66.15	LOCATES 49 11/01/2017 11/30/2017 0	7111117	INTERSECTION LIGHTING
	273 GOPHER STATE ONE-CALL		66.15	1 Transactions		
184	6051 M R SIGN COMPANY INC 03-310-000-0000-6503		458.00	LUCE LINE SIGNS	198522	TRAFFIC SIGNS & POST
185	03-310-000-0000-6503		60.31	WINDING ROAD SIGNS	198523	TRAFFIC SIGNS & POST
186	03-310-000-0000-6503		62.05	CATTLE CROSSING SIGNS	198524	TRAFFIC SIGNS & POST
	6051 M R SIGN COMPANY INC		580.36	3 Transactions		
288	252 WM MUELLER & SONS INC 03-310-000-0000-6506		20.54	PATCHING MATERIAL	230343	BITUMINOUS MATERIAL
289	03-310-000-0000-6506		19.75	PATCHING MATERIAL	230343	BITUMINOUS MATERIAL
290	03-310-000-0000-6506		19.75	PATCHING MATERIAL	230343	BITUMINOUS MATERIAL
291	03-310-000-0000-6506		19.75	PATCHING MATERIAL	230343	BITUMINOUS MATERIAL
292	03-310-000-0000-6506		85.32	PATCHING MATERIAL	230538	BITUMINOUS MATERIAL
293	03-310-000-0000-6506		9.48	PATCHING MATERIAL	230730	BITUMINOUS MATERIAL
294	03-310-000-0000-6506		9.48	PATCHING MATERIAL	230730	BITUMINOUS MATERIAL
295	03-310-000-0000-6506		9.48	PATCHING MATERIAL	230730	BITUMINOUS MATERIAL
296	03-310-000-0000-6506		57.67	PATCHING MATERIAL	230730	BITUMINOUS MATERIAL
297	03-310-000-0000-6506		10.27	PATCHING MATERIAL	231057	BITUMINOUS MATERIAL
298	03-310-000-0000-6506		19.75	PATCHING MATERIAL	231057	BITUMINOUS MATERIAL
299	03-310-000-0000-6506		9.48	PATCHING MATERIAL	231057	BITUMINOUS MATERIAL
300	03-310-000-0000-6506		39.50	PATCHING MATERIAL	231057	BITUMINOUS MATERIAL
	252 WM MUELLER & SONS INC		330.22	13 Transactions		
310	DEPT Total:		1,471.22	HIGHWAY MAINTENANCE	5 Vendors	32 Transactions
330	DEPT			HIGHWAY ADMINISTRATION		
235	6263 PRECISE MRM LLC 03-330-000-0000-6321		44.40	DATA FOR GPS UNITS 10/01/2017 10/31/2017 0	1014966	MAINTENANCE AGREEMENTS
	6263 PRECISE MRM LLC		44.40	1 Transactions		
270	6412 VERIZON WIRELESS 03-330-000-0000-6203		52.04	CELL PHON EUSE 12/03/2017 01/02/2018 0	9797392326	COMMUNICATIONS

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3 ROAD & BRIDGE FUND

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No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
6412	VERIZON WIRELESS		52.04	1 Transactions		
330	DEPT Total:		96.44	HIGHWAY ADMINISTRATION	2 Vendors	2 Transactions
340	DEPT			HIGHWAY EQUIPMENT MAINTENANCE		
4286	BAUER BUILT					
8	03-340-000-0000-6425		482.32	PARTS	180223455	REPAIR AND MAINTENANCE SUPPLIES
4286	BAUER BUILT		482.32	1 Transactions		
134	CITY OF HUTCHINSON					
25	03-340-000-0000-6455		1,721.81	UNLEADED FUEL	0000042420	MOTOR FUELS AND LUBRICATION
				11/01/2017 11/30/2017	0	
26	03-340-000-0000-6567		1,000.81	DIESEL FUEL	0000042420	DIESEL FUEL & TAX
				11/01/2017 11/30/2017	0	
27	03-340-000-0000-6567		7.93	MISC DIESEL FUEL CAN	0000042420	DIESEL FUEL & TAX
				11/01/2017 11/30/2017	0	
28	03-340-000-0000-6567		84.96	MISC CITY WATER TRUCK	0000042420	DIESEL FUEL & TAX
				11/01/2017 11/30/2017	0	
29	03-340-000-0000-6425		144.68	SHOP SUPPLIES	0000042427	REPAIR AND MAINTENANCE SUPPLIES
				11/01/2017 11/30/2017	0	
30	03-340-000-0000-6425		1,121.11	SHOP SUPPLIES	0000042427	REPAIR AND MAINTENANCE SUPPLIES
				11/01/2017 11/30/2017	0	
31	03-340-000-0000-6590		52.70	SHOP SUPPLIES	0000042427	TOOLS & SHOP MATERIALS
				11/01/2017 11/30/2017	0	
33	03-340-000-0000-6590		2.15	SHOP SUPPLIES	0000042427	TOOLS & SHOP MATERIALS
				11/01/2017 11/30/2017	0	
34	03-340-000-0000-6590		18.53	SHOP SUPPLIES	0000042427	TOOLS & SHOP MATERIALS
				11/01/2017 11/30/2017	0	
134	CITY OF HUTCHINSON		4,154.68	9 Transactions		
192	CROW RIVER GLASS & SIGNS					
56	03-340-000-0000-6303		309.14	WINDSHEILD REPAIR	56629	REPAIR AND MAINTENANC SERVICES
192	CROW RIVER GLASS & SIGNS		309.14	1 Transactions		
1326	CULLIGAN WATER CONDITIONING					
57	03-340-000-0000-6257		9.80	BOTTLED WATER RENTAL	173X01924200	SEWER, WATER AND GARBAGE REMOVAL
				12/01/2017 12/31/2017	0	
1326	CULLIGAN WATER CONDITIONING		9.80	1 Transactions		

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No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
77	8187 G & K SERVICES				
	03-340-000-0000-6145	68.85	UNIFORM SERVICES MECH	6043110257	UNIFORM ALLOWANCE
	8187 G & K SERVICES	68.85	1 Transactions		
82	6906 GLENCOE CO OP ASSN				
	03-340-000-0000-6567	1,856.75	DIESEL SLATS		DIESEL FUEL & TAX
	6906 GLENCOE CO OP ASSN	1,856.75	1 Transactions		
84	5967 GLENCOE FLEET SUPPLY INC				
	03-340-000-0000-6590	7.98	BUILDING SHOP SUPPLIES	K31831	TOOLS & SHOP MATERIALS
	5967 GLENCOE FLEET SUPPLY INC	7.98	1 Transactions		
92	4367 HOLT MOTORS INC				
	03-340-000-0000-6425	261.95	PARTS	26120	REPAIR AND MAINTENANCE SUPPLIES
	4367 HOLT MOTORS INC	261.95	1 Transactions		
101	136 HUTCHINSON CO-OP				
	03-340-000-0000-6563	16.71	TIRE REPAIR	889340	TIRES, TUBES & BATTERIES
	136 HUTCHINSON CO-OP	16.71	1 Transactions		
117	32875 HUTCHINSON UTILITIES COMMISSION				
	03-340-000-0000-6253	114.05	ELECTRIC TEMP STORAGE	31021-045101	ELECTRICITY
			11/01/2017 12/01/2017	0	
118	03-340-000-0000-6255	128.00	GAS TEMP STORAGE	31021-045101	NATURAL GAS
			11/01/2017 12/01/2017	0	
	32875 HUTCHINSON UTILITIES COMMISSION	242.05	2 Transactions		
135	119 JOHN DEERE FINANCIAL				
	03-340-000-0000-6425	554.18	PARTS	1576789	REPAIR AND MAINTENANCE SUPPLIES
	136 03-340-000-0000-6425	65.46	PARTS	1578397	REPAIR AND MAINTENANCE SUPPLIES
	137 03-340-000-0000-6425	144.75	PARTS	1579064	REPAIR AND MAINTENANCE SUPPLIES
	139 03-340-000-0000-6425	97.62	PARTS	1579391	REPAIR AND MAINTENANCE SUPPLIES
	138 03-340-000-0000-6425	6.82	PARTS	1579587	REPAIR AND MAINTENANCE SUPPLIES
	119 JOHN DEERE FINANCIAL	868.83	5 Transactions		
207	2825 MENARDS HUTCHINSON				
	03-340-000-0000-6425	16.52	PARTS INV#23535	ACT#31550277	REPAIR AND MAINTENANCE SUPPLIES
208	03-340-000-0000-6590	16.35	SLATS SHOP SUPPLIES INV#23479	ACT#31550277	TOOLS & SHOP MATERIALS
209	03-340-000-0000-6590	66.34	MECH SHOP SUPPLIES INV#23079	ACT#31550277	TOOLS & SHOP MATERIALS

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No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
2825	MENARDS HUTCHINSON				
		99.21		3 Transactions	
1087	O REILLY AUTOMOTIVE INC				
229	03-340-000-0000-6425	157.46	PARTS	1522-451810	REPAIR AND MAINTENANCE SUPPLIES
230	03-340-000-0000-6425	80.95	PARTS	1522-452893	REPAIR AND MAINTENANCE SUPPLIES
1087	O REILLY AUTOMOTIVE INC	238.41		2 Transactions	
1285	ROYAL TIRE INC				
246	03-340-000-0000-6563	228.13	TIRES	309-119865	TIRES, TUBES & BATTERIES
1285	ROYAL TIRE INC	228.13		1 Transactions	
6412	VERIZON WIRELESS				
271	03-340-000-0000-6203	70.02	SLATS & HWY SHOP	9797392326	COMMUNICATIONS
			12/03/2017 01/02/2018	0	
6412	VERIZON WIRELESS	70.02		1 Transactions	
630	VISUAL EFFECTS SIGNS & GRAPHICS				
273	03-340-000-0000-6425	33.52	DECALS	3940	REPAIR AND MAINTENANCE SUPPLIES
630	VISUAL EFFECTS SIGNS & GRAPHICS	33.52		1 Transactions	
4147	WEST CENTRAL SANITATION INC				
279	03-340-000-0000-6257	24.66	GARBAGE REMOVAL GLENCOE	10912072	SEWER, WATER AND GARBAGE REMOVAL
			11/01/2017 11/30/2017	0	
278	03-340-000-0000-6257	24.66	GARBAGE REMOVAL BROWNTON	10912073	SEWER, WATER AND GARBAGE REMOVAL
			11/01/2017 11/30/2017	0	
280	03-340-000-0000-6257	67.82	GARBAGE REMOVAL SLATS	10912112	SEWER, WATER AND GARBAGE REMOVAL
			11/01/2017 11/30/2017	0	
4147	WEST CENTRAL SANITATION INC	117.14		3 Transactions	
1083	WEX BANK				
283	03-340-000-0000-6455	595.23	UNLEADED FUEL	52205289	MOTOR FUELS AND LUBRICATION
			11/01/2017 11/30/2017	0	
284	03-340-000-0000-6455	6.23	MISC FUEL CAN	52205289	MOTOR FUELS AND LUBRICATION
			11/01/2017 11/30/2017	0	
287	03-340-000-0000-6455	14.54-	MISC PREV PER REBATE	52205289	MOTOR FUELS AND LUBRICATION
			11/01/2017 11/30/2017	0	
285	03-340-000-0000-6567	568.93	DIESEL FUEL	52205289	DIESEL FUEL & TAX
			11/01/2017 11/30/2017	0	
286	03-340-000-0000-6567	21.40	MISC FUEL CAN	52205289	DIESEL FUEL & TAX

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3 ROAD & BRIDGE FUND

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Vendor Name		Rpt	Warrant Description		Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
1083	WEX BANK		1,177.25	11/01/2017 11/30/2017	0	
				5 Transactions		
340	DEPT Total:		10,242.74	HIGHWAY EQUIPMENT MAINTENANCE	18 Vendors	40 Transactions
3	Fund Total:		12,504.90	ROAD & BRIDGE FUND		76 Transactions

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5 SOLID WASTE FUND

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Vendor Name		Rpt	Warrant Description		Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
391	DEPT			SOLID WASTE TIP FEE		
651	COMMISSIONER OF REVENUE					
363	05-391-000-0000-6243		31.00	NOVEMBER USE TAX 11/01/2017 11/30/2017	0	PUBLIC EDUCATION
364	05-391-000-0000-6561		15.00	NOVEMBER USE TAX 11/01/2017 11/30/2017	0	REPAIR AND MAINTENANCE-OTHER
651	COMMISSIONER OF REVENUE		46.00	2 Transactions		
6009	INNOVATIVE OFFICE SOLUTIONS LLC					
125	05-391-000-0000-6402		116.64	OFFICE SUPPLIES	IN1841246	OFFICE SUPPLIES
6009	INNOVATIVE OFFICE SOLUTIONS LLC		116.64	1 Transactions		
1129	KDUZ AM KARP FM RADIO					
143	05-391-000-0000-6243		350.00	ILLEGAL DUMPING	36064-1	PUBLIC EDUCATION
144	05-391-000-0000-6243		78.00	ILLEGAL DUMPING	36553-1	PUBLIC EDUCATION
1129	KDUZ AM KARP FM RADIO		428.00	2 Transactions		
743	PLUNKETTS PEST CONTROL INC					
234	05-391-000-0000-6269		498.67	PEST CONTROL	5816812	CONTRACTS
743	PLUNKETTS PEST CONTROL INC		498.67	1 Transactions		
1969	SUN LIFE FINANCIAL					
377	05-391-000-0000-2051		12.50-	DENTAL PREMIUM 12/01/2017 12/31/2017	C247881 0	DENTAL INSURANCE PAYABLE
1969	SUN LIFE FINANCIAL		12.50-	1 Transactions		
391	DEPT Total:		1,076.81	SOLID WASTE TIP FEE	5 Vendors	7 Transactions
393	DEPT			MATERIALS RECOVERY FACILITY		
134	CITY OF HUTCHINSON					
35	05-393-000-0000-6350		171.56	FUEL 11/01/2017 11/30/2017	0000042422 0	OTHER SERVICES & CHARGES
134	CITY OF HUTCHINSON		171.56	1 Transactions		
651	COMMISSIONER OF REVENUE					
365	05-393-000-0000-6259		125.00	NOVEMBER USE TAX 11/01/2017 11/30/2017	0	RECYCLING
366	05-393-000-0000-6269		611.00	NOVEMBER USE TAX 11/01/2017 11/30/2017	0	CONTACTS

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5 SOLID WASTE FUND

Audit List for Board AUDITOR'S VOUCHERS ENTRIES

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No.	Account/Formula	Accr	Amount	Service Dates	On Behalf of Name
367	05-393-000-0000-6560		216.00	NOVEMBER USE TAX	REPAIR AND MAINTENANCE-EQUIPMENT
				11/01/2017 11/30/2017	0
368	05-393-000-0000-6561		32.00	NOVEMBER USE TAX	REPAIR AND MAINTENANCE-OTHER
				11/01/2017 11/30/2017	0
651	COMMISSIONER OF REVENUE		984.00	4 Transactions	
4658	CREEKSIDE SOILS				
48	05-393-000-0000-6259		35.76	PALLETS	RECYCLING
				01/20/2017 01/20/2017	50730 0
49	05-393-000-0000-6259		22.08	PALLETS	RECYCLING
				01/23/2017 01/23/2017	50731 0
50	05-393-000-0000-6259		28.08	PALLETS	RECYCLING
				01/23/2017 01/23/2017	50732 0
51	05-393-000-0000-6259		22.08	PALLETS	RECYCLING
				01/23/2017 01/23/2017	50733 0
52	05-393-000-0000-6259		19.44	PALLETS	RECYCLING
				01/23/2017 01/23/2017	50734 0
53	05-393-000-0000-6259		36.24	PALLETS	RECYCLING
				03/29/2017 03/29/2017	50735 0
54	05-393-000-0000-6259		95.04	PALLETS	RECYCLING
				05/09/2017 05/09/2017	50736 0
55	05-393-000-0000-6259		41.28	PALLETS	RECYCLING
				06/14/2017 06/14/2017	50737 0
4658	CREEKSIDE SOILS		300.00	8 Transactions	
3248	GREENFOREST RECYCLING RESOURCES L				
88	05-393-000-0000-6269		51,255.40	NOVEMBER 915.275 TONS	CONTACTS
3248	GREENFOREST RECYCLING RESOURCES L		51,255.40	1 Transactions	
6227	HOLY TRINITY CHURCH				
93	05-393-000-0000-6412		102.08	PAPER DRIVE OCC	FIBER RECOVERY
				10/09/2017 10/09/2017	3000211 0
6227	HOLY TRINITY CHURCH		102.08	1 Transactions	
6223	KNIGHTS OF COLUMBUS				
156	05-393-000-0000-6412		22.03	OCC	FIBER RECOVERY
				11/17/2017 11/17/2017	3000213 0
6223	KNIGHTS OF COLUMBUS		22.03	1 Transactions	

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5 SOLID WASTE FUND

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No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
162	2351 LYNN CARD COMPANY		13.84	3RD QTR 2017 OCC	3000192	FIBER RECOVERY
	2351 LYNN CARD COMPANY		13.84	1 Transactions		
244	1038 REINER ENTERPRISES INC		1,031.25	RECYCLABLES PICKUP	2817	CONTACTS
	1038 REINER ENTERPRISES INC		1,031.25	1 Transactions		
256	6219 ST JOHNS LUTHERAN SCHOOL		55.08	OCC		FIBER RECOVERY
	6219 ST JOHNS LUTHERAN SCHOOL		55.08	11/12/2017 11/13/2017	0	
				1 Transactions		
257	6224 ST MARKS		78.54	OCC	3000214	FIBER RECOVERY
	6224 ST MARKS		78.54	11/20/2017 11/20/2017	0	
				1 Transactions		
261	6313 STEARNSWOOD INC		1,605.41	3RD QTR 2017 COMMERCIAL OCC	3000206	FIBER RECOVERY
	6313 STEARNSWOOD INC		1,605.41	1 Transactions		
378	1969 SUN LIFE FINANCIAL		30.01	DENTAL PREMIUM	C247881	DENTAL INSURANCE PAYABLE
	1969 SUN LIFE FINANCIAL		30.01	12/01/2017 12/31/2017	0	
				1 Transactions		
274	4170 WASTE MANAGEMENT OF WI MN		4,496.20	RECYCLING RESIDUE GARBAGE	7085014-1593-7	SEWER, WATER AND GARBAGE REMOVAL
	4170 WASTE MANAGEMENT OF WI MN		4,496.20	1 Transactions		
393	DEPT Total:		60,145.40	MATERIALS RECOVERY FACILITY	13 Vendors	23 Transactions
397	DEPT			HOUSEHOLD HAZARDOUS WASTE		
369	651 COMMISSIONER OF REVENUE		5.00	NOVEMBER USE TAX		RECYCLING
	369 05-397-000-0000-6259			11/01/2017 11/30/2017	0	
370	05-397-000-0000-6269		100.00	NOVEMBER USE TAX		CONTRACTS
				11/01/2017 11/30/2017	0	

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5 SOLID WASTE FUND

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No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
371	05-397-000-0000-6410		14.00	NOVEMBER USE TAX		BUILDING AND SAFETY SUPPLIES
	651	COMMISSIONER OF REVENUE	119.00	11/01/2017 11/30/2017	0	
				3 Transactions		
3168	ECO TECH					
59	05-397-000-0000-6269		1,607.70	E-WASTE RECYCLING		CONTRACTS
				11/09/2017 11/17/2017	0	
3168	ECO TECH		1,607.70	1 Transactions		
	6009	INNOVATIVE OFFICE SOLUTIONS LLC				
126	05-397-000-0000-6402		350.64	OFFICE SUPPLIES	IN1841246	OFFICE SUPPLIES
	6009	INNOVATIVE OFFICE SOLUTIONS LLC	350.64	1 Transactions		
	4272	KENNEDY SCALES INC				
150	05-397-000-0000-6269		781.64	REMOTE DISPLAY & INSTALLATION	127890	CONTRACTS
	4272	KENNEDY SCALES INC	781.64	1 Transactions		
	1969	SUN LIFE FINANCIAL				
379	05-397-000-0000-2051		50.00	DENTAL PREMIUM	C247881	DENTAL INSURANCE PAYABLE
				12/01/2017 12/31/2017	0	
	1969	SUN LIFE FINANCIAL	50.00	1 Transactions		
397	DEPT Total:		2,908.98	HOUSEHOLD HAZARDOUS WASTE	5 Vendors	7 Transactions
5	Fund Total:		64,131.19	SOLID WASTE FUND		37 Transactions

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11 HUMAN SERVICE FUND

Audit List for Board AUDITOR'S VOUCHERS ENTRIES

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Vendor	Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
420	DEPT		INCOME MAINTENANCE		
	6090 BUSINESSWARE SOLUTIONS				
12	11-420-600-0010-6321	21.32	MONTHLY PRINT	280804	MAINTNENACE AGREEMENTS
13	11-420-640-0010-6321	70.61	MONTHLY PRINT	280804	MAINTENANCE AGREEMENTS
	6090 BUSINESSWARE SOLUTIONS	91.93	2 Transactions		
	6009 INNOVATIVE OFFICE SOLUTIONS LLC				
127	11-420-600-0010-6402	26.18	TAPE/PEN/PAPER	IN1833249	OFFICE SUPPLIES
128	11-420-600-0010-6402	10.23	CASE CALC ROLL/STAMP	IN1834822	OFFICE SUPPLIES
129	11-420-640-0010-6402	14.52	PEN	IN1834822	OFFICE SUPPLIES
130	11-420-600-0010-6402	14.48	BUSINESS CARDS	IN1842029	OFFICE SUPPLIES
131	11-420-600-0010-6402	6.43	PLATES/FORKS	IN1843398	OFFICE SUPPLIES
	6009 INNOVATIVE OFFICE SOLUTIONS LLC	71.84	5 Transactions		
	1857 METRO SALES INC				
214	11-420-600-0010-6321	264.65	RICOH MP7502SP-HALLWAY CS	INV940397	MAINTNENACE AGREEMENTS
215	11-420-640-0010-6321	264.65	RICOH MP7502SP-HALLWAY CS	INV940397	MAINTENANCE AGREEMENTS
218	11-420-600-0010-6321	91.76	RICOH MP6503SP IMU HALLWAY	INV946758	MAINTNENACE AGREEMENTS
219	11-420-600-0010-6321	19.46	RICOH MP3554-FRONT DESK	INV946763	MAINTNENACE AGREEMENTS
	1857 METRO SALES INC	640.52	4 Transactions		
	1969 SUN LIFE FINANCIAL				
380	11-420-000-0000-2051	869.50	DENTAL PREMIUM	C247881	DENTAL INSURANCE PAYABLE
			12/01/2017 12/31/2017	0	
	1969 SUN LIFE FINANCIAL	869.50	1 Transactions		
	6412 VERIZON WIRELESS				
311	11-420-600-0010-6203	120.79	CELL PHONE USE	58374352-00001	COMMUNICATIONS/POSTAGE
			12/03/2017 01/02/2018	0	
	6412 VERIZON WIRELESS	120.79	1 Transactions		
420	DEPT Total:	1,794.58	INCOME MAINTENANCE	5 Vendors	13 Transactions
430	DEPT		INDIVIDUAL AND FAMILY SOCIAL SERVI		
	6090 BUSINESSWARE SOLUTIONS				
14	11-430-700-0010-6321	1.49	MONTHLY PRINT	280804	MAINTENANCE AGREEMENTS
	6090 BUSINESSWARE SOLUTIONS	1.49	1 Transactions		
	6009 INNOVATIVE OFFICE SOLUTIONS LLC				

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11 HUMAN SERVICE FUND

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No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
127	11-430-700-0010-6402		TAPE/PEN/PAPER	IN1833249	OFFICE SUPPLIES
128	11-430-700-0010-6402		CASE CALC ROLL/STAMP	IN1834822	OFFICE SUPPLIES
130	11-430-700-0010-6402		BUSINESS CARDS	IN1842029	OFFICE SUPPLIES
131	11-430-700-0010-6402		PLATES/FORKS	IN1843398	OFFICE SUPPLIES
132	11-430-700-0010-6402		CLIP/PAD/PEN	IN1847911	OFFICE SUPPLIES
6009	INNOVATIVE OFFICE SOLUTIONS LLC	230.41	5 Transactions		
506	INSIGHT PUBLIC SECTOR				
133	11-430-700-0010-6612	357.60	PLANTRONICS HEADSET	1100568348	CAPITAL - \$100-\$5,000 (INVENTORY)
506	INSIGHT PUBLIC SECTOR	357.60	1 Transactions		
1857	METRO SALES INC				
216	11-430-700-0010-6321	176.44	RICOH MP7502SP-HALLWAY CS	INV940397	MAINTENANCE AGREEMENTS
217	11-430-700-0010-6321	474.06	RICOH MPC5503 ANNEX	INV945106	MAINTENANCE AGREEMENTS
220	11-430-700-0010-6321	45.40	RICOH MP3554-FRONT DESK	INV946763	MAINTENANCE AGREEMENTS
1857	METRO SALES INC	695.90	3 Transactions		
1969	SUN LIFE FINANCIAL				
381	11-430-000-0000-2051	3,565.50	DENTAL PREMIUM	C247881	DENTAL INSURANCE PAYABLE
			12/01/2017 12/31/2017	0	
1969	SUN LIFE FINANCIAL	3,565.50	1 Transactions		
6412	VERIZON WIRELESS				
312	11-430-700-0010-6203	281.85	CELL PHONE USE	58374352-00001	COMMUNICATIONS/POSTAGE
			12/03/2017 01/02/2018	0	
6412	VERIZON WIRELESS	281.85	1 Transactions		
430	DEPT Total:	5,132.75	INDIVIDUAL AND FAMILY SOCIAL SER	6 Vendors	12 Transactions
11	Fund Total:	6,927.33	HUMAN SERVICE FUND		25 Transactions

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20 COUNTY DITCH FUND

Audit List for Board AUDITOR'S VOUCHERS ENTRIES

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	<u>No.</u>	<u>Account/Formula</u>		<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
621	DEPT					COUNTY DITCH #5		
	4089	MATHEWS EXCAVATING						
341		20-621-000-0000-6302			495.00	EXCAVATOR TO CLEAN BEAVER DAM	7108	Construction And Repairs
	4089	MATHEWS EXCAVATING			495.00	1 Transactions		
621	DEPT Total:				495.00	COUNTY DITCH #5	1 Vendors	1 Transactions
631	DEPT					COUNTY DITCH #18		
	5026	STEILE CONSTRUCTION						
336		20-631-000-0000-6302			9,222.50	REPAIR LATERAL #5	1303	Construction And Repairs
	5026	STEILE CONSTRUCTION			9,222.50	1 Transactions		
631	DEPT Total:				9,222.50	COUNTY DITCH #18	1 Vendors	1 Transactions
644	DEPT					COUNTY DITCH #35		
	5014	WUETHERICH DRAINAGE INC						
340		20-644-000-0000-6302			46,000.00	DUTCH CLEANING/LEVELING/BURN	980	Construction And Repairs
	5014	WUETHERICH DRAINAGE INC			46,000.00	1 Transactions		
644	DEPT Total:				46,000.00	COUNTY DITCH #35	1 Vendors	1 Transactions
646	DEPT					COUNTY DITCH #36		
	5522	A & T SEPTIC & EXCAVATING SERVICES I						
320		20-646-000-0000-6302			2,250.00	VIDEO INSPECTION BRANCH 122	21226	Construction And Repairs
	5522	A & T SEPTIC & EXCAVATING SERVICES I			2,250.00	1 Transactions		
646	DEPT Total:				2,250.00	COUNTY DITCH #36	1 Vendors	1 Transactions
661	DEPT					JOINT DITCH #1 RCMC		
	222	MEEKER COUNTY TREASURER						
197		20-661-000-0000-6302			2.95	2017 DITCH EXPENSES		Construction And Repairs
	222	MEEKER COUNTY TREASURER			2.95	1 Transactions		
661	DEPT Total:				2.95	JOINT DITCH #1 RCMC	1 Vendors	1 Transactions
667	DEPT					JOINT DITCH #8 MCS		
	658	MCLEOD PUBLISHING INC						

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20 COUNTY DITCH FUND

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No. Account/Formula	Accr	Amount	Service Dates	On Behalf of Name
328 20-667-000-0000-6302		53.78	PUBLIC NOTICE	Construction And Repairs
			11/15/2017 11/15/2017	0
658 MCLEOD PUBLISHING INC		53.78	1 Transactions	
2272 RINGQUIST/RON				
331 20-667-000-0000-6302		1,240.00	REDETERMINATION HOURS 15.5	Construction And Repairs
332 20-667-000-0000-6302		131.61	REDETERMINATION MILES	Construction And Repairs
2272 RINGQUIST/RON		1,371.61	2 Transactions	
2294 WICK/BRAD				
338 20-667-000-0000-6302		225.00	REDETERMINATION HOURS 5	Construction And Repairs
339 20-667-000-0000-6302		32.10	REDETERMINATION MILES 120	Construction And Repairs
2294 WICK/BRAD		257.10	2 Transactions	
667 DEPT Total:		1,682.49	JOINT DITCH #8 MCS	3 Vendors 5 Transactions
674 DEPT			JOINT DITCH #13 MMC	
222 MEEKER COUNTY TREASURER				
198 20-674-000-0000-6302		244.13	2017 DITCH EXPENSES	Construction And Repairs
222 MEEKER COUNTY TREASURER		244.13	1 Transactions	
674 DEPT Total:		244.13	JOINT DITCH #13 MMC	1 Vendors 1 Transactions
675 DEPT			JOINT DITCH #14 WMCM	
222 MEEKER COUNTY TREASURER				
199 20-675-000-0000-6302		206.97	2017 DITCH EXPENSES	Construction And Repairs
222 MEEKER COUNTY TREASURER		206.97	1 Transactions	
675 DEPT Total:		206.97	JOINT DITCH #14 WMCM	1 Vendors 1 Transactions
676 DEPT			JOINT DITCH #15 MCM	
222 MEEKER COUNTY TREASURER				
200 20-676-000-0000-6302		4,967.09	2017 DITCH EXPENSES	Construction And Repairs
201 20-676-000-0000-6302		521.21	2017 DITCH EXPENSES	Construction And Repairs
222 MEEKER COUNTY TREASURER		5,488.30	2 Transactions	

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20 COUNTY DITCH FUND

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<u>Vendor Name</u>		<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>	
<u>No.</u>	<u>Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
676	DEPT Total:		5,488.30	JOINT DITCH #15 MCM	1 Vendors	2 Transactions
20	Fund Total:		65,592.34	COUNTY DITCH FUND		14 Transactions

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21 SWCD FUND

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No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
696	DEPT			SWCD		
1939	FRONTIER PRECISION INC					
62	21-696-000-0000-6610		4,878.45	TSC3 STATE CONTRACT	167235	CAPITAL - OVER \$5,000 (FIXED ASSETS)
1939	FRONTIER PRECISION INC		4,878.45	1 Transactions		
6906	GLENCOE CO OP ASSN					
83	21-696-000-0000-6255		172.95	SNL GAS		NATURAL GAS
6906	GLENCOE CO OP ASSN		172.95	1 Transactions		
4186	MARCO					
187	21-696-000-0000-6321		110.35	COPIER LEASE AGREEMENT	21700919	MAINTENANCE AGREEMENTS
4186	MARCO		110.35	1 Transactions		
4308	PETERSON COMPANY LTD					
272	21-696-000-0000-6265		2,350.00	AUDITED FINANCIAL STATEMENTS	16784	PROFESSIONAL SERVICES
4308	PETERSON COMPANY LTD		2,350.00	1 Transactions		
696	DEPT Total:		7,511.75	SWCD	4 Vendors	4 Transactions
697	DEPT			DRAINAGE INSPECTOR		
1969	SUN LIFE FINANCIAL					
382	21-697-000-0000-2051		50.00	DENTAL PREMIUM	C247881	DENTAL INSURANCE PAYABLE
				12/01/2017 12/31/2017	0	
1969	SUN LIFE FINANCIAL		50.00	1 Transactions		
697	DEPT Total:		50.00	DRAINAGE INSPECTOR	1 Vendors	1 Transactions
21	Fund Total:		7,561.75	SWCD FUND		5 Transactions

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25 SPECIAL REVENUE FUND

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	<u>No. Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
15	DEPT			LAW LIBRARY		
	3408 RELX INC					
245	25-015-000-0000-6451		369.77	SERVICES ACCT#424T3KT6V	3091226226	Books
				11/01/2017 11/30/2017	0	
	3408 RELX INC		369.77	1 Transactions		
15	DEPT Total:		369.77	LAW LIBRARY	1 Vendors	1 Transactions
225	DEPT			MCLEOD COUNTY SHERIFFS POSSE		
	11658 SQUEAKYS GRILL AND BAR					
262	25-225-000-0000-6350		369.24	POSSE RECOGNITION EVENT		Other Services & Charges
	11658 SQUEAKYS GRILL AND BAR		369.24	1 Transactions		
225	DEPT Total:		369.24	MCLEOD COUNTY SHERIFFS POSSE	1 Vendors	1 Transactions
252	DEPT			JAIL CANTEEN ACCOUNT		
	943 STAR TRIBUNE					
260	25-252-000-0000-6450		369.72	52 WEEKS SUBSCRIPTION	7049885	Subscriptions
				12/01/2017 12/16/2018	0	
	943 STAR TRIBUNE		369.72	1 Transactions		
252	DEPT Total:		369.72	JAIL CANTEEN ACCOUNT	1 Vendors	1 Transactions
255	DEPT			COUNTY COURT SERVICES		
	977 MIDWEST MONITORING & SURVEILLANC					
221	25-255-000-0000-6350		108.50	STANDARD SCREENING	NOV LAB/UA	Other Services & Charges
	977 MIDWEST MONITORING & SURVEILLANC		108.50	1 Transactions		
255	DEPT Total:		108.50	COUNTY COURT SERVICES	1 Vendors	1 Transactions
807	DEPT			DESIGNATED FOR CAPITAL ASSETS		
	1116 WOLD ARCHITECTS & ENGINEERS INC					
301	25-807-000-0000-6610		6,579.28	ENTRY JAIL ADD/REMODEL	55870	Capital - Over \$5,000 (Fixed Assets)
	1116 WOLD ARCHITECTS & ENGINEERS INC		6,579.28	1 Transactions		
807	DEPT Total:		6,579.28	DESIGNATED FOR CAPITAL ASSETS	1 Vendors	1 Transactions

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25 SPECIAL REVENUE FUND

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Vendor		Name	Rpt	Warrant Description		Invoice #	Account/Formula Description	
	No.	Account/Formula	Accr	Amount	Service Dates		Paid On Bhf #	On Behalf of Name
840	DEPT				JUVENILE RESTITUTION FUND			
	11225	CHILSON FUNERAL HOME						
	302	25-840-000-0000-6850		189.00	CSW HRS SL			Collections For Other Agenices
	11225	CHILSON FUNERAL HOME		189.00	1 Transactions			
840	DEPT Total:			189.00	JUVENILE RESTITUTION FUND		1 Vendors	1 Transactions
886	DEPT				COUNTY FEEDLOT PROGRAM			
	1969	SUN LIFE FINANCIAL						
	383	25-886-000-0000-2051		47.50	DENTAL PREMIUM		C247881	Dental Insurance Payable
					12/01/2017	12/31/2017	0	
	1969	SUN LIFE FINANCIAL		47.50	1 Transactions			
886	DEPT Total:			47.50	COUNTY FEEDLOT PROGRAM		1 Vendors	1 Transactions
25	Fund Total:			8,033.01	SPECIAL REVENUE FUND			7 Transactions

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82 COMMUNITY HEALTH SER

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No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
852	DEPT		PROJECT HARMONY GRANT		
1969	SUN LIFE FINANCIAL				
385	82-852-000-0000-2051	40.00	DENTAL PREMIUM	C247881	DENTAL INSURANCE PAYABLE
			12/01/2017 12/31/2017	0	
1969	SUN LIFE FINANCIAL	40.00	1 Transactions		
6412	VERIZON WIRELESS				
317	82-852-000-0000-6203	61.50	CELL PHONE USE	58374352-00001	Communications
			12/03/2017 01/02/2018	0	
6412	VERIZON WIRELESS	61.50	1 Transactions		
852	DEPT Total:	101.50	PROJECT HARMONY GRANT	2 Vendors	2 Transactions
853	DEPT		LOCAL PUBLIC HEALTH GRANT		
1969	SUN LIFE FINANCIAL				
384	82-853-000-0000-2051	115.00	DENTAL PREMIUM	C247881	DENTAL INSURANCE PAYABLE
			12/01/2017 12/31/2017	0	
1969	SUN LIFE FINANCIAL	115.00	1 Transactions		
853	DEPT Total:	115.00	LOCAL PUBLIC HEALTH GRANT	1 Vendors	1 Transactions
857	DEPT		HEALTHY HOMES		
222	MEEKER COUNTY TREASURER				
202	82-857-000-0000-6850	1,929.23	3RD QTR 2017 HEALTHY HOMES		Collections For Other Agencies
222	MEEKER COUNTY TREASURER	1,929.23	1 Transactions		
314	SIBLEY COUNTY TREASURER				
253	82-857-000-0000-6850	620.79	3RD QTR 2017 HEALTHY HOMES		Collections For Other Agencies
314	SIBLEY COUNTY TREASURER	620.79	1 Transactions		
857	DEPT Total:	2,550.02	HEALTHY HOMES	2 Vendors	2 Transactions
866	DEPT		EMERGENCY PREPAREDNESS TO BIOTER		
6412	VERIZON WIRELESS				
315	82-866-000-0000-6203	31.81	CELL PHONE USE	58374352-00001	COMMUNICATIONS
			12/03/2017 01/02/2018	0	
6412	VERIZON WIRELESS	31.81	1 Transactions		

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82 COMMUNITY HEALTH SER

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866	DEPT Total:		31.81	EMERGENCY PREPAREDNESS TO BIOTI	1 Vendors 1 Transactions
82	Fund Total:		2,798.33	COMMUNITY HEALTH SERVICE	6 Transactions

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86 TRUST & AGENCY FUND

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No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
833	DEPT		MORTGAGE REGISTRY TAX		
1004	MINNESOTA DEPARTMENT OF REVENUE				
372	86-833-000-0000-6850		NOVEMBER MTG REG		Collections For Other Agencies
		30,412.06	11/01/2017 11/30/2017	0	
	1004 MINNESOTA DEPARTMENT OF REVENUE	30,412.06	1 Transactions		
833	DEPT Total:	30,412.06	MORTGAGE REGISTRY TAX	1 Vendors	1 Transactions
834	DEPT		DEED TAX		
1004	MINNESOTA DEPARTMENT OF REVENUE				
373	86-834-000-0000-6850		NOVEMBER DEED TAX		Collections For Other Agencies
		38,045.15	11/01/2017 11/30/2017	0	
	1004 MINNESOTA DEPARTMENT OF REVENUE	38,045.15	1 Transactions		
834	DEPT Total:	38,045.15	DEED TAX	1 Vendors	1 Transactions
935	DEPT		REAL ESTATE ASSURANCE-REGISTERED		
3411	COMMISSIONER OF FINANCE				
344	86-935-000-0000-6850		REGISTERED LAND		Collections For Other Agencies
		148.50	11/01/2017 11/30/2017	0	
	3411 COMMISSIONER OF FINANCE	148.50	1 Transactions		
935	DEPT Total:	148.50	REAL ESTATE ASSURANCE-REGISTERE	1 Vendors	1 Transactions
939	DEPT		STATE SURCHARGE 3%		
3411	COMMISSIONER OF FINANCE				
345	86-939-000-0000-6850		REGISTRARS FEES		Collections For Other Agencies
		5,323.50	11/01/2017 11/30/2017	0	
355	86-939-000-0000-6850		TAX FORFEITED		Collections For Other Agencies
		4,382.43	11/01/2017 11/30/2017	0	
	3411 COMMISSIONER OF FINANCE	9,705.93	2 Transactions		
939	DEPT Total:	9,705.93	STATE SURCHARGE 3%	1 Vendors	2 Transactions
940	DEPT		VITAL RECORDS SURCHARGE-BIRTH&D		
3411	COMMISSIONER OF FINANCE				
346	86-940-000-0000-6850		BIRTH/DEATH SURCHARGE		Collections For Other Agencies
		2,524.00			

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86 TRUST & AGENCY FUND

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Vendor	Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
3411	COMMISSIONER OF FINANCE		11/01/2017 11/30/2017	0	
		2,524.00	1 Transactions		
940	DEPT Total:	2,524.00	VITAL RECORDS SURCHARGE-BIRTH&	1 Vendors	1 Transactions
950	DEPT		BIRTH RECORD SURCHARGE		
3411	COMMISSIONER OF FINANCE				
347	86-950-000-0000-6850	1,090.00	BIRTH RECORD SURCHARG		Collections For Other Agencies
			11/01/2017 11/30/2017	0	
3411	COMMISSIONER OF FINANCE	1,090.00	1 Transactions		
950	DEPT Total:	1,090.00	BIRTH RECORD SURCHARGE	1 Vendors	1 Transactions
952	DEPT		CHILDREN'S TRUST FUND SURCHARGE-		
3411	COMMISSIONER OF FINANCE				
348	86-952-000-0000-6850	327.00	CHILDREN SURCHARGE		Collections For Other Agencies
			11/01/2017 11/30/2017	0	
3411	COMMISSIONER OF FINANCE	327.00	1 Transactions		
952	DEPT Total:	327.00	CHILDREN'S TRUST FUND SURCHARGE	1 Vendors	1 Transactions
954	DEPT		MARRIAGE LICENSE		
3411	COMMISSIONER OF FINANCE				
349	86-954-000-0000-6850	385.00	MARR LIC SURCHARGE		Collections For Other Agencies
			11/01/2017 11/30/2017	0	
350	86-954-000-0000-6850	24.00	MARR LIC SUPRVD VISIT		Collections For Other Agencies
			11/01/2017 11/30/2017	0	
351	86-954-000-0000-6850	16.00	MARR LIC/MN ENABLE		Collections For Other Agencies
			11/01/2017 11/30/2017	0	
352	86-954-000-0000-6850	175.00	MARR LIC/DISPL HOME REG		Collections For Other Agencies
			11/01/2017 11/30/2017	0	
353	86-954-000-0000-6850	10.00	MARR LIC/HEALTHY MARR		Collections For Other Agencies
			11/01/2017 11/30/2017	0	
354	86-954-000-0000-6850	35.00	MARR LIC/COUPLES ON BRINK		Collections For Other Agencies
			11/01/2017 11/30/2017	0	
3411	COMMISSIONER OF FINANCE	645.00	6 Transactions		

\*\*\*\*\* McLeod County IFS \*\*\*\*\*



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86 TRUST & AGENCY FUND

Audit List for Board AUDITOR'S VOUCHERS ENTRIES

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Vendor Name		Rpt	Warrant Description	Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
954	DEPT Total:		MARRIAGE LICENSE	1 Vendors	6 Transactions
956	DEPT		SALES TAX		
651	COMMISSIONER OF REVENUE				
357	86-956-000-0000-6850		938.00 SALES TAX (13,644)		Collections For Other Agencies
			11/01/2017 11/30/2017	0	
	651 COMMISSIONER OF REVENUE		938.00	1 Transactions	
956	DEPT Total:		938.00 SALES TAX	1 Vendors	1 Transactions
961	DEPT		MUNICIPAL ASSESSMENTS		
32	CITY OF BROWNTON				
20	86-961-000-0000-6850		944.59 SPECIAL ASSESSMENT PAYOFF	16.056.0250	Collections For Other Agencies
32	CITY OF BROWNTON		944.59	1 Transactions	
4917	CITY OF GLENCOE				
23	86-961-000-0000-6850		7,868.35 SPECIAL ASSESSMENT PAYOFF	22.060.4360	Collections For Other Agencies
21	86-961-000-0000-6850		140.11 SPECIAL ASSESSMENT PAYOFF	22.145.0020	Collections For Other Agencies
22	86-961-000-0000-6850		155.92 SPECIAL ASSESSMENT PAYOFF	22.145.0340	Collections For Other Agencies
4917	CITY OF GLENCOE		8,164.38	3 Transactions	
315	CITY OF SILVER LAKE				
38	86-961-000-0000-6850		2,683.86 SPECIAL ASSESSMENT PAYOFF	19.050.0080	Collections For Other Agencies
36	86-961-000-0000-6850		4,822.40 SPECIAL ASSESSMENT PAYOFF	19.053.0430	Collections For Other Agencies
37	86-961-000-0000-6850		2,983.20 SPECIAL ASSESSMENT PAYOFF	19.053.0500	Collections For Other Agencies
315	CITY OF SILVER LAKE		10,489.46	3 Transactions	
324	CITY OF STEWART				
41	86-961-000-0000-6850		5,641.83 SPECIAL ASSESSMENT PAYOFF	20.050.0570	Collections For Other Agencies
39	86-961-000-0000-6850		8,623.03 SPECIAL ASSESSMENT PAYOFF	20.050.0640	Collections For Other Agencies
40	86-961-000-0000-6850		1,460.80 SPECIAL ASSESSMENT PAYOFF	20.050.0640	Collections For Other Agencies
324	CITY OF STEWART		15,725.66	3 Transactions	
362	CITY OF WINSTED				
46	86-961-000-0000-6850		28,296.56 SPECIAL ASSESSMENT PAYOFF	21.002.0600	Collections For Other Agencies
45	86-961-000-0000-6850		604.33 SPECIAL ASSESSMENT PAYOFF	21.081.0060	Collections For Other Agencies
43	86-961-000-0000-6850		199.72 SPECIAL ASSESSMENT PAYOFF	21.089.0010	Collections For Other Agencies
44	86-961-000-0000-6850		221.53 SPECIAL ASSESSMENT PAYOFF	21.089.0020	Collections For Other Agencies

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86 TRUST & AGENCY FUND

Audit List for Board AUDITOR'S VOUCHERS ENTRIES

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Vendor	Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
42	86-961-000-0000-6850		SPECIAL ASSESSMENT PAYOFF	21.110.0120	Collections For Other Agencies
47	86-961-000-0000-6850		SPECIAL ASSESSMENT PAYOFF	21.112.0130	Collections For Other Agencies
362	CITY OF WINSTED		6 Transactions		
172	TOWN OF ACOMA				
265	86-961-000-0000-6850		SPECIAL ASSESSMENT PAYOFF	01.094.0060	Collections For Other Agencies
266	86-961-000-0000-6850		SPECIAL ASSESSMENT PAYOFF	01.094.0060	Collections For Other Agencies
267	86-961-000-0000-6850		SPECIAL ASSESSMENT PAYOFF	01.094.0060	Collections For Other Agencies
172	TOWN OF ACOMA		3 Transactions		
961	DEPT Total:	68,287.63	MUNICIPAL ASSESSMENTS	6 Vendors	19 Transactions
966	DEPT		HUTCHINSON CITY SALES TAX		
651	COMMISSIONER OF REVENUE				
356	86-966-000-0000-6850	67.00	HUTCHINSON TAX (13,400)		Collections For Other Agencies
			11/01/2017 11/30/2017	0	
651	COMMISSIONER OF REVENUE	67.00	1 Transactions		
966	DEPT Total:	67.00	HUTCHINSON CITY SALES TAX	1 Vendors	1 Transactions
975	DEPT		DNR CLEARING ACCOUNT		
509	MINNESOTA DNR				
223	86-975-000-0000-6850	473.50	DNR		Collections For Other Agencies
			12/05/2017 12/05/2017	0	
509	MINNESOTA DNR	473.50	1 Transactions		
975	DEPT Total:	473.50	DNR CLEARING ACCOUNT	1 Vendors	1 Transactions
976	DEPT		GAME & FISH CLEARING ACCOUNT		
509	MINNESOTA DNR				
222	86-976-000-0000-6850	104.00	G & F		Collections For Other Agencies
			12/05/2017 12/11/2017	0	
509	MINNESOTA DNR	104.00	1 Transactions		
976	DEPT Total:	104.00	GAME & FISH CLEARING ACCOUNT	1 Vendors	1 Transactions
86	Fund Total:	152,767.77	TRUST & AGENCY FUND		37 Transactions

\*\*\*\*\* McLeod County IFS \*\*\*\*\*



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86 TRUST & AGENCY FUND

Audit List for Board AUDITOR'S VOUCHERS ENTRIES

<u>Vendor</u>	<u>Name</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>	
<u>No.</u>	<u>Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
Final Total:			412,891.29	199 Vendors	389 Transactions	

\*\*\*\*\* McLeod County IFS \*\*\*\*\*

Audit List for Board AUDITOR'S VOUCHERS ENTRIES



Recap by Fund

<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>	
1	92,574.67	GENERAL REVENUE FUND	
3	12,504.90	ROAD & BRIDGE FUND	
5	64,131.19	SOLID WASTE FUND	
11	6,927.33	HUMAN SERVICE FUND	
20	65,592.34	COUNTY DITCH FUND	
21	7,561.75	SWCD FUND	
25	8,033.01	SPECIAL REVENUE FUND	
82	2,798.33	COMMUNITY HEALTH SERVICE	
86	152,767.77	TRUST & AGENCY FUND	
All Funds	412,891.29	Total	Approved by, .....
			.....
			.....

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\*\*\*\*\* McLeod County IFS \*\*\*\*\*



Audit List for Board AUDITOR'S VOUCHERS ENTRIES

Page 1

Print List in Order By: 2 1 - Fund (Page Break by Fund) Page Break By: 1 1 - Page Break by Fund  
2 - Department (Totals by Dept) 2 - Page Break by Dept  
3 - Vendor Number  
4 - Vendor Name

Explode Dist. Formulas Y

Paid on Behalf Of Name  
on Audit List?: N

Type of Audit List: D D - Detailed Audit List  
S - Condensed Audit List

Save Report Options?: N

\*\*\*\*\* McLeod County IFS \*\*\*\*\*



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1 GENERAL REVENUE FUND

Audit List for Board AUDITOR'S VOUCHERS ENTRIES

Page 2

	<u>Vendor Name</u>		<u>Rpt</u>	<u>Warrant Description</u>		<u>Invoice #</u>	<u>Account/Formula Description</u>
	<u>No.</u>	<u>Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
0	DEPT				...		
	4322	RELIANCE STANDARD					
1		01-000-000-0000-2045		10,483.75	LIFE, ACCIDENT & CI BINDER		HEALTH IINSURANCE PAYABLE
2		01-000-000-0000-2045		12,482.09	DENTAL & VISION BINDER		HEALTH IINSURANCE PAYABLE
	4322	RELIANCE STANDARD		22,965.84	2 Transactions		
0	DEPT Total:			22,965.84	...	1 Vendors	2 Transactions
1	Fund Total:			22,965.84	GENERAL REVENUE FUND		2 Transactions
	Final Total:			22,965.84	1 Vendors	2 Transactions	

\*\*\*\*\* McLeod County IFS \*\*\*\*\*

Audit List for Board AUDITOR'S VOUCHERS ENTRIES



Recap by Fund

<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>
1	22,965.84	GENERAL REVENUE FUND
All Funds	22,965.84	Total

Approved by, .....  
 .....  
 .....

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12/20/17 2:16PM

\*\*\*\*\* McLeod County IFS \*\*\*\*\*



Audit List for Board AUDITOR'S VOUCHERS ENTRIES

Page 1

Print List in Order By: 2 1 - Fund (Page Break by Fund) Page Break By: 1 1 - Page Break by Fund  
2 - Department (Totals by Dept) 2 - Page Break by Dept  
3 - Vendor Number  
4 - Vendor Name

Explode Dist. Formulas Y

Paid on Behalf Of Name  
on Audit List?: N

Type of Audit List: D D - Detailed Audit List  
S - Condensed Audit List

Save Report Options?: N

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 82 COMMUNITY HEALTH SER

\*\*\*\*\* McLeod County IFS \*\*\*\*\*

Audit List for Board AUDITOR'S VOUCHERS ENTRIES



Page 2

Vendor Name		Rpt	Warrant Description		Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
853	DEPT			LOCAL PUBLIC HEALTH GRANT		
	4333 MEEKER-MCLEOD-SIBLEY CHS					
1	82-853-000-0000-6350		75,000.00	TRANSFER TO INITATE BANK ACC	CHS	OTHER SERVICES & CHARGES
	4333 MEEKER-MCLEOD-SIBLEY CHS		75,000.00	1 Transactions		
853	DEPT Total:		75,000.00	LOCAL PUBLIC HEALTH GRANT	1 Vendors	1 Transactions
82	Fund Total:		75,000.00	COMMUNITY HEALTH SERVICE		1 Transactions
	Final Total:		75,000.00	1 Vendors	1 Transactions	

\*\*\*\*\* McLeod County IFS \*\*\*\*\*

Audit List for Board AUDITOR'S VOUCHERS ENTRIES



Recap by Fund

<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>	
82	75,000.00	COMMUNITY HEALTH SERVICE	
All Funds	75,000.00	Total	Approved by, .....
			.....
			.....

	Fargo
	Duluth
	Winona
	Hibbing
	Brainerd

\*NOTE: CUSTOMER WARRANTS THAT THE EQUIPMENT IS FREE OF ANY LIENS, SECURITY INTERESTS & ENCUMBRANCES.

Proposal By:

---

AKO ELECTRIC, INC.

KYLE OSMEK

# AKO ELECTRIC, INC.

## KYLE OSMEK



10878 160<sup>th</sup> ST ▪ Glencoe, MN 55336  
Phone: 320.864.5233 ▪ E-mail: k\_osmek@yahoo.com

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December 21, 2017

PROJECT: courthouse light project

AKO ELECTRIC INC., A LICENSED ELECTRICAL CONTRACTOR SUBMITS THE FOLLOWING PROPOSAL TO INCLUDE:

- 2 -type cc wall packs
- 6 -type aa pole lights
- 2 -type aa with tenon adapter
- Labor
- Bucket truck use

**TOTAL PROPOSAL: \$ 7675.00**

Note: no utility rebate included

AKO ELECTRIC INC.

KYLE OSMEK

Acceptance of Proposal: The prices, specification and terms on this proposal are satisfactory and are thereby accepted. You are authorized to do the work as specified.

Authorized signature: \_\_\_\_\_

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

Quotation Policy: If not immediately signed by the potential purchaser, the prices and terms in this quotation will be honored for 10 days from the date the quotation was issued. After 10 days, we reserve the right to change the contents, prices and terms if the quotation to reflect any changes that may have occurred in the market. All work is to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from quoted specifications involving extra costs will become an extra charge over and above the quotation. All agreements will be contingent upon strikes, accidents, or delays beyond our control. Purchaser is to carry fire, tornado, wind, vandalism and theft insurance.

**AMENDMENT TO  
PRIMEWEST HEALTH  
BEHAVIORAL HEALTH PARTICIPATION AGREEMENT**

**THIS AMENDMENT** ("Amendment") is made and entered into effective January 1, 2018 (the "Effective Date"), further amending that certain Behavioral Health Participation Agreement between Prime West Rural Minnesota Health Care Access Initiative, doing business as PrimeWest Health and McLeod County Social Service Center ("CLINIC"), as amended (the "Participation Agreement").

**WHEREAS**, the parties wish to further amend the Participation Agreement in order to modify Appendix A of the Participation Agreement.

**NOW THEREFORE**, in consideration of mutual promises set forth herein and in the Participation Agreement, and other good and valuable consideration, the sufficiency of which is hereby acknowledged, the Participation Agreement is amended as follows:

1. Capitalized terms used but not defined herein shall have the meanings set forth in the Participation Agreement.
2. Appendix A is amended to delete the following:

PrimeWest Health shall pay Clinic for Targeted Case Management (TCM) services provided to Members. PrimeWest Health will reimburse Clinic according to the specific applicable county adult or child rate identified on Exhibit A1. The monthly rates specified in Exhibit A1 shall apply for months during which TCM clients receive TCM services from the county, consistent with the Minnesota Department of Human Services (DHS) fee-for-service practice for TCM services. The TCM reimbursement terms shall commence on January 1, 2017, the Effective Date of this Amendment, and shall continue through December 31, 2017.

3. Appendix A is amended to add the following:

PrimeWest Health shall pay Clinic for Targeted Case Management (TCM) services provided to Members. PrimeWest Health will reimburse Clinic according to the specific applicable county adult or child rate identified in Exhibit A1. The monthly rates specified in Exhibit A1 shall apply for months during which TCM clients receive TCM services from the county, consistent with the Minnesota Department of Human Services (DHS) fee-for-service practice for TCM services. The TCM reimbursement terms shall commence on January 1, 2018, the Effective Date of this Amendment, and shall continue through December 31, 2018.

4. Exhibit A1 to Appendix A is hereby deleted and replaced with the attached Exhibit A1.
5. Except as specifically amended by this Amendment, all provisions of the Participation Agreement shall remain in full force and effect. The Participation Agreement, as amended, shall hereinafter be read as a single, integrated document, incorporating the changes effected by this Amendment. In the event of a conflict between this

Amendment and the Participation Agreement, the terms of this Amendment shall control. This Amendment may be executed in counterparts by the parties, each of which shall be deemed an original and which, when taken together, shall constitute a single instrument.

**IN WITNESS HEREOF**, the parties have executed and delivered this Amendment to the Participation Agreement as of the Effective Date.

**MCLEOD COUNTY SOCIAL  
SERVICE CENTER**

**PRIMEWEST HEALTH**

By Gary Sprynczynatyk

By James Przybilla

Its Human Service Director

Its Chief Executive Officer

Date 12/21/17

Date

**PrimeWest Health**  
**Exhibit A1 - County TCM Rates for 01/01/2018 - 12/31/2018**

<b>CHILDREN</b>	
<b>COUNTY</b>	<b>Adjusted SFY Monthly 2018 Rate*</b>
Beltrami	\$ 800.00
Big Stone	\$ 500.00
Clearwater	\$ 500.00
Douglas	\$ 710.00
Grant	\$ 800.00
Hubbard	\$ 800.00
McLeod	\$ 500.00
Meeker	\$ 789.00
Pipestone	\$ 596.00
Pope	\$ 596.00
Renville	\$ 593.00
Stevens	\$ 727.00
Traverse	\$ 596.00

<b>ADULTS</b>	
<b>COUNTY</b>	<b>Adjusted SFY Monthly 2018 Rate*</b>
Beltrami	\$ 700.00
Big Stone	\$ 400.00
Clearwater	\$ 400.00
Douglas	\$ 400.00
Grant	\$ 511.00
Hubbard	\$ 400.00
McLeod	\$ 400.00
Meeker	\$ 400.00
Pipestone	\$ 409.00
Pope	\$ 400.00
Renville	\$ 400.00
Stevens	\$ 605.00
Traverse	\$ 700.00

\*Notes

**SFY** = State Fiscal Year. **SFY 2018** = January 1, 2018 - December 31, 2018.

**Monthly** = Applicable only to months in which a TCM client receives county services.



## ACCEPTANCE OF XXXXXXXX COUNTY AWARD

ACCEPTANCE OF Child Welfare/Juvenile Justice Screening Grant 2018 Grant award for the January 1, 2018 through December 31, 2018 Child Welfare/Juvenile Justice Screening Grant award available through Minnesota Statutes, §245.4874, subd. 1(12); §60B.157, subd. 1; §60B.176, subd. 2(c); and §60B.293, subd. 6.

Name of County: McLeod

County Project Coordinator: GARY SPONKZY NATIK - Human Service Director

It is understood and agreed by the county board that any funds granted pursuant to this grant award extension for the Child Welfare/Juvenile Justice Screening grant award funded through Children's Mental Health Screening Grant, are to be expended for the purposes set forth in the county award letter dated November 28, 2017 as approved by the Minnesota Commissioner of the Department of Human Services and in accordance with applicable laws and rules. The application and grant award letter are both incorporated into this award by reference. Further it is understood that the budgets, expenditures, and program will be subject to periodic review by the Commissioner. If funds are not being used to implement the approved plan and according to the grant award letter, they may be subject to return or future payment deductions in accordance with Minnesota Statutes, section 256.01, subdivision 2. All payment information is included in the incorporated grant award letter. An amended grant award letter will be issued and must be signed in the event any changes are made to the terms of the grant award.

The receipt of grant funds by the county board assures acceptance by the board of the following responsibilities:

1. Utilization of written personnel policies in assigning and compensating project employees.
2. Compliance with Titles VI and VII of the United States Civil Rights Act of 1964, Americans with Disabilities Act, Minnesota Statutes, chapter 363 and the Minnesota Government Data Practices Act, Minnesota Statutes, chapter 13.
3. Compliance with Workers Compensation insurance coverage requirements of Minnesota Statutes, section 176.181, subdivision 2.
4. Responsibility for any and all claims or causes of action arising from the performance of this grant to the extent provided for in Minnesota Statutes, section 466.01-466.15.
5. Compliance with all applicable federal and state regulations, including, but not limited to, the Single Audit Act (OMB Circular A-133), Debarment and Suspension certifications (45 CFR 92.35) and Federal Cost Principles and Administrative Requirement (OMB Circulars A-87 and A-102).

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

Chairperson: \_\_\_\_\_

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

# State of Minnesota Department of Human Services County Grant Contract

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## RECITALS

THIS GRANT CONTRACT, and amendments and supplements thereto, is between the State of Minnesota, acting through its Department of Human Services, Mental Health Division (hereinafter STATE) and the County of Carver (hereinafter COUNTY), witnesseth that:

WHEREAS, the STATE pursuant to Minnesota Statutes, section 256B.0944 (Children's Mental Health Crisis Services), Minnesota Statutes, section 256.0624 (Adult Mental Health Crisis Services), Minnesota Statutes, section 245.4879 (Children's Mental Health Act, Emergency Services), Minnesota Statutes, section 245.469 (Adult Mental Health Act, Emergency Services), and Minnesota Statutes, section 256.01, subdivision 2(a)(6) is empowered to enter into grant contracts to create and ensure a unified, accountable, comprehensive children and adult mental health system, and

WHEREAS STATE is in need of the following services: Mobile Mental Health Crisis Response Services, and

WHEREAS STATE is permitted to share information with the GRANTEE in accordance with Minnesota Statute, section 13.46, and

WHEREAS, GRANTEE represents that it is duly qualified and willing to perform the services set forth herein,

NOW, THEREFORE, it is agreed:

### **1. COUNTY'S RESPONSIBILITIES. COUNTY shall:**

- 1.1** Work to provide Mental Health Mobile Crisis Response Services (from here-on known as Crisis Services) by performing the tasks and duties described in Attachment A: County's Approved Crisis Response Work Plan (part 4) and Attachment B: Budget (part 6b) of the 2018 Crisis Services application, which are attached and hereby incorporated and the following services:
  - a) Promote the safety and emotional stability of children and adults with emotional disturbances or mental health crises;
  - b) Minimize further deterioration of the child or adult with emotional disturbance or mental health crisis;
  - c) Help each child or adult with an emotional disturbance or mental health crisis to obtain ongoing care and treatment;
  - d) Prevent placement in settings that are more intensive, costly, or restrictive than necessary or inappropriate to meet the child's or adult's needs.

- e) Provide services that are:
  - i. Person centered: the person or family defines the crisis.
  - ii. Recovery and Resiliency Oriented
  - iii. Provided in the least restrictive setting possible based upon an individual and/or family's needs
  - iv. Promoting community stability or a quick return to community
  - v. Culturally responsive and respectful of individual and family beliefs, values, and traditions
  - vi. Timely: The response results in a face-to-face contact within one hour or as quickly as call volume, traffic and road conditions allow.
  - vii. Community-based: response location is based on location of client and their needs.
  - viii. Triage appropriately: those individuals who are at high risk due to situation, location and level of support.
- f) Educate the community and potential users of service on what a mental health crisis involves, when to call for assistance and what to expect from a response team.

**1.2 Mobile mental health crisis response services funded by DHS grants will include, at a minimum, the following services:**

- a) **24 hour telephone screening and triage** for existence of a mental health crisis or emergency as required in the adult and children's Mental Health Acts. (Emergency Services in the Adult Mental Health Act and Emergency Services in the Children's Mental Health Act.)
- b) **Dispatch of mobile crisis response teams** to individuals or families that are dealing with a mental health crisis or emergency.
- c) **Face-to-face crisis assessment** provided to individuals and families that are identified or identify themselves as experiencing a mental health crisis or emergency.
- d) **Face-to-face crisis intervention services** provided to individuals and families that have been assessed as experiencing a mental health crisis or emergency and needing a face-to-face service.
- e) **Community Intervention Services (for adults)** as identified in the Minnesota Health Care Services Program Manual, while not identified in statute, is a Medicaid covered service that can be provided by certified crisis response teams.
- f) **Provision of community stabilization services** to those individuals and families that remain at risk of another crisis and are in need of additional services to avoid future crises.
- g) **Community Stabilization Services** to those individuals and families that remain at risk of another crisis and are in need of additional services to avoid future crises. These services and their requirements are defined in Statutes 256B.0624 and 256B.0944.
- h) **Pre-assessment under 31 minutes.** As this is not a Medical Assistance (MA) covered service, the following criteria must be met for a pre-assessment:
  - i. After a phone screening a caller is determined to be in need of a face to face crisis assessment
  - ii. A responder is dispatched to the location to attempt to complete the face to face assessment.

- iii. Responder is unable to complete the assessment because the interaction at the client's location is less than 33 minutes.
  - iv. Client file must contain documentation of what the responder attempted to do and why the assessment could not be completed.
- i) **Infrastructure for face-to-face crisis response services.** The grant funding associated with the application may be used to provide this service. Infrastructure includes, but is not limited to:
  - i. Hiring, training, and supervising staff people who provide direct services to people experiencing a mental health crisis.
  - ii. Making staff available to respond to those in a crisis (on-call cost).
  - iii. Attendance at required state meetings and state funded trainings.
  - iv. Data gathering and analysis for program improvement and state reports.
  - v. Outreach to social services, schools and the general community.
  - vi. Educating the community about mental health and crisis services.
- j) **Additional Ancillary Services and Expenses.** If the medical assistance approved face-to-face assessment and intervention services have been provided, grant funds may also be used for the following services. These services are intended to be additions to the crisis services listed under Clause 1.2.i) and not to replace the services listed in Clause 1.2ii) or to be provided as stand alone services:
  - i. **Rapid access to prescriber** is a practice of reserving a small number of prescriber appointments to allow people who are in crisis to be seen by a prescriber quickly. If the person who uses the appointment has insurance that will pay for this service, the service is billed and grant funds are not used.
  - ii. **Benefit and Healthcare Linkage** is assistance to the person who experiences a crisis to access the financial and healthcare benefits that they are eligible for.
  - iii. **Travel expenses** allow people in crisis or following a crisis to access hospital or other care.
- k) **Third Party Billing.** All grantees are required to bill third parties for mobile crisis response services.
  - i. Each crisis response program must be certified as a MA crisis provider. Crisis Response providers are expected to bill third party payers before accessing grant funds.
  - ii. Grantees will not be eligible to access grant funding if not MA certified and bill as a crisis response provider for the population that they are serving. The only exception to this are new programs.
  - iii. New programs may use grant funds to plan, hire and train for service provision. Submission of certification application must occur within three months of the grant award.
  - iv. Individuals and families being served should not be billed for crisis service until all other billing options have been exhausted.

- l) **Case Manager Coordination.** Crisis Programs are expected to coordinate services with children's or adult mental health case managers. Informed consent agreements and crisis plan sharing are critical elements of this expectation with case managers. This item must be addressed in the attached work plan which is hereby a part of this contract.
- m) **Crisis Services to Schools (for Crisis Providers who serve children).** Crisis Response Providers who serve children are expected to respond to crisis calls from schools. It is critical that crisis services establish good working relationships with the schools in their service area. Crisis programs should develop crisis protocols including informed consent statements developed with the school. These protocols assist students, school staff and parents when a mental health crisis occurs during school hours. This item must be addressed in the attached work plan which is hereby a part of this contract.
- n) **Law Enforcement & Probation Officers.** It is expected that crisis programs are working with their local law enforcement and probation offices. Data from current crisis programs show few referrals from law enforcement and probation officers. It is critical that these entities are aware of their local crisis program, have good working relationship with their local crisis program, and know how and when to access crisis services. This item must be addressed in the work plan which is hereby a part of this contract.
- o) **Outreach.** Crisis programs are expected to engage in widespread community awareness, outreach and training to schools, law enforcement, libraries, emergency departments, hospitals, and other systems of care and service within regions in order to educate about Mobile Mental Health Crisis Response Services, when and how to access the service, and to offer alternatives to costly and restrictive inpatient stays and emergency department visits. Crisis programs are expected to engage in outreach efforts to the public, and other communities, especially cultural and ethnic minority communities. This item must be addressed in the work plan which is hereby a part of this contract.
- p) **Data Submission and Reporting.**
  - i. **Reporting**
    - 1. Grantees will be expected to be responsible for reporting information regarding the services offered under these grants.
    - 2. The report deadlines are the last day of the month following the end of the quarter. For example, the first quarter in 2018 ends on March 31<sup>st</sup>. The reporting is expected by April 30<sup>th</sup>.
    - 3. The MHIS reporting manual can be found on the DHS Adult Mental Health Website:  
[http://www.dhs.state.mn.us/main/idcplg?IdcService=GET\\_DYNAMIC\\_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=MHIS\\_Home](http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=MHIS_Home)
  - ii. **Submission:**
    - 1. A narrative report will be submitted on progress toward the goals and objectives identified in this grant and a budget report of grant spending with the final version of the data sheet provided after contracting is complete.

2. The submissions should be emailed to  
Dominique.jones@state.mn.us
  3. Grantees must also submit individual adult and children's  
outcomes on the Mental Health Information System (MHIS).
- q) **State Meetings and Trainings.** All grantees will be expected to send representatives to grantee meetings and trainings. Please budget the cost of attending two face-to-face meetings and one video conference for calendar year (CY) 2018.
- r) **Fiscal Management Responsibilities**
- i. **Supplanting.** The use of Mental Health Crisis Grant funds to replace county, tribal or other funds that have been used to provide elements of crisis response services is prohibited.
- s) **Review of Financial Operations:**
- i. Grantees will be expected to inform the STATE of their internal monitoring procedures for the grant funding.
    1. Where the provision of Mental Health Crisis Response Services is subcontracted, the fiscal host county or tribe is responsible for proper accounting and financial recordkeeping by the sub grantee.
  - ii. **Budget and Budget Review.** The program budget summaries submitted in the grant application shall act as the program's approved budget when approved by the STATE.
    1. The operating budget shall be in accordance with the DHS approved budget.
    2. If the grantee (county or tribe) subcontracts Mental Health Crisis Response Services, the grantee must ensure that the subcontractor follows the budget submitted to the state with this contract. The budget should total the State awarded contract amount.
    3. The detail of each subcontractor budget should be maintained on file by the grantee.
    4. Changes within the existing budget can be made without state authorization if the changes are less than 10% of the total crisis budget.
    5. If the changes desired are greater than 10% of the total crisis response grant or to change the approved budget, the fiscal host county should contact the crisis response grant manager:
  - iii. **Audit Requirements.** Grantees must have an up to date accounting procedures manual describing financial management functions.
    1. The crisis response grants must be accounted for under separate funding accounts identifies within the accounting structure.
    2. The accounting system must adequately identify receipts and expenditures for the crisis response grants. The grantees must provide copies of current end of year financial statement if requested.

- iv. **Reporting Irregularities.** Grantees and their sub grantees are responsible for promptly notifying STATE of any illegal acts or irregularities ad of proposed and actual actions, if any. Illegal acts and irregularities include conflicts of interest, falsification of records or reports, and misappropriation of funds or other assets.

**1.3** Ensure all revenue received by COUNTY, its contracted or subcontracted providers shall be managed according to Minnesota Rules chapter 9535.1740, subp.3.

**1.4** Have written policy and procedures governing their accounting and operational procedures.

**1.5** Ensure that all contracts entered into under this agreement are written to comply with Minn. Stat. 245.466, subd. 3 (<https://www.revisor.mn.gov/statutes/?id=245.466>) , and 256.0112 (<https://www.revisor.mn.gov/statutes/?id=256.0112>).

**1.6** Have a transition plan that complies with Minn. Stat. 245.466 subd. 3a (<https://www.revisor.mn.gov/statutes/?id=245.466>).

**1.7** Include persons with mental illness and tribal organizations of the county/region in the development, implementation, and evaluation of all Crisis Grant Plans.

**1.8** Ensure that Crisis Services are planned and administered according to Minn. Stat. 256B.0944 and 256B.0624.

**1.9** Ensure their contracted providers bill eligible insurance before accessing Crisis Services grant funding.

**1.10** Ensure that all required data regarding Crisis Services is reported.

**1.11** County and County subcontractors will bill this crisis grant before billing an individual or family for any services that may be covered by this grant funding.

## **2. CONSIDERATION AND TERMS OF PAYMENT.**

**2.1 Consideration.** Consideration for all services performed and goods or materials supplied by COUNTY pursuant to this grant contract shall be paid by the STATE as follows:

(a.) **Compensation.** COUNTY will be paid in accordance with Attachment B: County's Approved Crisis Response Budget (part 6b) of the 2018 Crisis Services application, which is attached and hereby incorporated into this contract. STATE will not compensate COUNTY for any expenses in excess of the total annual budget amounts. COUNTY's expenses are determined on a cash basis which recognizes the expense when it is paid by the COUNTY.

All expenditures must be for services, or items necessary for the delivery of those services. "Capital" purchases are prohibited; however exceptions to the prohibition of capital purchases may be granted on a case-by-case basis. The exception request must be submitted in writing.

Capital purchases are defined as something which has a useful life of more than one year and a per-unit acquisition cost which exceeds \$10,000 and is 1) land, buildings (facilities), equipment, and intellectual property (including software) whether acquired by purchase, construction, manufacture, lease-purchase, exchange, or through capital leases; or 2) additions, improvements, modifications, replacements, rearrangements, reinstallations, renovations or alterations of the items listed above that materially increase their value or useful life (not ordinary repairs and maintenance).

The COUNTY must seek permission from the STATE, for a significant budget change. The change must be requested using a Budget Revision Form. A significant change is defined as a 10% deviation from the Budget in Attachment B.

(b.) Reimbursement. Reimbursement for travel and subsistence expenses actually and necessarily incurred by COUNTY'S performance of this grant contract shall be no greater amount than provided in the current Commissioner's Plan (which is incorporated by reference) promulgated by the Commissioner of Minnesota Management and Budget. COUNTY shall not be reimbursed for travel and subsistence expense incurred outside the State of Minnesota unless it has received prior written approval for such out of state travel from the STATE.

(c.) Total obligation. The total obligation of the STATE for all compensation and reimbursements to COUNTY shall not exceed eight hundred seventy-three thousand dollars (\$873,000.00).

The Total Obligation will be allocated as follows:

Carver County First Street Center: \$700,000

McLeod: \$173,000.00

(d.) For compensation payable under this grant contract, which is subject to withholding under state or federal law, appropriate amounts will be deducted and withheld by the State as required.

## 2.2. Terms of Payment

(a.) Compensation shall be one cash advance of \$218,250 (equal to one calendar quarter) followed by quarterly cost reimbursement based on the previous quarter's expenses as documented by receipts, invoices, travel vouchers, and time sheets.

If actual expenditures of the COUNTY are less than provided in the approved program line item budget at the end of the grant contract's term, the STATE shall reduce the final payment so as not to exceed expenditures. COUNTY will not be eligible for an advance more often than once in this contract period.

(b.) Please document the need for the Advance given to the County: **To assure no interruption in crisis service.**

(c.) Payments shall be made by the STATE promptly after COUNTY'S presentation of invoices for services performed and acceptance of such services by the STATE'S authorized agent pursuant to Clause 7. Invoices shall be submitted using the DHS-2895 Form process, as described in the most recent bulletin of the *DHS Summarizes Mental Health Grant Fiscal Reporting Requirements* bulletin and *Changes to DHS BRASS Manual for Calendar Years 2016-2017*. Expenditures shall be reported on the quarterly SEAGR report (DHS-2557) and on the BRASS-Based Grant Fiscal Report (DHS-2895). The COUNTY must use the DHS-2895 form specific to their grant. Invoice submission through the 2895 process shall act as a certification by the County that the expenses reported are allowable.

**3. CONDITIONS OF PAYMENT.** All services provided by COUNTY pursuant to this grant contract shall be performed to the reasonable satisfaction of the STATE, and in accord with all applicable federal, state, and local laws, ordinances, rules and regulations. COUNTY shall not receive payment for work found by the STATE to be unsatisfactory, or performed in violation of federal, state or local law, ordinance, rule or regulation.

**4. PAYMENT RECOUPMENT.** The COUNTY must reimburse the STATE upon demand or the STATE may deduct from future payments under this grant contract any amounts paid by the STATE, under this or any previous grant contract, for which invoices and progress reports have not been received, or for which the COUNTY'S books, records or other documents are not sufficient to clearly substantiate that those amounts were used by the COUNTY to perform grant services and in accordance with Minn. Stat. 245.483 (<https://www.revisor.mn.gov/statutes/?id=245.483>).

**5. TERMS OF GRANT CONTRACT.** This grant contract shall be effective on January 1, 2018, or upon the date that the final required signature is obtained by the STATE, pursuant to Minnesota Statutes, section 16C.05, subdivision 2, whichever occurs later, and shall remain in effect through December 31, 2018, or until all obligations set forth in this grant contract have been satisfactorily fulfilled, whichever occurs first. COUNTY understands that NO work should begin under this grant contract until ALL required signatures have been obtained. STATE will notify COUNTY when all required signatures have been obtained. The COUNTY shall have a continuing obligation, after said grant period, to comply with the following provisions of grant clauses: 10. Liability; 11. State Audits; 12. Information Privacy and Security; 13. Intellectual Property Rights; and 17. Jurisdiction and Venue.

## **6. CANCELLATION.**

**6.1. For Cause or Convenience.** This grant contract may be cancelled by the STATE or COUNTY at any time, with or without cause, upon thirty (30) days written notice to the other party. In the event of such a cancellation, COUNTY shall be entitled to payment, determined on a pro rata basis, for work or services satisfactorily performed. The STATE has the right to suspend or terminate this grant contract immediately when the STATE deems the health or welfare of the service recipients is endangered, when

the STATE has reasonable cause to believe that the COUNTY has breached a material term of the grant contract, or when COUNTY'S non-compliance with the terms of the grant contract may jeopardize federal financial participation.

**6.2. Insufficient Funds.** The STATE may immediately terminate this grant contract if it does not obtain funding from the Minnesota Legislature, or other funding source; or if funding cannot be continued at a level sufficient to allow for the payment of the services covered here. Termination will be by written notice to the COUNTY. The STATE is not obligated to pay for any services that are provided after notice and effective date of termination. However, the COUNTY will be entitled to payment, determined on a pro rata basis, for services satisfactorily performed to the extent that funds are available. The STATE will not be assessed any penalty if the grant contract is terminated because of the decision of the Minnesota Legislature, or other funding source, not to appropriate funds. The STATE must provide the COUNTY notice of the lack of funding within fifteen (15) days of the STATE'S receiving that notice.

**6.3. Breach.** Notwithstanding clause 6.1., upon STATE'S knowledge of a curable material breach of the grant contract by COUNTY, STATE shall provide COUNTY written notice of the breach and thirty (30) days to cure the breach. If COUNTY does not cure the breach within the time allowed, COUNTY will be in default of this grant contract and STATE may cancel the grant contract immediately thereafter. If COUNTY has breached a material term of this grant contract and cure is not possible, STATE may immediately terminate this grant contract.

## **7. AUTHORIZED REPRESENTATIVES and RESPONSIBLE AUTHORITY.**

**7.1. State.** The STATE'S authorized representative for the purposes of administration of this grant contract is Dominique Jones, Dominique.Jones@state.mn.us or his successor. Such representative, acting on behalf of the STATE, shall have final authority for acceptance of COUNTY'S services and if such services are accepted as satisfactory, shall so certify on each invoice submitted pursuant to Clause 2.2.2. All notices required under this grant contract shall be made to the Authorized Representative. If the STATE'S Authorized Representative changes at any time during this grant contract, STATE will notify COUNTY in a reasonable amount of time.

**7.2. County.** The COUNTY'S Authorized Representative is \_\_\_\_\_ or his successor. If the COUNTY'S Authorized Representative changes at any time during this grant contract, the COUNTY must immediately notify the STATE. All notices required under this grant contract shall be made to the Authorized Representative.

**8. ASSIGNMENT.** COUNTY will not assign, transfer or subcontract any rights or obligations under this grant contract without the prior written consent of the STATE, except to the extent a subcontract is explicitly listed in Attachment A, the Approved Crisis Response Work Plan.

**9. AMENDMENTS.** Any amendments to this grant contract shall be in writing, and shall be executed by the same parties who executed the original grant contract, or their successors in office.

**10. LIABILITY.** To the extent provided for in Minnesota Statutes, section 466.01 to 466.15, the COUNTY agrees to be responsible for any and all claims or causes of action arising from the performance of this grant contract by COUNTY or COUNTY'S agents or employees. This clause shall not be construed to bar any legal remedies COUNTY may have for the STATE'S failure to fulfill its obligations pursuant to this grant.

**11. STATE AUDITS.** Under Minnesota Statutes, section 16C.05, subdivision 5 (<https://www.revisor.mn.gov/statutes/?id=16C.05>), the books, records, documents, and accounting procedures and practices of the COUNTY and its employees, agents, or subcontractors relevant to this grant contract shall be made available and subject to examination by the STATE, including the contracting Agency/Division, Legislative Auditor, and State Auditor for a minimum of six years from the end of this grant contract.

## **12. INFORMATION PRIVACY AND SECURITY.**

- A. It is expressly agreed that STATE will not be disclosing or providing information protected under the Minnesota Government Data Practices Act, Minnesota Statutes Chapter 13, (the "Data Practices Act") as "not public data" on individuals to COUNTY under this grant contract. "Not public data" means any data that is classified as confidential, private, nonpublic, or protected nonpublic by statute, federal law or temporary classification. Minn. Stat. § 13.02, subd. 8a.
- B. It is expressly agreed that COUNTY will not create, receive, maintain, or transmit "protected health information", as defined in the Health Insurance Portability Accountability Act ("HIPAA"), 45 C.F.R. § 160.103, on behalf of STATE for a function or activity regulated by 45 C.F.R. 160 or 164. Accordingly, COUNTY is not a "business associate" of STATE, as defined in HIPAA, 45 C.F.R. § 160.103 as a result of, or in connection with, this grant contract. Therefore, COUNTY is not required to comply with the privacy provisions of HIPAA as a result of, or for purposes of, performing under this grant contract. If COUNTY has responsibilities to comply with the Data Practices Act or HIPAA for reasons other than this grant contract, COUNTY will be responsible for its own compliance.

## **13. Intellectual Property Rights.**

**Definitions.** Works means all inventions, improvements, discoveries (whether or not patentable or copyrightable), databases, computer programs, reports, notes, studies, photographs, negatives, designs, drawings, specifications, materials, tapes, and disks conceived, reduced to practice, created or originated by the COUNTY, its employees, agents, and subcontractors, either individually or jointly with others in the performance of the grant contract. Works includes "Documents." Documents are the originals of any data bases, computer programs, reports, notes, studies, photographs, negatives,

designs, drawings, specifications, materials, tapes, disks, or other materials, whether in tangible or electronic forms, prepared by the COUNTY, its employees, agents, or subcontractors, in the performance of this grant contract.

**Ownership.** The STATE owns all rights, title, and interest in all of the intellectual property, including copyrights, patents, trade secrets, trademarks, and service marks in the Works and Documents created and paid for under this grant contract. The Works and Documents will be the exclusive property of the STATE and all such Works and Documents must be immediately returned to the STATE by the COUNTY upon request of STATE. To the extent possible, those Works eligible for copyright protection under the United States Copyright Act will be deemed to be "works made for hire." If using STATE data, COUNTY must cite the data, or make clear by referencing that STATE is the source. For clarity, COUNTY may maintain copies of records and Works and Documents it creates under this grant contract.

### **Responsibilities.**

**Assignment of Rights.** Whenever any Works or Documents (whether or not patentable) are made or conceived for the first time or actually or constructively reduced to practice by the COUNTY, including its employees and subcontractors, and are created and paid for under this grant contract, the COUNTY will assign all right, title, and interest it may have in the Works and the Documents to the STATE.

**Filing and recording of ownership interests.** The COUNTY must, at the request of the STATE, execute all papers and perform all other acts necessary to transfer or record the STATE's ownership interest in the Works and Documents created and paid for under this grant contract. The COUNTY must perform all acts, and take all steps necessary to ensure that all intellectual property rights in these Works and Documents are the sole property of the STATE, and that neither COUNTY nor its employees, agents, or subcontractors retain any interest in and to these Works and Documents.

**Duty not to Infringe on intellectual property rights of others.** The COUNTY represents and warrants that the Works and Documents created and paid for under this grant contract do not and will not infringe upon any intellectual property rights of other persons or entities. Notwithstanding Clause 10, the COUNTY is liable for any and all claims or causes of action arising brought against the STATE to the extent that it is based on a claim that all or part of these Works or Documents infringe upon the intellectual property rights of others. The COUNTY will be responsible for payment of any and all such claims, demands, obligations, liabilities, costs, and damages, including but not limited to, attorney fees. This remedy of the STATE will be in addition to and not exclusive of other remedies provided by law.

**14. WORKERS' COMPENSATION.** The COUNTY certifies that it is in compliance with Minnesota Statute, section 176.181, subdivision 2 (<https://www.revisor.mn.gov/statutes/?id=176.181>), pertaining to workers' compensation insurance coverage. The COUNTY's employees and agents will not be considered employees of the STATE. Any claims that may arise under the Minnesota Workers' Compensation Act on behalf of these employees or agents and any claims made by any third party as a consequence of any act or omission on the part of these employees or agents are in no way the STATE's obligation or responsibility.

**15. VOTER REGISTRATION REQUIREMENT.** COUNTY certifies that it will comply with Minnesota Statutes, section 201.162 (<https://www.revisor.mn.gov/statutes/?id=201.162>) by providing voter registration services for its employees and for the public served by the COUNTY.

**16. OWNERSHIP OF EQUIPMENT.** The STATE shall have the right to require transfer of all equipment purchased with grant funds (including title) to the STATE or to an eligible non-STATE party named by the STATE. This right will normally be exercised by the STATE only if the project or program for which the equipment was acquired is transferred from one grantee to another.

**17. JURISDICTION AND VENUE.** This grant contract, and amendments and supplements thereto, shall be governed by the laws of the State of Minnesota. Venue for all legal proceedings arising out of this grant contract, or breach thereof, shall be in the state or federal court with competent jurisdiction in Ramsey County, Minnesota.

**18. WAIVER.** If either party fails to enforce any provision of this grant contract, that failure does not waive the provision or the party's right to enforce it.

**19. CONTRACT COMPLETE.** This grant contract, and its attachments, contains all negotiations and agreements between the STATE and the COUNTY. No other understanding regarding this grant contract, whether written or oral may be used to bind either party.

## **20. OTHER PROVISIONS.**

20.1. COUNTY agrees that no religious based counseling shall take place under the auspices of this grant contract.

20.2. If the COUNTY has an independent audit, a copy of the audit shall be submitted to the STATE.

20.3. COUNTY must comply with all applicable requirements of the Open Meeting Law in Minnesota Statutes chapter 13D (<https://www.revisor.mn.gov/statutes/?id=13D>).

20.4. COUNTY must comply with, and ensure that its subcontractors comply with, the Minnesota Office of Grants Management policies, including specifically policies 08-06, 08-10, and 08-13 (<https://mn.gov/admin/government/grants/policies-statutes-forms/>).

20.5. Payment to Subcontractors. (If applicable) As required by Minnesota Statutes, section 471.425, the COUNTY must pay all subcontractors, according to the terms of the contract or, if no contract terms apply, within the standard payment period unless the COUNTY in good faith disputes the obligation. Standard payment period is defined in Minnesota Statutes, section 471.425, subdivision 2 (<https://www.revisor.mn.gov/statutes/?id=471.425>).

IN WITNESS WHEREOF, the parties have caused this grant contract to be duly executed intending to be bound thereby.

APPROVED:

**1. STATE ENCUMBRANCE VERIFICATION**

*Individual certifies that funds have been encumbered as required by Minnesota Statutes, chapter 16A and section 16C.05.*

By: \_\_\_\_\_

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

Grant No: \_\_\_\_\_

**2. COUNTY**

*Signatory is authorized by applicable articles, by-laws, resolutions, or ordinances to sign on behalf of the County.*

By: \_\_\_\_\_

Title: \_\_\_\_\_

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

*I certify that the signatories for the County have lawful authority, by virtue of the by-laws or a resolution, to bind the County to the terms of this grant contract.*

*(Attorney for County)*

By: \_\_\_\_\_

Title: \_\_\_\_\_

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

**3. STATE AGENCY**

**By (with delegated**

authority): \_\_\_\_\_  
authority): \_\_\_\_\_

Title: \_\_\_\_\_  
Title: \_\_\_\_\_

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

**Distribution:**

**Agency - Original (fully executed) grant contract**

**County**

**State Authorized Representative**



\*\*\*\*\* McLeod County IFS \*\*\*\*\*



POOL

12/20/17

3:00PM

Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Page 1

Print List in Order By: 2      1 - Fund (Page Break by Fund)      Page Break By: 1      1 - Page Break by Fund  
2 - Department (Totals by Dept)      2 - Page Break by Dept  
3 - Vendor Number  
4 - Vendor Name

Explode Dist. Formulas Y

Paid on Behalf Of Name  
on Audit List?: N

Type of Audit List: D      D - Detailed Audit List  
S - Condensed Audit List

Save Report Options?: N

\*\*\*\*\* McLeod County IFS \*\*\*\*\*



POOL

12/20/17 3:00PM

1 GENERAL REVENUE FUND

Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Page 2

Vendor Name		Rpt	Warrant Description		Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
485	DEPT			COUNTY PUBLIC HEALTH NURSING		
	4333 MEEKER-MCLEOD-SIBLEY CHS					
60	01-485-000-0000-6850		29,148.00	MCLEOD CONTRIBUTION CHS		PAYMENTS TO OTHER AGENCIES
	4333 MEEKER-MCLEOD-SIBLEY CHS		29,148.00	1 Transactions		
485	DEPT Total:		29,148.00	COUNTY PUBLIC HEALTH NURSING	1 Vendors	1 Transactions
1	Fund Total:		29,148.00	GENERAL REVENUE FUND		1 Transactions

\*\*\*\*\* McLeod County IFS \*\*\*\*\*



POOL

12/20/17 3:00PM  
3 ROAD & BRIDGE FUND

Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Page 3

Vendor Name		Rpt	Warrant Description	Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Amount	Service Dates	Paid On Bhf # On Behalf of Name
320	DEPT				
	4063 PCI ROADS LLC				
58	03-320-000-0000-6641		184,075.09	PAYMENT #3 CSAH 3 CONCRETE	290101 STATE AID-REGULAR CONSTRUCTION
59	03-320-000-0000-6643		2,306.15	PAYMENT #3 CSAH 3 CONCRETE	291200 COUNTY ROAD CONSTRUCTION
	4063 PCI ROADS LLC		186,381.24	2 Transactions	
320	DEPT Total:		186,381.24	HIGHWAY CONSTRUCTION	1 Vendors 2 Transactions
3	Fund Total:		186,381.24	ROAD & BRIDGE FUND	2 Transactions

\*\*\*\*\* McLeod County IFS \*\*\*\*\*



POOL

12/20/17 3:00PM

5 SOLID WASTE FUND

Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Page 4

	<u>Vendor Name</u>		<u>Rpt</u>	<u>Amount</u>	<u>Warrant Description</u>		<u>Invoice #</u>	<u>Account/Formula Description</u>	
	<u>No.</u>	<u>Account/Formula</u>	<u>Accr</u>		<u>Service Dates</u>		<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>	
391	DEPT				SOLID WASTE TIP FEE				
	4147	WEST CENTRAL SANITATION INC							
1		05-391-000-0000-6258		1,627.94	COUNTY & SCHOOL COLLECTION		11068931	SCHOOL RECYCLING	
					11/01/2017	11/30/2017	0		
	4147	WEST CENTRAL SANITATION INC		1,627.94	1 Transactions				
391	DEPT Total:			1,627.94	SOLID WASTE TIP FEE		1 Vendors	1 Transactions	
393	DEPT				MATERIALS RECOVERY FACILITY				
	4147	WEST CENTRAL SANITATION INC							
2		05-393-000-0000-6259		31.40	RURAL RDU COLLECTION		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
3		05-393-000-0000-6259		141.30	BISCAY COLLECTION		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
4		05-393-000-0000-6259		992.24	BROWNTON COLLECTION		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
5		05-393-000-0000-6259		73.64	BROWNTON MUD COLLECTION		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
6		05-393-000-0000-6259		7.05	VALET 1609 KNIGHT		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
7		05-393-000-0000-6259		286.67	GLENCOE MUD COLLECTION		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
8		05-393-000-0000-6259		7,024.18	GLENCOE COLLECTION		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
9		05-393-000-0000-6259		7.05	VALET 1023 LEWIS		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
10		05-393-000-0000-6259		14.10	VALET 1127 LEWIS		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
11		05-393-000-0000-6259		7.05	VALET 1169 OAKWOOD		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
12		05-393-000-0000-6259		7.05	VALET 362 SCHOOL		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
13		05-393-000-0000-6259		14.10	VALET 546 SCHOOL		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
14		05-393-000-0000-6259		7.05	VALET 556 LYNN		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
15		05-393-000-0000-6259		7.05	VALET 926 HASSAN		11068931	RECYCLING	
					11/01/2017	11/30/2017	0		
16		05-393-000-0000-6259		7.05	VALET 168 HAYDEN		11068931	RECYCLING	

\*\*\*\*\* McLeod County IFS \*\*\*\*\*



POOL

12/20/17 3:00PM

5 SOLID WASTE FUND

Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Page 5

Vendor	Name		Rpt		Warrant Description	Invoice #	Account/Formula Description
No.	Account/Formula		Accr	Amount	Service Dates	Paid On Bhf #	On Behalf of Name
					11/01/2017 11/30/2017	0	
17	05-393-000-0000-6259			7.05	VALET 1223 BRAD	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
18	05-393-000-0000-6259			7.05	VALET 168 FLORIDA	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
19	05-393-000-0000-6259			7.05	VALET 325 WASHINGTON	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
20	05-393-000-0000-6259			7.05	VALET 332 HWY 7	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
21	05-393-000-0000-6259			7.05	VALET 352 SCHOOL RD	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
22	05-393-000-0000-6259			7.05	VALET 420 GROVE	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
23	05-393-000-0000-6259			7.05	VALET 435 WASHINGTON	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
24	05-393-000-0000-6259			7.05	VALET 450 DALE	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
25	05-393-000-0000-6259			7.05	VALET 561 GLEN	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
26	05-393-000-0000-6259			3,450.56	MUD COLLECTION	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
27	05-393-000-0000-6259			18,676.72	RDU COLLECTION	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
28	05-393-000-0000-6259			7.05	VALET 1229 BRD	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
29	05-393-000-0000-6259			7.05	VALET 132 COOLE	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
30	05-393-000-0000-6259			7.05	VALET 177 4TH	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
31	05-393-000-0000-6259			7.05	VALET 384 LARSON	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
32	05-393-000-0000-6259			7.05	VALET 430 GROVE	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
33	05-393-000-0000-6259			7.05	VALET 456 SHADY	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
34	05-393-000-0000-6259			7.05	VALET 512 K AY	11068931	RECYCLING
					11/01/2017 11/30/2017	0	
35	05-393-000-0000-6259			7.05	VALET 539 JURON	11068931	RECYCLING
					11/01/2017 11/30/2017	0	

\*\*\*\*\* McLeod County IFS \*\*\*\*\*



POOL

12/20/17 3:00PM

5 SOLID WASTE FUND

Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Page 6

Vendor	Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
36	05-393-000-0000-6259		VALET 656 JUUL 11/01/2017 11/30/2017	11068931 0	RECYCLING
37	05-393-000-0000-6259		VALET 851 MAIN 11/01/2017 11/30/2017	11068931 0	RECYCLING
38	05-393-000-0000-6259		VALET 1005 PRAIRIE 11/01/2017 11/30/2017	11068931 0	RECYCLING
39	05-393-000-0000-6259		VALET 1119 LEWIS 11/01/2017 11/30/2017	11068931 0	RECYCLING
40	05-393-000-0000-6259		VALET 1108 JEFFERSON 11/01/2017 11/30/2017	11068931 0	RECYCLING
41	05-393-000-0000-6259		VALET 201 4TH 11/01/2017 11/30/2017	11068931 0	RECYCLING
42	05-393-000-0000-6259		VALET 266 1ST AVE 11/01/2017 11/30/2017	11068931 0	RECYCLING
43	05-393-000-0000-6259		VALET 336 HWY 7 11/01/2017 11/30/2017	11068931 0	RECYCLING
44	05-393-000-0000-6259		VALET 510 MONROE 11/01/2017 11/30/2017	11068931 0	RECYCLING
45	05-393-000-0000-6259		VALET 968 HAYDEN 11/01/2017 11/30/2017	11068931 0	RECYCLING
46	05-393-000-0000-6259		VALET 495 OTTER 11/01/2017 11/30/2017	11068931 0	RECYCLING
47	05-393-000-0000-6259		LP MUD COLLECTION 11/01/2017 11/30/2017	11068931 0	RECYCLING
48	05-393-000-0000-6259		LP RDU COLLECTION 11/01/2017 11/30/2017	11068931 0	RECYCLING
49	05-393-000-0000-6259		VALET 200 JUNIPER 11/01/2017 11/30/2017	11068931 0	RECYCLING
50	05-393-000-0000-6259		PLATO RDU COLLETION 11/01/2017 11/30/2017	11068931 0	RECYCLING
51	05-393-000-0000-6259		PLATO VALET & 16 MCLE 11/01/2017 11/30/2017	11068931 0	RECYCLING
52	05-393-000-0000-6259		VALET 313 GROVE 11/01/2017 11/30/2017	11068931 0	RECYCLING
53	05-393-000-0000-6259		SL MUD COLLECTION 11/01/2017 11/30/2017	11068931 0	RECYCLING
54	05-393-000-0000-6259		SL RDU COLLECTION 11/01/2017 11/30/2017	11068931 0	RECYCLING
55	05-393-000-0000-6259		STEWART RDU COLLECTION	11068931	RECYCLING

\*\*\*\*\* McLeod County IFS \*\*\*\*\*



POOL  
12/20/17 3:00PM  
5 SOLID WASTE FUND

Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

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	<u>Vendor Name</u>		<u>Rpt</u>	<u>Warrant Description</u>		<u>Invoice #</u>	<u>Account/Formula Description</u>
	<u>No.</u>	<u>Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
56		05-393-000-0000-6259		105.20	11/01/2017 11/30/2017 WINSTED MUD COLLECTION	0 11068931	RECYCLING
57		05-393-000-0000-6259		2,942.18	11/01/2017 11/30/2017 WINSTED RDU COLLECTION	0 11068931	RECYCLING
	4147	WEST CENTRAL SANITATION INC		38,493.74	11/01/2017 11/30/2017 56 Transactions	0	
393	DEPT Total:			38,493.74	MATERIALS RECOVERY FACILITY	1 Vendors	56 Transactions
5	Fund Total:			40,121.68	SOLID WASTE FUND		57 Transactions
	Final Total:			255,650.92	4 Vendors	60 Transactions	

POOL  
12/20/17 3:00PM

\*\*\*\*\* McLeod County IFS \*\*\*\*\*



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Page 8

Recap by Fund

<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>
1	29,148.00	GENERAL REVENUE FUND
3	186,381.24	ROAD & BRIDGE FUND
5	40,121.68	SOLID WASTE FUND
All Funds	255,650.92	Total

Approved by, .....  
.....  
.....

# Technology Proposal

---

1st Judicial District

McLeod County - Court Room Technology  
Upgrade

12/22/2017

Wayne Lusthoff II

[wayne.lusthoff@ispaceenvironments.com](mailto:wayne.lusthoff@ispaceenvironments.com)

612.238.4485

# SCOPE OF WORK

1<sup>st</sup> Judicial – McLeod County  
Courtroom 2 audio  
12/22/17

**Display:**

No displays are part of this design.

**Sources:**

No sources are part of this design.

**Audio:**

iSpace will install a new DSP, Digital Signal Processor, to run all the audio information through. This system will allow two telephone lines to be brought into the courtroom. Calls will be initiated and controlled via the touch panel at the Clerk station. iSpace will also install a new wireless microphone system. There will be one lapel and one handheld microphone for use in the courtroom.

New wired, gooseneck microphones will be installed at the Judge, Clerk, witness stand, and two at each of the two attorney tables. The microphones at the attorney tables will be permanent and will not be able to be moved or muted, other than from the touch panels.

There will be new speakers installed for the Judge, Clerk, Reporter, two attorney tables and Witness locations. These are individual speakers and volume will be controlled from the touch panels.

iSpace will install four (4) new ceiling speaker to replace the existing speakers.

**Audio Conferencing:**

The DSP will allow for customer provided telephone lines to be installed in the courtroom. The calls will be controlled via the touch panels at the judge or clerk stations.

**Video Conferencing:**

No video conferencing is part of this design.

**Control:**

10" touch panel will be placed at the Clerk station. These will control all aspects of the audio for the room, including the audio calls.

**Networking:**

Customer to provide either VoIP or analog phone service to the AV rack location.

**Racking:**

Existing racking will be re-used,

**De-install:**

iSpace to de-install the existing equipment in the rack and leave on site for customer to properly dispose of or recycle. No additional de-installation is needed for this project.

**Disposal:**

Customer to provide on-site cardboard and garbage disposal for project related trash and recycling.

**Pro-Services:**

iSpace Environments will provide professional services to include Engineering, Project Management, Installation Labor and Programming Labor. Pricing is based on work performed during a standard business day between 8:00 am – 5:00 pm, Monday through Friday. If changes to project timelines require work done after hours or on weekends, a change order will be initiated for OT at a rate of 1.5 times the standard rate. Examples of changes to the timeline that would result in additional charges are:

- Furniture installation completion dates
- Construction delays
- Network drops and live date delays
- Electrical drops and live date delays
- Phone drops and live date delays

Additionally, work is planned to happen in a concurrent schedule. If customer or other contractor interruptions to planned schedule occur, a change order will be initiated to cover additional travel costs and labor hours.

**Travel:**

Unless otherwise specified, travel will be charged on your final invoice within +/- 10% of estimated costs within proposal and

is passed through at iSpace Environments' cost.

**Training:**

Formal training and training materials are not included in the final proposal price unless Platinum Maintenance or Training is purchased separately. Our technicians or Project Manager will provide you with a user run through at the end of installation during signoff.

**Owner Requirements:**

Customer to provide the following to ensure the mutual success of meeting all project deliverables per specified timeline. Delays or changes in providing the below items will result in the initiation of a change order:

- Identified project champion (our main contact)
  - Provides signoffs and approvals
  - Provides confirmation of completion of below requested items
  - Provides additional project contacts to iSpace (furniture, network/IT, phone, GC, etc.)
  - Provides updates to project timeline and communicates changes in other contractors' delivery dates
- Uninterrupted Access to room(s) for 5 days
- Wall backing, conduit and any millwork installed 3 days prior to iSpace's completion date
- Furniture delivered and installed 2 days prior to iSpace's completion date
- Network drops installed and live 5 days prior to iSpace's completion date
- IP addresses assigned by 2 days prior to iSpace's completion date
- Phone lines installed and live 2 days prior to iSpace's completion date
- All iSpace Environments provided IT forms filled out and sent back 5 business days prior to start of installation date
- A specified on-site staging area supplied for the delivery and storage of equipment once installation begins. If this space is a secured space, iSpace will require access to it.

**Support Offering:**

The iSpace Service Contracts are available for an additional purchase, pricing is provided on the summary page of your proposal. Platinum Service Contracts include: unlimited service calls to our Service Hub, unlimited service visits, all replacement parts and labor (excluding consumables like batteries and projector lamps), firmware updates, monthly reporting, training and training materials as well as one preventative maintenance visit per room, per year.

**Change Order Process:**

The purpose of a change order is to make official changes to the existing SOW. Changes, additions or deletions will initiate the need for a change order. Change orders may include additional fees or credits and may impact project completion dates, dependent on scope.

iSpace Environments provides our best estimate of labor costs based on what we know of your project to-date and initially supplied timelines, which include other contractor completion dates. Pricing is based on work performed during a standard business day between 8:00 am – 5:00 pm, Monday through Friday. If changes to the project timelines require work done after hours or on weekends, a change order will be initiated for OT at a rate of 1.5 times the standard rate.

Examples of changes to the timeline that would result in additional charges are:

- Construction delays as a result of another contractor
- Furniture installation completion dates
- Network drops and live date delays
- Electrical drops and live date delays
- Phone drops and live date delays
- Any other delays that prevent iSpace from starting installation per agreed upon timeline

Additionally, work is planned to happen in a concurrent schedule. If customer or other contractor interruptions to planned schedule occur, a change order will be initiated to cover additional travel costs and labor hours.

Once the need for a change order is identified, the iSpace team will present you with a change order document outlining additional costs (or credits) along with an updated SOW detailing what has changed. Work cannot proceed without customer approval of the change. We understand there are time sensitive situations which require all parties to move quickly and make rapid decisions to keep a project on track for timely completion. Our team will do everything they can to assist and work with you during this process, however if purchase orders are required as part of your company's standard operating procedure, iSpace will require receipt of a purchase order prior to work commencement.

Project invoicing will not be delayed during the change order process. Once all work is completed per original scope of work (SOW) and proposal, an invoice will be generated. Change orders costs will be invoiced separately.

Customer Signature			print)			Title			Date
By signing this document, I acknowledge and agree to the above scope of work.									

iSpace Signature			iSpace Name (please print)			Title			Date
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Equipment availability typically has a 2-3 week lead time and is subject to manufacturer availability.

## Court Room



QTY	DESCRIPTION	PRICE
1	<b>CRESTRON TSW-1060-NC-B-S (NO CAM)</b> NO CAMERA - A space-saving wall, lectern, or tabletop touch screen featuring a clean, contemporary appearance with edge-to-edge glass and advanced high-definition Smart Graphics™. Features onboard voice recognition, web browsing, H.264 streaming video, Rava® SIP Intercom, and PoE network power.	\$1,440.22 *
1	CRESTRON A stylish, versatile tabletop mounting kit for the TSW-1060 Touch Screen. - Black	
100	ISpace Environments 23/4p unshielded plenum Cat6 - By The Foot	
6	<b>INNOVOX AE-MicroLift</b> Table-top extender	\$1,935.00 *
120	MSPACE 18/2 Unshielded Plenum - By The Foot	
1	<b>MSPACE AV Cabling &amp; Hardware</b> Stock Cables, connectors, hardware and job supplies.	\$2,000.00
4	<b>SHURE MX415LPDF/S</b> 10" Supercardioid Dualflex Gooseneck Microphone with bi-color status indicator	\$1,345.00 *
400	ISpace Environments 22/2 shielded plenum - BY THE FOOT	
4	SHURE Small Desktop Base with input, switched preamplifier, programmable logic switch and LED. Supports standard and light ring microphones.	
3	<b>SHURE MX418D/C</b> 18 desktop gooseneck condenser mic w/ attached 10' XLR cable, programmable switch, and LED indicator	\$684.78 *



300 ISpace Environments  
22/2 shielded plenum - BY THE FOOT

4 **Sonance PS-C63RTL** \$1,700.00 \*  
6.5" Low Profile In-Ceiling Speaker

80 MSPACE  
18/2 Unshielded Plenum - By The Foot

2 **Sonance Square Adaptor w/ Grille White** \$75.00  
Square Adaptor w/ Grille White

**Court Room Total \$9,180.00**

### Court Room: Rack

QTY	DESCRIPTION	PRICE
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1	<b>BIAMP AMP-A460H</b> This 4-channel, half-rack amplifier is a perfect match for conference rooms equipped with TesiraFORTÉ devices	\$548.78 *
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400 ISpace Environments  
22/2 shielded plenum - BY THE FOOT



1	<b>BIAMP TESIRA AMP-8175R</b> The Tesira AMP-8175R is an AVB/TSN enabled, digital networked, eight-channel amplifier delivering 175 watts per channel.	\$2,621.95
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1	<b>BIAMP TESIRAFORTE AVB VT</b> TesiraFORTÉ DSP fixed I/O server with 12 analog inputs, 8 analog outputs, 8 channels configurable USB audio, 128 x 128 channels of AVB, Sona Acoustic Echo Cancellation (AEC) technology (all 12 inputs), 1 Analog and 2 channel VoIP interface	\$2,437.80
---	--	------------



1	<b>CRESTRON RMC3</b> 3-Series Control System	\$760.87 *
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1	CRESTRON 5-Port PoE Switch power supply provided	
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2	<b>SHURE ULXS14/85</b> Shure ULXS Wireless Receiver with Includes SLX1 bodypack and WL185 Microflex Cardioid Lavalier Microphone	\$1,243.48
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**Court Room: Rack Total \$7,612.88**

**Project Subtotal:      \$16,792.88**

## PRO SERVICES

Labor charges are based on the current Scope of Work (SOW) and discussed timeline. Changes to SOW and/or timeline may result in additional labor charges and travel fees. Delays due to construction are also subject to additional labor fees.

**LABOR:**

**\$10,040.00**

# PROJECT SUMMARY

Equipment:	\$16,792.88
Pro Services:	\$10,040.00
Tax:	\$0.00
Project Total:	\$26,832.88

## Service Hub Care Packages

### Complete Care

☐ Three Year \$7,379.04

☐ One Year \$2,951.62

### Equipment Care

☐ Three Year \$3,001.73

☐ One Year \$1,200.69

### Flex Care - One Year

☐ 100 Hours : \$7,000.00

☐ 40 Hours : \$2,800.00

☐ 20 Hours : \$1,400.00

\*Upon acceptance of a Care Package, additional terms and conditions will be provided.

☐ Training Session and Training Manuals Only \$600.00

☐ Decline Care Coverage

\*iSpace waiver: By declining coverage I agree and understand that all labor repairs and/or replacement parts will be charged at iSpace current rates after the 90 day warranty period expires. The warranty period begins on the day of project sign-off. I also understand that applicable trip fees and shipping fees may apply.

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**Client:**

---

**Date**

---

**Contractor** iSpace Environments

---

**Date**

By signing this proposal, I acknowledge and agree to the terms & conditions included with this proposal on the following page.

# TERMS AND CONDITIONS

1.OFFER AND ACCEPTANCE - This proposal is subject to acceptance within 15 days unless otherwise specified on the document and is subject to the availability of the product listed. Clerical errors are subject to correction.

2.PAYMENT TERMS - The payment terms for iSpace Environments is 30 days from completion of your project.

3.DEPOSIT - A deposit of 50% is required on all orders of \$5,000 or more before the order is placed with the manufacturer(s).

4.DIFFERENT OR ADDITIONAL TERMS - iSpace Environments objects to the inclusion of any different or additional terms proposed by a buyer in his/her purchase order or other response to this offer, and if such different or additional terms are included in buyer's purchase order or other response, buyer's response will be considered as a counteroffer.

5.PRICE AND TERMS OF PAYMENT - Deposit and payment terms are as stated on the proposal. If construction delays result in a delay in installation, buyer is required to remit to iSpace Environments an additional payment in such an amount as to bring total payments to 90% of the contract price. Buyer may hold 4% retainage for incomplete installation. Title to the merchandise passes to the Buyer when the full purchase price and all other charges under this agreement are paid in full. Client agrees to allow iSpace Environments to file a financing statement indicating collateral as "All product and service listed in proposal". In the event of any default in payment, iSpace Environments has the right of repossession of all merchandise.

6.TAXES - Product and service prices do not include sales taxes. Sales taxes will be included upon invoicing unless Buyer provides an exemption certificate with order.

7.CANCELLATIONS & CHANGES - Merchandise ordered can only be cancelled with the consent of iSpace Environments and is subject to a restocking fee.

8.RETURNS - Special order merchandise may be returned only if damaged in shipping. Damaged merchandise will be repaired to the satisfaction of Buyer or replaced.

9.DELIVERY & INSTALLATION - Buyer is responsible for any loss or damage at the job site(s) caused by weather, other trades or fire. Buyer assumes responsibility for the following costs:

- 1.Special packaging & handling
- 2.Overtime premiums on weekend or evening deliveries and installations
- 3.Costs caused by job-related delays such as job-site availability (elevator or construction delays) not under control of iSpace Environments
- 4.Prevaling wage or union labor and related benefits in excess of iSpace Environments' normal rates
- 5.Security and Insurance for product delivered to site
- 6.Installation of any power feeds or communication cables, as these are specifically excluded from this proposal

10. WARRANTY - iSpace Environments hereby assigns to Buyer all assignable warranties of the manufacturer of the products sold under this agreement. iSpace Environments shall not be liable for any incidental, special or consequential damages resulting from defects or non-conformity. iSpace Environments makes no warranty of any kind, express or implied, written or oral, and expressly disclaims any implied warranty of merchantability or fitness for a particular purpose. There are no warranties which extend beyond the description in this proposal, and iSpace Environments neither assumes nor authorized any person to assume for it any other liability. NOTE: Original packaging must be saved in the event that a warranty return is needed. iSpace Environments assumes no responsibility on voided manufacturer warranties due to the loss of original packaging.



1771 Energy Park Drive, Suite 100  
Saint Paul, MN 55108  
www.tierneybrothers.com  
612.331.5500 ♦ 800.933.7337 ♦ Fax - 612.331.3424

Tuesday, December 19, 2017

Karen Messner  
McLeod County

**Proposal for Audio-Visual Service**

**RE:** McLeod Courtroom

**Opportunity Number:** 12731 R1

**Scope of Integration Services**

Summary of Work to be completed by Tierney Brothers, Inc. at **830 E. 11th Street  
Glencoe MN 55336.**

(Please initial if address is correct or provide correct address. \_\_\_\_\_ )

**12731 McLeod County Courts**

The audio system in Court Room 2 will be upgraded. The existing system will be removed including speakers, audio processing, and microphones. The existing equipment rack, assistive listening system, and recording system will remain.

**INPUTS**

Microphones - Seven new flexible gooseneck microphones will be provided at following fixed locations: Judge (1), Witness (1), Attorney table left (2), Attorney table right (2), Clerk (1). Two wireless microphones will be provided for portable use.

There will be two locations for connection of the microphones on the Attorney's tables to allow them to be placed at different locations in the room.

The existing single mic jack in a floor box and the wall mic jack in the jury box will remain and be part of the system.

Microphone Mixing and Processing - The digital signal processor (DSP) will incorporate a gain-sharing automatic microphone mixer to manage the number of open microphones and prevent feedback. The judge's mic will have override priority and selected microphones will be muted during a sidebar.

The DSP will also include a matrix mixer to allow mix-minus signal routing and precision signal synchronization for each loudspeaker zone.

Multi-media Audio - Two line level inputs will be provided to receive audio from a portable evidence cart or laptop computer. These will be in a floor plate along with microphone inputs.

Audio Conference - The DSP will include provision for all microphones to function in a telephone audio conference with a remote location. Both VOiP (voice over IP) and POTS (plain old telephone service) connectivity will be supported.

Sound Masking Generator - The DSP will include a sound masking generator for use during a Judge's sidebar.

#### OUTPUTS

Desktop loudspeakers - Individual desktop loudspeakers will be provided at the following locations: Judge, Witness, Attorney table left, Attorney table right, clerk, and reporter. Signals will be fed to these speakers via a mix-minus matrix which will exclude the area's adjacent microphone in order to maximize gain before feedback.

Headphones - A provision will be made for headphones at the defendant and reporter locations.

Overhead loudspeakers - New overhead speakers will be installed in the existing ceiling locations above the Audience and Jury. Existing ceiling speakers in other locations will be abandoned.

Hearing Assistance - The existing infrared hearing assistance system will be retained.

Court Reporter digital recorder feed - A separate matrix will be provided in the DSP to route selected microphones to an existing multi-channel digital recorder. 4 channels of recording will be supported.

#### TOUCH-PANEL CONTROL SYSTEM

Complex operations taking place in the DSP will be managed by the control system. A touch panel will provide simple user interface. This will include control of microphones levels and teleconferencing. It will be a 7" desktop touch panel located at the Judge's location. The DSP can also be controlled using Biamp Canvas software. Canvas is similar to daVinci which is used in the current system.

We appreciate the opportunity to present this proposal. If you have any questions, please do not hesitate to contact us at your convenience at 612-331-5500. Our fax number is 612-331-3424.

Proposal Prepared By:  
Sales Representative - Missy Johnson  
Sales Engineer - Richard Long

Please initial to acknowledge and authorize the Scope of Integration Services presented here. \_\_\_\_\_



## Quote

Serving the States of: CO | IL | IN | IA | KY | MI | MN | MO | ND | NE | OH | SD | WI

Remit To: 1771 Energy Park Drive, Suite 100 St. Paul, MN 55108  
(612) 331-5500 | (800) 933-7337 | Fax (612) 331-3424  
www.tierneybrothers.com

Page 1 of 2

Quote #	Date
114928	12/18/2017

### Bill To

Accounts Payable  
McLeod County  
830 11th Street East  
Glencoe MN 55336

### Ship To

Karen Messner  
McLeod County - Courthouse  
830 E. 11th Street  
Glencoe MN 55336

\_\_\_ Initial if correct or revise accordingly

\_\_\_ Initial if correct or revise accordingly

Expires	Sales Rep	Contract	Memo
3/18/2018	350 Missy Johnson	MNS-CPV 21594	

Qty	Item	Description	Price	Ext. Price
		McLeod Courtroom (SC) R1		
		-----Audio Equipment-----		
4	Integration Item	AT8615RS Audio Technica desktop base	64.96	259.84
2	ULXS14/85-G3	ULX Wireless Combination System - G3 Frequency	652.08	1,304.16
1	UA221	Passive Antenna Splitter combiner Kit	125.40	125.40
7	MX418S/C	18" Gooseneck Condenser Microphone, Attached - Cardioid	178.70	1,250.90
1	Interface System	Custom Package - floor plate connections for mics and AUX audio, and headphones	361.89	361.89
1	Custom Product Bundle	Biamp audio processor Tesira Server IO with input and output cards, VoIP and POTS phone interfaces	7,522.50	7,522.50
		Owner Furnished Product - existing recording interface unit and Williams Sound Assistive Listening System		
1	Integration Item	CT875 Crown Com Tech DriveCore amplifier 8 channels 75 Watts/channel	955.00	955.00
1	Integration Item	CT475 Crown Com Tech DriveCore amplifier 4 channels 75 Watts/channel	599.82	599.82
		-----Control System-----		
1	Custom Product Bundle	Crestron control System with 7" touch panel	1,799.75	1,799.75
		Owner Furnished Product - existing equipment rack		
		-----Other Equipment and Services-----		
1	Cables, Connectors and Hardware	Custom Package of Cables, Connectors and Hardware	1,109.91	1,109.91
1	Services: Design - State Contract	Services: Design - State Contract (Non Construction) Engineering and Project Management Services 33.78 Hours at \$64.00/Hour	2,162.00	2,162.00



## Quote

Page 2 of 2

Quote #	Date
114928	12/18/2017

Qty	Item	Description	Price	Ext. Price
1	Services - Integration for MN State Contract	State Contract (Non Construction) Installation Services (Non-Union, Non Prevailing Wage; Normal Business Hours). Union and/or Prevailing Wage rate requirement will result in a change order to the client. 37.14 Hours at \$70.00/Hour	2,600.00	2,600.00
1	Programming and Configuration	Programming and Configuration Completed in the Field or In House 28.23 Hours at \$115.00/Hour Includes 90-day Programming Warranty; allowing for modifications to be made to the initial functionality within this time frame at no charge. Appointment times determined by Tierney Brothers. Changes requested after this time will be billable at standard hourly rates.	3,246.00	3,246.00
3	TBI Project Management	Room Training	64.00	192.00
1	EDGE-1YRPM-Ser vice-TBI	Tierney Brothers, Inc. Premium Warranty Plan - Coverage for one year with preventative maintenance.  If tax has not been included on this proposal, pricing does not include Minnesota General Sales Tax under Minnesota Statutes Chapter 297A Section 70 "Exemptions for Governments and Nonprofit Groups." Please inform us if this project will be used for taxable purposes.  If tax has been included on this proposal, we do not have a tax exempt form on file for your account. Please provide a completed Form ST3, Certificate of Exemption if applicable.  * This quotation is for product and services included on the Minnesota State Contract only. * Additional components not available on Contract may be needed for the system to function as designed. * Installation and non contract items provided on separate quotation. The services on this page must be purchased in conjunction with the Integration services on the Contract Release portion of this proposal. * Cabling is a combination of pre-terminated product and bulk cable requiring termination with a specific compression tool. * Manufacturer's warranties only apply to product purchased on State Contract portion of this proposal. * Tierney Brothers, Inc. will assist in any vendor communications to obtain replacements or return product as specified in the Contract.	990.00	990.00

<b>Subtotal</b>	24,479.17
<b>Shipping Cost (UPS Ground)</b>	0.00
<b>Total</b>	\$24,479.17

To accept this quotation, complete the proposal summary page at the end of this document. Please review the terms, conditions and client responsibilities of this proposal in full.

Please inspect product upon delivery. All claims for defective merchandise or errors in shipping must be made within five days after receipt of goods. Clients using their own carriers will be responsible for filing their own freight claims if product is damaged in transit. Returns require an authorization number and must be made within 30 days. Custom orders and "Consumables", such as projector lamps, may not be returned. Returns are subject to restocking fees with the exception of out of box failures and replacements under warranty. Restocking fees varying depending on the product line, expect a minimum charge of 25%.

The information contained within this proposal is supplied to you on a confidential basis and is not for disclosure to any organization without written consent of Tierney Brothers, Inc.

This document is subject to the terms and conditions found here: [www.tierneybrothers.com/SOTC](http://www.tierneybrothers.com/SOTC)



## Quote

Serving the States of: CO | IL | IN | IA | KY | MI | MN | MO | ND | NE | OH | SD | WI

Remit To: 1771 Energy Park Drive, Suite 100 St. Paul, MN 55108  
(612) 331-5500 | (800) 933-7337 | Fax (612) 331-3424  
www.tierneybrothers.com

Quote #	Date
114931	12/18/2017

### Bill To

Accounts Payable  
McLeod County  
830 11th Street East  
Glencoe MN 55336

### Ship To

Karen Messner  
McLeod County - Courthouse  
830 E. 11th Street  
Glencoe MN 55336

\_\_\_ Initial if correct or revise accordingly

\_\_\_ Initial if correct or revise accordingly

Expires	Sales Rep	Contract	Memo
3/18/2018	350 Missy Johnson	Transaction Not Eligible	

Qty	Item	Description	Price	Ext. Price
		McLeod Courtroom (NC) R1		
		Non-Contract Services - This sale is consistent with the "Contract Release Construction Language Modification" associated with the MN State Contract.		
		-----Audio Equipment-----		
3	Integration Item	GSM-1 Astatic isolation mount	85.00	255.00
6	Integration Item	AE-MICROLIFT Innovox table top speaker	339.00	2,034.00
4	Integration Item	AE-4C Innovox ceiling speaker	420.00	1,680.00
1	Services - Integration for MN State Contract	Non Contract Installation Services - Construction Services by a Contract Vendor (Non-Union, Non Prevailing Wage; Normal Business Hours). Union and/or Prevailing Wage rate requirement will result in a change order to the client. 24 Hours at \$75.00/Hour	1,800.00	1,800.00

<b>Subtotal</b>	5,769.00
<b>Shipping Cost (UPS Ground)</b>	170.00
<b>Total</b>	\$5,939.00

To accept this quotation, complete the proposal summary page at the end of this document. Please review the terms, conditions and client responsibilities of this proposal in full.

Please inspect product upon delivery. All claims for defective merchandise or errors in shipping must be made within five days after receipt of goods. Clients using their own carriers will be responsible for filing their own freight claims if product is damaged in transit. Returns require an authorization number and must be made within 30 days. Custom orders and "Consumables", such as projector lamps, may not be returned. Returns are subject to restocking fees with the exception of out of box failures and replacements under warranty. Restocking fees varying depending on the product line, expect a minimum charge of 25%.

The information contained within this proposal is supplied to you on a confidential basis and is not for disclosure to any organization without written consent of Tierney Brothers, Inc.

This document is subject to the terms and conditions found here: [www.tierneybrothers.com/SOTC](http://www.tierneybrothers.com/SOTC)



1771 Energy Park Drive, Suite 100  
St. Paul, MN 55108  
www.tierneybrothers.com

## Responsibilities and Conditions

### Client Responsibilities

Contract a licensed electrician to provide high voltage power connections. The system design will determine if optimum placement of outlets is best achieved before or after the installation of the AV equipment. The assigned Project Manager will communicate the specific to you during the project planning. Tierney Brothers recommends that each projector, TV, plasma, LCD, etc. have a dedicated quad electrical outlet.

Provide Tierney Brothers with any existing system design specifications, diagrams, room drawings or other materials that would facilitate completion of the proposed Scope of Integration Services.

All necessary ceiling tile work involved in the installation, unless an alternative has been indicated in the Scope of Integration Services in this proposal.

Prepare, replace, repair or modify any structural or cosmetic changes that Tierney Brothers has made or needs to make. This includes, but is not limited to, ceiling grids, floor tiles, walls and pre-existing equipment. This does not include repair for accidental damage caused by Tierney Brothers.

Confirm area is ready for installation when scheduled. This includes but is not limited to the room being vacated, physical conditions confirmed and owner furnished equipment (OFE) available. If the area is not prepared for installation when scheduled or the client has not notified Tierney Brothers five business days in advance of any schedule change or installation cancellation, there will be a \$350.00 charge. Rescheduling of the installation will be set for a later date as determined by Tierney Brothers.

TBI will not be responsible for the condition and functionality of any existing OFE during the installation process. This includes de-install and reinstall of OFE. Should existing equipment fail or not work properly with our system design, the customer will have the option of sourcing a TBI approved replacement part or TBI will offer a billable replacement alternative. If OFE malfunction causes delays in the installation timeframe, additional billable labor charges may apply.

Clients purchasing SMART product are responsible for loading all SMART software on the applicable computers and connection of these computers to the SMARTboard prior to any scheduled training sessions.

Complete Customer Configuration Worksheets as requested by Tierney Brothers within five business days. This information is required to properly integrate the new equipment with your existing IT infrastructure.

TBI requires access to customer's computer and network at the time of installation to be able to complete installation and testing of the designed system. Return visits to test equipment and functionality may result in additional charges.

TBI's initial estimates assume all work may be completed using standard ladders. If a lift is required, additional charges will be incurred and presented as part of a change request.

For U of M Installations only: University of Minnesota customers are responsible for contacting their Facilities Management Department to coordinate conduit installation for all A/V wire and cable installations.

### Tierney Brothers Responsibilities (Upon Authorization)

Proceed with ordering the specified equipment and preparing a schedule for completion of the proposed services.

Conduct pre-installation site visit (if necessary) involving the main site contact, site facilities representatives and a Tierney Brothers' project manager or a qualified alternate.

Review scope, terms and conditions of the installation with the client at the pre-installation site visit. This will include, but is not limited to electrical, construction and cosmetic responsibilities.

Basic system training, separate from Professional Development, is included in this proposal. This training will be scheduled and completed by a Tierney Brothers' representative at the end of the project installation.

If Professional Development is part of this proposal, sessions must be scheduled within six months of install completion.

Clients purchasing SMARTboards: After the installation of the SMARTboard is complete, the SMARTboard USB connection will be tested using the Tierney Brothers installer's laptop. After system functionality is confirmed, the USB connection will be hooked into the client's computer if it is present in the space.

For safety reasons, Tierney Brothers will not modify/cut the trays on existing white boards or chalk boards. A solution for mounting over the existing board will be proposed. Any modifications to the existing board would need to be made by the customer prior to the arrival for Tierney Brothers' installation personnel.

### Scheduling

Installations are typically scheduled six to eight weeks from receipt of the customer's purchase order. Custom ordered product may increase the time needed to complete the proposed services.

Standard service and support is limited to Monday through Friday, 8:00 AM to 5:00 PM central standard time, excluding national holidays. Expanded service hours may be available for an additional charge if determined necessary.

This schedule assumes no delays or obstacles will be encountered in gaining access for the installation.

### Site Conditions

Tierney Brothers cannot enter into work in or otherwise disturb any areas containing asbestos.

Tierney Brothers recommends that each Projector, TV, Plasma, LCD, etc. have a duplex receptacle fed off of a dedicated 20 amp circuit available for use. Systems containing multiple racks of amplifiers or other equipment may require additional circuits.

Please initial to acknowledge and authorize the Responsibilities and Conditions presented here. \_\_\_\_\_



1771 Energy Park Drive, Suite 100  
St. Paul, MN 55108  
www.tierneybrothers.com

## Proposal Terms

### Accounting Terms

For installations scheduled to take 30 days or less from the first day on site to the last, Tierney Brothers will invoice the total project in full upon substantial completion. Tierney Brothers reserves the right to bill progressively for installations which are scheduled to take more than 30 days on site. The balance is due Net 30 days from the installation completion date, with 2% interest added to unpaid balance.

### Sales Taxes

All applicable sales tax amounts will be charged on the sale of goods or services according to each governing law and remitted to the proper taxing authority. If your organization is tax exempt, please complete an exemption certificate and return to Tierney Brothers.

### Proposal Changes

If additional products or services are requested prior to receipt of your signed purchase order or quote proposal, Tierney Brothers will provide an updated quote proposal, including a revised scope. If additional products or services are requested after receipt of your signed purchase order or quote proposal, Tierney Brothers will provide a change request quote with the requested equipment and scope to detail the requested changes for your approval.

Upon receipt of your signed purchase order or quote proposal, Tierney Brothers will proceed with the authorized services and invoice in accordance with the purchase order or quote proposal. Verbal agreements will not be processed until confirmation, in writing, has been received.

There may be a 20% to 30% restocking fee plus freight charges for those items ordered which have to be returned to the manufacturer due to customer request or by change of order. Custom order products and certain product lines not typically carried by Tierney Brothers may not be returned.

### Other Terms

#### Installation Warranty

See specific warranty coverage program outlined in this proposal.

Repair or replacement service for TBI installed consumer grade monitors/displays are subject to manufacturer warranty and service. TBI does offer de-install/re-install assistance for vendor warranty repair or replacement at an additional charge.

#### Programming Warranty

The programming warranty is 90 days, starting at the commission of the system. Changes or fixes to the system after this time will be billable at our standard service call rates."

#### Labor Classifications and Assumptions

Unless mutually agreed upon in writing prior to executing this agreement, it is the understanding of both parties that Union and/or Prevailing Wage regulations, specifically those contained in 40 U.S.C. 276a-5, or MN Stat § 177.41-177.44, do not apply to the work to be performed under this contract.

Unless travel charges are specified, this proposal assumes Tierney Brothers, Inc. has local certified, licensed and insured technicians available to complete the integration services. In the event, the job site is located in a geographical area where this does not apply or a specific installation time is requested for which this personnel is not available, additional charges may apply.

All hours for installation are assumed to be between 8am and 5pm (normal business hours) unless specified in this proposal. Request for work outside of normal business hours will be subject to the following increased hourly labor rates:

- Second Shift (3:00pm to 10:00pm) will be billed at one and a half times our standard labor rate.
- Weekend or Holiday hours will be billed at two times our standard labor rate.

Requests for installations outside our normal business hours are subject to approval by the Director of Post Sales Integration.

**NOTICE CONFIDENTIAL INFORMATION** - The information in this proposal is proprietary and strictly confidential. It is intended solely for the use of the named parties. If the reader of this proposal is not the intended recipient or the employee or agent responsible to deliver it to the intended recipient, any dissemination, distribution, copying or other use of the information contained in this document is strictly prohibited. If this has been received in error, please notify the responsible party immediately and then delete this proposal from all data storage devices and destroy all hard copies.

Video recording of a Tierney Brothers SMART Certified Trainer or Professional Development session, and copying or distribution of any printed material supplied by Tierney Brothers Inc., is protected content under copyright licensing and can be used only with express permission from Tierney Brothers, Inc. Any video or digital content created during a training session can be used only within the organization paying for such services and cannot be shared online or distributed in any manner.

*This quotation is valid for a period of 90 days.*

Please initial to acknowledge and authorize the Proposal Terms presented here. \_\_\_\_\_



1771 Energy Park Drive, Suite 100  
St. Paul, MN 55108  
www.tierneybrothers.com  
612.331.5500 ♦ 800.933.7337 ♦ Fax - 612.331.3424

## ***Tierney Brothers Premium Warranty Program***

***Designed for:  
McLeod County***

### **Terms and Conditions**

Tierney Brothers, Inc. warrants the installation you have purchased from Tierney Brothers, Inc. from defects in materials and workmanship, under normal use, during the One Year Premium Warranty period. Normal use is defined as operating the system within its designed specifications. Included in the One Year Premium Warranty the customer will receive:

- Unlimited Phone Support
- On-site service
- Discounts on Lamps and Accessories
- Preventative Maintenance Check

Preventative Maintenance Check will be completed toward the end of the one year warranty period. The warranty period commences on the date of customer signoff, at the completion of the install by Tierney Brothers, Inc.

During the warranty period, Tierney Brothers, Inc. will first work to resolve any problems by troubleshooting over the phone. If Tierney Brothers, Inc. Support Specialists determine that the issue cannot be resolved over the phone, a Technician will be dispatched to your location(s) within 24 hours (if necessary) of the original call (Monday through Friday 8:00am – 5:00pm, excluding national holidays). Customers outside of a 150 mile radius of Tierney Brothers, Inc. are subject to mileage and trip charges. If service is required after the One Year Premium Warranty period has expired, the customer will be billed at Tierney Brothers, Inc. current labor rates. If the customer has purchased a Tierney Brothers, Inc. Extended Maintenance Agreement, that will commence at the end of the One Year Premium Warranty. If you would like additional information regarding Tierney Brothers, Inc. Extended Maintenance Agreements, please contact your Tierney Brothers, Inc. Sales Representative at 612-331-5500.

### **Obtaining Warranty Service**

To obtain warranty service, please use your custom support portal (support.tierneybrothers.com) and contact us via chat, phone, or email:

<https://support.tierneybrothers.com/>

Click here for a short video explaining how to log in to your support portal your first time:

<http://content.jwplatform.com/players/TpGSX21s-kaM9q1Ga.html>

If you have any questions, please email [support@tierneybrothers.com](mailto:support@tierneybrothers.com) or call us at 800-933-7337. You can also call our advanced support line, 855-612-7762.

### **Obtaining Your Preventative Maintenance Check**

Tierney Brothers, Inc. will send out an email 60 days prior to one year warranty expiration requesting the customer go to [www.tierneybrothers.com](http://www.tierneybrothers.com) to schedule their preventative maintenance check. Customers can also call into our Support Specialist at 612-331-5500 or by email at techservice@tierneybrothers.com to schedule a Preventative Maintenance Check. Customer may call to schedule Preventative Maintenance Check prior to the 60 day period if they require it done at an earlier date. Preventative Maintenance Checks are done Monday through Friday 8:00am – 5:00pm. Customer is responsible for providing access for up to 2 hours per room for Preventative Maintenance Check. If Customer doesn't schedule their preventative maintenance check before one year warranty has expired, the Preventative Maintenance Check will be void.

### **Limitations of coverage**

*The following items are excluded from coverage under the warranty:*

- a. Equipment that has been removed or reinstalled in a different location
- b. Damage or other equipment failure due to causes beyond our control including, but not limited to, operator negligence, the failure to maintain the equipment according to the owner's manual instructions, abuse, vandalism, theft, fire, flood, wind, freezing, power failure, inadequate power supply, acts of war or acts of God.
- c. Any utilization of equipment that is inconsistent with either the design of the equipment or the way the manufacturer intended the equipment to be used.



1771 Energy Park Drive, Suite 100  
St. Paul, MN 55108  
www.tierneybrothers.com  
612.331.5500 ♦ 800.933.7337 ♦ Fax - 612.331.3424

***Tierney Brothers Premium Warranty Program***  
***Designed for:***  
***McLeod County***

- d. Premium Warranty covers all hardware related failures. Network or software related failures are not covered under Tierney Brothers, Inc. Premium Warranty.
- e. Operational or mechanical failure which is not reported prior to expiration of this contract.
- f. Equipment where the serial plate attached to the equipment is removed, defaced or made illegible.
- g. Damage resulting from unauthorized repair, software virus, improper electrical wiring and connections.
- h. Existing Owner Furnished equipment.
- i. Lift and Scaffolding rental is not included.

This maintenance contract refers to:  
**McLeod Courtroom**  
**12731 R1**

I have read, understand and agree to the above terms and conditions per the plan elected.

Authorized Signature: \_\_\_\_\_

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



1771 Energy Park Drive, Suite 100  
St. Paul, MN 55108  
www.tierneybrothers.com

McLeod County  
McLeod Courtroom  
12731 R1

Proposal Summary

Please Initial to Accept or Decline  
Please Acknowledge All Proposals  
Accept Decline

<u>McLeod Courtroom</u>			
State Contract Total:	\$	24,479.17	
Non Contract Total:	\$	5,939.00	
<b>Proposal Total:</b>	<b>\$</b>	<b>30,418.17</b>	

The undersigned authorizes Tierney Brothers to proceed in accordance with the proposal including options elected and agrees as a representative of the client to be responsible for payment.

By signing below, the client has read and understands the scope of services and agrees to the client responsibilities and conditions.

Client's Name: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

\*Client's Email Address: \_\_\_\_\_

\*Client's Email Address: \_\_\_\_\_

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

\*Please note, one or more items on your quote may include software. Our vendors require two unique email addresses with different domain names to be submitted with software orders. These email addresses will receive the electronic key codes required to download and install your new software. Please include these two email addresses with your purchase order at the time your order is placed.

**SWCD Drainage Inspector Report**  
**12/26/2017 McLeod County Board Meeting**

**County Ditch #35 Branch #3 Project #112**

**Description:** Replacing cement tile with CPE dual wall, removal of trees.

**Quotes Sent/ Received:**

Borka Excavating	4500.00
Wuetherich Drainage	5180.00
Morris Drainage	Did not receive quote

**Joint Ditch #8 McS Project #111**

**Description:** 4600' Channel Cleanout.

**Quotes Sent/ Received:**

Rickert Excavating	Did not receive quote
Wuetherich Drainage	5640.00

**Joint Ditch #8 McS Project #113**

**Description:** Spot clean out due to obstruction in the channel.

**Quotes Sent/ Received:**

Wuetherich Drainage

# MCLEOD COUNTY DRAINAGE INSPECTION REPORT

**Ditch:** CD 35 Branch 3    **Township:** HALE    **Section:** 8



Received a phone call from Ron Schmanski about a county tile line on the David Dostal property that needed some work done to it. It is suspected that there are tree roots blocking flow, after looking up the tile with a light there are some cracked tiles and tree roots sticking down into the tile. I recommend that we remove the trees and bury the stumps and replace approximately 180' of 18" cement tile line with 18 " dual wall CPE perforated pipe.

**Adam Leske - McLeod County Ditch Inspector**

**DATE \_12-11-2017**



## COMMISSIONER CONSTRUCTION QUOTE SCHEDULE

Ditch Project Information		
Project Name:	CD #35 Branch 3	
Project Number:	2017-112	
Project Information	Replace cement tile on tree line due to tree roots	
Document Date:	December 12, 2017	
Contractor Information		
Name:	Borka Excavating, LLC	
Date Received:	12/14/2017	
Phone Number:	320-583-9319 JAY 320-894-8157 Julene	
Drainage Inspector Information		
Name:	Adam Leske	
Address:	SWCD McLeod County 830 11th st E Glencoe MN, 55336	
Office Phone Number:	320-864-1215	
Cell Phone Number:	507-766-1572	
E-Mail:	<a href="mailto:adam.leske@co.mcleod.mn.us">adam.leske@co.mcleod.mn.us</a>	
Authorized Representative(s):	Ryan Freitag	(320) 864-1214 Office
		(320) 583-5893 - Cell
		<a href="mailto:Ryan.freitag@co.mcleod.mn.us">Ryan.freitag@co.mcleod.mn.us</a>
Commissioner District Information		
Name:	RON SHIMANSKI	
District #	1	
Township:	HALE	
E-mail:	<a href="mailto:Ron.Shimanski@co.mcleod.mn.us">Ron.Shimanski@co.mcleod.mn.us</a>	

CD #35 Branch 3  
Project Number: 2017-112

12/12/2017

# QUOTE FORM

Project Name: CD #35 Branch #3

Project No:

2017-112

## CONTRACTOR INFORMATION

Contractor/Company Name:

Borka Exc, LLC

Business Phone No.:

320-485-2433

Cell Phone No.:

320-583-9319

Address:

6381 230th St

City/State/Zip Code:

Winsted MN 55395

E-MAIL

Item No.	Description of Bid Item	Pay Unit	Estimated Quantity	Unit Price	Sub Total Cost
1	F & I 18" Dual Wall corrugated perforated pipe	L.F.	180.0	} See Below	
2	F & I Tee and Upright riser for inpection purposes To be installed on the fence line	L.S.	1.0		
3	Tree and Brush Removal Trees to pilled on dostal property, and stumps to be buried	L.S.	1.0		
4		L.S.			
5		L.S.			
6		L.F.			
7		L.F.			
8		L.S.			
9		L.F.			
10		Each			
11		L.S.			
12		L.S.			
13		S.F.			
14		L.S.			
15		L.S.			
16		L.S.			

Quotes Due By: 12/19/2017

TOTAL

\$ 4,500<sup>00</sup>

## COMMISSIONER CONSTRUCTION QUOTE SCHEDULE

<b>Ditch Project Information</b>		
Project Name:	CD #35 Branch 3	
Project Number:	2017-112	
Project Information	Replace cement tile on tree line due to tree roots	
Document Date:	December 12, 2017	
<b>Contractor Information</b>		
Name:		
Date Received:		
Phone Number:		
<b>Drainage Inspector Information</b>		
Name:	Adam Leske	
Address:	SWCD McLeod County 830 11th st E Glencoe MN, 55336	
Office Phone Number:	320-864-1215	
Cell Phone Number:	507-766-1572	
E-Mail:	<a href="mailto:adam.leske@co.mcleod.mn.us">adam.leske@co.mcleod.mn.us</a>	
Authorized Representative(s):	Ryan Freitag	(320) 864-1214 Office
		(320) 583-5893 - Cell
		<a href="mailto:Ryan.freitag@co.mcleod.mn.us">Ryan.freitag@co.mcleod.mn.us</a>
<b>Commissioner District Information</b>		
Name:	RON SHIMANSKI	
District #	1	
Township:	HALE	
E-mail:	<a href="mailto:Ron.Shimanski@co.mcleod.mn.us">Ron.Shimanski@co.mcleod.mn.us</a>	

## QUOTE FORM

Project Name: <b>CD #35 Branch #3</b>	Project No: <b>2017-112</b>
---------------------------------------	-----------------------------

CONTRACTOR INFORMATION		
Contractor/Company Name: <b>Wuetherich Drainage, Inc.</b>	Business Phone No.: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Cell Phone No.: <b>612-360-1578</b>
Address: <b>13380 Hwy 5 and 25</b>	City/State/Zip Code: <b>Norwood MN 55368</b>	E-MAIL: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Item No.	Description of Bld Item	Pay Unit	Estimated Quantity	Unit Price	Sub Total Cost
1	F & I 18" Dual Wall corrugated perforated pipe	L.F.	180.0	26.00	4680.00
2	F & I Tee and Upright riser for inspection purposes <i>To be installed on the fence line</i>	L.S.	1.0	200.00	200.00
3	Tree and Brush Removal <i>Trees to be piled on distant property, and stumps to be buried</i>	L.S.	1.0	300.00	300.00
4		L.S.			
5		L.S.			
6		L.F.			
7		L.F.			
8	<b>NOTE: Will be done at the beginning of 2018:</b>				
9		L.F.			
10		Each			
11		L.S.			
12		L.S.			
13		S.F.			
14		L.S.			
15		L.S.			
16		L.S.			

Quotes Due By: 12/19/2017

**TOTAL**

**\$ 5180.00**

# MCLEOD COUNTY DRAINAGE INSPECTION REPORT

**Ditch:** JD 8 McS    **Township:** HELEN    **Section:** 29,30



Inspected JD #8 McS north of county road 10, Ernie Lange property to Gary and Dale Graupman property, there are multiple areas that need to be cleaned to allow water to flow better. I recommend that 4600' of channel be cleaned and spoil piles leveled. There are 3 washouts that are also on this stretch of ditch that will be fixed at a later date.

**Adam Leske - McLeod County Ditch Inspector**

**DATE** \_12-18-2017

## CONSTRUCTION QUOTE SCHEDULE

Ditch Project Information		
Project Name:	JD #8 McS	
Project Number:	2017-111	
Project Information	Channel Cleaning	
Document Date:	December 1, 2017	
Contractor Information		
Name:		
Date Recieved:		
Phone Number:		
Drainage Inspector Information		
Name:	Adam Leske	
Address:	SWCD McLeod County 830 11th st E Glencoe MN, 55336	
Office Phone Number:	320-864-1215	
Cell Phone Number:	507-766-1572	
E-Mail:	<a href="mailto:adam.leske@co.mcleod.mn.us">adam.leske@co.mcleod.mn.us</a>	
Authorized Representative(s):	Ryan Freitag	(320) 864-1214 Office (320) 583-5893 - Cell <a href="mailto:Ryan.freitag@co.mcleod.mn.us">Ryan.freitag@co.mcleod.mn.us</a>
Commissioner District Information		
Name:	Doug Krueger	
District #	2	
Township:	Helen	
E-mail:	<a href="mailto:Doug.Krueger@co.mcleod.mn.us">Doug.Krueger@co.mcleod.mn.us</a>	

## QUOTE FORM

Project Name: <b>JD #8 McS</b>	Project No: <b>2017-111</b>
--------------------------------	-----------------------------

CONTRACTOR INFORMATION		
Contractor/Company Name: <b>Wuetherich Drainage, Inc.</b>	Business Phone No.: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Cell Phone No.: <b>612-360-1578</b>
Address: <b>13380 Hwy 5 and 25</b>	City/State/Zip Code: <b>NYA MN 55368</b>	E-MAIL: <b>Wuetherichexcavating@yahoo.com</b>

Item No.	Description of Bid Item	Pay Unit	Estimated Quantity	Unit Price	Sub Total Cost
1	Mobilization	L.S.	1.0	350.00	350.00
2	Channel Cleaning <i>Includes spoil leveling</i>	L.F.	4600.0	1.15	5290.00
3		L.S.			
4		L.S.			
5		L.S.			
6		L.F.			
7		L.F.			
8		L.S.			
9		L.F.			
10		Each			
11		L.S.			
12		L.S.			
13		S.F.			
14		L.S.			
15		L.S.			
16		L.S.			

Quotes Due By:

**TOTAL**

\$ **5640.00**

# JD 8 McS Main

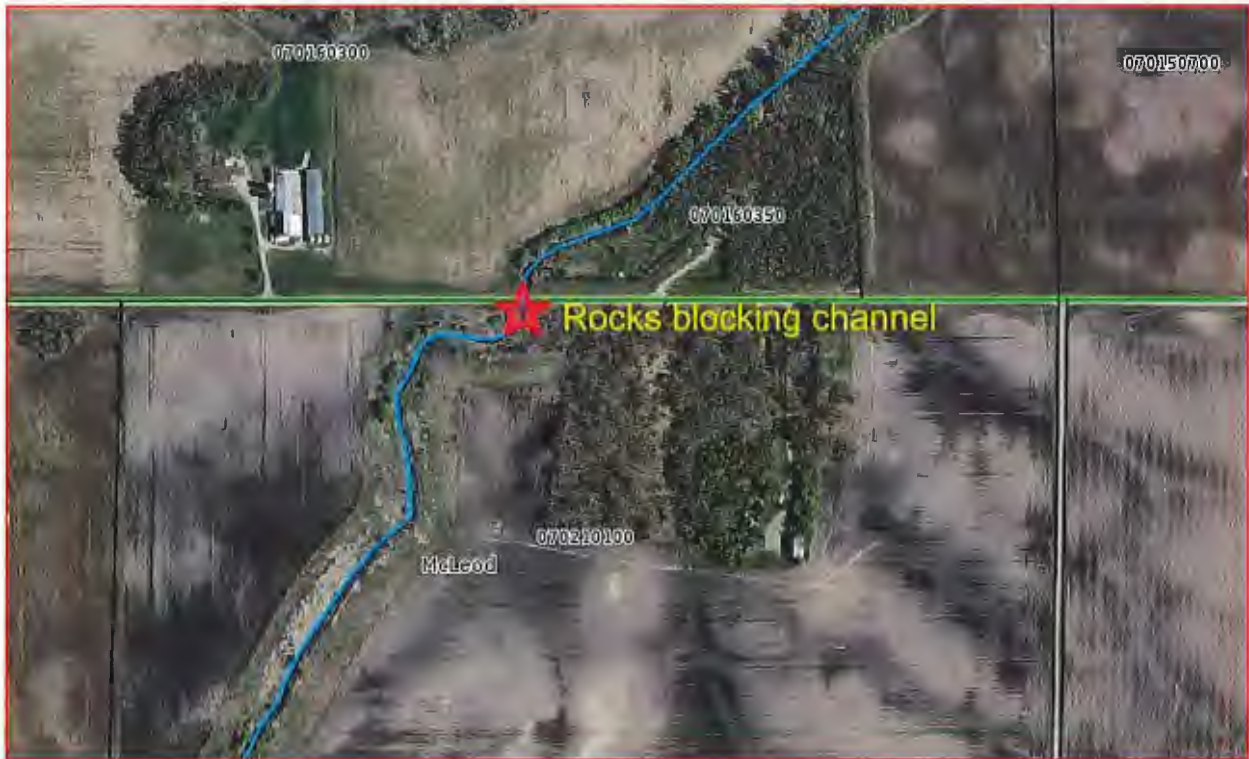


Disclaimer: McLeod County does not warrant or guarantee the accuracy of the data.  
The data is meant for reference purposes only and should not be used for official decisions.  
If you have questions regarding the data presented in this map, please contact the McLeod County GIS Department.

*This information is to be used for reference purposes only.*

# MCLEOD COUNTY DRAINAGE INSPECTION REPORT

**Ditch:** JD 8 McS    **Township:** Helen    **Section:** 21



Received phone call about an obstruction in the channel south of 100<sup>th</sup> st. Went out and observed that there are a few rocks in the channel obstructing flow.

**Adam Leske - McLeod County Ditch Inspector**

**DATE** \_12-19-2017



## CONSTRUCTION QUOTE SCHEDULE

Ditch Project Information		
Project Name:	JD #8 McS	
Project Number:	2017-113	
Project Information	Spot clean out due too obstruction in channel	
Document Date:	December 19, 2017	
Contractor Information		
Name:		
Date Recieved:		
Phone Number:		
Drainage Inspector Information		
Name:	Adam Leske	
Address:	SWCD McLeod County 830 11th st E Glencoe MN, 55336	
Office Phone Number:	320-864-1215	
Cell Phone Number:	507-766-1572	
E-Mail:	<a href="mailto:adam.leske@co.mcleod.mn.us">adam.leske@co.mcleod.mn.us</a>	
Authorized Representative(s):	<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <b>Ryan Freitag</b>  <hr style="border-top: 1px dashed black;"/> </div> <div style="width: 55%;"> (320) 864-1214 Office  (320) 583-5893 - Cell  <a href="mailto:Ryan.freitag@co.mcleod.mn.us">Ryan.freitag@co.mcleod.mn.us</a> </div> </div>	
Commissioner District Information		
Name:	Doug Krueger	
District #	2	
Township:	Helen	
E-mail:	<a href="mailto:Doug.Krueger@co.mcleod.mn.us">Doug.Krueger@co.mcleod.mn.us</a>	









# County of McLeod

830 11th Street East  
Glencoe, Minnesota 55336  
FAX (320) 864-1809

---

**COMMISSIONER RON SHIMANSKI**

1st District  
Phone (320) 327-0112  
23808 Jet Avenue  
Silver Lake, MN 55381  
[Ron.Shimanski@co.mcleod.mn.us](mailto:Ron.Shimanski@co.mcleod.mn.us)

**COMMISSIONER DOUG KRUEGER**

2nd District  
Phone (320) 864-5944  
9525 County Road 2  
Glencoe, MN 55336  
[Doug.Krueger@co.mcleod.mn.us](mailto:Doug.Krueger@co.mcleod.mn.us)

**COMMISSIONER PAUL WRIGHT**

3rd District  
Phone (320) 587-7332  
15215 County Road 7  
Hutchinson, MN 55350  
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207 1st Ave S  
Brownton, MN 55312  
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**COMMISSIONER JOE NAGEL**

5th District  
Phone (320) 587-8693  
20849 196th Road  
Hutchinson, MN 55350  
[Joseph.Nagel@co.mcleod.mn.us](mailto:Joseph.Nagel@co.mcleod.mn.us)

**COUNTY ADMINISTRATOR - INTERIM**

**CINDY SCHULTZ FORD**  
Phone (320) 864-1363  
830 11th Street East, Suite 110  
Glencoe, MN 55336  
[Cindy.Schultz@co.mcleod.mn.us](mailto:Cindy.Schultz@co.mcleod.mn.us)

## RESOLUTION 17-CB-43

### SALE OF TAX FORFEITED LAND TO CTIY OF BROWNTON

**WHEREAS**, the City of Brownton has requested, via action of its City Council on December 7, 2017, that the McLeod County Board of Commissioners (County Board) favorably recommend that the Minnesota Commissioner of Revenue convey to the City one tax forfeit parcel 16.050.0310 for use to develop community public use in the future such as gardens; and

**WHEREAS**, the County Board finds that the proposed purposes are authorized by statute, law, or local charter; and

**WHEREAS**, the County Board finds that the proposed purposes qualify as authorized public uses; and

**WHEREAS**, the County Board finds that the proposed purposes will serve the public interest as much or more than returned the parcels to the tax rolls; and

**WHEREAS**, M.S. 282.01 Subd. 1a.(e) provides that such conveyance to local government may occur, without monetary compensation or consideration, except as provided in Minnesota Statutes, Section 282.01, Subd. 1g., upon the favorable recommendation of the County Board;

**NOW, THEREFORE, BE IT RESOLVED**, that the McLeod County Board of Commissioners herby favorably recommends that the Minnesota Commissioner of Revenue convey to the City of Brownton by state deed the one tax forfeit property known as 16.050.0310

Adopted this 26<sup>th</sup> day of December, 2017.

---

Joe Nagel, Chair

---

Cindy Schultz Ford, Interim County Administrator





# County of McLeod

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## RESOLUTION 17-CB-44

### SALE OF TAX FORFEITED LAND TO CTIY OF STEWART

**WHEREAS**, the City of Stewart has requested, via action of its City Council on December 11, 2017, that the McLeod County Board of Commissioners (County Board) favorably recommend that the Minnesota Commissioner of Revenue convey to the City one tax forfeit parcel 20.067.0170 for use to construct a roadway to connect North Street and Mill Street; and

**WHEREAS**, the County Board finds that the proposed purposes are authorized by statute, law, or local charter; and

**WHEREAS**, the County Board finds that the proposed purposes qualify as authorized public uses; and

**WHEREAS**, the County Board finds that the proposed purposes will serve the public interest as much or more than returned the parcels to the tax rolls; and

**WHEREAS**, M.S. 282.01 Subd. 1a.(e) provides that such conveyance to local government may occur, without monetary compensation or consideration, except as provided in Minnesota Statutes, Section 282.01, Subd. 1g., upon the favorable recommendation of the County Board;

**NOW, THEREFORE, BE IT RESOLVED**, that the McLeod County Board of Commissioners herby favorably recommends that the Minnesota Commissioner of Revenue convey to the City of Stewart by state deed the one tax forfeit property known as 20.067.0170

Adopted this 26<sup>th</sup> day of December, 2017.

---

Joe Nagel, Chair

---

Cindy Schultz Ford, Interim County Administrator

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1:598

X,Y: 538262, 198814 Lat, Lon: 44.727014, -94.486129 USNG: 15TUK8231553699



# County of McLeod

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## RESOLUTION 17-CB-45

### SALE OF TAX FORFEITED LAND TO CTIY OF STEWART

**WHEREAS**, the City of Stewart has requested, via action of its City Council on December 11, 2017, that the McLeod County Board of Commissioners (County Board) favorably recommend that the Minnesota Commissioner of Revenue convey to the City one tax forfeit parcel 20.067.0160 for use to construct a roadway to connect North Street and Mill Street; and

**WHEREAS**, the County Board finds that the proposed purposes are authorized by statute, law, or local charter; and

**WHEREAS**, the County Board finds that the proposed purposes qualify as authorized public uses; and

**WHEREAS**, the County Board finds that the proposed purposes will serve the public interest as much or more than returned the parcels to the tax rolls; and

**WHEREAS**, M.S. 282.01 Subd. 1a.(e) provides that such conveyance to local government may occur, without monetary compensation or consideration, except as provided in Minnesota Statutes, Section 282.01, Subd. 1g., upon the favorable recommendation of the County Board;

**NOW, THEREFORE, BE IT RESOLVED**, that the McLeod County Board of Commissioners herby favorably recommends that the Minnesota Commissioner of Revenue convey to the City of Stewart by state deed the one tax forfeit property known as 20.067.0160

Adopted this 26<sup>th</sup> day of December, 2017.

---

Joe Nagel, Chair

---

Cindy Schultz Ford, Interim County Administrator

**Application by a Governmental Subdivision for Conveyance of  
Tax-Forfeited Lands for an Authorized Public Use  
(Minnesota Statutes, Section 282.01, Subdivision 1a through 1e)**

**In McLeod County**

Name of governmental subdivision (applicant): City of Stewart

Mailing address of applicant: 551 Prior Street, PO Box 195  
Stewart, MN 55385

Date requested property was forfeited to the State: 05/13/2013  
*(month) (day) (year)*

Legal description of property (include the name of the city/town in which the property is located):

Parcel #20.067.0160

A P Sec 31-115-30 Stewart  
N 50' of Lot 14

Describe the intended public use to be made of the property (be specific, including statute or special law references, if relevant):

The City is intending to use this parcel of land to construct a roadway to a new development within the city limits of Stewart. This parcel will connect North Street and Mill Street

State the need for the property (be specific, e.g., why this property instead of some other property?):

The city purchased land north of this property and constructed a new truck route roadway on the northern most side of the new purchase. This new truck route connects County Road 7 to Yankee Avenue. This property will give the city access to the center of the land so new property owners can access their property off of a less traveled roadway then the truck route. This parcel will also give the new property owners access to their property from the south.

**A Wetland Certification Form Must Be Attached To This Application**

**STATE OF MINNESOTA**                 )  
  ) ss.  
**COUNTY OF MCLEOD**                 )

I, Jason Peirce being first duly sworn, deposes and says that he/she is the authorized representative of the applicant named herein, that he/she has read said application and knows the contents thereof, and that the matters stated therein are true and correct.

Name \_\_\_\_\_

Title Mayor

Subscribed and sworn to before me this  
11<sup>th</sup> day of December, 20 17  
Donda Hull  
 Notary Public, McLeod County, Minn  
 My Commission expires indeterminate



## RECOMMENDATION OF COUNTY BOARD UPON APPLICATION

The County Board of McLeod County, Minnesota, has reviewed the application of (applicant name) \_\_\_\_\_ dated \_\_\_\_\_, 20\_\_\_\_, for the Conveyance for an authorized public use of certain tax-forfeited land described therein. The county board recommends that this application be:                rejected \_\_\_\_\_ granted \_\_\_\_\_.

---

County Board Chair
Date

**CERTIFICATION OF COUNTY AUDITOR OR LAND COMMISSIONER**

I, Cindy Schultz Ford, have taken the necessary steps required by Minnesota Statutes to prepare the herein described tax-forfeited land for conveyance for an authorized public use.

Signature of County Auditor	Date
-----------------------------	------

## OFFICE OF THE COMMISSIONER OF REVENUE

St. Paul, Minnesota, \_\_\_\_\_, 20\_\_\_\_.

Upon due consideration of this application, it is ordered that it is hereby: rejected granted.

Commissioner of Revenue

By \_\_\_\_\_

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X,Y: 538314, 198930 Lat, Lon: 44.727334, -94.485930 USNG: 15TUK8233153735



# County of McLeod

830 11th Street East  
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## RESOLUTION 17-CB-46

### SALE OF TAX FORFEITED LAND TO CTIY OF STEWART

**WHEREAS**, the City of Stewart has requested, via action of its City Council on December 11, 2017, that the McLeod County Board of Commissioners (County Board) favorably recommend that the Minnesota Commissioner of Revenue convey to the City one tax forfeit parcel 20.067.0150 for use to construct a roadway to connect North Street and Mill Street; and

**WHEREAS**, the County Board finds that the proposed purposes are authorized by statute, law, or local charter; and

**WHEREAS**, the County Board finds that the proposed purposes qualify as authorized public uses; and

**WHEREAS**, the County Board finds that the proposed purposes will serve the public interest as much or more than returned the parcels to the tax rolls; and

**WHEREAS**, M.S. 282.01 Subd. 1a.(e) provides that such conveyance to local government may occur, without monetary compensation or consideration, except as provided in Minnesota Statutes, Section 282.01, Subd. 1g., upon the favorable recommendation of the County Board;

**NOW, THEREFORE, BE IT RESOLVED**, that the McLeod County Board of Commissioners herby favorably recommends that the Minnesota Commissioner of Revenue convey to the City of Stewart by state deed the one tax forfeit property known as 20.067.0150

Adopted this 26<sup>th</sup> day of December, 2017.

---

Joe Nagel, Chair

---

Cindy Schultz Ford, Interim County Administrator



**MCLEOD COUNTY  
APPLICATION / PERMIT OUTDOOR  
PUBLIC FIREWORKS DISPLAY**

**Applicant instructions:**

1. This application is for an **outdoor** public fireworks display only and is not valid for an indoor fireworks display.
2. This application must be completed and returned at least 15 days prior to date of display.
3. Fee upon application is **\$100.00**, and must be made payable to McLeod County Auditor-Treasurer.

Name of Applicant (Sponsoring Organization): Northern Lighter Pyrotechnics

Address of Applicant: 5989 Wyoming Trail, Wyoming, MN 55092

Name of Applicant's Authorized Agent: Paul Marchio

Address of Agent: 5989 Wyoming Trail, Wyoming, MN 55092

Telephone Number of Agent: 612-619-1111

Date of Display: 1-13-18

Time of Display: 6 p.m. - 9 p.m. Location of Display: 22232 Garden Ave., Silver Lake MN 55381

Manner and place of storage of fireworks prior to display: Trailer/Locked

Type and number of fireworks to be discharged: 1.4G and 1.3G cakes and aerial shells  
2 1/2 to 8" in diameter

**MINNESOTA STATE LAW REQUIRES THAT THIS DISPLAY BE CONDUCTED UNDER THE DIRECT  
SUPERVISION OF A PYROTECHNIC OPERATOR CERTIFIED BY THE STATE FIRE MARSHAL**

Name of Supervising Operator: Richard Glover

Certificate No.: 0480

**Required attachments.** The following attachments must be included with this application:

1. Proof of a bond or certificate of insurance in amount of at least **\$1.5 million (minimum)**
2. A diagram of the ground at which the display will be held. This diagram (drawn to scale or with dimensions included) must show the point at which the fireworks are to be discharged; the location of ground pieces; the location of all buildings, highways, streets, communication lines and other possible overhead obstructions; and the lines behind which the audience will be restrained.
3. Names and ages of all assistants that will be participating in the display.

The discharge of the listed fireworks on the date and at the location shown on this application is hereby approved, subject to the following conditions, if any: \_\_\_\_\_

I understand and agree to comply with all provisions of this application, MN Statute 624.20 through 624.25, MN State Fire Code, National Fire Protection Association Standard 1123 (2006 edition), applicable federal law(s) and the requirements of the issuing authority, and will ensure that the fireworks are discharged in a manner that will not endanger persons or property or constitute a nuisance.

Signature of Applicant (or Agent): *Richard H. Glover*

Date: 12-6-2017

Signature of Fire Chief/County Sheriff: *[Signature]*

Date: 12-14-2017

Signature of Issuing Authority: \_\_\_\_\_

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



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/11/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Ryder Rosacker McCue & Huston (MGD by Hull & Compa 509 W Koenig St Grand Island NE 68802	<b>CONTACT NAME:</b> Kristy Wolfe	
	<b>PHONE</b> (A/C, No, Ext): 308-382-2330	<b>FAX</b> (A/C, No):
<b>INSURED</b> Northern Lighter Pyrotechnics, Inc. 5989 Wyoming Trail Wyoming MN 55092	<b>E-MAIL ADDRESS:</b> kwolfe@ryderinsurance.com	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A : SCOTTSDALE INS CO</b>	
	<b>INSURER B :</b>	
	<b>INSURER C :</b>	
	<b>INSURER D :</b>	
<b>INSURER E :</b>		
<b>INSURER F :</b>		

**COVERAGES****CERTIFICATE NUMBER:** 767619678**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC		CPS2668168	5/11/2017	5/11/2018	EACH OCCURRENCE	\$ 2,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
						MED EXP (Any one person)	\$ 5,000
						PERSONAL & ADV INJURY	\$ 2,000,000
						GENERAL AGGREGATE	\$ 2,000,000
						PRODUCTS - COMP/OP AGG	\$ 2,000,000
							\$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident)	\$
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
							\$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE				EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> Y/N N/A				WC STATUTORY LIMITS	OTH-ER
						E.L. EACH ACCIDENT	\$
						E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES** (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Blanket Additional Insured applies to the entities listed below per attached form GLS-150s when required by written agreement.

Mike Mickolich

Location: 22232 Garden Ave., Silver Lake, MN

Date: 1/13/18

**CERTIFICATE HOLDER****CANCELLATION**Mike Mickolich  
22232 Garden Ave.  
Silver Lake MN 55381

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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THE SHOOT SITE LOCATIONS ARE BASED ON  
THE REQUIREMENTS IN THE 2014 NFPA 1123  
EDITION ITEMS 5.1.3.1 & 5.1.4.3

GROW RIVER WINERY - AERIAL SHELL LOCATION

350' SAFETY RADIUS  
FOR 2.5" AERIAL SHELLS  
(RED CIRCLE)

W RIVER WINERY - 1.5" & SMALLER MULTI-SHOT LOCATION

ABOVE GROUND  
FUEL STORAGE  
TANKS 350' FROM  
AERIAL SHELL  
LOCATION

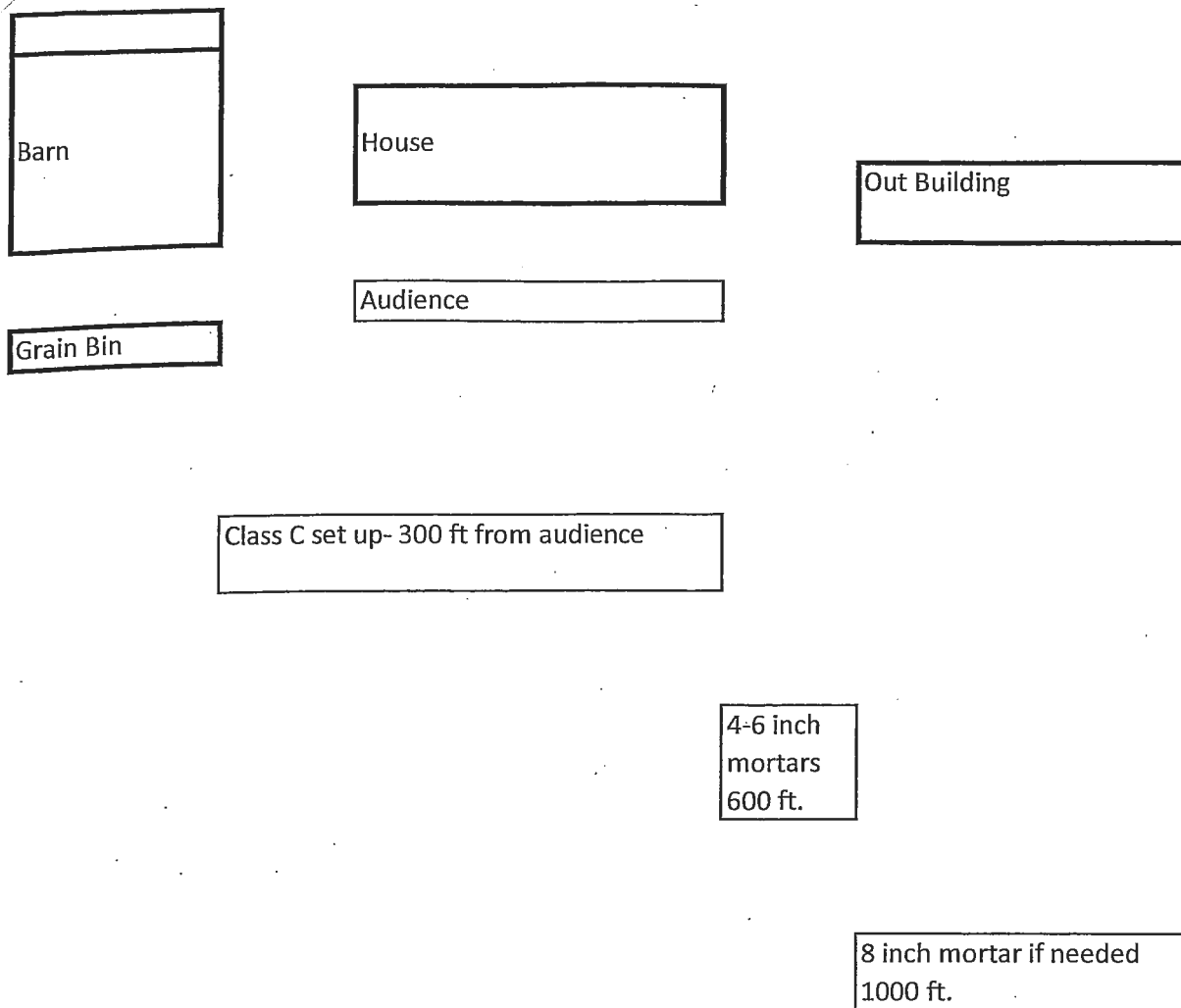
210' SAFETY RADIUS FOR 1.5" & SMALLER  
MULTI-SHOT BOXES (ORANGE CIRCLE)

AUDIENCE

PROPANE TANKS -  
220' FROM MULTI-  
SHOT LOCATION

Google earth

Imagery Date: 7/23/2012 44°33'39.27" N 94°17'31.64" W elev 1075 ft eye alt 2100 ft



Layout map for Northern Lighter Pyrotechnics, January fireworks permit request

Minimum distances between the buildings and audience will be 300 ft for class C (1.4G) shooting and 100 ft. per inch of Mortar used for any Class B ( 1.3G). These distances will exceed the minimum required by the state regulations ( 70 per inch of mortar diameter) Any space used for shooting is an open plowed field.

## Site inspection Form

Customer Name:

the address and name if applicable

CROW RIVER WINERY  
14848 HIGHWAY 7 EAST

Alutashan, Md 55250

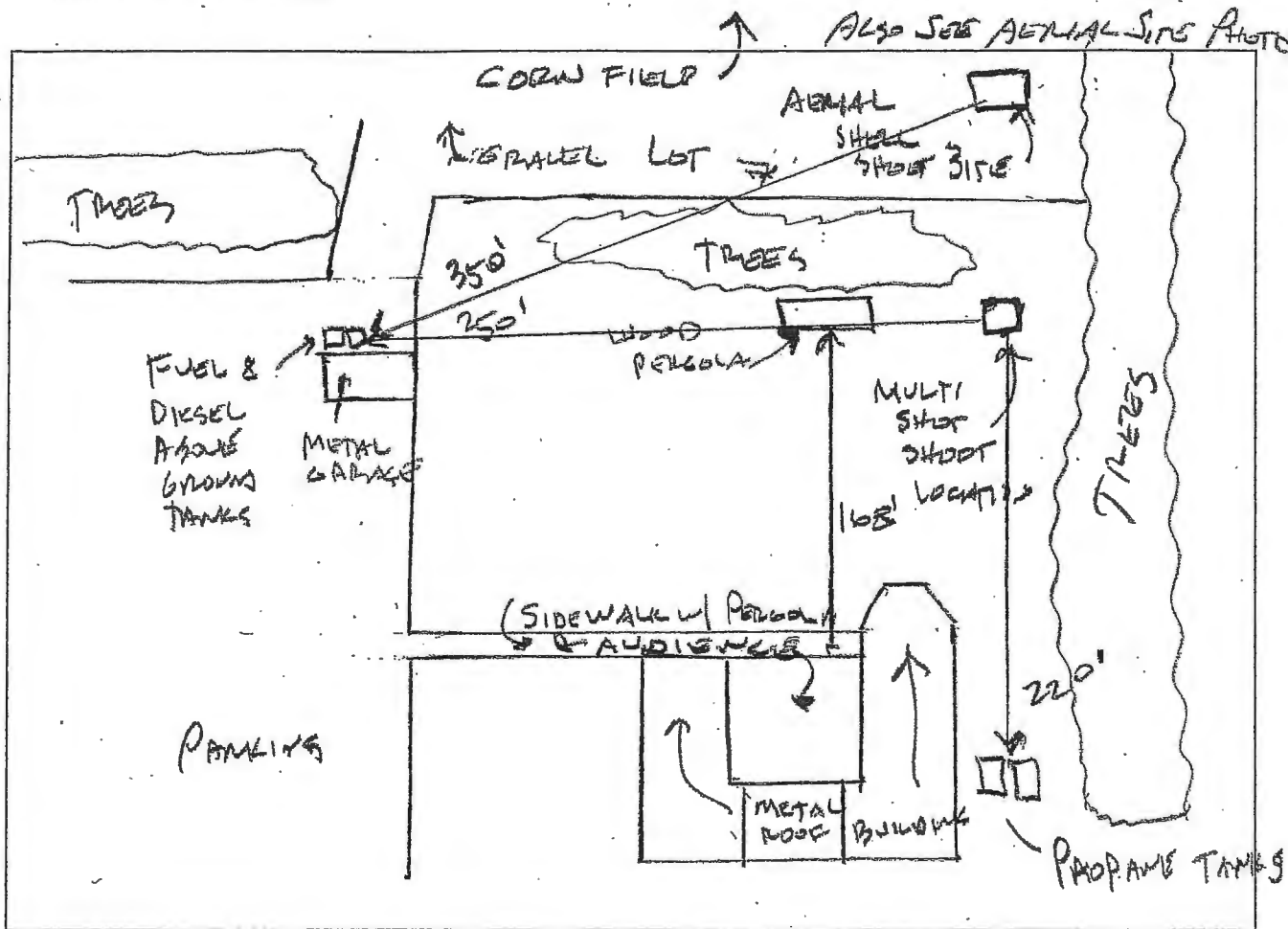
Site contact person (day of display)

Site Diagram: (See Example below). When diagramming the shooting location, mark area where low level products shall be placed. Make sure your measurements include the following distances:

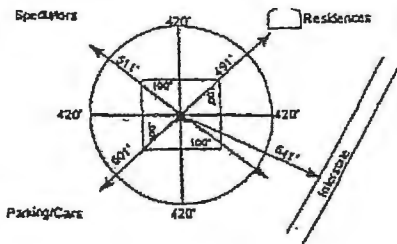
- A. Spectators
- B. Parking
- C. Residences
- D. Commercial Buildings

Maximum size shell based on  
measurements taken: 2.5"

Also See AERIAL SITE PHOTO



### Example



Directions to site: SEE SEPARATE SHEET

Signature of person completing form:

Date : 8/20/14

D. NOWAK

# 2018 Property Tax Levy

**Certification Date:** December 26, 2017

I hereby certify the 2018 Budget and Levy as approved by the County Board of Commissioners'.

County Board Chair

County Administrator

Fund	Total Revenues	Total Expenses	Reserves	2018 Certified Levy
<b><u>Levy Funds</u></b>				
<b>01 Revenue</b>	17,203,111	17,427,569	(224,458)	11,478,468
<b>05 Library</b>	198,217	198,217	-	198,217
	\$ 17,401,328	\$ 17,625,786	\$ (224,458)	\$ 11,676,685
<b>02 Road &amp; Bridge</b>	\$ 12,405,453	\$ 12,795,502	\$ (390,049)	\$ 3,280,153
<b>03 Social Services</b>	12,025,147	12,025,147	\$ -	4,930,826
<b>15 Trailblazer Transit</b>	205,650	205,650	-	205,650
	\$ 12,230,797	\$ 12,230,797	\$ -	\$ 5,136,476
<b>12 Special Revenue</b>	\$ 1,439,911	\$ 1,263,229	\$ 176,682	\$ 322,568
<b>Debt Service</b>				
<b>10 Capital Improvement Plan</b>	\$ 436,315	\$ 416,438	\$ 19,877	\$ 436,315
<b>08 Capital Equipment Notes</b>	\$ 262,395	\$ 252,100	\$ 10,295	\$ 262,395
<b>Solid Waste Bonds</b>	\$ 594,891	\$ 571,513	\$ 23,378	
	\$ 1,293,601	\$ 1,240,051	\$ 53,550	\$ 698,710
<b><u>Non-Levy Funds</u></b>				
<b>Solid Waste</b>	\$ 3,760,981	\$ 4,325,164	\$ (564,183)	
<b>Capital Projects</b>	0	644,300	(644,300)	
<b>Grand Totals</b>	\$ 48,532,071	\$ 50,124,829	\$ (1,592,758)	\$ 21,114,592

- Consider setting the elected officials 2018 salaries.
  - Consider setting the 2018 salary pursuant to Minnesota Statute 388.18 for County Attorney Michael Junge in the amount of \$ \_\_\_\_\_ based upon the responsibilities and duties of the office and taking into account the experience, qualifications, and performance of the incumbent.
  - Consider setting the 2018 salary pursuant to Minnesota Statute 384.151 Auditor-Treasurer Cindy Schultz Ford in the amount of \$ \_\_\_\_\_ based upon the responsibilities and duties of the office and taking into account the experience, qualifications, and performance of the incumbent.
  - Consider setting the 2018 salary pursuant to Minnesota Statute 387.20 for County Sheriff Scott Rehmann in the amount \$ \_\_\_\_\_ of based upon the responsibilities and duties of the office and taking into account the experience, qualifications, and performance of the incumbent.
  - Consider setting the 2018 salary pursuant to Minnesota Statute 386.015 for County Recorder Lynn Ette Schrupp in the amount of \$ \_\_\_\_\_ based upon the responsibilities and duties of the office and taking into account the experience, qualifications, and performance of the incumbent.