

**County of Jackson
120 W. Michigan Ave.
Jackson, MI 49201
(517) 788-4335**



BOARD OF COMMISSIONERS

**Clifford E. Herl, District 1
David F. Lutchka, District 2
Jeffrey D. Kruse, District 3
Philip S. Duckham III, District 4
Earl J. Poleski, District 5
James C. Videto, District 6
James E. Shotwell, Jr., District 7
Gail W. Mahoney, District 8
Jonathan T. Williams, District 9
Patricia A. Smith, District 10
Michael J. Way, District 11
David K. Elwell, District 12**

ELECTED OFFICIALS

**Amanda Riska, Clerk
Dan Heyns, Sheriff
Mindy Reilly, Register of Deeds
Karen Coffman, Treasurer
Geoffrey Snyder, Drain Commissioner
Hank Zavislak, Prosecuting Attorney**

COUNTY STAFF

**Randy Treacher, Administrator/Controller and
Human Resources Director
Adam Brown, Deputy Administrator
Charles Adkins, Circuit Court Administrator
Tammy Bates, District Court Administrator
Andy Crisenbery, Friend of the Court
Gerard Cyrocki, Finance Officer
Connie Frey, IT Director
Brandon Ransom, Parks Director
Teresa Hawkins, Youth Center Director
Juli Ann Kolbe, Equalization Director
Dr. John Maino, Medical Director
Kent Maurer, Airport Manager
Ric Scheele, Director-Fleet & Facilities Opns.
Jan Seitz, MSU Ext.-Jackson County Director
Marce Wandell, Department on Aging Director
Dave Welihan, Veterans Affairs Officer
Ted Westmeier, Health Officer**

County Commission Agenda December 14, 2010

Order of Business:

1. Call to Order
2. Invocation
3. Pledge of Allegiance
4. Roll Call
5. Approval of Agenda
6. Awards and Recognitions
7. Communications and Petitions
8. Special Orders/Public Hearing(s)
9. Public Comment
10. Special Meetings of Standing Committees
11. Minutes
12. Consent Agenda
13. Standing Committees
 - A. County Affairs
 - B. County Agencies
 - C. Human Services
 - D. Personnel & Finance
14. Unfinished Business
15. New Business
16. Public Comment
17. Commissioner Comment
18. Closed Session
19. Adjournment

Public Comment

Any person desiring to speak on a matter to the Board of Commissioners may do so under the Public Comment items near the beginning and end of the meeting. Please state your name and use the microphone. Please note that the Commission allocates a maximum of five minutes per individual at the beginning of the meeting and three minutes per individual at the end of the meeting for this purpose.

Consent Agenda

Items on the Consent Agenda are items generally routine in nature that have passed a Standing Committee and will be enacted by one motion and one vote. There will be no separate discussion on these items. Any Commissioner may remove an item from the Consent Agenda and it will be considered by separate motion at the proper place during the meeting.

Standing Committees

The Board of Commissioners operates under a Standing Committee system with the following Committees: County Affairs, County Agencies, Human Services, Personnel & Finance. All departments of the County coordinate their business through one of the Standing Committees. The Committees then forward their recommendations to the Board of Commissioners.

Closed Session

The Board of Commissioners is permitted under the Open Meetings Act to go into Closed Session to discuss labor contracts, purchase of property, and certain employee matters if requested by the employee. A two-thirds vote of the Commission is required to go into Closed Session.

"Your interest in your County Government is appreciated"

AGENDA
JACKSON COUNTY BOARD OF COMMISSIONERS BOARD MEETING
December 14, 2010
5:00 p.m. (Earlier Time)**
Commission Chambers – 5th Floor Tower Building

***Mission Statement:** Jackson County Government, in cooperation with the community
and local governmental units, strives through a planned process
to deliver quality services that address public needs.*

1. **CALL TO ORDER** – *Chairman Steve Shotwell*
2. **INVOCATION** – *by Commissioner Dave Lutchka*
3. **PLEDGE OF ALLEGIANCE** – *by Chairman Steve Shotwell*
4. **ROLL CALL** – *County Clerk Amanda Riska*
5. **APPROVAL OF AGENDA**
6. **AWARDS & RECOGNITIONS**
 - A. **Holiday Music Presentation by the Northwest Kidder Middle School Honors Choir** (*Under the direction of James Cummings*)
 - Roll Call* B. **Resolution (12-10.37) Honoring Outgoing Commissioner Earl Poleski**
Resolution (12-10.38) Honoring Outgoing Commissioner Jeffrey Kruse
Resolution (12-10.40) Honoring Department of Human Services Director
Tanda L. Reynolds
Resolution (12-10.41) Honoring Retiring Administrator/Controller
Randall W. Treacher

Attachments:
*Resolution (12-10.37)
*Resolution (12-10.38)
*Resolution (12-10.40)
*Resolution (12-10.41)
7. **COMMUNICATIONS/PETITIONS** – None.
8. **SPECIAL ORDERS/PUBLIC HEARINGS** – None.
9. **PUBLIC COMMENTS**
10. **SPECIAL MEETINGS OF STANDING COMMITTEES** – None.
11. **MINUTES** - Minutes of the 11/16/10 Annual Meeting of the Jackson County Board of Commissioners

Attachments:
*11/16/10 Annual Meeting Minutes

12. **CONSENT AGENDA (*Roll Call*)**

A. **County Affairs**

1. **Contract with Mead and Hunt for Snow Removal Building and Perimeter Road Design Services**

Attachments:

*Memo from Airport Manager and attachments

B. **County Agencies**

2. **Law Enforcement Services Contract – Sandstone Township**

Attachments:

*Law Enforcement Services Contract – Sandstone Township

3. **Add 1 FTE and Budget Associated Costs as Result of Law Enforcement Services Contract – Sandstone Township**

Attachments:

*Memo from Deputy Administrator regarding Sheriff Department Add 1 FTE and Budget Associated Costs

C. **Human Services**

4. **United Way Partnership Agreement**

Attachments:

*Memo from United Way Executive Director and attachments

5. **Behavioral Risk Factor Survey Funding Request**

Attachments:

*Memo from Health Officer regarding Behavioral Risk Factor Survey Funding Request

6. **Animal Shelter Vet Tech Services Contract**

Attachments:

*Memo from Environmental Health Director regarding Animal Shelter Vet Tech Services

*Memo from Vet regarding Animal Shelter Vet Tech Services

D. Personnel & Finance

7. Resolution (12-10.39) Restatement of Jackson County Employee's Retirement System Bylaws

Attachments:

- *Resolution (12-10.39) Restatement of Jackson County Employee's Retirement System Bylaws
- *Memo from Fraser Trebilcock regarding Retirement System Bylaws
- *Employee's Retirement System Bylaws

8. 2nd Floor Budget Adjustment and Contract Award

Attachments:

- *Memo from Deputy Administrator
- *Herman Miller & US Communities Agreement
- *WorkSquared Contract

9. Elimination of .5 FTE in Department on Aging and .5 FTE in Health Department to Facilitate the Sharing of an Account Clerk Position

Attachments:

- *Memo from Department on Aging Director
- *Cost Savings

10. Budget Adjustments

- a. Parks
- b. Youth Center
- c. Health Department
- d. General Fund

Attachments:

- *Parks - Falls Sponsor; Greens Fees, Golf Cart, Manor House, Parks Equipment, Parks Transfer
- *Youth Center Budget Adjustments
- *Memo from Health Officer
- *Health Department Budget Adjustment
- *Memo from Finance Officer regarding General Fund Budget Adjustment

E. Other Business

11. Claims dated 11/1/10 – 11/30/10

Attachments: None.

13. **STANDING COMMITTEES**

A. **County Affairs – Commissioner Dave Lutchka**

1. **Airport** – one public member, term to 12/2012
2. **Department on Aging Advisory Council** – eight public members, terms to 12/2012
3. **Fair** – one public member, term to 12/2013
4. **Hospital Finance Authority** – four public members, terms to 12/2011
5. **Parks** – two public members, terms to 12/2013
6. **Region 2 Planning Commission** – one public member, term to 12/2013
7. **Road Commission** – one public member, term to 12/2016

Attachments:

*Commissioner Board Appointments

*Applications

B. **County Agencies – Commissioner Gail W. Mahoney** - None.

C. **Human Services – Commissioner Mike Way**

1. **Neighborhood Stabilization Program 3 (NSP3)**

Attachments:

*NSP3 Neighborhood Information

D. **Personnel and Finance – Commissioner James Videto** - None.

14. **UNFINISHED BUSINESS** – None.

15. **NEW BUSINESS**

Roll Call A. **Resolution (12-10.42) Appointing an Interim Administrator/Controller and to Hire a Search Firm for a Permanent Replacement**

Attachments:

*Resolution (12-10.42)

B. **Approve the Resource Recovery Facility (RRF) 2011 Enterprise Fund Budget**

Attachments:

*Resource Recovery Facility (RRF) 2011 Enterprise Fund Budget

16. **PUBLIC COMMENTS**
17. **COMMISSIONER COMMENTS**
18. **CLOSED SESSION** – None.
19. **ADJOURNMENT**



Jackson County

Resolution

RESOLUTION (12-10.37) HONORING OUTGOING COMMISSIONER EARL POLESKI

WHEREAS, Earl Poleski has held the office of Jackson County Commissioner in District 5 for four years; and

WHEREAS, during his tenure as a County Commissioner, Earl served on the County Affairs and County Agencies Standing Committees and was appointed as Vice Chairman of the Board in 2008 through 2011; and

WHEREAS, Earl also served on the Airport Board, the Mid-South Substance Abuse Commission (MSSAC), and Policy Committee; and

WHEREAS, over his term as Commissioner, Earl gave of his time and talent for the betterment of the people of Jackson County, particularly the residents of District 5 -- consisting of Liberty, Hanover and Columbia Townships and a portion of Spring Arbor Township; and

WHEREAS, the Jackson community has benefited from his service as a County Commissioner; and

WHEREAS, Earl decided to run for State Representative in the 64th District and won that election in November 2010, necessitating that he can no longer be a County Commissioner.

NOW, THEREFORE, BE IT RESOLVED that the Jackson County Board of Commissioners expresses its sincere appreciation for Earl Poleski's contributions and wishes him much success in his position as State Representative in the 64th District.

**James E. Shotwell, Jr., Chairman
Jackson County Board of Commissioners
December 14, 2010**



Jackson County

Resolution

RESOLUTION (12-10.38) HONORING OUTGOING COMMISSIONER JEFFREY KRUSE

WHEREAS, Jeff Kruse has held the office of Jackson County Commissioner in District 3 for just over two years; and

WHEREAS, during his tenure as a County Commissioner, Jeff served on the County Agencies and Human Services Standing Committees; and

WHEREAS, Jeff also served on the Land Bank Authority, FEMA Board, South Central Michigan Works!, Sanitary Code Board of Appeals and the Policy Committee; and

WHEREAS, during his term as Commissioner, Jeff diligently represented his constituents in District 3, consisting of Leoni Township and was especially concerned for seniors and veterans and was very supportive of RSVP; and

WHEREAS, Jeff gave his time and talent for the greater good of the people of Jackson County and they have benefitted from his service as a County Commissioner.

NOW, THEREFORE, BE IT RESOLVED that the Jackson County Board of Commissioners expresses its sincere appreciation for Jeff Kruse's contributions and wishes him much success as he leaves the Board of Commissioners.

**James E. Shotwell, Jr., Chairman
Jackson County Board of Commissioners
December 14, 2010**



Jackson County

RESOLUTION (12-10.40) HONORING Department of Human Services Director

TANDA L. REYNOLDS

WHEREAS, it takes a special person to enter into the area of government – particularly the realm of social services, where so much is asked of the individual; and

WHEREAS, Tanda L. Reynolds joined the State of Michigan as an Assistant Payments Worker in 1976 following her attendance and graduation of Michigan State University; and

WHEREAS, in serving the citizens of the State of Michigan, Tanda held the posts of Social Service Worker in Adult Services and Day Care; Social Services Worker as a Direct Children's Foster Care Worker; Children's Protective Services Manager; and Service Program Manager; and

WHEREAS, in 2005 Tanda L. Reynolds was deservedly elevated to the position of Director of the Jackson County Department of Human Services; and

WHEREAS, after nearly 35 years of service, during which more than one fellow Human Services employee conveyed to this Board both her strong commitment and leadership, Ms. Reynolds has made the decision to retire; and

WHEREAS, the greatest accolade any member of a civil society can garner is the acknowledgement by their peers that they made a positive difference in the lives of their fellow man.

NOW, THEREFORE, BE IT RESOLVED that the Jackson County Board of Commissioners extends our greatest appreciation to Tanda L. Reynolds for her service to the community and for the truly positive impact she has made on the lives of so many fellow citizens. Ms. Reynolds, your presence will be missed. We wish you many happy days with your friends and family throughout a peaceful retirement.

**James E. Shotwell, Jr., Chairman
Jackson County Board of Commissioners
December 14, 2010**



Jackson County
**RESOLUTION (12-10.41) HONORING
RANDALL W. TREACHER
UPON HIS RETIREMENT**

WHEREAS, Randall W. Treacher has worked for the County of Jackson for 30 years, and has been the Administrator/Controller for the last three years; and

WHEREAS, Randy hired in as the Chief Deputy County Treasurer, and during his career with Jackson County, Randy has also held the positions of Financial Officer, Assistant Director and Deputy Director of the Health Department, then became the Interim Health Officer/Director and eventually the Health Officer/Director. In June of 1999, he became the Deputy County Administrator; and

WHEREAS, Randy announced his intention to retire in February 2006, but stayed on to serve as the Administrator/Controller in 2008 at the request of the Board of Commissioners until a replacement was in place; and

WHEREAS, Randy's career, especially during his time as Deputy Administrator and Administrator/Controller, has been marked with exceptional accomplishments including the establishment of a new animal shelter facility, reorganization of the Road Commission, investment of time and expertise to help the Fair return to profitability, and reducing the budget of the County by millions of dollars; and

WHEREAS, Randy has taken the initiative to lead the County, with the cooperation and support of the Board of Commissioners and County Staff, to a position of outstanding financial stability especially considering the trying economic times; and

WHEREAS, Randy enthusiastically dedicated his time, talents and loyalty for the betterment of the citizens of the Jackson community, who have benefited greatly from his tireless devotion, commitment, experience, and unwavering service to the County of Jackson; and

WHEREAS, Randy has taken a position with a state representative and has, therefore, elected to retire.

NOW, THEREFORE, BE IT RESOLVED that the Jackson County Board of Commissioners wishes to express deep gratitude and sincere appreciation for all that Randall W. Treacher has done for the County of Jackson. We wish him all the best in his retirement and also much success in his new venture to work in a state representative's office. Jackson County's loss will be the State of Michigan's gain.

**James E. Shotwell, Jr., Chairman
Jackson County Board of Commissioners
December 14, 2010**

MINUTES
JACKSON COUNTY BOARD OF COMMISSIONERS BOARD MEETING
November 16, 2010
7:00 p.m.
Commission Chambers – 5th Floor Tower Building

1. **CALL TO ORDER** – Chairman Steve Shotwell called the November 16, 2010, Jackson County Board of Commissioners Meeting to order at 7:00 p.m.
2. **INVOCATION** – *by Commissioner Cliff Herl*
3. **PLEDGE OF ALLEGIANCE** – *by Chairman Steve Shotwell*
4. **ROLL CALL** – *County Clerk Amanda Riska*

(11) Present. Commissioners Herl, Lutchka, Kruse, Duckham, Poleski, Mahoney, Williams, Smith, Way, Elwell, and Shotwell. (1) Absent. Commissioner Videto
5. **APPROVAL OF AGENDA**

Moved by Mahoney, supported by Duckham for Approval of the Agenda. Motion carried unanimously.
6. **AWARDS & RECOGNITIONS** – None.
7. **COMMUNICATIONS/PETITIONS** – None.
8. **SPECIAL ORDERS/PUBLIC HEARINGS** – None.
9. **PUBLIC COMMENTS**

None
10. **SPECIAL MEETINGS OF STANDING COMMITTEES** – None.
11. **MINUTES** - Minutes of the 10/19/10 Annual Meeting of the Jackson County Board of Commissioners

Moved by Herl, supported by Mahoney to Approve the Minutes of the 10/19/10 Regular Meeting of the Jackson County Board of Commissioners. Motion carried unanimously.
12. **CONSENT AGENDA**

Moved by Mahoney, supported by Elwell for Approval of the Consent Agenda. Roll Call: (11) Yeas. Motion carried unanimously.

A. **County Affairs**
 1. **Extend Length of Term on the South Central Michigan Works! Board from 1 Year to 2 Years**
 2. **Agricultural Conservation Easement and Scoring System**
 3. **Apportionment Report**

4. **2011 Aerial Imagery Project**
5. **Mead & Hunt Contract for Preliminary Engineering Design Services for Runway 7-25**
6. **Contract Amendment with Commonwealth Associates for Demolition of Four Residential Structures**

B. **County Agencies** – None.

C. **Human Services**

7. **Agreement Between Jackson County and Livingston County for Billing Clerk Services**

D. **Personnel & Finance**

8. **Imaging Contract for Prosecuting Attorney's Office**

9. **Budget Adjustments**

- a. **Department on Aging**
- b. **Airport**
- c. **General Fund**

E. **Other Business**

10. **Claims dated 10/1/10 – 10/31/10**

13. **STANDING COMMITTEES**

A. **County Affairs** – *Commissioner Dave Lutchka* – None.

B. **County Agencies** – *Commissioner Gail W. Mahoney* - None.

C. **Human Services** – *Commissioner Mike Way* - None.

D. **Personnel and Finance** – *Commissioner James Videto* - None.

14. **UNFINISHED BUSINESS** – None.

15. **NEW BUSINESS**

A. **Policies**

1. **New Fiscal Policy 1180 – Anti Fraud and Abuse**

Moved by Mahoney, supported by Duckham to Approve New Fiscal Policy 1180 – Anti Fraud and Abuse. Motion carried unanimously.

2. **IT Policies**

- a. **Revised Policy 6010 – Software Licenses**
- b. **Deleted Policy 6020 – Software Standardization**
- c. **Revised Policy 6030 – E-mail**

Moved by Kruse, supported by Smith to Approve Revised Policy 6010, Delete Policy 6020, and Approve Revised Policy 6030. Motion carried unanimously.

3. **New Personnel Policy 3370 – Conflict of Interest**

Moved by Mahoney, supported by Way to Approve Policy 3370 – Conflict of Interest. Motion carried unanimously.

4. **Waive Personnel Policy 3100 for the Appointment of the Human Resources Director Position**

Moved by Mahoney, supported by Poleski to Waive Personnel Policy 3100 for the Appointment of the Human Resources Director Position. Motion carried unanimously.

16. **PUBLIC COMMENTS**

Phil Tucco thanked the Commissioners for approving the conservation easement.

17. **COMMISSIONER COMMENTS**

Cmr. Herl wished everyone a good Thanksgiving.

Chairman Shotwell announced that the Jackson County Road Commission Ad Hoc meeting on November 18th was canceled, will be rescheduled, and a public notice will be posted.

18. **CLOSED SESSION** – None.

19. **ADJOURNMENT**

Chairman Shotwell adjourned the November 16, 2010 Meeting of the Jackson County Board of Commissioners at 7:08 p.m.

James E. Shotwell – Chairman, Jackson County Board of Commissioners

Amanda L. Riska – County Clerk

Respectfully submitted by Carrienne VanDusseldorp – Chief Deputy County Clerk



J X N


Jackson County Airport

3606 Wildwood Avenue
(517) 788-4225

Jackson, Michigan 49202
FAX (517) 788-4682

November 19, 2010

TO: Randall Treacher, Administrator/Controller

FROM: Kent Maurer, Airport Manager 

RE: Contract with Mead and Hunt for Snow Removal Building and Perimeter Road Design Services

Requested action: Approve forwarding this contract with Mead and Hunt not to exceed \$271,780.

Funding: MDOT-Aeronautics grant

Background: The current SRE building must be moved for the new runway and a new building must be constructed. This contract will design the new building and service road from the new building to the taxiway system.

Recommendation: Approve forwarding this contract to the Board of Commissioners for their approval.

Attachments: Mead and Hunt contract excerpts.

*** This MDOT-Aeronautics will be funded through the "State-Local" funding meaning a 90% State and 10% Local cost share.**



J X N

Jackson County Airport

3606 Wildwood Avenue
(517) 788-4225

Jackson, Michigan 49202
FAX (517) 788-4682

November 8, 2010

TO: Airport Board Members

FROM: Kent Maurer, Airport Manager 

RE: Contract with Mead and Hunt for Snow Removal Building and Perimeter
Road Design Services

Requested action: Approve forwarding this contract to the County Board of
Commissioners. The total cost of this contract is not to exceed
\$271,780.

Generated Income: None

Funding: Forthcoming MDOT-Aeronautics grant*

Background: The current SRE building must be moved for the new runway and
a new building must be constructed. This contract will design the
new building.

Recommendation: Approve forwarding this contract to the Board of Commissioners

Attachments: Mead and Hunt contract excerpts.

* This MDOT-Aeronautics will be funded through the "State-Local" funding meaning a
90% State and 10% Local cost share.

MEAD HUNT

Designing the future

October 29, 2010

Mr. Kent Maurer, Manager
Jackson County Airport-Reynolds Field
3606 Wildwood Avenue
Jackson, MI 49202

Subject: Jackson County Airport
Jackson, MI
SRE Equipment Facility
Site Improvements Design

Dear Mr. Maurer:

Enclosed are three copies of a contract for the above mentioned project. We are sending a copy of this agreement to the MDOT Bureau of Aeronautics and Freight Services (AERO) for their review.

Once you have received approval from AERO, please sign all three copies and enter that date on the top of the first page of each contract copy. Retain one copy for your files and return two executed copies to this office. A fully executed copy will be forwarded to AERO.

If you have any questions, please call me.

Sincerely,

MEAD & HUNT, Inc.

A handwritten signature in black ink, appearing to read 'R. Leisenring', with a stylized, cursive script.

Robert A. Leisenring, PE

Enclosures

C: Amanda Hopper, AERO
Mead & Hunt file

October 2008

CONTRACT FOR PROFESSIONAL ENGINEERING SERVICE

This Contract is made and entered into this date of _____ by and between the Airport Owner, hereinafter referred to as SPONSOR,

Jackson County Airport

3606 Wildwood Avenue

Jackson, MI 49202

and the Engineer, hereinafter referred to as the CONSULTANT.

Mead & Hunt Inc.

2605 Port Lansing Road

Lansing, MI 48906

for the following PROJECT:

Location: Jackson County Airport/Reynolds Field

Jackson, MI

Description: Snow Removal Equipment Facility

And Site Improvements Design

(See Attachment D - Sketch for Location of Work Areas.)

M/H Project No. 10117-1100

Mead & Hunt

SUMMARY SHEET

Airport: Jackson County Airport-Reynolds Field
Project Description: SRE Site Improvements
M & H Project No.: 10117-1000_
200 Calendar days in contract

COST BY ELEMENT	
ELEMENT 1.11 - PRE DESIGN CONFERENCE	\$2,042.69
ELEMENT 1.12 - ENGINEERING SURVEY	\$2,311.15
ELEMENT 1.13 - DETAILED CONSTRUCTION PLANS AND SPECIFICATIONS	\$43,443.27
ELEMENT 1.14 - ESTIMATE OF PROBABLE CONSTRUCTION COST	\$2,985.99
ELEMENT 1.15 - ENGINEERING REPORT	\$2,288.55
ELEMENT 1.16 - USERS CONFERENCE	\$0.00
ELEMENT 1.18 - CONFERENCES AND MEETINGS	\$3,828.35
M&H PROJECT COSTS*	
\$56,900.00	

*excludes sub consultants

COST BREAKDOWN	
LABOR COST	
OVERHEAD COST @ 1.72	\$18,761.50
DIRECT COSTS	\$32,269.78
PROFIT @ 11%	\$232.50
SUB TOTAL	\$5,636.22
SUB CONSULTANTS- SOMAT	\$56,900.00
	\$8,100.00
TOTAL COST THIS PROJECT	
\$65,000.00	

DESIGN SERVICES FEE ESTIMATE - ATTACHMENT C

Airport: Jackson County Airport-Reynolds Field
 Project Description: SRE Site Improvements
 M & H Project No.: 10117-1000_

Employee Classification		PRINCIPAL	PROJECT ENGINEER	ENGINEER II	ENG TECH III	SURVEY TECH	CADD TECH	ADMIN ASSISTANT	AVIATION PLANNER
Hourly Rate		\$51.00	\$42.00	\$34.00	\$29.50	\$21.50	\$21.50	\$20.50	\$42.00
ELEMENT 1.11 - PRE DESIGN CONFERENCE									
Pre design meeting			8	8					
TOTAL HOURS			8	8	0	0	0	2	
No. of trips at 115 miles/trip		0							
Meals (days)			1					2	0
Nights Lodging			1	1					
Total labor and overhead this element		\$1,765.28							
Mileage this element (\$0.50 /mile)		\$57.50							
Meals this element (\$30/Trip)		\$0.00							
Meals this element (\$10/trip)		\$20.00							
Lodging (\$75/night)		\$0.00							
Phone									
Materials									
Profit this element		\$199.91							
TOTAL COST THIS ELEMENT		\$2,042.69							
ELEMENT 1.12 - ENGINEERING SURVEY									
Topographical survey						12	12	1	
Survey for soil borings						4	4		
Aerial Survey									
TOTAL HOURS		0	0	0	0	16	16	1	0
No. of trips at 115 miles/trip						2	2		
Meals (days)						2	2		
Nights Lodging									
Total labor and overhead this element		\$1,927.12							
Mileage this element (\$0.50 /mile)		\$115.00							
Meals this element (\$30/Trip)		\$0.00							
Meals this element (\$10/trip)		\$40.00							
Lodging (\$75/night)		\$0.00							
Phone									
Materials									
Profit this element		\$229.03							
TOTAL COST THIS ELEMENT		\$2,311.15							

Airport: Jackson County Airport-Reynolds Field
 Project Description: SRE Site Improvements
 M & H Project No.: 10117-1000

Employee Classification		PRINCIPAL	PROJECT ENGINEER	ENGINEER II	FNG TECH III	SURVEY TECH	CADD TECH	ADMIN ASSISTANT	AVIATION PLANNER
ELEMENT 1.13 - DETAILED CONSTRUCTION PLANS AND SPECIFICATIONS									
Title sheet, Quantity Sheet and Std Plans			4						
Safety/Phasing plan			8	16			16		2
Typical section			8				8		2
Supplemental specifications			8	40			16		2
Grading sheets			8	60					
Profile sheets			4	8		4			8
Demolition sheets			4	8					
Drainage sheet			8		40				
Water and Sanitary sheet			8	40					
Electrical Details									
Pavement Marking and Signage Layout/Details			2	16	40				
Restoration and Soil Erosion sheets			4		16		8		
Cross sections and earthwork summary				24					
TOTAL HOURS			56	212	96	4	48	6	8
Total labor and overhead this element		\$39,138.08							
Phone									
Printing									
Profit this element		\$4,305.19							
TOTAL COST THIS ELEMENT		\$43,443.27							
ELEMENT 1.14 - ESTIMATE OF PROBABLE CONSTRUCTION COST									
Cost estimate Civil			4	16					1
Cost estimate Electrical					8				1
TOTAL HOURS			4	16	8	0	0	2	0
Total labor and overhead this element		\$2,690.08							
Phone									
Materials									
Profit this element		\$295.91							
TOTAL COST THIS ELEMENT		\$2,985.99							

Airport: Jackson County Airport-Reynolds Field
 Project Description: SRE Site Improvements
 M & H Project No.: 10117-1000_

Employee Classification		PRINCIPAL	PROJECT ENGINEER	ENGINEER II	ENG TECH III	SURVEY TECH	CADD TECH	ADMIN ASSISTANT	AVIATION PLANNER
ELEMENT 1.15 - ENGINEERING REPORT									
	Civil report		4	8					2
	Electrical report				8				2
	TOTAL HOURS	0	4	8	8	0	0	0	4
Total labor and overhead this element		\$2,061.76							
Phone									
Materials									
Profit this element		\$226.79							
TOTAL COST THIS ELEMENT		\$2,288.55							
ELEMENT 1.16 - USERS CONFERENCE									
	TOTAL HOURS	0	0	0	0	0	0	0	0
	No. of trips at 115 miles/trip								
	Meals (days)								
	Nights Lodging								
Total labor and overhead this element		\$0.00							
Mileage this element (\$0.50 /mile)		\$0.00							
Meals this element (\$30/Trip)		\$0.00							
Meals this element (\$10/trip)		\$0.00							
Lodging (\$75/night)		\$0.00							
Phone									
Materials									
Profit this element		\$0.00							
TOTAL COST THIS ELEMENT		\$0.00							

Airport: Jackson County Airport-Reynolds Field
 Project Description: SRE Site Improvements
 M & H Project No.: 10117-1000_

Employee Classification	PRINCIPAL	PROJECT ENGINEER	ENGINEER II	ENG TECH III	SURVEY TECH	CADD TECH	ADMIN ASSISTANT	AVIATION PLANNER
ELEMENT 1.18 - CONFERENCES AND MEETINGS								
Pre-bid meeting		8	8					
Coordination with Sponsor		4						
Coordination with road commission			4					
Coordination with AERO		2						
Coordination with Utilities			8					
TOTAL HOURS	0	14	20	0	0	0	0	0
No. of trips at 115 miles/trip								
Lodging (\$75/night)								
Meals (days)								
Nights Lodging								
Total labor and overhead this element	\$3,448.96							
Mileage this element (\$0.50 /mile)	\$0.00							
Meals this element (\$30/Trip)	\$0.00							
Meals this element (\$10/trip)	\$0.00							
Lodging (\$75/night)	\$0.00							
Phone								
Materials								
Profit this element	\$379.39							
TOTAL COST THIS ELEMENT	\$3,828.35							

Design Engineering - Snow Removal Equipment (SRE) Facility
Jackson County Airport
Jackson, Michigan
SRE Building (NOT INCLUDING RELATED SITE DEVELOPMENT)

Mead & Hunt project number: (T&D)

Compensation Worksheet

Date: 28-Dec-19

Description:

Design, Construction Documents & Bidding Assistance (SEE SCOPE SUMMARY)

[illegible]

Mead & Hunt project number: (TBD)
 Compensation Worksheet
 Date: 28 Oct-10
 Description: Design, Const

[illegible]

Design Engineering - Snow Removal Equipment (SRE) Facility
Jackson County Airport
Jackson, Michigan
SRE Building (NOT INCLUDING RELATED SITE DEVELOPMENT)

Mead & Hunt project number: (79D)

Compensation Worksheet

Date: 28-04-10

Design, Construction Documents & Bidding Assistance (SEE SCOPE SUMMARY)

[illegible]

100

Design, Construction Documents & Bidding Assistance (SEE SCOPE SUMMARY)

[illegible]

**Mead
i Hunt**
 1000 S. 1st St., Suite 100
 Jackson, MS 39201
 Tel: 601.271.6000
 Fax: 601.271.6001
 www.mhna.com

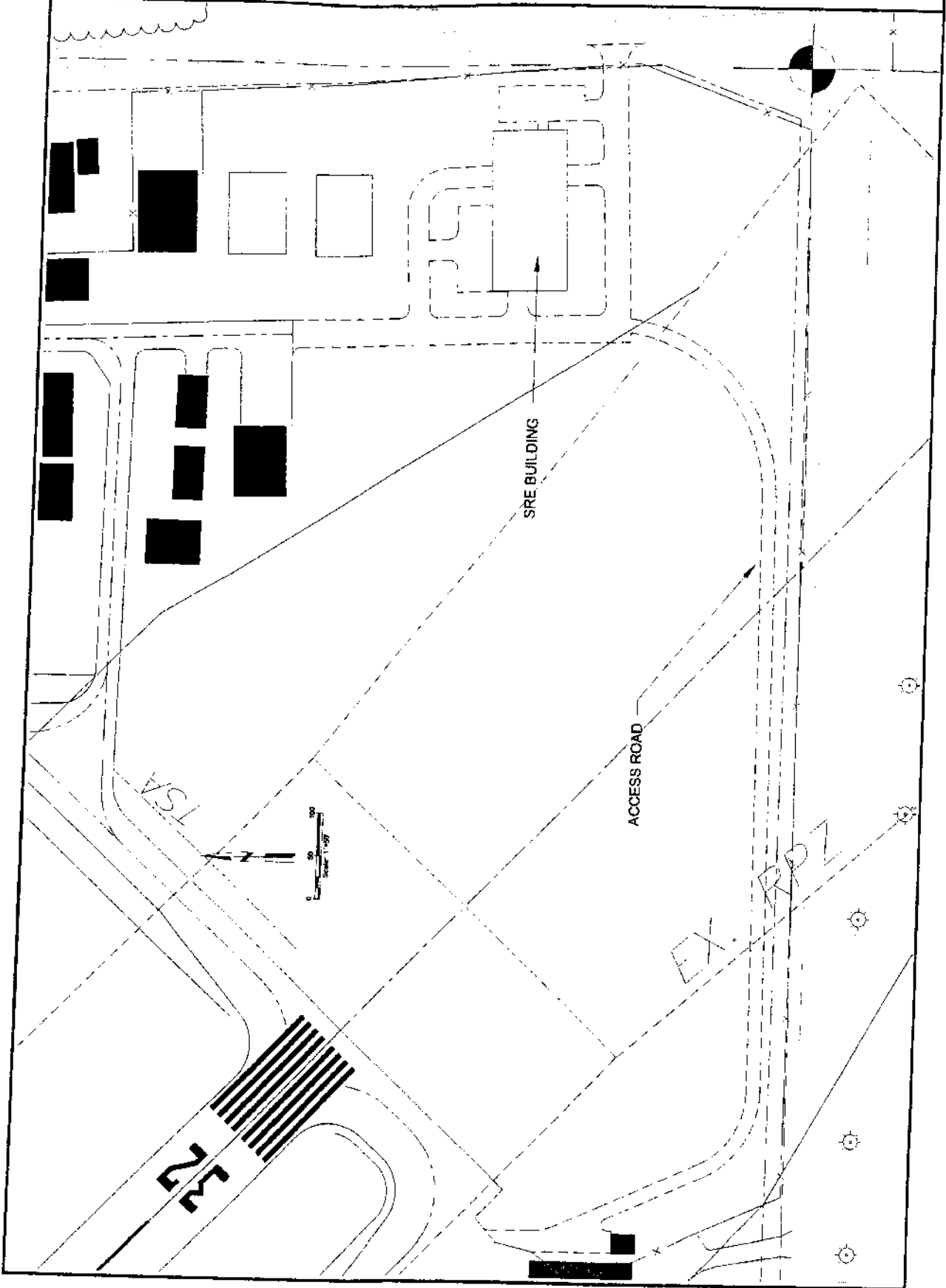
**JACKSON COUNTY AIRPORT
 SRE BUILDING AND ACCESS ROAD**

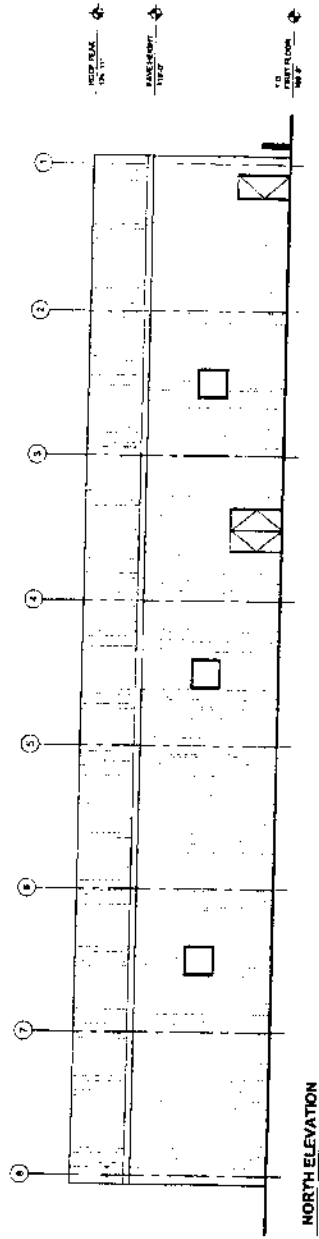
JACKSON, MISSISSIPPI

1000 S. 1st St., Suite 100
 Jackson, MS 39201
 Tel: 601.271.6000
 Fax: 601.271.6001
 www.mhna.com

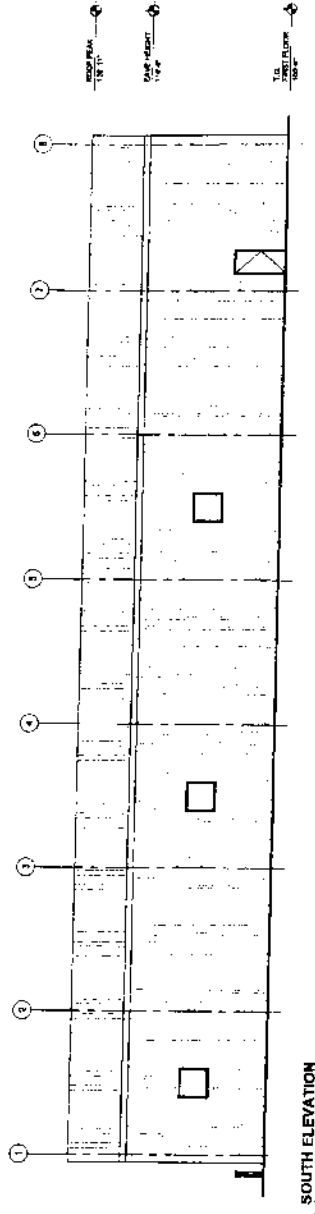
CONTRACT LAYOUT
 DWG

B-051

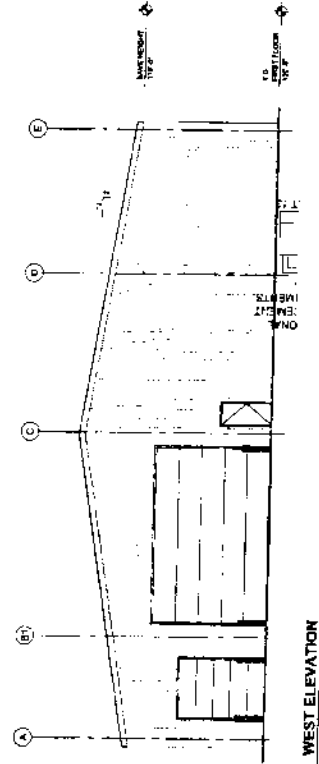




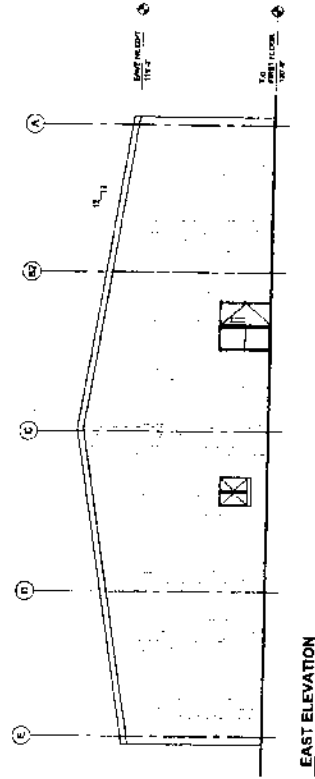
NORTH ELEVATION



SOUTH ELEVATION



WEST ELEVATION



EAST ELEVATION

PROPOSED CONCEPT DESIGN
JACKSON SRE-CBR

BUILDING ELEVATIONS -
OPTION 2 - R2

11/03/09



[illegible]

MEAD HUNT

PROPOSED CONCEPT DESIGN
JACKSON SRE-CBR

01/07/10

**BUILDING FLOOR
PLAN - OPTION 2 - R2**

JACKSON COUNTY - SANDSTONE TOWNSHIP

Law Enforcement Services Contract

THIS CONTRACT ("Contract"), entered into this ____ day of December 14, 2010 by and between THE COUNTY OF JACKSON, a Michigan municipal corporation, of 120 W. Michigan Ave., Jackson, Michigan 49201, hereinafter identified as the "County;" the OFFICE OF THE JACKSON COUNTY SHERIFF, 212 W. Wesley, Jackson, Michigan 49201 hereinafter identified as the "Sheriff;" and CHARTER TOWNSHIP OF SANDSTONE, a Michigan charter township, of 7940 County Farm Rd, Parma, Michigan 49269 hereinafter identified as the "Township."

WITNESSETH:

WHEREAS, the parties desire to enter into a contract whereby the Sheriff will provide law enforcement services within the boundaries of Sandstone Township and this Contract sets forth the terms, conditions, and obligations of the parties;

NOW THEREFORE, in consideration of the mutual promises and covenants hereinafter set forth, it is mutually agreed as follows:

1 Term.

- 1.1 The initial term of this Contract shall be from December 14, 2010 through March 31, 2013.
- 1.2 Unless a notice of intent not to renew, as hereinafter provided, is given by either party to the other party, in the manner hereafter specified, upon the expiration of the initial term of this Contract or any successive term, this Contract shall automatically renew for an additional one year term.

2 Compensation.

- 2.1 During the initial term of this Contract the Township shall pay the County the sum of \$91,617.00 per year for the period to cover the salary and fringe benefits of deputies who shall provide law enforcement services within the boundaries of Sandstone Township as hereinafter provided and shall also pay other direct costs for this operation in accordance with the terms and provisions of this Contract.
- 2.2 Payment shall be made in equal monthly payments of \$7,634.75 with the first payment being due on or before April 15, 2011 and on or before the fifteenth(15th) day of each month thereafter that this contract is in effect.
- 2.3 At least one hundred eighty (180) days prior to the expiration of the initial term of this Contract or any successive term of this Contract, the Sheriff shall notify Township of any adjustment in the annual compensation for the law enforcement services provided.

3 Services Provided.

- 3.1 The Sheriff agrees to provide the services of a deputy sheriff (the “Deputy”) and a patrol vehicle to the Township for a total of fifty-six (56) hours per week, fifty-two (52) weeks per year. The Deputy and patrol equipment shall remain within the boundaries of Sandstone Township while working for the Township pursuant to this Contract, except that the Sheriff, or his command officers, or the Dispatch Center, shall have the right to reassign the Deputy from Sandstone Township in case of any emergency that requires additional police units in some other portion of Jackson County or to render mutual aid to some other portion of Jackson County or to render mutual aid to other law enforcement agencies.
- 3.2 Unforeseen administrative emergencies, including, but not limited to, illness/ injury during a shift, necessity to reschedule, etc., shall not be viewed as a breach of this Contract. Such time, however, shall not exceed ten percent (10%) of total patrol hours.
- 3.3 In the unusual event that normal coverage cannot be scheduled or provided, an hourly deduction credit will be given.
- 3.4 Any time the Deputy is temporarily assigned to an area outside the Sandstone Township boundaries, the Sheriff shall report to the Township Board the reason for the assignment and the amount of time the Deputy spent out of the Township boundaries. However, the Township shall reserve the right to file an objection with the Sheriff if any unreasonable use is made of the emergency exception contained herein. Deputies assigned to the Township detail, while on duty, shall bid for calls only in the Township.
- 3.5 The law enforcement services to be provided shall include, but shall not be limited to, emergency calls for service, investigation and enforcement of violations of state statutes and certain Township ordinances directly related to public safety, random patrols, and traffic enforcement.

4 Reporting.

- 4.1 The Sheriff shall provide a monthly report to the Township’s Board, including a summary of criminal activity reported to the Sheriff; number of arrests; citations issued, number of calls for service; and actual hours which said deputies were involved with law enforcement within or as a result of Township duties.
- 4.2 The monthly reports will be provided to the Township by the fifth day of the month following the month for which the activities are reported.

5 Other Provisions.

- 5.1 The parties agree to hold a special conference upon the request of any of the parties to resolve any problems or conflicts that may arise during the term of this Contract or any extension thereof. Any portion of this Contract that may be unclear to the parties may be clarified by interpretations at said special conference meetings approved by all parties in writing.

- 5.2 An office for the Deputy may be established in Sandstone Township if the Township desires. If so desired, the Township shall provide adequate officespace and supplies as needed and shall be responsible for all expenses associated with the maintenance of the office.
- 5.3 At the reasonable request of the Township's Board, the Sheriff, or his representative, shall attend the Township's Board meetings when business directly associated with this Contract is to be discussed.

6 Termination and Non-renewal.

- 6.1 If the Sheriff elects not to renew this Contract for any successive renewal term, the Sheriff shall provide the Township with written notice of its intent not to renew at least one hundred twenty (120) calendar days prior to the expiration of the initial Contract term or any renewal term.
- 6.2 If the Township elects not to renew this Contract for any successive renewal term, the Township shall provide the Sheriff with written notice of its intent not to renew at least one hundred twenty (120) calendar days prior to the expiration of the initial Contract term or any renewal term.
- 6.3 Anything above to the contrary notwithstanding, this Contract may be terminated, at any time, by any of the parties hereto upon one hundred twenty (120) calendar days written notice to all other parties to this Contract.

7 Insurance.

The County agrees to maintain at its own expense during the term of this **Contract** the following insurance:

- 7.1 Workers' Compensation insurance for the Deputy working in the Township.
- 7.2 Public entity liability coverage, which includes general liability, law enforcement liability, auto liability and public official's liability coverage. The County's insurer will add Sandstone Charter Township as an additional insured under its public entity liability coverage. The County will be responsible for all expenses and loss payments.
- 7.3 The County shall submit a certificate of insurance that evidences such coverage to the Township Clerk prior to beginning services under this Contract.

8 Responsibility for Employees and Agents.

The parties agree that the County is responsible for the acts and/or omissions of its deputies and police service personnel in providing services under this Contract.

9 Compliance with Laws and Regulations.

The County and Sheriff will comply with all applicable federal, state and local regulations, including but not limited to, all applicable OSHA/MIOSHA requirements and the Americans with Disabilities Act.

10 Equal Employment Opportunity.

- 10.1 The parties to this Contract agree that they will not discriminate against any employee or applicant for employment because of race, creed, color, sex, sexual orientation, national origin, physical handicap, age, height, weight, marital status, veteran status, religion and political belief, except as it relates to a bona fide occupational qualification reasonably necessary to the normal operation of the business.
- 10.2 The parties to this Contract agree that they will take affirmative action to eliminate discrimination based on sex, race, or a handicap in the hiring of applicants and the treatment of employees. Affirmative action will include, but not be limited to: employment; upgrading, demotion or transfer; recruitment advertisement; layoff or termination; rates of pay or other forms of compensation; selection for training, including apprenticeship.
- 10.3 The parties to this Contract agree to post notices containing this policy against discrimination in conspicuous places available to applicants for employment and employees. All solicitations or advertisements for employees, placed by or on the behalf of the County, will state that all qualified applicants will receive consideration for employment without regard to race, creed, color, sex, sexual orientation, national origin, physical handicap, age, height, weight, marital status, veteran status, religion and political belief.

11 Equal Access.

The Sheriff shall provide the services set forth in this Contract without discrimination on the basis of race, color, religion, national origin, sex, sexual orientation, marital status, physical handicap, or age.

12 Changes in Scope or Schedule of Services.

Changes mutually agreed upon by the County, Sheriff and Township will be incorporated into this Contract by written amendment signed by all parties.

13 Choice of Law and Forum.

This contract is to be interpreted by the laws of Michigan. The parties agree that the proper venue for litigation arising out of this Contract is in Jackson County, Michigan.

14 Extent of Agreement.

This Contract represents the entire agreement between the parties and supersedes all prior representations, negotiations or agreements whether written or oral.

15 Notice. Any notice required by this Contract shall be given by first class mailing sent to the parties at the following addresses:

The County of Jackson
Attention: Randy Treacher (or current Administrator)
120 W. Michigan Ave.
Jackson, Michigan 49201

Office of the Jackson County Sheriff
Attention: Daniel H. Heyns (or current Sheriff)
212 Wesley Street
Jackson, Michigan 49201

Charter Township of Sandstone
Attention: L. Keith Acker (or current Supervisor)
7940 County Farm Road
Parma, MI 49269

IN WITNESS WHEREOF, the parties have executed this Contract as of the day and year first above written.

Charter Township of Sandstone

By: L. Keith Acker By: Priscilla Sutliff
Its: Supervisor Its: Clerk

The County of Jackson

By: _____
Its: _____

The Office of the Jackson County Sheriff

By: Daniel H. Heyns
Its: Sheriff



Jackson County

ADMINISTRATOR/CONTROLLER

Randall W. Treacher, Administrator/Controller

Adam J. Brown, Deputy Administrator

TO: Personnel & Finance Committee
Board of County Commissioners

FROM: Adam J. Brown
Deputy Administrator

SUBJECT: Add 1 FTE and Budget Associated Costs

DATE: December 3, 2010

Motion Requested

Approve the addition of 1 FTE to the Sheriff Program (org. key 101301) and approve the associated personnel costs consistent with the approved 2011 costs for road deputies contingent upon continued funding from Sandstone Township.

I. Background

- A. Through the cooperative efforts of Sandstone Township and the Jackson County Sheriff, a Law Enforcement Services Contract has been proposed. This contract is an agreement for the Jackson County Sheriff to provide additional law enforcement support to Sandstone Township.

II. Current Situation

- A. Assuming that the board approves the Law Enforcement Services Contract between Sandstone Township and Jackson County, an additional sworn officer will be necessary.

III. Analysis

- A. **Strategic** – The addition of a road deputy is consistent with the Board's number one strategy of having a safe community. It is also consistent with the Board's strategy to improve cooperation between governments through cooperative and collaborative work with other units of government.
- B. **Financial** – The amount of the contract is for \$91,617 per year, which is sufficient to fund the additional cost of a road deputy which is estimated at approximately \$56,362. This position should be approved contingent upon the continued contractual

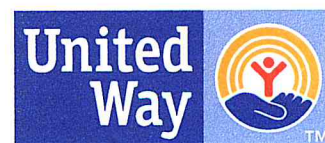
arrangement between Jackson County and Sandstone. It should be understood that the position will be eliminated if the funding is no longer available.

- C. **Timing** – The Sheriff’s Department has assured Sandstone Township that it can cover its needs immediately upon approval of the Law Enforcement Services Contract. That will create a vacancy in the Sheriff’s staffing plan, which will need to be filled quickly to ensure expected service levels.
- D. **Legal** – The Board’s approval is needed to increase the number of FTE’s to a program.

IV. Recommendation

The Administrator/Controller’s Office recommends that the Board of County Commissioners approve the addition of 1 FTE to the Sheriff Program (org. key 101301) and approve the associated personnel costs consistent with the approved 2011 costs for road deputies contingent upon continued funding from Sandstone Township.

LIVE UNITED.



**United Way
of Jackson County**

Executive Director
Ken Toll

November 22, 2010

Board of Directors

Dave Mengebier
President

Ted Westmeier
Jackson County Health Department
1715 Lansing Avenue
Jackson 49202

Ray Snell
First Vice-President

Dear Ted,

Malachi Crane
Second Vice-President

I am pleased to inform you that the United Way of Jackson County Board of Directors has approved Jackson County Health Department to receive a total of \$ 46,000 of Community Solutions funds for the Teen Pregnancy Prevention Initiative. You will receive monthly distributions for eighteen months beginning in January 2011 and ending in June 2012. *

Randy Ramirez
Secretary
Labor Participation

Enclosed you will find the United Way of Jackson County Partnership Agreement for your agency. Please review it with your Board of Directors, obtain the necessary signatures and return the original document to us by December 15, 2010.

Randy Treacher
Treasurer

Joe Lathrop
Past President

As you know, requests for funding were double the dollars available. As a result, many programs received only partial awards. United Way staff will contact you to provide any assistance you may need to adjust your program budget and/or your logic model to correlate with the amount of funds awarded.

Brendon Beer
Mindy Bradish-Orta
Bart Hawley
Chad Noble
Ed Piper
Mark Schilling
Bryanna Tapley
Jason Valente
Frank Weathers
Jeanné Wickens

If you have any questions, please contact Irene LeCrone or me at (517) 784-0511. I would welcome the opportunity to meet with your Board of Directors and answer any questions they may have; please do not hesitate to contact me to arrange any such meetings.

Congratulations on your achievement; we look forward to a productive partnership working together to meet community needs.

Sincerely,

Ken Toll
Executive Director

**Community Solutions funds are to be used only for the program stated above, for the purposes stated in your proposal. While this is the funding commitment being made at this time, funding may be adjusted based on campaign contributions, program performance and/or compliance with the Partner Agreement. Donor Directed funds (designations) are disbursed separately, and are not reported in Community Solutions funding.*

Our mission is to improve lives in Jackson County by mobilizing the community to make lasting change in community conditions.

**United Way
of Jackson County**



**Partnership Agreement between United Way of Jackson County
and
Jackson County Health Department**

A Partner Agency is defined as an organization that has an established relationship with the United Way of Jackson County (UWJC) as evidenced by its receipt of United Way funds for provision of health and human services.

The UWJC, as steward of community contributions, recognizes the importance of maintaining and enhancing donor confidence in United Way and in our community's nonprofit service network. United Way is committed to maximizing transparency and accountability, and therefore has established minimum standards for participation as a Partner Agency. The goal of United Way is to maintain a Partnership Agreement which is open, inclusive, and adaptive to changing human service needs.

The United Way of Jackson County and Jackson County Health Department *mutually* agree to:

- Work collaboratively with other human service partners, both public and private, on matters of common interest to prevent duplication of efforts and promote efficiency and economy of administration in human service programs, through the UWJC Community Solutions Process and other groups.
- Develop and implement solutions to community needs in accordance with the target areas and standardized outcomes that were mutually established through the Community Solutions process.
- Demonstrate ethical behavior and accountability toward all constituencies.
- Communicate to each other significant changes in a timely manner throughout the year (these may include changes in policies and procedures, changes in Agency leadership, organizational status or financial status, program changes, etc.).
- Recognize the need for full accountability to UWJC donors
- Periodically evaluate mission and services to maintain relevance and effectiveness
- Recommit to this agreement by signature each year the partnership is in place.

United Way of Jackson County agrees to:

- Conduct an annual community-wide fundraising campaign.
- Distribute funds in an ethical and transparent manner, consistent with established target areas and standardized outcomes.
- Coordinate and staff open, collaborative bodies, called Community Solutions Teams, to develop a strategic plan addressing an identified community need, and align program investment funding with those plans.
- Maintain the highest standards of financial accountability; records shall be audited annually by a certified public accountant and a report forwarded to the Board of Directors of United Way and made available to the Partner and members of the public (on its website and as requested).
- Accept campaign contributions which are designated to the Partner. These designations will be in addition to any dollars allocated through the Community Solutions Team process.

Initials of Agency Executive Director _____

- Provide, upon request and within available resources, consultation and assistance to the Agency in such areas as management, finance, marketing and public relations, personnel management, program evaluation and fundraising.

Jackson County Health Department agrees to:

- Operate programs and deliver services as outlined in grant proposal.
- Comply with Semi-Annual and Annual Reporting Requirements, including:
 - Annual Report (performance report on program outcomes/indicators to include how United Way dollars were used and their impact)
 - Program Demographics
 - Non-financial recommendations and/or contingencies
 - Provide copy of Annual Audit (including Management Letter)
 - Provide agency's Board of Directors roster on an annual basis
 - Interim Progress Report as necessary
- Maintain a currency of knowledge about the program's Community Solutions Team (CST). This may be achieved through meeting attendance, regular review of meeting minutes, and/or other activities which provide your program with exposure to the ongoing planning and evaluative conversations of the CST.
- Support the advocacy efforts of the program's Community Solutions Team (CST).
- Immediately notify the United Way Executive Director regarding any legal, financial, or organizational matters or program changes which may impact the agency's ability to operate and/or deliver the services.
- Immediately notify the United Way Executive Director of any event or issue that could result in negative public perception of the agency, its programs or, by association, the United Way.
- Provide services without discrimination based on age, race, color, religion, gender, veteran status, disability, sexual orientation, marital/parental status or national origin.
- Refrain from integrating religious activity into United Way-funded services. Inherently religious activities such as worship, prayer, proselytizing, or instruction must be separated from the United Way-funded program by time, location, or both.
- Comply with all requirements of any applicable federal, state, and local laws, ordinances and regulations. This includes, but is not limited to, laws and ordinances pertaining to equal employment opportunity, fair employment practices, nondiscrimination, and the USA Patriot Act or other counter terrorism laws (see attached).
- Maintain professional and liability insurance as required by law or license.
- Maintain responsible agency management, including a Board of Directors and an Executive Director, or a like position.
- Refrain from launching any capital campaigns during the United Way's annual fund drive period (September 1 through November 15). Partner Agencies will notify the United Way's Executive Director at least six months in advance of any capital campaign initiation, and will keep the United Way apprised of the purpose, time schedules and goals of said campaign. Continuation of ongoing capital campaigns during that time period is allowed.
- Offer employees the opportunity to participate in the United Way's annual fundraising campaign, and refrain from encouraging self-designations, recognizing the importance of community investment to the entire community.
- Allow United Way campaign staff to run an annual United Way campaign among the partner agency employees and its Board of Directors.

Initials of Agency Executive Director _____

- Participate in Speaker’s Bureau during the annual fundraising effort, as staff capacity allows and as program investment levels warrant.
- Refrain from conducting workplace-based solicitations, recognizing the benefits of a single annual community campaign as coordinated by the United Way.
- Identify partnership with United Way in all public communication where United Way support (funding and other resources) is a part of the program or services.

By signing below, both the United Way of Jackson County and Jackson County Health Department indicate that they have read and agree to abide by this agreement.

Signatures:

Partner Agency Executive Director Signature

Date

Partner Agency Board Chair Signature

Date

Partner Agency Board Treasurer Signature

Date

United Way Executive Director Signature

Date

United Way Board Chair Signature

Date

United Way Board Treasurer Signature

Date

Initials of Agency Executive Director _____

STATEMENT OF COMPLIANCE

In compliance with the spirit and intent of the USA PATRIOT Act and other counter terrorism laws, Jackson County Health Department, a not-for-profit corporation, represents that it takes reasonable steps to:

- (i) Verify that individuals or entities to which it provides, or from which it receives, funds or other material support or resources are not on the U.S. Government Terrorist Related Lists*;
- (ii) Protect against fraud with respect to the provision of financial, technical, in-kind or other material support or resources to persons or organizations on such lists; and
- (iii) Ensure that it does not knowingly provide financial, technical, in-kind or other material support or resources to any individual or entity that it knows beforehand is supporting or funding terrorism (whether through direct allocation by the United Way of Jackson County Board of Directors or through the distribution of donor designated funds which it processes for donors participating in a local campaign).

*In this form, "U.S. Government Terrorist Related Lists" refers to (a) the list of persons and entities in Executive Order 13244, (b) the master list of Specially Designated Nationals and Blocked Persons maintained by the Treasury Department, and (c) the list of Foreign Terrorist Organizations maintained by the Department of State, as may be updated from time to time.

Signatures:

Member Agency Executive (CEO)

Member Agency Board Chair

Printed name of Agency Executive

Printed Name of Agency Board Chair

Date

Initials of Agency Executive Director _____



Jackson County Health Department

1715 Lansing Avenue • Ste. 221 • Jackson, Michigan 49202

Phone (517) 788-4420

Fax (517) 788-4373

To: Board of Commissioners
County Administration

From: Ted Westmeier

Re: Behavioral Risk Factor Survey Funding Request

Date: November 24, 2010

The Health Improvement Organization (HIO) will be conducting a Behavioral Risk Factor Survey (BRFS) in 2011. This along with the Michigan Profile for Health Youth Survey (MIPHY) and other vital statistics are used to determine the health status of our community. The 2008 BRFS was instrumental in determining the priorities for the community health improvement plan. The 2011 survey will capture more detailed information targeting those priorities.

The core functions of public health are **community assessment, policy development** and **assurance**. The Health Department supports the actions of the HIO and the need for a BRFS in 2011. This information will assist us with our core functions and support for one of the strategic goals of the County. I am requesting that the Board of Commissioners authorize the Health Department to provide \$30,000 in support of the Jackson County 2011 BRFS.

Should you have any other questions or concerns do not hesitate to contact me.

An Equal Opportunity Employer

Accounting
788-4487

Environmental Health Division
788-4433

Health Education
788-4655

Personal & Preventative
Health
788-4420



Jackson County Animal Shelter

3370 Spring Arbor Rd • Jackson, Michigan 49203

Phone (517) 788-4464 • FAX (517) 780-4750



Memo

To: Human Services Committee
From: Steve Hall, Environmental Health Director
Subject: Animal Shelter Veterinarian Technician Contract
Date: November 23, 2010

Motion Requested: Approve my recommendation to increase the hours of our contracted veterinarian technician services from thirty (30) hours per week to forty (40) hours per week.

I. Background

- A. We entered into an independent contractor agreement with Heather Williams, LVT on July 13, 2010.
- B. The contract called for the veterinarian technician to assist the veterinarian with spay/neuter surgeries on animals adopted from the shelter, prepare animals for surgery, and to advise shelter staff on animal health issues including pre and post operation care.
- C. The contract with Heather Williams runs through June 30, 2012 at an hourly rate of \$14.

II. Current Situation

- A. Heather Williams' responsibilities exceed thirty (30) hours per week.
- B. Heather's responsibilities include: assessing the health of all animals in the shelter, vaccinating animals, de-worming animals, contacting the veterinarian to discuss the health of animals that need vet care, pre-operative preparation, anesthesia and post-operative recovery of animals, record keeping, and discussing medical care with new owners upon discharge.
- C. The additional ten (10) hours per week would add \$7,280 to the contract amount.
- D. Rex Pierce, our finance manager, reviewed our budget revenues and expenses since the surgery suite opened in July. He feels that we are able to absorb this cost into our current budget without any additional allocation from the county.

III. Next Steps

- A. As per policy, the Human Services Committee must approve the change to the contract.
- B. Following committee approval, the Jackson County Health Department will amend the independent contractor contract with Heather Williams.

IV. Recommendation

- A. Approve the request to increase the hours contracted veterinarian technician services from thirty (30) hours per week to forty (40) hours per week.

Cathy Anderson D.V.M.

5232 Pleasant Valley Rd

Brighton, MI 48114

November 17, 2010

The purpose of this letter is to explain what a critical person Heather Williams is to the Jackson County Animal Shelter. As you know Ms Williams was retained to provide veterinary technician services for the shelter in July of 2010. Her contract stipulated 30 hours a week. In reality the job description has evolved since July and is actually a 40 hour per week position. To fully appreciate why this is it is critical to have a sense of what Ms Williams does on a daily and weekly basis.

Ms Williams has been instrumental in initiating programs within the shelter that were virtually nonexistent prior to her tenure. She has implemented routine well animal care that includes vaccination and deworming of virtually every animal that arrives in the shelter. She has been responsible for identification and triaging of animals that have required medical care. This means that animals that need examinations by the veterinarian are brought to the veterinarian's attention. If the veterinarian is not in the shelter, Ms Williams contacts the doctor and gives the clinical signs that the animal is manifesting so that care can be commenced. Once medical orders have been given virtually all medical care is done by Ms Williams. Ms Williams has also been an ambassador for the animals with clients. She has implemented and executed discharge instructions for animals that have been adopted and has provided a directed "positive face" for the shelter.

Since mid-July the spay/neuter clinic has performed approximately 200 sterilization procedures. Without Ms. Williams this would not have been accomplished. Ms Williams has been responsible for the preoperative preparation of these animals, the anesthesia and the post-operative recovery. She is also responsible for insuring that appropriate records have been kept on this segment of the animal population (i.e. surgery reports, discharge letters, anesthetic logs etc).

On a personal level, I would like to state just how much I depend on Ms Williams. A veterinarian cannot perform their duties without a skilled staff. Without a technician with initiative and technical abilities it is difficult to care for the volume of animals with the level of care that is currently done at the shelter. Furthermore, Ms Williams truly is working for the best interest of the animals. She also has a great attitude which has been a positive influence on the rest of the shelter staff. I have worked with many technicians over the years and have seen various skill sets. I am truly impressed with Ms Williams' technical skills and her compassion. It is a rare combination. I am thrilled to work side by side with her. She completely understands the premise of team work.

Sincerely,


Cathy Anderson D.V.M.

**RESOLUTION (12-10.39) OF THE
BOARD OF COMMISSIONERS OF JACKSON COUNTY**

WHEREAS, the Restatement of the Jackson County Employees' Retirement System Bylaws as of January 1, 2010 (the "Restatement") has been presented and explained to the Board;

NOW THEREFORE, BE IT RESOLVED that the Restatement is adopted in the form presented to the meeting, effective as of the dates set forth therein.

RESOLVED FURTHER that Randall W. Treacher, Jackson County Administrator, is authorized and directed to sign the Restatement.

RESOLVED FURTHER that Fraser Trebilcock Davis & Dunlap is authorized to submit the Restatement to the Internal Revenue Service for a determination letter on its continued qualification.

I certify that the above is a true record of action taken by the Board of Commissioners of Jackson County on the _____ day of _____, 2010.

By: _____

Date: _____

Name: _____

Clerk, Board of Commissioners

Memorandum

TO: Jackson County Board of Commissioners

FROM: Brian T. Gallagher

RE: Restatement of Jackson County Employees' Retirement System Bylaws

DATE: December 1, 2010

The Jackson County Employees' Retirement System Bylaws (the "Bylaws") have been amended and restated effective January 1, 2010 (except as otherwise set forth therein), to incorporate a number of amendments made since the previous restatement of the Bylaws, as well as to make additional changes to the Retirement System. Some of these changes will substantively impact members' benefits and others are technical changes required by law. This memorandum summarizes those changes.

In addition to incorporating previous amendments to the Bylaws, we defined the "Plan Year" to be the calendar year, and we alphabetized the definitions section for ease of use. We also substantially modified the eligibility provisions of the Bylaws, both to incorporate previous amendments and to support the intended treatment of County employees as it relates to participation in the defined benefit Retirement System versus the defined contribution MERS plan, as previously clarified for us by the Board of Commissioners. In addition, we clarified the vesting, disability, and death benefit language throughout the Bylaws in order to maintain consistency with the Retirement System's revised normal retirement conditions.

A number of provisions throughout the Bylaws have been modified to reflect changes required or permitted by the Pension Protection Act of 2006 ("PPA") and the Heroes Earnings Assistance and Relief Tax Act of 2008 (the "HEART Act"). For instance, PPA required us to modify the rollover provisions of the Bylaws to permit rollovers by nonspouse beneficiaries, to provide for direct rollovers to Roth IRAs, and to permit the rollover of after-tax amounts to a 403(b) plan. PPA also enabled us to simplify the minimum required distribution language of the Bylaws, such that good faith compliance with the statutory language will be deemed to satisfy these requirements.

The HEART Act required us to include language throughout the Bylaws to the effect that individuals who die while performing qualified military service will be entitled to death benefits (including additional vesting) as if they resumed employment with the County immediately prior to their death. Furthermore, the HEART Act requires that differential wage payments (payments made to employees serving in the military to supplement their military wages) be counted as compensation for Code Section 415 maximum benefit limitation purposes. It is our

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understanding that the County does in fact make differential wage payments. We have amended the Bylaws to take these differential wage payments into account for all purposes, including benefit accruals. In our experience, employers have found that the administrative costs of maintaining two different sets of compensation records greatly exceeds the cost of including the differential wage payments for accrual purposes. However, we could modify the Bylaw language to exclude differential wage payments from compensation for benefit accrual purposes if the County would prefer.

Several of the modifications relate to the DROP Program. First, we included a provision allowing members to take an in-service distribution of their DROP accounts after three years of participation in the DROP program if they are at least 62 (the minimum age permitted by Regulations). We also fixed what we believe to be a typo in Section 10(3)(i) on page 29 (please let us know if this was actually intended to be "eligible"). Finally, we have amended the DROP provisions of the Bylaws to set forth the interest rate earned by new DROP participants as the Nominal Rate of Return on Smoothed Value minus 1%, with a floor of 4%.

We have also revised the Code Section 415 maximum benefit limitation language of the Bylaws.

Finally, we removed the "effective" and "amended" dates at the end of each section of the Bylaws. While these dates may provide some minimal historical value, it appears that at times they have not been dutifully updated each time the Bylaws were actually amended. At this point, we believe the marginal value provided by these dates would not justify the cost necessary to go back and reconstruct them. Setting forth some, but not all, of the dates results in the implication that the Bylaws were only amended on the dates listed. Therefore, we recommend removing these dates from the Bylaws entirely.

It was necessary to restate the Bylaws in order to submit them to the Internal Revenue Service with an application for a favorable determination letter on their continued qualification under the Internal Revenue Code. The revisions made to the Bylaws by the January 1, 2010 restatement are intended to satisfy the 2009 Cumulative List of Changes in Plan Qualification Requirements applicable to Cycle E filers for favorable determination letters. As an individually designed governmental plan, Jackson County is generally treated as a Cycle C filer. However, the County elected to take advantage of a special one-time option to be treated as a Cycle E filer for the initial EGTRRA remedial amendment cycle, as permitted by Revenue Procedure 2009-36. The County will revert back to Cycle C for purposes of future remedial amendment cycles, meaning that its next determination letter submission will be due by January 31, 2014 (with subsequent applications due every five years thereafter).

The Bylaws must be adopted no later than December 31, 2010. To this end, the Secretary of the Jackson County Board of Commissioners should sign and date the accompanying Resolutions at your December 14, 2010 meeting. After those Resolutions have been signed, Randy Treacher should sign and date the Bylaws not later than December 31, 2010. Since the Bylaws also include the Retirement System's trust provisions, they should also be executed by a

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representative of the Jackson County Employees' Retirement System Board of Trustees. None of the trust provisions of the Bylaws have changed.

JACKSON COUNTY
EMPLOYEES'
RETIREMENT SYSTEM

BYLAWS

Amended and Restated Effective January 1, 2010

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JACKSON COUNTY EMPLOYEES' RETIREMENT SYSTEM RESOLUTION

A resolution amending and restating the Jackson County Employees' Retirement System by-laws to incorporate changes, update language, and conform to Federal and State Laws.

Be it resolved, that the Jackson County Employees' Retirement System by-laws are hereby amended and restated in their entirety to read as follows (effective January 1, 2010, except as otherwise provided herein):

SECTION 1 ESTABLISHMENT - PURPOSE

The Jackson County Employees' Retirement System established as of January 1, 1947 by authority of Section 12a of Act No. 156 of the Public Acts of 1851, as amended, is continued for the purpose of providing retirement income to certain Employees and former Employees and survivor income to certain of their Beneficiaries.

SECTION 2 DEFINITIONS

The following words and phrases, as used in this Resolution, shall have the meanings set forth in this Section unless a different meaning is clearly required by the context:

Accumulated Member Contributions. The sum of all amounts credited to a Member's individual account in the reserve for Employee contributions, including Regular Interest.

Beneficiary. An individual who is being paid or who has entitlement to the future payment of a Retirement Allowance or other benefit by the Retirement System for a reason other than the individual's membership in the Retirement System.

Board of Trustees. The Board of Trustees created by Section 27 for the administration and management of the Retirement System.

Compensation. The salary or wages paid by the County to a Member for personal service rendered the County while a Member of the Retirement System. Compensation shall include base salary or wages; merit and longevity pay; cost of living allowances; salary or wages while absent from work on account of illness, holiday or vacation; overtime pay; shift premiums; and salary or wages for vacation and holiday time taken or worked. Compensation shall not include any remuneration or reimbursement not specifically stated as included. Notwithstanding the foregoing, effective April 15, 2003, Compensation shall not include any fees paid to an elected official pursuant to designation by the Board of Commissioners of additional duties, which are not part of an elected official's regular duties but are undertaken by such official. "Annual Compensation" means compensation during the plan year or such other consecutive 12-month period over which compensation is otherwise determined under the Bylaws (the "Determination Period"). The Annual Compensation of each member taken into account in determining benefit accruals in any plan year beginning on or after January 1, 1996, but before January 1, 2002, shall not exceed \$150,000, as adjusted for cost of living increases in accordance with Section 401(a)(17)(B) of the Internal Revenue Code. However, for those employees who first became members prior to the first day of the first plan year beginning after December 31, 1995, this limit shall not apply to the extent that it would reduce the amount of compensation that is taken into account below the amount that was allowed to be taken into account under the Retirement System as in effect on July 1, 1993. The Annual Compensation of each member taken into account in determining benefit accruals in any plan year beginning on or after January 1, 2002 shall not exceed \$200,000, as adjusted for cost of living increases in accordance with Section 401(a)(17)(B) of the Internal Revenue Code. In addition, see Section 6(2)(c) with regard to differential wage payments, as defined in Code Section 3401(h)(2).

County. The County of Jackson, Michigan, including its offices, boards, departments and instrumentalities, including the Board of Jackson County Road Commissioners and Jackson County Medical Care Facility.

Credited Service. The Service credited a Member as provided in Section 4.

Employee. An individual employed by the County for personal services whose Compensation from the County exceeds 50% of the individual's total Compensation for all personal services rendered governmental units. An individual employed by the County as a Circuit Court, District Court or Probate Court Judge to the extent of the County funded portion of the judicial salary, that being the difference between the total annual judicial salary and the salary payable by the State of Michigan.

Final Average Compensation. The annual average of the aggregate amount of Compensation paid a Member during the applicable number (as set forth below) of consecutive calendar years of Credited Service contained within the ten (10) consecutive calendar years preceding termination of County employment in which the aggregate amount of Compensation is greatest. The applicable number of consecutive years is as follows:

- a. Non-Union Members of Benefit Group General: The applicable number of consecutive years for a non-union Member of the Benefit Group General is:
 - (i) Five (5) consecutive years for any such Member who retired or otherwise terminated employment or membership prior to January 1, 1992.
 - (ii) Three (3) consecutive years for any such Member who is employed with the County in a membership position on or after January 1, 1992.
- b. AFSCME Members of Benefit Group General: The applicable number of consecutive years for a Member of American Federation of State, County and Municipal Employees of Benefit Group General is:
 - (i) Five (5) consecutive years for any such Member who retired or otherwise terminated employment or membership prior to April 1, 2001.
 - (ii) Three (3) consecutive years for any such Member who is employed with the County in a membership position on or after April 1, 2001.
- c. Jackson County Deputy Sheriff's Association, POAM and COAM Members of Benefit Group General: The applicable number of consecutive years for a Member of Jackson County Deputy Sheriff's Association, Police Officers Association of Michigan, and Command Officers Association of Michigan of Benefit Group General is:
 - (i) Five (5) consecutive years for any such Member who retired or otherwise terminated employment or membership prior January 1, 1990.
 - (ii) Three (3) consecutive years for any such Member who is employed with the County in a membership position on or after January 1, 1990.

- d. Assistant Prosecutor's Association Members of Benefit Group General: The applicable number of consecutive years for a Member of the Assistant Prosecutor's Association of Benefit Group General is:
 - (i) Five (5) consecutive years for any such Member who retired or otherwise terminated employment or membership prior December 31, 2001.
 - (ii) Three (3) consecutive years for any such Member who is employed with the County in a membership position on or after December 31, 2001.
- e. MNA Members of Benefit Group General: The applicable number of consecutive years for a Member of Michigan Nurses Association of Benefit Group General is:
 - (i) Five (5) consecutive years for any such Member who retired or otherwise terminated employment or membership prior January 1, 2001.
 - (ii) Three (3) consecutive years for any such Member who is employed with the County in a membership position on or after January 1, 2001.
- f. POLC Members of Benefit Group General: The applicable number of consecutive years for a Member of Police Officers Labor Council of Benefit Group General is:
 - (i) Five (5) consecutive years for any such Member who retired or otherwise terminated employment or membership prior May 1, 2002.
 - (ii) Three (3) consecutive years for any such Member who is employed with the County in a membership position on or after May 1, 2002.
- g. Probation Agent Members of Benefit Group General: The applicable number of consecutive years for a Member of Probation Agents of Benefit Group General is:
 - (i) Five (5) consecutive years for any such Member who retired or otherwise terminated employment or membership prior May 1, 2001.
 - (ii) Three (3) consecutive years for any such Member who is employed with the County in a membership position on or after May 1, 2001.
- h. Members of Benefit Group Road Commission and Benefit Group Medical Care Facility. The applicable number of consecutive years for a Member of Benefit Group Road Commission and Benefit Group Medical Care Facility is five (5) consecutive years.
- i. Attorney Referee/Magistrate's Association Members of Benefit Group General: The applicable number of consecutive years for Member of

Attorney Referee/Magistrate's Association of Benefit Group General is three (3) consecutive years.

If a Member has not been credited with the applicable number of consecutive years of Credited Service, Final Average Compensation shall mean the annual average of Compensation over the Member's total last applicable number of years of Credited Service. Provided, however, that the Final Average Compensation of a Member who is a Circuit Court Judge, District Court Judge or Probate Judge, when combined with the Member's Final Salary under the Probate Judges' Retirement System or the Judges Retirement System shall not exceed the Member's total annual judicial salary, payable from all State and County sources, at the time of the Member's retirement.

Member. An Employee who is a Member of the Retirement System.

Plan Year. The Retirement System's accounting year of twelve (12) months commencing on January 1 of each year and ending the following December 31.

Regular Interest. Such rate or rates of interest per annum, compounded annually, as the Board shall from time to time adopt.

Retirant. An individual who is being paid a Retirement Allowance on account of Credited Service acquired by the individual as a Member of the Retirement System.

Retirement Allowance. A series of monthly payments by the Retirement System for a temporary period or throughout the life of a Retirant or Beneficiary.

Retirement System. The Jackson County Employees' Retirement System maintained pursuant to this Resolution.

Service. Personal service rendered the County while a Member of the Retirement System, transfer service qualifying under Section 5, and military service qualifying under Section 6.

Worker's Compensation Benefits. The periodic Worker's Compensation Benefit paid a Member, Retirant, or Beneficiary, on account of disability or death arising out of and in the course of a Member's or Retirant's employment by the county, as determined by the Employer, subject to such appeals and final orders as provided under the Michigan Worker's Compensation Act. In the event a lump sum settlement is made of a Worker's Compensation claim, the Employer shall determine the applicable periodic payment. Payments in consideration of medical expenses shall be disregarded in the determination of a Worker's Compensation Benefit.

Worker's Compensation Period. The period for which Worker's Compensation is paid a Retirant or Beneficiary on account of disability or death arising out of and in the course of employment by the County, as determined by the Employer, subject to such appeals and final orders as provided under the Michigan Workers' Compensation Act. In

the event periodic Worker's Compensation Benefits are redeemed or a settlement of a Worker's Compensation claim is made,

Workers' Compensation Period means the period, if any, during which periodic Worker's Compensation Benefits are paid plus the period obtained by dividing the redemption or settlement by the applicable Worker's Compensation Periodic Benefit, as determined by the Employer. Payments in consideration of medical expenses shall be disregarded in the determination of Worker's Compensation Period.

SECTION 3 MEMBERSHIP; TERMINATION OF MEMBERSHIP

1. An individual who is employed by the County for personal service in a membership position shall be a Member of the Retirement System. A membership position is a position normally requiring 960 or more hours of work during the County's fiscal year, except as provided in Subsection 3(2).
2. The following types of employment are not membership positions:
 - a. Employment compensation on a contractual or a fee basis;
 - b. Employment while being paid a Retirement Allowance as a Retirant;
 - c. Temporary employment;
 - d. Any person participating as an active member in any other public employee retirement system or plan, except a Member who is a Circuit Court Judge, District Court Judge, or a Probate Judge to the extent of the County funded portion of the annual judicial salary, that being the difference between the total judicial salary and the salary payable by the State of Michigan.
 - e. Effective on and after August 21, 2007, employment as a member of the Jackson County Board of Road Commissioners.
 - f. Employment in a position as an elected or appointed official, a non-union Employee, or an Employee the terms of whose employment are governed by a collective bargaining agreement between the County and AFSCME, Michigan Council No. 25, the District Court Probation Agents Association, the Assistant Prosecutor's Association, or the Attorney Referee/Magistrate's Association, where the Employee was first hired, rehired, transferred, elected or appointed to such position on or after January 1, 2008. Provided, however, that if the Employee was an active Member of the Retirement System immediately preceding such hire, rehire, transfer, election or appointment, this Paragraph (f) shall not apply.
 - g. Employment as an Employee the terms of whose employment are governed by a collective bargaining agreement between the County and the Deputy Sheriff's Association of Jackson County, where the Employee was first hired, rehired, or transferred to such position on or after December 1, 2008. Provided, however, that if the Employee was an active Member of the Retirement System immediately preceding such hire, rehire, or transfer, this Paragraph (g) shall not apply.
 - h. Employment as an Employee the terms of whose employment are governed by a collective bargaining agreement between the County and

the Police Officers Association of Michigan, the Michigan Nurses Association, the Command Officers Association of Michigan, or the Police Officers Labor Council, where the Employee was first hired, rehired, or transferred to such position on or after January 1, 2010. Provided, however, that if the Employee was an active Member of the Retirement System immediately preceding such hire, rehire, or transfer, this Paragraph (h) shall not apply.

3. A Member who ceases to be employed in a membership position shall thereupon cease to be a Member.
4. The Board of Trustees shall decide all questions concerning the membership status of any individual.

**SECTION 4 CREDITED SERVICE; LOSS OF CREDITED SERVICE;
REINSTATEMENT OF CREDITED SERVICE**

1. Service rendered by a Member shall be credited to the Member's individual Credited Service account in accordance with the rules the Board of Trustees shall from time to time prescribe. In no case shall more than one year of Credited Service be credited on account of all Service rendered by a Member in any one calendar year. Service shall be credited to the nearest 1/12 year. The Board of Trustees may credit a Member with a full year of Credited Service if the Member has rendered at least 10/12 of a year of Service during a calendar year. At least 80 hours per month shall constitute one month of Service credit. **The Credited Service for a Member who retires on or after January 1, 2004 shall include periods of short-term disability, during which a Member simultaneously contributes to the Retirement System and receives payments from a short-term disability program sponsored by the County (which for purposes of this provision includes the County's disability program for Members represented by the Police Officers Association of Michigan, not to exceed 52 consecutive weeks). No time shall be counted for Credited Service on account of a Member's period of long-term disability that commences upon the expiration of the Member's short-term disability.**
2. Credited Service shall be forfeited and no longer in force if an individual's Accumulated Member Contributions are withdrawn from the reserve for Employee contributions and paid to the individual or Beneficiary (including an estate).
3. A Member may have forfeited Credited Service restored upon satisfaction of each of the following conditions:
 - a. The Retirement System is paid the total amount of Accumulated Member Contributions previously withdrawn together with compound interest from the date(s) of withdrawal to the date(s) of repayment;
 - b. The repayment is initiated and completed within the time periods established by the Board of Trustees.
4. PURCHASE OF UNIVERSAL CREDITED SERVICE - Certain Members may elect to purchase no more than four (4) years of Universal Credited Service. Members are eligible to purchase Universal Credited Service under this Section 4(4) if they are employed in one of the following Benefit Groups (as further defined in Section 7):
 - Non-union Members in the Benefit Group General effective as of July 9, 2002;

- Non-union Members in the Benefit Group Medical Care Facility effective as of January 1, 2003; and
- Members of any Benefit Group who are covered by a collective bargaining agreement that specifically allows such Members to purchase Universal Credited Service pursuant to this Section 4(4) (with an effective date as of the date specified in the applicable collective bargaining agreement).

Any eligible Member's election to purchase Universal Credited Service under this Section 4(4) shall be subject to the following rules:

- a. The Member must file a request to purchase Universal Credited Service on the form provided by the Board of Trustees.
- b. The Member shall be required to pay for the entire cost to purchase the Universal Credited Service under this Section 4(4), which cost is determined by the following formula: the Member's annual rate of Compensation at the time the Member commences his or her payments to purchase the Credited Service under this Section 4(4), multiplied by the Member's Multiplier Factor (10.3%, 11%, 12.4% or 13.8%, as determined below), multiplied by the Member's elected number of months or years of Credited Service to be purchased under this Section 4(4). The Member's Multiplier Factor is determined based on the Member's benefit group and/or the Retirement Allowance Multiplier of Final Average Compensation as specified in Section 10(1) as follows:
 - (i) For any Member, other than a Member of Benefit Group Medical Care Facility, the Multiplier Factor percentage is:
 - A. 11% is the Multiplier Factor for a Member with a Retirement Allowance Multiplier of 2.0% of Final Average Compensation.
 - B. 12.4% is the Multiplier Factor for a Member with a Retirement Allowance Multiplier of 2.25% of Final Average Compensation.
 - C. 13.8% is the Multiplier Factor for a Member with a Retirement Allowance Multiplier of 2.50% of Final Average Compensation.
 - (ii) For a Member of Benefit Group Medical Care Facility, the Multiplier Factor percentage is 10.3%.
- c. The County shall pick up Member contributions as result of a Member's election to purchase Universal Credited Service under this Section 4(4). Contributions picked up under this Section 4(4) are treated as employer contributions in determining the tax treatment under the Internal Revenue

Code and are not includible as gross taxable income of the Member until disbursement by the Retirement System. The County shall pay pick up contributions from the same source of funds that is used for paying compensation to the Member and by a payroll deduction in the Member's cash salary or wages. The payroll deduction shall be over a period not to exceed three (3) years. A Member's election to purchase Universal Credited Service under this Section 4(4) is irrevocable and the Member shall not have the option to receive the picked up contributions directly instead of having the County contribute them to the Retirement System.

Notwithstanding the foregoing, a Member may elect, in lieu of picked up contributions, to pay for the total cost of Universal Credited Service by a direct trustee-to-trustee transfer from a Code Section 403(b) plan or a Code Section 457(b) governmental plan to this Retirement System. The transferor plan (i.e. 403(b) or 457 plan) must specifically permit such direct trustee-to-trustee transfers for the purchase of permissive service credit (as defined by Code Section 415(n)(3)(A)). A Member alternatively may elect to have an Eligible Rollover Distribution (as defined in Section 20(5), but excluding any after-tax employee contributions) made from an Eligible Retirement Plan (as defined in Section 20(5)) to this Retirement System for purposes of paying the total cost for the Universal Credited Service elected under this Section 4(4).

A Member must elect the method of payment for Universal Credited Service at the time that the Member first elects to purchase Universal Credited Service under this Section 4(4). The Board of Trustees will provide Members with an election form to indicate the Member's method of payment.

- d. The Universal Credited Service purchased under this Section 4(4) shall be used for purposes of calculating a Member's Retirement Allowance, satisfying the service credit requirements for normal retirement conditions under Section 8 (e.g. 8, 10, 25, 30, or 35 years of Credited Service requirement, as applicable), and vesting under Section 9 (i.e. 8 or 10 years of Credited Service requirement, as applicable).
- e. If a Member dies or ceases to be employed in a membership position and a Retirement Allowance is not payable under the Retirement System, then any payment made by the Member under this Section 4(4) shall be refunded to the Member or to the Member's refund Beneficiary (as designated under Section 20) upon a written request filed with the Board of Trustees.
- f. A Member shall receive credit for the Universal Credited Service purchased under this Section 4(4) only upon the Retirement System's receipt of the full payment required under this Section 4(4). If a Member

terminates employment with the County prior to full payment for the Credited Service elected under this Section 4(4), such Member shall receive Credited Service only for the amount actually purchased at the time of termination.

SECTION 5 TRANSFERS TO COUNTY EMPLOYMENT

Pursuant to an agreement entered into between the City of Jackson and the County concerning the transfer of functions from the City of Jackson to the County, the following conditions shall apply in the event a Member of the City of Jackson Employees Retirement System is transferred to the employ of the County by reason of the transfer of a function or functions of a Member's department to the County, and becomes a Member of the County's Retirement System provided the Member enters County employment the date the transfer of function occurs:

1. The Member's City Credited Service may be used in satisfying the Service requirements for retirement under the County's Retirement System.
2. For the purpose of determining Final Average Compensation, compensation for services rendered the City of Jackson shall be regarded as Compensation paid by the County.
3. The Accumulated Contributions of the individual are left on deposit in the City of Jackson Employees Retirement System.
4. In no case shall the Member's City credited service be used in computing the amount of his County Retirement Allowance nor shall such credited service be used to satisfy the Service requirements for a deferred vested Retirement Allowance.

Except as specified in this Section, no credit will be recognized for prior service within other retirement systems.

SECTION 6 MILITARY SERVICE CREDIT

1. An individual who leaves or left County employment to enter the armed services of the United States before June 1, 1980, or who entered the armed services of the United States on or after June 1, 1980 during time of war, period of compulsory military service, or other period of national emergency (as such terms are defined in Section 1 of Act No. 190 of the Public Acts of 1965, as amended) may elect to receive Credited Service for not more than five years of active military service, provided that all of the following conditions are satisfied:
 - a. The individual specifically requests credit for such military service and pays to the Retirement System an amount equal to 5% of the Member's full-time or equated full-time annual Compensation for the year in which such payment is made to the System, multiplied by the number of years, and fraction of a year, of Credited Service for which such Member elects to receive credit;
 - b. In no case shall more than five years of Credited Service be credited on account of all military service; Service shall not be credited until the Member has 10 years of Credited Service in force. Only completed years and months of military service shall be credited under this Section;
 - c. Service shall not be credited if the Service is or would be credited under any other federal, state or local publicly supported retirement system.
2. Veterans' Reemployment Rights
 - a. Notwithstanding any provision of these Bylaws to the contrary, contributions, benefits and service credit with respect to qualified military service will be provided in accordance with Section 414(u) of the Internal Revenue Code.
 - b. In the case of a death occurring on or after January 1, 2007, if a Member or former Member dies while performing qualified military service (as defined in Code Section 414(u)), the survivors of the Member are entitled to any additional benefits (other than benefit accruals relating to the period of qualified military service) provided under the Retirement System as if the Member or former Member had resumed employment and then terminated employment on account of death. Moreover, the System will credit the Member's qualified military service for vesting purposes as though the Member had resumed employment under USERRA immediately prior to the Member's death.
 - c. For years beginning after December 31, 2008, (i) an individual receiving a differential wage payment, as defined by Code Section 3401(h)(2), shall be treated as an Employee of the County employer making the payment,

(ii) the differential wage payment shall be treated as compensation for all purposes under the Retirement System, and (iii) the Retirement System shall not be treated as failing to meet the requirements of any provision described in Code Section 414(u)(1)(C) (or corresponding Bylaw provisions) by reason of any contribution or benefit which is based on the differential wage payment.

- d. This Section shall be effective with respect to reemployment of individuals, entitled to reemployment after a period of qualified military service under the Uniformed Services Employment and Reemployment Rights Act of 1994 ("USERRA"), initiated on or after December 12, 1994.

SECTION 7 BENEFIT GROUPS

1. The following benefit groups are designated for the purpose of determining the benefit conditions and amounts applicable to a Member:
 - a. Benefit Group General, consisting of all Members not included in one of the benefit groups listed which follows. Benefit Group General includes the following sub-groups: non-union Members of Benefit Group General; Jackson County Deputy Sheriff's Association (formerly known as Benefits Group Sheriff); Police Officers Association of Michigan (POAM); American Federation of State, County and Municipal Employees (AFSCME); Michigan Nurses Association (MNA); Probation Agents; Assistant Prosecutor's Association; Police Officers Labor Council (POLC); Command Officers Association of Michigan; and Attorney Referee/Magistrate's Association.
 - b. Benefit Group Medical Care Facility, consisting of all Members who are employed in the County Medical Care Facility.
 - c. Benefit Group Road Commission, consisting of all Members who are employed in the County Road Commission, including the Road Commissioners.
2. Benefit eligibility conditions and amounts shall be those applicable to the Member's benefit group at the time of retirement or other termination of membership.

SECTION 8 NORMAL RETIREMENT CONDITIONS

1. A member may normally retire upon satisfaction of each of the following requirements:
 - a. The Member has filed written application for retirement with the Board of Trustees setting forth the date retirement is to be effective.
 - b. The Member terminates County Employment in a Membership Position prior to the date retirement is to be effective.
 - c. The Member has attained age 60 years or more and has eight or more years of Credited Service.
 - d. A Member may retire at any age upon completion of 25 years of Credited Service, if such Member is in one of the following Benefit Groups:
 - (i) A non-union Member of Benefit Group General, effective April 20, 1999.
 - (ii) A Member of Jackson County Deputy Sheriff's Association, Police Officers Association of Michigan or Command Officers Association of Michigan of Benefit Group General, effective January 1, 1990.
 - e. A Member may retire upon attaining the age of 55 with 10 or more years of Credited Service, if such Member is in one of the following Benefit Groups:
 - (i) Non-union Member of the Benefit Group General, effective December 31, 1990.
 - (ii) A Member of Jackson County Deputy Sheriff's Association, Police Officers Association of Michigan or Command Officers Association of Michigan of Benefit Group General, effective January 1, 1988.
 - f. A Member may retire at the time and under the conditions specified in a early retirement window program to the extent that such Member is covered by a collective bargaining agreement that specifically sets forth the terms and conditions of such early retirement window program. Such a collective bargaining agreement granting an early retirement window program shall constitute an amendment to these By-Laws.
 - g. Notwithstanding anything in this Subsection 8(1) to the contrary, in the case of a non-union Member of Benefit Group General who was first hired on or after January 1, 2006; a Member who is a county-wide elected or appointed official and who was first elected or appointed on or after

January 1, 2006; a Member of Assistant Prosecutor's Association, Probation Agents, Michigan Nurses Association; Attorney Referee/Magistrate's Association or American Federation of State, County and Municipal Employees of Benefit Group General who was first hired on or after January 1, 2007; or a Member of Police Officers Labor Council of Benefit Group General who was first hired on or after January 1, 2008, the provisions of Paragraphs (c), (d) and (e) above are modified as follows:

- (i) The number "10" shall be substituted for the number "eight" in Paragraph (c) above.
 - (ii) The number "30" shall be substituted for the number "25" in Paragraph (d) above.
 - (iii) The number "25" shall be substituted for the number "10" in Paragraph (e) above.
- h. A Non-union Member of Benefit Group Medical Care Facility may retire upon attaining the age of 55 with 35 or more years of Credited Service.
2. The effective date of retirement shall be the last day for which an Employee may earn accrued leave time such as vacation and sick leave benefits. First retirement benefit to be payable on the first of the month following one full month of retirement. The lump sum payment of accrued salary or benefits (other than retirement benefits) shall be considered Compensation earned prior to the effective date.
3. Upon retirement as provided in this Section, a Member shall be paid a Retirement Allowance computed according to Section 10.

**SECTION 9 VESTED TERMINATION OF MEMBERSHIP (DEFERRED
RETIREMENT)**

1. A Member who has eight or more years of Credited Service shall become a vested former Member upon termination of membership for a reason other than death or retirement. However, in the case of a non-union Member of Benefit Group General who was first hired on or after January 1, 2006; a Member who is a county-wide elected or appointed official and who was first elected or appointed on or after January 1, 2006; a Member of Assistant Prosecutor's Association, Probation Agents, Michigan Nurses Association; Attorney Referee/Magistrate's Association or American Federation of State, County and Municipal Employees of Benefit Group General who was first hired on or after January 1, 2007; or a Member of Police Officers Labor Council of Benefit Group General who was first hired on or after January 1, 2008, the previous sentence shall be applied by substituting the number "10" for the number "eight." A vested former Member shall be entitled to retire upon attaining retirement age and service credit as provided in Section 8(1) and upon retirement shall be paid a Retirement Allowance computed according to Section 10, as the Section provided at the time of such individual's last termination of membership.
2. Withdrawal of vested former Member's Accumulated Member Contributions and loss of Credited Service shall constitute a forfeiture of all rights in and to retirement and the Retirement Allowance otherwise provided by this Section.

SECTION 10 AMOUNT OF RETIREMENT ALLOWANCE

1. The amount of a Member's or a vested former Member's Retirement Allowance under Optional Form of Payment SL (Section 11) shall be equal to a Member's Credited Service multiplied by his or her Final Average Compensation multiplied by his or her Retirement Allowance Multiplier. The County financed portion of the Retirement Allowance shall not exceed 75% of Final Average Compensation. The Retirement Allowance Multiplier for each Benefit Group is as follows:
 - a. Non-Union Members of Benefit Group General: The Retirement Allowance Multiplier for a non-union Member of the Benefit Group General is:
 - (i) A one-time irrevocable election of a Retirement Allowance Multiplier equal to 2.0%, 2.25% or 2.5% effective for any such Member who is employed with the County in a membership position on or after November 1, 2000. A Member shall make the election under this paragraph no later than the date required by the Human Resources Department. Any election under this paragraph of a Retirement Allowance Multiplier that is higher than 2.0% will be funded solely through increased Member contributions (Section 21).
 - (ii) 2.0% for any such Member who is employed with the County in a membership position on or after May 23, 1985, but retired or otherwise terminated employment or membership prior to November 1, 2000.
 - (iii) The Retirement Allowance Multiplier as set forth in the Bylaws in effect at the time of such a Member's retirement or termination of membership or employment prior to May 23, 1985.
 - b. AFSCME Members of Benefits Group General: The Retirement Allowance Multiplier for a Member of American Federation of State, County and Municipal Employees ("AFSCME") of Benefit Group General is:
 - (i) A one-time irrevocable election of a Retirement Allowance Multiplier equal to 2.0%, 2.25% or 2.5% effective for any such Member who is employed with the County in a membership position on or after April 1, 2001. A Member shall make the election under this paragraph no later than the date required by the Human Resources Department. Any election under this paragraph of a Retirement Allowance Multiplier that is higher than 2.0% will be funded solely through increased Member contributions (Section 21).
 - (ii) 2.25% for any such Member who is employed with the County in a membership position on or after February 25, 2000, but retired or

otherwise terminated employment or membership prior to April 1, 2001.

- (iii) 2.0% for any such Member who is employed with the County in a membership position on or after May 23, 1987, but retired or otherwise terminated employment or membership prior to February 25, 2000.
- (iv) The Retirement Allowance Multiplier as set forth in the By-Laws in effect at the time of such a Member's retirement or termination of membership or employment prior to May 23, 1987.

c. POAM Members of Benefits Group General: The Retirement Allowance Multiplier for a Member of Police Officers Association of Michigan ("POAM") of Benefit Group General is:

- (i) 2.5% for any such Member who is employed with the County in a membership position on or after January 1, 2010. The increased Retirement Allowance of 2.5% will be funded solely through increased Member contributions (Section 21).
- (ii) 2.25% for any such Member who is employed with the County in a membership position on or after January 1, 1998. The increased Retirement Allowance of 2.25% will be funded solely through increased Member contributions (Section 21).
- (iii) 2.0% for any such Member who is employed with the County in a membership position on or after January 1, 1982, but retired or otherwise terminated employment or membership prior to January 1, 1998.
- (iv) The Retirement Allowance Multiplier as set forth in the By-Laws in effect at the time of such a Member's retirement or termination of membership or employment prior to January 1, 1982.

d. Jackson County Deputy Sheriff's Association: The Retirement Allowance Multiplier for a Member of Jackson County Deputy Sheriff's Association of Benefit Group General is:

- (i) 2.25% for any such Member who is employed with the County in a membership position on or after January 1, 1998. The increased Retirement Allowance of 2.25% will be funded solely through increased Member contributions (Section 21).
- (ii) 2.0% for any such Member who is employed with the County in a membership position on or after January 1, 1982, but retired or

otherwise terminated employment or membership prior to January 1, 1998.

- (iii) The Retirement Allowance Multiplier as set forth in the By-Laws in effect at the time of such a Member's retirement or termination of membership or employment prior to January 1, 1982.

e. Assistant Prosecutor's Association Members of Benefit Group General: The Retirement Allowance Multiplier for a Member of the Assistant Prosecutor's Association of Benefit Group General is:

- (i) A one-time irrevocable election of a Retirement Allowance Multiplier equal to 2.0%, 2.25% or 2.5% effective for any such Member who is employed with the County in a membership position on or after December 31, 2001. A Member shall make the election under this paragraph no later than the date required by the Human Resources Department. Any election under this paragraph of a Retirement Allowance Multiplier that is higher than 2.0% will be funded solely through increased Member contributions (Section 21).
- (ii) 2.0% for any such Member who is employed with the County in a membership position on or after May 23, 1987, but retired or otherwise terminated employment or membership prior to December 31, 2001.
- (iii) The Retirement Allowance Multiplier as set forth in the By-Laws in effect at the time of such a Member's retirement or termination of membership or employment prior to May 23, 1987.

f. COAM Members of Benefits Group General: The Retirement Allowance Multiplier for a Member of the Command Officers Association of Michigan ("COAM") of Benefit Group General is:

- (i) 2.5% for any such Member who is employed with the County in a membership position on or after November 21, 2000. The increased Retirement Allowance of 2.5% will be funded solely through increased Member contributions (Section 21).
- (ii) 2.25% for any such Member who is employed with the County in a membership position on or after January 1, 1998, but retired or otherwise terminated employment or membership prior to November 21, 2000.
- (iii) 2.0% for any such Member who is employed with the County in a membership position on or after January 1, 1982, but retired or

otherwise terminated employment or membership prior to January 1, 1998.

- (iv) The Retirement Allowance Multiplier as set forth in the By-Laws in effect at the time of such a Member's retirement or termination of membership or employment prior to January 1, 1982.
- g. MNA Members of Benefit Group General: The Retirement Allowance Multiplier for a Member of Michigan Nurses Association ("MNA") of Benefit Group General is:
- (i) A one-time irrevocable election of a Retirement Allowance Multiplier equal to 2.0%, 2.25% or 2.5% effective for any such Member who is employed with the County in a membership position on or after May 1, 2001. A Member shall make the election under this paragraph no later than the date required by the Human Resources Department. Any election under this paragraph of a Retirement Allowance Multiplier that is higher than 2.0% will be funded solely through increased Member contributions (Section 21).
 - (ii) 2.0% for any such Member who is employed with the County in a membership position on or after May 23, 1987, but retired or otherwise terminated employment or membership prior to May 1, 2001.
 - (iii) The Retirement Allowance Multiplier as set forth in the By-Laws in effect at the time of such a Member's retirement or termination of membership or employment prior to May 23, 1987.
- h. POLC Members of Benefits Group General: The Retirement Allowance Multiplier for a Member of Police Officers Labor Council ("POLC") of Benefit Group General is:
- (i) A one-time irrevocable election of a Retirement Allowance Multiplier equal to 2.0%, 2.25% or 2.5% effective for any such Member who is employed with the County in a membership position on or after May 1, 2002. A Member shall make the election under this paragraph no later than the date required by the Human Resources Department. Any election under this paragraph of a Retirement Allowance Multiplier that is higher than 2.0% will be funded solely through increased Member contributions (Section 21).
 - (ii) 2.25% for any such Member who is employed with the County in a membership position on or after December 31, 2001, but retired or otherwise terminated employment or membership prior to May 1, 2002.

- (iii) 2.0% for any such Member who is employed with the County in a membership position on or after January 1, 1987, but retired or otherwise terminated employment or membership prior to December 31, 2001.
 - (iv) The Retirement Allowance Multiplier as set forth in the By-Laws in effect at the time of such a Member's retirement or termination of membership or employment prior to January 1, 1987.
- i. Probation Agent Members of Benefits Group General: The Retirement Allowance Multiplier for a Member of Probation Agents of Benefit Group General is:
 - (i) A one-time irrevocable election of a Retirement Allowance Multiplier equal to 2.0%, 2.25% or 2.5% effective for any such Member who is employed with the County in a membership position on or after May 1, 2001. A Member shall make the election under this paragraph no later than the date required by the Human Resources Department. Any election under this paragraph of a Retirement Allowance Multiplier that is higher than 2.0% will be funded solely through increased Member contributions (Section 21).
 - (ii) 2.25% for any such Member who is employed with the County in a membership position on or after February 25, 2000, but retired or otherwise terminated employment or membership prior to May 1, 2001.
 - (iii) 2.0% for any such Member who is employed with the County in a membership position on or after May 23, 1987, but retired or otherwise terminated employment or membership prior to February 25, 2000.
 - (iv) The Retirement Allowance Multiplier as set forth in the By-Laws in effect at the time of such a Member's retirement or termination of membership or employment prior to May 23, 1987.
- j. Attorney Referee/Magistrate's Association Members of Benefit Group General: The Retirement Allowance Multiplier for a Member of Attorney Referee/Magistrate's Association of Benefits Group General is a one-time irrevocable election of a Retirement Allowance Multiplier equal to 2.0%, 2.25%, or 2.5%. A Member shall make this election under this paragraph no later than the date required by the Human Resources Department. Any election under this paragraph of a Retirement Allowance Multiplier that is higher than 2.0% will be funded solely through increased Member contributions (Section 21).

- k. Medical Care Facility Benefit Group: The Retirement Allowance Multiplier for all Members of the Medical Care Facility Benefit Group is:
 - (i) 2.0% for any Member who is employed with the County in a membership position on and after July 1, 1987.
 - (ii) The Retirement Allowance Multiplier as set forth in the By-Laws in effect at the time of such a Member's retirement or termination of membership or employment prior to July 1, 1987.
- l. Road Commission Benefit Group: The Retirement Allowance Multiplier for all Members of the Road Commission Benefit Group is:
 - (i) 2.50% for any such Member who is employed with the County in a membership position on or after April 11, 2001.
 - (ii) 2.25% for any such Member who is employed with the County in a membership position on and after October 1, 1994, but retired or otherwise terminated employment or membership prior to April 11, 2001.
 - (iii) 2.0% for any such Member who is employed with the County in a membership position on and after April 1, 1990, but retired or otherwise terminated employment or membership prior to October 1, 1994.
 - (iv) The Retirement Allowance Multiplier as set forth in the By-Laws in effect at the time of such a Member's retirement or termination of membership prior to April 1, 1990.
- 2. If a Retirant is re-employed by the County and becomes eligible to participate in the MERS Uniform Defined Contribution Program sponsored by Jackson County (the "Defined Contribution Plan"), any Retirement Allowance being paid to the re-employed Retirant under the Retirement System shall be suspended as of the date of such eligibility. Upon a re-employed Retirant's subsequent termination of employment with the County, or if earlier, loss of eligibility to participate in the Defined Contribution Plan, such Retirement Allowance shall resume in the original monthly amount, and it shall not be adjusted to reflect the missed payments following re-employment with the County.
- 3. Effective January 1, 2002, the County, pursuant to collective bargaining agreements, established a Deferred Retirement Option Plan ("DROP"), as described in this Section 10(3). A Member is eligible to participate in the DROP if

he or she is employed in one of the following Benefit Groups (as further defined in Section 7):

- Jackson County Deputy Sheriff's Association of Benefit Group General effective as of January 1, 2002;
 - Members of the Command Officers Association of Michigan of Benefit Group General effective as of January 1, 2002;
 - Non-union Members in the Benefit Group General effective as of January 1, 2002;
 - Members of the Police Officers Labor Council of Benefit Group General effective as of May 1, 2002;
 - Non-union Members in the Benefit Group Medical Care Facility effective as of October 22, 2002;
 - Members of Benefit Group Road Commission effective February 1, 2006, except Road Commissioners who were appointed on or after February 1, 2006;
 - Members in any Benefit Group who are covered by a collective bargaining agreement that specifically allows such Members to participate in the DROP as described under this Section 10(3) (with an effective date as of the date specified in the applicable collective bargaining agreement); and
 - Notwithstanding anything in this Subsection 10(3) to the contrary, a Member whose membership position is based on being an elected or appointed county official and whose election or appointment as a county official first occurred on or after January 1, 2005 is not eligible to make an election to participate in the DROP on or after January 1, 2006.
- a. A Member who is eligible to receive a service pension under Section 8 of the bylaws and who remains in active service may elect to participate in the Deferred Retirement Option Plan (DROP). A Member who elected the DROP shall apply for a monthly service pension under Section 8 of the bylaws except that the effective date of the Member's election to participate in the DROP will be considered the Member's retirement date for determining the amount of the Member's monthly service pension. The Member may also apply for any DROP benefit provided under this section on terminating active service. Except as provided in Subsection i., an election to participate in the DROP, once approved by the Board, is irrevocable.

- b. A Member may elect to participate in the DROP by complying with the election process established by the Board. The Member's election may be made at any time beginning on the date the Member is eligible for a service pension under Section 8 of the bylaws. The election becomes effective on the first day of the month following the month which the employee has designated as their end date as a Member of the retirement system; which election is subject to Board approval. Prior to the effective date of the Member's DROP election, a Member shall make an irrevocable election to continue to make contributions or cease making contributions from the Member's salary as provided under Section 21 of the bylaws. If the Member elects to continue contributions, then amounts equal to the deductions made from the Member's salary under Section 21 of the bylaws shall be credited to the Member's DROP account. If a DROP participant remains in active service after the effective date of the Member's DROP election, subsequent deductions from the Member's salary under Section 21 of the bylaws may be credited to the Member's DROP account and may not otherwise increase any benefit payable from the fund for the Member's service.
- c. Beginning in the month a Member's DROP election becomes effective, an amount equal to the monthly service pension the Member would have received under Section 8 and Section 10 of the bylaws had the Member terminated active service on the effective date of the Member's DROP election shall be credited, including any adjustments to the Final Average Compensation calculation for accrued and available paid time off, to a DROP account maintained for the Member. The monthly credit to the Member's DROP account shall continue until the earlier date the Member terminates active service or the third anniversary of the effective date of the Member's DROP election.
- d. A Member's DROP account shall be credited with interest credit at an annual rate equal to seven percent (7%), which rate is calculated to be the actuarial rate of the Plan, less approximate administrative charges of the DROP plan. Such interest credit shall be computed and credited at a time and in a manner determined by the Board, except that an interest credit shall be credited not less frequently than once in each 13-month period and shall take into account partial years of participation in the DROP. The Member's DROP account may not be credited with interest after the third anniversary of the effective date of the Member's DROP election.

Notwithstanding the foregoing, the DROP accounts of non-union Members electing to participate in the DROP on or after February 17, 2010 and union Members electing to participate in the DROP on or after January 1, 2010 shall be credited with interest credit at an annual rate equal to the Nominal Rate of Return on Smoothed Value for the relevant Plan Year (as set forth in the Asset Summary portion of the Retirement System's Annual

Actuarial Valuation) minus 1.0%, provided however that such Members' DROP accounts shall be credited with interest credit at a minimum annual rate of 4.0%.

- e. A Member who terminates active service after participating in the DROP or makes an election pursuant to Subsection I is entitled to receive, in addition to the Member's service pension under Section 8 of the bylaws, a benefit equal to the balance of the Member's DROP account. However, in the case of a Member who makes an election pursuant to Subsection I, the Member's service pension under Section 8 of the bylaws shall not commence until the Member terminates active service. The balance of a Member's DROP account shall be paid to the Member (or rolled over or transferred to another qualified retirement plan or IRA, as the case may be), in a single lump-sum payment, after Board approval, and as soon as is administratively practicable after the Member's termination of active service or election pursuant to Subsection I.
- f. A Member who elects to participate in the DROP is considered to have terminated active service on the effective date of the Member's DROP election for purposes of computing and providing service pension benefits and for purposes of computing and providing death benefits under Section 16 or 17 of the bylaws. A salary earned or additional years of participation completed after the Member's DROP election becomes effective shall not be considered in the computation of retirement, disability, or death benefits unless a DROP revocation is made as prescribed in Subsection i.
- g. If a DROP participant dies before complete distribution of the Member's DROP account has been made, the Member's DROP account balance shall be distributed to the Member's designated beneficiaries.
- h. An eligible Beneficiary's share of a deceased Member's DROP account shall be distributed, after Board approval, and as soon as administratively practicable after the Member's death in the form of a single lump-sum payment or rolled over or transferred to another qualified retirement plan or IRA, as the case may be.
- i. Except as otherwise provided by this subsection, a Member who participates in the DROP is ineligible for disability benefits, and the Member's survivors are ineligible to receive enhanced death benefits described in Section 16 and 17. A DROP participant who is determined under Section 13 and 14 of the bylaws to be incapable of performing any substantial gainful employment because of an on-duty disability described by Section 14 of the bylaws may retroactively revoke the Member's DROP election if the revocation occurs before the Member receives a distribution from the Member's DROP account or retirement benefits. If a DROP participant dies in the course of the performance of the Member's duty or

dies as a result of an on-duty disability, the DROP participant's eligible survivors and the Member's designated DROP beneficiaries under Subsection g. of this section may, by unanimous agreement, retroactively revoke the Member's DROP election if the revocation occurs before receipt of a distribution from the Member's DROP account, service pension benefits under Section 8 of the bylaws, or death benefits under Section 16 or 17 of the bylaws. For purposes of this subsection, an on-duty disability must have occurred after the effective date of a Member's election to participate in the DROP. If the DROP election revocation is made as prescribed by this subsection, the Member's DROP account is not distributed, and the Member or the Member's Beneficiary, as applicable, is entitled to benefits under this article as if a DROP election had not been made.

- j. A retired Member who previously participated in the DROP and who returns to active service is subject to the terms of this section in effect at the time of the Member's return to active service.
- k. A Member who has made a DROP election is classified as retired. Unless the Member who has made the DROP election has terminated active service or has made an election under Subsection l, the Member is not eligible to be paid, nor eligible to accrue or to receive any benefit that is accrued or received by a Member who has terminated active service or by the eligible survivors of deceased Members.
- l. A Member who has made a DROP election may, upon the occurrence of the later of the third anniversary of the effective date of the Member's DROP election or attainment of age 62, elect to receive the balance of the Member's DROP account in accordance with Subsection e.

SECTION 11 OPTIONAL FORMS OF PAYMENT OF A RETIREMENT ALLOWANCE

1. A Member or a vested Member may elect to be paid under any one of the following optional forms of payment. The election shall be in writing and filed with the Board of Trustees prior to the date the retirement is effective. Payment will be made under Optional Form of Payment SL unless a timely election of another optional form of payment is made. The amount of Allowance under Optional Form of Payment A, B, C, D, PC and G shall have the same actuarial value as the amount of Allowance under Optional Form of Payment SL. Such actuarial equivalency shall be computed using actuarial assumptions as adopted by the Board of Trustees from time to time. For purposes of determining the actuarial equivalency of Retirement Allowances in an optional form of payment under this section, the actuarial assumptions adopted by the Board of Trustees currently is a 7% interest rate and a blend of 95% male rates and 5% female rates from the 1971 Group Annuity Mortality table.
 - a. ***Optional Form of Payment A - 100% Survivor Allowance for Spouse.*** Under Optional Form of Payment A, a Retirant is paid a reduced Retirement Allowance for life with the provision that upon the Retirant's death the reduced Retirement Allowance shall be continued throughout the future lifetime of and paid to the Retirant's spouse if such spouse survives the Retirant.
 - b. ***Optional Form of Payment B - 50% Survivor Allowance for Spouse.*** Under Optional Form of Payment B, a Retirant shall be paid a reduced Retirement Allowance for life with the provision that upon the Retirant's death, one-half of the reduced Retirement Allowance shall be continued throughout the future lifetime of and paid to the Retirant's spouse if such spouse survives the Retirant.
 - c. ***Optional Form of Payment C - 100% Survivor Allowance to Other Designated Beneficiary.*** Under Optional Form of Payment C, a Retirant is paid a reduced Retirement Allowance for life with the provision that upon the Retirant's death the reduced Retirement Allowance shall be continued throughout the future lifetime of and paid to the Retirant's designated Beneficiary if such designated Beneficiary survives the Retirant.
 - d. ***Optional Form of Payment D - 50% Survivor Allowance to Other Designated Beneficiary.*** Under Optional Form of Payment D, a Retirant shall be paid a reduced Retirement Allowance for life with the provision that upon the Retirant's death, one-half of the reduced Retirement Allowance shall continue throughout the future lifetime of and paid to the Retirant's designated Beneficiary if such designated Beneficiary survives the Retirant.

- e. **Optional Form of Payment SL - Straight Life Retirement Allowance.** Under Optional Form of Payment SL the Retirant is paid an unreduced Retirement Allowance for life. All retirement benefits cease upon the death of the Retirant.
 - f. **Optional Form of Payment PC - Ten-Year Period Certain Life Annuity.** Under Optional Form of Payment PC, a Retirant shall be paid a reduced Retirement Allowance for life with the provision that if the Retirant dies prior to receipt of at least 120 monthly payments, the remaining payments (out of such 120 minimum) shall be payable to the beneficiaries as the Retirant shall have designated in writing and filed with the Board of Trustees at the time of election of the Optional Form of Payment.
 - g. **Optional Form of Payment G - Survivor Allowance with Straight Life Reversion.** Under Optional Form of Payment G, a Retirant shall be paid a benefit under paragraphs (a), (b), (c) or (d) with the provision that in the event the Retirant's designated Beneficiary predeceases the Retirant, the Retirant shall be paid a Straight Life annuity for the remainder of the Retirant's life, commencing with the first of the month following the month in which the Retirant provides written notification (including a certified copy of the death certificate) of the death of the designated Beneficiary to the Administrator of the Retirement System.
2. If any benefits become payable under Section 17 on account of the death of a disability Retirant who was receiving a Retirement Allowance under either Option A or B, no survivor allowance shall be paid under the said Option A, B, C, D or G.

SECTION 12 TERMINATION OF RETIREMENT ALLOWANCE - RESIDUAL PAYMENT

In the event all Retirement Allowance payments terminate before there has been paid an aggregate amount equal to the Retirant's Accumulated Contributions at the date retirement was effective, the difference between the Retirant's Accumulated Contributions and the aggregate amount of Retirement Allowance payments made shall be paid to such person or persons as the Retirant shall have designated in writing and filed with the Board of Trustees. If there be no such individual surviving the Retirant, the difference shall be paid to the estate of the last survivor among the Retirant and the designated person or persons.

SECTION 13

DISABILITY RETIREMENT - GENERAL PROVISIONS

1. Upon the application of a Member or the Member's department head, a Member who becomes incapacitated for employment by the County in his or her current position by reason of a personal injury or disease may be retired by the Board of Trustees subject to the following conditions:
 - a. The Member has 10 or more years of Credited Service in force;
 - b. The Member is medically examined by a physician appointed by the Board of Trustees;
 - c. The appointed physician certifies to the Board of Trustees that the Member is mentally or physically totally incapacitated for continued employment by the County, that such incapacity is likely to be permanent, and that the Member should be retired;
 - d. The Board of Trustees concurs with the certification of the appointed physician.
2. Upon disability retirement, an individual shall be paid a Retirement Allowance computed according to Section 10, not less than 15% of Final Average Compensation. During the statutory period for payment of the disability Retirant's Worker's Compensation, if any, but not beyond attainment of age 60 years, the County-financed portion of the Retirement Allowance cannot exceed the sum of one-half of the disability Retirant's Final Average Compensation and Worker's Compensation, converted to an annual basis. Upon disability retirement, the Member may elect an option provided in Section 11.

SECTION 14 DISABILITY RETIREMENT - DUTY DISABILITY SPECIAL PROVISIONS

In the event a Member or disability Retirant is paid a Worker's Compensation benefit on account of County employment and the Board of Trustees, based on medical reports, finds the disability to be the nature and proximate result, independent of all other causes, of a personal injury or disease arising out of and in the course of actual performance of duty with the County, the following provisions shall apply:

1. The applicable Service requirement specified in Section 13 shall be waived.
2. At expiration of the disability Retirant's Worker's Compensation Period, or attainment of age 65, whichever occurs first, the amount of Retirement Allowance shall be recomputed to include Service credit for the Worker's Compensation Period. If the Worker's Compensation Period expires prior to attainment of age 65, the Retirement Allowance payable to age 60 shall not be less than the Worker's Compensation Benefit.

SECTION 15

DISABILITY RETIREMENT; CONTINUATION SUBJECT TO RE-EXAMINATION; RETURN TO EMPLOYMENT; EFFECT OF GAINFUL EMPLOYMENT

1. The Board of Trustees may require a disability Retirant to undergo periodic medical examination by or under the direction of the appointed physician if the disability Retirant has not attained age 60 years, If a disability Retirant refuses to submit to a medical examination, payment of the disability Retirement Allowance may be suspended by the Board of Trustees until withdrawal of the refusal. Should refusal continue for one year, all the disability Retirant's rights in and to disability Retirement Allowance may be revoked by the Board of Trustees. A disability Retirant may be restored to active employment with the County and the disability Retirement Allowance discontinued if, following a medical examination, the appointed physician certifies that the disability Retirant is mentally and physically able and capable of resuming employment with the County, and the Board of Trustees concur in the certification of the appointed physician. The County shall be allowed reasonable latitude in placing the returned disability Retirant in a position commensurate with the position held at the time of disability retirement.
2. A disability Retirant who has been restored to employment with the County as provided in Subsection 15(1) shall again become a Member of the Retirement System, The disability Retirant's Credited Service at time of retirement shall be restored to full force. Service shall be credited for the period the disability Retirant was being paid a disability Retirement Allowance if within the period the disability Retirant was paid Worker's Compensation on account of the same disability which caused retirement; otherwise, Credited Service shall not be given for the period of disability retirement.
3. A disability Retirant who does not return to County employment and who has at least eight or 10 years of Credited Service, as applicable, at the time of retirement shall become a vested former Member and entitled to deferred retirement as provided in Section 9.

**SECTION 16 DEATH WHILE IN COUNTY EMPLOYMENT; AUTOMATIC
SURVIVOR RETIREMENT ALLOWANCE TO SPOUSE**

1. The surviving spouse of a deceased Member shall be paid a survivor allowance terminating upon death if the following conditions are satisfied:
 - a. The Member died while in the employ of the County after satisfying an applicable age and Credited Service requirement specified in Section 16(2). However, see Section 6(2) with regard to individuals who die while performing qualified military service within the meaning of Code Section 414(u).
 - b. The Member did not have a survivor Beneficiary election in force under Section 18.
 - c. The Member was married to the surviving spouse at the time of death.

The amount of a spouse's automatic survivor allowance is equal to the amount of allowance computed according to Section 10, in the same manner in all respects as if the deceased Member had elected Optional Form of Payment A as provided in Section 11, named the surviving spouse as Beneficiary, and retired the day preceding death.

2. The age and Credited Service requirements shall be the same as those set forth in Sections 8(1)(c), (d), (e), and (h), as modified by Section 8(1)(g), if applicable. Upon election of the surviving spouse, and upon attainment of age sixty by the surviving spouse, a retirement allowance will be paid to the spouse if the deceased employee was vested in the System and had designated the surviving spouse as Beneficiary.
3. No pension shall be paid pursuant to this Section if the Member has a survivor Retirement Allowance election in effect pursuant to Section 18.

SECTION 17

DEATH WHILE IN COUNTY EMPLOYMENT; DUTY DEATH SPECIAL PROVISIONS

1. a. For Benefit Groups General, Medical Care Facility and Sheriff: In the event a Member dies as the result of a personal injury or disease arising solely and exclusively out of and in the course of employment by the County, or in the event a disability Retirant who was paid a Worker's Compensation Benefit on account of the same disability for which the Member has retired, dies within three years of disability retirement as a result of the same injury or disease for which the Member was retired, the applicable benefits provided in Section 17(2) shall be paid subject to the following conditions:
 - (i) The injury or disease resulting in death is found by the Board of Trustees to have occurred as the natural and proximate result of causes arising out of and in the course of the Member's or disability Retirant's actual performance of duties in the employ of the County. However, see Section 6(2) with regard to individuals who die while performing qualified military service within the meaning of Code Section 414(u); and
 - (ii) Eligible Beneficiaries apply for and are paid a Worker's Compensation benefit on account of the death of the Member or disability Retirant.
- b. For Benefit Group Road Commission: In the event a Member dies as the result of a personal injury or disease arising solely and exclusively out of and in the course of employment by the county, the applicable benefits provided in Section 17(2) shall be paid. However, see Section 6(2) with regard to individuals who die while performing qualified military service within the meaning of Code Section 414(u).
2. a. The potential benefits payable for Benefit Groups General, Medical Care Facility and Sheriff in accordance with this section are:
 - (i) **Accumulated Member Contributions.** The amount of Accumulated Member Contributions standing to the deceased Member's credit in the reserve for Member Contributions at the time of death shall be paid in accordance with the provisions of Section 20.
 - (ii) **To the Spouse.** The person, if any, to whom the deceased Member was married at the date on which such Member's employment by the County last terminated shall be paid a Retirement Allowance equal to the spouse's Worker's Compensation Benefit converted to a monthly amount. Payment of

the Retirement Allowance shall begin upon termination of the spouse's Worker's Compensation Period and shall terminate upon remarriage or death.

- (iii) **To the Minor Children.** Each unmarried child of the deceased Member who is under the age of 18 years shall be paid a Retirement Allowance equal to the child's Worker's Compensation benefit converted to a monthly amount. A child's Retirement Allowance shall begin upon termination of the child's Worker's Compensation Period and shall terminate upon marriage, attainment of age 18 years or death, whichever occurs first.
- (iv) **To Dependent Parent(s).** The dependent parent(s), if any, of the deceased Member shall be paid a Retirement Allowance equal to the parent's Worker's Compensation benefit converted to a monthly amount. A parent's Retirement Allowance shall begin upon termination of the parent's Worker's Compensation Period and shall terminate upon death or remarriage.

b. The potential benefits payable for Benefit Group Road Commission in accordance with this section are:

- (i) **To the spouse.** The person, if any, to whom the deceased member was married at the date on which such member's employment by the county last terminated, shall be paid a retirement allowance computed in accordance with Section 10(1)(b). In the event the deceased member's Credited Service was less than required to be vested as in accordance with Section 8(1)(c), additional Service Credit shall be granted up to the amount necessary to be vested in accordance with Section 8(1)(c), prior to the computation of the retirement allowance under Section 10(1)(b).
- (ii) In the event no benefit is payable to a spouse, each unmarried child of the deceased member who is under the age of 18 years shall be paid an equal share of the deceased member's retirement allowance computed in accordance with Section 10(1)(b). A surviving child's retirement allowance shall terminate upon marriage, attainment of age 18 years or death, whichever occurs first.

**SECTION 18 DEATH WHILE IN COUNTY EMPLOYMENT; ELECTIVE
BENEFICIARY SURVIVOR RETIREMENT ALLOWANCE**

A member who has satisfied an elective survivor benefit age and Credited Service condition may nominate a Beneficiary whom the Board of Trustees finds to be dependent upon the Member for at least 50% of his/her support due to lack of financial means. A Member may revoke a nomination of Beneficiary at any time and again nominate a Beneficiary whom the Board of Trustees finds to be dependent upon the Member for at least 50% of his/her support due to lack of financial means. The nomination of Beneficiary shall be null and void upon the Member's retirement or termination of County employment. Upon the death of a Member who has a valid nomination of Beneficiary in force, the Beneficiary, if living, shall be paid a Retirement Allowance computed according to Section 10, in all respects as if the deceased Member had elected Optional Form of Payment C, as provided in Section 11(1)(c) above, named the Beneficiary as Beneficiary and retired the day preceding death. No Retirement Allowance shall be paid under this Section on account of death of a Member if any Retirement Allowance is paid or will become payable under Section 17 on account of the death. See Section 6(2) with regard to individuals who die while performing qualified military service within the meaning of Code Section 414(u).

The elective survivor benefit age and Credited Service conditions for nomination of a Beneficiary as provided above shall be the same as those set forth in Sections 8(1)(c), (d), (e), and (h), as modified by Section 8(1)(g), if applicable.

SECTION 19 MEDICAL CARE COVERAGE

At the time a Member who, while employed, is eligible to receive Employer provided group medical and hospital insurance files written application for retirement with the Board of Trustees, the Member may elect to receive group medical and hospital insurance or complimentary group medical and hospital insurance if the Member's age makes Medicare available. Said insurance will be provided for the Retirant and the Retirant's spouse, and will be paid for by the Employer and not out of any sums contributed to or held by the System. The election shall be in writing and filed with the Employer prior to the date the retirement is effective. If a Member does not elect medical coverage at the time of retirement, the Member may make such election during a re-opening period by written notification to the Employer.

SECTION 20

REFUND OF MEMBER'S ACCUMULATED CONTRIBUTIONS

1. An individual who ceases to be a Member for any reason except retirement or death, prior to satisfying any of the applicable age and Service requirements for retirement provided in Section 8, shall be paid his/her Accumulated Member Contributions upon written request filed with the Board of Trustees.
2. If an individual dies and no Retirement Allowance becomes or will become payable by the Retirement System on account of death, except as provided in Section 17, the deceased individual's Accumulated Member Contributions shall be paid to such individual or individuals as the deceased individual shall have nominated by written designation duly executed and filed with the Board of Trustees. If the deceased individual had named a spouse as the individual's designated Beneficiary and such individual is divorced prior to death, then such individual's Beneficiary designation is automatically revoked with respect to such former spouse and the deceased individual's Accumulated Member Contributions shall be paid to the person(s) designated as the deceased individual's contingent Beneficiary(s). If there be no such designated individual surviving the deceased individual, the Accumulated Member Contributions shall be paid to the deceased individual's estate.
3. In the event an individual dies intestate, without heirs, and without having nominated an individual as provided in Subsection 20(2), his/her Accumulated Member Contributions shall be paid to his/her estate.
4. Payment of Accumulated Contributions as provided in this Section may be made in installments according to such rules as the Board of Trustees may from time to time adopt.
5. **ELIGIBLE ROLLOVER DISTRIBUTIONS**
 - a. This Section 20(5) applies to distributions made on or after January 1, 1993. Notwithstanding any provisions of By-Laws to the contrary that otherwise would limit a Distributee's election under the Retirement System, a Distributee may elect, at the time and in the manner prescribed by the Board of Trustees, to have any portion of an Eligible Rollover Distribution paid directly to an Eligible Retirement Plan specified by the Distributee in a Direct Rollover.
 - b. Definitions.
 - (i) **Eligible Rollover Distribution:** An Eligible Rollover Distribution is any distribution of all or any portion of the balance to the credit of the

Distributee under an Eligible Retirement Plan, except that an Eligible Rollover Distribution does not include:

- A. any distribution that is one of a series of substantially equal periodic payments (not less frequently than annually) made for the life (or life expectancy) of the Distributee or the joint lives (or joint life expectancies) of the Distributee and the Distributee's designated Beneficiary, or for a specified period of ten years or more;
- B. any distribution to the extent such distribution is required under Code Section 401(a)(9);
- C. the portion of any distribution that is not includible in gross income (determined without regard to the exclusion for net unrealized appreciation with respect to Employer securities); and
- D. any distribution of amounts described in Code Section 401(k)(2)(B)(i)(IV) for which a Member is eligible solely because of hardship.

Notwithstanding paragraph 5(b)(i)(C) above, effective for distributions made after December 31, 2001, a portion of a distribution shall not fail to be an Eligible Rollover Distribution merely because the portion consists of after-tax Employee contributions that are not includible in gross income. However, such portion may be paid only to an individual retirement account or annuity described in Code Section 408(a) or (b), or to a qualified trust or an annuity contract described in Code Section 403(b) if such trust or contract provides for separate accounting for amounts so transferred (and earnings thereon), including separately accounting for the portion of such distribution which is includible in gross income and the portion of such distribution which is not so includible.

- (ii) Eligible Retirement Plan: For distributions made after December 31, 2001, an Eligible Retirement Plan is:
 - A. An individual retirement account described in Code Section 408(a) or an individual retirement annuity described in Code Section 408(b) (other than an endowment contract);
 - B. An annuity plan described in Code Section 403(a);
 - C. A qualified plan described in Code Section 401(a);
 - D. An annuity contract described in Code Section 403(b); and

- E. An eligible deferred compensation plan under Code Section 457(b) which is maintained by a state, political subdivision of a state, or any agency or instrumentality of a state or political subdivision of a state, provided such entity agrees to separately account for amounts transferred into such plan from the Retirement System.
- F. Effective for distributions made on or after January 1, 2008, such term shall also include a Roth IRA described in Code Section 408A, subject to any limitations imposed by that Code section.

The definition of Eligible Retirement Plan also shall apply in the case of a distribution to a surviving spouse or to a spouse or former spouse who is the alternate payee under a qualified domestic relation order (as defined in Code Section 414(p)). Notwithstanding the foregoing, effective for distributions made on or after January 1, 2010, in the case of a distribution to a nonspouse beneficiary, an eligible retirement plan is an individual retirement account described in Code Section 408(a), an individual retirement annuity described in Code Section 408(b) (other than an endowment contract), or a Roth IRA described in Code Section 408A, subject to any limitations imposed by that Code section.

For distributions made prior to January 1, 2002, the term "Eligible Retirement Plan" shall mean only those plans described in subparagraphs (A), (B) and (C) above; provided, however, that in the case of an eligible distribution to a surviving spouse, it shall only include an individual retirement account or annuity under Code Section 408.

- (iii) Distributee: A distributee includes an employee or former employee. In addition, the employee's or former employee's surviving spouse and the employee's or former employee's spouse or former spouse who is the alternate payee under a qualified domestic relations order, as defined in Section 414(p) of the Code, are distributees with regard to the spouse or former spouse. Effective on or after January 1, 2010, a distributee shall also include a nonspouse beneficiary of a deceased Member who is a designated beneficiary under Code Section 401(a)(9)(E).
- (iv) Direct Rollover: A direct rollover is a payment by this Retirement System to the Eligible Retirement Plan specified by the distributees.

SECTION 21 RESERVE FOR MEMBER CONTRIBUTIONS

1. The reserve for Member contributions shall be the account in which shall be accumulated the contributions deducted from the Compensation of Members, or otherwise paid to the Retirement System by the Member or on the Member's behalf, and from which shall be made refunds and transfers of Accumulated Member Contributions.
2. Member contributions to the Retirement System shall be a percentage of Compensation, which such percentage is determined pursuant to applicable collective bargaining agreements as recommended in the actuarial valuation of the Retirement System. The following percentage rates for Member contributions currently apply:
 - a. For Members of non-union Benefit Group General, and American Federation of State, County and Municipal Employees, Assistant Prosecutor's Association, Michigan Nurses Association, Probation Agents, and Attorney Referee/Magistrate's Association of Benefit Group General, the Member contribution rate corresponds to the applicable Retirement Allowance Multiplier as follows:

Retirement Allowance Multiplier:	Member contribution Rate:
2.0%	2.5%
2.25%	5.33%
2.50%	7.85%

- b. For Members of Police Officers Labor Council of Benefit Group General, the Member contribution rate corresponds to the applicable Retirement Allowance Multiplier as follows:

Retirement Allowance Multiplier:	Member contribution Rate:
2.0%	2.5%
2.25%	4.72%
2.50%	7.85%

- c. For Members of Command Officers Association of Michigan of Benefit Group General, the Member contribution rate is 7.85%.
 - d. For Members of Jackson County Deputy Sheriff's Association of Benefit Group General, the Member contribution rate is 3.50%.
 - e. For Members of Police Officers Association of Michigan of Benefit Group General, the Member contribution rate is 6.05%.

- f. For all Members of Benefit Group Medical Care Facility and of Benefit Group Road Commission, the Member contribution rate is 2.50%.
- g. The County shall pick up the required Member contributions, effective as of the following dates:
 - For Benefit Group Road Commission Members, effective January 24, 1989;
 - For Benefit Group General Members, effective January 1, 2000; and
 - For Benefit Group Medical Care Facility Members, effective January 1, 2003.

The picked up contributions are intended to qualify under Code Section 414(h) and shall be treated as "employer contributions" for purposes of tax treatment under the Code. The County shall pick up these contributions from funds established and available in the County's Salaries Account, which otherwise would have been designated as Member contributions and paid as such to the Retirement System. Contributions picked up by the County pursuant to this Section 21(2)(f) shall be treated for all other purposes in the same manner and to the same extent as Member contributions made prior to the applicable effective date of this subsection. No Member shall have the option of choosing to directly receive the contributions picked up by the County under this subsection instead of having the contributions paid by the County to the Retirement System.

- 3. The individual or individuals responsible for preparing the County payroll shall cause the Member paid contributions provided for in Section 21(2) to be deducted from the Compensation of each Member on each and every payroll except as provided in Subsection 21(4). The deducted contributions shall be paid to the Retirement System and shall be credited to the Member's individual accounts in the reserve for Member contributions. Members' contributions shall be made notwithstanding that the minimum Compensation provided by law for any Member shall be changed thereby. Every Member shall be deemed to consent and agree to the deductions made and provided herein. Payment of Compensation, less the deduction, shall be a full and complete discharge and acquittance of all claims and demands whatsoever for Services rendered by the Member during the period covered by such payment, except as to benefits provided by the Retirement System.
- 4. In addition to the contributions deducted from the Compensation of a Member, as hereinbefore provided, a Member may deposit in the reserve for Member contributions the amount of any payment pursuant to Sections 4(4) and 6. The deposit may be made in a single sum or by an increased rate of contribution approved by the Board of Trustees.

5. The accumulated contributions of a Member shall be transferred from the reserve for the Member contributions to the reserve for retired benefit payments upon a Member's retirement or death (except if the contributions are to be refunded pursuant to Section 17).

SECTION 22 RESERVE FOR RETIRED BENEFIT PAYMENTS

The reserve for retired benefit payments shall be the account from which shall be paid all Retirement Allowances and residual accumulated contribution refunds. Should a disability Retirement Allowance be terminated and the Retirant be returned to the employ of the County, the Retirement Allowance reserve at the date of termination of disability shall be transferred from the reserve for retired benefit payments to the reserve for Member contributions and the reserve for Employer contributions in the proportion transfers were made from such accounts because of the retirement.

SECTION 23 RESERVE FOR EMPLOYER CONTRIBUTIONS; COUNTY CONTRIBUTION

1. The reserve for Employer contributions shall be the account to which shall be credited contributions made by the County to the Retirement System and from which shall be made transfers as provided in this Section.
2. Each year following receipt of the report of the annual actuarial valuation, the excess, if any, of the reported value of the Retirement Allowances being paid and likely to be paid to Retirants and Beneficiaries over the balance in the reserve for retired benefit payments, shall be transferred from the reserve for Employer contributions to the reserve for retired benefit payments.
3. The financial objective of this Resolution is to require County contributions to the Retirement System which together with the contributions made by Members shall be sufficient to fund the cost of the benefits provided hereunder in accordance with the statutes and constitution of the State of Michigan and in an actuarially sound manner. The County's contribution shall be actuarially determined in accordance with generally accepted actuarial principles. The Board of Trustees shall annually review the actuarial report of the System and certify the annual contributions recommended by the actuary to the County employers participating in the system.

SECTION 24 RESERVE FOR UNDISTRIBUTED INVESTMENT INCOME

The reserve for undistributed investment income shall be the account to which shall be credited all interest, dividends, and other income from the investment of Retirement System assets, all gifts and bequests received by the Retirement System, all unclaimed Accumulated Contributions and Retirement Allowances, and all other monies received by the Retirement System, the disposition of which is not specifically provided. There shall be transferred from the reserve for undistributed investment income all amounts required to be credited Regular Interest to the reserve for Member contributions, reserve for Employer contributions, and the reserve for retired benefit payments. Whenever the balance in the reserve for undistributed investment income is more than sufficient to cover current charges to the account, the excess or any part thereof may be transferred among reserves in any manner approved by the Board of Trustees and permitted by Section (12)(a) of Act 156 of the Public Acts of 1851, as currently in effect or as such act may subsequently be amended, provided that such a transfer shall not occur until all administrative expenses that are currently due have been paid. Whenever the balance in the reserve for undistributed investment income is insufficient to meet the current charges to the account, the amount of the insufficiency shall be transferred from the reserve for Employer contributions.

SECTION 25 RESERVE FOR ADMINISTRATIVE EXPENSES

The reserve for administrative expenses and other sums properly transferred thereto shall be the account to which shall be credited all County appropriations for administrative expenses and from which shall be paid all expenses, including investment expenses, necessary for the proper operation of the Retirement System. The County shall appropriate an amount sufficient to pay all administrative expenses. Administrative expenses shall be paid no less frequently than annually. The aggregate amount paid from the reserve shall in no case exceed the balance thereof.

SECTION 26 ALLOWANCE OF INTEREST; RATES OF INTEREST

The Board of Trustees shall at the end of each fiscal year credit interest on the individual balances in the reserve for Member contributions based on the individual balances as of the end of the prior fiscal year, and on the mean balances in the reserve for Employer contributions and the reserve for retired benefit payments. The amounts so credited shall be charged to the reserve for undistributed investment income.

The Board of Trustees shall determine the rate or rates of interest to be used in the crediting and charging of interest.

Effective on or after December 31, 1983, a 5.25% interest rate shall be used in the crediting and charging of interest under this section. Prior to December 31, 1983, the interest was 3%.

**SECTION 27 BOARD OF TRUSTEES; RESPONSIBILITIES AND DUTIES;
COMPOSITION OF**

1. The general administration, management and responsibility for the proper operation of the Retirement System, and for construing and making effective the provisions of the Retirement System are vested in the Board of Trustees.
2. The Board of Trustees is constituted as follows:
 - a. Three members who shall be appointed by the Chairperson of the Jackson County Board of Commissioners. No less than two of the appointees by the Chairperson shall be members of the Jackson County Board of Commissioners. The third appointee must be a member of the Jackson County Retirement System and not be a commissioner;
 - b. Three members, two union and one non-union, covered by the Jackson County Retirement System who shall be elected by the Members employed by the Employers participating in the System. No more than one shall be from any one County department, and;
 - c. An elector of Jackson County, who is neither a Member, Retirant nor Beneficiary of the Retirement System, shall be appointed for a one-year term by mutual agreement of the three representatives elected by Member employees and the three representatives appointed by the Chairperson of the Board of Commissioners. Such appointment shall be made annually with the term commencing July 1st or within sixty days of any vacancy in such position.

Election of Members of the Board of Trustees shall be held in accordance with the rules adopted by the Board of Trustees.

SECTION 28 BOARD OF TRUSTEES; TERMS OF OFFICE; OATH OF OFFICE

1. The regular term of office of a Member elected Trustee and the Trustees appointed by the Chairperson of the Board of Commissioners shall be three years with one Member elected and one Chairperson appointed vacancy each year.
2. Each Trustee shall, before assuming the duties of Trustee, qualify by taking an oath of office to be administered by the County Clerk.

**SECTION 29 BOARD OF TRUSTEES; VACANCY ON BOARD; FILLING
VACANCY**

1. A vacancy shall occur on the Board of Trustees if:
 - a. a Member elected Trustee ceases to be a Member or ceases to be included in the appropriate employment group;
 - b. any Member elected Trustee fails to attend three consecutive meetings of the Board of Trustees, unless in each case such absence was excused for cause by the Trustees attending the meeting;
 - c. any Trustee resigns; and
 - d. any appointed Trustee who is removed by the appointing body.
2. If an Elected or Chairperson appointed position shall become vacant prior to the expiration of the incumbent's regular term of office, the Trustee elected or appointed to fill such vacancy shall serve the remainder of the incumbent's term of office.

**SECTION 30 BOARD OF TRUSTEES; MEETINGS; QUORUM; VOTING;
 COMPENSATION**

The Board of Trustees shall hold meetings regularly, at least one in each month, and shall designate the time and place of each meeting. The Board of Trustees shall adopt its own rules of procedure and shall keep a record of its proceedings. Four Trustees shall constitute a quorum at any meeting of the Board of Trustees. No business shall be conducted with other than a quorum present, and a simple majority vote of those present shall be necessary for a decision by the Board of Trustees. Each Trustee shall be entitled to one vote on each question before the Board of Trustees. Trustees serving under Section 27(2)(c) shall be paid the per diem in effect for the County Board of Commissioners for attending meetings of the Board of Trustees and performing required Services of the Board of Trustees.

SECTION 31 BOARD OF TRUSTEES; OFFICERS; ADMINISTRATIVE SERVICES

1. The officers and employed services of the Retirement System shall be as follows:
 - a. ***Chairperson.*** The Board of Trustees shall annually elect a Chairperson and Vice-Chairperson for its Members;
 - b. ***Secretary.*** The Pension Coordinator shall be the Secretary of the Board of Trustees;
 - c. ***Treasurer.*** The County Treasurer shall be Treasurer of the Retirement System. The Treasurer shall be custodian of the assets of the Retirement System except as to such assets as the Board of Trustees may from time to time place in custody of an investment fiduciary;
 - d. ***Administrative Officer.*** The County Director of Personnel or his or her designee, shall serve as Administrative Officer of the Retirement System.
 - e. ***Actuary.*** The Board of Trustees shall appoint an actuary who shall be the technical advisor to the Board of Trustees and the County Board of Commissioners regarding the operation of the Retirement System on an actuarial basis and who shall perform such Services as are required in that connection. The term actuary, as used in this Resolution shall mean a Member of the American Academy of Actuaries or a person who has demonstrated an educational background necessary for the practice of actuarial science and has at least five years of relevant pension actuarial experience. A partnership or corporation may be appointed actuary if the duties of actuary are performed by or under the direct supervision of an individual who meets the preceding qualifications;
 - f. ***Appointed Physician.*** The Board of Trustees shall appoint a physician who shall arrange for and pass upon all medical examinations required in the administration of the Retirement System and shall investigate all statements and certificates of a medical nature which are presented in connection with the operation of the Retirement System. The appointed physician shall report his conclusions and recommendations in writing.
2. ***Services.*** The Board of Trustees shall arrange for professional and other services as may be necessary for the proper administration of the Retirement System. Compensation for such services shall be determined by the Board of Trustees.

**SECTION 32 BOARD OF TRUSTEES; ACTUARIAL DATA; REPORT TO
BOARD OF COMMISSIONERS**

The Board of Trustees shall keep or cause to be kept, in convenient form, such data as shall be recommended by the actuary as necessary for the operation of the Retirement System on an actuarial basis. The Board of Trustees shall keep or cause to be kept, in convenient form, such additional data as is required to properly report the operations of the System. The Board of Trustees shall provide the County Board of Commissioners with such reports and information as it shall reasonably request and, in addition, the Board of Trustees shall render a report to the County Board of Commissioners within 270 days of the close of each fiscal year showing fiscal transactions of the Retirement System for the fiscal year, the assets of the Retirement System as of the close of the fiscal year, and a copy of the most recent actuarial report.

SECTION 33

INVESTMENT OF RETIREMENT SYSTEM ASSETS

1. The Board of Trustees shall be trustees of the monies and assets of the Retirement System. The monies and assets of the Retirement System may be invested and reinvested by the Board of Trustees in the same manner and shall be subject to the same limitations as are imposed by the State of Michigan on the investment of public employee retirement systems. The Board of Trustees shall appoint one or more investment advisors, one or more investment managers, and one or more fund custodians, who shall have responsibility for the investment, reinvestment, safekeeping and disposition of the monies and assets of the Retirement System as assigned by the Board of Trustees. No person, partnership, corporation or other entity may be appointed to serve concurrently in more than one of the above capacities.
2. Any such investment advisor(s), investment manager(s) and fund custodian(s) shall be either a bank, an insurance company or shall be registered as an investment advisor under the Investment Advisors Act of 1940.
3. Any such investment advisor(s), investment manager(s) and fund custodian(s) shall be appointed pursuant to a written agreement which shall be approved by the Board of Trustees and which shall set forth their respective functions and authority with regard to the investment, reinvestment, management, safekeeping, and disposition of the assets of the Retirement System in accordance with State and Federal law, including but not limited to, the provisions of Act No. 55 of the Michigan Public Acts of 1982. Each such investment advisor, investment manager and fund custodian shall be an investment fiduciary as defined in said Act and shall invest and reinvest the assets of the System as therein provided, and in accordance with the provisions of the written agreement pursuant to which the appointment is made.
4. Such monies and assets of the Retirement System as may, from time to time, be reasonably necessary to provide for the disbursement or purchase of benefits to or for the Members, the payment of the expenses of the Retirement System and similar matters, may be held in such other separate accounts as the Board of Trustees may deem appropriate for the efficient administration of the Retirement System.
5. Each investment fiduciary shall, not less than quarterly, render a full and complete accounting showing the cost and fair market value of the assets held by it and all of the receipts and disbursements made by it during the year and shall provide such additional accounting reports and information as the Board of Trustees may reasonably request.
6. All monies and assets of the Retirement System shall be held for the sole purpose of meeting disbursements authorized in accordance with the provisions

of this Retirement System, as the same may be amended from time to time, and shall be used for no other purposes.

SECTION 34 METHOD OF MAKING PAYMENTS

All payments from monies of the Retirement System shall be made according to County proceedings governing the disbursement of general fund monies. No payment shall be made unless it shall have been previously authorized by a specific or continuing Resolution of the Board of Trustees.

SECTION 35 ASSETS NOT SEGREGATED

The description of the various reserves of the Retirement System shall be interpreted to refer to the accounting records of the System and not to the segregation of monies or assets in the reserve accounts of the System.

SECTION 36 ASSIGNMENTS PROHIBITED

Prior to distribution to a Retirant, Employee or Beneficiary, under the terms of the System, no right or benefit provided under the Retirement System shall be subject in any manner to anticipation, alienation, sale, transfer, assignment, pledge, encumbrance or charge, and any attempt to anticipate, alienate, sell, transfer, assign, pledge, encumber, or charge the same shall be void. No such right or benefit shall be liable for or subject to the debts, contracts, liabilities, engagements, or torts of any person entitled to such right or benefit. No such right or benefit shall be subject to garnishment, attachment, execution, or levy of any kind.

Notwithstanding the foregoing restrictions, the prior paragraph shall not apply to an arrangement which provides for the deduction by the Board of Trustees from the monthly benefit payable to any Retirant who elects to continue under any group life, group hospitalization or group medical or surgical insurance available to Retirants, of amounts equal to the contribution rate established for such insurance as certified by the Employer and approved by the Retirant. The Board of Trustees shall provide for the payment of such amounts either to the organization providing such insurance or to the Employer, as agent, for transmittal to such organization. The Retirant's election to continue insurance coverage and to have payment made from his benefit shall at all times be revocable by the Retirant.

Notwithstanding anything to the contrary, the right of a Member, a vested former Member or a Retirant to Retirement System assets is subject to an eligible domestic relations order under the Eligible Domestic Relations Order Act, 1991 PA 46, MCL § 38.1701 to 38.1711.

If a Retirant is receiving a reduced Retirement Allowance under an optional form of payment and is divorced from a spouse who had been named the Retirant's survivor Beneficiary pursuant to this Retirement System, the election of a reduced Retirement Allowance form of payment shall be considered void by the Retirement System if the judgment of divorce or award or court order, as amended, dated after July 18, 1991, provides that the election of a reduced Retirement Allowance form of payment is to be considered void by the Retirement System and the Retirant provides a certified copy of such order or award to the Retirement System. If the election of a reduced Retirement Allowance form of payment is considered void by the Retirement System under this subsection, the Retirant's Retirement Allowance shall revert to a form of payment SL, including postretirement adjustments, if any, subject to an award or order of the court. The Retirement Allowance shall revert to a form of payment SL, under this subsection effective the first of the month after the date the Retirement System receives a certified copy of the judgment of divorce or award or order of the court. This subsection does not supersede a judgment of divorce or award or order of the court in effect on July 18, 1991. This subsection does not require the Retirement System to distribute or pay retirement assets on behalf of a Retirant in an amount that exceeds the actuarially

determined amount that would otherwise become payable if a judgment of divorce had not been rendered.

SECTION 37 CORRECTION OF ERRORS

Should any change in the records result in any individual or estate being paid more or less than would have been paid had the records been correct, the Retirement System shall correct such error, and so far as practicable shall adjust the payment in such manner that the equivalent actuarial value of the benefit to which the individual or estate was correctly entitled shall be paid.

SECTION 38 SUBROGATION

In the event an individual becomes entitled to a Retirement Allowance or other benefit payable by the Retirement System as a result of an accident or injury caused by the act of a third party, the County shall be subrogated to the rights of the said individual against such third party to the extent of the County financed benefits which the Retirement System pays or becomes liable to pay.

SECTION 39 CONTRACTUAL NATURE OF BENEFITS

The accrual of financial benefits of the Retirement System shall be a contractual obligation of the Retirement System and shall not be diminished or impaired by the County. The terms of this Resolution shall constitute the only basis upon which each such contractual obligation shall arise and accrue, and no benefits shall arise or accrue to any individual or estate except those specifically provided in the Resolution and in accordance with the terms thereof.

SECTION 40 LAWS INCONSISTENT REPEALED

All provisions of ordinance, resolution, or local act, inconsistent with the provisions of this Resolution are hereby repealed to the extent of such inconsistency.

SECTION 41 SEVERABILITY

It any Section or part of a Section of this Resolution is for any reason held to be invalid or unconstitutional, such holding shall not be construed as affecting the validity of the remaining Sections of this Resolution in its entirety.

SECTION 42 AMENDMENT AND TERMINATION

The Jackson County Board of Commissioners retains the right to amend, modify or terminate this Resolution and Retirement System. Upon termination or complete discontinuance of benefits under this Retirement System, Members shall be 100% vested in County contributions made on their behalf to the Reserve for Employer contributions. After the satisfaction of all liabilities with respect to Members, vested former Members, Retirants and Beneficiaries under the Retirement System, the County reserves the right to recover any balance of assets remaining in the Retirement System in accordance with law.

SECTION 43 FORFEITURES

A Member or prior Member's forfeiture of County Contributions under the Retirement System shall not be used to increase benefits to the remaining Members in the Retirement System.

SECTION 44 EXCLUSIVE BENEFIT OF MEMBERS

Diversion of any portion of Retirement System corpus or income for any purpose other than for the exclusive benefit of Members, Retirants, or Beneficiaries is prohibited.

SECTION 45 MINIMUM DISTRIBUTION REQUIREMENTS

1. In General, the entire interest of each Member:
 - a. will be distributed to such Member not later than the required beginning date, or
 - b. will be distributed, beginning not later than the required beginning date, in accordance with Treasury Regulations, over the life of such Member or over the lives of such Member and a designated beneficiary (or over a period not extending beyond the life expectancy of such Member or the life expectancy of such Member and a designated beneficiary).
2. Required Distribution Where Employee Dies Before Entire Interest is Distributed
 - a. If the distribution of the Member's interest has begun in accordance with Section 45(1)(b), and the Member dies before his entire interest has been distributed to him, the remaining portion of such interest will be distributed at least as rapidly as under the method of distributions being used under Section 45(1)(b) as of the date of the Member's death.
 - b. If a Member dies before the distribution of the Member's interest has begun in accordance with Section 45(1)(b), the entire interest of the Member will be distributed within five years after the death of such Member.
 - c. Notwithstanding Section 45(2)(b),
 - (i) if any portion of the Member's interest is payable to (or for the benefit of) a designated beneficiary,
 - (ii) such portion will be distributed (in accordance with Treasury Regulations) over the life of such designated beneficiary (or over a period not extending beyond the life expectancy of such designated beneficiary), and
 - (iii) such distributions begin not later than one year after the date of the Member's death or such later date as Treasury Regulations may prescribe, for purposes of Section 45(2)(b), the portion referred to in Section 45(1)(c)(i) shall be treated as distributed on the date on which such distributions began.
 - d. If the designated beneficiary referred to in Section 45(1)(c)(i) is the surviving spouse of the Member, the date on which the distributions are required to begin under Section 45(1)(c)(iii) shall not be earlier than the date on which the Member would have attained age 70½, and if the

surviving spouse dies before the distributions to such spouse begin, this Section 45(2) shall be applied as if the surviving spouse were the Member.

3. For purposes of this Section 45, the term "required beginning date" means April 1 of the calendar year following the later of:
 - a. the calendar year in which the Member attains age 70½, or
 - b. the calendar year in which the Member retires.
4. For purposes of this Section 45, the life expectancy of an employee and the employee's spouse (other than in the case of a life annuity) may be redetermined, but not more frequently than annually.
5. For purposes of this Section 45, the term "designated beneficiary" means any individual designated as a Beneficiary by the employee.
6. Under Treasury Regulations, for purposes of this Section 45, any amount paid to a child shall be treated as if it had been paid to the surviving spouse if such amount will become payable to the surviving spouse upon such child reaching majority (or other designated event permitted under the Treasury Regulations).
7. Any distribution required under the incidental death benefit requirements of Code Section 401(a) shall be treated as a distribution required under this Section 45.
8. In accordance with Treasury Regulation Section 1.401(a)(9)-1, Q&A-2(d), the Retirement System's compliance with a reasonable and good faith interpretation of Code Section 401(a)(9) and this Section 45 shall be deemed sufficient to comply with Code Section 401(a)(9) and this Section 45 for all years to which they apply.

SECTION 46

LIMITATIONS ON AMOUNT OF BENEFIT PAYMENTS

Effective for Plan Years beginning after December 31, 1982, no Member, Beneficiary or Retirant shall receive benefits in excess of those permitted under Section 415 of the Internal Revenue Code, as such provision applies to state and local government retirement plans. The provisions of Section 415 of the Internal Revenue Code and the Regulations issued thereunder which are applicable to state and local government retirement plans are hereby incorporated by reference.

To the extent that Code Section 415(c) applies to Member contributions that are not picked-up by the County, the definition of Compensation for Code Section 415(c) purposes shall mean, with respect to each limitation year, a Member's total wages, salary, bonuses, overtime, commissions and other amounts received for services rendered in the course of employment for the County, (including amounts received from accident or health insurance for personal injuries or sickness to the extent includible in the Member's gross income, amounts received as disability payments whether or not includible in the Member's gross income, amounts paid or reimbursed by the Company for moving expenses to the extent not deductible by the Member, and amounts includible in the Member's gross income for making an election on the transfer of property in connection with the performance of services). For these purposes, compensation does not include (i) contributions made by the County under this Plan or made to any other deferred compensation plan on behalf of the Member to the extent that the contributions are not includible in the Member's gross income before application of the Code Section 415 limits, (ii) amounts realized from the Member's exercise of a non-qualified stock option or from the Member's transfer of stock acquired under a qualified stock option, and (iii) premiums paid by the County on behalf of the Member for group term life insurance to the extent not includible in the Member's gross income. Notwithstanding the foregoing, effective January 1, 1998, compensation shall include any elective deferrals as defined in Code Section 402(g)(3) and any amount which is contributed or deferred by the County at the request of the Employee and which is not includible in the gross income of the Employee by reason of Code Section 125 or effective January 1, 2002, Code Section 132(f).

If a Member is, or has ever been, a participant in another qualified defined benefit plan (without regard to whether the plan has been terminated) maintained by the County, the sum of the Member's annual benefits from all such plans may not exceed those permitted under Section 415 of the Internal Revenue Code. Where the Member's County-provided benefits under all such defined benefit plans (determined as of the same age) would exceed the maximum permissible benefit under Section 415 of the Internal Revenue Code applicable at that age, the rate of accrual for a Member under this Plan will be reduced to the extent necessary to prevent a violation of the limitations set forth in this Section 46.

SECTION 47 EFFECTIVE DATE

This resolution shall take effect January 1, 2010, except as otherwise provided herein.

Executed on this _____ day of _____, 2010,
pursuant to authority granted by the Jackson County Board of Commissioners.

Jackson County

By: _____

Its: _____

Jackson County Employees' Retirement
System Board of Trustees

By: _____

Its: _____




Jackson County

ADMINISTRATOR/CONTROLLER

Randall W. Treacher, Administrator/Controller

Adam J. Brown, Deputy Administrator

TO: Personnel & Finance Committee
Board of County Commissioners

FROM: Adam J. Brown
Deputy Administrator 

SUBJECT: 2nd Floor Budget Adjustments and Contract Award

DATE: December 1, 2010

Motion Requested

Budget and appropriate the use of \$50,000 from the Public Improvement Fund, Fund Balance to the 2nd Floor Restoration Project and award a contract to WorkSquared in the amount of \$109,239.84.

I. Background

- A. As part of the 2008 Budget the Board of County Commissioners budgeted and appropriated funds to move the Board Chambers to the fifth floor of the Tower Building and create a service center on the second floor for the Register of Deeds, Treasurer, and Equalization Department. Customers currently have to move between three floors of the tower building to conduct business.
- B. Work was completed in April of 2010 on the new chamber for the Board of County Commissioners. Facilities staff moved resources toward the second floor at that time.
- C. Facilities staff has been working on painting the ceiling. The Facilities Director and the Deputy Administrator have been working with the architect and furniture designer to finalize a layout.

II. Current Situation

- A. Our goal in starting the project was to replicate the historic layout of the room from the customer's perspective while providing a modern work space behind the counter. With that objective in mind, and after talking with several architects, we decided that we could accomplish our goals and give us great flexibility in the future by designing the room primarily with systems furniture.
- B. We identified WorkSquared, a Lansing based company that is an authorized seller of Herman Miller products under the US Communities federal contract to design the entire room with systems furniture. With the amount of planning and design work to go with the project it was essential that we work within an existing contract.

- C. Working with the architect and furniture designer we have finalized the layout and furniture requirements. Because we did not anticipate using the quantity of systems furniture that was needed we will require additional budget to award this contract.
- D. We are requesting that the Board of Commissioners budget an additional \$50,00 from the Public Improvement Fund, fund balance and also approve the contract with Work Squared in the amount of \$109,239.84.

III. Analysis

- A. **Strategic** – The second floor concept is consistent with the county’s goal of having intergovernmental cooperation and improving economic development efforts. It’s also consistent with the board’s value of responsiveness, which says we will deliver customer-focused services that are accessible, user-friendly, and efficient.

The second floor project not only allows us the opportunity to reduce travel between offices (floors), but it also provides us the opportunity to improve transaction processes between the three departments. Discussions are already occurring between the three departments about how they can assist each other in serving their customers.

- B. **Financial** – We have administratively moved residual funds from other capital projects into the second floor project. There is sufficient fund balance in the Public Improvement Fund to absorb the \$50,000 requested. With the additional \$50,000 budgeted there will be sufficient funds to complete the project. Additional costs for the project include a new balustrade, acoustical panels, custom built pieces, demolition, electrical, flooring, permitting, and security.
- C. **Timing** – There is a six (6) to eight (8) week lag time from order to delivery for the office furniture. We are planning to move staff in before March, a peak service time for some of the offices located on the new floor. We will need to place this order in December to make that completion time.
- D. **Legal** – The Board’s approval is needed to budget an additional \$50,000 to the project and to approve the contract with WorkSquared. The purchase proposal is consistent with County Purchasing Policy No. 2020 which allows the county to use an existing competitively bid governmental contract. The purchase with WorkSquared conforms to the US Communities federal contract, which offers considerable discounts from market rate Herman Miller products.

IV. Recommendation

The Administrator/Controller's Office recommends that the Board of County Commissioners budget and appropriate the use of \$50,000 from the Public Improvement Fund, Fund Balance to the 2nd Floor Restoration Project and award a contract with WorkSquared in the amount of \$109,239.84.

Attachments:

Herman Miller & US Communities Agreement

WorkSquared Proposal



**Herman Miller, Inc., and U.S. Communities
Government Purchasing Alliance
US Communities Agreement RQ07-878957-20A
Effective August 2009**

Herman Miller, Inc., Price Sheet

U.S. Communities Agreement

Product Line	Discounts are from List Price Tiers are based on List Product Value of each order Discounts for orders over \$400,000 List Value are negotiable					
	\$1 - \$100,000			\$100,001 - \$400,000		
	Loading Dock	Inside Door	Installed	Loading Dock	Inside Door	Installed
Action Office [®] Systems, Prospects [®] , Ethospace [®] System, Vivo [™] Interiors, Intent [™] Furniture, Quadrant B-Front and F-Front Pedestals, Ergonomic Computer Furniture, Eames [®] and Avive [®] Tables	69%	67%	64%	71%	69%	66%
Be Collection [™]	54%	52%	49%	56%	54%	51%
Arrio [®] , Resolve [®] , Intersect [™]	53%	51%	48%	55%	53%	50%
Abak [™]	57%	55%	52%	59%	57%	54%
Ergon 3 [®] Seating, Equa 2 [®] Seating,	57%	55%	54%	59%	57%	56%
Passage [®] , My Studio Environments [™]	50%	48%	45%	52%	50%	47%
Meridian [®] Storage Media Cases and Towers, Meridian [®] 5000 Series, Meridian [®] Unity Files, Quadrant B-Front and F-Front Lateral Files	52%	50%	47%	54%	52%	49%
Meridian [®] Pedestals & Lateral Files (excluding unity Files)	54%	52%	49%	56%	54%	51%
Aeron [®] Seating, Mirra [®] Chair, Celle [™] Chair, Setu [™] Chairs	51%	49%	48%	53%	51%	50%
Embody [®] Chair	49%	47%	46%	51%	49%	48%
Ambi [®] Seating, Caper [®] Seating, Limerick [®] Seating, Aside [®] Seating, Reaction [®] Seating	53%	51%	50%	55%	53%	52%
Teneo [™] Storage Furniture, Innovative Products, CLT [™] Tables, Kiva [®] Collection, Eames [®] Seating, Classical Seating, Collection, Celeste [™] Seating, Burdick Group [™] , International Collection [™]	46%	44%	43%	47%	45%	44%
Tu [™] Files, Tu [™] Pedestals, Tu [™] Storage, Tu [™] Towers, Q Tables	65%	63%	60%	67%	65%	62%
Vitra, Goetz, Stools	40%	38%	37%	42%	40%	39%
Co/Struc [®] , Action Lab [™] , Casework	51%	49%	46%	53%	51%	48%
Herman Miller for Healthcare Carts	12%	10%	7%	12%	10%	7%
Geiger [®] Casegoods and Seating, GeigerEXPRESS sm	51%	49%	46%	52%	50%	47%
First Office Products	48.5%	46.5%	43.5%	50%	48%	45%
SitOnIt [®] Products	54%	52%	51%	58%	56%	55%
Baker Zydeco Products	50%	48%	45%	52%	50%	47%
Baker M Collection [®] , Baker Next [®] Tables	65%	63%	60%	67%	65%	62%
Bretford Products	50%	48%	45%	50%	48%	45%
V-Wall [®] and M-Wall Products	58%	TBN	TBN	62.5%	TBN	TBN

- **Purchase Orders must be issued to the local authorized Herman Miller dealer.**
- List prices include freight within the 48 contiguous United States. Shipments outside of the contiguous United States are shipped freight prepaid to point of embarkation with freight costs beyond that point shipped collect.

Revised: 6/1/2009



WorkSquared
3135 Pine Tree Rd
Lansing, MI 48911
(517) 882-9070
(517) 882-9074 Fax
www.worksquared.com

PROPOSAL

Proposal #: 42134B
Date: 12/1/2010
Proposed By: Barbara Church
c.248.207.6319
bchurch@worksquared.com

Proposal For:

Adam Brown
Deputy Administrator
Jackson County
120 W. Michigan Avenue
Jackson, MI 49201
517-768-6623
517-780-4755

Install At:

Adam Brown
Deputy Administrator
Jackson County
120 W. Michigan Avenue
Jackson, MI 49201
517-768-6623
517-780-4755

Jackson County 2nd floor furniture quote per plans dated 12/1/10. Pricing reflects U.S. Communities installed pricing.

Part Number	Qty	Sell	Ext Sell
23-M3625WT Cambria Laminate 37x25x29.5 Computer Work Table	2	\$360.25	\$720.50
VM2 VINTAGE MAHOGANY			
LT01-2222CT 22X22 END TABLE, SCALE	3	\$435.60	\$1,306.80
MLW LEGACY WALNUT ON WALNUT			
WV SQUARE			
F33638 20.88WX22.38DX34.75H SIDE CHAIR, HOOP	4	\$386.65	\$1,546.60
MLW LEGACY WALNUT			
3 GRADE 3 TEXTILES			
MOM-MAX MOM-MAX			
RUM RUM			
F47237 22.5WX27D SIDE CHAIR, MINGLE	13	\$409.20	\$5,319.60
MLW LEGACY WALNUT			
3 GRADE 3 TEXTILES			
MOM-MAX MOM-MAX			
RUM RUM			
ZERXA +Sq-Edge Vinyl Rect WS,w/o trough,Lam Top	1	\$140.08	\$140.08
24 @24" deep			
64 @24" deep x 63.5" wide			
S1 +no cable management trough, 1" gap (standard E2110 gap)			
LU +soft white			
LU +soft white			

Part Number		Qty	Sell	Ext Sell
LU	+soft white			
SM	+on module			
ZERXA		1	\$119.34	\$119.34
+Sq-Edge Vinyl Rect WS,w/o trough,Lam Top				
24	@24" deep			
54	@24" deep x 54" wide			
S1	+no cable management trough, 1" gap (standard E2110 gap)			
LU	+soft white			
LU	+soft white			
LU	+soft white			
SM	+on module			
ZECXA		2	\$208.42	\$416.84
+Sq-Edge Vinyl Concv Cnr WS,w/o trough,Lam Top				
2436	@24" deep x 36" wide left			
2454	@24" deep x 54" wide right			
S1	+no cable management trough, 1" gap (standard E2110 gap)			
LU	+soft white			
LU	+soft white			
LU	+soft white			
SM	@on module			
ZECXA		1	\$208.42	\$208.42
+Sq-Edge Vinyl Concv Cnr WS,w/o trough,Lam Top				
2454	@24" deep x 54" wide left			
2436	@24" deep x 36" wide right			
S1	+no cable management trough, 1" gap (standard E2110 gap)			
LU	+soft white			
LU	+soft white			
LU	+soft white			
SM	@on module			
ZECXA		1	\$143.14	\$143.14
+Sq-Edge Vinyl Concv Cnr WS,w/o trough,Lam Top				
2442	@24" deep x 42" wide left			
2436	@24" deep x 36" wide right			
S1	+no cable management trough, 1" gap (standard E2110 gap)			
LU	+soft white			
LU	+soft white			
LU	+soft white			
SM	@on module			
ZECXA		2	\$165.58	\$331.16
+Sq-Edge Vinyl Concv Cnr WS,w/o trough,Lam Top				
2436	@24" deep x 36" wide left			
2448	@24" deep x 48" wide right			
S1	+no cable management trough, 1" gap (standard E2110 gap)			
LU	+soft white			

Part Number		Qty	Sell	Ext Sell
LU	+soft white			
LU	+soft white			
SM	@on module			
ZECXA		3	\$165.58	\$496.74
+Sq-Edge Vinyl Concv Cnr WS,w/o trough,Lam Top				
2448	@24" deep x 48" wide left			
2436	@24" deep x 36" wide right			
S1	+no cable management trough, 1" gap (standard E2110 gap)			
LU	+soft white			
LU	+soft white			
LU	+soft white			
SM	@on module			
1B2JK7-250		1	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #250				
1B2JK7-251		1	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #251				
1B2JK7-252		1	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #252				
1B2JK7-253		1	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #253				
1B2JK7-254		2	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #254				
1B2JK7-255		2	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #255				
1B2JK7-256		2	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #256				
1B2JK7-257		2	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #257				
1B2JK7-258		2	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #258				
1B2JK7-259		5	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #259				
1B2JK7-260		2	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #260				
1B2JK7-261		2	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #261				
1B2JK7-262		5	\$0.00	\$0.00

Part Number	Qty	Sell	Ext Sell
+Lock Plug and Key,Chrome UM Series #262			
1B2JK7-263	2	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #263			
1B2JK7-264	2	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #264			
1B2JK7-265	2	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #265			
1B2JK7-266	2	\$0.00	\$0.00
+Lock Plug and Key,Chrome UM Series #266			
E1106.3836G	9	\$267.58	\$2,408.22
+Frame,Trans,Pwr 4-Circ W/Com Pt Lc 38H 36W			
WN + warm grey neutral			
WN + warm grey neutral			
6242DOOR	1	\$2,000.00	\$2,000.00
NORFAB, DOOR L Swing 42W 62H			
WN WARM GREY NEUTRAL			
WN WARM GREY NEUTRAL			
7042DOOR	5	\$2,000.00	\$10,000.00
NORFAB, DOOR L Swing 42W 70H			
WN WARM GREY NEUTRAL			
WN WARM GREY NEUTRAL			
5442DOOR	1	\$2,000.00	\$2,000.00
NORFAB, DOOR R Swing 42W 54H			
WN WARM GREY NEUTRAL			
WN WARM GREY NEUTRAL			
E1109.4624G	2	\$165.92	\$331.84
+Frame,Pwr 4-Circ W/Com Pt Lc 46H 24W			
WL +sandstone			
WN +warm grey neutral			
E1109.4624J	10	\$120.02	\$1,200.20
+Frame,Npwr Access Holes W/Com Pt Lc 46H 24W			
WL +sandstone			
WN +warm grey neutral			
E1109.4630G	2	\$178.16	\$356.32
+Frame,Pwr 4-Circ W/Com Pt Lc 46H 30W			
WL +sandstone			
WN +warm grey neutral			
E1109.4630J	9	\$131.92	\$1,187.28

Part Number		Qty	Sell	Ext Sell
+Frame,Npwr Access Holes W/Com Pt Lc 46H 30W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.4636G		9	\$190.40	\$1,713.60
+Frame,Pwr 4-Circ W/Com Pt Lc 46H 36W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.4636J		9	\$144.16	\$1,297.44
+Frame,Npwr Access Holes W/Com Pt Lc 46H 36W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.4642G		1	\$202.64	\$202.64
+Frame,Pwr 4-Circ W/Com Pt Lc 46H 42W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.4642J		9	\$156.40	\$1,407.60
+Frame,Npwr Access Holes W/Com Pt Lc 46H 42W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.5418N		1	\$119.00	\$119.00
+Frame,Npwr No Access 54H 18W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.5424J		4	\$127.50	\$510.00
+Frame,Npwr Access Holes W/Com Pt Lc 54H 24W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.5430G		2	\$185.98	\$371.96
+Frame,Pwr 4-Circ W/Com Pt Lc 54H 30W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.5430J		3	\$139.40	\$418.20
+Frame,Npwr Access Holes W/Com Pt Lc 54H 30W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.5436G		3	\$198.22	\$594.66
+Frame,Pwr 4-Circ W/Com Pt Lc 54H 36W				
WL	+sandstone			
WN	+warm grey neutral			

Part Number	Qty	Sell	Ext Sell
E1109.5442G +Frame,Pwr 4-Circ W/Com Pt Lc 54H 42W	1	\$210.12	\$210.12
WL +sandstone			
WN +warm grey neutral			
E1109.5448G +Frame,Pwr 4-Circ W/Com Pt Lc 54H 48W	6	\$222.02	\$1,332.12
WL +sandstone			
WN +warm grey neutral			
E1109.6224G +Frame,Pwr 4-Circ W/Com Pt Lc 62H 24W	2	\$181.56	\$363.12
WL +sandstone			
WN +warm grey neutral			
E1109.6224J +Frame,Npwr Access Holes W/Com Pt Lc 62H 24W	2	\$135.32	\$270.64
WL +sandstone			
WN +warm grey neutral			
E1109.6236G +Frame,Pwr 4-Circ W/Com Pt Lc 62H 36W	9	\$206.04	\$1,854.36
WL +sandstone			
WN +warm grey neutral			
E1109.6236J +Frame,Npwr Access Holes W/Com Pt Lc 62H 36W	2	\$159.80	\$319.60
WL +sandstone			
WN +warm grey neutral			
E1109.6242G +Frame,Pwr 4-Circ W/Com Pt Lc 62H 42W	3	\$217.94	\$653.82
WL +sandstone			
WN +warm grey neutral			
E1109.6248G +Frame,Pwr 4-Circ W/Com Pt Lc 62H 48W	2	\$229.84	\$459.68
WL +sandstone			
WN +warm grey neutral			
E1109.7018N +Frame,Npwr No Access 70H 18W	2	\$134.30	\$268.60
WL +sandstone			
WN +warm grey neutral			
E1109.7024J +Frame,Npwr Access Holes W/Com Pt Lc 70H 24W	5	\$143.14	\$715.70
WL +sandstone			

Part Number		Qty	Sell	Ext Sell
WN	+warm grey neutral			
E1109.7030J		7	\$155.38	\$1,087.66
+Frame,Npwr Access Holes W/Com Pt Lc 70H 30W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.7036G		5	\$213.86	\$1,069.30
+Frame,Pwr 4-Circ W/Com Pt Lc 70H 36W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.7036J		3	\$167.28	\$501.84
+Frame,Npwr Access Holes W/Com Pt Lc 70H 36W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.7048G		4	\$237.32	\$949.28
+Frame,Pwr 4-Circ W/Com Pt Lc 70H 48W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.7048J		4	\$191.76	\$767.04
+Frame,Npwr Access Holes W/Com Pt Lc 70H 48W				
WL	+sandstone			
WN	+warm grey neutral			
E1120.38		9	\$6.46	\$58.14
+Draw Rod 38H				
E1120.46		28	\$6.80	\$190.40
+Draw Rod 46H				
E1120.54		9	\$6.80	\$61.20
+Draw Rod 54H				
E1120.62		18	\$7.82	\$140.76
+Draw Rod 62H				
E1120.70		27	\$8.16	\$220.32
+Draw Rod 70H				
E1210.62		1	\$36.38	\$36.38
+Wall Start 62H				
WL	+sandstone			
E1210.70		4	\$38.08	\$152.32
+Wall Start 70H				
WL	+sandstone			
E1220.46SSE		5	\$87.38	\$436.90

Part Number		Qty	Sell	Ext Sell
+Conn,2-Way 90 Vinyl,Sq,Pwr 46H				
WN	+ warm grey neutral			
WN	+ warm grey neutral			
WN	+ warm grey neutral			
E1220.54SSE		1	\$93.50	\$93.50
+Conn,2-Way 90 Vinyl,Sq,Pwr 54H				
WN	+ warm grey neutral			
WN	+ warm grey neutral			
WN	+ warm grey neutral			
E1220.62SSE		4	\$96.90	\$387.60
+Conn,2-Way 90 Vinyl,Sq,Pwr 62H				
WN	+ warm grey neutral			
WN	+ warm grey neutral			
WN	+ warm grey neutral			
E1220.70SSN		3	\$90.44	\$271.32
+Conn,2-Way 90 Vinyl,Sq,Npwr 70H				
WN	+ warm grey neutral			
WN	+ warm grey neutral			
WN	+ warm grey neutral			
E1222.70SE		1	\$103.02	\$103.02
+Spacer Vinyl,Pwr 70H				
WN	+ warm grey neutral			
WN	+ warm grey neutral			
WN	+ warm grey neutral			
WN	+ warm grey neutral			
E1230.46SE		4	\$108.80	\$435.20
+Conn,3-Way 90 Vinyl,Pwr 46H				
WN	+ warm grey neutral			
WN	+ warm grey neutral			
WN	+ warm grey neutral			
E1230.54SE		5	\$115.26	\$576.30
+Conn,3-Way 90 Vinyl,Pwr 54H				
WN	+ warm grey neutral			
WN	+ warm grey neutral			
WN	+ warm grey neutral			
E1230.62SE		6	\$122.06	\$732.36
+Conn,3-Way 90 Vinyl,Pwr 62H				
WN	+ warm grey neutral			
WN	+ warm grey neutral			
WN	+ warm grey neutral			
E1230.70SE		8	\$127.84	\$1,022.72

Part Number		Qty	Sell	Ext Sell
+Conn,3-Way 90 Vinyl,Pwr 70H				
WN	+warm grey neutral			
WN	+warm grey neutral			
WN	+warm grey neutral			
E1240.62FE		1	\$139.40	\$139.40
+Conn,4-Way 90,Pwr 62H				
WN	+warm grey neutral			
E1250.46S		21	\$21.08	\$442.68
+Fin End,Std 46H				
WL	+sandstone			
E1250.54S		1	\$22.10	\$22.10
+Fin End,Std 54H				
WL	+sandstone			
E1250.62S		1	\$23.46	\$23.46
+Fin End,Std 62H				
WL	+sandstone			
E1250.70S		3	\$24.48	\$73.44
+Fin End,Std 70H				
WL	+sandstone			
E1251.08S		15	\$15.30	\$229.50
+Chg of Ht Fin End Std 8H				
WL	+sandstone			
E1251.16S		22	\$16.66	\$366.52
+Chg of Ht Fin End Std 16H				
WL	+sandstone			
E1251.24S		3	\$18.70	\$56.10
+Chg of Ht Fin End Std 24H				
WL	+sandstone			
E1311.A		4	\$58.48	\$233.92
+15 Amp Receptacle 4 Circuit, Duplex, Circuit A 6/Pkg				
WN	+warm grey neutral			
E1311.B		4	\$58.48	\$233.92
+15 Amp Receptacle 4 Circuit, Duplex, Circuit B 6/Pkg				
WN	+warm grey neutral			
E1311.C		4	\$58.48	\$233.92
+15 Amp Receptacle 4 Circuit, Duplex, Circuit C 6/Pkg				
WN	+warm grey neutral			
E1322.06E		8	\$50.66	\$405.28

Part Number	Qty	Sell	Ext Sell
+Power Entry,Ext. Dir Con 4-Circ,6Ft L			
E1341.3E +Power Jumper,4-Circ,4th 8H Tile Above Base	2	\$31.62	\$63.24
E1342.24E +Harness,Pass-Thru,Frame 24L	1	\$40.46	\$40.46
E1342.30E +Harness,Pass-Thru,Frame 30L	1	\$42.50	\$42.50
E1342.36E +Harness,Pass-Thru,Frame 36L	2	\$45.22	\$90.44
E1342.42E +Harness,Pass-Thru,Frame 42L	1	\$47.60	\$47.60
E1356.CE +Harness,Pass-Thru Conn,3-Way 90 Conn,Pwr 5/Pkg	1	\$60.86	\$60.86
E1356.DE +Harness,Pass-Thru Conn,4-Way 90 Conn,Pwr 5/Pkg	1	\$62.22	\$62.22
E1415.1624M +Tile,Window Mid/Bot 16H 24W WN +warm grey neutral TR +clear	2	\$36.72	\$73.44
E1415.1624T +Tile,Window Top 16H 24W WN +warm grey neutral TR +clear	4	\$37.06	\$148.24
E1415.1630M +Tile,Window Mid/Bot 16H 30W WN +warm grey neutral TR +clear	2	\$40.12	\$80.24
E1415.1636M +Tile,Window Mid/Bot 16H 36W WN +warm grey neutral TR +clear	4	\$44.54	\$178.16
E1415.1636T +Tile,Window Top 16H 36W WN +warm grey neutral TR +clear	8	\$44.88	\$359.04
E1415.1648M	12	\$54.74	\$656.88

Part Number		Qty	Sell	Ext Sell
+Tile,Window Mid/Bot 16H 48W				
WN	+warm grey neutral			
TR	+clear			
E1415.2424T		6	\$51.34	\$308.04
+Tile,Window Top 24H 24W				
WN	+warm grey neutral			
TR	+clear			
E1415.2430T		4	\$56.78	\$227.12
+Tile,Window Top 24H 30W				
WN	+warm grey neutral			
TR	+clear			
E1415.2436T		8	\$63.24	\$505.92
+Tile,Window Top 24H 36W				
WN	+warm grey neutral			
TR	+clear			
E1415.2448T		16	\$77.52	\$1,240.32
+Tile,Window Top 24H 48W				
WN	+warm grey neutral			
TR	+clear			
E1420.0818F		2	\$16.66	\$33.32
+Tile,Face Fabric 08H 18W				
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E1420.0824F		8	\$18.36	\$146.88
+Tile,Face Fabric 08H 24W				
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E1420.0824F		1	\$18.36	\$18.36
+Tile,Face Fabric 08H 24W				
8T	+crossing-Pr Cat 1			
06	+crossing sepia			
E1420.0830F		10	\$19.72	\$197.20
+Tile,Face Fabric 08H 30W				
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E1420.0830F		1	\$19.72	\$19.72
+Tile,Face Fabric 08H 30W				
8T	+crossing-Pr Cat 1			
06	+crossing sepia			

Part Number	Qty	Sell	Ext Sell
E1420.0836F +Tile,Face Fabric 08H 36W	6	\$22.10	\$132.60
8T +crossing-Pr Cat 1			
03 +crossing wicker			
E1420.0836F +Tile,Face Fabric 08H 36W	2	\$22.10	\$44.20
8T +crossing-Pr Cat 1			
06 +crossing sepia			
E1420.0842F +Tile,Face Fabric 08H 42W	2	\$25.50	\$51.00
8T +crossing-Pr Cat 1			
03 +crossing wicker			
E1420.0848F +Tile,Face Fabric 08H 48W	12	\$27.54	\$330.48
8T +crossing-Pr Cat 1			
03 +crossing wicker			
E1420.1618C @Tile,Face Vnr w/Vert Grain 16H 18W	4	\$50.66	\$202.64
VU @cathedral recut light brown walnut			
E1420.1618F +Tile,Face Fabric 16H 18W	4	\$21.42	\$85.68
8T +crossing-Pr Cat 1			
06 +crossing sepia			
E1420.1624C @Tile,Face Vnr w/Vert Grain 16H 24W	6	\$58.14	\$348.84
VU @cathedral recut light brown walnut			
E1420.1624F +Tile,Face Fabric 16H 24W	21	\$24.48	\$514.08
8T +crossing-Pr Cat 1			
03 +crossing wicker			
E1420.1624F +Tile,Face Fabric 16H 24W	6	\$24.48	\$146.88
8T +crossing-Pr Cat 1			
06 +crossing sepia			
E1420.1630C @Tile,Face Vnr w/Vert Grain 16H 30W	6	\$63.58	\$381.48
VU @cathedral recut light brown walnut			
E1420.1630F +Tile,Face Fabric 16H 30W	14	\$26.18	\$366.52

Part Number		Qty	Sell	Ext Sell
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E1420.1630F		6	\$26.18	\$157.08
+Tile,Face Fabric 16H 30W				
8T	+crossing-Pr Cat 1			
06	+crossing sepia			
E1420.1636C		16	\$70.04	\$1,120.64
@Tile,Face Vnr w/Vert Grain 16H 36W				
VU	@cathedral recut light brown walnut			
E1420.1636F		31	\$29.24	\$906.44
+Tile,Face Fabric 16H 36W				
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E1420.1636F		4	\$29.24	\$116.96
+Tile,Face Fabric 16H 36W				
8T	+crossing-Pr Cat 1			
06	+crossing sepia			
E1420.1642C		4	\$77.18	\$308.72
@Tile,Face Vnr w/Vert Grain 16H 42W				
VU	@cathedral recut light brown walnut			
E1420.1642F		25	\$31.28	\$782.00
+Tile,Face Fabric 16H 42W				
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E1420.1648C		10	\$83.98	\$839.80
@Tile,Face Vnr w/Vert Grain 16H 48W				
VU	@cathedral recut light brown walnut			
E1420.1648F		4	\$34.00	\$136.00
+Tile,Face Fabric 16H 48W				
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E1420.2036P		18	\$22.78	\$410.04
+Tile,Face Painted 20H 36W				
WN	+warm grey neutral			
E1420.2418F		12	\$27.54	\$330.48
+Tile,Face Fabric,24H 18W				
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E1420.2424F		32	\$30.26	\$968.32

Part Number		Qty	Sell	Ext Sell
+Tile,Face Fabric,24H 24W				
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E1420.2424P		17	\$24.14	\$410.38
+Tile,Face Painted,24H 24W				
WN	+warm grey neutral			
E1420.2430F		38	\$32.64	\$1,240.32
+Tile,Face Fabric,24H 30W				
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E1420.2430P		18	\$26.18	\$471.24
+Tile,Face Painted,24H 30W				
WN	+warm grey neutral			
E1420.2436F		43	\$36.72	\$1,578.96
+Tile,Face Fabric,24H 36W				
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E1420.2436P		45	\$28.22	\$1,269.90
+Tile,Face Painted,24H 36W				
WN	+warm grey neutral			
E1420.2442F		27	\$39.10	\$1,055.70
+Tile,Face Fabric,24H 42W				
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E1420.2442P		1	\$30.60	\$30.60
+Tile,Face Painted,24H 42W				
WN	+warm grey neutral			
E1420.2448F		22	\$42.84	\$942.48
+Tile,Face Fabric,24H 48W				
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E1420.2448P		10	\$34.00	\$340.00
+Tile,Face Painted,24H 48W				
WN	+warm grey neutral			
E1422.1624		14	\$30.60	\$428.40
+Tile,Tackable 16H 24W				
8T	+crossing-Pr Cat 1			
06	+crossing sepia			
E1422.1630		18	\$34.00	\$612.00

Part Number		Qty	Sell	Ext Sell
+Tile,Tackable 16H 30W				
8T	+crossing-Pr Cat 1			
06	+crossing sepia			
E1422.1636		33	\$38.42	\$1,267.86
+Tile,Tackable 16H 36W				
8T	+crossing-Pr Cat 1			
06	+crossing sepia			
E1422.1642		4	\$43.86	\$175.44
+Tile,Tackable 16H 42W				
8T	+crossing-Pr Cat 1			
06	+crossing sepia			
E1422.1648		8	\$47.60	\$380.80
+Tile,Tackable 16H 48W				
8T	+crossing-Pr Cat 1			
06	+crossing sepia			
E1433.0824F		1	\$30.94	\$30.94
+Tile,Cable Channel Fabric 08H 24W				
8T	+crossing-Pr Cat 1			
06	+crossing sepia			
E1433.0830F		1	\$38.42	\$38.42
+Tile,Cable Channel Fabric 08H 30W				
8T	+crossing-Pr Cat 1			
06	+crossing sepia			
E1433.0836F		2	\$40.12	\$80.24
+Tile,Cable Channel Fabric 08H 36W				
8T	+crossing-Pr Cat 1			
06	+crossing sepia			
E1433.0842F		2	\$43.52	\$87.04
+Tile,Cable Channel Fabric 08H 42W				
8T	+crossing-Pr Cat 1			
06	+crossing sepia			
E2110.2430L		1	\$79.56	\$79.56
+Work Surf,Sq-Edge Rect,No Trough 24D 30W				
LU	+soft white			
LU	+soft white			
SM	+on module			
E2110.2436L		2	\$87.72	\$175.44
+Work Surf,Sq-Edge Rect,No Trough 24D 36W				
LU	+soft white			

Part Number		Qty	Sell	Ext Sell
LU	+soft white			
SM	+on module			
E2110.2442L		3	\$95.54	\$286.62
+Work Surf,Sq-Edge Rect,No Trough 24D 42W				
LU	+soft white			
LU	+soft white			
SM	+on module			
E2110.2448L		2	\$103.70	\$207.40
+Work Surf,Sq-Edge Rect,No Trough 24D 48W				
LU	+soft white			
LU	+soft white			
SM	+on module			
E2110.2460L		18	\$131.92	\$2,374.56
+Work Surf,Sq-Edge Rect,No Trough 24D 60W				
LU	+soft white			
LU	+soft white			
SM	+on module			
E2130.2436L		8	\$120.36	\$962.88
+Work Surf,Sq-Edge Concv Cnr,No Trough 24D 36W				
LU	+soft white			
LU	+soft white			
SM	+on module			
E2211.3336L		9	\$242.08	\$2,178.72
+Trans Surf,Sq-Edge Rect Lam 24D 36W				
LU	+soft white			
LU	+soft white			
E3212.24F		1	\$132.60	\$132.60
+Flip Dr Unit,B-Style Fabric W/Lock 13D 24W				
KA	+keyed alike			
WL	+sandstone			
SM	+for Ethospace® on module			
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E3212.36F		4	\$150.62	\$602.48
+Flip Dr Unit,B-Style Fabric W/Lock 13D 36W				
KA	+keyed alike			
WL	+sandstone			
SM	+for Ethospace® on module			
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E3212.42F		3	\$161.84	\$485.52

Part Number		Qty	Sell	Ext Sell
+Flip Dr Unit,B-Style Fabric W/Lock 13D 42W				
KA	+keyed alike			
WL	+sandstone			
SM	+for Ethospace® on module			
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E3212.48F		2	\$170.68	\$341.36
+Flip Dr Unit,B-Style Fabric W/Lock 13D 48W				
KA	+keyed alike			
WL	+sandstone			
SM	+for Ethospace® on module			
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
E6010.		9	\$96.22	\$865.98
+Spotlight,Adj				
CN	+metallic champagne			
G6136.24S		1	\$63.92	\$63.92
+Task Light,Utility,AO,Prospects,Etho,Vivo,24W				
G6136.30S		4	\$64.94	\$259.76
+Task Light,Utility,AO,Prospects,Etho,Vivo,30W				
G6136.42S		5	\$71.74	\$358.70
+Task Light,Utility,AO,Prospects,Etho,Vivo,42W				
G6240.36MR		9	\$241.40	\$2,172.60
+Task Light,Linear,Pnl/Frm Attchd 36W				
WN	+warm grey neutral			
G6240.48PF		1	\$253.64	\$253.64
+Task Light,Linear,Pnl/Frm Attchd 48W				
WN	+warm grey neutral			
DK481.2448		3	\$558.32	\$1,674.96
@Tbl,Hlf-Rnd,Fix Legs 1 36164 Sq Vin Ed 24D 48W 29H				
LU	@soft white			
LU	@soft white			
MT	@medium tone			
CO228FF		9	\$14.04	\$126.36
+Drw Bearer Pkg 3/4W 14D				
BK	+black			
CO33738		9	\$44.72	\$402.48
+Cash Drw Insert 20W 14D				
CO370KA		1	\$133.12	\$133.12

Part Number		Qty	Sell	Ext Sell
+Drw W/Lockable Lid,A-Size,KA 3H				
WN	+warm grey neutral			
LU	+soft white			
50	+key number 50			
CO370KA		1	\$133.12	\$133.12
+Drw W/Lockable Lid,A-Size,KA 3H				
WN	+warm grey neutral			
LU	+soft white			
51	+key number 51			
CO370KA		1	\$133.12	\$133.12
+Drw W/Lockable Lid,A-Size,KA 3H				
WN	+warm grey neutral			
LU	+soft white			
52	+key number 52			
CO370KA		1	\$133.12	\$133.12
+Drw W/Lockable Lid,A-Size,KA 3H				
WN	+warm grey neutral			
LU	+soft white			
53	+key number 53			
CO370KA		1	\$133.12	\$133.12
+Drw W/Lockable Lid,A-Size,KA 3H				
WN	+warm grey neutral			
LU	+soft white			
54	+key number 54			
CO370KA		1	\$133.12	\$133.12
+Drw W/Lockable Lid,A-Size,KA 3H				
WN	+warm grey neutral			
LU	+soft white			
56	+key number 56			
CO370KA		1	\$133.12	\$133.12
+Drw W/Lockable Lid,A-Size,KA 3H				
WN	+warm grey neutral			
LU	+soft white			
57	+key number 57			
CO370KA		1	\$133.12	\$133.12
+Drw W/Lockable Lid,A-Size,KA 3H				
WN	+warm grey neutral			
LU	+soft white			
58	+key number 58			
CO370KA		1	\$133.12	\$133.12

Part Number		Qty	Sell	Ext Sell
+Drw W/Lockable Lid,A-Size,KA 3H				
WN	+warm grey neutral			
LU	+soft white			
59	+key number 59			
LW100.20BBF		6	\$207.86	\$1,247.16
+Ped W-Pull,Freestd 20D B/B/F				
SB	+full-extension ball-bearing			
SS	+smooth paint on smooth steel			
WL	+sandstone			
KA	+keyed alike			
2F	+raised height			
3M	+drawer divider in one box drawer, pencil tray in one box drawer, 2 file conver			
LW100.20FF		6	\$174.42	\$1,046.52
+Ped W-Pull,Freestd 20D F/F				
SB	+full-extension ball-bearing			
SS	+smooth paint on smooth steel			
WL	+sandstone			
KA	+keyed alike			
2F	+raised height			
1M	+2 file converters in each file drawer			
LW110.20BBF		12	\$224.20	\$2,690.40
+Ped W-Pull,Mobile 20D B/B/F				
SB	+full-extension ball-bearing			
SS	+smooth paint on smooth steel			
WL	+sandstone			
KA	+keyed alike			
3M	+drawer divider in one box drawer, pencil tray in one box drawer, 2 file conver			
LW300.46LS		1	\$763.04	\$763.04
+Stg Twr,W-Pull,Stor Case Wdrb Lft,B/B/F, 46H				
SB	+full-extension ball-bearing			
SS	+smooth paint on smooth steel			
WL	+sandstone			
KA	+keyed alike			
CH	+coat hook			
3M	+drawer divider in one box drawer, pencil tray in one box drawer, 2 file conver			
E1109.5424G		1	\$173.40	\$173.40
+Frame,Pwr 4-Circ W/Com Pt Lc 54H 24W				
WL	+sandstone			
WN	+warm grey neutral			
E1109.5424J		4	\$127.50	\$510.00
+Frame,Npwr Access Holes W/Com Pt Lc 54H 24W				
WL	+sandstone			

Part Number	Qty	Sell	Ext Sell
WN +warm grey neutral			
E1109.5436G +Frame,Pwr 4-Circ W/Com Pt Lc 54H 36W	5	\$198.22	\$991.10
WL +sandstone			
WN +warm grey neutral			
E1109.5436J +Frame,Npwr Access Holes W/Com Pt Lc 54H 36W	2	\$151.98	\$303.96
WL +sandstone			
WN +warm grey neutral			
E1109.5448G +Frame,Pwr 4-Circ W/Com Pt Lc 54H 48W	1	\$222.02	\$222.02
WL +sandstone			
WN +warm grey neutral			
E1120.54 +Draw Rod 54H	1	\$6.80	\$6.80
E1227.54SRE +Conn,2-Way 120 Deg,Vinyl,Pwr 54H	1	\$145.18	\$145.18
WN +warm grey neutral			
WN +warm grey neutral			
WN +warm grey neutral			
E1237.54E +Conn,3-Way 120 Deg,Pwr 54H	2	\$158.78	\$317.56
WN +warm grey neutral			
E1240.54FE +Conn,4-Way 90,Pwr 54H	2	\$133.28	\$266.56
WN +warm grey neutral			
E1250.54S +Fin End,Std 54H	7	\$22.10	\$154.70
WL +sandstone			
E1251.16S +Chg of Ht Fin End Std 16H	1	\$16.66	\$16.66
WL +sandstone			
E1311.A +15 Amp Receptacle 4 Circuit, Duplex, Circuit A 6/Pkg	1	\$58.48	\$58.48
WN +warm grey neutral			
E1311.B +15 Amp Receptacle 4 Circuit, Duplex, Circuit B 6/Pkg	1	\$58.48	\$58.48
WN +warm grey neutral			
E1311.C	1	\$58.48	\$58.48

Part Number	Qty	Sell	Ext Sell
+15 Amp Receptacle 4 Circuit, Duplex, Circuit C 6/Pkg			
WN +warm grey neutral			
E1415.1624T	10	\$37.06	\$370.60
+Tile,Window Top 16H 24W			
WN +warm grey neutral			
TR +clear			
E1415.1636T	14	\$44.88	\$628.32
+Tile,Window Top 16H 36W			
WN +warm grey neutral			
TR +clear			
E1415.1648T	2	\$56.10	\$112.20
+Tile,Window Top 16H 48W			
WN +warm grey neutral			
TR +clear			
E1420.0824F	10	\$18.36	\$183.60
+Tile,Face Fabric 08H 24W			
8T +crossing-Pr Cat 1			
03 +crossing wicker			
E1420.0836F	14	\$22.10	\$309.40
+Tile,Face Fabric 08H 36W			
8T +crossing-Pr Cat 1			
03 +crossing wicker			
E1420.0848F	2	\$27.54	\$55.08
+Tile,Face Fabric 08H 48W			
8T +crossing-Pr Cat 1			
03 +crossing wicker			
E1420.2424F	2	\$30.26	\$60.52
+Tile,Face Fabric,24H 24W			
8T +crossing-Pr Cat 1			
03 +crossing wicker			
E1420.2424P	8	\$24.14	\$193.12
+Tile,Face Painted,24H 24W			
WN +warm grey neutral			
E1420.2436F	2	\$36.72	\$73.44
+Tile,Face Fabric,24H 36W			
8T +crossing-Pr Cat 1			
03 +crossing wicker			
E1420.2436P	12	\$28.22	\$338.64
+Tile,Face Painted,24H 36W			

Part Number		Qty	Sell	Ext Sell
WN	+warm grey neutral			
E1420.2448P		2	\$34.00	\$68.00
+Tile,Face Painted,24H 48W				
WN	+warm grey neutral			
E2110.2448L		2	\$103.70	\$207.40
+Work Surf,Sq-Edge Rect,No Trough 24D 48W				
LU	+soft white			
LU	+soft white			
SM	+on module			
E2132.2436L		6	\$215.90	\$1,295.40
+Work Surf,Sq-Edge 120-Degree Cnr,90-Deg Ends,No Trough 24D 36W				
LU	+soft white			
LU	+soft white			
G6240.36PF		4	\$241.40	\$965.60
+Task Light,Linear,Pnl/Frm Attchd 36W				
WN	+warm grey neutral			
G6240.48PF		2	\$253.64	\$507.28
+Task Light,Linear,Pnl/Frm Attchd 48W				
WN	+warm grey neutral			
E2283.24L		7	\$96.56	\$675.92
+Support Panel,Wk Surf Lam,End,Glides 24D				
WN	+warm grey neutral			
E1109.6218N		1	\$126.82	\$126.82
+Frame,Npwr No Access 62H 18W				
WL	+sandstone			
WN	+warm grey neutral			
E1420.1618F		2	\$21.42	\$42.84
+Tile,Face Fabric 16H 18W				
8T	+crossing-Pr Cat 1			
03	+crossing wicker			
		1	\$0.00	\$0.00
W2 TO RECEIVE, INSPECT, DEILVER, AND INSTALL				
			Sub Total:	\$109,239.84
			Total:	\$109,239.84

WORKSQUARED TERMS AND CONDITIONS OF SALE:**1. PROPOSALS AND ORDERS**

- A. TERM:** All prices quoted.
- B. ACCEPTANCE:** All orders require either a hard copy purchase order issued by Buyer or a proposal prepared by WorkSquared (Seller) which has been approved by an authorized signatory of Buyer.
- C. MODIFICATION/CHANGES/CANCELLATIONS:** Any requested modification to an order is subject to the approval of Seller and the manufacturer or supplier of the goods ordered. Buyer will pay all additional charges resulting from order modifications, cancellations and changes. Express ship orders can not be changed or cancelled. All product is custom manufactured to customer specifications and therefore cannot be returned. Restocking programs are not available. Changes must be made via a revised purchase order, change order, or signed and dated revised proposal.
- D. CREDIT APPROVAL:** All orders are subject to credit approval
- E. DEPOSITS:** A deposit of 50% is required on all orders. Deposits are required if the manufacturer(s) or service provider(s) require(s) deposit. All special orders must be accompanied by a 50% deposit and a 100% deposit for C.O.M. materials. All required deposits must be received by Seller prior to the entering of any orders. No interest shall accrue against any such deposit.
- F. SOLVENCY AND SECURITY INTEREST:** Buyer represents that Buyer is solvent. Seller retains a security interest in goods to secure payment of the price and all other indebtedness that Buyer now or in the future owes to Seller.

2. INVOICING:

- A. TIMING:** Product purchased under this Agreement and any related installation or other services will be invoiced upon delivery of the product to the job site. Direct shipments from manufacturers will be invoiced upon shipment from the manufacturer. Any product being held at Buyer's request will be invoiced in full upon Seller's receipt of same.
- B. PAYMENT TERMS:** Seller has the right to increase its prices at anytime upon notice to Buyer to reflect any unusual or unforeseen increases in Seller's cost. Buyer may not offset or recoup any claim against amounts due Seller. If Buyer fails to pay any indebtedness that Buyer at any time owes to Seller, then Seller may consider Buyer's failure to be an anticipatory repudiation of any or all outstanding contracts that provide for Seller to sell goods to Buyer, and Seller may, without liability to Buyer, cancel any or all of those outstanding contracts. All invoices are due in full within thirty (30) days from the receipt of invoice. A monthly services charge of 1.5% A.P.R. will be assessed on all unpaid balances after invoice due date. A service charge of three percent (3%) of the invoice amount will be added to all invoices paid by a credit card.
- C. WITHHOLDING:** PAYMENT MAY BE WITHHELD ON ANY INVOICE ONLY FOR SPECIFIC MERCHANDISE NOT DELIVERED OR DAMAGED AND SUCH NOTICE OR WITHHOLDING SHALL BE IN WRITING.
- D. FREIGHT:** Unless otherwise noted, all applicable freight and handling charges are not included in the price quotation and will be invoiced as a separate line item after the Seller is invoiced by the carrier.
- E. TAXES:** Unless otherwise noted, any applicable sales, use, excise, or any other taxes are not included in the proposal and will be invoiced as a separate line item. Buyer agrees to pay any and all applicable taxes. If buyer possesses tax exempt status a certificate of resale or tax exemption is to be provided prior to order placement.
- F. DELAYS:** If Buyer is unable or unwilling to receive product at the prescribed shipping site on the mutually agreed upon delivery date, product will be deemed delivered and will be invoiced as if delivered.

3. DELIVERY AND INSTALLATION:

- A. DELIVERY AND INSTALLATION:** Is included in the scope of services and specifically itemized on this proposal. Delivery and installation will be made using labor during Seller's normal business hours of 7:00 a.m. to 4:00 p.m. Monday through Friday. Overtime delivery or installation performed at the Buyer's request will be subject to labor rates reflecting time and one-half for weekdays and double time for weekends and Holidays. Shipping, delivery and performance dates are estimates only, and time is not of the essence. Seller may ship all the goods at one time or in portions from time to time. Seller shall have the right, but not the obligation, to determine the method of shipment and routing of the goods, unless otherwise stated in Seller's proposal or acknowledgement.
- B. SELLER'S RESPONSIBILITIES:** Seller will receive, inspect, stage, deliver and install Buyer's goods. All furnishing will be left clean and in working order. Cartoning and packing materials will be removed to the Buyer's waste disposal containers, and the premises will be left broom clean. When applicable, Seller may direct shipments directly to the job site.
- C. BUYER'S ACCEPTANCE:** Buyer agrees to have an agent on the premises at the agreed upon delivery time to accept product deliveries and complete work. All merchandise shall be considered accepted after the Buyer or his agent has signed the delivery document. All claims or exceptions must be made in writing on the delivery ticket or bill of lading on the date of work completion.
- D. DROP SHIPMENTS:** In case of drop shipments where product is delivered without installation. Buyer will receive, inspect and install ordered goods. Buyer is also responsible for filing necessary freight claims in the event of damage. Buyer shall have no claims against Seller due to freight damage nor withhold payment on account thereof.
- E. CONDITION OF JOB SITE:** Buyer's job site shall be clean, clear of construction and free of debris prior to installation. Charges will be assessed to the Buyer for excessive handling, storage, and transportation, incurred because of site conditions, activity of other trades, or other reasons not specifically identified in the price quotations, at a standard hourly rate, or at actual charges, if labor is performed by a third party.
- F. JOB SITE SERVICES:** Buyer will furnish electrical current, heating, lighting, trash disposal containers, hoisting and/or elevator services, and suitable unobstructed dock space and staging areas at the job site without charge to the Seller. If Seller is required to remove or handle existing furniture, the additional cost of moving transporting shall be billed to the Buyer on an hourly basis. Once the installation has begun the Buyer agrees to assure any expense incurred by Seller due to such charges made at the Buyer's request or for any reason beyond Seller's control.
- G. ELECTRICAL INSTALLATION:** A licensed electrician may be required to install electrical product including outlets, task lights, and

Part Number	Qty	Sell	Ext Sell
hook-ups to base building power. If Seller determines that an electrician is required, the Buyer will be responsible for contracting and paying the electrician.			
H.	PROTECTION OF DELIVERED GOODS: Buyer is responsible for security and safekeeping of product after delivery to Buyer's site, or into storage negotiated by Buyer if job site is not ready on mutually agreed upon delivery date, and shall assume any risk of damage or loss thereof. Unless Seller agrees otherwise in writing, Seller shall deliver the goods F.O.B. Seller's facility, except that, risk of loss of the goods shall pass to Buyer upon identification of the goods to the contract between Buyer and Seller.		
4.	ADDITIONAL TERMS		
A.	WARRANTIES: Seller makes no warranties, express or implied of product sold hereunder whatsoever, including any warranty of merchantability or warranty the furniture is fit for any particular purpose. Seller will identify all manufacturers' warranties and provide to the Buyer's reasonable assistance to permit the Buyer to assert claims based upon such warranties directly to the manufacturer at Buyer's expense.		
B.	TITLE: Title transfers to the buyer upon receipt of goods.		
C.	ACTS BEYOND REASONABLE CONTROL: Seller shall not be liable for any delay or failure to deliver any or the entire product caused by labor disputes, strikes, act of God, or other delay beyond the reasonable control of the Seller.		
D.	ENTIRE AGREEMENT: Unless otherwise agreed to in writing between Buyer and Seller, this document is intended by all parties as the final expression of their agreement and supersedes all other purchase order of documents provided by the Buyer.		
E.	RESALE: On any resale of the goods, Buyer shall contractually limit its buyer's warranty against both Buyer and Seller to the same extent that Paragraph 4(A) above limits the Buyer's warranty.		
F.	INDEMNITY: Buyer shall indemnify and hold harmless Seller with respect to all damages, losses, claims and expenses, including consequential and incidental damages and attorney fees that Seller incurs as a result of Buyer's breach of any of Buyer's obligations under these Terms of Sale or any claim resulting from Seller's interior design, project management, delivery, installation, or any other services.		
G.	SELLER'S RIGHTS: Seller has all rights and remedies that applicable law gives to sellers. Seller's right and remedies are cumulative, and Seller may exercise them from time to time. Seller's waiver of any right on one occasion shall not be a waiver of any future exercise of that right.		
H.	TIME FOR BRINGING ACTION: Any action that Buyer brings against Seller for breach of these Terms of Sale or for any other claim that arises out of or relates to the goods or services must be brought within one year after the cause of action accrues.		
I.	APPLICABLE LAW: This agreement between Buyer and Seller shall be considered to have been made in the State of Michigan, and it shall be governed by an interpreted according to Michigan law. Either party may bring any action that arises out of or relates to this agreement in any federal or state court in Michigan, that has jurisdiction over the subject matter, and Buyer irrevocably consents that any such court shall have personal jurisdiction over Buyer and waives any objection that the court is an inconvenient forum.		

ENTIRE AGREEMENT AMENDMENT: Seller objects to and will not agree to any terms that are additional to or different from these terms. Terms that are printed on or contained in a purchase order or other form prepared by the Buyer which are additional to, in conflict with or inconsistent with those herein shall be considered inapplicable and shall have no force or effect. Any change in these Terms of Sale must be by a writing signed by any an authorized signatory of Seller.

Approved By: _____

Print Name: _____

Signature: _____

Date: _____ **PO or Reference Number:** _____



JACKSON COUNTY

Department on Aging

1715 Lansing Ave. - Suite 672
Jackson, MI 49202-2193

517-788-4364 · Fax: 517-780-4739

To: Board of Commissioners
County Administration

From: Marce Wandell *MW*

Re: Sharing Account Clerk Grade 5 Full-Time Position

Date: Nov. 17, 2010

Long time employee Carol Ann Jenks is retiring Dec. 31, 2010, after working 17 years as a Department on Aging Account Clerk. Ted Westmeier and I have discussed the potential for the Department on Aging sharing a full-time Grade 5 Account Clerk with the Health Department. The Health Department currently has a Grade 5 Account Clerk who could be scheduled up to 20 hours a week in the Department on Aging.

I am requesting Board approval of the Department on Aging eliminating a full-time Account Clerk Grade 5 position and sharing a full-time Account Clerk Grade 5 position with the Health Department beginning January 1, 2011.

cc: Ted Westmeier

County of Jackson Budget Adjustments

[illegible]

DESCRIPTION OF ADJUSTMENT
Adjusted budgets to reflect changes in sponsored events

DEPT HEAD/date

COMMITTEE/date

BUDGET DIR/date

ADMINISTRATOR/date

County of Jackson Budget Adjustments

				ACCOUNT			CURRENT			AMENDED
FUND	DEPT	ACCT	SUB	DESCRIPTION			BUDGET	INCREASE	DECREASE	BUDGET
218	700	638	060	Golf Course Revenue - Greens Fees			\$305,000		\$21,381	\$283,619
218	700	695	000	Golf Course Revenue - Miscellaneous			\$18,390	\$18,381		\$36,771

[illegible]

DESCRIPTION OF ADJUSTMENT	
FY 2010 Golf Course year-end adjustments	

DEPT HEAD/date

COMMITTEE/date

BUDGET DIR/date

ADMINISTRATOR/date

County of Jackson Budget Adjustments

[illegible]

218	982	965	000	Golf Course Expense - to fund balance		\$24,875		\$24,875	\$0
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[illegible]

DESCRIPTION OF ADJUSTMENT	
FY 2010 Golf Course year-end adjustments	

DEPT HEAD/date

COMMITTEE/date

BUDGET DIR/date

ADMINISTRATOR/date

County of Jackson Budget Adjustments

[illegible]

DESCRIPTION OF ADJUSTMENT	
FY 2010 year-end adjustments	

DEPT HEAD/date

COMMITTEE/date

BUDGET DIR/date

ADMINISTRATOR/date

County of Jackson Budget Adjustments

FUND	DEPT	ACCT	SUB	ACCOUNT DESCRIPTION		CURRENT BUDGET	INCREASE	DECREASE	AMENDED BUDGET
208	717	705	500	Parks Equipment Expense - Casual Wages		\$0	\$15,000		\$15,000
208	717	716	000	Parks Equipment Expense - Health Insurance		\$12,960		\$7,000	\$5,960
208	717	864	000	Parks Equipment Expense - Gasoline		\$40,000		\$5,000	\$35,000
208	717	718	000	Parks Equipment Expense - Retirement		\$4,639		\$3,000	\$1,639
				Total		\$57,599	\$15,000	\$15,000	\$57,599

DESCRIPTION OF ADJUSTMENT
FY 2010 year-end budget adjustments

DEPT HEAD/date _____
COMMITTEE/date _____

BUDGET DIR/date _____
ADMINISTRATOR/date _____

County of Jackson Budget Adjustments

[illegible]

DESCRIPTION OF ADJUSTMENT	
FY 2010 year-end adjustments	

DEPT HEAD/date

COMMITTEE/date

BUDGET DIR/date

ADMINISTRATOR/date

**COUNTY OF JACKSON
YOUTH CENTER/COURT-BUDGET ADJUSTMENT
REVENUE
2010**

[illegible]

REASONING:

There were no funds expended for the Family Recovery Court Grant 2010 budget period so no revenues will be received. We would like to request to reappropriate the \$15,000 to pay for revenues for the new Adult Recovery Court Mid-South Grant.

DEPT HEAD

Charles M. Robbins

DATE Nov 29, 2010

DATE _____

COMMITTEE _____ DATE _____

ADMIN _____ DATE _____

BOARD OF COMM _____ DATE _____

**COUNTY OF JACKSON
YOUTH CENTER/COURT-BUDGET ADJUSTMENT
EXPENSE
2010**

[illegible]

REASONING:

There were no funds expended for the Family Recovery Court Grant 2010 budget period. We would like to request to reappropriate the \$15,000 to pay for expenses for the new Adult Recover Court Mid-South Grant for the remainder of 2010.

DEPT HEAD

Charles M. Robbins

DATE Nov. 29, 2010

DATE _____

COMMITTEE

DATE _____

ADMIN

DATE _____

BOARD OF COMM

DATE _____

**COUNTY OF JACKSON
YOUTH CENTER/COURT BUDGE ADJUSTMENT
EXPENSE
2011**

[illegible]

REASONING:

The Family Recovery Court has been canceled for the 2010-2011 fiscal year. No expense will be charged for this program.

This requested adjustment is for our share of the new Federal Adult Recovery Court Mid South Grant for the fiscal year 2010-2011.

The new Regular Adult Court Budget for the 2010-2011 fiscal year is \$140,000. This adjustment request reflects the new SCAO grant amount.

The new Mental Health Court grant award for the 2010-2011 fiscal year is \$111,700. The adjustment request reflects the new SCAO grant amount.

DEPT HEAD

BUDGET DIR

DATE _____

DATE _____

COMMITTEE

ADMIN

BOARD OF COMM

DATE _____

DATE _____

DATE _____

**COUNTY OF JACKSON
YOUTH CENTER/COURT-BUDGET ADJUSTMENT
REVENUE
2011**

[illegible]

REASONING:

The Family Recovery Court has been canceled for the 2010-2011 fiscal year. No revenue will be received for this program.

"This requested adjustment is for our share of the new Federal Adult Recovery Court Mid South Grant for the fiscal year 2010-2011."

The new Regular Adult Court Budget for the 2010-2011 fiscal year is \$140,000. This adjustment request reflects the new SCAO grant amount.

The new Mental Health Court grant award for the 2010-2011 fiscal year is \$111,700. The adjustment request reflects the new SCAO grant amount.

DEPT HEAD

Charles M. Adkins

DATE Nov. 29, 2010

DATE _____

COMMITTEE

DATE _____

ADMIN

DATE _____

BOARD OF COMM

DATE _____

11/23/10

To: Ted Westmeier
Health Officer, JCHD

Budget Adjustment Request (DECEMBER, 2010) for FYE 9/30/11

REQUEST SUMMARY:

It is my recommendation that the Health Department request budget adjustments, increasing both revenues and expenses totaling **\$162,748**. Revenue changes in JCHD orgkeys are needed for several state-funded programs, and one private grant. The additional revenue was authorized by the state after the original budget for FYE 9/30/2011 had to be submitted, and there will be corresponding increases in expenditures. Also included is the establishment of a community health promotion coordinator who will work with Health Improvement Organization focusing on prevention of chronic diseases. To accomplish these changes, JCHD will utilize existing employees with some changes in orgkey assignments. No additional county allocation funding is being requested at this time.

Recommended Changes in JCHD Programs:

For **Orgkey 221100 (Administration)**, JCHD will establish a community health promotion coordinator to develop a plan for the community to help mitigate the effect of chronic diseases, with personnel costs of \$45,763. This effort will be staffed by moving health educator Julie Weisbrod (0.6 FTE from Orgkey 221634 to 0.6 FTE in Orgkey 221100).

Julie Weisbrod will be replaced in Orgkey 221634 by health educator Denise Schonhard (moving 0.5 FTE in Orgkey 221635 to 0.6 FTE in Orgkey 221634, with a net savings of \$8,595. Denise Schonhard will be replaced by increasing the hours of 2 casuals in Orgkey 221635, with a net savings of \$4,165. **We are asking for Board approval of the 0.1 FTE increase for Denise Schonhard to make these changes, and achieve the savings noted here.**

For **Orgkey 221160 (Health Education)**, JCHD has received a grant that will pay JCHD the amount of \$16,157 thru May, 2011. JCDH has temporarily assigned Janelle Brown-Buchler (at 0.5 FTE) to manage that grant at a cost of \$16,396. Janelle will still have some Medicaid Outreach duties in Orgkey 221451. Also included in Orgkey 160 is \$6,000 for the Complete Streets grant from the state. Rhonda Rudolph is temporarily charging a small part of her time to that grant thru February 2011.

For **Orgkey 221180 (Emergency Preparedness- Phase III)**, the state has approved an extension of public health emergency response funds amounting to \$117,588, with additional costs of \$105,500. These were unspent funds from FYE 9/30/10 that would have to be returned to the state if not spent during the extension thru July, 2011.

For **Orgkey 221460 (WIC)**, the increased case workload in the WIC Program has resulted in the state increasing JCHD's WIC funding for the current year by \$35,595. In order to keep up with the extra workload being generated by an all-time high of WIC participants, we previously requested & were granted board approval of 1 new full-time employee in FYE 9/30/10. The only additional costs are for \$7,849 in operating supplies. This funding is expected to continue to increase even more in the future due to the distress of the local economy.

For other **Orgkeys (221175) (221200) (221300) (221310) and (221313)**, the state has cut specific funding by \$20,621 and increased funding in **Orgkeys (221200) (221320) (221634)** by \$8,029 in specific areas.

By separate e-mail attachment, I will send an Excel file with a summary of the proposed adjustments to revenues & expenditures. Upon your approval, I will also forward to Gerard the electronic or paper copies of complete detail schedules for all of the requested changes.

Please let me know if you would like any further information to submit to the Personnel & Finance Committee or to the Administrator's Office.

Rex R. Pierce
JCHD Financial Services Manager

Prepared 11/23/10- RRP		SUMMARY OF BUDGET ADJUSTMENTS (YE 9/30/11)		
		Health Department		
Expenditure Accounts	Current Budget	Increases	Decreases	Amended Budget
221100 - ADMINISTRATION	\$765,016	\$45,763		\$810,779
221160 - HEALTH EDUCATION	\$190,721	\$16,396		\$207,117
221175 - EMERGENCY PREPAREDNESS	\$141,641			\$141,641
221180 - EMERGENCY PREPAREDNESS PHASE III	\$0	\$105,500		\$105,500
221200 - ENVIRONMENTAL HEALTH	\$583,162			\$583,162
221300 - COMMUNICABLE DISEASE PREVENTION	\$210,524			\$210,524
221301 - MATERNAL INFANT HEALTH PROGRAM	\$326,434			\$326,434
221310 - IMMUNIZATIONS	\$341,688			\$341,688
221312 - EARLY ON	\$145,125			\$145,125
221313 - SEXUALLY TRANSMITTED DISEASES (STD)	\$157,596			\$157,596
221320 - INFANT MORTALITY & PREVENTION	\$65,810			\$65,810
221341 - CHILDRENS SPECIAL HEALTH CARE SERVICES	\$121,319			\$121,319
221417 - HEARING & VISION	\$98,416			\$98,416
221451 - MEDICAID OUTREACH & ADVOCACY	\$156,507			\$156,507
221460 - WOMEN, INFANTS, CHILDREN (WIC)	\$577,242	\$7,849		\$585,091
221575 - SOIL EROSION	\$52,623			\$52,623
221612 - EARLY ON STIMULUS	\$87,120			\$87,120
221616 - AIDS COUNSELING & TESTING	\$37,434			\$37,434
221630 - TOBACCO REDUCTION COALITION	\$18,820			\$18,820
221634 - IMMUNIZATION ACTION PLAN	\$83,465	\$37,168	\$45,763	\$74,870
221635 - CAR SEAT PROGRAM	\$65,090	\$26,808	\$30,973	\$60,925
221655 - TEEN PREGNANCY PREVENTION	\$50,633			\$50,633
BALANCE TO COUNTY BUDGET				
Total	\$4,276,386	\$239,484	\$76,736	\$4,439,134

Increase in Expenditures by **\$162,748**

Prepared 11/23/10- RRP		SUMMARY OF BUDGET ADJUSTMENTS (YE 9/30/11)		
		Health Department		
Revenue Accounts	Current Budget	Increases	Decreases	Amended Budget
221100 - ADMINISTRATION	\$874,062			\$874,062
221160 - HEALTH EDUCATION	\$55,122	\$22,157		\$77,279
221175 - EMERGENCY PREPAREDNESS	\$158,929		\$5,561	\$153,368
221180 - EMERGENCY PREPAREDNESS- PHASE III	\$0	\$117,588		\$117,588
221200 - ENVIRONMENTAL HEALTH	\$723,160	\$4,066	\$668	\$726,558
221300 - COMMUNICABLE DISEASE PREVENTION	\$49,735		\$819	\$48,916
221301 - MATERNAL INFANT HEALTH PROGRAM	\$410,000			\$410,000
221310 - IMMUNIZATIONS	\$329,966		\$12,604	\$317,362
221312 - EARLY ON	\$143,000			\$143,000
221313 - SEXUALLY TRANSMITTED DISEASES (STD)	\$77,963		\$969	\$76,994
221320 - INFANT MORTALITY & PREVENTION	\$61,660	\$3,780		\$65,440
221341 - CHILDRENS SPECIAL HEALTH CARE SERVICES	\$140,758			\$140,758
221417 - HEARING & VISION	\$54,735			\$54,735
221451 - MEDICAID OUTREACH & ADVOCACY	\$111,645			\$111,645
221460 - WOMEN, INFANTS, CHILDREN (WIC)	\$762,105	\$35,595		\$797,700
221575 - SOIL EROSION	\$35,385			\$35,385
221612 - EARLY ON STIMULUS	\$83,242			\$83,242
221616 - AIDS COUNSELING & TESTING	\$18,318			\$18,318
221630 - TOBACCO REDUCTION COALITION	\$20,000			\$20,000
221634 - IMMUNIZATION ACTION PLAN	\$71,701	\$183		\$71,884
221635 - CAR SEAT PROGRAM	\$44,900			\$44,900
221655 - TEEN PREGNANCY PREVENTION	\$50,000			\$50,000
BALANCE TO COUNTY BUDGET				
Total	\$4,276,386	\$183,369	\$20,621	\$4,439,134

Increase in Revenues by **\$162,748**

Memorandum

To: Personnel & Finance

From: Administrator/Controller office

Date: December 1, 2010

Re: Proposed Fund Balance reservation/budget adjustment for 2010 General Fund

In anticipation of the increase in fund balance for year ended December 31, 2010 of \$1.6 million, we would proposed the following major expenditures be budgeted as follows:

Sheriff Deputy- 5 years at \$80,000/year	\$400,000 Fund 101
Riverwalk hotel demolition	300,000 Fund 245
Parks- General Capital	100,000 Fund 245
Cascades Falls	100,000 Fund 245
Fair Infrastructure	100,000 Fund 245
OPEB Liability	500,000 Fund 739

Should actual excess revenue come under the projection, the projects above would be adjusted according to priority, OPEB being the lower priority and Sheriff Deputy being the higher.

Commissioner Board Appointments – December 2010

<u>BOARD</u>	<u>NEW TERM EXPIRES</u>	<u>CURRENT MEMBER</u>	<u>APPLICANTS</u>	<u>COMMITTEE RECOMMENDED APPOINTMENTS</u>
<u>Airport</u>				
1) One Public Member	12/2012	Steve Wellman	Steve Wellman Thomas Corcoran Arthur Greenman Jane Grover	Steve Wellman
<u>Department on Aging Advisory Council</u>				
1) One Public Member	12/2012	Diane Derby	Diane Derby	Diane Derby
2) One Public Member	12/2012	Vacant		Donald Peterson
3) One Public Member	12/2012	Nancy Seydell	Nancy Seydell	Nancy Seydell
4) One Public Member	12/2012	Jill Clouser		Sharon Best
5) One Public Member	12/2012	Barbara McClure	Barbara McClure	Barbara McClure
6) One Public Member	12/2012	Howard Griffis	Howard Griffis	Howard Griffis
7) One Public Member	12/2012	Tina Gross	Tina Gross	Tina Gross
8) One Public Member	12/2012	Michael Butchart	Michael Butchart Louis Cubille Sharon Best Ione Rutledge Michael Malone Shirley Williams Angela Haynes Jane Grover Donald Peterson Frances Champney Michele LaVoy-Foster	Michael Butchart

Commissioner Board Appointments – December 2010

<u>BOARD</u>	<u>NEW TERM EXPIRES</u>	<u>CURRENT MEMBER</u>	<u>APPLICANTS</u>	<u>COMMITTEE RECOMMENDED APPOINTMENTS</u>
<u>Fair</u>				
1) One Public Member	12/2013	Tom Finco	Tom Finco Leland Prebble Kevin Cromley Del Anteau Michele LaVoy-Foster	Tom Finco
<u>Hospital Finance Authority</u>				
1) One Public Member	12/2011	Karen Coffman	Karen Coffman	Karen Coffman
1) One Public Member	12/2011	Tony Samon	Tony Samon	Tony Samon
1) One Public Member	12/2011	Randy Treacher	Randy Treacher	Randy Treacher
1) One Public Member	12/2011	Thomas Daly	Patricia Rayl Sharon Best Jason Valente Shirley Williams Angela Haynes Kevin Cromley	Jason Valente
<u>Parks</u>				
1) One Public Member	12/2013	Russ Youngdahl	Russ Youngdahl	Russ Youngdahl
1) One Public Member	12/2013	Nancy Seydell	Nancy Seydell Kevin Daly Patricia Gutekunst Jason Valente Arthur Greenman Michele Lavoy-Foster	Jason Valente

Commissioner Board Appointments – December 2010

<u>BOARD</u>	<u>NEW TERM EXPIRES</u>	<u>CURRENT MEMBER</u>	<u>APPLICANTS</u>	<u>COMMITTEE RECOMMENDED APPOINTMENTS</u>
<u>Region 2 Planning Commission</u>				
1) One Public Member	12/2013	Russ Youngdahl	Patricia Rayl Gregory Sanford Leland Prebble Laura Schlecta Angela Haynes Jane Grover Michael Jones	Leland Prebble
<u>Road Commission</u>				
1) One Public Member	12/2016	Mike Stimpson		
Three Recommendations from Road Commission Ad Hoc Committee:			Deborah Charles Arthur Greenman Michael Jones	Michael Jones

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Wellman Steven
Last First, Middle Initial
HOME ADDRESS: 3160 Happy Valley Rd. Jackson 49203-5514
Street City Zip Code
TELEPHONE: (517) 7827261 srwellman@comcast.net
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Airport Board 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>Jackson County Airport Board</u>	<u>8 Years</u>	<u>At Large Member, Chair (7 Years)</u>
<u>JXN Flight Fund</u>	<u>6 Years</u>	<u>Board Member, Chair (3 Years)</u>
<u>JCC Flight Center Advisory Board</u>	<u>7 Years</u>	<u>Member</u>

Employment:

Current Employer:	Position:	Dates of Employment:
<u>Consumers Energy</u>	<u>Manager, Laboratory Services</u>	<u>1979 - Present</u>

Education:

Jackson Comm College, (AS-Aviation Technology, AA-General Studies), Spring Arbor University (BA-Business Administration)

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

Continuation in the establishment of policies that will advance the Jackson County Airport in meeting the needs of the Jackson community.

Additional Information you feel may be helpful in considering your request for appointment:

I believe I have helped to establish an effective team in the overall management of the airport. I would like to see the runway project to completion.

Steven R. Wellman

Signature:

10/31/2010

Date:

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Corcoran Thomas
Last First Middle Initial
HOME ADDRESS: 3487 Morrill RD Jackson 49202
Street City Zip Code
TELEPHONE: 517-750-4577 jb_customs_2009@yahoo.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Jackson County Airport 2. 3.

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>North Jackson Lions</u>	<u>1 yr</u>	<u>Asst. Secretary</u>
<u></u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></u>

Employment:

<u>JB Customs</u>	<u>Partner</u>	<u>Oct. 2008 - PRESENT</u>
Current Employer:	Position:	Dates of Employment:

Education:

High School Diploma

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

I believe the airport to be very important to our future. I will do everything in my power to make sure it is an important asset in the future of Jackson, Michigan

Additional Information you feel may be helpful in considering your request for appointment:

Thomas Corcoran 11/17/2010
Signature: Date:

THIS FORM CONTAINS REQUIRED FIELDS - IT WILL NOT SUBMIT IF ANY OF THE REQUIRED FIELDS ARE EMPTY
** DENOTES A REQUIRED FIELD

INTERNET APPLICATION FORM INSTRUCTIONS: Complete all the required fields and submit

APPLICATION FOR EMPLOYMENT
JACKSON COUNTY AND COURTS

Date of Application November 26, 2010

**JOB PREFERENCE Public member for Parks Board or Road Commission or Airport Board

NAME ** Greenman ** Arthur L.
Last First Middle Initial
ADDRESS ** 138 Southern Shores ** Brooklyn ** MI ** 49230
Street City State Zip Code
TELEPHONE ** (517) 414 - 0249 ** (517) 414 - 0249 SOCIAL SECURITY NO ** XXX / XX / XXXX
Home Daytime Number

Have you ever been employed by Jackson County or Courts before? ☐ Yes ☒ No

Are you legally eligible for employment in this country? ☒ Yes ☐ No
(Proof of U.S citizenship or immigration status will be required upon employment.)

When would you be available for work? Anytime

Are you available to work: ☐ Full-time ☐ Part-time ☐ Shift Work ☐ Temporary/Seasonal

Are you currently employed? ☐ Yes ☒ No May we contact your present employer? ☐ Yes ☐ No

If applying for a position requiring a drivers/chauffeurs' license please give license number: _____

List professional licenses you hold: _____

If applying for a clerical position, please indicate typing/data entry speed: _____

Summarize special skills and qualifications acquired from employment or other experiences that may qualify you to work with Jackson County. Responsible for the structural safety of all thirteen hydro plants in mi

Did Third Party work for gas transmission pipelines

Project Engineer for gas stransmission pipelines

Have you been convicted of a felony or misdemeanor in the last seven (7) years? ☐ Yes ☒ No
If yes, please explain: _____

Have you received a disciplinary suspension or been discharged from any position(s)? ☐ Yes ☒ No
If yes, please explain: _____

Do you have any relatives employed by Jackson County or Courts? ☐ Yes ☒ No
If yes, please give name and department: _____

Provide any other information, including volunteer experience, you feel would be helpful in determining how you may be employed.

I'm doing Meals-on-Wheels for Allegiance Hospital

Spent three weeks volunteering for the Red Cross in Lousiana in 2005

NOTE: You are welcome to submit a resume. However, you are requested to complete the Education and Employment History sections of this application whether or not a resume is attached.

EMPLOYMENT HISTORY:

Employer **	Address **
Consumers Energy	1945 W. Parnall Rd.
Job Title **	Immediate Supervisor and Title **
Senior Engineer	Bob Welsh, Manager of Gas T&S Engineering
Summarize nature of work performed and job responsibilities: **	

Dates of Employment **	Hourly Rate/Salary **
1966 to 2002	A good salary
Reason for Leaving **	
Retired	

Employer	Address
Job Title	Immediate Supervisor and Title
Summarize nature of work performed and job responsibilities:	

Dates of Employment	Hourly Rate/Salary
Reason for Leaving	

Employer	Address
Job Title	Immediate Supervisor and Title
Summarize nature of work performed and job responsibilities:	

Dates of Employment	Hourly Rate/Salary
Reason for Leaving	

Employer	Address
Job Title	Immediate Supervisor and Title
Summarize nature of work performed and job responsibilities:	

Dates of Employment	Hourly Rate/Salary
Reason for Leaving	

EDUCATIONAL BACKGROUND:

NAME/LOCATION	YEARS COMPLETED	DEGREE
High School ** Northwest H.S.	four	College prep
College/University ** Tri-State College (now Trine U.)	four	Civil Engineering

Other

As public employers, Jackson County and the Courts are subject to the Freedom of Information Act and, under that Act, Jackson County is required to provide a copy of this application to any individual submitting a written request unless, as an applicant, you request that your application remain in confidence.

I wish this application for employment to remain in confidence

☐ Yes ☒ No

I hereby certify that all statements on this Application for Employment (and accompanying resume, if any) are made completely, truthfully and without evasion, and further understand and agree that such statements may be investigated and if found to be false will be sufficient reason for not being employed, or if employed, may result in my dismissal.

I authorize Jackson County and the Courts to investigate all statements contained in the application, including disciplinary records of any former employers, police departments, and other references or sources concerning me. I authorize all such references and sources to release this information without liability for damage incurred in giving it. I waive any written notice of the release of such records that may be required by state or federal law.

I understand that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that affect is executed in writing by the employer. I understand that any employment offer may be conditioned upon the results of a pre-employment medical examination, and any other necessary medical tests to determine the presence of alcohol, drugs, or controlled substances, should they be required.

Jackson County and the Courts actively encourage applications by qualified individuals with disabilities, and does not discriminate in its consideration of such applicants. If you believe that any accommodation of a disability will be necessary for the testing and/or interview process contact the Human Resources Department at (517) 788-4340.

Signature of Applicant: Arthur L. Greenman

Date: November 26, 2010

JACKSON COUNTY AND COURTS, FOR PURPOSES OF HIRING, PROMOTION, ADVANCING, OR ASSIGNING JOBS OR ANY OTHER TERMS OR CONDITIONS OF EMPLOYMENT AGREES TO PROVIDE EQUAL EMPLOYMENT OPPORTUNITY REGARDLESS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, AGE, SEX, HEIGHT, WEIGHT, MARITAL STATUS, ARREST RECORD, OR DISABILITY AS DEFINED BY LAW OR ANY FACTOR NOT RELATIVE TO JOB PERFORMANCE; EXCEPT WHERE A SPECIFIED AGE, SEX OR PHYSICAL REQUIREMENT IS A BONA-FIDE OCCUPATIONAL REQUIREMENT.

DO NOT WRITE BELOW THIS LINE

Test Scores/Dates:

Application Number:
201011170828159100001

Start Date Fund/Sub-Dept. Job Title Classification

Rate of Pay Employee No. Approved By: PCN#

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: GROVER JANE
Last First, Middle Initial
HOME ADDRESS: 1717 Maybrook Jackson 49203
Street City Zip Code
TELEPHONE: 517 7841205 x 412 janegdds@comcast.net
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Department on Aging 2. Airport Board 3. Planning Commission

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
Jackson Community College Foundation Board	2 years	Secretary
Disability Connections	4 months	Board Member
Ella Sharp Museum Board	6 years	Past Chair

Employment:

Center For Family Health	Dental Director	since 2001
Current Employer:	Position:	Dates of Employment:

Education:

University of Detroit undergraduate studies Univ of Michigan School of Dentistry and Public Health

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

To serve my community

Additional Information you feel may be helpful in considering your request for appointment:

I also serve as a consultant to the Michigan Department of Community Health and the Michigan Attorney General's Office

Jane S. Grover DDS MPH 11/24/2010
Signature: Date:

Please Type or Print
With Black BallpointPlease Type or Print
With Black Ballpoint

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: County of Jackson Administrator/Controller's Office- 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Derby Diane L.
Last First Middle Initial

HOME ADDRESS: 5040 Clinton Road Jackson MI 49201
Street City Zip Code

TELEPHONE: (517) 788-8430-H, (517) 788-0379-W, (517) 474-0448-C
Home, Work, Cell, or Business (Include Area Code)

E-mail Address
dlderby5@yahoo.com

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Dept on Aging 2. (Advisory Council) 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>Dept on Aging</u> <u>(Advisory Council)</u>	<u>~ 6 yrs.</u> <u>(Currently on Board)</u>	<u>Advisory Board Member</u>

Employment:

<u>Consumers Energy</u>	<u>Sr. Insurance Benefits</u>	<u>9-21-81- Present</u>
Current Employer:	Position:	Dates of Employment:
	<u>Specialist</u>	

Education: (Liberal Arts)

AA- English Major and Accounting Certification - Jackson

Please indicate why you are requesting appointment to this Board(s)/Commission(s): Community College

I would like to continue my work on the Advisory
Council Board. I feel my experience is a plus for the
Dept.

Additional information you feel may be helpful in considering your request for Appointment:

I have ~ 20 years experience on my job working with Seniors.
I feel I have an understanding of their needs and issues.

Diane L. Derby
Signature

11/24/10
Date

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Seydell Nancy
Last First, Middle Initial

HOME ADDRESS: 8801 Minard Road Parma 49269
Street City Zip Code

TELEPHONE: 517-569-2535 nseydell@provide.net
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Department on Aging Advisory Council 2. Jackson County Parks & Recreation Commission (served in last week) 3.

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>Department on Aging Advisory Council</u>	<u>One term</u>	<u>Member</u>
<u>Jackson County Parks & Recreation Commission</u>	<u>Off and on since 1993</u>	<u>Chairman</u>
<u>Tompkins Historical Society</u>	<u>Since 1985</u>	<u>President 19 years-currently curator of Tompkins Museum</u>

Employment:

<u>Self employed</u>	<u>Owner</u>	<u>1984 to present</u>
Current Employer:	Position:	Dates of Employment:

Education:

High School-One year Albion College-some JCC courses

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

I am a senior citizen and want to keep current on what is available to the citizens of Jackson County.

Additional Information you feel may be helpful in considering your request for appointment:

I have a lot of past experience caring for the elderly and feel that my knowledge will help me to be of assistance on the Advisory Council.

Nancy L. Seydell
Signature:

10/29/2010
Date:

FAX - 517-780-4755

Please Type or Print
With Black BallpointPlease Type or Print
With Black Ballpoint

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: County of Jackson Administrator/Controller's Office- 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: McClure BARBARA G
Last First Middle Initial

HOME ADDRESS: 508 N. DLEOTT Lake Rd, JACKSON, MI 49201
Street City Zip Code

TELEPHONE: 517-536-8561 bgmccLure@comcast.net
(Home, Work, Cell, or Business (Include Area Code) E-mail Address
fax 536-8422

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Department on Aging 2. _____ 3. _____
Advisory Council

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:

Length of Service

Position(s) Held:

Employment:

Retired (30 years) at AT&T Lucent 1966 - 1996
Current Employer: Position: Dates of Employment:
Supervisor Billing & Collections Dept

Education:

Please Indicate why you are requesting appointment to this Board(s)/Commission(s):

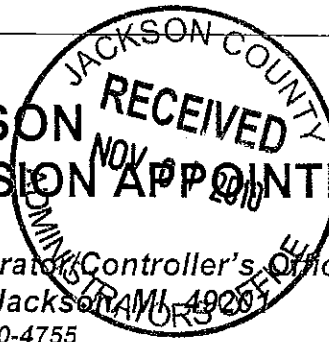
I presently serve on the Council, in a senior and
involved in other areas of volunteer work and would
Additional Information you feel may be helpful in considering your request for Appointment: like to continue
volunteering in this
area.

Barbara McClure
Signature

11-15-10
Date

COUNTY OF JACKSON REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: County of Jackson Administrator/Controller's Office- 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755



The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: GRIFFIS HOWARD E
Last First Middle Initial
HOME ADDRESS: 1008 DANDELL CR HORTON, MI 49246
Street City Zip Code
TELEPHONE: (517) 688-4922
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

✓ 1. DEPT ON AGING 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>HANOVER TWP</u>	<u>10 yrs</u>	<u>SUPERVISOR</u>
<u>CONCORD UMC</u>	<u>12 yrs</u>	<u>HEAD OF FINANCE</u>
<u>JACKSON DEPT ON AGING</u>	<u>6 yrs</u>	<u>ADVISORY COMMR</u>
<u>REGION II AAA</u>	<u>6 yrs</u>	<u>BOARD OF DIRECTORS</u>
<u>RETIRED</u>	<u>—</u>	<u>—</u>
Current Employer:	Position:	Dates of Employment:

Education:

HANOVER HORTON HS JCC N. LLSDALE

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

RE-APPOINTMENT

Additional Information you feel may be helpful in considering your request for Appointment:

[Signature]
Signature

10/29/10
Date

Please Type or Print
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With Black Ballpoint

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

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120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Gross, Tina M
Last First Middle Initial

HOME ADDRESS: 3770 St Anne Ave Jackson 49201
Street City Zip Code

TELEPHONE: 517 937-4533 grossn@ameritech.net
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Department on Aging 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>Dept on Aging</u>	<u>2 yr</u>	

Employment:

<u>Sparrow Specialty Hospital</u>	<u>Director of Clinical Services</u>	<u>2005 → current</u>
Current Employer:	Position:	Dates of Employment:

Education:

RN, BAS, MSN

Please indicate why you are requesting appointment to this Board(s)/Commission(s):
To provide advocacy for seniors and our community. Changing public expectations, regulations, resources and service demands + continue to challenge our councils + boards.

Additional information you feel may be helpful in considering your request for Appointment:

TJ Gross RN, BAS, MSN, SANE
Signature

11/26/2010
Date

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

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120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: BUTCHMAN Michael L
Last First Middle Initial
HOME ADDRESS: 4003 PAYCOCK CT. Jackson MI 49203
Street City Zip Code
TELEPHONE: 517-789-6069
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. DEPT ON AGING ADVISORY COUNCIL 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>UNITED WAY ADOPTED PAUL</u>	<u>10+ years</u>	<u>MEMBER</u>
<u>ST JOHN'S PARISH KITCHEN OR COUNCIL</u>	<u>3 years</u>	<u>ENCOURAGER</u>

Employment:

RETIRED - CONSUMERS COUNCIL
Current Employer: Position: Dates of Employment:

Education:

B A DEGREE - MICHIGAN STATE UNIVERSITY

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

I AM CURRENTLY ON THIS COUNCIL & WOULD LIKE TO CONTINUE TO DEAL WITH THE CURRENT ECONOMIC TIMES

Additional Information you feel may be helpful in considering your request for Appointment:

I AM RECENTLY RETIRED AND WISH TO REMAIN ACTIVE IN COMMUNITY ACTIVITIES

Mike Butchman

Signature

11-26-10

Date

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

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120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Cubille Louis M
Last First Middle Initial
HOME ADDRESS: 100 Armory Ct. Jackson, MI 49202
Street City Zip Code
TELEPHONE: 517-740-3450 lcubille@yahoo.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Advisory Council on Aging 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>Cascades Civitan</u>	<u>10 yrs</u>	<u>President, Newsletter Editor</u>
<u>JPS</u>	<u>12 yrs</u>	<u>art instructor</u>
_____	_____	_____

Employment:

<u>self</u>	<u>Artist</u>	_____
Current Employer:	Position:	Dates of Employment:

Education:

3 yrs college

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

Additional Information you feel may be helpful in considering your request for appointment:

work w/ Girl Scouts, senior centers + churches as art instructor

Louis Cubille
Signature:

October 15, 2010
Date:

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Best Sharon
Last First, Middle Initial
HOME ADDRESS: 5063 Big Rock Jackson 49201
Street City Zip Code
TELEPHONE: 789-9022 sharon.best@att.net
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Dept. of Aging Advisory Council 2. Hospital Finance Authority 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>Jackson County Retirement Board</u>	<u>17 years</u>	<u>Trustee</u>
<u>Friends of Dahlem</u>	<u>16 years</u>	<u>Treasurer</u>
<u>Woman's Club of Jackson</u>	<u>2 years</u>	<u>Treasurer, Asst. Treasurer</u>

Employment:

<u>Retired - Consumers Energy</u>	<u>Financial Analyst</u>	<u>1977 - 2003</u>
Current Employer:	Position:	Dates of Employment:

Education:

Spring Arbor University-Business Degree, Jackson Community College-Associates Degree

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

To stay active within my community and offer assistance with current issues that need to be addressed for the benefit of our tax payers.

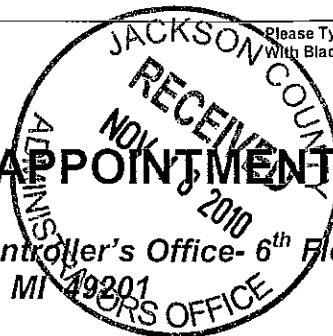
Additional Information you feel may be helpful in considering your request for appointment:

Continue to attend functions that pertain to retirement issues and current economy situations.

Sharon K. Best 11/16/2010
Signature: Date:

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT



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120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Rutledge Jane J
Last First Middle Initial
HOME ADDRESS: mail to Box 716
2206 Gillets LK Rd Mich Center 49254
Street City Zip Code
TELEPHONE: 517-764-0409
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Ageing 2. 3.

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:

Employment:

Retired Controller 1956-1990
Current Employer: Position: Dates of Employment:

Education:

I need some thing to do with my time, my
Please indicate why you are requesting appointment to this Board(s)/Commission(s):
business experience is being wasted.

Additional Information you feel may be helpful in considering your request for Appointment:

Jane J Rutledge 11/18/10
Signature Date

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

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120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: MALONE MICHAEL _____
Last First Middle Initial
HOME ADDRESS: 10728 Marquedat Drive Grass Lake, MI 49240
Street City Zip Code
TELEPHONE: 517-522-3972 mjmaloneus@yahoo.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Dept on Aging Advisory Council 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>Republican Party Precinct Delegate</u>	<u>6 mo</u>	<u>2010 Precinct Deletate</u>
<u>Chelsea United Way</u>	<u>2 years</u>	<u>Board Member</u>
<u>Pious Union of St. Joseph, Grass Lake</u>	<u>2 year</u>	<u>Pastoral Council Member</u>

Employment:

<u>Self Employed</u>	<u>Private Legal Practice</u>	<u>2005 to present</u>
Current Employer:	Position:	Dates of Employment:

Education:

B.S. 1968, Michigan State and J.D. 1974, Loyola Univ. Law School

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

I retired from Federal Service with the U.S. Government in 2005. I have an interest in public service and government policy.

Additional Information you feel may be helpful in considering your request for appointment:

I am a Vietnam veteran. I was raised on a farm in western Michigan. I have lived in Jackson County since 1998.

/s/ Michael J. Malone 11/19/2010
Signature: Date:

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: County of Jackson Administrator/Controller's Office- 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Williams Shirley A
Last First Middle Initial
HOME ADDRESS: 319 E Franklin St Jackson 49201
Street City Zip Code
TELEPHONE: (517) 962 5949 cell (517) 414 9485
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

Department on aging Hospital Finance Advisory

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>Center For Family Health</u>	<u>5 month</u>	<u>Publicity Committee</u>
_____	_____	_____
_____	_____	_____

Employment:

<u>Social Security</u>	_____	_____
Current Employer: <u>Disabled</u>	Position: _____	Dates of Employment: _____

Education:

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

because I have the time to service I'm only been a Social Security since Nov 2009

Additional Information you feel may be helpful in considering your request for Appointment:

I'm a very outgoing person and I enjoy help other people
new people person (smile) in past I been on a lot of board and commission
Shirley A Williams
Signature Date
11-22-2010

I have been in past on Human Relation Commission

I was Vote by Citizen Jackson on Charter Commission

in 1994 until 1995 it was 2 or three year term but we
got our issue vote in 1995

I like serve on on Human Relation Commission I was on that
Commission 12 year I step down after I was Charter Position

Also was on Human Right national Board

I ran for office and lost but I didn't give up I'm a very
active person.

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

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120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Haynes Angela
Last First Middle Initial
HOME ADDRESS: 1037 Maple Avenue 49203
Street City Zip Code
TELEPHONE: 517-962-5774 Angela-Caddell@yahoo.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Department on Aging 2. Hospital Finance Authority 3. Region 2 Planning Comm.

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>Great Start Collaborative</u>	<u>2 years</u>	<u>Health Care Executive Comm.</u>
<u>Center for Family Health</u>	<u>1 year</u>	<u>3 different Comm- Finance PR Comp. Quality Ass.</u>
<u>Love Inc.</u>	<u>2 years</u>	<u>Board Secretary</u>

Employment:

<u>Herlyn Care</u>	<u>Office Manager</u>	<u>1-07 - current</u>
Current Employer:	Position:	Dates of Employment:

Education:

BA Business Adm - currently attending for MA in Public Adm.

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

I am seeking to learn more about my community. I have experience and some knowledge for the positions. This will help me learn regarding my education.

Additional Information you feel may be helpful in considering your request for Appointment:

less than 10. I am a good listener and enjoy working with others.

Angela Haynes
Signature

11-22-10

Date

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: GROVER JANE
Last First, Middle Initial
HOME ADDRESS: 1717 Maybrook Jackson 49203
Street City Zip Code
TELEPHONE: 517 7841205 x 412 janegdds@comcast.net
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Department on Aging 2. Airport Board 3. Planning Commission

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
Jackson Community College Foundation Board	2 years	Secretary
Disability Connections	4 months	Board Member
Ella Sharp Museum Board	6 years	Past Chair

Employment:

Center For Family Health	Dental Director	since 2001
Current Employer:	Position:	Dates of Employment:

Education:

University of Detroit undergraduate studies Univ of Michigan School of Dentistry and Public Health

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

To serve my community

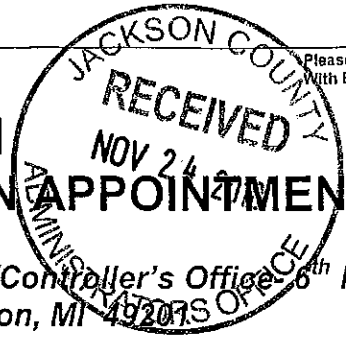
Additional Information you feel may be helpful in considering your request for appointment:

I also serve as a consultant to the Michigan Department of Community Health and the Michigan Attorney General's Office

Jane S. Grover DDS MPH 11/24/2010
Signature: Date:

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT



Mail or personally deliver to: County of Jackson Administrator/Controller's Office, 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: PETERSON DONALD B
Last First Middle Initial
HOME ADDRESS: 3513 MCCAIN JACKSON MI 49203
Street City Zip Code
TELEPHONE: 787-3329 (CELL 740-4206) LOLA.PETE@Com.NET
517 Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. DEPT. OF AGING 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>ALL SPORTS ASSO.</u>	<u>5 1/2 YRS</u>	<u>COACH TO PRES.</u>
<u>AFS</u>	<u>35 YRS</u>	<u>CENTRAL MICH CHAIRMAN</u>
<u>SAE</u>	<u>12 YRS</u>	<u>MEMBER</u>

Employment:

<u>RETIRED HAYES ALBION</u>	<u>V.P. MFG.</u>	<u>5-1-73 TO 12-31-94</u>
Current Employer:	Position:	Dates of Employment:

Education:

BSME MECHANICAL ENGINEERING

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

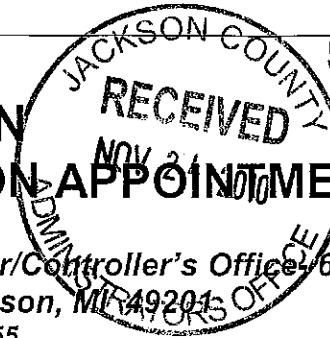
BEING A SENIOR MYSELF, I WOULD LIKE TO CONTRIBUTE
TO THE SENIOR CENTER TO HELP OTHER SENIORS

Additional Information you feel may be helpful in considering your request for Appointment:

Donald B. Peterson Sr.
Signature

11-23-10
Date

COUNTY OF JACKSON REQUEST FOR BOARD OR COMMISSION APPOINTMENT



Mail or personally deliver to: County of Jackson Administrator/Controller's Office 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Champney Frances L.
Last First Middle Initial
HOME ADDRESS: 308 James St. Parma MI 49269 PO Box 334
Street City Zip Code
TELEPHONE: (517) 531-4251
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Dept of Aging 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>DHS. Volunteer</u>	<u>1 yr</u>	<u>Children's Room</u>
<u>In home activities to assist Parma Food Bank -</u>		
<u>also Aware Shelter also Interfaith Shelter.</u>		

Employment:

<u>Retired Teacher Western School Dist</u>	<u>1967-1985</u>
Current Employer:	Dates of Employment:

Education:

BA from SAU. + Credits from MSU.

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

Since Am "old" I thought I could contribute to the thought processes.

Additional Information you feel may be helpful in considering your request for Appointment:

I am a patient advocate for several families in my area.

Frances Champney 11-22-10
Signature Date

Please Type or Print
With Black BallpointPlease Type or Print
With Black Ballpoint

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: County of Jackson Administrator/Controller's Office- 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: La Voy- Foster Michele M
Last First Middle Initial

HOME ADDRESS: 116 W Biddle Apt 1 Jackson 49203
Street City Zip Code

TELEPHONE: (517) 782-8808 25.partyreading@hotmail.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. JC Department on Aging Advisory Council 2. Fair Board 3. Tax City Parks & Recreation
Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>1st Congregational UCC</u>	<u>2008 - present</u>	<u>Christian Bd Education</u>
<u>St. Johns UCC</u>	<u>2009 - present</u>	<u>Food Pantry Fundraising committee</u>
<u>Partnership Park/DJ- Neighborhood Association</u>	<u>2008 - present</u>	<u>Events Committee</u>
<u>Employment: Salvation Army</u>	<u>Seasonal</u>	<u>11/10 - 12/24</u>
Current Employer:	Position:	Dates of Employment:

Education:

Central Michigan University - Masters of Arts

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

I enjoy assisting in the process of positive change in the Jackson City Community. Making sure all views are examined to go on Board's/Commissions to the betterment of those served.

I have the ability to work w/a Diverse population good people & customer service skill, sense of humor & good listening skills.

Signature: Michele M. La Voy-Foster Date: 11-24-10

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

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120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Finco Thomas G
Last First, Middle Initial

HOME ADDRESS: 4774 Carbury Drive Jackson 49201
Street City Zip Code

TELEPHONE: 517 748 9029 tfinco@co.jackson.mi.us
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Fair Board 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>Fair Board</u>	<u>5 years</u>	<u>Fair Board Member</u>
_____	_____	_____
_____	_____	_____

Employment:

<u>Jackson County Office of Sheriff</u>	<u>Undersheriff</u>	<u>July 1, 2006</u>
<small>Current Employer:</small>	<small>Position:</small>	<small>Dates of Employment:</small>

Education:

Graduate Western Michigan University, Kalamazoo Michigan

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

The past five plus years have been extremely rewarding and I feel that I can continue to contribute to this excellent organization.

Additional Information you feel may be helpful in considering your request for appointment:

Thomas G. L.
Signature:

November 3, 2010
Date:

Submit

Reset

Ref # FT 53324
ON Line

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

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120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Prebble Leland D.
Last First Middle Initial
HOME ADDRESS: 3506 Audray St. Spring Arbor 49283
Street City Zip Code
TELEPHONE: 517-206-4491 lprebble@netzero.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested: REGION 2 PLANNING COMM
1. Fair Board 2. Road Commission 3. ~~Planning Commission~~

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>Lead several trips overseas</u>		<u>Leader</u>
<u>Ran for State Rep.</u>		
<u>Youth Leader</u>	<u>7 yrs</u>	

Employment:

<u>Self Contractor</u>	<u>Owner</u>	<u>35 yrs</u>
Current Employer:	Position:	Dates of Employment:

Education:

Bachelors Education

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

Additional Information you feel may be helpful in considering your request for Appointment:

Leland Prebble _____
Signature Date

THIS FORM CONTAINS REQUIRED FIELDS - IT WILL NOT SUBMIT IF ANY OF THE REQUIRED FIELDS ARE EMPTY
** DENOTES A REQUIRED FIELD

INTERNET APPLICATION FORM INSTRUCTIONS: Complete all the required fields and submit

APPLICATION FOR EMPLOYMENT
JACKSON COUNTY AND COURTS

Date of Application November 24, 2010

** JOB PREFERENCE Fair Board/ Road Commission/ Hospital Finance Auth. (Public Member)

NAME ** Cromley ** Kevin C
Last First Middle Initial
ADDRESS ** 3700 Sargent Rd ** Jackson ** MI ** 49201
Street City State Zip Code
TELEPHONE ** (517) 812 - 9553 ** (517) 812 - 9553 SOCIAL SECURITY _____
Home Daytime Number

Have you ever been employed by Jackson County or Courts before? ☐ Yes ☐ No

Are you legally eligible for employment in this country? ☒ Yes ☐ No
(Proof of U.S citizenship or immigration status will be required upon employment.)

When would you be available for work? As soon as needed

Are you available to work: ☒ Full-time ☒ Part-time ☒ Shift Work ☒ Temporary/Seasonal

Are you currently employed? ☒ Yes ☐ No May we contact your present employer? ☒ Yes ☐ No

If applying for a position requiring a drivers/chauffeurs' license please give license number: _____

List professional licenses you hold: ~~

If applying for a clerical position, please indicate typing/data entry speed: _____

Summarize special skills and qualifications acquired from employment or other experiences that may qualify you to work with Jackson County. _____

Have you been convicted of a felony or misdemeanor in the last seven (7) years? ☐ Yes ☒ No
If yes, please explain: _____

Have you received a disciplinary suspension or been discharged from any position(s)? ☐ Yes ☒ No
If yes, please explain: _____

Do you have any relatives employed by Jackson County or Courts? ☐ Yes ☒ No
If yes, please give name and department: _____

Provide any other information, including volunteer experience, you feel would be helpful in determining how you may be employed.

Volunteer for Relay for Life. I attend all Leoni township and County commissioner
meetings. I was a candidate for District 3 Commissioner.

NOTE: You are welcome to submit a resume. However, you are requested to complete the Education and Employment History sections of this application whether or not a resume is attached.

EMPLOYMENT HISTORY:

Employer **	Address **
NC Development Group	159 W. Pearl St.
Job Title **	Immediate Supervisor and Title **
Sales	John Collis Owner
Summarize nature of work performed and job responsibilities: **	
Sales / Rental of Properties	

Dates of Employment **	Hourly Rate/Salary **
11/08/2010	Commission
Reason for Leaving **	
Currently there	

Employer	Address
Tanning Trends Magazine	3101 Page Ave
Job Title	Immediate Supervisor and Title
Corporate Relations Director	Matt Russell / Owner
Summarize nature of work performed and job responsibilities:	

Dates of Employment	Hourly Rate/Salary
2000 - 2008	Salary
Reason for Leaving	
Career change	

Employer	Address
Job Title	Immediate Supervisor and Title
Summarize nature of work performed and job responsibilities:	

Dates of Employment	Hourly Rate/Salary
Reason for Leaving	

Employer	Address
Job Title	Immediate Supervisor and Title
Summarize nature of work performed and job responsibilities:	

Dates of Employment	Hourly Rate/Salary
Reason for Leaving	

EDUCATIONAL BACKGROUND:

NAME/LOCATION	YEARS COMPLETED	DEGREE
High School ** East Jackson High School	K-12	General
College/University** Spring Arbor University	4	Senior Year

Other

As public employers, Jackson County and the Courts are subject to the Freedom of Information Act and, under that Act, Jackson County is required to provide a copy of this application to any individual submitting a written request unless, as an applicant, you request that your application remain in confidence.

I wish this application for employment to remain in confidence

☒ Yes ☐ No

I hereby certify that all statements on this Application for Employment (and accompanying resume, if any) are made completely, truthfully and without evasion, and further understand and agree that such statements may be investigated and if found to be false will be sufficient reason for not being employed, or if employed, may result in my dismissal.

I authorize Jackson County and the Courts to investigate all statements contained in the application, including disciplinary records of any former employers, police departments, and other references or sources concerning me. I authorize all such references and sources to release this information without liability for damage incurred in giving it. I waive any written notice of the release of such records that may be required by state or federal law.

I understand that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that affect is executed in writing by the employer. I understand that any employment offer may be conditioned upon the results of a pre-employment medical examination, and any other necessary medical tests to determine the presence of alcohol, drugs, or controlled substances, should they be required.

Jackson County and the Courts actively encourage applications by qualified individuals with disabilities, and does not discriminate in its consideration of such applicants. If you believe that any accommodation of a disability will be necessary for the testing and/or interview process contact the Human Resources Department at (517) 788-4340.

Signature of Applicant: Kevin Cromley Date: November 24, 2010

JACKSON COUNTY AND COURTS, FOR PURPOSES OF HIRING, PROMOTION, ADVANCING, OR ASSIGNING JOBS OR ANY OTHER TERMS OR CONDITIONS OF EMPLOYMENT AGREES TO PROVIDE EQUAL EMPLOYMENT OPPORTUNITY REGARDLESS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, AGE, SEX, HEIGHT, WEIGHT, MARITAL STATUS, ARREST RECORD, OR DISABILITY AS DEFINED BY LAW OR ANY FACTOR NOT RELATIVE TO JOB PERFORMANCE; EXCEPT WHERE A SPECIFIED AGE, SEX OR PHYSICAL REQUIREMENT IS A BONA-FIDE OCCUPATIONAL REQUIREMENT.

DO NOT WRITE BELOW THIS LINE

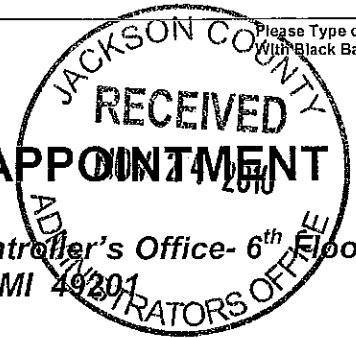
Test Scores/Dates:

Application Number:
2010112416023182400001

Start Date	Fund/Sub-Dept.	Job Title	Classification
Rate of Pay	Employee No.	Approved By:	PCN#

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT



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120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Anteau DEL A
Last First Middle Initial
HOME ADDRESS: 5301 JEFFERSON CLARK LAKE 49234
Street City Zip Code
TELEPHONE: 517-529-3119 517-206-7705 delanteau@sbglobal.net
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. COUNTY FAIR 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>BROOKLYN MASONIC</u>	<u>28 YRS</u>	
<u>COL. TWP. DELEGATE</u>	<u>AUG-2010</u>	<u>PREC. DELEGATE</u>
<u>JACKSON COUNTY GOP</u>	<u>NEWLY ELECTED</u>	<u>EXEC. BOARD.</u>

Employment:

Current Employer:	Position:	Dates of Employment:
<u>RETIRED</u>		

Education:

HIGH SCHOOL

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

I AM INTERESTED IN THE DIFFERENT RUNNING OF
THE FAIR AND THINK IT WOULD BE GREAT TO WORK
WITH THE PRESENT FAIR COMMITTEE.

Additional Information you feel may be helpful in considering your request for Appointment:

Del Anteau 11-22-10
Signature Date

Please Type or Print
With Black BallpointPlease Type or Print
With Black Ballpoint

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

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120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: La Voy - Foster Michele M
Last First Middle Initial

HOME ADDRESS: 116 W Biddle Apt 1 Jackson 49203
Street City Zip Code

TELEPHONE: (517) 782-8808 25.party.reading@hotmail.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. JC Department on Aging Advisory Council 2. Fair Board 3. Jackson City Parks & Recreation
Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
1st <u>Congregational UCC</u>	<u>2008 - present</u>	<u>Christian Bd Education</u>
<u>St. John's UCC</u>	<u>2009 - present</u>	<u>Food Pantry Fundraising committee</u>
<u>Partnership Park DT - Neighborhood Association</u>	<u>2008 - present</u>	<u>Events Committee</u>
<u>Employment: Association</u>		
<u>Salvation Army</u>	<u>Seasonal</u>	
Current Employer:	<u>Bell Ridge</u>	<u>11/10 - 12/24</u>
	Position:	Dates of Employment:

Education:

Central Michigan University - Masters of Arts

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

I enjoy assisting in the process of positive change in the Jackson City Community. Making sure all views are examined to help Board/Commission to the betterment of those served.

I have the ability to work w/ a Diverse population good people & customer service skill, sense of humor & good listening skills

Signature

Date

Michele M. La Voy - Foster 11-24-10

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

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120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: COFFMAN KAREN _____
Last First, Middle Initial

HOME ADDRESS: 2157 GANTON JACKSON 49203
Street City Zip Code

TELEPHONE: 517-787-0842; 517-768-6728; 517-812-4697 kcoffman@co.jackson.mi.us
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Hospital Finance Authority Board 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>Jackson County Building Authority</u>	<u>2 years</u>	<u>Treasurer</u>
<u>Jackson County Land Bank Authority</u>	<u>2 years</u>	<u>Chair</u>
<u>Non Profit Network Board</u>	<u>under 1 year</u>	<u>Board member</u>

Employment:

<u>Jackson County Treasurers office</u>	<u>Jackson County Treasurer</u>	<u>01-01-2009 - Present</u>
Current Employer:	Position:	Dates of Employment:

Education:

Masters of Public Administration, Western Michigan University

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

In my position as County Treasurer, I am knowledgeable about investments, bonding and public finance.

Additional Information you feel may be helpful in considering your request for appointment:

Karen Coffman 11/12/2010
Signature: Date:

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson Administrator/Controller's Office*
120 West Michigan Avenue, Jackson, MI 49201

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Samon Anthony J
Last First Middle Initial

ADDRESS: 4311 Donnelly Road Jackson 49201
Street City Zip Code

TELEPHONE: (517)937-7103 (517)784-4800
Home (Include Area Code) Work or Business (Include Area Code)

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Hospital Finance Authority 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Member	Position(s) Held:
<u>Building Authority</u>	<u>10 years</u>	<u>Chairman, Treasurer, Secretary</u>
<u>Hospital Finance Authority</u>	<u>3 year</u>	<u>Secretary</u>
_____	_____	_____

Employment:

<u>Community Action Agency</u>	<u>Chief Financial Officer</u>	<u>January 2002 - Present</u>
Current Employer:	Position:	Dates of Employment:

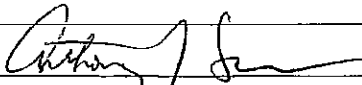
Education:

Eastern Michigan University - BBA, Major in Accounting, Certified Public Accountant, Member AICPA, MACPA

Please indicate why you are requesting appointment to this Board/Commission:

I hope to continue to work on the important projects ahead of the Hospital Finance Authority using my experience working in the municipal finance and business. I am aware of the severe financial constraints facing all municipalities and feel the County will have a significant benefit from using my expertise.

Additional Information you feel may be helpful in considering your request for Appointment:


Signature:

11/23/10
Date:

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

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120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Rayl Patricia L
Last First, Middle Initial

HOME ADDRESS: 3442 Roosevelt Rd Jackson 49203
Street City Zip Code

TELEPHONE: (517) 960-4470 prayl@comcast.net
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Region II Planning Commission 2. Hospital Finance Authority 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>Summit Zoning Board of Appeals</u>	<u>2008-2010</u>	<u>board member</u>
<u>Michigan Theatre of Jackson</u>	<u>2003-present</u>	<u>Vol. Coord.; bd member; treasurer</u>
<u>H.A. Myer chapter of BPW</u>	<u>2007-present</u>	<u>secretary</u>

Employment:

student

Current Employer:	Position:	Dates of Employment:

Education:

BA: EMU; Masters in Public Administration with concentration in Nonprofit Management: Eastern Michigan University (2011)

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

As an MPA student, I am particularly interested in those orgs that are nonprofits, but many mistake as part of government.

Additional Information you feel may be helpful in considering your request for appointment:

I can contribute to the depth of oversight and effectiveness of the board.

Patricia Rayl
Signature:

November 10, 2010
Date:

Submit

Reset

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Best Sharon
Last First, Middle Initial
HOME ADDRESS: 5063 Big Rock Jackson 49201
Street City Zip Code
TELEPHONE: 789-9022 sharon.best@att.net
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Dept. of Aging Advisory Council 2. Hospital Finance Authority 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>Jackson County Retirement Board</u>	<u>17 years</u>	<u>Trustee</u>
<u>Friends of Dahlem</u>	<u>16 years</u>	<u>Treasurer</u>
<u>Woman's Club of Jackson</u>	<u>2 years</u>	<u>Treasurer, Asst. Treasurer</u>

Employment:

<u>Retired - Consumers Energy</u>	<u>Financial Analyst</u>	<u>1977 - 2003</u>
Current Employer:	Position:	Dates of Employment:

Education:

Spring Arbor University-Business Degree, Jackson Community College-Associates Degree

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

To stay active within my community and offer assistance with current issues that need to be addressed for the benefit of our tax payers.

Additional Information you feel may be helpful in considering your request for appointment:

Continue to attend functions that pertain to retirement issues and current economy situations.

Sharon K. Best
Signature:

11/16/2010
Date:

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Valente Jason
Last First, Middle Initial
HOME ADDRESS: 1115 Park Road Jackson 49203
Street City Zip Code
TELEPHONE: 517-240-7035 (Cell) 517-796-8418 (Office) jason@valenteholdings.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Hospital Finance Authority 2. 3.

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
disAbility Connections Foundation	2007-Present	President/Board Chair and previously VP
United Way of Jackson County Board Of Dir.	2009-Present	Board Member
University of Michigan Health System	2006-Present	Board Member, Family Centered Care NICU

Employment:

Jackson Community College	Executive Director for Advancement/Legislative Affairs	April 2008- Present
Current Employer:	Position:	Dates of Employment:

Education:

BA Finance, Management & Sociology (Concordia University- Ann Arbor). MS in Organizational Development (Concordia University-Ann Arbor)

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

I have experience in non-profit and for-profit finance, site and structural development, commercial renovation/new construction, leasing arrangements, as well as hospital operations.

Additional Information you feel may be helpful in considering your request for appointment:

I have a desire to assist our county in providing sustainable world class health care as well as help steward existing and future care facilities.

Jason H. Valente 11/16/2010
Signature: Date:

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: County of Jackson Administrator/Controller's Office- 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Williams Shirley A
Last First Middle Initial
HOME ADDRESS: 319 E Franklin St Jackson 49201
Street City Zip Code
TELEPHONE: (517) 962 5949 cell (517) 414 9485
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Department on aging Hospital Finance Advisory

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>Center For Family Health</u>	<u>5 month</u>	<u>Publicity Committee</u>

Employment:

Current Employer:	Position:	Dates of Employment:
<u>Social Security Disabled</u>		

Education:

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

because I have the time to service. I'm only been a Social Security since Nov 2009

Additional Information you feel may be helpful in considering your request for Appointment:

I'm a very outgoing person and I enjoy help other people
myself people person (wife) in past I been on a lot of board and commission
Shirley A Williams 11-22-2010
Signature Date

I have been in past on Human Relation Commission

I was Vote by Citizen Jackson on Charter Commission

back 1994 until 1995 it was 2 or three year term but we
got our issue vote in 1995

I take scene on on Human Relation Commission I was on that
Commission 12 year I step down after I was Charter Position

Also was on Human Right national board

Iran for office and lost but I don't give up I'm a very
active person.

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: County of Jackson Administrator/Controller's Office- 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Haynes Angela
Last First Middle Initial
HOME ADDRESS: 1037 Maple Avenue 49203
Street City Zip Code
TELEPHONE: 517-962-5774 Angela-Caddell@yahoo.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Department on Aging 2. Hospital Finance Authority 3. Region 2 Planning Comm.

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>Great Start Collaborative</u>	<u>2 years</u>	<u>Health Care Executive Comm.</u>
<u>Center for Family Health</u>	<u>1 year</u>	<u>3 different Comm. - Finance, PR, Comm. Quarterly Ass.</u>
<u>Love Inc.</u>	<u>2 years</u>	<u>Board Secretary</u>

Employment:

<u>Hertlyn Care</u>	<u>Office Manager</u>	<u>1-07 - current</u>
Current Employer:	Position:	Dates of Employment:

Education:

BA Business Adm - currently attending for MA in Public Adm.

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

I am seeking to learn more about my community. I have experience and some knowledge for the positions. This will help me learn regarding my education.

Additional Information you feel may be helpful in considering your request for Appointment:

less than 60. I am a good listener and enjoy working with others.

Angela Haynes
Signature

11-22-10

Date

THIS FORM CONTAINS REQUIRED FIELDS - IT WILL NOT SUBMIT IF ANY OF THE REQUIRED FIELDS ARE EMPTY
** DENOTES A REQUIRED FIELD

INTERNET APPLICATION FORM INSTRUCTIONS: Complete all the required fields and submit

APPLICATION FOR EMPLOYMENT
JACKSON COUNTY AND COURTS

Date of Application November 24, 2010

**JOB PREFERENCE Fair Board/ Road Commission/ Hospital Finance Auth. (Public Member)

NAME ** Cromley ** Kevin C
Last First Middle Initial
ADDRESS ** 3700 Sargent Rd ** Jackson ** MI ** 49201
Street City State Zip Code
TELEPHONE ** (517) 812 - 9553 ** (517) 812 - 9553 SOCIAL SECURITY _____
Home Daytime Number

Have you ever been employed by Jackson County or Courts before? ☐ Yes ☒ No

Are you legally eligible for employment in this country? ☒ Yes ☐ No
(Proof of U.S citizenship or immigration status will be required upon employment.)

When would you be available for work? As soon as needed

Are you available to work: ☒ Full-time ☒ Part-time ☒ Shift Work ☒ Temporary/Seasonal

Are you currently employed? ☒ Yes ☐ No May we contact your present employer? ☒ Yes ☐ No

If applying for a position requiring a drivers/chauffeurs' license please give license number: _____

List professional licenses you hold: ~~

If applying for a clerical position, please indicate typing/data entry speed: _____

Summarize special skills and qualifications acquired from employment or other experiences that may qualify you to work with Jackson County. _____

Have you been convicted of a felony or misdemeanor in the last seven (7) years? ☐ Yes ☒ No
If yes, please explain: _____

Have you received a disciplinary suspension or been discharged from any position(s)? ☐ Yes ☒ No
If yes, please explain: _____

Do you have any relatives employed by Jackson County or Courts? ☐ Yes ☒ No
If yes, please give name and department: _____

Provide any other information, including volunteer experience, you feel would be helpful in determining how you may be employed.

Volunteer for Relay for Life. I attend all Leoni township and County commissioner
meetings. I was a candidate for District 3 Commissioner.

NOTE: You are welcome to submit a resume. However, you are requested to complete the Education and Employment History sections of this application whether or not a resume is attached.

EMPLOYMENT HISTORY:

Employer **	Address**
NC Development Group	159 W. Pearl St.
Job Title **	Immediate Supervisor and Title **
Sales	John Collis Owner
Summarize nature of work performed and job responsibilities:**	
Sales / Rental of Properties	

Dates of Employment **	Hourly Rate/Salary**
11/08/2010	Commission
Reason for Leaving**	
Currently there	

Employer	Address
Tanning Trends Magazine	3101 Page Ave
Job Title	Immediate Supervisor and Title
Corporate Relations Director	Matt Russell / Owner
Summarize nature of work performed and job responsibilities:	

Dates of Employment	Hourly Rate/Salary
2000 - 2008	Salary
Reason for Leaving	
Career change	

Employer	Address
Job Title	Immediate Supervisor and Title
Summarize nature of work performed and job responsibilities:	

Dates of Employment	Hourly Rate/Salary
Reason for Leaving	

Employer	Address
Job Title	Immediate Supervisor and Title
Summarize nature of work performed and job responsibilities:	

Dates of Employment	Hourly Rate/Salary
Reason for Leaving	

EDUCATIONAL BACKGROUND:

NAME/LOCATION	YEARS COMPLETED	DEGREE
High School** East Jackson High School	K-12	General
College/University** Spring Arbor University	4	Senior Year

Other

As public employers, Jackson County and the Courts are subject to the Freedom of Information Act and, under that Act, Jackson County is required to provide a copy of this application to any individual submitting a written request unless, as an applicant, you request that your application remain in confidence.

I wish this application for employment to remain in confidence ☒ Yes ☐ No

I hereby certify that all statements on this Application for Employment (and accompanying resume, if any) are made completely, truthfully and without evasion, and further understand and agree that such statements may be investigated and if found to be false will be sufficient reason for not being employed, or if employed, may result in my dismissal.

I authorize Jackson County and the Courts to investigate all statements contained in the application, including disciplinary records of any former employers, police departments, and other references or sources concerning me. I authorize all such references and sources to release this information without liability for damage incurred in giving it. I waive any written notice of the release of such records that may be required by state or federal law.

I understand that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that affect is executed in writing by the employer. I understand that any employment offer may be conditioned upon the results of a pre-employment medical examination, and any other necessary medical tests to determine the presence of alcohol, drugs, or controlled substances, should they be required.

Jackson County and the Courts actively encourage applications by qualified individuals with disabilities, and does not discriminate in its consideration of such applicants. If you believe that any accommodation of a disability will be necessary for the testing and/or interview process contact the Human Resources Department at (517) 788-4340.

Signature of Applicant: Kevin Cromley Date: November 24, 2010

JACKSON COUNTY AND COURTS, FOR PURPOSES OF HIRING, PROMOTION, ADVANCING, OR ASSIGNING JOBS OR ANY OTHER TERMS OR CONDITIONS OF EMPLOYMENT AGREES TO PROVIDE EQUAL EMPLOYMENT OPPORTUNITY REGARDLESS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, AGE, SEX, HEIGHT, WEIGHT, MARITAL STATUS, ARREST RECORD, OR DISABILITY AS DEFINED BY LAW OR ANY FACTOR NOT RELATIVE TO JOB PERFORMANCE; EXCEPT WHERE A SPECIFIED AGE, SEX OR PHYSICAL REQUIREMENT IS A BONA-FIDE OCCUPATIONAL REQUIREMENT.

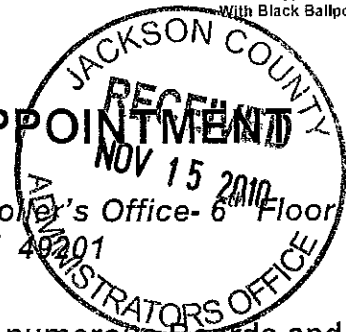
DO NOT WRITE BELOW THIS LINE

Test Scores/Dates: _____ Application Number: 2010112416023182400001

Start Date	Fund/Sub-Dept.	Job Title	Classification
Rate of Pay	Employee No.	Approved By:	PCN#

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT



Mail or personally deliver to: County of Jackson Administrator/Controller's Office- 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Youngdahl Russ C
Last First Middle Initial

HOME ADDRESS: 2251 Springport Rd. Apt 464 Jackson 49202
Street City Zip Code

TELEPHONE: 517-784-3703 ryoungdahl@sbcsglobal.net
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Parks Board 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>Parks Board</u>	<u>1 term</u>	<u>Member</u>
<u>Summit Twp</u>	<u>8 years</u>	<u>Supervisor - Member</u>
_____	_____	_____

Employment:

Retired
Current Employer: Position: Dates of Employment:

Education:

BSEE U of M Master in Industrial Management @ MIT

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

To continue the consolidation of Co & City Parks work

Additional Information you feel may be helpful in considering your request for Appointment:

R Youngdahl 11/10/10
Signature Date

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Seydell Nancy _____
Last First, Middle Initial
HOME ADDRESS: 8801 Minard Road Parma 49269
Street City Zip Code
TELEPHONE: 517-569-2535 nseydell@provide.net
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Jackson County Parks and Recreation 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>Jackson County Park Commission</u>	<u>on and off since 1993</u>	<u>Chairman 2yr term (2 times) 1yr (once)</u>
<u>Jackson County Parks Association</u>	<u>Charter member-Board member 9yrs.</u>	<u>Chairman 2 terms (3 times)</u>
<u>Tompkins Historical Society</u>	<u>Since 1985</u>	<u>President 19 years-Museum Curator 4yrs.</u>

Employment:

<u>Self-employed part time</u>	<u>owner</u>	<u>Since 1984</u>
Current Employer:	Position:	Dates of Employment:

Education:

Graduate Hanover-Horton/ Albion College 1 year /Classes at JCC

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

I have been involved with the plan to form a joint Park Recreation with the City from the beginning and would like to stay on to see it come to fruition. I want to help revive the lagoons and the falls.

Additional Information you feel may be helpful in considering your request for appointment:

I have been the caretaker and landscaper at Minard Mill County Park for 26 years. I raised \$8,000 for the pavillion and all the trees and flowers from my community.

Nancy L. Seydell

Signature:

10/27/2010

Date:

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Daly Kevin
Last First, Middle Initial

HOME ADDRESS: 6117 Riverview Drive Jackson 49203
Street City Zip Code

TELEPHONE: 517-782-9708 (H) 517-788-0565 (W) kipdaly2@gmail.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Parks 2. 3.

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u></u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></u>

Employment:

<u>Consumer Energy</u>	<u>Executive Director Gas Management Services</u>	<u>January 1979- Present</u>
Current Employer:	Position:	Dates of Employment:

Education:

BBA, University of Michigan 1975, JD University of Detroit 1978

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

As a lifelong resident of Jackson County the parks have always been a main centerpiece and important part of the fabric of Jackson. I would like to serve in a capacity which would support their improvement and future use.

Additional Information you feel may be helpful in considering your request for appointment:

My business and educational experience may provide additional resources and expertise for the continued improvement and preservation of the parks systems.

Kevin J. Daly
Signature:

11/16/2010
Date:

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Gutekunst Patricia
Last First, Middle Initial

HOME ADDRESS: 115 3rd St. Jackson 49201-1287
Street City Zip Code

TELEPHONE: 517-782-0118 martyscat@aol.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Parks, etc 2. 3.

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>Historic District Comm.</u>	<u>13 years</u>	<u>member</u>
<u>CDG Block Funds</u>	<u>1</u>	<u>member</u>
<u>Zoning& Sign Board of Appeal</u>	<u>Present</u>	<u></u>

Employment:

Retired
Current Employer: Position: Dates of Employment:

Education:

2 years college

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

Long time and loyal resident of Jackson with a love of the city and it's exceptional Parks.

Additional Information you feel may be helpful in considering your request for appointment:

I think it is the responsibility of our citizens to take an active part in the running of the town in which we live.

patricia D Gutekunst 11/17/2010
Signature: Date:

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Valente Jason
Last First, Middle Initial
HOME ADDRESS: 1115 Park Road Jackson 49203
Street City Zip Code
TELEPHONE: 517-240-7035 (Cell) 517-796-8418 (Office) jason@valenteholdings.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. PARKS BOARD 2. 3.

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
disAbility Connections Foundation	2007-Present	President/Board Chair and previously VP
United Way of Jackson County Board Of Dir.	2009-Present	Board Member
University of Michigan Health System	2006-Present	Board Member, Family Centered Care NICU

Employment:

Jackson Community College	Executive Director for Advancement/Legislative Affairs	April 2008- Present
Current Employer:	Position:	Dates of Employment:

Education:

BA Finance, Management & Sociology (Concordia University- Ann Arbor). MS in Organizational Development (Concordia University-Ann Arbor)

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

I worked for Novi Parks & Rec in Administration for 7 years while in highschool and college. Was the supervisor of Lakeshore Park in Novi which included land mgt, facilities, staffing, beach mgt.

Additional Information you feel may be helpful in considering your request for appointment:

Our county parks are a gem. We need to be active stewards of them. I also served on the Novi parks foundation board and assisted in creating their master usage plan

Jason H. Valente 11/16/2010
Signature: Date:

THIS FORM CONTAINS REQUIRED FIELDS - IT WILL NOT SUBMIT IF ANY OF THE REQUIRED FIELDS ARE EMPTY
** DENOTES A REQUIRED FIELD

INTERNET APPLICATION FORM INSTRUCTIONS: Complete all the required fields and submit

APPLICATION FOR EMPLOYMENT
JACKSON COUNTY AND COURTS

Date of Application November 26, 2010

** JOB PREFERENCE Public member for Parks Board or Road Commission or Airport Board

NAME ** Greenman ** Arthur L.
Last First Middle Initial
ADDRESS ** 138 Southern Shores ** Brooklyn ** MI ** 49230
Street City State Zip Code
TELEPHONE ** (517) 414 - 0249 ** (517) 414 - 0249 SOCIAL SECURITY NO ** XXX / XX / XXXX
Home Daytime Number

Have you ever been employed by Jackson County or Courts before? ☐ Yes ☒ No

Are you legally eligible for employment in this country? ☒ Yes ☐ No
(Proof of U.S citizenship or immigration status will be required upon employment.)

When would you be available for work? Anytime

Are you available to work: ☐ Full-time ☐ Part-time ☐ Shift Work ☐ Temporary/Seasonal

Are you currently employed? ☐ Yes ☒ No May we contact your present employer? ☐ Yes ☐ No

If applying for a position requiring a drivers/chauffeurs' license please give license number: _____

List professional licenses you hold: _____

If applying for a clerical position, please indicate typing/data entry speed: _____

Summarize special skills and qualifications acquired from employment or other experiences that may qualify you to work with Jackson County. Responsible for the structural safety of all thirteen hydro plants in mic

Did Third Party work for gas transmission pipelines

Project Engineer for gas stransmission pipelines

Have you been convicted of a felony or misdemeanor in the last seven (7) years? ☐ Yes ☒ No
If yes, please explain: _____

Have you received a disciplinary suspension or been discharged from any position(s)? ☐ Yes ☒ No
If yes, please explain: _____

Do you have any relatives employed by Jackson County or Courts? ☐ Yes ☒ No
If yes, please give name and department: _____

Provide any other information, including volunteer experience, you feel would be helpful in determining how you may be employed.

I'm doing Meals-on-Wheels for Allegiance Hospital

Spent three weeks volunteering for the Red Cross in Lousiana in 2005

NOTE: You are welcome to submit a resume. However, you are requested to complete the Education and Employment History sections of this application whether or not a resume is attached.

EMPLOYMENT HISTORY:

Employer **	Address **
Consumers Energy	1945 W. Parnall Rd.
Job Title **	Immediate Supervisor and Title **
Senior Engineer	Bob Welsh, Manager of Gas T&S Engineering

Summarize nature of work performed and job responsibilities: **

Dates of Employment **	Hourly Rate/Salary**
1966 to 2002	A good salary

Reason for Leaving **

Retired

Employer	Address
Job Title	Immediate Supervisor and Title

Summarize nature of work performed and job responsibilities:

Dates of Employment	Hourly Rate/Salary
Reason for Leaving	

Employer	Address
Job Title	Immediate Supervisor and Title

Summarize nature of work performed and job responsibilities:

Dates of Employment	Hourly Rate/Salary
Reason for Leaving	

Employer	Address
Job Title	Immediate Supervisor and Title

Summarize nature of work performed and job responsibilities:

Dates of Employment	Hourly Rate/Salary
Reason for Leaving	

EDUCATIONAL BACKGROUND:

NAME/LOCATION	YEARS COMPLETED	DEGREE
High School ** Northwest H.S.	four	College prep
College/University ** Tri-State College (now Trine U.)	four	Civil Engineering

Other

As public employers, Jackson County and the Courts are subject to the Freedom of Information Act and, under that Act, Jackson County is required to provide a copy of this application to any individual submitting a written request unless, as an applicant, you request that your application remain in confidence.

I wish this application for employment to remain in confidence

☐ Yes ☒ No

I hereby certify that all statements on this Application for Employment (and accompanying resume, if any) are made completely, truthfully and without evasion, and further understand and agree that such statements may be investigated and if found to be false will be sufficient reason for not being employed, or if employed, may result in my dismissal.

I authorize Jackson County and the Courts to investigate all statements contained in the application, including disciplinary records of any former employers, police departments, and other references or sources concerning me. I authorize all such references and sources to release this information without liability for damage incurred in giving it. I waive any written notice of the release of such records that may be required by state or federal law.

I understand that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that affect is executed in writing by the employer. I understand that any employment offer may be conditioned upon the results of a pre-employment medical examination, and any other necessary medical tests to determine the presence of alcohol, drugs, or controlled substances, should they be required.

Jackson County and the Courts actively encourage applications by qualified individuals with disabilities, and does not discriminate in its consideration of such applicants. If you believe that any accommodation of a disability will be necessary for the testing and/or interview process contact the Human Resources Department at (517) 788-4340.

Signature of Applicant: Arthur L. Greenman

Date: November 26, 2010

JACKSON COUNTY AND COURTS, FOR PURPOSES OF HIRING, PROMOTION, ADVANCING, OR ASSIGNING JOBS OR ANY OTHER TERMS OR CONDITIONS OF EMPLOYMENT AGREES TO PROVIDE EQUAL EMPLOYMENT OPPORTUNITY REGARDLESS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, AGE, SEX, HEIGHT, WEIGHT, MARITAL STATUS, ARREST RECORD, OR DISABILITY AS DEFINED BY LAW OR ANY FACTOR NOT RELATIVE TO JOB PERFORMANCE; EXCEPT WHERE A SPECIFIED AGE, SEX OR PHYSICAL REQUIREMENT IS A BONA-FIDE OCCUPATIONAL REQUIREMENT.

DO NOT WRITE BELOW THIS LINE

Test Scores/Dates:

Application Number:

201011170828159100001

Start Date

Fund/Sub-Dept.

Job Title

Classification

Rate of Pay

Employee No.

Approved By:

PCN#

Please Type or Print
With Black BallpointPlease Type or Print
With Black Ballpoint

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: County of Jackson Administrator/Controller's Office- 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: LaVoy-Foster Michele M
Last First Middle Initial

HOME ADDRESS: 116 W Biddle Apt 1 Jackson 49203
Street City Zip Code

TELEPHONE: (517) 782-8808 25.party.reading@hotmail.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. JC Department on Aging Advisory Council 2. Fair Board 3. Jackson City Parks & Recreation
Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
1st <u>Congregational UCC</u>	<u>2008 - present</u>	<u>Christian Ed Education</u>
<u>St. Johns UCC</u>	<u>2009 - present</u>	<u>Food Pantry Fundraising committee</u>
<u>Partnership Park: DT - Neighborhood Association</u>	<u>2008 - present</u>	<u>Events Committee</u>
<u>Employment: Association</u>		
<u>Salvation Army</u>	<u>Seasonal</u>	<u>11/10 - 12/24</u>
Current Employer:	Position:	Dates of Employment:
	<u>Bell Ringing</u>	
	<u>(Pending) - Background check</u>	

Education:

Central Michigan University - Masters of Arts

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

I enjoy assisting in the process of positive change in the Jackson City Community. Making sure all views are examined to go on Board's commissions to the betterment of those served.
I have the ability to work w/a Diverse population good people & customer service skills, sense of humor & good listening skills

Signature: Michele M. LaVoy-Foster Date: 11-24-10

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Rayl Patricia L
Last First Middle Initial
HOME ADDRESS: 3442 Roosevelt Rd Jackson 49203
Street City Zip Code
TELEPHONE: (517) 960-4470 prayl@comcast.net
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Region II Planning Commission 2. Hospital Finance Authority 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>Summit Zoning Board of Appeals</u>	<u>2008-2010</u>	<u>board member</u>
<u>Michigan Theatre of Jackson</u>	<u>2003-present</u>	<u>Vol. Coord.; bd member; treasurer</u>
<u>H.A. Myer chapter of BPW</u>	<u>2007-present</u>	<u>secretary</u>

Employment:

student
Current Employer: _____ Position: _____ Dates of Employment: _____

Education:

BA: EMU; Masters in Public Administration with concentration in Nonprofit Management: Eastern Michigan University (2011)

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

As an MPA student, I am particularly interested in those orgs that are nonprofits, but many mistake as part of government.

Additional Information you feel may be helpful in considering your request for appointment:

I can contribute to the depth of oversight and effectiveness of the board.

Patricia Rayl
Signature: _____

November 10, 2010
Date: _____

Submit

Reset

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: Sanford _____ Gregory _____
Last First, Middle Initial
HOME ADDRESS: P.O. Box 49, 315 Oyer St. _____ Springport _____ 49284
Street City Zip Code
TELEPHONE: Cell- 517-206-8606 Work- 517-908-2881 _____ gsanford@eatoncoop.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Region II Planning Commission 2. _____ 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>Springport Village Council</u>	<u>2 Years</u>	<u>Trustee</u>
<u>County Farmland Preservation Board</u>	<u>1 Year (Currently)</u>	<u>Real Estate Interest</u>
<u>Springport Agriscience Advisory Board</u>	<u>2 Years (Currently)</u>	<u>Board Member</u>

Employment:

<u>Eaton Farm Bureau Co-op</u>	<u>Agronomy Manager</u>	<u>Sept. 2009- Present</u>
Current Employer:	Position:	Dates of Employment:

Education:

Ohio State - B.S. Agribusiness and Applied Economics, Minor- City and Regional Planning

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

Interest, along with a great deal of knowledge and experiences that can help serve the county and region.

Additional Information you feel may be helpful in considering your request for appointment:

Currently hold a Michigan Real Estate License and I have also attended the Ultimate Farmland Preservation Tour which focused around Smart growth.

GBS _____

Signature:

11/17/2010 _____

Date:

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: County of Jackson Administrator/Controller's Office- 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Prebble Leland D.
Last First Middle Initial
HOME ADDRESS: 3506 Audrey St. Spring Arbor 49283
Street City Zip Code
TELEPHONE: 517-206-4491 lprebble@netzero.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested: REGION 2 PLANNING COMM
1. Fair Board 2. Road Commissioner ~~Planning Commission~~

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>Lead several trips overseas</u>		<u>Leader</u>
<u>Ran for State Rep.</u>		
<u>Youth Leader</u>	<u>7 yrs</u>	

Employment:

<u>Self Contractor</u>	<u>Owner</u>	<u>35 yrs</u>
Current Employer:	Position:	Dates of Employment:

Education:

Bachelors Education

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

Additional Information you feel may be helpful in considering your request for Appointment:

Leland Prebble
Signature

Date

Please Type or Print
With Black BallpointPlease Type or Print
with Black Ballpoint

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Schlecte Laura Dwyer
Last First Middle Initial

HOME ADDRESS: 759 W. Michigan Ave Jackson 49201
Street City Zip Code

TELEPHONE: work 517.780.3830 / cell 734.660.4280 Laura@7803800.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Region 2 Planning Commission 2. Road Commission 3. _____

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
<u>American Red Cross & Other Non-profits</u>	<u>2010 & over the years</u>	<u>Chair of Red Carpet Event & chair & member</u>
<u>Jackson County Chamber Of Commerce</u>	<u>2010</u>	<u>Member of City Legislative Committee</u>
<u>Jackson Area Association of REALTORS</u>	<u>Since 1983</u>	<u>Various Chairs and on the Board of Directors</u>

Employment:

Current Employer:	Position:	Dates of Employment:
<u>Prudential Premier Properties</u>	<u>Broker/Owner</u>	<u>1983 to current</u>

Education:

3 years Western Michigan University, National Trainer for Prudential Real Estate Affiliates and National Association of REALTORS, CCDS, PCM, ABRM, CRB, GREEN

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

The decisions made and recommended for land use have a huge impact on this community both on its value and perception. With my background in real estate - residential, commercial, and appraising - I can contribute

fresh ideas, look at the overall plans and goals of our community, and give an objective opinion and recommendations. Put this with the access to legal research that I have and I would be a strong addition to this commission.

Additional information you feel may be helpful in considering your request for appointment:

I recently attended the UM ULI Real Estate Forum. This Forum along with other organizations that I am involved with give me access to a lot of great resources.


 Laura Dwyer Schlecte

Signature:

November 16, 2010

Date:



COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: County of Jackson Administrator/Controller's Office- 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: Haynes Angela
Last First Middle Initial
HOME ADDRESS: 1037 Maple Avenue 49203
Street City Zip Code
TELEPHONE: 517-962-5774 Angela-Caddell@yahoo.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Department on Aging 2. Hospital Finance Authority 3. Region 2 Planning Comm.

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>Great Start Collaborative</u>	<u>2 years</u>	<u>Health Care Executive Comm.</u>
<u>Center for Family Health</u>	<u>1 year</u>	<u>3 different Comm- Finance PR Comm. Quarterly Ass.</u>
<u>Love Inc.</u>	<u>2 years</u>	<u>Board Secretary</u>

Employment:

<u>Henlyn Care</u>	<u>Office Manager</u>	<u>1-07 - current</u>
Current Employer:	Position:	Dates of Employment:

Education:

BA Business Adm - currently attending for MA in Public Adm.

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

I am seeking to learn more about my community. I have experience and some knowledge for the positions. This will help me learn regarding my education.

Additional Information you feel may be helpful in considering your request for Appointment:

less than 60. I am a good listener and enjoy working with others.

Angela Haynes
Signature

11-22-10
Date

COUNTY OF JACKSON

REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: *County of Jackson -- Administrator/Controller's Office -- 6th Floor*
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 FAX (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions.
Persons who wish to serve should complete the following information.

NAME: GROVER JANE
Last First, Middle Initial
HOME ADDRESS: 1717 Maybrook Jackson 49203
Street City Zip Code
TELEPHONE: 517 7841205 x 412 janegdds@comcast.net
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. Department on Aging 2. Airport Board 3. Planning Commission

Community Activities/Civic Organization/Boards/Commissions:

Activity / Organization:	Length of Service	Position (s) Held:
Jackson Community College Foundation Board	2 years	Secretary
Disability Connections	4 months	Board Member
Ella Sharp Museum Board	6 years	Past Chair

Employment:

Center For Family Health	Dental Director	since 2001
Current Employer:	Position:	Dates of Employment:

Education:

University of Detroit undergraduate studies Univ of Michigan School of Dentistry and Public Health

Please indicate why you are requesting appointment to this Board (s) /Commission (s):

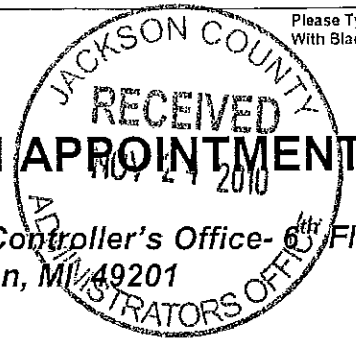
To serve my community

Additional Information you feel may be helpful in considering your request for appointment:

I also serve as a consultant to the Michigan Department of Community Health and the Michigan Attorney General's Office

Jane S. Grover DDS MPH 11/24/2010
Signature: Date:

COUNTY OF JACKSON REQUEST FOR BOARD OR COMMISSION APPOINTMENT



Mail or personally deliver to: County of Jackson Administrator/Controller's Office- 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755

The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: JONES MICHAEL M
Last First Middle Initial
HOME ADDRESS: 121 HOLIDAY BROOKLYN 49230
Street City Zip Code
TELEPHONE: 517 7880382 mmjones@cmsenergy.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. ROAD COMMISSION 2. REGION 11 PLANNING

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>JACKSON COUNTY CHAMBER</u>	<u>4 YRS</u>	<u>VICE CHAIR</u>
<u>SOUTH CENTRAL MI WORKS</u>	<u>6 YRS</u>	<u>EXECUTIVE BOARD</u>
<u>TOASTMASTERS INTL</u>	<u>25 YRS</u>	<u>PAST AREA GOVERNOR</u>
<u>JACKSON AREA MAN. ASSOCIATION</u>	<u>23 YRS</u>	<u>AND PRESIDENT</u>
<u>Employment:</u>		<u>INSTRUCTOR</u>
<u>CONSUMERS ENERGY</u>	<u>MANAGEMENT</u>	<u>3/15/76 - PRESENT</u>
Current Employer:	Position:	Dates of Employment:

Education:

BA COMMUNICATIONS (OAKLAND UNIV) MASTERS CLASSES
LABOR RELATIONS - MSU

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

I HAVE A PASSION FOR JACKSON COUNTY AND BEING
AN AVID CYCLIST - HAVE A FIRST HAND ASSESSMENT
OF OUR CURRENT CONDITION.

Additional Information you feel may be helpful in considering your request for Appointment:

I WORK WELL WITH GROUPS AND AM FREQUENTLY
ASKED TO ASSIST IN INITIATIVES

[Signature]
Signature

11/22/10
Date

**APPLICATION FOR APPOINTMENT
JACKSON COUNTY ROAD COMMISSION**



Date of Application 11/3/10

NAME Charles Deborah L.
Last First Middle Initial

ADDRESS 6891 N. Parma Rd Parma MI 49269
Street City State Zip Code

TELEPHONE 517-531-5310 517-444-1005 jimanddebbiecharles@yahoo.com
Home Daytime Number Cell Phone email address

Are you a U.S. Citizen? ☒ Yes ☐ No

Are you a Jackson County Resident? ☒ Yes ☐ No

List professional licenses you hold: none

Have you been convicted of a felony? ☐ Yes ☒ No
If yes, please explain: _____

Have you received a disciplinary suspension or been discharged from any position(s)? ☐ Yes ☒ No
If yes, please explain: _____

Do you have any relatives employed by Jackson County or Courts? ☐ Yes ☒ No
If yes, please give name and department: _____

Provide any other information, including volunteer experience, you feel would be helpful in determining how you may be employed.

Please see attached

NOTE: You are welcome to submit a resume. However, you are requested to complete the Education and Employment History sections of this application whether or not a resume is attached.

EMPLOYMENT HISTORY:

Employer Ingham County Address 301 N. Bush St. P.O. Box 38
Road Commission Mason MI 48854
Job Title Secretary to the Board Immediate Supervisor and Title William M. Conklin, Managing Director
Summarize nature of work performed and job responsibilities: Executive Secretary to Managing Director and Assistant to Board,
taking and preparing board minutes, union negotiations, preparation of proposals, see attached
Dates of Employment June 1981-April 2010 Hourly Rate/Salary 28.72/hour
Reason for Leaving Retired

Employer Ingham County Address 707 Buhl Dr PO Box 220
Drain Commission Mason MI 48854
Job Title Secretary to Dept. Head Immediate Supervisor and Title Richard L. Sode, Drain Commissioner (deceased)
Summarize nature of work performed and job responsibilities: typing correspondence, assisting with drain assessment rolls,
taking and preparing minutes for Board of Public Works
Dates of Employment March 1977-June 1981 Hourly Rate/Salary do not recall
Reason for Leaving accepted job with Road Commission

Employer Norman M. Gaffney PC Address 530 S. Capitol, Lansing, MI
Job Title Legal Secretary Immediate Supervisor and Title Norman M. Gaffney, Attorney at Law
Summarize nature of work performed and job responsibilities: Legal Secretary, typing legal documents, making
appts, collecting fees and doing monthly invoices to clients
Dates of Employment 1974-1977 Hourly Rate/Salary do not recall
Reason for Leaving accepted job with County Drain Commission

Employer _____ Address _____
Job Title _____ Immediate Supervisor and Title _____
Summarize nature of work performed and job responsibilities: _____

Dates of Employment _____ Hourly Rate/Salary _____
Reason for Leaving _____

EDUCATIONAL BACKGROUND:

NAME/LOCATION	YEARS COMPLETED	DEGREE
High School <u>Eaton Rapids</u>	<u>4</u>	<u>1973 graduate</u>
College/University		
<u>Some business courses at LCC</u>		
Other		

I authorize Jackson County to investigate all statements contained in the application, police departments, and other references or sources concerning me. I authorize all such references and sources to release this information without liability for damage incurred in giving it. I waive any written notice of the release of such records that may be required by state or federal law.

Signature of Applicant: Debra Charles Date November 3, 2010

References may be requested.

I worked at the Ingham County Road Commission from June 1981 through April 2010. After 29 years of service, I retired in April of this year. My position was Secretary to the Board.

My tasks were a variety of duties, including recording and preparing minutes for the Board of Ingham County Road Commissioners. As the Board's Secretary, a statutorily held position, I worked exclusively for the Board and the Managing Director. I prepared all Board meeting agendas, scheduled various appointments for Board meetings, and recorded and prepared all minutes. I also helped with scheduling, such as various public informational meetings, Budget public hearings, and construction public hearings, which are annual events. I handled all of the statutory legalities of publishing for these meetings and public hearings.

Although I did not directly set or recommend annual budgets, I participated in staff meetings and brainstorming in the preliminary stages leading up to presentation of a draft to the Board for its review and ultimate adoption.

As a non-union management level employee, I participated in labor negotiations, and was a member of the management team for the OPEIU Local 512 labor negotiations for many years. The Ingham County Road Commission also has the AFSCME Local 1499 and SEIU Local 517M employees. I also participated in preparation for these labor negotiations and prepared documents for management proposals.

For many years, and especially for the past six years, I was the staff liaison between union officials and management.

I believe I have a vast knowledge of County Road Commissions and how they function, from the day to day operations, to the legal responsibilities and public expectations of the Board of County Road Commissioners.

References:

Joseph D. Pulver, Managing Director
Clinton County Road Commission
997 West Dexter Trail
Mason MI 48854
517-676-6769

June H. Pallottini, Former Commissioner
Ingham County Road Commission (1993-2004)
2634 West Bellevue Road
Leslie MI 49251
517-589-8809

Joseph A. Guenther, Current Chair
Ingham County Road Commission
1904 Schoolcraft
Holt MI 48842
517-256-8013

David O. Sheathelm, Former Commissioner
Ingham County Road Commission (1989-2000)
3230 Sheathelm Road
Dansville MI 48819
517-623-6324

Thomas M. Mitchell, Current Member
Ingham County Road Commission
3591 Zimmer Road
Williamston MI 48895
517-819-8435

THIS FORM CONTAINS REQUIRED FIELDS - IT WILL NOT SUBMIT IF ANY OF THE REQUIRED FIELDS ARE EMPTY
** DENOTES A REQUIRED FIELD

INTERNET APPLICATION FORM INSTRUCTIONS: Complete all the required fields and submit

APPLICATION FOR EMPLOYMENT
JACKSON COUNTY AND COURTS

Date of Application November 26, 2010

** JOB PREFERENCE Public member for Parks Board or Road Commission or Airport Board

NAME ** Greenman ** Arthur L.
Last First Middle Initial
ADDRESS ** 138 Southern Shores ** Brooklyn ** MI ** 49230
Street City State Zip Code
TELEPHONE ** (517) 414 - 0249 ** (517) 414 - 0249 SOCIAL SECURITY NO ** XXX / XX / XXXX
Home Daytime Number

Have you ever been employed by Jackson County or Courts before?

☐ Yes ☒ No

Are you legally eligible for employment in this country?

☒ Yes ☐ No

(Proof of U.S citizenship or immigration status will be required upon employment.)

When would you be available for work? Anytime

Are you available to work: ☐ Full-time ☐ Part-time ☐ Shift Work ☐ Temporary/Seasonal

Are you currently employed? ☐ Yes ☒ No May we contact your present employer? ☐ Yes ☐ No

If applying for a position requiring a drivers/chauffeurs' license please give license number: _____

List professional licenses you hold: _____

If applying for a clerical position, please indicate typing/data entry speed: _____

Summarize special skills and qualifications acquired from employment or other experiences that may qualify you to work with Jackson County. Responsible for the structural safety of all thirteen hydro plants in mi

Did Third Party work for gas transmission pipelines

Project Engineer for gas stransmission pipelines

Have you been convicted of a felony or misdemeanor in the last seven (7) years?

☐ Yes ☒ No

If yes, please explain: _____

Have you received a disciplinary suspension or been discharged from any position(s)?

☐ Yes ☒ No

If yes, please explain: _____

Do you have any relatives employed by Jackson County or Courts?

☐ Yes ☒ No

If yes, please give name and department: _____

Provide any other information, including volunteer experience, you feel would be helpful in determining how you may be employed.

I'm doing Meals-on-Wheels for Allegiance Hospital

Spent three weeks volunteering for the Red Cross in Lousiana in 2005

NOTE: You are welcome to submit a resume. However, you are requested to complete the Education and Employment History sections of this application whether or not a resume is attached.

EMPLOYMENT HISTORY:

Employer **	Address **
Consumers Energy	1945 W. Parnall Rd.
Job Title **	Immediate Supervisor and Title **
Senior Engineer	Bob Welsh, Manager of Gas T&S Engineering
Summarize nature of work performed and job responsibilities: **	

Dates of Employment **	Hourly Rate/Salary**
1966 to 2002	A good salary
Reason for Leaving **	
Retired	

Employer	Address
Job Title	Immediate Supervisor and Title
Summarize nature of work performed and job responsibilities:	

Dates of Employment	Hourly Rate/Salary
Reason for Leaving	

Employer	Address
Job Title	Immediate Supervisor and Title
Summarize nature of work performed and job responsibilities:	

Dates of Employment	Hourly Rate/Salary
Reason for Leaving	

Employer	Address
Job Title	Immediate Supervisor and Title
Summarize nature of work performed and job responsibilities:	

Dates of Employment	Hourly Rate/Salary
Reason for Leaving	

EDUCATIONAL BACKGROUND:

NAME/LOCATION	YEARS COMPLETED	DEGREE
High School ** Northwest H.S.	four	College prep
College/University ** Tri-State College (now Trine U.)	four	Civil Engineering

Other

As public employers, Jackson County and the Courts are subject to the Freedom of Information Act and, under that Act, Jackson County is required to provide a copy of this application to any individual submitting a written request unless, as an applicant, you request that your application remain in confidence.

I wish this application for employment to remain in confidence

☐ Yes ☒ No

I hereby certify that all statements on this Application for Employment (and accompanying resume, if any) are made completely, truthfully and without evasion, and further understand and agree that such statements may be investigated and if found to be false will be sufficient reason for not being employed, or if employed, may result in my dismissal.

I authorize Jackson County and the Courts to investigate all statements contained in the application, including disciplinary records of any former employers, police departments, and other references or sources concerning me. I authorize all such references and sources to release this information without liability for damage incurred in giving it. I waive any written notice of the release of such records that may be required by state or federal law.

I understand that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that affect is executed in writing by the employer. I understand that any employment offer may be conditioned upon the results of a pre-employment medical examination, and any other necessary medical tests to determine the presence of alcohol, drugs, or controlled substances, should they be required.

Jackson County and the Courts actively encourage applications by qualified individuals with disabilities, and does not discriminate in its consideration of such applicants. If you believe that any accommodation of a disability will be necessary for the testing and/or interview process contact the Human Resources Department at (517) 788-4340.

Signature of Applicant: Arthur L. Greenman

Date: November 26, 2010

JACKSON COUNTY AND COURTS, FOR PURPOSES OF HIRING, PROMOTION, ADVANCING, OR ASSIGNING JOBS OR ANY OTHER TERMS OR CONDITIONS OF EMPLOYMENT AGREES TO PROVIDE EQUAL EMPLOYMENT OPPORTUNITY REGARDLESS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, AGE, SEX, HEIGHT, WEIGHT, MARITAL STATUS, ARREST RECORD, OR DISABILITY AS DEFINED BY LAW OR ANY FACTOR NOT RELATIVE TO JOB PERFORMANCE; EXCEPT WHERE A SPECIFIED AGE, SEX OR PHYSICAL REQUIREMENT IS A BONA-FIDE OCCUPATIONAL REQUIREMENT.

DO NOT WRITE BELOW THIS LINE

Test Scores/Dates:

Application Number:
201011170828158100001

Start Date	Fund/Sub-Dept.	Job Title	Classification
Rate of Pay	Employee No.	Approved By:	PCN#

APPLICATION FOR APPOINTMENT
JACKSON COUNTY ROAD COMMISSION

Date of Application 11/29/10
ORIGINALLY 11/27/10

NAME JONES MICHAEL M
Last First Middle Initial

ADDRESS 121 HOLIDAY BROOKLYN MI 49230
Street City State Zip Code

TELEPHONE (517) 7880382 m.jones@cmsenergy.com
Home Daytime Number Cell Phone email address

Are you a U.S. Citizen? ☒ Yes ☐ No

Are you a Jackson County Resident? ☒ Yes ☐ No

List professional licenses you hold: NUMEROUS CERTIFICATIONS

Have you been convicted of a felony? ☐ Yes ☒ No
If yes, please explain: _____

Have you received a disciplinary suspension or been discharged from any position(s)? ☐ Yes ☒ No
If yes, please explain: _____

Do you have any relatives employed by Jackson County or Courts? ☐ Yes ☒ No
If yes, please give name and department: _____

Provide any other information, including volunteer experience, you feel would be helpful in determining how you may be employed.

AS I STATED IN MY EARLIER APPLICATION, I
HAVE SERVED IN MANY CAPACITIES: CURRENT
VICE CHAIR OF CHAMBER OF COMMERCE, SOUTH
CENTRAL MI. WORKS EXEC. COMM., FORMER AREA
GOVERNOR TOASTMASTERS INTL., PAST SECRETARY
OF JAHA, JACKSON AREA MAN. ASSOCIATION
INSTRUCTOR (23 YRS), 2010 DISTINGUISHED
CITIZEN OF THE YEAR (CIT. PAT.), TRUSTEE
ARBOR GROVE CONGREGATIONAL CHURCH,
FACILITATOR/MEDIATOR FOR NUMEROUS COMMUNITY
GROUPS (ENTERPRISE GROUP, JCEG, ARMORY
ARTS, ETC.)

NOTE: You are welcome to submit a resume. However, you are requested to complete the Education and Employment History sections of this application whether or not a resume is attached.

EMPLOYMENT HISTORY:

Employer CONSUMERS ENERGY Address 1945 W. PARWALL RD
Job Title MANAGEMENT Immediate Supervisor and Title JARED MARTIN - DIRECTOR WMS
Summarize nature of work performed and job responsibilities:
I'M INVOLVED IN NUMEROUS ORGANIZATIONAL
DEV. ACTIVITIES: STRAT. PLANNING, FACILITATION, WORK
Dates of Employment MARCH 1976 - PRESENT Hourly Rate/Salary PROCESS DESIGN, ORG. ASSESSMENT, PROJECT
Reason for Leaving MANAGEMENT

Employer _____ Address _____
Job Title _____ Immediate Supervisor and Title _____
Summarize nature of work performed and job responsibilities:

Dates of Employment _____ Hourly Rate/Salary _____
Reason for Leaving _____

Employer _____ Address _____
Job Title _____ Immediate Supervisor and Title _____
Summarize nature of work performed and job responsibilities:

Dates of Employment _____ Hourly Rate/Salary _____
Reason for Leaving _____

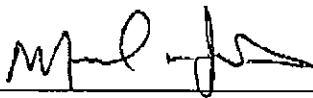
Employer _____ Address _____
Job Title _____ Immediate Supervisor and Title _____
Summarize nature of work performed and job responsibilities:

Dates of Employment _____ Hourly Rate/Salary _____
Reason for Leaving _____

EDUCATIONAL BACKGROUND:

NAME/LOCATION	YEARS COMPLETED	DEGREE
High School		
PARKSIDE H.S.	1975	DIPLOMA
College/University		
OAKLAND UNIVERSITY	1984	BA COMMUNICATION
MSU (6 GRADUATE COURSES)		LABOR RELATIONS
Other		

I authorize Jackson County to investigate all statements contained in the application, police departments, and other references or sources concerning me. I authorize all such references and sources to release this information without liability for damage incurred in giving it. I waive any written notice of the release of such records that may be required by state or federal law.

Signature of Applicant:  Date 11/29/10

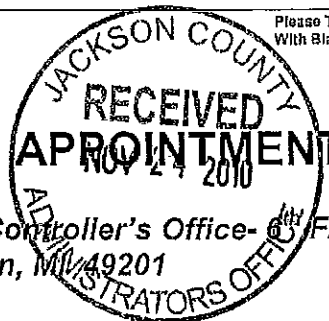
References may be requested.

Please Type or Print
With Black Ballpoint

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With Black Ballpoint

COUNTY OF JACKSON REQUEST FOR BOARD OR COMMISSION APPOINTMENT

Mail or personally deliver to: County of Jackson Administrator/Controller's Office - 6th Floor
120 West Michigan Avenue, Jackson, MI 49201
(517) 788-4335 fax (517) 780-4755



The Jackson County Board of Commissioners appoints individuals to numerous Boards and Commissions. Persons who wish to serve should complete the following information.

NAME: JONES MICHAEL M
Last First Middle Initial
HOME ADDRESS: 121 HOLIDAY BROOKLYN 49230
Street City Zip Code
TELEPHONE: 517 7880382 mmjones@cmsenergy.com
Home, Work, Cell, or Business (Include Area Code) E-mail Address

Name of Board(s) or Commission(s) to which Appointment is requested:

1. ROAD COMMISSION 2. REGION 11 PLANNING

Community Activities/Civic Organization/Boards/Commissions:

Activity/Organization:	Length of Service	Position(s) Held:
<u>JACKSON COUNTY CHAMBER</u>	<u>4 YRS</u>	<u>VICE CHAIR</u>
<u>SOUTH CENTRAL MI WORKS</u>	<u>6 YRS</u>	<u>EXECUTIVE BOARD</u>
<u>TOASTMASTERS INTL</u>	<u>25 YRS</u>	<u>PAST AREA GOVERNOR</u>
<u>JACKSON AREA MAN. ASSOCIATION</u>	<u>23 YRS</u>	<u>AND PRESIDENT</u>
<u>Employment:</u>		<u>INSTRUCTOR</u>
<u>CONSUMERS ENERGY</u>	<u>MANAGEMENT</u>	<u>3/15/76 - PRESENT</u>
Current Employer:	Position:	Dates of Employment:

Education:

BA COMMUNICATIONS (OAKLAND UNIV) MASTERS CLASSES
LABOR RELATIONS - MSU

Please indicate why you are requesting appointment to this Board(s)/Commission(s):

I HAVE A PASSION FOR JACKSON COUNTY AND BEING
AN AVID CYCLIST - HAVE A FIRST HAND ASSESSMENT
OF OUR CURRENT CONDITION.

Additional information you feel may be helpful in considering your request for Appointment:

I WORK WELL WITH GROUPS AND AM FREQUENTLY
ASKED TO ASSIST IN INITIATIVES

[Signature]
Signature

11/22/10
Date

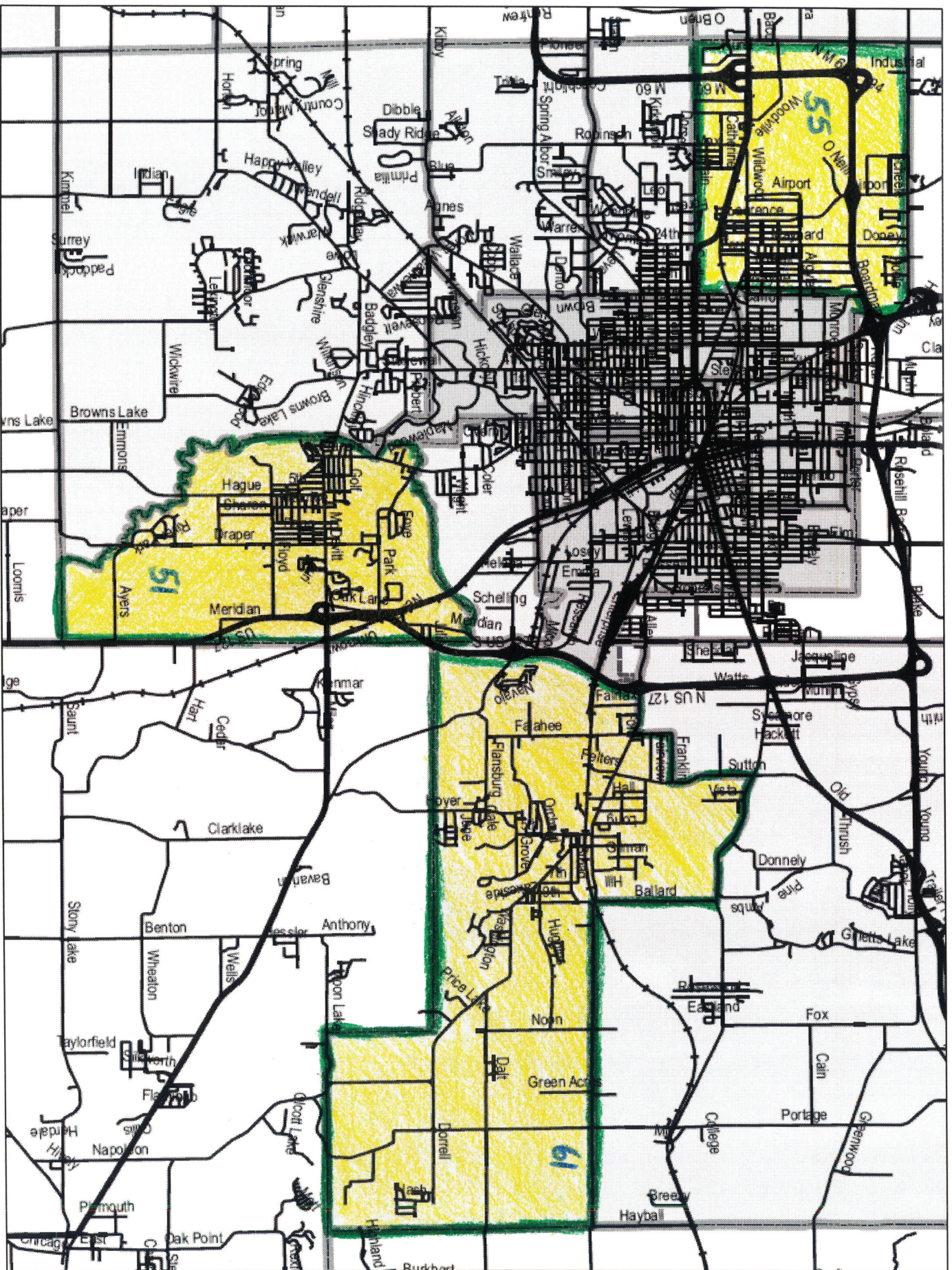
NSP 3 Neighborhood Information

HUD requires a risk score of 17 or higher in order to be an eligible neighborhood for NSP3 funding. The below census tracts were the only tracts outside of the City of Jackson with risk scores that fell within this requirement.

Source		Census Tract 51 Summit Township	Census Tract 55 Blackman Township	Census Tract 61 Leoni Township
Multiple	HUD NSP3 Risk Score	17	18	17
2000 Census	Total Population	4,805	5,101	6,614
2000 Census	Total housing units	1,946	2,487	2,816
2000 Census	Number of occupied single Family homes	1,620	1,142	2,160
2000 Census	Number of Home owner units	1,638	1,030	2,295
2000 Census	Number of rental units	211	1,352	340
USPS 2010 2 nd Quarter	Number & Percent of vacant residential units	128 / 6.11%	417 / 13.86%	163 / 5.64%
Jackson Realtor MLS	Number of residential properties for sale	23	13	13
Jackson Realtor MLS	Number of properties currently for sale by Bank (foreclosed)	1	4	8
CAA data	Number of client/ homeowners working on mortgage deficiency	2	2	6
HUD	Estimated delinquent mortgages	13.6%	15.4%	13.7%
HUD	Housing Units Bank Owned (7/2009 – 6/2010)	39	32	63
2000 Census	Median age of housing	1954	1971	1956
2000 Census	Number of two bedroom units	505	897	800
2000 Census	Number of 3 bedroom units	947	586	1,260
2000 Census	Number of 4+ bedroom units	234	196	386
2000 Census	Number & Percent of workers using bus/walk/other	23 /1.13%	57 /2.26%	34 /1.09%
CAA data	Number of Wx done or underway	18	11	17

- Median age of rental housing is older than owner occupied in both CT 51 and CT61, but significantly newer (1976 vs. 1955) in CT 55
- May be more CAA clients working on a mortgage deficiency or weatherization than cross referenced to Census Tracts from agency databases.

NSP3 Eligible Census Tracts





Jackson County

Resolution (12-10.42) Appointing an Interim Administrator/Controller and Retaining a Search Firm for a Permanent Replacement

WHEREAS, the Jackson County Board of Commissioners wishes to appoint an Interim Administrator/ Controller, and hire a search firm for the appointment of an Administrator/Controller; and

WHEREAS, an opportunity will exist with the vacancy in the Administrator/Controller's Office as of January 1, 2011; and,

WHEREAS, the Deputy Administrator, Adam J. Brown, is willing to serve as the Interim Administrator/Controller.

NOW, THEREFORE, BE IT RESOLVED that the Jackson County Board of Commissioners hereby appoints Adam Brown as the Interim Administrator/Controller.

BE IT FURTHER RESOLVED that a Request for Proposal (RFP) for the search for a Administrator/Controller is to be undertaken with a recommendation to hire an appropriate firm to be brought to the Board of Commissioners as soon as possible.

**James E. Shotwell, Jr., Chairman
Jackson County Board of Commissioners
December 14, 2010**

2011
Enterprise Fund Budget
(11/23/10)

		2011
		Sum of
		Months
	Revenue	
401.000	Revenue from other (scrap sales)	\$ 17,550
460.000	Revenue from tipping fees	\$ 6,593,705
652.010	Revenue from electric sales	\$ -
653.020	Revenue from Energy sales	\$ 2,400,000
664.000	Revenue from interest	\$ 3,500
	Revenue from Misc.	\$ 100
	Total Revenue	\$ 9,014,855
.03	Expense	
852.000	Central Services Allocation	\$ 104,775
705.000	Salaries Part Time	\$ 14,137
000.000	Benefits	\$ 2,667
728.000	Office Expenses & Supplies	\$ 700
728.020	Bank Charges (Letter of credit for LF)	\$ 7,800
801.100	VWNA Operating and Maintenance	\$ 4,421,435
801.120	MSW Disposal Expense	\$ 733,434
801.125	Other Disposal Expense	\$ 356,458
801.130	Ash Disposal Expense	\$ 394,538
802.010	Accounting Services	\$ 5,150
805.010	Licenses	\$ 15,450
805.030	Laboratory fees (Air Monitoring)	\$ 16,000
805.040	Laboratory Fees (Other Testing)	\$ 1,030
810.000	Attorney Services	\$ 10,000
812.000	Telephone Service	\$ -
802.001	Household Hazardous Waste Collection	\$ -
802.002	Environmental Education	\$ -
921.000	Lights, Water, & Sewer	\$ 1,030
922.000	Fuel (Natural Gas)	\$ 90,000
932.000	Maintenance of Equipment	\$ 325,000
959.000	Misc.	\$ 5,150
000.000	Engineering	\$ 55,000
000.000	Contingency	\$ -
995.000	Interest on Bonds & Delinquent Tax Fund	\$ 147,185
	Total Expenses	\$ 6,706,938
	Capital	
000.000	Bond Principal Payment	\$ 1,750,000
000.000	Delinquent Tax Fund Loan Principal Payment	\$ 241,593
115.130	Addition to Spare Parts Inventory	\$ 50,000
000.000	Landfill Closure	\$ 10,000
000.020	Landfill Post Closure Final Cover Maintenance	\$ 5,000
805.020	Landfill Post Closure Groundwater Monitoring	\$ 50,000
921.020	Landfill Post Closure Leachate Disposal	\$ 20,000
136.000	JCRRF Capital Improvements	\$ 165,000
	Total Capital	\$ 2,291,593
	Total Expenses and Capital Expenditures	\$ 8,998,531
	Cash Flow	\$ 16,324

2011
Enterprise Fund Budget
(11/23/10)

		2011	2010	2010	Increase	Increase	Increase	Increase
		BUDGET	BUDGET	PROJECTION	From 2010	From 2010	From 2009	From 2009
			10/06/10	11/17/10	Budget	Budget	Projection	Projection
					\$	%	\$	%
	Revenue							
401.000	Revenue from other (scrap sales)	\$ 17,550	\$ 15,000	\$ 17,550	\$ 2,550	17.0%	\$ -	0.0%
460.000	Revenue from tipping fees	\$ 6,593,705	\$ 6,474,691	\$ 6,600,261	\$ 119,014	1.8%	\$ (6,556)	-0.1%
652.010	Revenue from electric sales	\$ -	\$ 468,449	\$ 620,885	\$ (468,449)	-100.0%	\$ (620,885)	-100.0%
653.020	Revenue from Energy sales	\$ 2,400,000	\$ 3,362,480	\$ 2,508,776	\$ (962,480)	-28.6%	\$ (108,776)	-4.3%
664.000	Revenue from interest	\$ 3,500	\$ 20,000	\$ 3,236	\$ (16,500)	-82.5%	\$ 264	8.2%
	Revenue from Misc.	\$ 100	\$ 100	\$ 411	\$ -	0.0%	\$ (311)	-75.7%
	Total Revenue	\$ 9,014,855	\$ 10,340,720	\$ 9,751,119	\$ (1,325,865)	-12.8%	\$ (736,264)	-7.6%
.03	Expense							
852.000	Central Services Allocation	\$ 104,775	\$ 122,004	\$ 122,004	\$ (17,229)	-14.1%	\$ (17,229)	-14.1%
705.000	Salaries Part Time	\$ 14,137	\$ 14,137	\$ 13,647	\$ -	0.0%	\$ 490	3.6%
000.000	Benefits	\$ 2,667	\$ 2,667	\$ 2,631	\$ -	0.0%	\$ 36	1.4%
728.000	Office Expenses & Supplies	\$ 700	\$ 700	\$ 460	\$ -	0.0%	\$ 240	52.2%
728.020	Bank Charges (Letter of credit for LF)	\$ 7,800	\$ 7,800	\$ 3,525	\$ -	0.0%	\$ 4,275	121.3%
801.100	VWNA Operating and Maintenance	\$ 4,421,435	\$ 4,571,435	\$ 4,571,435	\$ (150,000)	-3.3%	\$ (150,000)	-3.3%
801.120	MSW Disposal Expense	\$ 733,434	\$ 690,000	\$ 652,117	\$ 43,434	6.3%	\$ 81,317	12.5%
801.125	Other Disposal Expense	\$ 356,458	\$ 271,869	\$ 361,608	\$ 84,589	31.1%	\$ (5,150)	-1.4%
801.130	Ash Disposal Expense	\$ 394,538	\$ 374,567	\$ 405,610	\$ 19,971	5.3%	\$ (11,072)	-2.7%
802.010	Accounting Services	\$ 5,150	\$ 5,150	\$ -	\$ -	0.0%	\$ 5,150	100.0%
805.010	Licenses	\$ 15,450	\$ 15,450	\$ 10,212	\$ -	0.0%	\$ 5,238	51.3%
805.030	Laboratory fees (Air Monitoring)	\$ 16,000	\$ 16,000	\$ 66,596	\$ -	0.0%	\$ (50,596)	-76.0%
805.040	Laboratory Fees (Other Testing)	\$ 1,030	\$ 1,030	\$ 560	\$ -	0.0%	\$ 470	83.9%
810.000	Attorney Services	\$ 10,000	\$ 2,575	\$ 230	\$ 7,425	288.3%	\$ 9,770	4247.8%
812.000	Telephone Service	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	0.0%
802.001	Household Hazardous Waste Collection	\$ -	\$ 35,000	\$ 37,384	\$ (35,000)	-100.0%	\$ (37,384)	-100.0%
802.002	Environmental Education	\$ -	\$ 2,060	\$ -	\$ (2,060)	-100.0%	\$ -	0.0%
921.000	Lights, Water, & Sewer	\$ 1,030	\$ 1,030	\$ 1,170	\$ -	0.0%	\$ (140)	-12.0%
922.000	Fuel (Natural Gas)	\$ 90,000	\$ 110,000	\$ 99,687	\$ (20,000)	-18.2%	\$ (9,687)	-9.7%
932.000	Maintenance of Equipment	\$ 325,000	\$ 500,000	\$ 698,237	\$ (175,000)	-35.0%	\$ (373,237)	-53.5%
959.000	Misc.	\$ 5,150	\$ 5,150	\$ -	\$ -	0.0%	\$ 5,150	100.0%
000.000	Engineering	\$ 55,000	\$ 61,800	\$ 32,941	\$ (6,800)	-11.0%	\$ 22,059	67.0%
000.000	Contingency	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	0.0%
995.000	Interest on Bonds & Delinquent Tax Fund	\$ 147,185	\$ 206,889	\$ 206,889	\$ (59,704)	-28.9%	\$ (59,704)	-28.9%
	Total Expenses	\$ 6,706,938	\$ 7,017,313	\$ 7,286,943	\$ (310,375)	-4.4%	\$ (580,005)	-8.0%
	Capital							
000.000	Bond Principal Payment	\$ 1,750,000	\$ 1,330,000	\$ 1,330,000	\$ 420,000	31.6%	\$ 420,000	31.6%
000.000	Delinquent Tax Fund Loan Principal Payment	\$ 241,593	\$ 193,984	\$ 193,964	\$ 47,609	24.5%	\$ 47,629	24.6%
115.130	Addition to Spare Parts Inventory	\$ 50,000	\$ 300,000	\$ 246,527	\$ (250,000)	-83.3%	\$ (196,527)	-79.7%
000.000	Landfill Closure	\$ 10,000	\$ 120,000	\$ -	\$ (110,000)	-91.7%	\$ 10,000	100.0%
000.020	Landfill Post Closure Final Cover Maintenance	\$ 5,000	\$ 5,000	\$ 4,839	\$ -	0.0%	\$ 161	3.3%
805.020	Landfill Post Closure Groundwater Monitoring	\$ 50,000	\$ 60,000	\$ 50,714	\$ (10,000)	-16.7%	\$ (714)	-1.4%
921.020	Landfill Post Closure Leachate Disposal	\$ 20,000	\$ 20,000	\$ 25,373	\$ -	0.0%	\$ (5,373)	-21.2%
136.000	JCRRF Capital Improvements	\$ 165,000	\$ 753,000	\$ 851,519	\$ (588,000)	-78.1%	\$ (686,519)	-80.6%
	Total Capital	\$ 2,291,593	\$ 2,781,984	\$ 2,702,936	\$ (490,391)	-17.6%	\$ (411,343)	-15.2%
	Total Expenses and Capital Expenditures	\$ 8,998,531	\$ 9,799,297	\$ 9,989,879	\$ (800,766)	-8.2%	\$ (991,348)	-9.9%
	Cash Flow	\$ 16,324	\$ 541,423	\$ (238,760)	\$ (525,099)	-97.0%	\$ 255,084	-106.8%