

**AGENDA**  
**HENDRICKS COUNTY COUNCIL**  
Hendricks County Government Center  
355 S. Washington Street, Danville, Indiana  
**August 1, 2017**

**9:00 A.M.**

**1:00 P.M. 2018 BUDGET WORKSHOPS**

**CALL TO ORDER:**

**ADOPTION OF AGENDA:**

**MINUTES OF 07/05/2017**

**UNFINISHED BUSINESS**

Jeff Pipkin - Executive Director - 2-18 Tax Abatement Review & Recommendations

Chewy.com

Cabot IV-IN 1B02, LLC

I-70 West LLC

Renk Systems Corporation

TT Quality Leasing LLC

Determination of Apportionment of One Half (1/2) of Innkeeper's Tax Revenue in Excess of five percent (5%)

**NEW BUSINESS:**

Human Resources - Erin Hughes

**EMERGENCY ADDITIONAL APPROPRIATIONS**

See Attached

**REALLOCATION OF FUNDS**

See Attached

**OTHER COUNCIL BUSINESS:**

Acknowledge Notice of Tort Claim

Status of Funds

Sheriff's Report of Receipts and Disbursements of Commissary Fund 1/1/2017 to 6/30/2017

Sheriff's Report of Expenditure for Feeding Prisoners

Greg Guerrettaz - Financial Solutions - 2018 Budget

The regular meeting of the Hendricks County Council was called to order by President Eric Wathen on Wednesday July 5, 2017 with the following in attendance: Caleb Brown, Larry Hesson, Jay Puckett, Mike Rogers, Eric Wathen, Brad Whicker, David Wyeth Financial Administrator Tami Mitchell, and Auditor Nancy Marsh. The Pledge of Allegiance was led by President, Eric Wathen.

#### **IN THE MATTER OF THE AGENDA**

It was moved by Larry Hesson and seconded by Brad Whicker to adopt the agenda as amended. Motion carried 7-0.

#### **IN THE MATTER OF THE JUNE 6, 2017 MINUTES**

It was moved by Jay Puckett and seconded by Mike Rogers that the minutes be approved as submitted. Motion carried 6-0-1 (EW).

#### **IN THE MATTER OF THE CONFIRMING RESOLUTION OF ERA I-70 WEST, LLC/SUNBEAM**

Eric Wathen opened the advertised Public Hearing on the *Resolution Setting Forth Final Action in Determining that the Qualifications for an Economic Revitalization Area have been Met and Confirming Resolution No. 2017-21 of June 6, 2017*. Jeff Pipkin, Executive Director of the Hendricks County Economic Development Partnership (Hendricks County INspired) stated that I-70 West LLC/ Sunbeam was asking to expand the Economic Revitalization Area by an additional 75 acres and was presenting the Resolution for approval. Mr. Pipkin stated the ERA meets the qualifications for a tax abatement. Hearing no further public comment, it was moved by Caleb Brown and seconded by David Wyeth to close the Public Hearing. Motion Carried 7-0.

It was moved by Brad Whicker and seconded by Caleb Brown to approve Hendricks County Council *Resolution Setting Forth Final Action in Determining that the Qualifications for an Economic Revitalization Area have been Met and Confirming Resolution No. 2017-21 of June 6, 2017*. Motion carried 7-0.

#### **IN THE MATTER OF THE CF-1 COMPLIANCE AND STATEMENT OF BENEFITS**

Jeff Pipkin, Executive Director of the Hendricks County Economic Development Partnership, presented the CF-1 for Communications Infrastructure, Inc., and recommended approval. Finding Communications Infrastructure, Inc. in substantial compliance, it was moved by Larry Hesson and seconded by Brad Whicker to approve authorize the President to sign the compliance statement. Motion carried 7-0.

Jeff Pipkin, Executive Director of the Hendricks County Economic Development Partnership, presented the CF-1 for Chewy.com and recommended approval. The question was raised on how many employees were full time or part time. Mr. Pipkin will get that information for the Council. It was moved by Larry Hesson and seconded by Jay Puckett to table the CF-1 approval until the August meeting. Motion carried 7-0.

Jeff Pipkin, Executive Director of the Hendricks County Economic Development Partnership, presented the CF-1 for Grant Thompson, DBA Cables for Less, LLC and recommended approval.

Finding Grant Thompson, DBA Cables for Less, LLC in substantial compliance, it was moved by Larry Hesson and seconded by Brad Whicker to approve authorize the President to sign the compliance statement. Motion carried 7-0.

Jeff Pipkin, Executive Director of the Hendricks County Economic Development Partnership, presented the CF-1 for Johnson & Johnson Sales and Logistics Company Personal Property and Real Estate and recommended approval. Finding Johnson & Johnson Sales and Logistics Company in substantial compliance, it was moved by Larry Hesson and seconded by Brad Whicker to approve authorize the President to sign the compliance statements. Motion carried 6-1 (JP).

It was moved by Jay Puckett and seconded by Caleb Brown to table until August 1, 2017 Council meeting the Compliance Statements for TT Quality Leasing LLC; Cabot IV-IN1B02 LLC; I-70 West LLC; and Renk Systems Corporation. Motion carried 7-0.

Council President Eric Wathen asked Mr. Pipkin if he knew or could find out how many employees were Hendricks County residents.

#### **IN THE MATTER OF THE PRE-SUPERVISION GRANT APPROPRIATIONS**

Judge Stephanie Lemay-Luken presented a request for a Court Date Reminder Service to help the courts remind people to go to their pre-trial hearings. Judge Lemay-Luken said there is a significant problem with attendance and this system will aid the process and help with the reporting process. It was moved by Larry Hesson and seconded by David Wyeth to approve additional appropriation number 92 in the amount of \$10,000.00. Motion Carried 7-0.

Judge Stephanie Lemay-Luken presented a request for an employee and benefits for a Pre-Trial Assessor for the Probation Department from the Pre-Trial Supervision Grant. Judge LeMay-Luken stated they had received confirmation that it is a sustaining grant. It was moved by Larry Hesson and seconded by Jay Puckett to approve emergency additional appropriations number 86 in the amount of \$45,245; number 87 in the amount of \$3,500.00; number 88 in the amount of \$6,430.00; number 89 in the amount of \$16,553; number 90 in the amount of \$66.00 and number 91 in the amount of \$1,145.00. Motion carried 7-0.

#### **IN THE MATTER OF THE 2018 RETIREE SUBSIDY TO MEDICARE RETIREES**

Auditor Nancy Marsh presented a request for final action on the 2018 Retiree Supplement to Medicare Retirees. A brief explanation was given regarding the recommendation of the Benefit Committee requiring retirees to use Medicare Part B for their health coverage with the county providing a \$100 subsidy to purchase their Medicare Supplemental Policy in 2018. It was moved by Larry Hesson and seconded by Mike Rogers to approve a \$100 subsidy to each Medicare eligible retiree and spouse. Motion carried 7-0. Auditor Marsh asked for the Council's pleasure in administering the process and requested one card per employee retiree. The Council authorized the Auditor's Office to administer the process in the manner determined by the Auditor's Office.

**IN THE MATTER OF THE  
SOLID WASTE DISTRICT ADMINISTRATION BUILDING**

Facilities Manager Kevin Cavanaugh reported that the bids were over the estimates by approximately \$500,000.00. Mr. Cavanaugh stated that the preliminary estimates were too low. Caleb Brown offered information from the Solid Waste Board on potential remedies to cover the extra costs. The new building was going to include interactive training, meeting room space and house 3 full time employees. Mr. Cavanaugh stated they are working as expeditiously as possible as the bids are good for 60 days and the district is looking for other ways to cover the additional funding and Mr. Detwiler is working on cash flow options. Mr. Cavanaugh reported they should have some definitive numbers by the next meeting. Councilman Mike Rogers asked for clarification on the use of the District's Rainy Day Fund.

**IN THE MATTER OF HUMAN RESOURCES**

Human Resources Administrator Erin Hughes presented job description changes for the Clerk's account 10119 to Processing Clerk; Clerk's Account 10102 to Criminal /Notification Clerk and presented a Pretrial Assessor PAT 3 Non-Exempt job description for the Probation Department. It was moved by Jay Puckett and seconded by Brad Whicker to approve the Human Resources recommendations as presented. Motion carried 7-0.

**IN THE MATTER OF THE REMAINING ADDITIONAL APPROPRIATIONS**

It was moved by Larry Hesson and seconded by Caleb Brown to table Prosecutor's emergency additional appropriations number 1, 2 and 3. Motion carried 7-0.

It was moved by David Wyeth and seconded by Mike Rogers to approve Assessor's emergency additional appropriations number 4 and 5. Motion carried 7-0.

John Ayers, Jim Mardis and Clint Stoutenour explained and answered questions regarding emergency additional appropriation number 6, on behalf of the Commissioners in the amount of \$150,000. It was explained that this was an Enterprise System and will have both internal and external advantages. Mr. Wathen stated he was in favor and was the best thing we can do to support the taxpayers. Mr. Ayers stated the Commissioners support the system. Mr. Hesson confirmed that there would be no interference with the systems in place in the municipalities.

It was moved by Larry Hesson and seconded by Mike Rogers to approve EDIT emergency additional appropriation number 6. Motion carried 7-0.

It was moved by Brad Whicker and seconded by David Wyeth to approve the Health emergency additional appropriation number 7. Motion carried 7-0.

It was moved by Caleb Brown and seconded by Brad Whicker to approve the Local Road & Street emergency additional appropriation number 8 and the Motor Vehicle Highway emergency additional appropriation number 9. Motion carried 7-0.

Councilman Jay Puckett reported that Hendricks County Engineer, John Ayers had been the speaker at the Brownsburg Chamber of Commerce meeting. Mr. Puckett reported that Mr. Ayers was an excellent ambassador for the County and made an informative presentation.

It was moved by Larry Hesson and seconded by Jay Puckett to approve the Community Corrections Grant, Community Corrections Project Income, Supreme Court Interpreter Grant, JDAI Grant and the Community Corrections Probation Grant emergency additional appropriations number 10 through 85 and numbers 93 through 102. Motion carried 7-0.

#### **IN THE MATTER OF THE PURDUE EXTENTION APPOINTMENTS**

It was the consensus of the County Council that there are civic leaders with the qualifications and passion for the Hendricks County Extension Advisory Council and the Hendricks County Council appointments will be left open at this time. Auditor Nancy Marsh will notify the Purdue Extension Office of the action.

#### **IN THE MATTER OF THE REALLOCATIONS OF FUNDS**

It was moved by Caleb Brown and seconded by Mike Rogers to approve the Planning and Building transfer number 1 in the amount of \$3,000.00 and the Cypress Manor transfer number 2 in the amount of \$12,875.00. Motion carried 7-0.

#### **IN THE MATTER OF THE STATUS OF FUNDS**

Auditor Nancy Marsh presented the Status of Funds report for the Council's review. Auditor Marsh stated the county's June payment was \$88,534.00

#### **IN THE MATTER OF THE STATE CALLED COUNCIL MEETING**

It was reported that the State Called County Council Conference was held on June 24, 2017 at the Indiana Grand Casino, Shelbyville, Indiana with Councilman Larry Hesson in attendance. Councilman Hesson stated he would prepare handouts for the other council members.

#### **IN THE MATTER OF THE JAIL FEASIBILITY STUDY**

Sheriff Brett Clark reported that a joint meeting of the Council and Commissioners will be held on July 11, 2017 in meeting room 4 & 5 at the Government Center with a jail tour available following the presentation.

#### **IN THE MATTER OF OTHER COUNCIL BUSINESS**

The Auditor was asked to put the determination of the Innkeeper's Percentage on the August agenda.

Councilman Wathen reported that he had received notice from the Records Commission regarding the destruction of records.

Larry Hesson reported the Association of Indiana Counties Annual Conference will be held September 25-28, 2017 in Switzerland County at Belterra Resort & Spa. Auditor Marsh announced that Councilman Larry Hesson is the incoming President of the Association of Indiana Counties.

Sheriff Clark asked for clarification on continued coverage for a spouse of a retired employee who is 65 and Medicare eligible when the spouse has not reached 65 years old and is not Medicare eligible. The Council stated the retiree's spouse can stay on the county policy until the spouse turns 65 and is Medicare eligible if the employee has met the other enrollment requirements.

The Council is seeking clarification on whether or not the Council appointee to the Cummins Board needs to be a member of the County Council. Councilman Jay Puckett will reach out to Cummins Mental Health.

Auditor Nancy Marsh reported that the 2018 Maximum Levy Growth Factor is 4%.

**IN THE MATTER OF ADJOURNMENT**

There being no further business to come before the Council, upon motion made by Larry Hesson seconded by Brad Whicker and carried 7-0, the meeting was adjourned Tuesday, July 5, 2017 at 10:50.

\_\_\_\_\_  
Caleb M. Brown

\_\_\_\_\_  
Larry R. Hesson

\_\_\_\_\_  
Jay R. Puckett

\_\_\_\_\_  
Michael C. Rogers

\_\_\_\_\_  
Eric Wathen

\_\_\_\_\_  
Brad Whicker

ATTEST:

\_\_\_\_\_  
Nancy L. Marsh  
Hendricks County Auditor

\_\_\_\_\_  
David Wyeth



# MEMO

To: Hendricks County Council Members  
Cc: Nancy Marsh, County Auditor  
From: Jeff Pipkin, Executive Director  
Subject: 2017 Tax abatement reviews and recommendations

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Chewy.com – 1974 Innovation Boulevard, Clayton, IN

- Personal Property Investment – 5 year abatement (Year 1)
  - Estimated investment and employment
    - \$5,650,000 investment in logistics equipment; IT equipment \$640,000
    - 392 new positions, \$11,854,720 in annual payroll; \$14.53/hr avg.
  - Progress report
    - \$4,251,808 investment in logistics equipment; IT equipment \$663,040.
    - 1186 new positions, Average wage was \$13.53/hr. Annual payroll was \$12,325,427. 7.4% of the employees were a Hendricks County resident.
  - Recommendation: Company is in compliance.



*Tabled*  
*7/5/17*

## MEMO

To: Hendricks County Council Members  
Cc: Nancy Marsh, County Auditor  
From: Jeff Pipkin, Executive Director  
Subject: 2017 Tax abatement reviews and recommendations

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Chewy.com – 1974 Innovation Boulevard, Clayton, IN

- Personal Property Investment – 5 year abatement (Year 1)
  - Estimated investment and employment
    - \$5,650,000 investment in logistics equipment; IT equipment \$640,000
    - 392 new positions, \$11,854,720 in annual payroll;
  - Progress report
    - \$4,251,808 investment in logistics equipment; IT equipment \$663,040.
    - 1184 new positions, \$12,325,427 in annual payroll;
  - Recommendation: Company is in compliance.





# COMPLIANCE WITH STATEMENT OF BENEFITS PERSONAL PROPERTY

State Form 51765 (R4 / 11-16)

Prescribed by the Department of Local Government Finance

**FORM CF-1 / PP**

## PRIVACY NOTICE

This form contains information  
confidential pursuant to  
IC 6-1.1-35-9 and IC 6-1.1-12.1-5.6.

- INSTRUCTIONS:**
1. Property owners whose Statement of Benefits was approved must file this form with the local Designating Body to show the extent to which there has been compliance with the Statement of Benefits. (IC 6-1.1-12.1-5.6)
  2. This form must be filed with the Form 103-ERA Schedule of Deduction from Assessed Value between January 1 and May 15 of each year, unless a filing extension under IC 6-1.1-3.7 has been granted. A person who obtains a filing extension must file between January 1 and the extended due date of each year.
  3. With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance (CF-1).

SECTION 1 TAXPAYER INFORMATION	
Name of taxpayer <b>Chewy, Inc.</b>	County <b>Hendricks</b>
Address of taxpayer (number and street, city, state, and ZIP code) <b>1855 Griffin Road, Suite B-428, Dania Beach, FL 33004</b>	DLGF taxing district number <b>Liberty Township 013</b>
Name of contact person <b>Alexandra Budd</b>	Telephone number <b>( 786 ) 320-7111 ext 1223</b>

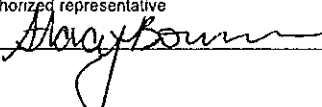
SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY		
Name of designating body <b>Hendricks County Council</b>	Resolution number <b>2015-38</b>	Estimated start date (month, day, year) <b>11/15/2015</b>
Location of property <b>1974 Innovation Boulevard, Clayton, IN 46118</b>		Actual start date (month, day, year) <b>02/03/2016</b>
Description of new manufacturing equipment, or new research and development equipment, or new information technology equipment, or new logistical distribution equipment to be acquired.		Estimated completion date (month, day, year) <b>01/15/2016</b>
		Actual completion date (month, day, year) <b>02/03/2016</b>

SECTION 3 EMPLOYEES AND SALARIES		
EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current number of employees	0	1184
Salaries	0.00	12,325,427.81
Number of employees retained	0	0
Salaries	0.00	0.00
Number of additional employees	392	0
Salaries	11,854,720.00	0.00

SECTION 4 COST AND VALUES								
	MANUFACTURING EQUIPMENT		R & D EQUIPMENT		LOGIST DIST EQUIPMENT		IT EQUIPMENT	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project								
Plus: Values of proposed project						5,650,000.00		640,000.00
Less: Values of any property being replaced								
Net values upon completion of project						5,650,000.00		640,000.00
ACTUAL	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE	COST	ASSESSED VALUE
Values before project								
Plus: Values of proposed project					4,251,808.15		663,040.99	
Less: Values of any property being replaced								
Net values upon completion of project					4,251,808.15		663,040.99	

**NOTE:** The COST of the property is confidential pursuant to IC 6-1.1-12.1-5.6(c).

SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER		
WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of solid waste converted	0.00	0.00
Amount of hazardous waste converted	0.00	0.00
Other benefits:		

SECTION 6 TAXPAYER CERTIFICATION		
I hereby certify that the representations in this statement are true.		
Signature of authorized representative 	Title <b>PRINCIPAL ACCOUNTING OFFICER</b>	Date signed (month, day, year) <b>05/10/2017</b>

**OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)  
THAT WAS APPROVED AFTER JUNE 30, 1991.**

**INSTRUCTIONS: (IC 6-1.1-12.1-5.9)**

1. This page does not apply to a Statement of Benefits filed before July 1, 1991; that deduction may not be terminated for a failure to comply with the Statement of Benefits.
2. Within forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits.
3. If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination and the date, time and place of a hearing to be conducted by the designating body. If a notice is mailed to a property owner, a copy of the written notice will be sent to the County Assessor and the County Auditor.
4. Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made reasonable effort to substantially comply with the Statement of Benefits and whether any failure to substantially comply was caused by factors beyond the control of the property owner.
5. If the designating body determines that the property owner has **NOT** made reasonable effort to comply, then the designating body shall adopt a resolution terminating the deduction. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the County Auditor; and (3) the County Assessor.

We have reviewed the CF-1 and find that:

- ☐ the property owner **IS** in substantial compliance
- ☐ the property owner **IS NOT** in substantial compliance
- ☐ other (specify) \_\_\_\_\_

Reasons for the determination (attach additional sheets if necessary)

Signature of authorized member

Date signed (month, day, year)

Attested by:

Designating body

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance.

Time of hearing

- ☐ AM  
☐ PM

Date of hearing (month, day, year)

Location of hearing

**HEARING RESULTS (to be completed after the hearing)**

☐ Approved

☐ Denied (see instruction 5 above)

Reasons for the determination (attach additional sheets if necessary)

Signature of authorized member

Date signed (month, day, year)

Attested by:

Designating body

**APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]**

A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the clerk of Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.



# MEMO

To: Hendricks County Council Members  
Cc: Nancy Marsh, County Auditor  
From: Jeff Pipkin, Executive Director  
Subject: 2017 Tax abatement reviews and recommendations

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Cabot IV-IN1B02, LLC 1801 Innovation Blvd., Clayton, IN

- Real Property Investment – 10-year abatement (Year 3)
  - Estimated investment and employment
    - \$22,500,000
    - 320 FTEs, \$7,987,000 salary
  - Progress report
    - \$17,553,663
    - 124 new positions, Average wage was \$13.89/hr. Annual payroll was \$3,582,704.
  - Recommendation: As you now know this building is without a tenant due to the Gordmans closing. I would suggest we find the building in compliance because of the large investment that has been made. We are working with the owner to find a new tenant as quickly as possible.

007-326412-400014

17/18


**COMPLIANCE WITH STATEMENT OF BENEFITS  
REAL ESTATE IMPROVEMENTS**

State Form 51766 (R3 / 2-13)

Prescribed by the Department of Local Government Finance

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FORM CF-1 / Real Property

**PRIVACY NOTICE**

The cost and any specific individual's salary information is confidential; the balance of the filing is public record per IC 6-1.1-12.1-5.1 (c) and (d).

**INSTRUCTIONS:**

1. This form does not apply to property located in a residentially distressed area or any deduction for which the Statement of Benefits was approved before July 1, 1991.
2. Property owners must file this form with the county auditor and the designating body for their review regarding the compliance of the project with the Statement of Benefits (Form SB-1/Real Property).
3. This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.
4. This form must also be updated each year in which the deduction is applicable. It is filed with the county auditor and the designating body before May 15, or by the due date of the real property owner's personal property return that is filed in the township where the property is located. (IC 6-1.1-12.1-5.1(b))
5. With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (Form CF-1/Real Property).

<b>SECTION 1 TAXPAYER INFORMATION</b>		
Name of taxpayer <b>Cabot IV-IN1B02, LLC</b>	County <b>Hendricks</b>	
Address of taxpayer (number and street, city, state, and ZIP code) <b>1 Beacon Street, Suite 1700, Boston, MA 02108-3107</b>	DLGF taxing district number <b>32-013</b>	
Name of contact person <b>Christopher Manocchio, Vice President, Asset Management</b>	Telephone number <b>( 617 ) 305-6127</b>	
<b>SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY</b>		
Name of designating body <b>Hendricks County Council</b>	Resolution number <b>12-16</b>	Estimated start date (month, day, year) <b>2-1-2013</b>
Location of property <b>1801 Innovation Blvd., Clayton, IN 46118</b>	Actual start date (month, day, year) <b>3-1-2013</b>	
Description of real property improvements <b>A Gordmans distribution facility of ~550,000 s.f. with construction completed in 2014.</b>	Estimated completion date (month, day, year) <b>12-29-2014</b>	
		Actual completion date (month, day, year) <b>10-31-2014</b>
<b>SECTION 3 EMPLOYEES AND SALARIES</b>		
EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current number of employees	0	124
Salaries	0.00	3,582,704.05
Number of employees retained	0	
Salaries	0.00	
Number of additional employees	320	124
Salaries	7,987,000.00	3,582,704.05
<b>SECTION 4 COST AND VALUES</b>		
COST AND VALUES	REAL ESTATE IMPROVEMENTS	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE
Values before project		
Plus: Values of proposed project		
Less: Values of any property being replaced		
Net values upon completion of project	22,500,000.00	
ACTUAL	COST	ASSESSED VALUE
Values before project	0.00	0.00
Plus: Values of proposed project	17,553,663.00	17,372,900.00
Less: Values of any property being replaced	0.00	0.00
Net values upon completion of project	17,553,663.00	17,372,900.00
<b>SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER</b>		
WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of solid waste converted		
Amount of hazardous waste converted		
Other benefits:		
<b>SECTION 6 TAXPAYER CERTIFICATION</b>		
I hereby certify that the representations in this statement are true.		
Signature of authorized representative 	Title <b>VP, Asset Management</b>	Date signed (month, day, year) <b>5/5/2017</b>

**OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)  
THAT WAS APPROVED AFTER JUNE 30, 1991**

INSTRUCTIONS: (IC 6-1.1-12.1-5.1 and IC 6-1.1-12.1-5.9)

1. Not later than forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits (Form SB-1/Real Property).
2. If the property owner is found NOT to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination and the date, time and place of a hearing to be conducted by the designating body. The date of this hearing may not be more than thirty (30) days after the date this notice is mailed. A copy of the notice may be sent to the county auditor and the county assessor.
3. Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made reasonable efforts to substantially comply with the Statement of Benefits (Form SB-1/Real Property) and whether any failure to substantially comply was caused by factors beyond the control of the property owner.
4. If the designating body determines that the property owner has NOT made reasonable efforts to comply, then the designating body shall adopt a resolution terminating the property owner's deduction. If the designating body adopts such a resolution, the deduction does not apply to the next installment of property taxes owed by the property owner or to any subsequent installment of property taxes. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.

We have reviewed the CF-1 and find that:

- ☐ the property owner IS in substantial compliance
- ☐ the property owner IS NOT in substantial compliance
- ☐ other (specify) \_\_\_\_\_

Reasons for the determination (attach additional sheets if necessary)

Signature of authorized member

Date signed (month, day, year)

Attested by:

Designating body

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance. (Hearing must be held within thirty (30) days of the date of mailing of this notice.)

Time of hearing

- ☐ AM  
☐ PM

Date of hearing (month, day, year)

Location of hearing

**HEARING RESULTS (to be completed after the hearing)**

☐ Approved

☐ Denied (see instruction 4 above)

Reasons for the determination (attach additional sheets if necessary)

Signature of authorized member

Date signed (month, day, year)

Attested by:

Designating body

**APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]**

A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.



# MEMO

To: Hendricks County Council Members  
Cc: Nancy Marsh, County Auditor  
From: Jeff Pipkin, Executive Director  
Subject: 2017 Tax abatement reviews and recommendations

---

I-70 West LLC. – 1974 Innovation Blvd., Clayton, IN

- Real Property Investment – 10-year abatement (Year 2)
  - Estimated investment and employment
    - \$16,000,000
    - 0 FTEs, 0 salary (Awarded as a spec building)
  - Progress report
    - \$18,574,031
    - 1168 new positions, Average wage was \$13.53/hr. Annual payroll was \$12,325,427. 7.4% of the employees were a Hendricks County resident.
  - Recommendation: Company is in compliance.



007-326412-400017

**COMPLIANCE WITH STATEMENT OF BENEFITS  
REAL ESTATE IMPROVEMENTS**

State Form 51766 (R3 / 2-13)

Prescribed by the Department of Local Government Finance

**FILED**

**JUN 19 2017**

17/18

20 17 PAY 20 18

FORM CF-1 / Real Property

**PRIVACY NOTICE**

The cost and any specific individual's salary information is confidential; the balance of the filing is public record per IC 6-1.1-12.1-5.1 (c) and (d).

**INSTRUCTIONS:**

1. This form does not apply to property located in a residentially distressed area or any other area designated as such by the county auditor. Statement of Benefits was approved before July 1, 1991.
2. Property owners must file this form with the county auditor and the designating body for their review regarding the compliance of the project with the Statement of Benefits (Form SB-1/Real Property).
3. This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.
4. This form must also be updated each year in which the deduction is applicable. It is filed with the county auditor and the designating body before May 15, or by the due date of the real property owner's personal property return that is filed in the township where the property is located. (IC 6-1.1-12.1-5.1(b))
5. With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (Form CF-1/Real Property).

Nancy G. Marsh  
AUDITOR HENDRICKS COUNTY

SECTION 1 TAXPAYER INFORMATION	
Name of taxpayer 1-70 WEST LLC	County HENDRICKS
Address of taxpayer (number and street, city, state, and ZIP code) 1401 79TH STREET CAUSEWAY, MIAMI BEACH, FL 33141	DLGF taxing district number 013
Name of contact person KEN KERN, VICE PRESIDENT	Telephone number ( 317 ) 842-1166

SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY		
Name of designating body HENDRICKS COUNTY COUNCIL	Resolution number 2014-14	Estimated start date (month, day, year) 04/01/2014
Location of property 1974 INNOVATIONS BLVD., CLAYTON, IN 46118		Actual start date (month, day, year) 04/07/2014
Description of real property improvements 597,500 SQ. FT. DISTRIBUTION/WAREHOUSE SPEC BUILDING		Estimated completion date (month, day, year) 11/01/2014
		Actual completion date (month, day, year) 05/10/2016

SECTION 3 EMPLOYEES AND SALARIES		
EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current number of employees	0	1,168
Salaries	0	11,930,691.
Number of employees retained	0	0
Salaries	0	0
Number of additional employees	0	0
Salaries	0	0

SECTION 4 COST AND VALUES		
COST AND VALUES	REAL ESTATE IMPROVEMENTS	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE
Values before project	0	0
Plus: Values of proposed project	16,000,000.	0
Less: Values of any property being replaced		
Net values upon completion of project	16,000,000	0
ACTUAL	COST	ASSESSED VALUE
Values before project	0	0
Plus: Values of proposed project		
Less: Values of any property being replaced		
Net values upon completion of project	18,574,031.	20,401,300

SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER		
WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of solid waste converted		
Amount of hazardous waste converted		
Other benefits:		

SECTION 6 TAXPAYER CERTIFICATION		
I hereby certify that the representations in this statement are true.		
Signature of authorized representative 	Title VICE PRESIDENT	Date signed (month, day, year) 6/16/17

**OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)  
THAT WAS APPROVED AFTER JUNE 30, 1991**

INSTRUCTIONS: (IC 6-1.1-12.1-5.1 and IC 6-1.1-12.1-5.9)

1. Not later than forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits (Form SB-1/Real Property).
2. If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination and the date, time and place of a hearing to be conducted by the designating body. The date of this hearing may not be more than thirty (30) days after the date this notice is mailed. A copy of the notice may be sent to the county auditor and the county assessor.
3. Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made reasonable efforts to substantially comply with the Statement of Benefits (Form SB-1/Real Property) and whether any failure to substantially comply was caused by factors beyond the control of the property owner.
4. If the designating body determines that the property owner has **NOT** made reasonable efforts to comply, then the designating body shall adopt a resolution terminating the property owner's deduction. If the designating body adopts such a resolution, the deduction does not apply to the next installment of property taxes owed by the property owner or to any subsequent installment of property taxes. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.

We have reviewed the CF-1 and find that:

- ☐ the property owner IS in substantial compliance
- ☐ the property owner IS NOT in substantial compliance
- ☐ other (specify) \_\_\_\_\_

Reasons for the determination (attach additional sheets if necessary)

Signature of authorized member

Date signed (month, day, year)

Attested by:

Designating body

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance. (Hearing must be held within thirty (30) days of the date of mailing of this notice.)

Time of hearing

☐ AM  
☐ PM

Date of hearing (month, day, year)

Location of hearing

**HEARING RESULTS (to be completed after the hearing)**

☐ Approved

☐ Denied (see instruction 4 above)

Reasons for the determination (attach additional sheets if necessary)

Signature of authorized member

Date signed (month, day, year)

Attested by:

Designating body

**APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]**

A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.





# MEMO

To: Hendricks County Council Members  
Cc: Nancy Marsh, County Auditor  
From: Jeff Pipkin, Executive Director  
Subject: 2017 Tax abatement reviews and recommendations

---

Renk Systems Corporation 8880 Union Mills Dr., Camby, IN

- Real Property Investment – 10-year abatement (Year 3)
  - Estimated investment and employment
    - \$900,000
    - 5 FTEs, \$290,000 salary
  - Progress report
    - \$945,795
    - 7 new positions, Average wage was \$34.36/hr. Annual payroll was \$500,278.
  - Recommendation: My recommendation is that you find the building in compliance.



# COMPLIANCE WITH STATEMENT OF BENEFITS REAL ESTATE IMPROVEMENTS

State Form 51766 (R3 / 2-13)

Prescribed by the Department of Local Government Finance

20 17 PAY 20 18

FORM CF-1 / Real Property

## PRIVACY NOTICE

The cost and any specific individual's salary information is confidential; the balance of the filing is public record per IC 6-1.1-12.1-5.1 (c) and (d).

### INSTRUCTIONS:

1. This form does not apply to property located in a residentially distressed area or any deduction for which the Statement of Benefits was approved before July 1, 1991.
2. Property owners must file this form with the county auditor and the designating body for their review regarding the compliance of the project with the Statement of Benefits (Form SB-1/Real Property).
3. This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.
4. This form must also be updated each year in which the deduction is applicable. It is filed with the county auditor and the designating body before May 15, or by the due date of the real property owner's personal property return that is filed in the township where the property is located. (IC 6-1.1-12.1-5.1(b))
5. With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (Form CF-1/Real Property).

SECTION 1 TAXPAYER INFORMATION	
Name of taxpayer <b>RENK SYSTEMS CORPORATION</b>	County <b>Hendricks</b>
Address of taxpayer (number and street, city, state, and ZIP code) <b>8880 Union Mills Drive, Camby, IN 46113</b>	DLGF taxing district number <b>011</b>
Name of contact person <b>Kerstin Buchheister</b>	Telephone number <b>( 317 ) 455-1367</b>
SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY	
Name of designating body <b>Hendricks County Council</b>	Resolution number <b>12-12</b>
Location of property <b>8880 Union Mills Drive, Camby, IN 46113</b>	Estimated start date (month, day, year) <b>10/01/2012</b>
Description of real property improvements <b>Construction of Facility to facilitate assembly of test systems.</b>	Actual start date (month, day, year) <b>10/01/2012</b>
	Estimated completion date (month, day, year) <b>03/01/2014</b>
	Actual completion date (month, day, year) <b>03/01/2014</b>
SECTION 3 EMPLOYEES AND SALARIES	
EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1
Current number of employees	0
Salaries	500,278.00
Number of employees retained	0
Salaries	0.00
Number of additional employees	5
Salaries	290,000.00
	500,278.00
SECTION 4 COST AND VALUES	
COST AND VALUES	REAL ESTATE IMPROVEMENTS
AS ESTIMATED ON SB-1	ASSESSED VALUE
Values before project	150,000.00
Plus: Values of proposed project	900,000.00
Less: Values of any property being replaced	
Net values upon completion of project	1,050,000.00
ACTUAL	ASSESSED VALUE
Values before project	150,000.00
Plus: Values of proposed project	945,795.00
Less: Values of any property being replaced	
Net values upon completion of project	1,095,795.00
SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER	
WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1
Amount of solid waste converted	
Amount of hazardous waste converted	
Other benefits:	
SECTION 6 TAXPAYER CERTIFICATION	
I hereby certify that the representations in this statement are true.	
Signature of authorized representative <i>Kerstin Buchheister</i>	Title <i>Treasurer</i>
	Date signed (month, day, year) <i>05-04-2017</i>

**OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)  
THAT WAS APPROVED AFTER JUNE 30, 1991**

INSTRUCTIONS: (IC 6-1.1-12.1-5.1 and IC 6-1.1-12.1-5.9)

1. Not later than forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits (Form SB-1/Real Property).
2. If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination and the date, time and place of a hearing to be conducted by the designating body. The date of this hearing may not be more than thirty (30) days after the date this notice is mailed. A copy of the notice may be sent to the county auditor and the county assessor.
3. Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made reasonable efforts to substantially comply with the Statement of Benefits (Form SB-1/Real Property) and whether any failure to substantially comply was caused by factors beyond the control of the property owner.
4. If the designating body determines that the property owner has **NOT** made reasonable efforts to comply, then the designating body shall adopt a resolution terminating the property owner's deduction. If the designating body adopts such a resolution, the deduction does not apply to the next installment of property taxes owed by the property owner or to any subsequent installment of property taxes. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.

We have reviewed the CF-1 and find that:

- ☐ the property owner **IS** in substantial compliance
- ☐ the property owner **IS NOT** in substantial compliance
- ☐ other (specify) \_\_\_\_\_

Reasons for the determination (attach additional sheets if necessary)

Signature of authorized member

Date signed (month, day, year)

Attested by:

Designating body

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance. (Hearing must be held within thirty (30) days of the date of mailing of this notice.)

Time of hearing

- ☐ AM  
☐ PM

Date of hearing (month, day, year)

Location of hearing

**HEARING RESULTS (to be completed after the hearing)**

- ☐ Approved ☐ Denied (see instruction 4 above)

Reasons for the determination (attach additional sheets if necessary)

Signature of authorized member

Date signed (month, day, year)

Attested by:

Designating body

**APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]**

A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.



# MEMO

To: Hendricks County Council Members  
Cc: Nancy Marsh, County Auditor  
From: Jeff Pipkin, Executive Director  
Subject: 2017 Tax abatement reviews and recommendations

---

TT Quality Leasing LLC. 1671 Church St., Clayton, IN

- Real Property Investment – 10-year abatement (Year 1)
  - Estimated investment and employment
    - \$550,000
    - 23 FTEs, \$15.21/hr, \$727,800 annual payroll
  - Progress report
    - \$550,000
    - 22 new positions, Average wage was \$16.47/hr. Annual payroll was \$754,000.
  - Recommendation: My recommendation is that you find the building in compliance.

007-102412-456002

17/18



# COMPLIANCE WITH STATEMENT OF BENEFITS REAL ESTATE IMPROVEMENTS

State Form 51766 (R3 / 2-13)

Prescribed by the Department of Local Government Finance

20 17 PAY 20 18

FORM CF-1 / Real Property

## PRIVACY NOTICE

The cost and any specific individual's salary information is confidential; the balance of this form is public and per IC 6-1-1-12.1-5.1(b)(1) (added)

## INSTRUCTIONS:

1. This form does not apply to property located in a residentially distressed area or any deduction for which the Statement of Benefits was approved before July 1, 1991.
2. Property owners must file this form with the county auditor and the designating body for their review regarding the compliance of the project with the Statement of Benefits (Form SB-1/Real Property).
3. This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.
4. This form must also be updated each year in which the deduction is applicable. It is filed with the county auditor and the designating body before May 15, or by the due date of the real property owner's personal property return that is filed in the township where the property is located. (IC 6-1.1-12.1-5.1(b))
5. With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (Form CF-1/Real Property).

SECTION 1 TAXPAYER INFORMATION	
Name of taxpayer <b>TT Quality Leasing LLC</b>	County <b>Hendricks</b>
Address of taxpayer (number and street, city, state, and ZIP code) <b>3218 Cartersburg Rd., Danville, IN 46122</b>	DLGF taxing district number <b>32007</b>
Name of contact person <b>Dan Trivett</b>	Telephone number <b>( 317 ) 539-5150</b>

SECTION 2 LOCATION AND DESCRIPTION OF PROPERTY		
Name of designating body <b>Hendricks County Council</b>	Resolution number	Estimated start date (month, day, year) <b>April 30, 2015</b>
Location of property <b>1671 Church St., Clayton, IN 46118</b>		Actual start date (month, day, year) <b>Sep 24, 2015</b>
Description of real property improvements <b>5,000sf building expansion</b>		Estimated completion date (month, day, year) <b>June 30, 2016</b>
		Actual completion date (month, day, year) <b>Nov 19, 2016</b>

SECTION 3 EMPLOYEES AND SALARIES		
EMPLOYEES AND SALARIES	AS ESTIMATED ON SB-1	ACTUAL
Current number of employees	20	22
Salaries	538,800.00	754,000.00
Number of employees retained	20	22
Salaries	538,800.00	754,000.00
Number of additional employees	3	2
Salaries	189,000.00	178,000.00

SECTION 4 COST AND VALUES		
COST AND VALUES	REAL ESTATE IMPROVEMENTS	
AS ESTIMATED ON SB-1	COST	ASSESSED VALUE
Values before project		389,400.00
Plus: Values of proposed project	550,000.00	
Less: Values of any property being replaced		
Net values upon completion of project	550,000.00	
ACTUAL	COST	ASSESSED VALUE
Values before project		48,800.00
Plus: Values of proposed project	550,000.00	
Less: Values of any property being replaced		
Net values upon completion of project	550,000.00	

SECTION 5 WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER		
WASTE CONVERTED AND OTHER BENEFITS	AS ESTIMATED ON SB-1	ACTUAL
Amount of solid waste converted		
Amount of hazardous waste converted		
Other benefits:		

SECTION 6 TAXPAYER CERTIFICATION		
I hereby certify that the representations in this statement are true.		
Signature of authorized representative 	Title <b>VP</b>	Date signed (month, day, year) <b>5/2/2017</b>

**OPTIONAL: FOR USE BY A DESIGNATING BODY WHO ELECTS TO REVIEW THE COMPLIANCE WITH STATEMENT OF BENEFITS (FORM CF-1)  
THAT WAS APPROVED AFTER JUNE 30, 1991**

INSTRUCTIONS: (IC 6-1.1-12.1-5.1 and IC 6-1.1-12.1-5.9)

1. Not later than forty-five (45) days after receipt of this form, the designating body may determine whether or not the property owner has substantially complied with the Statement of Benefits (Form SB-1/Real Property).
2. If the property owner is found **NOT** to be in substantial compliance, the designating body shall send the property owner written notice. The notice must include the reasons for the determination and the date, time and place of a hearing to be conducted by the designating body. The date of this hearing may not be more than thirty (30) days after the date this notice is mailed. A copy of the notice may be sent to the county auditor and the county assessor.
3. Based on the information presented at the hearing, the designating body shall determine whether or not the property owner has made reasonable efforts to substantially comply with the Statement of Benefits (Form SB-1/Real Property) and whether any failure to substantially comply was caused by factors beyond the control of the property owner.
4. If the designating body determines that the property owner has **NOT** made reasonable efforts to comply, then the designating body shall adopt a resolution terminating the property owner's deduction. If the designating body adopts such a resolution, the deduction does not apply to the next installment of property taxes owed by the property owner or to any subsequent installment of property taxes. The designating body shall immediately mail a certified copy of the resolution to: (1) the property owner; (2) the county auditor; and (3) the county assessor.

We have reviewed the CF-1 and find that:

- ☐ the property owner **IS** in substantial compliance
- ☐ the property owner **IS NOT** in substantial compliance
- ☐ other (specify) \_\_\_\_\_

Reasons for the determination (attach additional sheets if necessary)

Signature of authorized member

Date signed (month, day, year)

Attested by:

Designating body

If the property owner is found not to be in substantial compliance, the property owner shall receive the opportunity for a hearing. The following date and time has been set aside for the purpose of considering compliance. (Hearing must be held within thirty (30) days of the date of mailing of this notice.)

Time of hearing

☐ AM

☐ PM

Date of hearing (month, day, year)

Location of hearing

**HEARING RESULTS (to be completed after the hearing)**

☐ Approved

☐ Denied (see instruction 4 above)

Reasons for the determination (attach additional sheets if necessary)

Signature of authorized member

Date signed (month, day, year)

Attested by:

Designating body

**APPEAL RIGHTS [IC 6-1.1-12.1-5.9(e)]**

A property owner whose deduction is denied by the designating body may appeal the designating body's decision by filing a complaint in the office of the Circuit or Superior Court together with a bond conditioned to pay the costs of the appeal if the appeal is determined against the property owner.

0/0 allocation

**HENDRICKS COUNTY COUNCIL  
INNKEEPERS' AMENDED TAX ORDINANCE  
ORDINANCE NO. 2005-34**

WHEREAS, it has been the policy and expressed desire of Hendricks County, State of Indiana to promote and encourage development and tourism within Hendricks County and the respective municipalities located therein; and

WHEREAS, the General Assembly of the State of Indiana has recognized the necessity and propriety of funding such activities at the local level by enacting IND. CODE 6-9-18, the Uniform County Innkeeper's Tax, which chapter has enabled Hendricks County, by and through its County Council, to levy an Innkeepers' Tax in furtherance of the policy hereinabove stated; and

WHEREAS, pursuant to IND. CODE 6-9-18, the Uniform County Innkeepers' Tax, the Hendricks County Council has, by Ordinance No. 38-1997 dated 7 October 1997, levied such a tax at the rate of five percent (5%) effective 1 January 1998, and the Board of Commissioners of Hendricks County, pursuant to IND. CODE 6-9-18-5, created a commission to promote the development and growth of the convention, visitor, and tourism industry in the county, that commission being the Hendricks County Tourism Commission (hereinafter "the Commission"); and

WHEREAS, the General Assembly of the State of Indiana has, by IND. CODE 6-9-37, effective 1 July 2005, enabled Hendricks County, by and through its County Council, to increase its Innkeeper's Tax and levy an Innkeeper's Tax at a rate not to exceed eight percent (8%); and

WHEREAS, IND. CODE 6-9-37-4 (c) provides in part that those Innkeeper's Tax collections in excess of the rate of five percent (5%) be expended: "(1) to promote and or encourage conventions, visitors, and tourism within the county; and (2) for the development of a county park, a county fairground, or a county promotion."; and

WHEREAS, IND. CODE 6-9-37-4 further requires that such Innkeeper's Tax collections in excess of a rate of five percent (5%) be divided equally between those purposes described in IND. CODE 6-9-37-4 (c) (1) and those in IND. CODE 6-9-37-4 (c) (2); and

WHEREAS, the Hendricks County Council, by virtue of its role of reviewing budget requests of county offices, departments, and agencies, is in a superior position to assess the relative need for such funds for the purposes set forth in IND. CODE 6-9-37-4 (c)(2);

NOW, THEREFORE, BE IT ORDAINED by the Hendricks County Council that, effective 1 October 2005, the aforesaid Hendricks County Council Ordinance No. 38-1997 be amended in its entirety and superseded by this Ordinance, subject to IND. CODE 6-9-37, as follows:

SECTION I:

a) A tax is hereby levied on every hotel, motel, or inn engaged in the business of renting or furnishing, for periods of less than thirty (30) days, any room or rooms, lodgings, or accommodations located in Hendricks County, Indiana.

b) The tax does not apply to gross income received in a transaction <sup>in</sup> ~~is~~ which a person rents any room or rooms, lodgings, or accommodations for a period of thirty (30) days or more.

c) The tax shall be levied at the rate of eight percent (8 %) on the gross retail income



derived from lodging income only and is in addition to the state gross retail tax imposed under I.C. 6-2.5.

d) The tax shall be reported on forms approved by the Hendricks County Treasurer and shall be paid monthly to the Hendricks County Treasurer not more than twenty (20) days after the end of the month in which the tax is collected. The provisions of IND. CODE 6-2.5 relating to rights, duties, liabilities, procedures, penalties, definitions, and administration are applicable to the imposition and administration of the tax imposed under IND. CODE 6-9-37-3 and this Ordinance except to the extent those provisions are in conflict or inconsistent with the specific provisions of IND. CODE 6-9-37, or of this Ordinance, or the requirements of the Hendricks County Treasurer.

## SECTION II:

a) The Treasurer of Hendricks County shall establish a convention, visitor, and tourism promotion fund (hereinafter "the Fund") and shall deposit in such fund all amounts received under this Amended Ordinance, pursuant to IND. CODE 6-9-37.

b) The Hendricks County Auditor shall issue a warrant directing the Treasurer of Hendricks County to transfer money from the convention, visitor, and tourism fund to the treasurer of the Commission if the Commission submits a written request for the transfer.

c) The Hendricks County Council shall, for the period from 31 October through 31 December 2005 and for each calendar year thereafter, designate to the Commission for inclusion in its proposed budget the entity or entities which are to receive for that year or part of a year the one-half (1/2) of the Innkeeper's Tax revenues in excess of five percent (5%) to be used for the purposes set out in IND. CODE 6-9-37-4(c)(2). If more than one entity is to share such revenues, the Hendricks County Council shall designate the ratio of those shares.

d) The treasurer of the Commission shall, upon receipt of such transfer after 31 October 2005, immediately distribute to the treasurer of such entity or organization designated by the Hendricks County Council to receive one-half (1/2) of the Innkeeper's Tax revenues in excess of five percent (5%) to be used for the purposes set out in IND. CODE 6-9-37-4(c)(2).

### SECTION III:

a) Monies collected pursuant to this Ordinance and deposited into the Fund after 31 October 2005, and including interest attributable thereto, may be expended only for those purposes set forth in IND. CODE 6-9-37-4(c).

b) The Commission shall, not later than 30 June each year, submit its proposed budget for the following calendar year to the Hendricks County Auditor for preparation for submission to the Hendricks County Council for its review and approval. No expenditure may be made by the Commission unless it is in accordance with an appropriation made by the Hendricks County Council in the manner provided by law.

c) Expenditure of funds in excess of the previous Innkeeper's Tax rate of five percent (5%) deposited in the year 2005 after 31 October may be made by an emergency appropriation requested of and approved by the Hendricks County Council.

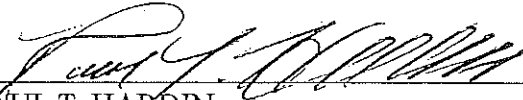
### SECTION IV:

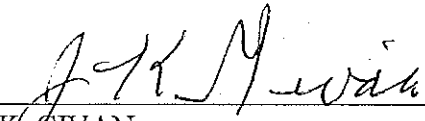
Any entity, person, corporation, or other business described in Section I of this Ordinance shall begin collection of the tax at the rate imposed by this Ordinance on the first (1<sup>st</sup>) day of October, 2005.

ADOPTED by the County Council of Hendricks County, Indiana, this 25<sup>th</sup> day of

August

, 2005.

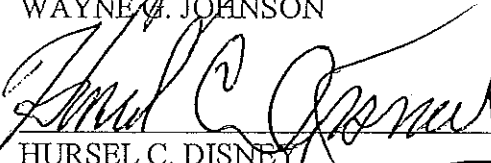
  
PAUL T. HARDIN


  
J. K. GIVAN

  
RICHARD A. THOMPSON

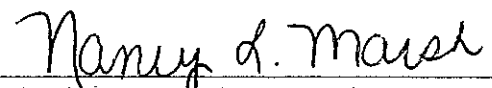
\_\_\_\_\_  
JAY R. PUCKETT

  
WAYNE G. JOHNSON

  
HURSEL C. DISNEY

  
LARRY R. HESSON

ATTEST:

  
NANCY L. MARSH, Hendricks County Auditor

# Memo

**To:** Hendricks County Council

**From:** Erin Hughes, Human Resources

**Date:** July 23, 2017

**Re:** Job Descriptions

Items for discussion at your meeting Tuesday:

1. The Nursing Health Department and Healthy Families Department has added a sentence under working conditions and physical demand. The sentence reads: This position works with at risk populations such as infants and acutely/chronically ill patients who may be more susceptible to vaccine preventable diseases; therefore this position will comply with the department's Personnel Immunizations Policy. This is not a change in classification for these positions.
  - Family Resource Specialist Budget Numbers: 18708, 18709
  - Family Support Specialist Budget Numbers: 18701, 18705, 18704
  - Program Supervisor Budget Number: 18702
  - Program Manager Budget Number: 18703
  - Program Director Budget Number: 18700
  - Administrative Assistant/Billing Specialist Budget Number: 18615
  - Assistant Director of Public Health Nursing Budget Number: 18612
  - Director of Public Health Nursing Budget Number: 18603
  - Health Officer Budget Number: 18600
  - Public Health Education Specialist Budget Number: 18625
  - Public Health Nurse Budget Number: 18607, 18623, 18610, 18620, 18623
2. The Healthy Families Department has changed the Family Support Specialist and Family Resource Specialist supervisor from Healthy Families Program Supervisor to Healthy Families Program Manager. This is not a change in classification.
3. The Health Department has changed the supervisor of the Part-time Public Health Specialist from Public Health Specialist to Environmental/Nursing Health Directors. This is not a change in classification.
4. The Sheriff's Department has updated one job description. I have reviewed the following job description and recommend the classification below:
  - Public Information Officer/Quartermaster/Support Services Commander  
FLSA: Exempt Pay Band: Merit Captain Budget Number- 10538

5. The Prosecutor's Department has updated one job description to add the word part-time. I have reviewed the following job description and recommend the classification below:

- Part-time Deputy Prosecutor FLSA: Exempt Pay Band: PAT 1  
Budget Number- 10825

### EMERGENCY APPROPRIATION RESOLUTION

Whereas, certain extraordinary emergencies have developed since the adoption of the existing budget, so that it is necessary to appropriate more money than was appropriated in the annual budget; therefore, to meet such extraordinary emergencies;

Be it resolved by the County Council of Hendricks County, Indiana, that for the expense of said County the following additional sums of money are hereby appropriated and ordered set apart out of the several funds as herein and for the purpose herein specified, subject to the laws governing the same.

<u>ADDITIONAL APPROPRIATIONS</u>					
	<u>DEPARTMENT</u>	<u>ACCOUNT #</u>	<u>DESCRIPTION</u>	<u>REQUESTED</u>	<u>APPROVED</u>
1	Prosecutor	1001.10899.000.0108	Overtime	\$5,500	
2	Prosecutor (tabled 5/2 & 6/6)	1001.10815.000.0108	Full Time Deputy Prosecutor	\$30,406	
3	Prosecutor Pre-Trial Diversion	2501.10868.000.0108	Part Time Prosecutor	\$19,548	
4	Prosecutor - STOP Grant	8102.10802.000.0108	Deputy Prosecutor - Stop	\$23,546	
5	Coroner	1001.33800.000.0107	Autopsy & Lab Fees	\$50,000	
6	Court Administration	1001.13902.000.0160	Court Reporter to FT	\$2,000	
7	Assessor - Reassessment	1188-37780-000-0109	Pictometry	\$112,500	
8	Probation Home Detention	4922.15102.000.0151	Probation Officer	\$1,210	
9	Probation Adult User Fees	2505.15102.000.0151	Probation Officer	\$303	
10	Healthy Families Federal Grant	8149.18701.000.0214	Family Support Specialist PAT 5	\$30,085	
11	Healthy Families Federal Grant	8149.18702.000.0214	Program Supervisor SAM 7	\$20,676	
12	Healthy Families Federal Grant	8149.18703.000.0214	Program Manager SAM 6	\$48,901	
13	Healthy Families Federal Grant	8149.18704.000.0214	Family Support Specialist PAT 5	\$15,538	
14	Healthy Families Federal Grant	8149.18705.000.0214	Family Support Specialist PAT 5	\$14,997	
15	Healthy Families Federal Grant	8149.18708.000.0214	Family Resource Specialist PAT 5	\$16,068	
16	Healthy Families Federal Grant	8149.13590.000.0214	FICA/Medicare	\$11,190	
17	Healthy Families Federal Grant	8149.13591.000.0214	PERF	\$20,770	
18	Healthy Families Federal Grant	8149.13592.000.0214	Group Health Insurance	\$33,106	
19	Healthy Families Federal Grant	8149.13593.000.0214	Unemployment Insurance	\$516	
20	Healthy Families Federal Grant	8149.13594.000.0214	Worker's Compensation	\$410	
21	Healthy Families Local	9121.20100.000.0214	Office Supplies	\$700	
22	Healthy Families Local	9121.21002.000.0214	Other Supplies	\$250	
23	Healthy Families Local	9121.30201.000.0214	Professional Fees	\$3,300	
24	Healthy Families Local	9121.30500.000.0214	Education & Conferences	\$6,000	
25	Healthy Families Local	9121.39200.000.0214	Dues & Assessments	\$100	
26	Healthy Families Local	9121.32600.000.0214	Telephone	\$1,500	
27	Healthy Families Local	9121.33000.000.0214	Mileage and Travel	\$6,400	
28	Healthy Families Local	9121.34500.000.0214	Printing & Advertising	\$5,500	
29	Healthy Families Local	9121.39900.000.0214	Miscellaneous	\$250	
30	Healthy Families Local	9121.30700.000.0214	Match Healthy Families Grant	\$65,992	
31	Food & Beverage	1157.90101.000.0102	Interfund Transfer to HCSWD	-\$1,500,000	
32	Solid Waste Construction	4615.41175.000.0136	HCSWD Building Construction	-\$1,500,000	

Adopted this 1st day of August 2017 by the following vote:

AYE

NAY

\_\_\_\_\_  
Caleb M. Brown

\_\_\_\_\_  
Caleb M. Brown

\_\_\_\_\_  
Larry R. Hesson

\_\_\_\_\_  
Larry R. Hesson

\_\_\_\_\_  
Jay R. Puckett

\_\_\_\_\_  
Jay R. Puckett

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Michael C. Rogers

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Michael C. Rogers

---

Eric Wathen

---

Eric Wathen

---

Brad Whicker

---

Brad Whicker

---

David Wyeth

---

David Wyeth

Attest:

---

Nancy Marsh, Auditor

# REQUEST FOR EMERGENCY APPROPRIATION

Date: 06/13/17

Amount: \$ 5,500

Fund Name: County General

(Example - County General)

Account Name: Overtime

(Example - Supplies)

Account Number: 1001 10899 000 0108

Example -

Fund #	Account #	Object #	Location #
100	20100	000	102

Explanation of Request:

OVERTIME NEED FOR JURY TRIAL PREP AND DURING JURY TRIALS  
TO FINISH OUT 2017.

☒ I will be attending the Council meeting.

☐ I will not be attending the Council meeting.

*Patricia Ann Baldwin / MSC*

Authorized Signature

Auditor's Notes:

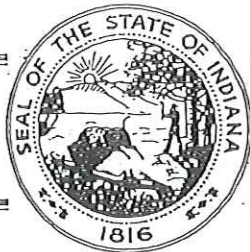
*Tabled  
7/5/17  
#1*



PATRICIA ANN BALDWIN  
Prosecuting Attorney

JAMES E. BRYAN  
Chief Deputy

HENDRICKS COUNTY PROSECUTOR  
6 SOUTH JEFFERSON ST.  
DANVILLE, IN 46122



Telephone: (317) 745-9283  
Fax: (317) 745-9290

April 6, 2017

To: Nancy Marsh  
Tami Mitchell  
Hendricks County Auditor's Office

From: Patricia Ann Baldwin  
Hendricks County Prosecutor's Office

Re: New Full Time Deputy Prosecutor Position and New Part Time Deputy Prosecutor Position

Dear Nancy and Tami:

This letter is to inform you that I need put on the County Council meeting for May 2017 for the following new positions and please advertise the following:

Full Time Deputy Prosecutor for \$65,879.00 annually in case the State takes away a State paid position in July Of 2017.

Part Time Deputy Prosecutor for 7 hours a week at the hourly rate of \$36.20. We would need additional appropriation in the amount of \$7,602.00.

Sincerely

*P A Baldwin*  
Patricia Ann Baldwin  
Prosecuting Attorney

PAB/mjc

#2

From

Tabled 5/9/17 +

6/6/17

7/5/17

1/2 year 30,406

#

1001-10815-000-0108

#2

1001-10813-000-0108

AKS ✓  
PAB ✓

July

REQUEST FOR EMERGENCY APPROPRIATION

Date: 05/31/17

Amount: ~~\$ 20~~

19,548

Fund Name: Pre-Trial Diversion Fee Fund

(Example - County General)

Account Name: P.T. Deputy Prosecutor Payroll

(Example - Supplies)

Account Number: 2501 . 99999 . 000 . 0108

Example -

Fund #  
100

Account #  
20100

Object #  
000

Location #  
102

Tabbed  
7-5-17

#3

Explanation of Request:

New Position for P.T. Deputy Prosecutor needed to help with  
extra work in Hendricks County Courts and town courts.

X I will be attending the Council meeting.

       I will not be attending the Council meeting.

Patricia Ann Balducci / mjc

Authorized Signature

Auditor's Notes:

# REQUEST FOR EMERGENCY APPROPRIATION

Date: 06/19/17

Amount: \$ 23,546

Fund Name: STOP Grant

(Example – County General)

Account Name: Deputy Prosecutor - STOP

(Example – Supplies)

Account Number: 8102 10802 000 108

Example –

Fund #  
100

Account #  
20100

Object #  
000

Location #  
102

## Explanation of Request:

Grant award letter attached. For years the grant amount was \$20,888,  
has been increased. The difference between STOP Deputy Prosecutor's pay  
and the grant is appropriated and paid from General Fund.

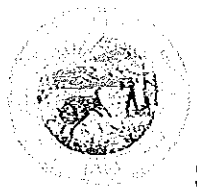
X I will be attending the Council meeting.

       I will not be attending the Council meeting.



Authorized Signature

Auditor's Notes:



## STATE OF INDIANA



Eric J. Holcomb, Governor  
David R. Murtaugh, Executive Director

### Notice of STOP Award

06/14/2017

Patricia A. Baldwin  
6 S. Jefferson St.  
Danville, IN 46122

Re: STOP

State Agency: Indiana Criminal Justice Institute  
Program/Title: Special Prosecutor for Crimes Against Women Cases

CFDA # 16.588  
Award# 6208

Dear Patricia A. Baldwin:

On behalf of the Indiana Criminal Justice Institute (ICJI) I am pleased to notify you of a grant award approved for your agency. After a careful review by ICJI, your organization was selected to receive an award from the STOP fund in the amount of \$23,546.00. The period of performance for your award will be 07/01/2017 through 06/30/2018.

Upon receipt of this notification please login to E-grants to revise and amend the following portions of your grant application if necessary:

1. Goals and Objectives / Outputs and Outcomes
2. Budget detail

As you know, the ICJI must ensure all grantees meet the required federal, state and local special and reporting conditions applicable to all grants. These terms and conditions will be listed in your forthcoming grant agreement. ICJI has yet to receive the FY18 STOP award from the Office for Violence Against Women. Though the award period will begin July 1, 2017, ICJI is not able to execute grant agreements or provide reimbursements for these awards until we receive the statewide award. It is anticipated that this may not occur until late 2017 according to guidance provided by the federal government.

The ICJI strongly encourages all grantees to utilize innovative, data and outcome driven approaches to meet the goals and objectives outlined in your application. Successful programs serve as a model for other similar programs throughout the state. ICJI knows you will utilize the funds in ways that will maximize the effectiveness and positive impact of your program on the community.

If you have any questions about your grant award, please contact Marilyn Pineda at [MPineda@cji.in.gov](mailto:MPineda@cji.in.gov) or 317-232-7048. Congratulations, and we are looking forward to working with you throughout the duration of this project.

Sincerely,

David Murtaugh  
Executive Director  
Indiana Criminal Justice Institute



## REQUEST FOR EMERGENCY APPROPRIATION

Date: July 6, 2017

Amount: 50,000.00

Fund Name: CORONER

(Example- County General)

Account Name: Autopsy and Lab Fees

(Example- Supplies)

Account Number: 100-33800-000-107

Example: Fund # - Account # - Object # - Location #  
100 - 20100 - 000 - 102

Explanation of Request: Additional funds needed to complete the year.  
Original appropriation of \$100,000.00 is currently at \$25,393.00. There are  
outstanding claims still out that would total about \$10,000.00. Since we are  
just half way through the year, the additional appropriation is needed to  
finish the year as can be estimated.

☐ I will be attending the Council meeting.

☒ I will not be attending the Council meeting.

 7/6/17

Coroner Hendricks County

**FILED**

JUL 07 2017

Nancy A. Marsh  
AUDITOR HENDRICKS COUNTY

## REQUEST FOR EMERGENCY APPROPRIATION

Date: 7/14/17

Amount: \$2,000

Fund Name: General Fund

(Example – County General)

#6

Account Name: Court Reporter

(Example – Supplies)

Account Number: 1001 13902 000 0160

Example –

Fund #  
100

Account #  
20100

Object #  
000

Location #  
102

### Explanation of Request:

For several years, this appropriation has been funded as a PT position.

Currently, two part-time employees job-share this appropriation.

We are respectfully requesting that this position be converted to a FT position.

This way, Circuit Court's staffing will be consistent with that of the  
5 superior courts.

X I will be attending the Council meeting.

       I will not be attending the Council meeting.

s/Catherine Haines

Authorized Signature

Auditor's Notes:

	Wages	FICA & Medicare	PERF	Group Insurance	Worker's Comp	Unemployment Insurance	Total	
FT Reporter	\$9,580.20	\$732.89	\$1,360.39	\$2,555.80	\$86.00	\$16.29	\$14,331.56	
PT Reporter	\$7,664.16	\$586.31	\$1,088.31	\$0.00	\$0.00	\$13.03	\$9,351.81	\$21,617.03
FT Clerk	\$7,463.40	\$570.95	\$1,059.80	\$2,555.80	\$86.00	\$12.69	\$11,748.64	\$21,100.45
PT Clerk	\$5,970.72	\$456.76	\$847.84	\$0.00	\$0.00	\$10.15	\$7,285.47	

\*\*\*\$516.58 more for the FT Court Reporter with a PT Clerk

#6

August 1

## REQUEST FOR EMERGENCY APPROPRIATION

Date: 07/10/17

Amount: \$ 112,500

Fund Name: Reassessment

(Example - County General)

Account Name: Pictometry

(Example - Supplies)

Account Number: 1188 37780 000 0109

Example -

Fund #  
100

Account #  
20100

Object #  
000

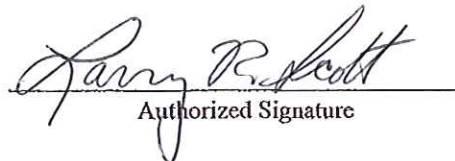
Location #  
102

### Explanation of Request:

Adjustment to correct typographical error \$12,500 which should have  
been \$125,000.

☒ I will be attending the Council meeting.

☐ I will not be attending the Council meeting.

  
Authorized Signature

Auditor's Notes:



## REQUEST FOR EMERGENCY APPROPRIATION

Date: 07/24/17

Amount: \$ 1,210

Fund Name: HOME DETENTION FEE FUND  
(Example -- County General)

#8

Account Name: PROBATION OFFICER  
(Example -- Supplies)

Account Number: 4922 15102 000 0151  
Example - Fund # Account # Object # Location #  
100 20100 000 102

### Explanation of Request:

NEW PROBATION OFFICER SALARY IS HIGHER THAN CURRENT ONE  
BASED ON THE 2017 MINIMUM JUDICIAL CENTER SALARY SCHEDULE.  
FOR PROBATION OFFICERS.

☒ I will be attending the Council meeting.  
☐ I will not be attending the Council meeting.

Auditor's Notes:

Susan Bentley  
Authorized Signature

# REQUEST FOR EMERGENCY APPROPRIATION

Date: 07/24/17

Amount: \$ 303

Fund Name: ADULT USER FEE FUND

(Example - County General)

#9

Account Name: PROBATION OFFICER

(Example - Supplies)

Account Number: 2005 15102 000 0151

Example -

Fund #  
100

Account #  
20100

Object #  
000

Location #  
102

## Explanation of Request:

NEW PROBATION OFFICER SALARY IS HIGHER THAN CURRENT ONE  
BASED ON THE 2017 MINIMUM JUDICIAL CENTER SALARY SCHEDULE.  
FOR PROBATION OFFICERS.

☒ I will be attending the Council meeting.  
☐ I will not be attending the Council meeting.

Auditor's Notes:

Susan Bentley  
Authorized Signature

**To:** Erin Hughes; Tamela D. Mitchell; Carrie E. Lofton  
**Subject:** resignation/new hire

Ladies:

Meg Morguson submitted her resignation this morning. Her last day will be 8/18/17. Because we so recently interviewed for a probation officer position, the Judges have approved me to extend an offer to our second highest scored candidate from the last interviews we just completed. That candidate is Rebecca Schrock. Given her experience and IOCS salary scale, her salary will be above the midpoint and I will need to go before Council to request approval. Please let me know when that will be and if you need anything else from me!

Thanks!

Susan Bentley  
Hendricks County Chief Probation Officer  
101 West Marion Street  
Danville, IN 46122  
Work-317-745-9247  
Cell-317-590-3298  
Fax-317-745-9319

#10-20

ID YEAR CO TYPE KEY

BUDGET ESTIMATE FOR

8149 Healthy Families Federal

(Office, Board, Commission, Department, Institution or Fund)

0214 Health

Hendricks

(If City, Town or Fire Protection District Budget, Enter Name)

(If County Budget, Enter County Name)

For Calendar Year 2017-2018

	Items	Total Estimate	Approved
<b>1 PERSONAL SERVICES</b>			
Salaries and Wages			
18701 Family Support Specialist (PAT 5) H. Kline	30,085.00		
18702 Program Supervisor (SAM 7) R. Robinson	20,876.00		
18703 Program Manager (SAM 5) L. Truitt	48,901.00		
18704 Family Support Specialist (PAT 5) T. Campbell	15,538.00		
18705 Family Support Specialist (PAT 5) J. Lowe	14,997.00		
18708 Family Resource Specialist (PAT 5) A. Parker	16,068.00		
18709			
		146,265.00	
Employee Benefits			
13590 FICA/Medicare	11,190.00		
13591 PERF	20,770.00		
13592 Group Health Insurance	33,106.00		
13593 Unemployment Insurance	516.00		
13594 Workers's Compensation	410.00	65,992.00	
Other Personal Services			
		0.00	
Total Personal Services		212,257.00	
<b>2 SUPPLIES</b>			
Office Supplies			
		0.00	
Operating Supplies			
		0.00	
Repair and Maintenance Supplies			
		0.00	
Other Supplies			
		0.00	
Total Supplies		0.00	

		Items	Total Estimate	Approved
3 OTHER SERVICES AND CHARGES	Professional Services			
			0.00	
	Communication and Transportation			
			0.00	
	Printing and Advertising			
			0.00	
	Insurance			
			0.00	
	Utility Services			
			0.00	
	Repairs and Maintenance			
			0.00	
	Rentals			
			0.00	
	Debt Service			
			0.00	
	Other Services and Charges			
			0.00	
			0.00	
Total Other Services and Charges			0.00	

	Items	Total Estimate	Approved
<b>4 CAPITAL OUTLAYS</b>			
Land			
		0.00	
Buildings			
		0.00	
Improvements Other Than Building			
		0.00	
Machinery and Equipment			
		0.00	
Other Capital Outlays			
		0.00	
Total Capital Outlays		0.00	0.00
<b>TOTAL BUDGET ESTIMATE</b>		<b>212,257.00</b>	<b>0.00</b>

(I) (We) hereby certify that the foregoing is a true and fair estimate of the necessary expense of the \_\_\_\_\_

8149 Healthy Families Federal, 0214 Health Department  
(Name of Office, Board, Commission, Department, Institution or Fund)

for the calendar year 2017-2018 for the purposes therein specified.

Dated this 6 day of JULY, 2017

*D. J. Smith MD / TLB*  
County Health Officer

Signature and Title of Officer(s) or Department Head

#21-30

ID YEAR CO TYPE KEY

BUDGET ESTIMATE FOR

9121 Healthy Families Local

(Office, Board, Commission, Department, Institution or Fund)

0214 Health

(If City, Town or Fire Protection District Budget, Enter Name)

Hendricks

(If County Budget, Enter County Name)

For Calendar Year 2017-2018

	Items	Total Estimate	Approved
<b>1 PERSONAL SERVICES</b>			
Salaries and Wages			
		0.00	
Employee Benefits			
		0.00	
Other Personal Services			
		0.00	
Total Personal Services		0.00	
<b>2 SUPPLIES</b>			
Office Supplies			
20100 Office Supplies	700.00		
210020 Other Supplies	250.00		
		950.00	
Operating Supplies			
		0.00	
Repair and Maintenance Supplies			
		0.00	
Other Supplies			
		0.00	
Total Supplies		950.00	

	Items	Total Estimate	Approved
<b>3 OTHER SERVICES AND CHARGES</b>			
Professional Services			
30201 Professional Fees	3,300.00		
30500 Education & Conferences	6,000.00		
39200 Dues & Memberships	100.00		
		9,400.00	
Communication and Transportation			
32600 Telephones	1,500.00		
33000 Mileage & Travel	6,400.00		
		7,900.00	
Printing and Advertising			
34500 Printing & Advertising	5,500.00		
		5,500.00	
Insurance			
		0.00	
Utility Services			
		0.00	
Repairs and Maintenance			
		0.00	
Rentals			
		0.00	
Debt Service			
		0.00	
Other Services and Charges			
39900 Miscellaneous	250.00		
30700 Match Healthy Families Grant	65,992.00		
		66,242.00	
<b>Total Other Services and Charges</b>		<b>89,042.00</b>	



	Items	Total Estimate	Approved
4 CAPITAL OUTLAYS			
Land			
		0.00	
Buildings			
		0.00	
Improvements Other Than Building			
		0.00	
Machinery and Equipment			
		0.00	
Other Capital Outlays			
		0.00	
Total Capital Outlays		0.00	0.00
TOTAL BUDGET ESTIMATE		89,892.00	0.00

(I) (We) hereby certify that the foregoing is a true and fair estimate of the necessary expense of the \_\_\_\_\_

9121 Healthy Families Local, 0214 Health Department  
(Name of Office, Board, Commission, Department, Institution or Fund)

for the calendar year 2017-2018 for the purposes therein specified.

Dated this 6 day of July, 2017

*Debra Lynn Moore / TLB*  
County Health Officer

Signature and Title of Officer(s) or Department Head

# Reductions

# 31432

**Nancy Marsh**

**Subject:** FW: Solid Waste District Building Project

**From:** Lenn Detwiler [<mailto:ldetwiler@hendrickssolidwaste.com>]  
**Sent:** Tuesday, July 25, 2017 10:29 AM  
**To:** Eric Wathen\_personal; Nancy Marsh  
**Cc:** 'Marcia Lynch'; Kevin Cavanaugh; Caleb M. Brown; 'Brad Whicker'  
**Subject:** Solid Waste District Building Project

Eric & Nancy,

I'm writing to let you know that the Solid Waste District's Board of Directors voted unanimously this morning to not move ahead with the building project as bid. The long-term financial realities of the project simply didn't work. The Board did express its appreciation for the County Council's willingness to try to help us find a path forward; you have my appreciation as well.

At this point, the District is hopeful that we can work with our current architect to develop a building design that fits our budget. Additionally, we will be looking around the county for properties that could be purchased or leased that might also fit our needs.

As a result, the Council does not need to take any action related to the additional appropriation request that was advertised for next week's meeting.

Nancy: the SWMD did approve 2018 budget figures based on not moving ahead with the building project. I will be uploading those into Gateway in the near future and will let you know when I've got them entered.

Please let me know if you have any questions.

Thanks again for all of your help to this point,  
Lenn

**Lenn Detwiler**  
**Executive Director**  
**Office: (317) 858-6070**  
**Mobile: (317) 694-5991**

County Sheriff's Report of Receipts and  
Disbursements of the Commissary Fund

For the Period of January 1, 2017 thru June 30, 2017

Pursuant to IC 36-8-10-21, I, Brett A Clark, County Sheriff, certify that the following report is a true and accurate record of the receipts and disbursements of the Sheriff's Commissary Fund for the above listed period.

Balance ending January 1, 2017 \$177,965.13

Receipts for Period:

Commissary Commissions	\$ 36,132.05
Donation	\$ 7,265.65
Inmate Phone & Video Visitation	\$191,447.95
Inmate Reimbursements	\$ 1,025.72
Inmate E-cigs	\$ 49,708.53
Cell Phone Reimbursements	\$ 599.97
Miscellaneous -- Bank fees	\$ 132.42

Total Receipts for the Period: \$286,312.29

Area of Benefit:

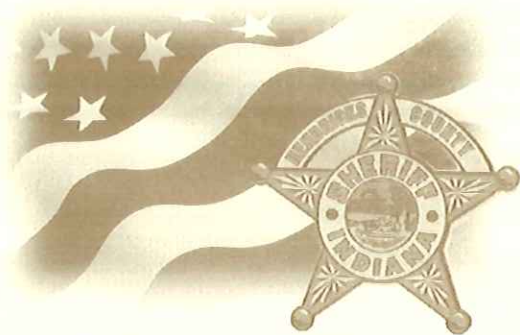
Donation	\$ 7,265.65
Equipment	\$126,904.91
Inmate Expense	\$ 43,297.67
Printing & Advertising	\$ 984.00
Office Supplies	\$ 574.40
Repairs to Jail	\$ 66,966.64
Contract Services	\$ 31,521.12
Training	\$ 6,970.18
Uniforms	\$ 34.00
Inmate Trust Reimbursement	\$ 72,082.29
Miscellaneous -- Bank fees, Testing (new hires)	\$ 3,192.17

Total Disbursements for the period \$359,793.03

Balance June 30, 2017 \$104,484.39

Date: July 11, 2017

  
County Sheriff Signature



# HENDRICKS COUNTY SHERIFF'S OFFICE

925 E MAIN STREET · PO BOX 87  
DANVILLE, IN 46122

BRETT CLARK · SHERIFF

Nancy Marsh  
Auditor of Hendricks County  
July 18, 2017

Nancy,

The terms of my compensatory contract with the county require that I send you an "accounting of expenditures for feeding prisoners on the first Monday of January and the first Monday of July each year." This language is taken from the Indiana statute regulating the salary contracts of county Sheriffs. (36-2-13-2.5)

I have listed the expenditures and meal counts for our facility as provided to me by Aramark, our food service provider. The numbers cover the period from January 2017 to June 2017.

Since we changed to a sliding scale for meal pricing in 2016, we have been able to keep the average price of a meal fairly consistent and are actually paying less at this time than we were in 2014 and 2015.

**Meals served to inmates: 146,932 (includes sack lunches prepared for work release)**

**Cost of these meals = \$203,908.67    Average cost per meal = \$1.39**

January:	21,459 meals	(21,339 meals + 120 sack lunches)	Total paid: \$29,794.80
February:	22,673 meals	(21,518 meals + 1155 sack lunches)	Total paid: \$30,691.11
March	30,597 meals	(28,554 meals + 2043 sack lunches)	Total paid: \$41,298.74
April:	22,271 meals	(22,028 meals + 243 sack lunches)	Total paid: \$31,624.82
May:	22,403 meals	(21,545 meals + 858 sack lunches)	Total paid: \$31,548.36
June:	27,529 meals	(26,989 meals + 540 sack lunches)	Total paid: \$38,950.84

Sincerely,

  
Brett A. Clark, Sheriff

DISPATCH  
317 -839-8700

ADMINISTRATION  
317 -745-6269

FAX  
317 -745-9276

JAIL  
317 -745-9332