

**AGENDA**  
**HENDRICKS COUNTY COUNCIL**  
Hendricks County Government Center  
355 South Washington Street, Danville, Indiana  
October 3, 2017  
9:00 A.M.

CALL TO ORDER

ADOPTION OF AGENDA

MINUTES OF SEPTEMBER 5, 2017

UNFINISHED BUSINESS

Hendricks County Budget Public Hearing

Hendricks County Solid Waste District Budget Public Hearing

NEW BUSINESS:

David Warren Emergency Management - Discussion of Request for Radio November Additional Appropriation

Theresa Lynch Recorder - Update on Part Time Position to be paid from Recorder's Perpetuation Fund

Erin Hughes - Human Resources

EMERGENCY ADDITIONAL APPROPRIATIONS (See Attached)

REALLOCATIONS OF FUNDS (See Attached)

OTHER COUNCIL BUSINESS

Status of Funds

Jail Funding Workshop IMMEDIATELY FOLLOWING COUNCIL MEETING

Ronald Reagan Parkway Funding Workshop IMMEDIATELY FOLLOWING COUNCIL MEETING

**HENDRICKS COUNTY COUNCIL MEETING**  
**SEPTEMBER 5, 2017**

The regular meeting of the Hendricks County Council was called to order by President Eric Wathen on Tuesday August 1, 2017 with the following in attendance: Caleb Brown, Larry Hesson, 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 Brad Whicker and seconded by David Wyeth to adopt the agenda as amended. Motion carried 6-0. (JP)

**IN THE MATTER OF THE JULY 5, 2017 MINUTES**

It was moved by Larry Hesson and seconded by David Wyeth that the minutes of the August 1, 2017 meeting and the budget workshop minutes be approved as submitted. Motion carried 7-0.

**IN THE MATTER OF THE BENEFIT COMMITTEE RECOMMENDATIONS OF 8/1/17**

It was moved by Mike Rogers and seconded by Larry Hesson to ratify the recommendation of the Benefit Committee to extend in-network care to any and all St. Vincent Cardiologist care patients if patient is under care from January 1, 2015 to July 1, 2017. If cardiology patients do not meet the guidelines for in-network care, the patient will be referred to Community Cardiologists. Motion carried 7-0.

It was moved by Caleb Brown and seconded by Mike Rogers to ratify the recommendation of the Benefit Committee to put in place a \$100 gift card incentive to employees who use the RX Help Center. Motion carried 7-0.

**IN THE MATTER OF THE APPOINTMENT TO THE PARK BOARD**

Council President Eric Wathen stated that Mr. Robert Niemeyer had resigned from the Hendricks County Parks and Recreation Board of Directors and was recommending the Council consider Mr. William O. Harrington as his replacement. The Council expressed their thanks to Mr. Niemeyer for his service. Mr. Harrington stated he was an original member of the Park Board and would like to be considered as a replacement for Mr. Niemeyer. It was moved by Mike Rogers and seconded by Brad Whicker that Mr. William Harrington be appointed to fulfill the term of Mr. Niemeyer. Motion carried 7-0.

**IN THE MATTER OF CUMMINS MENTAL HEALTH**

Amy Mace, Chief Executive Officer and Michelle Freeman of Cummins Mental Health presented their annual update. Ms. Mace explained how the mental health centers were originally set up to receive property tax revenue. Ms. Mace stated they serve Hendricks, Putnam, Marion, and Boone Counties but only receive property tax revenue from Hendricks and Putnam. Ms. Freeman

explained that they offer social and emotional services to the students in the Hendricks County School Systems.

**IN THE MATTER OF THE SHERIFF'S THIRD AMENDMENT TO THE  
HENDRICKS COUNTY POLICE RETIREMENT PLAN**

Sheriff Clark presented the Third Amendment to the Hendricks County Police Retirement Plan and stated the amendment was required by statute to be a market-based calculation rather than a flat percentage rate. Sheriff Clark asked that the amendment be signed and he will then present it to the Merit Board on September 12, 2017 for signature. It was moved by Jay Puckett and seconded by David Wyeth to approve the Third Amendment to the Hendricks County Police Retirement Plan and authorize the President to sign on behalf of the Council. Motion carried 7-0.

**IN THE MATTER OF HUMAN RESOURCES**

Erin Hughes, Human Resources, presented recommendations for the following job descriptions:

<u>Department</u>	<u>Job Description</u>	<u>Current Classification</u>	<u>Recommended Classification</u>
Sheriff	Records Clerk	OSS 4	OSS 4 No Change
Sheriff	Warrant Clerk	OSS 4	OSS 3
Engineer	Drainage Project Manager	Updated	PAT 2
Facilities	Groundskeeper	LTC 5	LTC 4
Surveyor	GIS/CAD Technician	Updated	OSS 2
Veterans	Assistant CVSO	OSS 4	OSS 3
Coroner	Administrative Assistant	OSS 4	OSS 3
Public Defender	Investigator	New	PAT 4
Public Defender	Office Manager/Legal Asst.	New	OSS 2
Health	Public Health Education Spec	New	PAT 3

It was moved by Larry Hesson and seconded by Mike Rogers to approve the Job Descriptions as amended. Motion carried 7-0.

Ms. Hughes stated she had been contacted by Jeff Fox the week of August 28 and Mr. Fox advised her that the deductible for the HDHP was going from \$2,600 to \$2,700 for 2018.

**IN THE MATTER OF THE BROWNSBURG PUBLIC LIBRARY**

Denise Robinson, Brownsburg Public Library Director, advised the Council that a Council appointment will be expiring on December 31, 2017. The Council recommended that Ms. Robinson submit a recommendation for this appointment. Ms. Robinson stated that the term expires on December 31, 2017.

**IN THE MATTER OF THE ADDITIONAL APPROPRIATIONS**

It was moved by Larry Hesson and seconded by Jay Puckett to table emergency additional appropriations number 12 and 13. Auditor Marsh stated she did not have firm numbers at this time and that she had advertised from both funds not knowing the Council's wishes. Motion carried 7-0.

It was moved by Caleb Brown and seconded by Brad Whicker to approve emergency additional appropriation number 1 in the amount of \$15,000. Motion carried 7-0.

It was moved by Brad Whicker and seconded by David Wyeth to approve emergency additional appropriations number 2 in the amount of \$1,400 and number 3 in the amount of \$600. Motion carried 7-0.

It was moved by Larry Hesson and seconded by Brad Whicker to approve emergency additional appropriations numbers 4 in the amount of \$250,000; number 5 in the amount of \$30,000; number 6 in the amount of \$1,500; number 7 in the amount of \$75,440; number 8 in the amount of \$153,000; number 9 in the amount of \$381,233; number 10 in the amount of \$191,900 and number 11 in the amount of \$5000. Mr. Puckett inquired if the \$250,000 additional appropriation for indigent attorneys would be sufficient to last the rest of the year. Jeremy Gooch, Chief Public Defender stated it would not and he would be coming back for additional funding. Motion carried 7-0.

**IN THE MATTER OF THE REALLOCATION OF FUNDS**

It was moved by Brad Whicker and seconded by Caleb Brown to approve the reallocation of funds resolution from the Surveyor, Chief Public Defender, Recorder Perpetuation, Pretrial Diversions, Animal Control and Local Road and Street. 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.

**IN THE MATTER OF FUTURE PROJECTS COMMITTEE APPOINTMENTS**

For future planning, President Eric Wathen suggested that Committee be formed to study and recommend funding for a Jail and the completion of the Ronald Reagan Parkway. Commissioner's Executive, Todd McCormack will take the lead in scheduling the meetings. The following agreed to serve on each committee:

**FUTURE JAIL**

Councilman Larry Hesson  
Councilman Brad Whicker  
Sheriff Brett Clark  
Auditor Nancy Marsh  
Todd McCormack or Commissioner

**RONALD REAGAN PARKWAY**

Councilman Jay Puckett  
Councilman Mike Rogers  
Councilman Caleb Brown  
Auditor Nancy Marsh  
Engineer John Ayers  
Todd McCormack or Commissioner

**IN THE MATTER OF THE SEPTEMBER 6, 2017 BUDGET WORKSHOP**

Discussion was held on the 2018 budget numbers. Auditor Marsh presented a comparison between the 2017 approved budget and the 2018 actual and advertised budgets. It was the consensus of the Council to use existing cash to fund the 2018 budgets. The meeting scheduled for September 6, 2017 was cancelled.

**IN THE MATTER OF AN END OF YEAR STIPEND**

Discussion was held on an end of year stipend tied to the compliance of turning in the required job evaluations to Human Resources. It was moved by Brad Whicker and seconded by Caleb Brown that job evaluations be turned in to Human Resources no later than September 30, 2017. The department must be in substantial compliance of receipt of 80% of job evaluations from each department to be eligible for the stipend. Motion carried 7-0. It was the consensus that if a stipend is awarded, it will be in the amount of \$500 for full time and \$250 for part time employees with the Board of County Commissioners and County Council members excluded from receiving the stipend.

**OTHER BUSINESS**

The Council acknowledged receipt of the Status of Funds report. Auditor Marsh stated that line 1 through 10 remained the same until the next budget year.

Council President announced the following dates:

- Budget Public Hearing – September 21, 2017 at 3:00 P.M.
- Budget Adoption Hearing – Tuesday October 3, 2017 at 9:00 A.M.
- AIC Conference – September 25 – 28, 2017 at Belterra.

**IN THE MATTER OF ADJOURNMENT**

There being no further business to come before the Council, by motion made by Brad Whicker and seconded by Caleb Brown, the meeting was adjourned at 10:19 A.M.

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Caleb M. Brown

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Larry R. Hesson

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Jay R. Puckett

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Michael C. Rogers

ATTEST:

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

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

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

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

## NOTICE TO TAXPAYERS

The Notice to Taxpayers is available online at [www.budgetnotices.in.gov](http://www.budgetnotices.in.gov) or by calling (888) 739-9826.

Complete details of budget estimates by fund and/or department may be seen by visiting the office of this unit of government at 355 South Washington Street, Danville, IN 46122.

Notice is hereby given to taxpayers of **HENDRICKS COUNTY**, Indiana that the proper officers of **Hendricks County** will conduct a public hearing on the year 2018 budget. Following this meeting, any ten or more taxpayers may object to a budget, tax rate, or tax levy by filing an objection petition with the proper officers of **Hendricks County** not more than seven days after the hearing. The objection petition must identify the provisions of the budget, tax rate, or tax levy to which taxpayers object. If a petition is filed, **Hendricks County** shall adopt with the budget a finding concerning the objections in the petition and testimony presented. Following the aforementioned hearing, the proper officers of **Hendricks County** will meet to adopt the following budget:

Public Hearing Date	Tuesday, October 03, 2017	Adoption Meeting Date	Monday, October 23, 2017
Public Hearing Time	9:00 AM	Adoption Meeting Time	9:00 AM
Public Hearing Location	Commissioners Meeting Room, 355 South Washington Street, Danville, IN 46122	Adoption Meeting Location	Commissioners Meeting Room, 355 South Washington Street, Danville, IN 46122
Estimated Civil Max Levy	\$23,984,925		
Property Tax Cap Credit Estimate	\$3,070,025		

1 Fund Name	2 Budget Estimate	3 Maximum Estimated Funds to be Raised (including appeals and levies exempt from maximum levy limitations)	4 Excessive Levy Appeals	5 Current Tax Levy
0061-RAINY DAY	\$500,000	\$0	\$0	\$0
0075-COIT SPECIAL DISTRIBUTION	\$1,000,000	\$0	\$0	\$0
0101-GENERAL	\$34,409,582	\$16,500,000	\$0	\$13,494,103
0124-2015 REASSESSMENT	\$604,671	\$666,765	\$0	\$484,318
0181-DEBT PAYMENT	\$357,202	\$466,948	\$0	\$325,662
0182-BOND #2	\$468,969	\$492,983	\$0	\$434,216
0183-BOND #3	\$348,900	\$409,095	\$0	\$375,764
0203-SELF INSURANCE	\$590,000	\$0	\$0	\$0
0205-COUNTY WHEEL TAX	\$1,400,000	\$0	\$0	\$0
0281-LOAN & INTEREST PAYMENT	\$1,447,000	\$1,402,632	\$0	\$1,327,700
0702-HIGHWAY	\$5,868,111	\$0	\$0	\$0

0706-LOCAL ROAD & STREET	\$1,271,800	\$0	\$0	\$0
0790-CUMULATIVE BRIDGE	\$5,998,948	\$2,577,081	\$0	\$5,068,639
0792-COUNTY MAJOR BRIDGE	\$500,000	\$984,000	\$0	\$1,027,088
0801-HEALTH	\$1,346,133	\$1,208,000	\$0	\$1,102,241
0905-DRAIN IMPROVEMENT	\$500,000	\$600,000	\$0	\$242,159
1151-CONTINUING EDUCATION	\$9,000	\$0	\$0	\$0
1156-EMERGENCY TELEPHONE SYSTEM	\$219,892	\$0	\$0	\$0
2391-CUMULATIVE CAPITAL DEVELOPMENT	\$2,954,450	\$2,860,560	\$0	\$2,780,654
2411-ECONOMIC DEV INCOME TAX CEDIT	\$3,262,619	\$0	\$0	\$0
9500-Park Board Innkeepers Share	\$409,362	\$0	\$0	\$0
9501-Food & Beverage	\$795,000	\$0	\$0	\$0
9502-Auditor's Plat Book	\$44,081	\$0	\$0	\$0
9503-Clerk's Perpetuation	\$29,875	\$0	\$0	\$0
9504-Recorder's Perpetuation	\$505,343	\$0	\$0	\$0
9505-Tax Increment Replacement	\$25,000	\$0	\$0	\$0
9506-Surveyor's Perpetuation	\$75,869	\$0	\$0	\$0
9507-Clerks IV-D Incentive	\$17,185	\$0	\$0	\$0
9508-Pre-Trial Diversions	\$197,204	\$0	\$0	\$0
9509-Law Enforcement	\$326,660	\$0	\$0	\$0
9510-Prosecutor's Special Fees	\$6,000	\$0	\$0	\$0
9511-Sup Alternative Dispute Res	\$73,000	\$0	\$0	\$0
9513-Assessor's Disclosure	\$26,780	\$0	\$0	\$0
9514-Supplemental Public Defender's	\$40,000	\$0	\$0	\$0
9515-Probation User Fees	\$292,607	\$0	\$0	\$0
9516-Juvenile Probation Fees	\$35,872	\$0	\$0	\$0
9517-Substance Abuse Task Force	\$81,969	\$0	\$0	\$0



9518-Home Detention	\$282,055	\$0	\$0	\$0
9521-Soil & Water Grant	\$5,000	\$0	\$0	\$0
9523-Identification Security	\$70,000	\$0	\$0	\$0
9524-Problem Solving Court	\$36,500	\$0	\$0	\$0
9530-Jury Pay	\$40,000	\$0	\$0	\$0
9531-Prosecutor IV-D Incentive	\$138,665	\$0	\$0	\$0
9534-Sex & Violent Offender Admin	\$5,000	\$0	\$0	\$0
9537-TIF Guilford/Heartland	\$390,376	\$0	\$0	\$0
9539-TIF Pittsboro/Steel Dynamics	\$3,116,600	\$0	\$0	\$0
9540-TIF 70 West Commerce Park	\$178,388	\$0	\$0	\$0
9541-Wheel Sur/Tax County Portion	\$686,434	\$0	\$0	\$0
9542-Title IV-D Incentive	\$55,283	\$0	\$0	\$0
9546-SR267 Relinquish	\$220,000	\$0	\$0	\$0
<b>Totals</b>	<b>\$71,263,385</b>	<b>\$28,168,064</b>	<b>\$0</b>	<b>\$26,662,544</b>

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Notice is hereby given to taxpayers of **HENDRICKS COUNTY SOLID WASTE DISTRICT, Hendricks County, Indiana** that the proper officers of **Hendricks County Council** will conduct a public hearing on the year **2018** budget. Following this meeting, any ten or more taxpayers may object to a budget, tax rate, or tax levy by filing an objection petition with the proper officers of **Hendricks County Council** not more than seven days after the hearing. The objection petition must identify the provisions of the budget, tax rate, or tax levy to which taxpayers object. If a petition is filed, **Hendricks County Council** shall adopt with the budget a finding concerning the objections in the petition and testimony presented. Following the aforementioned hearing, the proper officers of **Hendricks County Council** will meet to adopt the following budget:

Public Hearing Date	Tuesday, October 03, 2017
Public Hearing Time	9:00 AM
Public Hearing Location	355 South Washington Street, Danville, IN
Estimated Civil Max Levy	\$0
Property Tax Cap Credit Estimate	\$0

Adoption Meeting Date	Monday, October 23, 2017
Adoption Meeting Time	9:00 AM
Adoption Meeting Location	355 South Washington Street, Danville, IN

1 Fund Name	2 Budget Estimate	3 Maximum Estimated Funds to be Raised (including appeals and levies exempt from maximum levy limitations)	4 Excessive Levy Appeals	5 Current Tax Levy
6421-DISTRICT SOLID WASTE MANAGEMENT	\$776,300	\$0	\$0	\$0
9500-Special Projects Fund	\$75,000	\$0	\$0	\$0
Totals	\$851,300	\$0	\$0	\$0

Budget Form 4-B  
 Prescribed by the Department of Local Government Finance  
 Approved by the State Board of Accounts

**Budget Estimate- Financial Statement-Proposed Tax Rate**

**Taxing Unit:** 1093 - HENDRICKS COUNTY SOLID WASTE DISTRICT  
**Fund Name:** 6421 - DISTRICT SOLID WASTE MANAGEMENT  
**County:** 32 - Hendricks County  
**Year:** 2018

<b>Net Assessed Value</b>		<b>\$8,350,311,527</b>	
<b>Funds Required For Expenses To December 31st Of Incoming Year</b>	<b>Amount Used To Compute Published Budget</b>	<b>Appropriating Body</b>	
1. Total budget estimate for incoming year	\$776,300	\$776,300	
2. Necessary expenditures, July 1 to December 31 of present year, to be made from appropriation unexpended	\$345,134	\$345,134	
3. Additional appropriation necessary to be made July 1 to December 31 of present year	\$200,000	\$200,000	
4. Outstanding temporary loans:			
a). To be paid not included in lines 2 or 3	\$0	\$0	
b). Not repaid by December 31 of present year	\$0	\$0	
5. TOTAL FUNDS required (add lines 1,2,3,4a and 4b)	\$1,321,434	\$1,321,434	
<b>Funds On Hand To Be Received From Sources Other Than Proposed Tax Levy</b>	<b>Amount Used To Compute Published Budget</b>	<b>Appropriating Body</b>	
6. Actual cash balance, June 30 of present year (including cash investments)	\$1,776,374	\$1,776,374	
7. Taxes to be collected, present year (December settlement)	\$0	\$0	
8. Miscellaneous revenue to be received July 1 of present year to December 31 of incoming year(Schedule on File):			
a). Total Column A Budget Form 2	\$387,869	\$387,869	
b). Total Column B Budget Form 2	\$779,000	\$779,000	
9. TOTAL FUNDS (Add lines 6, 7, 8a and 8b)	\$2,943,243	\$2,943,243	
10. Net amount to be raised for expenses to December 31 of incoming year (deduct line 9 from 5)	(\$1,621,809)	(\$1,621,809)	

<b>Proposed Tax Rate and Levy</b>	<b>Amount Used To Compute Published Budget</b>	<b>Appropriating Body</b>	
11. Operating balance ( not in excess of expense January 1 to June 30, less miscellaneous revenue for same period)	\$0	\$0	
12. Amount to be raised by tax levy (add lines 10 and 11)	\$0	\$0	
13a. Property Tax Replacement Credit from Local Option Tax	\$0	\$0	
13b. Operating LOIT	\$0	\$0	
14. NET AMOUNT TO BE RAISED BY TAX LEVY (deduct line 13a and 13b from line 12)	\$0	\$0	
15. Levy Excess Fund applied to current budget	\$0	\$0	
16. Net amount to be raised	\$0	\$0	
17. Net Tax Rate on each one hundred dollars of taxable property	0.0000	0.0000	
<b>Property Tax Caps</b>	<b>Amount Used To Compute Published Budget</b>	<b>Appropriating Body</b>	
Property Tax Cap Impact	\$0	\$0	

# Budget Form 1 - Budget Estimate

Year: 2018 County: Hendricks Unit: Hendricks County Solid Waste District

Fund	Department	Category	Sub-Category	Line Item Code	Line Item	Published	Adopted
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	PERSONAL SERVICES	Salaries and Wages	1110	Administrative Wages	\$148,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	PERSONAL SERVICES	Salaries and Wages	1114	Yard Waste Recycling Ctr Wages	\$25,400	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	PERSONAL SERVICES	Employee Benefits	1120	FICA/Medicare	\$13,400	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	PERSONAL SERVICES	Employee Benefits	1121	PERF	\$21,200	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	PERSONAL SERVICES	Employee Benefits	1123	Insurance	\$34,500	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SUPPLIES	Office Supplies	2201	Office Supplies	\$4,500	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SUPPLIES	Office Supplies	2212	Postage	\$700	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SUPPLIES	Office Supplies	2213	Computer Software & Supplies	\$1,500	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SUPPLIES	Office Supplies	2394	Dues & Subscriptions	\$1,100	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Professional Services		Custodial Services	\$2,800	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Professional Services		Professional Services	\$30,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Communication and Transportation		Communications	\$700	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Communication and Transportation		Gas	\$1,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Communication and Transportation		Mileage Reimbursement	\$5,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Communication and Transportation		Travel	\$1,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Printing and Advertising		Legal Advertising	\$200	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Printing and Advertising		Marketing & Promotion	\$4,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Printing and Advertising		Media Advertising	\$4,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Insurance		Insurance	\$5,500	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Utility Services		Office Utilities	\$7,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Utility Services		Yard Waste Recycling Ctr Utilities	\$3,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Repairs and Maintenance		Auto	\$1,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Repairs and Maintenance		Office Equipment	\$500	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		Board/CAC Expenses	\$2,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		Business & Industry	\$500	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		Community Grants	\$20,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		Conferences/Workshops/Training	\$3,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		HC Special Projects Fund	\$75,000	\$0

6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		Household Hazardous Waste	\$180,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		Office Lease	\$9,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		Pharmaceuticals & Sharps Collection & Disposal	\$800	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		Public Education	\$20,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		Recycling Drop-off Centers	\$91,500	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		School Education	\$15,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		School Grants	\$1,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		Shoe Recycling Program	\$1,500	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		Yard Waste Recycling Centers	\$35,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	CAPITAL OUTLAYS	Improvements Other Than Building		YWRC Improvements	\$1,500	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	CAPITAL OUTLAYS	Machinery, Equipment, and Vehicles		Education Equipment	\$2,000	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	CAPITAL OUTLAYS	Machinery, Equipment, and Vehicles		Office Equipment	\$2,500	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT	NO DEPARTMENT	PROPERTY TAX CAP	Property Tax Cap Impact		Property Tax Cap Impact	\$0	\$0
6421 - DISTRICT SOLID WASTE MANAGEMENT Total						\$776,300	\$0
9500 - Special Projects Fund	NO DEPARTMENT	SERVICES AND CHARGES	Other Services and Charges		Other Services & Charges	\$75,000	\$0
9500 - Special Projects Fund Total						\$75,000	\$0
<b>UNIT TOTAL</b>						<b>\$851,300</b>	<b>\$0</b>

# Budget Form 2 - Estimate of Miscellaneous Revenue

Year: 2018 County: Hendricks Unit: 1093 - Hendricks County Solid Waste District

Fund	Revenue Code	Revenue Name	July 1 - December 31, 2017	January 1 - December 31, 2018
6421 - DISTRICT SOLID WASTE MANAGEMENT	R416	Garbage/Trash Collection and Landfill Charges	\$371,424	\$740,000
6421 - DISTRICT SOLID WASTE MANAGEMENT	R423	Other Charges for Services, Sales, and Fees	\$10,445	\$24,000
6421 - DISTRICT SOLID WASTE MANAGEMENT	R902	Earnings on Investments and Deposits	\$6,000	\$15,000
<b>DISTRICT SOLID WASTE MANAGEMENT</b>			<b>\$387,869</b>	<b>\$779,000</b>
9500 - Special Projects Fund	R910	Transfers In - Transferred from Another Fund	\$39,925	\$75,000
<b>Special Projects Fund</b>			<b>\$39,925</b>	<b>\$75,000</b>
<b>1093 - HENDRICKS COUNTY SOLID WASTE DISTRICT Total</b>			<b>\$427,794</b>	<b>\$854,000</b>

### BUDGET REPORT FOR

**Selected Year:** 2018  
**Selected County:** 32 - Hendricks County  
**Selected Unit:** 1093 - HENDRICKS COUNTY SOLID WASTE DISTRICT  
**Selected Fund:** 6421 - DISTRICT SOLID WASTE MANAGEMENT

**DEPARTMENT: 0000 NO DEPARTMENT**

	Advertised Amount	Adopted Amount
PERSONAL SERVICES	\$242,500	\$0
SUPPLIES	\$7,800	\$0
SERVICES AND CHARGES	\$520,000	\$0
CAPITAL OUTLAY	\$6,000	\$0
DEBT SERVICE	\$0	\$0
PROPERTY TAX CAPS	\$0	\$0
Total	\$776,300	\$0

**Totals by Fund**

Published Amt.: \$776,300

Adopted Amt.: \$0



Quote Number: QU0000413403  
 Effective: 23 AUG 2017  
 Effective To: 15 SEP 2017

**Bill-To:**

HENDRICKS COUNTY EMERGENCY  
 MANAGEMENT AGENCY  
 355 S WASHINGTON ST  
 DANVILLE, IN 46122  
 United States

**Ultimate Destination:**

HENDRICKS COUNTY EMERGENCY  
 MANAGEMENT AGENCY  
 355 S WASHINGTON ST  
 DANVILLE, IN 46122  
 United States

**Attention:**

Name: Dave Warren  
 Email: dwwarren@co.hendricks.in.us

**Sales Contact:**

Name: Erin Button  
 Email: erinb@ra-comm.com  
 Phone: 3178394259

Contract Number: 9167  
 Freight terms: FOB Destination  
 Payment terms: Net 30 Due

Item	Quantity	Nomenclature	Description	Your price	Extended Price
1	1	H98UCF9PW6BN	APX6000 700/800 MODEL 2.5 PORTABLE	\$3,737.48	\$3,737.48
(Notes)APX6000 700/800 MODEL 2.5 PORTABLE					
1a	1	Q806BM	ADD: ASTRO DIGITAL CAI OPERATION		
1b	1	H885BK	ADD: 3 YEAR SERVICE FROM THE START LIFE		
1c	1	QA01648AA	ADD: ADVANCED SYSTEM KEY - HARDWARE KEY		
1d	1	H869BZ	ENH: MULTIKEY		
1e	1	QA00631AB	ADD: DVRS PSU ACTIVATION		
1f	1	H38BT	ADD: SMARTZONE OPERATION		
1g	1	Q361AR	ADD: P25 9600 BAUD TRUNKING		
2	1	T7914A	RADIO MANAGEMENT ONLINE	-	-
(Notes)RADIO MANAGEMENT ONLINE					
2a	1	UA00049AA	ADD: RADIO MANAGEMENT LICENSES ONLINE		
3	1	PMMN4060B	PSM IP55 WITH 3.5MM JACK RX 24IN	\$135.30	\$135.30
(Notes)PSM IP55 WITH 3.5MM JACK RX 24IN					
4	1	PMAF4002A	APX 7000 700/800MHZ PSM ANTENNA	\$9.00	\$9.00
(Notes)APX 7000 700/800MHZ PSM ANTENNA					
5	1	NNTN8860A	CHARGER, SINGLE-UNIT, IMPRES 2, 3A, 115VAC, US/NA	\$112.50	\$112.50
(Notes)CHARGER, SINGLE-UNIT, IMPRES 2, 3A, 115VAC, US/NA					

**Total Quote in USD** **\$4,094.28**

\* This quote contains items with approved price exceptions applied against it

Includes Promotion

THIS QUOTE IS BASED ON THE FOLLOWING:



1 This quotation is provided to you for information purposes only and is not intended to be an offer or a binding proposal.

If you wish to purchase the quoted products, Motorola Solutions, Inc. ("Motorola") will be pleased to provide you with our standard terms and conditions of sale (which will include the capitalized provisions below), or alternatively, receive your purchase order which will be acknowledged.

Thank you for your consideration of Motorola products.

2 Quotes are exclusive of all installation and programming charges (unless expressly stated) and all applicable taxes.

3 Purchaser will be responsible for shipping costs, which will be added to the invoice.

4 Prices quoted are valid for thirty(30) days from the date of this quote.

5 Unless otherwise stated, payment will be due within thirty days after invoice. Invoicing will occur concurrently with shipping.

MOTOROLA DISCLAIMS ALL OTHER WARRANTIES WITH RESPECT TO THE ORDERED PRODUCTS, EXPRESS OR IMPLIED INCLUDING THE IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE.

MOTOROLA'S TOTAL LIABILITY ARISING FROM THE ORDERED PRODUCTS WILL BE LIMITED TO THE PURCHASE PRICE OF THE PRODUCTS WITH RESPECT TO WHICH LOSSES OR DAMAGES ARE CLAIMED. IN NO EVENT WILL MOTOROLA BE LIABLE FOR INCIDENTAL OR CONSEQUENTIAL DAMAGES.

# PURCHASE ORDER

Hendricks County Emergency Management

**VENDOR:**  
 Motorola Solutions  
 13108 Collections Center Drive  
 Chicago, IL 60693

**SHIP TO:**  
 Ra-Comm, Inc  
 689 Tower Rd.  
 Suite A  
 Plainfield IN 46168

P.O. DATE		Terms		SALES REP
08/23/2017		Net 30 Days		Erin Button

QTY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL
1	EA	Motorola Radio Equipment Qty 1 APX6000 Portable Includes RMO, PSM, Stubby Antenna and Single Unit Charger	\$ 4,094.28	\$ 4,094.28

<b>Notes/ Remarks</b>	\$ 4,094.28
<b>Bill to and Ultimate End User:</b> Hendricks County Emergency Management	SALES TAX
	SHIPPING & HANDLING
	OTHER
	<b>TOTAL</b>
	\$ 4,094.28

**Payment Details**

**Check Payment Terms Net 30 Days**

- Cash
- Account No.
- Credit Card

Name \_\_\_\_\_

CC# \_\_\_\_\_

Exp Date\_\_\_\_\_

Authorized by \_\_\_\_\_ Date 08/23/2017

# **Memo**

**To:** Hendricks County Council

**From:** Erin Hughes, Human Resources

**Date:** September 27, 2017

**Re:** Job Descriptions

Items for discussion at your meeting Tuesday:

1. The Treasurer's Department has updated one job description. This description was previously approved in 2003 as a full-time position. Shawn would like for this description to also be utilized for a part-time position. There is no change in rank.
  - Part-time Tax Processing Deputy FLSA: Non-Exempt Pay Band: OSS 4  
Budget Number: 10307
2. The Health Department has updated two job descriptions. These descriptions were previously approved on 01/14/2016 as full-time positions. Tammy would like for these descriptions to also be utilized for 2 new part-time positions. These positions are new to the department.
3. Both part-time positions will be grant funded. There is no change in rank for either position.
  - Part-Time Public Health Nurse FLSA: Exempt Pay Band: PAT 3 Budget  
Number:
  - Part-Time Administrative Assistant/Billing Specialist FLSA: Non-Exempt Pay  
Band: OSS 3 Budget Number:

**Hendricks County**  
**Job Description**

**Title:** Part-time Tax Processing Deputy

**FLSA Status:** Non-Exempt

**Department:** Treasurer

**Pay Band:** OSS 4

**Supervisor:** Treasurer

**Date Prepared:** 02/19/2003

**Date Approved:**

**PURPOSE OF POSITION:**

Assists the public by researching, processing and receipting taxes payments.

**ESSENTIAL FUNCTIONS:**

- Provides tax information to title companies, mortgage companies and the public by answering main phone lines.
- Processes and assists taxpayers and abstractors with research, questions and tax payments received.
- Processes tax payments received by mail, direct deposit and credit card.
- Receipt payments into the tax system.
- Balances receipts and checks daily on individual drawer.
- Ensures that taxes are current on mobile homes prior to authorizing a mobile home moving and/or transfer of title permits.
- Coordinates with Collection Company on tax judgments to increase collection totals and insure accuracy.
- Processes and updates tax judgments, including calculating interest and collection fees with applicable.
- Ensures that taxes are current on businesses and properties applying for Alcoholic Beverage Commission permits.
- Researches and collects semi-annual government employee delinquent taxes by coordinating with the government unit to begin payroll deductions.
- Processes surplus claims for overpayment of taxes.
- Prepares outgoing mail and collects, opens and distributes daily mail.

**NON-ESSENTIAL FUNCTIONS:**

- Performs a variety of clerical duties, including typing & filing.
- Assists in the preparation of tax billing.
- Performs other duties as assigned.

**EDUCATION AND QUALIFICATION REQUIREMENTS:**

- High school diploma or GED
- Requiring 28 hours a week.
- Ability to work independently
- Strong bookkeeping skills.
- Proficient computer skills especially Microsoft Excel and Word.
- Ability to effectively and tactfully deal with other people.
- Ability to operate basic office equipment.
- Good organizational skills.
- Strong math aptitude.
- Ability to communicate well, both verbally and in writing.
- Proficient knowledge of general office practices, such as filing, record keeping, phone etiquette, etc.
- Attention to detail.
- Bondable.

**RESPONSIBILITY:**

Incumbent works under established guidelines and procedures, but must use some problem-solving skills to balance, correcting taxing errors, counting large quantities of money and ensuring all office processes are followed. Errors in work can cause significant inconvenience to the public or significant financial loss to the county.

**WORKING RELATIONSHIPS:**

Working relationships are with the Treasurer, Chief Deputy, others within the office, other county departments, mortgage companies, taxing services, and the general public for the purpose of communicating factual or procedural information.

**WORKING CONDITIONS AND PHYSICAL DEMANDS:**

Work is performed in a standard office environment.

**APPLICANT/EMPLOYEE ACKNOWLEDGEMENT:**

The job description for the position of Part-Time Tax Processing Deputy in the Treasurer's Department describes the duties and responsibilities of this position. I acknowledge that I have received this job description and understand that it is not a contract of employment. I am responsible for reading this job description and complying with all job duties, requirements and responsibilities contained herein and any subsequent revisions.

Is there anything that would keep you from meeting the job duties and requirements as outlined?

Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
Applicant/Employee signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**Hendricks County**  
**Job Description**

**Title:** Administrative Assistant/Billing Specialist

**FSLA Status:** Non-Exempt

**Hours of Work:** Part Time/Grant

**Pay Band:** OSS 3

**Department:** Health -- Nursing

**Date Prepared:** 09/19/2017

**Supervisor:** Director of Public Health Nursing

**Date Approved:**

**PURPOSE OF POSITION:**

The Administrative Assistant/Billing Specialist is a direct link between the Health Department and medical insurance plans, and interacts directly with Health Department management, providers, staff, insurance plan representatives, visitors, and patients. The complete, accurate and timely execution of the enrollment and billing responsibilities affects the ability of the Health Department to generate revenue from insurance companies. This position also has a contributory effect on meeting budget goals which can impact both delivery of essential healthcare services and achieving the Health Department's mission. This position contributes to the first impressions visitors and patients have of the Health Department. By properly handling the registration process, this person sets the stage for a smoothly executed patient experience. Information gathered during intake satisfies certain regulatory and legal requirements and contributes to the efficient scheduling of appointments with staff. Performs a wide range of administrative and office support activities for staff, supervisors, and managers to facilitate the efficient operation of the department.

**ESSENTIAL FUNCTIONS:**

- Demonstrates knowledge of and maintains all aspects of health insurance billing including required facility and provider documents.
- Complies with all Health Insurance Portability and Accountability Act (HIPAA) requirements and other regulations.
- Provides clerical support for all clinics. Assembles and distributes the appropriate legal consent forms and clinic forms for each patient's visit. Schedules appointments. Completes patient registration process in a friendly competent, professional and informed manner, therefore easing any concerns or distress patients may exhibit during the intake process.
- Analyzes and interprets patient immunization records; identifies needed immunizations, consulting public health nurse as needed.
- Determines patient's method of payment, secures insurance information, and receives payments from patients; applies hardship policy as appropriate.
- Accounts for all money/payments collected in accounting software and prepares bank deposit. Maintains a log of services provided. Balances cash drawer with number of immunizations given and/or services provided. Receives health insurance payments,

reconciles with Explanation of Benefits, then posts as appropriate. Makes bank deposit. Reconciles bank statement monthly and prepares monthly report of collections for County Auditor.

- Knowledgeable of department and community services. Receives telephone calls and visitors, takes messages, answers questions and/or makes referrals to the appropriate person, department, or community resource/agency.
- Maintains scheduling program and adjusts clinic schedules to accommodate staff schedules.
- Maintains appointment reminder software; confirms appointments or communicates reminder via call or letter as needed.
- Tracks missed appointments and follows up to reschedule.
- Performs typing, word processing, record keeping, and filing for the Nursing Division. Creates, updates and stores computerized forms/letters for use in clinic record keeping, scheduling, and correspondence.
- Receives shipment of vaccines and stores properly. Demonstrates knowledge of storing and handling procedures.
- Assists in the organization and implementation of off site clinics.
- Maintains and files patient charts. Prepares biweekly payroll vouchers for Healthy Families Hendricks County.
- Prepares accounts payable claims and submits to the Auditor's office. Maintains and updates directories, mailing lists, e-mail lists, fax numbers/lists and phone numbers for schools, doctors, county resources, township trustees, Indiana State Department of Health, etc. Maintains and updates database of school nurses in Hendricks County.
- Assists the supervisors and staff with special projects, such as preparing for meetings and grant applications.
- Duplicates/creates computerized application formats and forms, types text, assists with proofing/editing, copies and assembles finished documents.
- Demonstrates knowledge of the core functions and the essential services of public health.
- Demonstrates knowledge of emergency preparedness plans and the ability to perform the assigned duties.

#### **NON-ESSENTIAL FUNCTIONS:**

- Orders office and desktop supplies as needed from office supply companies.
- Prepares correspondence for mailing, affixes postage, delivers to mail drop or post office. Collects and distributes mail received.
- May be called upon to secure safety of vaccines during after hours power failures when notified that monitor alarm has been activated. If necessary, must transport vaccines to hospital for safe storage.
- Adheres to personnel policies set forth by the County Commissioners.
- Performs related duties as assigned.

#### **EDUCATION AND QUALIFICATION REQUIREMENTS:**

- High School Diploma or GED.
- Certified as a Professional Biller and/or Medical Coder preferred.



- Past experience with billing health insurance preferred.
- Past experience as a secretary or administrative assistant.
- Knowledge of principles and practices of office management.
- Customer service focused.
- Knowledge of and ability to perform record keeping and bookkeeping procedures.
- Ability to create, record, check, and file various forms, reports, and documents.
- Ability to operate and maintain various office machines, such as computer, printers, calculator, copier, telephone with voice mail, and fax machine.
- Computer wordprocessing, spreadsheet, database, and/or related computer software knowledge/skills. General computer network installation, connection, and/or troubleshooting knowledge and ability is desirable.
- Ability to be bonded.
- Proficient general math skills.
- Ability to communicate well, both verbally and in writing; proficient in reading, writing and speaking English. Ability to correctly alphabetize files. Ability to communicate effectively and tactfully with the public. Good phone etiquette.
- Ability to be sensitive and compassionate to those of all cultures and backgrounds.
- Attention to detail and accuracy.
- Good planning and organizational skills; ability to prioritize tasks.
- Ability to be flexible, able to handle a variety of responsibilities, accepts and adapts well to necessary or required changes in procedure.
- Good problem assessment and problem solving skills.
- Good information gathering and information monitoring skills. Ability to interpret and apply county and state health ordinances.
- Ability to work in a team atmosphere.
- National Incident Management System (NIMS) IS-100-400, IS-700, IS 800 certification within a year of employment.

### **RESPONSIBILITY:**

Responsible for knowing and receiving patient treatment codes to use in assembling reimbursement claims, creates reimbursement claims and transfer to third-party payers, coordinates reimbursement activities with payers, and bills patients for medical services. Submits claims to pay bills. Keeps an account of all funds brought in and all claims paid. Screens phone calls and refers to appropriate personnel or resource. Schedules patients for clinics. Trouble shoots technology issues to keep office running smoothly. Must be able to understand a normal immunization schedule. Work is performed within established procedural guidelines. Some judgement is required in applying guidelines to varied situations. Being organized and attention to detail is essential due to nature of patient files and documents. Discretion is required when handling confidential information. Responsibilities, skills, and working conditions may change as needs evolve. Supervisor available for consultation and will provide indiscriminate examination of work. Errors are normally detected through procedural cross checks but could mean loss of revenue to the department.

**WORKING RELATIONSHIPS:**

Working relationships are with supervisor, department managers and associates, other county government departments, governmental agencies, community service agencies, billing companies, insurance companies, medical providers, patients and their families, and the general public for the purpose of communicating factual or procedural information.

**WORKING CONDITIONS AND PHYSICAL DEMANDS:**

Work is performed in a standard medical office environment, however due to the nature of Public Health, the work may be performed at an offsite clinic. Requires sitting and standing associated with a normal office environment. Manual dexterity needed for using a calculator and computer keyboard. There may be exposure to potential health hazards, such as communicable diseases, blood borne pathogens, pests, and environmental hazards. Occasional overtime may be required. The Administrative Assistant may be called upon for extraordinary service in case of public health emergencies, such as bioterrorism or other community disasters. On call 24 hours a day, 7 days a week. 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.

**APPLICANT/EMPLOYEE ACKNOWLEDGEMENT:**

The job description for the position of Administrative Assistant-Billing Specialist in the Health Department describes the duties and responsibilities in this position. I acknowledge that I have received this job description, and understand that it is not a contract of employment. I am responsible for reading this job description and complying with all job duties, requirements and responsibilities contained herein, and any subsequent revisions.

Is there anything that would keep you from meeting the job duties and requirements as outlined?

Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
Applicant/Employee signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**Hendricks County**  
**Job Description**

**Title:** Public Health Nurse

**FLSA Status:** Exempt

**Hours of Work:** Part-Time Grant

**Pay Band:** PAT 3

**Department:** Health -- Nursing

**Date Prepared:** 6/30/2017

**Supervisor:** Director of Nursing

**Date Approved:**

**PURPOSE OF POSITION:**

The Public Health Nurse promotes individual and population public health by providing the essential services of public health within a variety of settings. Public health nursing actions are directed toward serving individuals, families and population groups with the goal of promoting and protecting health through knowledge of professional nursing practice based on public health sciences, principles, and concepts.

**ESSENTIAL FUNCTIONS:**

- Interprets, implements, and enforces compliance of public health laws, codes, rules, and ordinances.
- Prepares and administers medications per Health Officer's standing orders for immunizations or as prescribed by patient's physician, i.e. tuberculosis medications. Conducts individual health assessment, provides patient education about potential side effects, and monitors for adverse reactions. Assesses and translates immunization records to determine recommended vaccines.
- Organizes and facilitates immunization, child health, and adult wellness clinics.
- Demonstrates knowledge of vaccine storage and handling procedures, and stores vaccines per policy.
- May be called upon to secure safety of vaccines during after hours power failures when notified that monitor alarm has been activated. If necessary, must transport vaccines to hospital for safe storage.
- Performs epidemiological investigations of communicable diseases in the office setting, patient home, or medical facility. Institutes disease outbreak control measures. Coordinates investigation efforts with physicians, school personnel, the Indiana State Department of Health, and other stake holders as appropriate regarding spread and treatment of disease. Provides health care services, instruction, education, and information to clients in compliance with public health laws. Conducts contact investigations and surveillance of individuals who may have been exposed to a communicable disease.
- Provides Tuberculosis (TB) case management in the office setting and in patient's homes including directly observed therapy (DOT) of TB medications.
- Provides follow-up, education, post exposure prophylaxis recommendation, and referral for all county residents receiving an animal bite.

- Identifies public health needs in the county and works in a team environment to facilitate interventions and address the needs using concepts of prevention, assessment, risk reduction, and health status improvement.
- Receives referrals and completes home visit assessments of clients' needs and families' ability to provide and maintain adequate care in the home, providing education and referrals as indicated.
- Provides home visits and health assessments for pregnant women, children 0-5 years, elderly, physical and/or mentally challenged clients, and other individuals as assigned.
- Develops, implements, and evaluates individualized health care plans for patients and families based on nursing assessment and includes input from the client, family, other health care personnel and referral agencies.
- Provides education to individuals, families and groups in office or home setting regarding relevant public health needs and issues, i.e. prenatal care, parenting, breast feeding, nutrition, health care, safety, substance abuse, or communicable diseases.
- Provides management and coordination of services through a multidisciplinary approach collaborating extensively with multiple community agencies for abnormal public health conditions. Assists clients in obtaining health care through referral when the Health Department cannot meet their needs.
- Complies with all Health Insurance Portability and Accountability Act (HIPAA) requirements and health department policies and procedures ensuring that clinical documentation is kept secure and confidential.
- Prepares, submits, and maintains accurate medical records and all other related or required reports and documents for programs and patient/client records, reporting to other agencies and physicians as appropriate.
- Acts as a professional consultant, committee member, or guest speaker to outside agencies and public groups regarding health promotion, disease prevention, and various health related topics.
- Serves as a preceptor for field experiences of Community Health Nursing students, volunteers, and new employees.
- Conducts vision and hearing screenings in county schools.
- Collects laboratory specimens and transports to laboratory.
- Provides lead, hemoglobin and tuberculosis screenings.
- Interprets laboratory and health screening findings for clients and families and makes referrals to appropriate community resources.
- Serves as a liaison between the Health Department and county school nurses.
- Performs duties and maintains documentation outlined in Health Department grants.
- Promotes optimal working relationships within the agency as well as with other health, county and community related groups.
- Recognizes, in a non-judgmental manner, the influence of beliefs and cultures on behaviors and accepts strengths and limitations in others.
- Demonstrates leadership skills to set positive, attainable expectations, objectives and goals for self and others within the department.
- Adheres to all agency infection control and safety policies, including education, reporting and practice implementation.
- Knows and understands the department's mission, vision, and values in relation to own job position and duties.

- Possesses a general understanding of all services delivered by the Hendricks County Health Department.
- Adheres to all agency policies and procedures.
- Maintains and conserves agency property, supplies and equipment in a manner that demonstrates ownership and accountability.
- Demonstrates knowledge of the core functions and the essential services of public health.
- Demonstrates knowledge of emergency preparedness plans and the ability to perform the assigned duties.
- Attends trainings as assigned such as workshops, seminars, and conferences regarding nursing, public health nursing, and certifications, i.e. CPR, TB. Responsible for continuing education and personal professional development. Maintains current, mandatory personnel file certificates and licenses, i.e. nursing license, TB certification, etc., and provides information to agency in timely manner.
- Reports observed or suspected child or adult abuse pursuant to mandated requirements.

#### **NON-ESSENTIAL FUNCTIONS:**

- Attends Board of Health and committee meetings as requested by the Director of Nursing.
- Trains new Public Health Nurses in the duties of this position.
- Provides clerical duties when necessary.
- Performs other duties as assigned.

#### **EDUCATION AND QUALIFICATION REQUIREMENTS:**

- Must be able to maintain and hold a current license to practice as a Registered Nurse in Indiana
- Bachelor of Science in Nursing (BSN) for public health nursing preparation - if no BSN, graduation from an accredited school of nursing supplemented by a bachelor's degree AND one or more years experience as a Registered Nurse
- Two years public health nursing experience preferred
- CPR certification within four months of employment and maintained thereafter
- Tuberculosis (TB) certification upon employment and maintained thereafter
- National Incident Management System (NIMS) IS-100-400, IS-700, IS 800 certification within one year of employment
- Must have and maintain a valid Indiana Driver's License, current certificate of vehicle insurance, and have use of a vehicle for full-time business use
- Ability to work day, evening, and week-end hours as department programs require
- Must be able to be fitted for and wear National Institute for Occupational Safety and Health (NIOSH) 95 mask
- Comprehensive knowledge and skill in current nursing practices and public health sciences.
- Ability to interpret and apply state and county regulations appropriately
- Ability to establish and maintain effective working relationships with associates, clients, community groups, and other public and private agencies.

- Ability to perform, provide and document public health services in a clinic, home, or institutional setting using the nursing process of assessment, planning, implementation, and evaluation, with minimal direct supervision.
- Ability to communicate well and interact professionally, humanely, tactfully, with dignity, both verbally and in writing; follows appropriate phone etiquette
- Good conflict resolution skills
- Good organizational skills
- Good computer, smart phone, and mathematics skills
- Basic data collection, analysis and interpretation techniques
- Knowledge and use of computerized data management systems
- Attention to detail
- Ability to prioritize tasks
- Ability to work in a team atmosphere
- Ability to maintain confidentiality

### **RESPONSIBILITY:**

Responsibilities of the Public Health Nurse include, but are not limited to, identification of public health issues including communicable disease outbreaks, assessment and analysis of population and individual public health status, health promotion, disease prevention, health maintenance, service coordination, and continuity of care activities in accordance with the needs of individuals, families, communities, and population groups working directly with at-risk populations. Public Health Nursing responsibilities also consist of data collection and analysis, care plan development, hands-on patient care, health education and advocacy, carrying out health promotion programs at all levels of prevention, field work, program planning, outreach activities, coalition building, collaboration with community partners to promote health and wellness in the county, programmatic support, and other organizational tasks. During a public health emergency, the Public Health Nurse will provide expertise and respond to the emergency per the county public health preparedness plans. The Public Health Nurse collaborates within multidisciplinary and multi-agency teams in order to achieve desirable outcomes. Public Health Nursing interventions depend upon the assigned responsibilities and the issues involved. Incumbents perform their duties with significant independence under the general supervision of the Director of Public Health Nursing and the Assistant Director of Public Health Nursing. Acting within the framework of established federal, state and local laws, codes, rules, ordinances and guidelines, including standing orders, policies, protocols, and objectives of the Hendricks County Health Department, the Public Health Nurse is an agent of the Hendricks County Health Officer for executing responsibilities while using independent judgment to apply regulations. Work is broad in scope. Independent judgment is required in applying nursing practices to individual situations or client conditions. Professional standards and practices are established but not always clearly applicable. Professional judgment is used in problem resolution. The duties listed under Essential and Non-Essential Functions of the position are normal for this position. These are not to be construed as exclusive or all-inclusive. Other duties may be required and assigned. Errors in work can result in serious health consequences, therefore putting the county at risk for costly lawsuits.

**WORKING RELATIONSHIPS:**

Working relationships are with supervisor, department managers and associates, other county government departments, state governmental agencies, community service agencies, medical providers, and the general public for the purpose of communicating factual or procedural information. The Public Health Nurse often collaborates and consults within multidisciplinary and multi-agency teams in order to achieve desirable outcomes for individuals, families and population groups.

**WORKING CONDITIONS AND PHYSICAL DEMANDS:**

Work is performed in a standard medical office environment, however due to the nature of Public Health the work may be performed in the field such as in institutional, residential and business settings, indoors and outdoors with exposure to weather conditions, as well as automobile driving risks. There is exposure to direct physical contact with patients and human bodily fluids. There may be exposure to potential health hazards, such as communicable diseases, blood borne pathogens, insects and other disease vectors, toxins, hazardous materials, chemicals and animals. In all settings, employees in this classification may occasionally need to relate to members of the public who exhibit challenging, atypical or hostile behaviors and/or communication. Demands of the position may require the incumbent to carry a county provided cell phone. Physical requirements to perform the duties of this job include the ability to sit, talk, and use hands to finger, grasp, feel, and write. Duties will also require employee to reach with hands and arms, stand, walk, stoop, kneel, crouch, crawl, and smell. May occasionally lift and/or move up to 50 pounds. Specific vision abilities include close vision, distance vision, peripheral vision and depth perception for patient assessments, driving a car and reading typewritten documents, computer monitor and phone screen. Hearing ability must be sufficient enough to communicate with others effectively in person, over the phone, and via video communication. All reasonable accommodations will be made in compliance with the Americans with Disabilities Act and any other applicable federal or state law. The Public Health Nurse may be called upon for extraordinary service in case of public health emergencies, such as bioterrorism or other community disasters and may be required to report for specialized assigned duties or perform emergency response roles, inside or outside of Hendricks County. On call 24 hours a day, 7 days a week. 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.

**APPLICANT/EMPLOYEE ACKNOWLEDGEMENT:**

The job description for the position of Public Health Nurse in the Health Department describes the duties and responsibilities in this position. I acknowledge that I have received this job description, and understand that it is not a contract of employment. I am responsible for reading this job description and complying with all job duties, requirements and responsibilities contained herein, and any subsequent revisions.

Is there anything that would keep you from meeting the job duties and requirements as outlined?

Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
Applicant/Employee signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

Yes \_\_\_\_\_ No \_\_\_\_\_



**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.

<b><u>ADDITIONAL APPROPRIATIONS</u></b>					
	<b><u>DEPARTMENT</u></b>	<b><u>ACCOUNT #</u></b>	<b><u>DESCRIPTION</u></b>	<b><u>REQUESTED</u></b>	<b><u>APPROVED</u></b>
1	Prosecutor	1001.30600.000.0108	Witnes Fees	\$15,000	
2	Commissioners	1001.33400.000.0135	Postage	\$35,000	
3	Facilities Maintenance	1001.13603.000.0136	Groundskeeper LTC4	\$560	
4	Public Defender	1001.30400.000.0166	Indegent Defense Services	\$125,000	
5	Reassessment	1188.44600.000.0109	Computer Equipment	\$800	
6	Cornerstone	1202.36600.000.0106	Repairs & Maintenance	\$20,000	
7	Home Detention User Fees	4922.19404.000.0151	Employee	\$17,124	
8	Baby & Me Tobacco Free	9102.18690.000.0214	Public Health Specialist	\$36,462	
9	Baby & Me Tobacco Free	9102.13590.000.0214	FICA/Medicare	\$2,790	
10	Baby & Me Tobacco Free	9102.13591.000.0214	PERF	\$6,473	
11	Baby & Me Tobacco Free	9102.13593.000.0214	Unemployment Insurance	\$72	
12	Baby & Me Tobacco Free	9102.13594.000.0214	Worker's Compensation	\$106	
13	Baby & Me Tobacco Free	9102.20100.000.0214	Office Supplies	\$16	
14	Baby & Me Tobacco Free	9102.21011.000.0214	Diaper Vouchers	\$3,456	
15	Baby & Me Tobacco Free	9102.30500.000.0214	Education & Confernces	\$1,920	
16	Edit	1112.90102.000.0102	Repay Rainy Day 1186	\$26,500	
17	Food & Beverage	1157.90102.000.0102	Repay Rainy Day 1186	\$26,500	
18	Edit	1112.10000.000.0102	Stipend	\$250,000	
19	Food & Beverage	1157.100000.000.0102	Stipend	\$250,000	

AYE

NAY

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

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Caleb M. Brown

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

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

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

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Jay R. Puckett

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Michael C. Rogers

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Michael C. Rogers

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Eric Wathen

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

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

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

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

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

\_\_\_\_\_  
Attest:

\_\_\_\_\_  
Nancy Marsh, Auditor

1.

REQUEST FOR EMERGENCY APPROPRIATION

Date: 09/14/17

Amount: \$ 15,000

Fund Name: COUNTY GENERAL  
(Example - County General)

Account Name: WITNESS FEES  
(Example - Supplies)

Account Number: 1001 30600 000 010/8  
Example -            Fund #      Account #      Object #      Location #  
                                 100            20100            000            102

Explanation of Request:

WE HAVE 2 ATTEMPTED MURDER CASES AND A MURDER CASE  
WILL BE HAVING DEPOSITIONS WITH MANY WITNESSES WHICH WILL  
THERE WILL BE A FEE FOR EACH WITNESS ON A COPY OF THE DEPOSITIONS  
WE ALSO HAVE A OWI CAUSING DEATH TRIAL AND WITNESSES THAT  
WE NEED TO PURCHASE AIR LINE TICKETS AND HOTEL ROOMS  
FOR ALSO A ATTEMPTED CHILD MOLEST AND HUMAN TRAFFICKING  
with Police Officer from out of state as witness.

I will be attending the Council meeting.

I will not be attending the Council meeting.

Patricia Ann Balhuni / NJC  
Authorized Signature

Auditor's Notes:

2.

REQUEST FOR EMERGENCY APPROPRIATION

Date: 09/11/17

Amount: \$ 35,000

Fund Name: County General  
(Example - County General)

Account Name: Postage  
(Example - Supplies)

Account Number:	<u>1001</u>	<u>33400</u>	<u>000</u>	<u>0135</u>
	Fund #	Account #	Object #	Location #
Example -	100	20100	000	102

Explanation of Request:

I am requesting an additional appropriation to cover the projected costs for the remainder of 2017. \$50,000.00 was transferred out of this account in February of 2017, to cover the increased County Liability Policy for 2017.

I will be attending the Council meeting.

I will not be attending the Council meeting.

R. S. O'Connell  
Authorized Signature

Auditor's Notes:

3

REQUEST FOR EMERGENCY APPROPRIATION

Date: 09/08/17

Amount: \$ 560

Fund Name: County General  
(Example - County General)

Account Name: Groundskeeper LTC4  
(Example - Supplies)

Account Number:	<u>1001</u>	<u>13603</u>	<u>0000</u>	<u>0136</u>
	Fund #	Account #	Object #	Location #
Example -	100	20100	000	102

Explanation of Request:

Additional funds requested to support salary at mid-point through the end of 2017 after change in position ranking to LTC4 from LTC5.

- I will be attending the Council meeting.
- I will not be attending the Council meeting.

Karon J. Cavanaugh  
Authorized Signature

Auditor's Notes:

J. Gooch

4.

REQUEST FOR EMERGENCY APPROPRIATION

Date: 08/30/17

Amount: \$ 125,000

Fund Name: General Fund  
(Example - County General)

Account Name: Indigent Defense Services  
(Example - Supplies)

Account Number:	<u>1001</u>	<u>30400</u>	<u>000</u>	<u>0166</u>
	Fund #	Account #	Object #	Location #
Example -	100	20100	000	102

Explanation of Request:

Funding needed for remainder of 2017.

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- 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: 09/08/17

Amount: \$ 800

Fund Name: Reassessment

(Example -- County General)

Account Name: Computer Equipment

(Example - Supplies)

Account Number: 1188 . 44600 . 000 . 0109

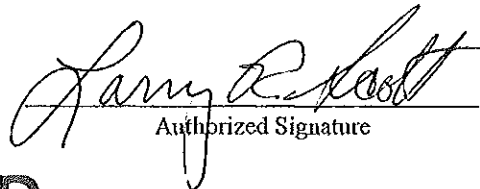
Example -	Fund #	Account #	Object #	Location #
	100	20100	000	102

Explanation of Request:

\$6,600 was requested and approved for the 2017 budget. The request was based on \$1,100 per tablet and accessories for six units. In the interim the cost has increased to \$1,226.50 per unit. For a total of \$759.00 increase over our anticipated cost, thus the reason for requesting the additional appropriation.

I will be attending the Council meeting.

I will not be attending the Council meeting.

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

Auditor's Notes:

**FILED**

SEP 08 2017

*Nancy S. Marsh*  
 AUDITOR HENDRICKS COUNTY



6

## Hendricks County Surveyor

David L. Gaston, P.S.

August 30, 2017

Nancy Marsh  
Hendricks County Auditor  
Hendricks County Government Center  
355 S Washington Street  
Danville, IN 46122

1202.36600.000.0106

RE: Request to Address Council

Dear Cinda:

Due to additional budget expenses for Cornerstone purchases and repairs for the remainder of 2017, I am requesting an additional \$20,000.00 and would like to be put on the October 2017 Agenda for the County Council.

If there are any concerns regarding this request, please do not hesitate to contact our office for clarification.

Respectfully,

A handwritten signature in blue ink, appearing to read "David L. Gaston".

David L. Gaston P.S.  
Hendricks County Surveyor

Oct  
7.

REQUEST FOR EMERGENCY APPROPRIATION

Date: 08/24/17

Amount: \$ 14,053 + #3071 # 17,124

Fund Name: Home Detention User Fees  
(Example - County General)

*Plus benefits*

Account Name: Home Detention User Fees  
(Example - Supplies)

*Fiscal Med 1075.05  
7.65%*

Account Number: 4922 19404 000 0151  
Example - Fund # Account # Object # Location #  
100 20100 000 102

*Perf 14.2%*  
1995.53  
3070.58

Explanation of Request:

Per the approved Hendricks County Probation Policy Manual, staff is to be paid out up to 420 hours of PTO upon resignation or termination  
Gwyn Green submitted her written notice in writing 8/24/17 and her last day will be 9/29/17. She will have an excess of 420 PTO hours unused upon her last day. Therefore, probation is requesting she be paid for the 420 hours of PTO time she is owed, (\$14,053.20)

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

Susan Bentley  
Authorized Signature

Auditor's Notes:



ID YEAR CO TYPE KEY

BUDGET ESTIMATE FOR

**9102 Baby & Me Tobacco Free**

(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</b>	<b>PERSONAL SERVICES</b>			
	Salaries and Wages			
	18890 Public Health Education Specialist	36,462.00		
			36,462.00	
	Employee Benefits			
	13590 FICA/Medicare	2,790.00		
	13591 PERF	6,473.00		
	13592 Group Insurance	0.00		
	13593 Unemployment Insurance (Oct-Dec \$23, Jan-Sep \$64.50)	72.00		
	13594 Worker's Compensation	106.00	8,441.00	
	Other Personal Services			
			0.00	
	<b>Total Personal Services</b>		<b>45,903.00</b>	
<b>2</b>	<b>SUPPLIES</b>			
	Office Supplies			
	20100 Office Supplies	16.00		
			16.00	
	Operating Supplies			
	21011 Diaper Vouchers	3,456.00		
			3,456.00	
	Repair and Maintenance Supplies			
			0.00	
	Other Supplies			
			0.00	
	<b>Total Supplies</b>		<b>3,472.00</b>	

2-6.9 8.

13.

14.

		Items	Total Estimate	Approved
3	<b>OTHER SERVICES AND CHARGES</b>			
	Professional Services			
30500	Education/Conferences	1,920.00		
			1,920.00	
	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	
	<b>Total Other Services and Charges</b>		<b>1,920.00</b>	

15

	Items	Total Estimate	Approved
4 CAPITAL OUTLAYS			
Land			
		0.00	
Buildings			
		0.00	
Improvements Other Than Building			
		0.00	
Machinery and Equipment			
Computers			
		0.00	
Other Capital Outlays			
		0.00	
Total Capital Outlays		0.00	0.00
TOTAL BUDGET ESTIMATE		51,295.00	0.00

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

8102 Baby & Me Tobacco Free

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

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

Dated this 30 day of August, 2017.

*D. Lynn MD / TLB*  
 \_\_\_\_\_  
 Health Officer

\_\_\_\_\_  
 Signature and Title of Officer(s) or Department Head

REQUEST FOR EMERGENCY APPROPRIATION

16.

Date: 09/13/17

Amount: \$ 26,500

Fund Name: EDIT or J+B  
(Example - County General)

Account Name: Vehicles  
(Example - Supplies)

Account Number: 1112 . 44550 . 000 . ~~0195~~ 0102  
Example -      Fund #      Account #      Object #      Location #  
                         100              20100              000              102

**Explanation of Request:**

I am requesting an additional appropriation to cover the costs associated with the purchase and customization of the newly acquired 2016 Chevrolet Express Jail Transport Van. \$24,980.00 was paid out of the Rainy Day Fund to cover the initial purchase of the van from Kelley Chevrolet. If approved, the \$24,980.00 will be refunded back to the Rainy Day Fund.

I will be attending the Council meeting.

I will not be attending the Council meeting.

R. R. Adams  
Authorized Signature

Auditor's Notes:

**REALLOCATION OF FUNDS RESOLUTION**

Be it resolved by the County Council of Hendricks County, Indiana, that for the expenses of the unit of Government of Hendricks County, the following sums of money previously appropriated for expenditures from a detailed account within a major classification, are hereby reallocated to another detailed account within a different classification as originally appropriated, all as hereinafter specified.

<u>TRANSFERS</u>				
<u>DEPARTMENT</u>	<u>FROM</u>	<u>TO</u>	<u>AMOUNT</u>	<u>Y/N</u>
1) Sheriff	1001.10549.000.0105	1001.10520.000.0105	\$1,052.14	_____
2) Court Administration	1001.16099.000.0160	1001.16006.000.0160	\$500.00	_____
3) Highway	1169.20401.002.0201	1169.44010.003.0201	\$15,000.00	_____
4) Highway	1169.20404.002.0201	1169.44010.002.0201	\$105,000.00	_____
5) Victim's Assistant Grant	8100.10856.000.0108	8100.10804.000.0108	\$3,000.00	_____
6) Health Grant CRI	8116.18619.000.0214	8116.33000.000.0214	\$1,500.00	_____
7) Health Grant CRI	8116.18619.000.0214	8116.30500.000.0214	\$800.00	_____

Adopted this 5th day of September by the following vote:

AYE

NAY

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

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

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

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

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

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

\_\_\_\_\_  
Mike Rogers

\_\_\_\_\_  
Mike Rogers

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

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

\_\_\_\_\_  
Bradley Whicker

\_\_\_\_\_  
Bradley Whicker

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

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

Attest:

\_\_\_\_\_  
Nancy Marsh, Auditor

1.

REQUEST FOR TRANSFER OF FUNDS

DATE: 9/19/17

FROM: 1001.10549.000.0105  
Full Account Number

Merit Corporal 2080 Hrs  
Account Description

TO: 1001.10520.000.0105  
Full Account Number

Merit Sergeant 2080 Hrs  
Account Description

AMOUNT: \$1,052.14

All transfers within Personal services accounts must be presented to the County Council as well as transfers from one budget classification to another.

Explanation of Request: Short fall in appropriation, due to retirement.

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

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

Auditor's Notes:

**FILED**

SEP 22 2017

*Nancy G. Marsh*  
AUDITOR HENDRICKS COUNTY

**REQUEST FOR TRANSFER OF FUNDS**

(Transfer must be within the same fund and department)

DATE: 9/25/17

FROM:	<u>1001 16099 000 0160</u>	<u>Overtime</u>
	Full Account Number	Account Description
TO:	<u>1001 16006 000 0160</u>	<u>Pro Tempores</u>
	Full Account Number	Account Description

AMOUNT: \$500

Example -	<u>100.20100.000.102</u>	<u>Office Supplies</u>
	Fund# Account# Object# Location#	Account Description

All transfers within Personal services accounts must be presented to the County Council as well as transfers from one budget classification to another.

- Budget Classifications:  
 10000 Personal Services  
 20000 Supplies  
 30000 Other Services & Charges  
 40000 Capital Outlays

Explanation of Request:  
Short on judge pro tem funds!

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

**FILED**

SEP 25 2017

*Nancy L. Marsh*  
AUDITOR HENDRICKS COUNTY

s/Catherine Haines  
 Authorized Signature

Auditor's Notes:

3.

**REQUEST FOR TRANSFER OF FUNDS**

(Transfer must be within the same fund and department)

DATE: 09/18/17

FROM: 1169 20401 002 201 Calcium Chloride  
Full Account Number Account Description

TO: 1169 44010 003 210 Truck Lease Purchases  
Full Account Number Account Description

AMOUNT: \$ 15,000

Example - 100.20100.000.102 Office Supplies  
Fund# Account# Object# Location# Account Description

All transfers within Personal services accounts must be presented to the County Council as well as transfers from one budget classification to another.

- Budget Classifications:
- 10000 Personal Services
  - 20000 Supplies
  - 30000 Other Services & Charges
  - 40000 Capital Outlays

Explanation of Request:  
Funds needed to complete the purchase  
of Dump truck ordered in Sept 2016  
(142K)

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

**FILED**  
 SEP 25 2017

Curt Hendricks  
 Authorized Signature

Auditor's Notes: Nancy G. Marsh  
 AUDITOR HENDRICKS COUNTY



4.

REQUEST FOR TRANSFER OF FUNDS

(Transfer must be within the same fund and department)

DATE: 09/25/17

FROM:	<u>1169 20404 002 201</u>	<u>Bituminous Materials</u>
	Full Account Number	Account Description
TO:	<u>1169 44010 002 201</u>	<u>Truck Lease Purchase</u>
	Full Account Number	Account Description
AMOUNT:	<u>\$ 105,000</u>	
Example -	<u>100.20100.000.102</u>	<u>Office Supplies</u>
	Fund# Account# Object# Location#	Account Description

All transfers within Personal services accounts must be presented to the County Council as well as transfers from one budget classification to another.

- Budget Classifications:  
 10000 Personal Services  
 20000 Supplies  
 30000 Other Services & Charges  
 40000 Capital Outlays

Explanation of Request:

Truck #207 Chassis

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

**FILED**

SEP 25 2017

Auditor's Notes:

*Nancy A. Marsh*  
 AUDITOR HENDRICKS COUNTY

*Curt Haggith*  
 Authorized Signature

**REQUEST FOR TRANSFER OF FUNDS**

(Transfer must be within the same fund and department)

*Grant*

DATE: 09/14/17

FROM: 8100 10856 000 108  
Full Account Number

Victims Admin Asst  
Account Description

TO: 8100 10804 000 108  
Full Account Number

Victims Asst Coordinator  
Account Description

AMOUNT: \$ 3,000

Example - 100.20100.000.102  
Fund # Account # Object # Location #

Office Supplies  
Account Description

All transfers within Personal services accounts must be presented to the County Council as well as transfers from one budget classification to another.

- Budget Classifications:  
 10000 Personal Services  
 20000 Supplies  
 30000 Other Services & Charges  
 40000 Capital Outlays

**Explanation of Request:**

Award amount was higher than anticipated when appropriating last October

State has approved up to forty hours per week instead of thirty-five.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- I will be attending the Council meeting.  
 I will not be attending the Council meeting.

*Patricia Ann Balbani*

Authorized Signature

Auditor's Notes:

6

**REQUEST FOR TRANSFER OF FUNDS**

(Transfer must be within the same fund and department)

DATE: 09/05/17

FROM: 8116 18619 000 0214 CRI/Personal  
Full Account Number Account Description

TO: 8116 33000 000 0214 CRI/Travel & Mileage  
Full Account Number Account Description

AMOUNT: \$ 1,500

Example -

100.20100.000.102  
Fund# Account# Object# Location#

Office Supplies  
Account Description

All transfers within Personal services accounts must be presented to the County Council as well as transfers from one budget classification to another.

- Budget Classifications:  
 10000 Personal Services  
 20000 Supplies  
 30000 Other Services & Charges  
 40000 Capital Outlays

**Explanation of Request:**

Salary and Mileage for grant year 7/1/2017 through 6/30/18

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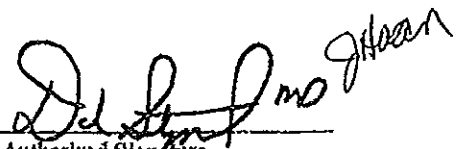


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- I will be attending the Council meeting.  
 I will not be attending the Council meeting.

  
 Authorized Signature

Auditor's Notes:

7.

**REQUEST FOR TRANSFER OF FUNDS**

(Transfer must be within the same fund and department)

DATE: 09/05/17

FROM:	<u>8116 18619 000 0214</u>	<u>CRI/Personal</u>
	Full Account Number	Account Description
TO:	<u>8116 30500 000 0214</u>	<u>CRI/Education &amp; Conferences</u>
	Full Account Number	Account Description

AMOUNT: \$ 800

Example -	<u>100,20100,000,102</u>	<u>Office Supplies</u>
	Fund # Account # Object # Location #	Account Description

All transfers within Personal services accounts must be presented to the County Council as well as transfers from one budget classification to another.

- Budget Classifications:  
 10000 Personal Services  
 20000 Supplies  
 30000 Other Services & Charges  
 40000 Capital Outlays

Explanation of Request:  
Education and Conferences for Grant Period 7/1/2017 through 6/30/2018  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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

*D. J. [Signature]*  
 Authorized Signature

Auditor's Notes: