

**REQUEST FOR LEGISLATIVE ACTION**

Completed by County Counselor's Office:

Res/Ord No.: 5203

Sponsor(s): Tony Miller

Date: February 25, 2019

<p><b>SUBJECT</b></p>	<p>Action Requested  <input type="checkbox"/> Resolution  <input checked="" type="checkbox"/> Ordinance</p> <p>Project/Title: <u>Appropriating \$80,474.05 in acceptance of insurance proceeds for the replacement of the Fred Arbanas Golf Course cart barn.</u></p>												
<p><b>BUDGET INFORMATION</b>  <i>To be completed By Requesting Department and Finance</i></p>	<table border="1"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$80,474.05</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td>\$</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$80,474.05</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$</td> </tr> <tr> <td>Source of funding (name of fund) and account code number;                  FROM: 003-9999-47040 Park Fund – Reimbursement Damage Claims</td> <td>FROM ACCT \$80,474.05</td> </tr> <tr> <td>TO: 003-1608-58020 Park Fund – <del>Other Buildings</del> Improvements</td> <td>TO ACCT \$80,474.05</td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p><b>OTHER FINANCIAL INFORMATION:</b></p> <p><input type="checkbox"/> No budget impact (no fiscal note required)  <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract:                  Department: Estimated Use: \$</p> <p>Prior Year Budget (if applicable):                  Prior Year Actual Amount Spent (if applicable):</p>	Amount authorized by this legislation this fiscal year:	\$80,474.05	Amount previously authorized this fiscal year:	\$	Total amount authorized after this legislative action:	\$80,474.05	Amount budgeted for this item * (including transfers):	\$	Source of funding (name of fund) and account code number; FROM: 003-9999-47040 Park Fund – Reimbursement Damage Claims	FROM ACCT \$80,474.05	TO: 003-1608-58020 Park Fund – <del>Other Buildings</del> Improvements	TO ACCT \$80,474.05
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<p><b>PRIOR LEGISLATION</b></p>	<p>Prior ordinances and (date):</p> <p>Prior resolutions and (date):</p>												
<p><b>CONTACT INFORMATION</b></p>	<p>RLA drafted by (name, title, &amp; phone): Brian Nowotny, Deputy Director Park Operations, 503.4803</p>												
<p><b>REQUEST SUMMARY</b></p>	<p>Requesting \$80,474.05 to be appropriated in acceptance of proceeds from Travelers Insurance Company for the replacement of the Fred Arbanas Golf Course cart barn that was damaged by severe weather.</p>												
<p><b>CLEARANCE</b></p>	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing &amp; Department)  <input type="checkbox"/> Business License Verified (Purchasing &amp; Department)  <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</p>												
<p><b>ATTACHMENTS</b></p>	<p>Copy of Travelers reimbursement checks: \$6,959.28 on 5/25/18 and \$73,514.77 on 1/24/19.</p>												

REVIEW	Department Director: <i>Michelle Spivey</i>	Date: <i>2-11-19</i>
	Finance (Budget Approval): <i>If applicable</i> <i>Dual Mather</i>	Date: <i>2/14/19</i>
	Division Manager:	Date:
	County Counselor's Office:	Date:

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the \_\_\_\_\_ Fund in \_\_\_\_\_.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance # \_\_\_\_\_
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:
003-9999-47040	Park Fund – Reimbursement Damage Claims	\$80,474.05

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.

# Supplemental Appropriation Request Jackson County, Missouri

Funds sufficient for this appropriation are available from the source indicated below.

Date: February 14, 2019

ORD # 5203

<u>Department / Division</u>	<u>Character/Description</u>	<u>From</u>	<u>To</u>
<b>Park Fund - 003</b>			
9999	47040 - Reimb Damage Claims	80,475	
2810	Undesignated Fund Balance		80,475
2810	Undesignated Fund Balance	80,475	
1608 - Construction Services	58020 - Other Improvements		80,475

*Sarah [Signature]* 2/14/19  
Budgeting

THE TRAVELERS - PL & CL CLAIM DEPAR  
PL & CL CLAIM DEPARTMENT  
P. O. BOX 2930  
OVERLAND PARK KS 66201-1330  
SA05283

891A 89330463



DATE: 05/25/18  
LOSS DATE: 05/03/18  
FILE NUMBER: 077 FR FCC6228 J

SARAH MATTHES - JACKSON COUNTY, MO  
415 EAST 12TH STREET  
KANSAS CITY MO 64106-2706

AGENT:  
LOCKTON COMPANIES LLC

ACCOUNT NAME:  
JACKSON COUNTY, MO

THE TRAVELERS INDEMNITY COMPANY

EXPLANATION OF PAYMENT

Building \$6959.28  
TOTAL PAID \$6959.28

003-9999-47040  
Travelers Bmg Claims - Cart Barn

ACV PAYMENT FOR COVER ED DAMAGES

FOR ADDITIONAL INFORMATION, CONTACT: KEVIN HEMINGWAY AT (913)402-3845

145005297  
DETACH CHECK

UNIFORM 2-111211  
DETACH CHECK

THIS DOCUMENT HAS A RED BACKGROUND - BORDER CONTAINS MICRO PRINTING AND AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

Citibank, N.A.  
One Penns Way  
New Castle DE 19720



891A 89330463

02-20  
311

P. O. BOX 2930  
OVERLAND PARK KS 66201-1330  
(913)402-3845

DATE 05/25/18 ACCOUNT NUMBER J99 FILE NUMBER 077 FR FCC6228 J

VOID IF NOT PRESENTED WITHIN  
ONE YEAR AFTER DATE OF ISSUE

SIX THOUSAND NINE HUNDRED FIFTY NINE AND 28/100

PAY: \$\*\*\*\*6,959.28

PAY TO THE ORDER OF JACKSON COUNTY, MO  
415 EAST 12TH STREET  
KANSAS CITY MO 64106-2706

010580  
SA05283

Maria Olivo  
AUTHORIZED SIGNATURE



007337

THE TRAVELERS - PL & CL CLAIM DEPAR  
PL & CL CLAIM DEPARTMENT  
PO BOX 650293  
DALLAS TX 75265--029  
SA03658

891A 89958776

TRAVELERS 

DATE: 01/24/19  
LOSS DATE: 05/03/18  
FILE NUMBER: 077 FR FCC6228 J

SARAH MATTHES  
415 E 12TH ST  
KANSAS CITY MO 64106-2706

AGENT:  
LOCKTON COMPANIES LLC

ACCOUNT NAME:  
JACKSON COUNTY, MO

THE TRAVELERS INDEMNITY COMPANY

EXPLANATION OF PAYMENT

Building \$73514.77  
TOTAL PAID \$73514.77

003-9999-47040

WIND DAMAGE CLAIM

Traveler's ~~DMG~~ Claim - Cart Barn

FOR ADDITIONAL INFORMATION, CONTACT: DANIEL MAURER AT (402)963-1724

024003679  
DETACH CHECK

UNIFORMS: 121203  
DETACH CHECK

THIS DOCUMENT HAS A RED BACKGROUND - BORDER CONTAINS MICRO PRINTING AND AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

Citibank, N.A.  
One Penns Way  
New Castle DE 19720

TRAVELERS 

891A 89958776

92-20  
311

PO BOX 650293  
DALLAS TX 75265--029  
(402)963-1724

DATE: 01/24/19  
ACCOUNT NUMBER: J99  
FILE NUMBER: 077 FR FCC6228 J

VOID IF NOT PRESENTED WITHIN  
ONE YEAR AFTER DATE OF ISSUE

SEVENTY THREE THOUSAND FIVE HUNDRED FOURTEEN AND 77/100 ----- PAY: \$\*\*\*73,514.77 DM

PAY TO THE ORDER OF JACKSON COUNTY, MO  
415 E 12TH ST  
KANSAS CITY MO 64106-2706

007337  
SA03658



AUTHORIZED SIGNATURE

