

**REQUEST FOR LEGISLATIVE ACTION**  
**EXECUTIVE OFFICE**

Completed by County Counselor's Office:  
 Res/Ord No.: 5217  
 Sponsor(s): Jeanie Lauer  
 Date: April 23, 2019

APR 11 2019

<b>SUBJECT</b>	<p>Action Requested  <input type="checkbox"/> Resolution  <input checked="" type="checkbox"/> Ordinance</p> <p>Project/Title: An ordinance authorizing the appropriation of an insurance settlement for a 2008 Ford Crown Victoria Patrol vehicle to the Sheriff's Office line item auto equipment.</p>																		
<b>BUDGET INFORMATION</b> <i>To be completed By Requesting Department and Finance</i>	<table border="1" data-bbox="328 583 1209 1108"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$3,526.50</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td>\$0</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$3,526.50</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$0</td> </tr> <tr> <td>Source of funding (name of fund) and account code number;</td> <td></td> </tr> <tr> <td>FROM:</td> <td></td> </tr> <tr> <td>Undesignated fund balance 001-2810</td> <td>\$3,526.50</td> </tr> <tr> <td>TO:</td> <td></td> </tr> <tr> <td>001-4201-56530 auto equipment</td> <td>\$3,526.50</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:	\$3,526.50	Amount previously authorized this fiscal year:	\$0	Total amount authorized after this legislative action:	\$3,526.50	Amount budgeted for this item * (including transfers):	\$0	Source of funding (name of fund) and account code number;		FROM:		Undesignated fund balance 001-2810	\$3,526.50	TO:		001-4201-56530 auto equipment	\$3,526.50
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<b>PRIOR LEGISLATION</b>	<p>Prior ordinances and (date):</p> <p>Prior resolutions and (date):</p>																		
<b>CONTACT INFORMATION</b>	<p>RLA drafted by (name, title, &amp; phone): Captain David Epperson, Commander, (816) 541-8017</p>																		
<b>REQUEST SUMMARY</b>	<p>An ordinance authorizing the appropriation of \$3,526.50 from the undesignated fund balance 001-2810 to line item 001-4201-56530 for reimbursement of the total loss of a 2008 Ford Crown Victoria police vehicle VIN# 2FAHP71V38X169188. The funds were received from State Farm Mutual Automobile Insurance Company for the loss, via check through claim number 16-6985-K89 from the insured, Eric Hoffman, reference an accident occurring on 12/18/2018. Draft #1 26 028131 j was received by Jackson County from State Farm Mutual Automobile Insurance Company in the amount of \$3,526.50.</p>																		

CLEARANCE	<input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input type="checkbox"/> Business License Verified (Purchasing & Department) <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)	
ATTACHMENTS	Copy of State Farm Check # 126028131 J	
REVIEW	Department Director: <i>[Signature]</i>	Date: 04-10-19
	Finance (Budget Approval): If applicable <i>[Signature]</i>	Date: 4/10/19
	Division Manager: <i>[Signature]</i>	Date: 4.11.19
	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 \_\_\_\_\_.
- 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:
001-9999-47040	General Fund - Reimb Dmg Claim	\$3,524.50

- 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.



PAYMENT NO 1 26 028131 J  
PAYMENT AMOUNT \$3,526.50  
ISSUE DATE 03-25-2019  
AUTHORIZED BY RIEHN, SARAH  
PHONE (844) 696-0477

CLAIM NO 16-6985-K89  
LOSS DATE 12-18-2018  
POLICY NO 1044-803-16B  
INSURED HOFFMAN, ERIC J

JACKSON COUNTY SHERIFF DEPT  
4001 NE LAKEWOOD WAY  
LEES SUMMIT MO 64064-2100

COVERAGE DESCRIPTION  
PROPERTY DAMAGE LIABILITY

ON BEHALF OF  
SHERIFF DEPT, JACKSON COUNTY

AMOUNT  
3,526.50

001-9999-47040

STATE FARM - SHERIFF DMG CLAIM

RETAIN STUB FOR RECORDS

**State Farm** STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY 1 26 028131 J  
TITLE DOCUMENT PROCESSING JPMORGAN CHASE BANK, NA 56-1544/441  
TDP CHVL OFFICE P07PCL315 COLUMBUS, OH  
CLAIM NO 16-6985-K89 INSURED HOFFMAN, ERIC J DATE 03-25-2019  
LOSS DATE 12-18-2018 MM DD YYYY

\*\*EXACTLY THREE THOUSAND FIVE HUNDRED TWENTY-SIX AND 50/100 DOLLARS

\$\*\*\*\*\*3,526.50

Pay to the  
Order of: JACKSON COUNTY SHERIFF DEPT

*Michael J. Larson*  
AUTHORIZED SIGNATURE  
*Jan C. Farney*  
AUTHORIZED SIGNATURE

SECURED DOCUMENT WATERMARK APPEARS ON BACK, HOLD AT 45° ANGLE FOR VIEWING

VOID IF GREEN COLORED BACKGROUND IS MISSING