



Jackson County Health Department

Feb. 3- 10, 2021

COVID-19

Data

**More in depth data can be found on the [JACOHD dashboard](#).

JACOHD

- Total Positive Cases- 28,898
- Total Hospitalizations- unavailable
- Total Deaths- 324

Totals This Week:

- Cases-397
- Hospitalizations-unavailable
- Deaths-8

Current Outbreaks

**Outbreaks are considered concluded after two incubation periods (28 days) since the onset date of the last confirmed case, and are thus removed from the list.

John Knox Village Care Center
240 cases
Ignite -Blue Springs
49 Cases
Truman Gardens
11 cases
Rosewood – The Groves
130 cases
Addington Place
11 cases
Villages of Jackson Creek
46 cases
Creative World – Lee’s Summit
20 cases
Northstar Residential Care
7 cases
Parkway Senior Living
21 cases
Wilbert Funeral Services
9 cases

Funeral 1/17/2021
14 cases
Ignite- St. Mary’s
59 cases
Villages at John Knox Assisted Living
74 cases
Sunterra Springs
32 cases
Redwood of Independence
150 cases
Autumn Terrace
13 cases
Cedarhurst
7 cases
Oak Grove Nursing and Rehab
25 cases
Sutton Trucking
6 cases
Wilshire at Lakewood Care Center
157 cases

JACOHD/TMC

Sponsored Testing

Ongoing weekly widespread testing at outbreak facilities

Thursday Feb. 10, 2021 - 10:00-2:00pm - Lee’s Summit, 505 NW Blue Pkwy, Lee’s Summit MO
Friday Feb. 11, 2021– 10:00-2:00pm – Independence, Uptown Market
Monday Feb. 15, 2021 – 10:00am-2:00pm – Lee’s Summit, 505 NW Blue Pkwy, Lee’s Summit MO
Tuesday, Feb 16, 2021 – 10:00- 2:00pm – Grandview Metro Christian Fellowship
Symptomatic Testing
• Call 816-404-CARE

PPE Supply

The supply rate meets the demand rate.

Testing Supply

The health department is testing symptomatic and asymptomatic individuals at traveling clinics in EJC five days a week.

JCDC Testing

This outbreak is now closed. JACOHD is continually working with JCDC on reporting and investigation.

Weekly Regional Coordination Meetings

Health Care Coalition Steering Committee Meeting, Public Health Risk Communication Coordination Meeting, Hospitals & Public Health Meeting, Communicable Disease COVID-19 Update Meeting, Missouri Center for Public Health Excellence Meeting, Public Health Coordination Meeting, Public Health Directors Meeting, Multi Agency Coordination Resource Section Support Meeting, Community Organizations Active in Disaster Meeting

EMS WEB APPLICATION SERVICE AGREEMENT

This Agreement is entered into on (02/08/2021), between SEM Applications, Inc ("Provider") and (Jackson County Public Administrator) ("Customer"), with its principal place of business located at (415 E. 12th St. 4th Floor, Kansas City MO 64016) and shall be effective as of (02/08/2021) (the "Effective Date").

Scope of Services

1. Provider has been dedicated to providing quality software solutions for public and private Guardians and Fiduciaries since 1997. The Estate Management Software (EMS) application is the most comprehensive Estate Management software package on the market. Provider's mission is to provide a complete software solution to meet the specific needs of Guardians, Conservators, and industry-related professionals.
2. Provider realizes that the needs and requirements of customers are constantly changing and works to continually enhance EMS to meet those needs while remaining committed to ensuring that customers receive prompt attention in response to emails and calls for technical support and access to online training.
3. The following support services are provided under this agreement as defined by the attached SLA: technical support via email and/or phone Mon-Fri 8 am to 5 pm CST, after-hours emergency telephone support, online training as available, and online/remote desktop support scheduled as needed.

Grant of License

1. Subject to the terms and conditions herein, Provider hereby grants Customer a nonexclusive license to access and execute the EMS Web Application Enhanced Edition on Provider's application server accessed via the Internet, and transmit data related to Customer's use of EMS over the Internet.

Use and Access

1. Subject to the use restrictions set forth herein, Customer is granted access to EMS and Provider's application server for its intended purpose and in accordance with the specifications set forth in any documentation relating to EMS provided. Such use and access will be continuous on a 24/7 basis as outlined in the Service Level Agreement except for interruptions by reason of maintenance or downtime beyond Provider's reasonable control.
2. Customer will use EMS for its internal business purposes only and will not permit EMS to be used by or for the benefit of anyone other than customer and/or their clients. Customer may not modify, translate, reverse engineer, decompile, or create derivative works based upon EMS. Customer agrees to use EMS in a manner that complies with all applicable laws including intellectual property and copyright laws. Provider expressly reserves all rights not expressly granted to Customer herein.

Obligations of Provider

1. Provider will notify Customer of any material defects or malfunctions in EMS or related documentation.
2. Provider will, from time to time, and in accordance with the rates and terms set forth in this Agreement, supply Customer with relevant documentation revised to reflect significant updates and enhancements to EMS made by Provider. Such enhancements may include, without limitations, modifications to EMS that increase its speed, efficiency, and/or ease of operation.
3. Provider will give reasonable assistance to Customer in operating any new release or upgrade.

4. Provider will correct, within a reasonable time following notification, inherent material errors in EMS that are not caused by Customer misuse or improper use of, alteration, or damage to EMS.

Price and Payment

1. Customer agrees to compensate Provider for use and access of EMS at the rate of \$3.30* per client per month, with a minimum monthly charge of \$30. **Charges apply only to cases classified as "open" for greater than 25% of the billing cycle. All "closed" cases and "hold/prospect" cases up to 50% of the total number of open cases are stored at no charge. Volume discounts available at 150, 500, & 1000 active clients. A 10% credit/debit card discount will be applied to total monthly client usage only (excluding any additional fees including but not limited to document storage and custom development) if card is able to be processed through automated batch transaction. This offer will be void if transaction does not process for any reason; offer will be reinstated on subsequent billing cycles if transaction processes successfully.*
2. Said compensation includes access to online instruction manual, technical support, online training, and unlimited closed ward/client storage. Users are allowed to designate cases as "Hold" in the ratio of 50% of the total number of active cases monthly without incurring fees. Customer requested development/customization outside of the current options and settings available within the EMS application are billed at \$150.00 per hour.
3. 1 GB Electronic data storage (photo files, documents, etc.) is provided at a rate of \$ 7.00 per month. If anticipated storage is greater than 1G, bulk electronic data storage must be purchased via third party vendor. *Monthly storage fee is waived for customers using less than 300 MB of data storage.*
4. Bulk electronic data storage (photo files, documents, etc.) provided by Mydocsonline.com may be accessed by client from the EMS website. Storage Agreement will be negotiated between customer and Mydocsonline.com directly.
5. Provider agrees to perform Data Conversion at a cost of \$ NA Data conversion to include: Data conversion may be contracted at a later date. *Note: Data conversion subject to limitations.*
6. Payments will be made via *Check payable to SEM Applications, Inc. on or before the 1st of each month and will continue monthly until terminated by either party under the terms of this agreement. 10% automatic Credit/Debit card discount will be applied to total monthly client usage. Discount is void if credit card processing fails for any reason. Discount will be reinstated for subsequent months with successful credit/debit card processing.*
7. Provider reserves the right to deny Customer access to EMS if a payment is not received within thirty (30) days of the bill date, without express permission from Provider. If Provider chooses to permit Customer continued access to EMS, Provider may: (i) remove any discounts placed upon the account and charge the highest published rate for service, and/or (ii) assess a late payment charge equivalent to ten percent (10%) of the past due balance or fifteen (\$15) dollars, whichever is greater.
8. The fees set forth herein are subject to change at any time. However, increase in fees may only become effective upon at least thirty (30) days prior written notice from Provider.

Confidential Information

1. All information relating to Customer or Customer's clients is considered to be confidential or proprietary, and will be held in confidence by Provider and will not be disclosed or used by Provider without express consent from Customer except to the extent that such disclosure or use is reasonably necessary to the performance of Provider's work or except under valid subpoena or court order. Confidential and proprietary information may include, but is not limited to, all Customer's trade secrets,

Customer and client data, client lists, information pertaining to Customer's products, services, copyrights, trademarks, logos, slogans, processes, ideas, names and expertise of employees and consultants, pricing, internal procedures, and finances, whether such information is received in written, oral, electronic, or other format. Confidential Information does not include information that is generally available to the public.

2. Provider shall only use Confidential Information in connection with the performance of services under this Agreement. If Provider is compelled by law to disclose Customer's Confidential Information, Provider shall notify Customer in writing at least five (5) business days from notice of such compelled disclosure, unless such notification could result in penalty for Customer, Provider, or both parties under applicable state and federal law. Provider shall have no obligation to object to any compelled disclosure. Upon termination of this Agreement, Provider shall return to Customer or destroy all Confidential Information.
3. All Customer/Customer Client data contained within EMS will remain the property of Customer. However, if Customer's account is delinquent beyond forty-five (45) days, Provider retains the right to restrict Customer's access to EMS until such time as Customer's account is brought current.

Indemnification

1. **Provider agrees, to the fullest extent permitted by law, to indemnify, and hold the County harmless from damages and losses arising from the negligent acts, errors or omissions of the Provider in the performance of work under this Agreement, to the extent that Provider is responsible for such damages and losses on a comparative basis of fault and responsibility between Provider and the County. Provider is not obligated to indemnify the County for the County's own negligence. Provider's obligations under this section shall be limited to the coverage and limits of insurance that Provider is required to procure and maintain under this Agreement. Insurance shall be procured and maintained by the Provider as described in Exhibit A of the Request for Proposals. Provider shall file Certificate of Insurance with the Jackson County Purchasing Department in the form described in Exhibit A within the time limit also described in the Exhibit.**

Warranties and Representations

1. Provider warrants and represents that: (i) it has the authority to enter into and perform services according to the terms of this Agreement; (ii) Provider is the sole owner of its software and services; and (iii) Customer's use of Provider's services will not violate any copyright, trademark, patent, or other intellectual or proprietary rights of any third party.

Force Majeure

1. Neither party to this Agreement shall be liable to the other for any failure or delay in performing its obligations hereunder, or for any loss or damage resulting therefrom, due to: acts of God or public enemy, acts of government, riots, terrorism, fires, floods, strikes, lock outs, epidemics, act or failure to act by the other party, or unusually severe weather affecting Customer, Provider or its subcontractors; or causes beyond their reasonable control and which are not foreseeable (each a "Force Majeure Event"). In the event of any such Force Majeure Event, the date of delivery or performance shall be extended for a period equal to the time lost by reason of the delay. The party experiencing the delay shall be prompt in restoring normal conditions, establishing new schedules, and resuming operations as soon as the event causing the delay or failure has ceased. Provider shall notify Customer promptly of any such delay and shall specify the effect on services as soon as is practical.
2. Notwithstanding any of the foregoing to the contrary, neither party shall be excused from those obligations not directly affected by a Force Majeure Event, and if the Force Majeure Event is caused by a party's failure to comply with any of its obligations under this Agreement or by such party's negligence or omission, there shall be no relief for such party from any of its obligations under this Agreement. Notwithstanding anything to the contrary in this Agreement, if the delay or interruption of performance resulting from a Force Majeure Event exceeds thirty (30) days, then the party receiving the delayed performance may terminate this Agreement upon ten (10) days' notice to the other party.

Limitation of Liability

1. Neither party shall be held liable for any special, punitive, indirect, incidental, or consequential damages including, but not limited to, loss of or damage to data, loss of anticipated revenue or profits, work stoppage or impairment of other assets, whether or not foreseeable and whether or not a party has been advised of the possibility of such damages; provided, however, that for the avoidance of doubt, damages arising in connection with obligations of indemnification or confidentiality shall be deemed to be "direct" damages for which recovery shall not be barred by this article.

Term and Termination

1. Either party may terminate this agreement without cause so long as the terminating party provides notice of termination in writing no less than 30 days prior to the effective date of termination. In the event of termination, Customer/Customer's Client data shall be released to Customer upon request providing Customer's account is current and in good standing. Data is available to Customer in CSV/Excel format. In the event of termination without cause, Customer agrees to pay Provider for all work and/or services performed up to the date of termination.
2. Either party may terminate this agreement upon written notice for material breach, provided, however, that the terminating party gives no less than fourteen (14) days written notice and the opportunity to cure said breach.

Entire Agreement

1. Parties agree that this Contract/Agreement together with the Jackson County, Missouri Request for Proposals No. 61-17 and Contractor/Respondent's response thereto constitute the complete and exclusive agreement between the parties which supersedes all prior understanding or agreements, oral or written, and all other communications between parties relating to the subject matter of this Contract/Agreement.

We hereby agree to abide by the terms and conditions set forth above and willingly enter into this Agreement for Service in good faith.

Customer Representative Signature, Title

Date



02/08/2021

Stan Meng, SEM Applications, Inc

Date

IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

A RESOLUTION transferring \$283,800.00 within the 2021 Park Fund and \$152,000.00 with the 2021 Park Enterprise Fund to realign funds in accordance with the new chart of accounts and anticipated capital equipment replacements.

RESOLUTION NO. 20618, February 8, 2021

INTRODUCED BY Theresa Cass Galvin, County Legislator

WHEREAS, a transfer of funds within the 2021 Park and Park Enterprise Funds is necessary to comply with the new Chart of Accounts issued by the Finance and Purchasing Department and to meet anticipated capital equipment replacement needs essential to maintain the park trails and enterprise areas; now therefore,

BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that the following transfer be and hereby is made:

| <u>DEPARTMENT/DIVISION</u> | <u>CHARACTER/DESCRIPTION</u> | <u>FROM</u> | <u>TO</u> |
|----------------------------|--|-------------|-----------|
| Park Fund | | | |
| Parks- Fleet Replacement | | | |
| 003-1010 | 58120- Automobiles | \$150,000 | |
| 003-1010 | 58180- Audio/Video Recording Equipment | \$ 28,500 | |
| Natural Resources | | | |
| 003-1624 | 56790- Other Contractual Services | \$ 13,000 | |
| Park Operations | | | |
| 003-1602 | 56790- Other Contractual Services | \$ 66,000 | |
| 003-1602 | 57370- Building Operating Supplies | \$ 11,000 | |
| 003-1602 | 56730- Janitor & Exterminating Services | \$ 5,000 | |

| <u>DEPARTMENT/DIVISION</u> | <u>CHARACTER/DESCRIPTION</u> | <u>FROM</u> | <u>TO</u> |
|------------------------------------|--|-------------|-----------|
| Rock Island Rail Corridor Auth. | | | |
| 003-3601 | 56790- Other Contractual Services | \$ 10,300 | |
| Parks- Fleet Replacement | | | |
| 003-1010 | 58110- Heavy Machinery & Equipment | | \$136,000 |
| 003-1010 | 58130- Trucks | | \$ 42,500 |
| Natural Resources | | | |
| 003-1624 | 56847- Lab Fees | | \$ 13,000 |
| Park Operations | | | |
| 003-1602 | 56030- Architectural & Engin. Services | | \$ 16,000 |
| 003-1602 | 56070- Intergovernmental Agreements | | \$ 30,000 |
| 003-1602 | 56726- Tree Removal Services | | \$ 20,000 |
| 003-1602 | 57371- HVAC Supplies | | \$ 11,000 |
| 003-1602 | 56796- Animal/Pest Control Services | | \$ 5,000 |
| Rock Island Rail Corridor Auth. | | | |
| 003-3601 | 56726- Tree Removal Services | | \$ 10,300 |
| Park Enterprise Fund | | | |
| Registration and Permits | | | |
| 300-1652 | 56770- Administrative Service Fee | \$ 32,000 | |
| Marinas | | | |
| 300-1653 | 56770- Administrative Service Fee | \$ 60,000 | |
| Recreational Programs | | | |
| 300-1654 | 56770- Administrative Service Fee | \$ 10,500 | |
| Outdoor Recreation & Day Camps | | | |
| 300-1657 | 56770- Administrative Service Fee | \$ 5,500 | |
| Fred Arbanas Golf Course | | | |
| 003-1666 | 56770- Administrative Service Fee | \$ 41,000 | |
| Heritage Programs | | | |
| Museums | | | |
| 300-1603 | 56770- Administrative Service Fee | \$ 3,000 | |
| Registration and Permits | | | |
| 300-1652 | 56771- Credit Card Payment Services Fee | | \$ 32,000 |

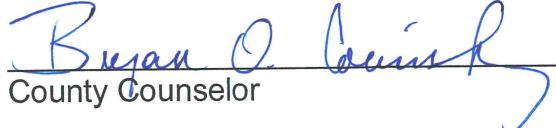
| <u>DEPARTMENT/DIVISION</u> | <u>CHARACTER/DESCRIPTION</u> | <u>FROM</u> | <u>TO</u> |
|---|--|-------------|-----------|
| Marinas 300-1653 | 56771- Credit Card Payment Services Fee | | \$ 60,000 |
| Recreation 300-1654 | 56771- Credit Card Payment Services Fee | | \$ 10,500 |
| Outdoor Recreation & Day Camps 300-1657 | 56771- Credit Card Payment Services Fee | | \$ 5,500 |
| Fred Arbanas Golf Course 300-1666 | 56771- Credit Card Payment Services Fee | | \$ 41,000 |
| Heritage Programs Museums 300-1603 | 56771- Credit Card Payment Services Fee | | \$ 3,000 |

Effective Date: This Resolution shall be effective immediately upon its passage by a majority of the Legislature.

APPROVED AS TO FORM:



Chief Deputy County Counselor



County Counselor

Certificate of Passage

I hereby certify that the attached resolution, Resolution No. 20618 of February 8, 2021, was duly passed on _____, 2021 by the Jackson County Legislature. The votes thereon were as follows:

Yeas _____

Nays _____

Abstaining _____

Absent _____

Date

Mary Jo Spino, Clerk of Legislature

Funds sufficient for this transfer are available from the sources indicated below.

ACCOUNT NUMBER: 003 1010 58120
ACCOUNT TITLE: Park Fund

Fleet Replacement
Automobiles
NOT TO EXCEED: \$150,000.00

ACCOUNT NUMBER: 003 1010 58180
ACCOUNT TITLE: Park Fund

Fleet Replacement
Audio/Video Recording Equip.
NOT TO EXCEED: \$28,500.00

| | |
|-----------------|---|
| ACCOUNT NUMBER: | 003 1624 56790 |
| ACCOUNT TITLE: | Park Fund Natural Resources Other Contractual Services |
| NOT TO EXCEED: | \$13,000.00 |
| | |
| ACCOUNT NUMBER: | 003 1602 56790 |
| ACCOUNT TITLE: | Park Fund Park Operations Other Contractual Services |
| NOT TO EXCEED: | \$66,000.00 |
| | |
| ACCOUNT NUMBER: | 003 1602 57370 |
| ACCOUNT TITLE: | Park Fund Park Operations Building Operating Supplies |
| NOT TO EXCEED: | \$11,000.00 |
| | |
| ACCOUNT NUMBER: | 003 1602 56730 |
| ACCOUNT TITLE: | Park Fund Park Operations Janitor & Exterminating Services |
| NOT TO EXCEED: | \$5,000.00 |
| | |
| ACCOUNT NUMBER: | 003 3601 56790 |
| ACCOUNT TITLE: | Park Fund Rock Island Rail Corridor Auth. Other Contractual Services |
| NOT TO EXCEED: | \$10,300.00 |
| | |
| ACCOUNT NUMBER: | 300 1652 56770 |
| ACCOUNT TITLE: | Park Enterprise Fund Registration and Permits Administrative Services Fee |
| NOT TO EXCEED: | \$32,000.00 |
| | |
| ACCOUNT NUMBER: | 300 1653 56770 |
| ACCOUNT TITLE: | Park Enterprise Fund Marinas Administrative Services Fee |
| NOT TO EXCEED: | \$60,000.00 |

ACCOUNT NUMBER: 300 1654 56770
ACCOUNT TITLE: Park Enterprise Fund
Recreational Programs
Administrative Services Fee
NOT TO EXCEED: \$10,500.00

ACCOUNT NUMBER: 300 1657 56770
ACCOUNT TITLE: Park Enterprise Fund
Outdoor Recreation & Day Camps
Administrative Services Fee
NOT TO EXCEED: \$5,500.00

ACCOUNT NUMBER: 300 1666 56770
ACCOUNT TITLE: Park Enterprise Fund
Fred Arbanas Golf Course
Administrative Services Fee
NOT TO EXCEED: \$41,000.00

ACCOUNT NUMBER: 300 1603 56770
ACCOUNT TITLE: Park Enterprise Fund
Heritage Programs and Museums
Administrative Services Fee
NOT TO EXCEED: \$3,000.00

2/11/2021
Date


Chief Administrative Officer

REQUEST FOR LEGISLATIVE ACTION

Version 6/10/19

Completed by County Counselor's Office:

Res/Ord No.: 20618

Sponsor(s): Theresa Cass Galvin

Date: February 8, 2021

| | | |
|---|--|-----------|
| SUBJECT | Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance | |
| | Project/Title Transfer funds within the 2021 Park Fund and Enterprise Fund to realign funds in accordance with the new chart of accounts and anticipated capital equipment replacements. | |
| BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i> | Amount authorized by this legislation this fiscal year: \$435,800 | |
| | Amount previously authorized this fiscal year: \$ | |
| | Total amount authorized after this legislative action: \$435,800 | |
| | Amount budgeted for this item * (including transfers): \$435,800 | |
| | Source of funding (name of fund) and account code number: | |
| | FROM: | |
| | 003-1010-58120 Park Fund, Fleet Replacement, Automobiles | \$150,000 |
| | 003-1010-58180 Park Fund, Fleet Replacement, Audio/Video Recording Equip | 28,500 |
| | 003-1624-56790 Park Fund, Natural Resources, Other Contractual Services | 13,000 |
| | 003-1602-56790 Park Fund, Park Operations, Other Contractual Services | 66,000 |
| | 003-1602-57370 Park Fund, Park Operations, Building Operating Supplies | 11,000 |
| | 003-1602-56730 Park Fund, Park Operations, Janitorial Services | 5,000 |
| | 003-3601-56790 Park Fund, Rock Island Corridor, Other Contractual Services | 10,300 |
| | Total Park Fund \$283,800 | |
| | 300-1652-56770 Enterprise Fund, Registration, Administrative Service Fees | 32,000 |
| 300-1653-56770 Enterprise Fund, Marinas, Administrative Service Fees | 60,000 | |
| 300-1654-56770 Enterprise Fund, Recreation, Administrative Service Fees | 10,500 | |
| 300-1657-56770 Enterprise Fund, Outdoor Recreation, Administrative Service Fees | 5,500 | |
| 300-1666-56770 Enterprise Fund, Fred Arbanas Golf Course, Administrative Service Fees | 41,000 | |
| 300-1603-56770 Enterprise Fund, Historic Sites, Administrative Service Fees | 3,000 | |
| Total Enterprise Fund \$152,000 | | |
| | \$435,800 | |
| TO: | | |
| 003-1010-58110 Park Fund, Fleet Replacement, Heavy Machinery & Equipment | \$136,000 | |
| 003-1010-58130 Park Fund, Fleet Replacement, Trucks | 42,500 | |
| 003-1624-56847 Park Fund, Natural Resources, Lab Fees | 13,000 | |
| 003-1602-56030 Park Fund, Park Operations, Architectural & Engineering Services | 16,000 | |
| 003-1602-56070 Park Fund, Park Operations, Intergovernmental Agreements | 30,000 | |
| 003-1602-56726 Park Fund, Park Operations, Tree Response | 20,000 | |
| 003-1602-57371 Park Fund, Park Operations, HVAC Supplies | 11,000 | |
| 003-1602-56796 Park Fund, Park Operations, Animal/Pest Control Services | 5,000 | |
| 003-3601-56726 Park Fund, Rock Island Corridor, Tree Response | 10,300 | |
| Total Park Fund \$283,800 | | |
| 300-1652-56771 Enterprise Fund, Registration, Credit Card Payment Service Fee | \$32,000 | |
| 300-1653-56771 Enterprise Fund, Marinas, Credit Card Payment Service Fee | 60,000 | |
| 300-1654-56771 Enterprise Fund, Recreation, Credit Card Payment Service Fee | 10,500 | |
| 300-1657-56771 Enterprise Fund, Outdoor Recreation, Credit Card Payment Service Fee | 5,500 | |
| 300-1666-56771 Enterprise Fund, Fred Arbanas Golf Course, Credit Card Payment Service Fee | 41,000 | |
| 300-1603-56771 Enterprise Fund, Historic Sites, Credit Card Payment Service Fee | 3,000 | |
| Total Enterprise Fund \$152,000 | | |
| | \$435,800 | |

* If account includes additional funds for other expenses, total budgeted in the account is: \$

| | | | | | | | | | | | | | | |
|--|--|-----------------------|----------------------|------------------------|-----------------|--|---|-------------|-------------------|------------------------|-----------------------|----------------------------|---------------------|-----------------------|
| | OTHER FINANCIAL INFORMATION: <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: _____ Prior Year Budget (if applicable): _____ Prior Year Actual Amount Spent (if applicable): _____ | | | | | | | | | | | | | |
| PRIOR LEGISLATION | Prior ordinances and (date): _____ Prior resolutions and (date): _____ | | | | | | | | | | | | | |
| CONTACT INFORMATION | RLA drafted by (name, title, & phone): Dianne Kimzey, Deputy Director of Enterprise Operations 503-4825 | | | | | | | | | | | | | |
| REQUEST SUMMARY | Resolution requested to transfer funds to comply with the new Chart of Accounts issued by the Finance Department. The transfer for equipment is to realign the budget to match anticipated capital equipment replacements proposed in the 2021 budget for equipment necessary to maintain the Trails and Enterprise areas. | | | | | | | | | | | | | |
| 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) | | | | | | | | | | | | | |
| COMPLIANCE | <input type="checkbox"/> MBE Goals <input type="checkbox"/> WBE Goals <input type="checkbox"/> VBE Goals | | | | | | | | | | | | | |
| ATTACHMENTS | | | | | | | | | | | | | | |
| REVIEW | <table border="1" style="width:100%"> <tr> <td>Department Director:</td><td><i>Michelle Newman</i></td><td>Date: 1/22/2021</td></tr> <tr> <td>Finance (Budget Approval): <i>If applicable</i></td><td> APPROVED <small>By Mark Lang at 2:00 pm, Jan 28, 2021</small> </td><td>Date: _____</td></tr> <tr> <td>Division Manager:</td><td><i>Shay M. Schutte</i></td><td>Date: 2-1-2021</td></tr> <tr> <td>County Counselor's Office:</td><td><i>Bryan Coover</i></td><td>Date: 2/4/2021</td></tr> </table> | | Department Director: | <i>Michelle Newman</i> | Date: 1/22/2021 | Finance (Budget Approval): <i>If applicable</i> | APPROVED <small>By Mark Lang at 2:00 pm, Jan 28, 2021</small> | Date: _____ | Division Manager: | <i>Shay M. Schutte</i> | Date: 2-1-2021 | County Counselor's Office: | <i>Bryan Coover</i> | Date: 2/4/2021 |
| Department Director: | <i>Michelle Newman</i> | Date: 1/22/2021 | | | | | | | | | | | | |
| Finance (Budget Approval): <i>If applicable</i> | APPROVED <small>By Mark Lang at 2:00 pm, Jan 28, 2021</small> | Date: _____ | | | | | | | | | | | | |
| Division Manager: | <i>Shay M. Schutte</i> | Date: 2-1-2021 | | | | | | | | | | | | |
| County Counselor's Office: | <i>Bryan Coover</i> | Date: 2/4/2021 | | | | | | | | | | | | |

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: |
|-----------------|----------------|-----------------------|
| | | |

- ☐ 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.

Fiscal Note:

Funds sufficient for this transfer are available from the sources indicated below.

PC# _____

Date: January 28, 2021

RES # 20618

| Org Code/Description | Object Code/Description | From | To |
|--------------------------------------|--|----------------|----------------|
| 003 Park Fund | | | |
| 1010 Parks - Fleet Replacement | 58120 Automobiles | \$ 150,000 | \$ - |
| 1010 Parks - Fleet Replacement | 58180 Audio/Video Recording Equipment | 28,500 | - |
| 1624 Natural Resources | 56790 Other Contractual Services | 13,000 | - |
| 1602 Park Operations | 56790 Other Contractual Services | 66,000 | - |
| 1602 Park Operations | 57370 Building Operating Supplies | 11,000 | - |
| 1602 Park Operations | 56730 Janitor & Exterminating Services | 5,000 | - |
| 3601 Rock Island Rail Corridor Auth. | 56790 Other Contractual Services | 10,300 | - |
| 1010 Parks - Fleet Replacement | 58110 Heavy Machinery & Equipment | - | 136,000 |
| 1010 Parks - Fleet Replacement | 58130 Trucks | - | 42,500 |
| 1624 Natural Resources | 56847 Lab Fees | - | 13,000 |
| 1602 Park Operations | 56030 Architectural & Engin. Services | - | 16,000 |
| 1602 Park Operations | 56070 Intergovernmental Agreements | - | 30,000 |
| 1602 Park Operations | 56726 Tree Removal Services | - | 20,000 |
| 1602 Park Operations | 57371 HVAC Supplies | - | 11,000 |
| 1602 Park Operations | 56796 Animal/Pest Control Services | - | 5,000 |
| 3601 Rock Island Rail Corridor Auth. | 56726 Tree Removal Services | - | 10,300 |
| | | 283,800 | 283,800 |

300 Park Enterprise Fund

| | | | |
|-------------------------------------|---------------------------------------|----------------|----------------|
| 1652 Registration and Permits | 56770 Administrative Services Fee | \$ 32,000 | \$ - |
| 1653 Marinas | 56770 Administrative Services Fee | 60,000 | - |
| 1654 Recreational Programs | 56770 Administrative Services Fee | 10,500 | - |
| 1657 Outdoor Recreation & Day Camps | 56770 Administrative Services Fee | 5,500 | - |
| 1666 Fred Arbanas Golf Course | 56770 Administrative Services Fee | 41,000 | - |
| 1603 Heritage Programs and Museums | 56770 Administrative Services Fee | 3,000 | - |
| 1652 Registration and Permits | 56771 Credit Card Payment Service Fee | - | 32,000 |
| 1653 Marinas | 56771 Credit Card Payment Service Fee | - | 60,000 |
| 1654 Recreational Programs | 56771 Credit Card Payment Service Fee | - | 10,500 |
| 1657 Outdoor Recreation & Day Camps | 56771 Credit Card Payment Service Fee | - | 5,500 |
| 1666 Fred Arbanas Golf Course | 56771 Credit Card Payment Service Fee | - | 41,000 |
| 1603 Heritage Programs and Museums | 56771 Credit Card Payment Service Fee | - | 3,000 |
| | | 152,000 | 152,000 |

APPROVED

By Mark Lang at 2:00 pm, Jan 28, 2021

Budget Office

\$ 435,800 \$ 435,800

IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

A RESOLUTION authorizing the County Executive to execute Cooperative Agreements with certain outside agencies that provide public health-related and other public services to citizens of Jackson County, at an aggregate cost to the County not to exceed \$3,000,000.00.

RESOLUTION NO. 20619, February 8, 2021

INTRODUCED BY Theresa Cass Galvin, County Legislator

WHEREAS, the 2021 County budget contains appropriations for outside agency funding for various public health purposes, at an aggregate cost to the County not to exceed \$3,000,000.00; and,

WHEREAS, the Legislative Auditor has recommended that the County Executive be authorized to execute Cooperative Agreements with the following agencies in the respective amounts indicated:

| <u>AGENCY</u> | <u>AMOUNT</u> |
|--|---------------|
| aSTEAM Village | \$ 25,000 |
| Bishop Sullivan Center | 30,000 |
| Calvary Community Outreach Network | 70,000 |
| Care Center of KC dba Swope Ridge Geriatric Center | 100,000 |
| Developing Potential | 25,000 |
| First Call | 194,480 |
| Footprints, Inc. | 30,000 |
| Giving the Basics | 20,000 |
| Happy Bottoms | 20,000 |
| Harvesters | 75,000 |
| Healing House | 67,200 |
| KC CARE Clinic - AIDS | 60,000 |
| KC CARE Clinic – Oral Health | 159,544 |
| Lee's Summit Cares | 14,375 |
| Mattie Rhodes | 25,000 |

| | |
|--|---------------|
| MOCSA | 30,000 |
| MidWest Music Foundation | 20,000 |
| NorthWest Community Development | 75,000 |
| One Good Meal | 70,000 |
| Operation Breakthrough- Speech | 40,856 |
| Operation Breakthrough- Family | 18,971 |
| Operation Breakthrough- Food Assistance | 10,173 |
| Palestine Senior Citizen's Activity Center | 120,000 |
| Pro Deo Youth Center | 24,347 |
| Redemptorist Social Services Center | 25,000 |
| Rose Brooks | 10,000 |
| Samuel U. Rodgers Health Center | 407,488 |
| Samuel U. Rodgers Health Center- Cabot | 72,000 |
| Seton Center Family & Health Service | 35,000 |
| Sheffield Place | 18,000 |
| Swope Health Services- Homeless | 244,771 |
| Swope Health Services- Mental Health | 29,341 |
| Swope Health Services- Chronic Disease | 87,463 |
| Swope Health Services- Low Birth Weight | 84,639 |
| Union Station- Underpriv. Children/Scholars Science City | 58,000 |
| United Inner City Services | 415,744 |
| W.E.B. DuBois Learning Center | 25,000 |
| Westside CAN | 50,000 |
| Whatsoever Community Center | 38,250 |
| Working Families Friend | <u>74,358</u> |
| TOTAL | \$ 3,000,000 |


now therefore,

BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that the County Executive be and hereby is authorized to execute Cooperative Agreements with the specified agencies, in the respective amounts indicated, in forms to be approved by the County Counselor; and,

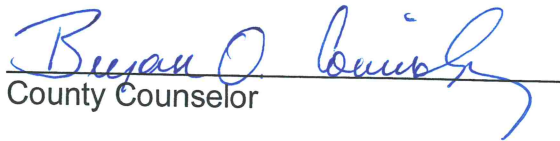
BE IT FURTHER RESOLVED that the Director of Finance and Purchasing be and hereby is authorized to make all payments, including final payment on the agreements.

Effective Date: This Resolution shall be effective immediately upon its passage by a majority of the Legislature.

APPROVED AS TO FORM:



Chief Deputy County Counselor



County Counselor

Certificate of Passage

I hereby certify that the attached resolution, Resolution No. 20619 of February 8, 2021, was duly passed on _____, 2021 by the Jackson County Legislature. The votes thereon were as follows:

Yeas _____

Nays _____

Abstaining _____

Absent _____

Date

Mary Jo Spino, Clerk of Legislature

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.

ACCOUNT NUMBER 002 7776 56789
ACCOUNT TITLE: Health Fund
 aSTEAM Village
 Outside Agency Funding
NOT TO EXCEED: \$25,000

ACCOUNT NUMBER 002 7779 56789
ACCOUNT TITLE: Health Fund
 Bishop Sullivan Center
 Outside Agency Funding
NOT TO EXCEED: \$30,000

ACCOUNT NUMBER 002 7707 56789
ACCOUNT TITLE: Health Fund
Calvary Community Outreach Network
Outside Agency Funding
NOT TO EXCEED: \$70,000

ACCOUNT NUMBER 002 7750 56789
ACCOUNT TITLE: Health Fund
Swope Ridge Geriatric Center
Outside Agency Funding
NOT TO EXCEED: \$100,000

ACCOUNT NUMBER 002 7751 56789
ACCOUNT TITLE: Health Fund
Developing Potential
Outside Agency Funding
NOT TO EXCEED: \$25,000

ACCOUNT NUMBER 002 7907 56789
ACCOUNT TITLE: Health Fund
First Call
Outside Agency Funding
NOT TO EXCEED: \$194,480

ACCOUNT NUMBER 002 7913 56789
ACCOUNT TITLE: Health Fund
Footprints
Outside Agency Funding
NOT TO EXCEED: \$30,000

ACCOUNT NUMBER 002 7771 56789
ACCOUNT TITLE: Health Fund
Giving the Basics
Outside Agency Funding
NOT TO EXCEED: \$20,000

ACCOUNT NUMBER 002 7772 56789
ACCOUNT TITLE: Health Fund
Happy Bottoms
Outside Agency Funding
NOT TO EXCEED: \$20,000

| | |
|----------------|--|
| ACCOUNT NUMBER | 002 8002 56789 |
| ACCOUNT TITLE: | Health Fund Harvesters Outside Agency Funding |
| NOT TO EXCEED: | \$75,000 |
| ACCOUNT NUMBER | 002 7908 56789 |
| ACCOUNT TITLE: | Health Fund Healing House Outside Agency Funding |
| NOT TO EXCEED: | \$67,200 |
| ACCOUNT NUMBER | 002 7704 56789 |
| ACCOUNT TITLE: | Health Fund KC CARE Clinic - AIDS Outside Agency Funding |
| NOT TO EXCEED: | \$60,000 |
| ACCOUNT NUMBER | 002 7605 56789 |
| ACCOUNT TITLE: | Health Fund KC CARE Clinic - Dental Outside Agency Funding |
| NOT TO EXCEED: | \$159,544 |
| ACCOUNT NUMBER | 002 7793 56789 |
| ACCOUNT TITLE: | Health Fund Lee's Summit Cares Outside Agency Funding |
| NOT TO EXCEED: | \$14,375 |
| ACCOUNT NUMBER | 002 7765 56789 |
| ACCOUNT TITLE: | Health Fund Mattie Rhodes Outside Agency Funding |
| NOT TO EXCEED: | \$25,000 |
| ACCOUNT NUMBER | 002 7716 56789 |
| ACCOUNT TITLE: | Health Fund MOCSA - Metro Org to Counter Sexual Asslt Outside Agency Funding |
| NOT TO EXCEED: | \$30,000 |

| | |
|----------------|---|
| ACCOUNT NUMBER | 002 7778 56789 |
| ACCOUNT TITLE: | Health Fund MidWest Music Foundation Outside Agency Funding |
| NOT TO EXCEED: | \$20,000 |
| | |
| ACCOUNT NUMBER | 002 7742 56789 |
| ACCOUNT TITLE: | Health Fund Northwest CDC Outside Agency Funding |
| NOT TO EXCEED: | \$75,000 |
| | |
| ACCOUNT NUMBER | 002 7706 56789 |
| ACCOUNT TITLE: | Health Fund One Good Meal Outside Agency Funding |
| NOT TO EXCEED: | \$70,000 |
| | |
| ACCOUNT NUMBER | 002 7743 56789 |
| ACCOUNT TITLE: | Health Fund Operation Breakthrough Outside Agency Funding |
| NOT TO EXCEED: | \$70,000 |
| | |
| ACCOUNT NUMBER | 002 7731 56789 |
| ACCOUNT TITLE: | Health Fund Palestine Senior Citizen Academy Outside Agency Funding |
| NOT TO EXCEED: | \$120,000 |
| | |
| ACCOUNT NUMBER | 002 7611 56789 |
| ACCOUNT TITLE: | Health Fund Pro Deo Youth Center Outside Agency Funding |
| NOT TO EXCEED: | \$24,347 |
| | |
| ACCOUNT NUMBER | 002 7782 56789 |
| ACCOUNT TITLE: | Health Fund Redemptorist Center Outside Agency Funding |
| NOT TO EXCEED: | \$25,000 |

| | |
|----------------|---|
| ACCOUNT NUMBER | 002 7718 56789 |
| ACCOUNT TITLE: | Health Fund Rose Brooks Outside Agency Funding |
| NOT TO EXCEED: | \$10,000 |
| ACCOUNT NUMBER | 002 7713 56789 |
| ACCOUNT TITLE: | Health Fund Samuel Rogers Health Center Outside Agency Funding |
| NOT TO EXCEED: | \$479,488 |
| ACCOUNT NUMBER | 002 7903 56789 |
| ACCOUNT TITLE: | Health Fund Seton Center Outside Agency Funding |
| NOT TO EXCEED: | \$35,000 |
| ACCOUNT NUMBER | 002 7774 56789 |
| ACCOUNT TITLE: | Health Fund Sheffield Place Outside Agency Funding |
| NOT TO EXCEED: | \$18,000 |
| ACCOUNT NUMBER | 002 7601 56789 |
| ACCOUNT TITLE: | Health Fund Swope Health Services Outside Agency Funding |
| NOT TO EXCEED: | \$446,214 |
| ACCOUNT NUMBER | 002 7759 56789 |
| ACCOUNT TITLE: | Health Fund Underpriv Children/Scholar -Science City Outside Agency Funding |
| NOT TO EXCEED: | \$58,000 |
| ACCOUNT NUMBER | 002 7736 56789 |
| ACCOUNT TITLE: | Health Fund United Inner City Services Outside Agency Funding |
| NOT TO EXCEED: | \$415,744 |

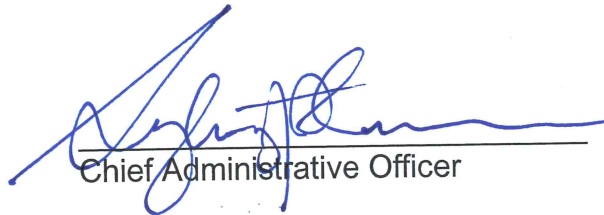
ACCOUNT NUMBER 002 7735 56789
ACCOUNT TITLE: Health Fund
WEB DuBois
Outside Agency Funding
NOT TO EXCEED: \$25,000

ACCOUNT NUMBER 002 5023 56789
ACCOUNT TITLE: Health Fund
Westside CAN
Outside Agency Funding
NOT TO EXCEED: \$50,000

ACCOUNT NUMBER 002 7784 56789
ACCOUNT TITLE: Health Fund
Whatsoever Comm. Center
Outside Agency Funding
NOT TO EXCEED: \$38,250

ACCOUNT NUMBER 002 7790 56789
ACCOUNT TITLE: Health Fund
Working Families Friend
Outside Agency Funding
NOT TO EXCEED: \$74,358

2/11/2021
Date


Chief Administrative Officer

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|----------------|--------|---------------|---|------------------------|--------|---------------|---|------------------------------------|--------|---------------|---|--|---------|---------------|---|----------------------|--------|---------------|---|------------|---------|---------------|---|-----------------|--------|---------------|---|-------------------|--------|---------------|---|---------------|--------|---------------|---|------------|--------|---------------|---|---------------|--------|---------------|---|-----------------------|--------|---------------|---|------------------------------|---------|---------------|---|--------------------|--------|---------------|---|---------------|--------|---------------|---|--|--------|---------------|---|--------------------------|--------|---------------|---|---------------------------------|--------|---------------|---|---------------|--------|---------------|---|---------------------------------|--------|---------------|---|---------------------------------|--------|---------------|---|--|--------|---------------|---|---|---------|---------------|---|----------------------|--------|---------------|---|-------------------------------------|--------|---------------|---|-------------|--------|---------------|---|---------------------------------|---------|---------------|---|---|--------|---------------|---|--------------------------------------|--------|---------------|---|-----------------|--------|---------------|---|----------------------------------|---------|---------------|---|---------------------------------------|--------|---------------|---|---|--------|---------------|---|--|--------|---------------|---|---------------|--------|---------------|--|----------------------------|---------|---------------|---|------------------------------|--------|---------------|---|--------------|--------|---------------|--|-----------------------------|--------|---------------|--|--------------------------|--------|---------------|--|--------------|--------------------|--|--|
| | <table border="1"> <tr><td>aSteam Village</td><td>25,000</td><td>002-7776-6789</td><td>✓</td></tr> <tr><td>Bishop Sullivan Center</td><td>30,000</td><td>002-7779-6789</td><td>✓</td></tr> <tr><td>Calvary Community Outreach Network</td><td>70,000</td><td>002-7707-6789</td><td>✓</td></tr> <tr><td>Care Center of KC DBA Swope Ridge Geriatric Center</td><td>100,000</td><td>002-7750-6789</td><td>✓</td></tr> <tr><td>Developing Potential</td><td>25,000</td><td>002-7751-6789</td><td>✓</td></tr> <tr><td>First Call</td><td>194,480</td><td>002-7907-6789</td><td>✓</td></tr> <tr><td>Footprints Inc.</td><td>30,000</td><td>002-7913-6789</td><td>✓</td></tr> <tr><td>Giving the Basics</td><td>20,000</td><td>002-7771-6789</td><td>✓</td></tr> <tr><td>Happy Bottoms</td><td>20,000</td><td>002-7772-6789</td><td>✓</td></tr> <tr><td>Harvesters</td><td>75,000</td><td>002-8002-6789</td><td>✓</td></tr> <tr><td>Healing House</td><td>67,200</td><td>002-7908-6789</td><td>✓</td></tr> <tr><td>KC CARE Clinic – AIDS</td><td>60,000</td><td>002-7704-6789</td><td>✓</td></tr> <tr><td>KC CARE Clinic – Oral Health</td><td>159,544</td><td>002-7605-6789</td><td>✓</td></tr> <tr><td>Lee's Summit Cares</td><td>14,375</td><td>002-7793-6789</td><td>✓</td></tr> <tr><td>Mattie Rhodes</td><td>25,000</td><td>002-7765-6789</td><td>✓</td></tr> <tr><td>Metropolitan Org to Counter Sexual Assault</td><td>30,000</td><td>002-7716-6789</td><td>✓</td></tr> <tr><td>Midwest Music Foundation</td><td>20,000</td><td>002-7778-6789</td><td>✓</td></tr> <tr><td>NorthWest Community Development</td><td>75,000</td><td>002-7742-6789</td><td>✓</td></tr> <tr><td>One Good Meal</td><td>70,000</td><td>002-7706-6789</td><td>✓</td></tr> <tr><td>Operation Breakthrough – Speech</td><td>40,856</td><td>002-7743-6789</td><td>✓</td></tr> <tr><td>Operation Breakthrough – Family</td><td>18,971</td><td>002-7743-6789</td><td>✓</td></tr> <tr><td>Operation Breakthrough – Food Assistance</td><td>10,173</td><td>002-7743-6789</td><td>✓</td></tr> <tr><td>Palestine Senior Citizens Activity Center</td><td>120,000</td><td>002-7731-6789</td><td>✓</td></tr> <tr><td>Pro Deo Youth Center</td><td>24,347</td><td>002-7611-6789</td><td>✓</td></tr> <tr><td>Redemptorist Social Services Center</td><td>25,000</td><td>002-7782-6789</td><td>✓</td></tr> <tr><td>Rose Brooks</td><td>10,000</td><td>002-7718-6789</td><td>✓</td></tr> <tr><td>Samuel U. Rodgers Health Center</td><td>407,488</td><td>002-7713-6789</td><td>✓</td></tr> <tr><td>Samuel U. Rodgers Health Center – Cabot</td><td>72,000</td><td>002-7713-6789</td><td>✓</td></tr> <tr><td>Seton Center Family & Health Service</td><td>35,000</td><td>002-7903-6789</td><td>✓</td></tr> <tr><td>Sheffield Place</td><td>18,000</td><td>002-7774-6789</td><td>✓</td></tr> <tr><td>Swope Health Services – Homeless</td><td>244,771</td><td>002-7601-6789</td><td>✓</td></tr> <tr><td>Swope Health Services – Mental Health</td><td>29,341</td><td>002-7601-6789</td><td>✓</td></tr> <tr><td>Swope Health Services – Chronic Disease</td><td>87,463</td><td>002-7601-6789</td><td>✓</td></tr> <tr><td>Swope Health Services – Low Birth Weight</td><td>84,639</td><td>002-7601-6789</td><td>✓</td></tr> <tr><td>Union Station</td><td>58,000</td><td>002-7759-6789</td><td></td></tr> <tr><td>United Inner City Services</td><td>415,744</td><td>002-7736-6789</td><td>✓</td></tr> <tr><td>W.E.B DuBois Learning Center</td><td>25,000</td><td>002-7735-6789</td><td>✓</td></tr> <tr><td>Westside CAN</td><td>50,000</td><td>002-5023-6789</td><td></td></tr> <tr><td>Whatsoever Community Center</td><td>38,250</td><td>002-7784-6789</td><td></td></tr> <tr><td>Working Families' Friend</td><td>74,358</td><td>002-7790-6789</td><td></td></tr> <tr><td>TOTAL</td><td>\$3,000,000</td><td></td><td></td></tr> </table> | aSteam Village | 25,000 | 002-7776-6789 | ✓ | Bishop Sullivan Center | 30,000 | 002-7779-6789 | ✓ | Calvary Community Outreach Network | 70,000 | 002-7707-6789 | ✓ | Care Center of KC DBA Swope Ridge Geriatric Center | 100,000 | 002-7750-6789 | ✓ | Developing Potential | 25,000 | 002-7751-6789 | ✓ | First Call | 194,480 | 002-7907-6789 | ✓ | Footprints Inc. | 30,000 | 002-7913-6789 | ✓ | Giving the Basics | 20,000 | 002-7771-6789 | ✓ | Happy Bottoms | 20,000 | 002-7772-6789 | ✓ | Harvesters | 75,000 | 002-8002-6789 | ✓ | Healing House | 67,200 | 002-7908-6789 | ✓ | KC CARE Clinic – AIDS | 60,000 | 002-7704-6789 | ✓ | KC CARE Clinic – Oral Health | 159,544 | 002-7605-6789 | ✓ | Lee's Summit Cares | 14,375 | 002-7793-6789 | ✓ | Mattie Rhodes | 25,000 | 002-7765-6789 | ✓ | Metropolitan Org to Counter Sexual Assault | 30,000 | 002-7716-6789 | ✓ | Midwest Music Foundation | 20,000 | 002-7778-6789 | ✓ | NorthWest Community Development | 75,000 | 002-7742-6789 | ✓ | One Good Meal | 70,000 | 002-7706-6789 | ✓ | Operation Breakthrough – Speech | 40,856 | 002-7743-6789 | ✓ | Operation Breakthrough – Family | 18,971 | 002-7743-6789 | ✓ | Operation Breakthrough – Food Assistance | 10,173 | 002-7743-6789 | ✓ | Palestine Senior Citizens Activity Center | 120,000 | 002-7731-6789 | ✓ | Pro Deo Youth Center | 24,347 | 002-7611-6789 | ✓ | Redemptorist Social Services Center | 25,000 | 002-7782-6789 | ✓ | Rose Brooks | 10,000 | 002-7718-6789 | ✓ | Samuel U. Rodgers Health Center | 407,488 | 002-7713-6789 | ✓ | Samuel U. Rodgers Health Center – Cabot | 72,000 | 002-7713-6789 | ✓ | Seton Center Family & Health Service | 35,000 | 002-7903-6789 | ✓ | Sheffield Place | 18,000 | 002-7774-6789 | ✓ | Swope Health Services – Homeless | 244,771 | 002-7601-6789 | ✓ | Swope Health Services – Mental Health | 29,341 | 002-7601-6789 | ✓ | Swope Health Services – Chronic Disease | 87,463 | 002-7601-6789 | ✓ | Swope Health Services – Low Birth Weight | 84,639 | 002-7601-6789 | ✓ | Union Station | 58,000 | 002-7759-6789 | | United Inner City Services | 415,744 | 002-7736-6789 | ✓ | W.E.B DuBois Learning Center | 25,000 | 002-7735-6789 | ✓ | Westside CAN | 50,000 | 002-5023-6789 | | Whatsoever Community Center | 38,250 | 002-7784-6789 | | Working Families' Friend | 74,358 | 002-7790-6789 | | TOTAL | \$3,000,000 | | |
| aSteam Village | 25,000 | 002-7776-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bishop Sullivan Center | 30,000 | 002-7779-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Calvary Community Outreach Network | 70,000 | 002-7707-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Care Center of KC DBA Swope Ridge Geriatric Center | 100,000 | 002-7750-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Developing Potential | 25,000 | 002-7751-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| First Call | 194,480 | 002-7907-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Footprints Inc. | 30,000 | 002-7913-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Giving the Basics | 20,000 | 002-7771-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Happy Bottoms | 20,000 | 002-7772-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Harvesters | 75,000 | 002-8002-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Healing House | 67,200 | 002-7908-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| KC CARE Clinic – AIDS | 60,000 | 002-7704-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| KC CARE Clinic – Oral Health | 159,544 | 002-7605-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Lee's Summit Cares | 14,375 | 002-7793-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mattie Rhodes | 25,000 | 002-7765-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Metropolitan Org to Counter Sexual Assault | 30,000 | 002-7716-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Midwest Music Foundation | 20,000 | 002-7778-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NorthWest Community Development | 75,000 | 002-7742-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| One Good Meal | 70,000 | 002-7706-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Operation Breakthrough – Speech | 40,856 | 002-7743-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Operation Breakthrough – Family | 18,971 | 002-7743-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Operation Breakthrough – Food Assistance | 10,173 | 002-7743-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Palestine Senior Citizens Activity Center | 120,000 | 002-7731-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pro Deo Youth Center | 24,347 | 002-7611-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Redemptorist Social Services Center | 25,000 | 002-7782-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Rose Brooks | 10,000 | 002-7718-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Samuel U. Rodgers Health Center | 407,488 | 002-7713-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Samuel U. Rodgers Health Center – Cabot | 72,000 | 002-7713-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Seton Center Family & Health Service | 35,000 | 002-7903-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sheffield Place | 18,000 | 002-7774-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Swope Health Services – Homeless | 244,771 | 002-7601-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Swope Health Services – Mental Health | 29,341 | 002-7601-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Swope Health Services – Chronic Disease | 87,463 | 002-7601-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Swope Health Services – Low Birth Weight | 84,639 | 002-7601-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Union Station | 58,000 | 002-7759-6789 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| United Inner City Services | 415,744 | 002-7736-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| W.E.B DuBois Learning Center | 25,000 | 002-7735-6789 | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Westside CAN | 50,000 | 002-5023-6789 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Whatsoever Community Center | 38,250 | 002-7784-6789 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Working Families' Friend | 74,358 | 002-7790-6789 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL | \$3,000,000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CLEARANCE | <input checked="" type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input checked="" type="checkbox"/> Business License Verified (Purchasing & Department) <input checked="" type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| COMPLIANCE | <input type="checkbox"/> MBE Goals <input type="checkbox"/> WBE Goals <input type="checkbox"/> VBE Goals | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ATTACHMENTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | |
|--------|--|---|-----------------------|
| REVIEW | Department Director: <i>Crissy Wooderson</i> | | Date: <i>2.1.2021</i> |
| | Finance (Budget Approval): <i>If applicable</i> | APPROVED <i>By Mark Lang at 3:35 pm, Feb 01, 2021</i> | Date: |
| | Division Manager: <i>Adam T. Parmenter</i> | | Date: <i>2/1/2021</i> |
| | County Counselor's Office: <i>Bryan Cornish</i> | | Date: <i>2/4/2021</i> |

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: |
|-----------------|----------------|-----------------------|
| | | |

- ☐ 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.

Fiscal Note:

This expenditure was included in the Annual Budget.

PC# _____

Date: February 1, 2021

RES # 20619

| Org Code/Description | Object Code/Description | Not to Exceed |
|--|------------------------------|---------------------|
| 002 Health Fund | | |
| 7776 aSTEAM Village | 56789 Outside Agency Funding | \$ 25,000 |
| 7779 Bishop Sullivan Center | 56789 Outside Agency Funding | 30,000 |
| 7707 Calvary Comm Outreach Network | 56789 Outside Agency Funding | 70,000 ✓ |
| 7750 Swope Ridge Geriatric Center | 56789 Outside Agency Funding | 100,000 ✓ |
| 7751 Developing Potential | 56789 Outside Agency Funding | 25,000 ✓ |
| 7907 First Call | 56789 Outside Agency Funding | 194,480 ✓ |
| 7913 Footprints | 56789 Outside Agency Funding | 30,000 ✓ |
| 7771 Giving the Basics | 56789 Outside Agency Funding | 20,000 ✓ |
| 7772 Happy Bottoms | 56789 Outside Agency Funding | 20,000 |
| 8002 Harvesters | 56789 Outside Agency Funding | 75,000 |
| 7908 Healing House | 56789 Outside Agency Funding | 67,200 |
| 7704 KC CARE Clinic - AIDS | 56789 Outside Agency Funding | 60,000 |
| 7605 KC CARE Clinic - Dental | 56789 Outside Agency Funding | 159,544 |
| 7793 Lee's Summit Cares | 56789 Outside Agency Funding | 14,375 |
| 7765 Mattie Rhodes | 56789 Outside Agency Funding | 25,000 |
| 7716 MOCSA - Metro Org to Counter Sexual Asslt | 56789 Outside Agency Funding | 30,000 |
| 7778 MidWest Music Foundation | 56789 Outside Agency Funding | 20,000 |
| 7742 Northwest CDC | 56789 Outside Agency Funding | 75,000 |
| 7706 One Good Meal | 56789 Outside Agency Funding | 70,000 |
| 7743 Operation Breakthrough | 56789 Outside Agency Funding | 70,000 |
| 7731 Palestine Senior Citizen Academy | 56789 Outside Agency Funding | 120,000 |
| 7611 Pro Deo Youth Center | 56789 Outside Agency Funding | 24,347 |
| 7782 Redemptorist Center | 56789 Outside Agency Funding | 25,000 |
| 7718 Rose Brooks | 56789 Outside Agency Funding | 10,000 |
| 7713 Samuel Rodgers Health Center | 56789 Outside Agency Funding | 479,488 |
| 7903 Seton Center | 56789 Outside Agency Funding | 35,000 |
| 7774 Sheffield Place | 56789 Outside Agency Funding | 18,000 |
| 7601 Swope Health Services | 56789 Outside Agency Funding | 446,214 |
| 7759 Underpriv Children/Scholar- Science City | 56789 Outside Agency Funding | 58,000 |
| 7736 United Inner City Services | 56789 Outside Agency Funding | 415,744 |
| 7735 WEB DuBois | 56789 Outside Agency Funding | 25,000 |
| 5023 Westside CAN | 56789 Outside Agency Funding | 50,000 |
| 7784 Whatsoever Comm. Center | 56789 Outside Agency Funding | 38,250 |
| 7790 Working Families Friend | 56789 Outside Agency Funding | 74,358 |
| | | \$ 3,000,000 |

APPROVED

By Mark Lang at 3:36 pm, Feb 01, 2021

Budget Office

IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

A RESOLUTION awarding twelve-month term and supply contracts with one twelve-month option to extend for the furnishing of beer for resale by the Parks + Rec Department to County Beverage Company of Lee's Summit, MO, and Central States Beverage Company of Kansas City, MO, as proprietary purchases.

RESOLUTION NO. 20622, February 16, 2021

INTRODUCED BY Tony Miller, County Legislator

WHEREAS, the Parks + Rec Department requires term and supply contracts for beer for resale in departmental retail operations; and,

WHEREAS, the County has contracted with County Beverage Company of Lee's Summit, Missouri, and Central States Beverage of Kansas City (Jackson County), Missouri, since 2017 for the furnishing of these products; and,

WHEREAS, pursuant to section 1030.6, Jackson County Code, 1984, the Director of Finance and Purchasing recommends the award of twelve-month term and supply contracts for the furnishing of this commodity to County Beverage Company of Lee's Summit, MO, and Central States Beverage Company of Kansas City, MO, as proprietary purchases of commodities that are to be offered for resale and that are not available on the competitive market; now therefore,

BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that award be made as recommended by the Director of Finance and Purchasing, and that the Director be and hereby is authorized to execute for the County any documents necessary for the

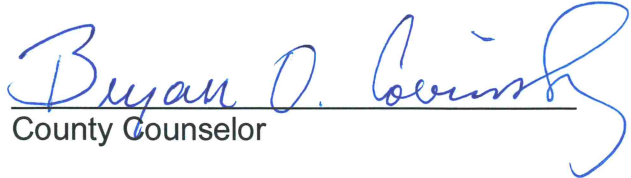
accomplishment of the award; and,

BE IT FURTHER RESOLVED that the Director be and hereby is authorized to make all payments, including final payment on the contracts, to the extent sufficient appropriations to the using spending agency have been made in the then current Jackson County budget.

Effective Date: This Resolution shall be effective immediately upon its passage by a majority of the Legislature.

APPROVED AS TO FORM:


Chief Deputy County Counselor


County Counselor

Certificate of Passage

I hereby certify that the attached resolution, Resolution No. 20622 of February 16, 2021, was duly passed on _____, 2021 by the Jackson County Legislature. The votes thereon were as follows:

Yeas _____

Nays _____

Abstaining _____

Absent _____

Date

Mary Jo Spino, Clerk of the Legislature

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 is subject to annual appropriation.

2/11/21

Date



Chief Administrative Officer

REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office:

Res/~~Ord~~ No.: 20622

Sponsor(s): Tony Miller

Date: February 16, 2021

| | | | | | | | | | | | |
|---|--|---|----|--|----|--|----|--|----|---|--|
| SUBJECT | <p>Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance</p> <p>Project/Title: <u>Awarding a Twelve Month Term and Supply Contract with One Twelve Month Extension for the furnishing of Beer for Resale at the Parks and Recreation Department's Concession Operations to County Beverage Company of Lee's Summit, Missouri and Central States Beverage of Kansas City, Missouri as proprietary purchases.</u></p> | | | | | | | | | | |
| BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i> | <table border="1"> <tr> <td>Amount authorized by this legislation this fiscal year:</td><td>\$</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>\$</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 / TO</td><td></td></tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p>OTHER FINANCIAL INFORMATION:</p> <p><input type="checkbox"/> No budget impact (no fiscal note required) <input checked="" type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract: Department: Estimated Use: Parks + Rec \$71,500.00</p> <p>Requesting approval by the Legislature of the Term & Supply Contract; the funds were already appropriated through the annual budget adoption. Estimated figures are for informational purposes only.</p> <p>Prior Year Budget (if applicable): \$71,500.00 Prior Year Actual Amount Spent (if applicable): \$70,000.00</p> | Amount authorized by this legislation this fiscal year: | \$ | Amount previously authorized this fiscal year: | \$ | Total amount authorized after this legislative action: | \$ | Amount budgeted for this item * (including transfers): | \$ | Source of funding (name of fund) and account code number; FROM / TO | |
| Amount authorized by this legislation this fiscal year: | \$ | | | | | | | | | | |
| Amount previously authorized this fiscal year: | \$ | | | | | | | | | | |
| Total amount authorized after this legislative action: | \$ | | | | | | | | | | |
| Amount budgeted for this item * (including transfers): | \$ | | | | | | | | | | |
| Source of funding (name of fund) and account code number; FROM / TO | | | | | | | | | | | |
| PRIOR LEGISLATION | <p>Prior ordinances and (date): Prior resolutions and (date): 19367, January 30, 2017</p> | | | | | | | | | | |
| CONTACT INFORMATION | <p>RLA drafted by (name, title, & phone): Craig Reich, Senior Buyer, 881-3265</p> | | | | | | | | | | |
| REQUEST SUMMARY | <p>The Parks and Recreation Department requires a Term and Supply contract for the furnishing of Beer for Resale at its' Concession Operations.</p> <p>Pursuant to Section 1030.6 of the Jackson County Code, Purchase of Proprietary Goods for Resale, Competitive bidding shall not be required when the items to be purchased are proprietary goods not available in a competitive market. The Director of Finance and Purchasing recommends the award of a Twelve Month Term and Supply Contract with One Twelve Month Extension for the furnishing of Beer for Resale at the Parks and Recreation Department's Concession operations to County Beverage Company of Lee's Summit, Missouri and Central States Beverage Company of Kansas City, Missouri as Proprietary Purchases not available on the competitive market.</p> <p>This award is made on an "As Needed" basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases is subject to annual appropriations</p> | | | | | | | | | | |
| CLEARANCE | <p><input checked="" type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input checked="" type="checkbox"/> Business License Verified (Purchasing & Department) <input checked="" type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</p> | | | | | | | | | | |
| ATTACHMENTS | <p>Award Recommendation Memorandums from Mr. Bob McMillin & Ms. Tina Spallo of the Parks + Rec Dept.</p> | | | | | | | | | | |

| | | |
|--------|---|---|
| REVIEW | Department Director: <i>[Signature]</i> for Michele Newman | Date: 2/2/21 |
| | Finance (Budget Approval): If applicable | APPROVED By Mark Lang at 2:07 pm, Feb 04, 2021 |
| | Division Manager: <i>[Signature]</i> M. Schultz | Date: 2/4/2021 |
| | County Counselor's Office: <i>[Signature]</i> Bryan Coriush | Date: 2/11/2021 |

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: |
|-----------------|----------------|-----------------------|
| | | |

- ☒ 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.

Memorandum

To: Craig Reich
From: Bob McMillin
Date: 1/4/2021
Re: 2021 Beer Projection

Craig,

The projected budget numbers listed below reflect our usage for the up coming 2021 year at the golf course and marina's for sole source resale beer.

| 300-1653-7032 -- Beverage Marinas Projected Usage | | | | | |
|---|---------------------------|--------|--|--|--|
| | Central States Beverage - | 8,000 | | | |
| | County Beverage | 11,000 | | | |

| 300-1666-7032 -- Beverage Golf Course Projected Usage | | | | | |
|---|---------------------------|--------|--|--|--|
| | Central States Beverage - | 18,000 | | | |
| | County Beverage | 21,000 | | | |

Any questions please contact me at Ext. 38405.

Bob

CONFIDENTIAL

Memorandum

To: Craig Reich, Purchasing

From: Tina Spallo, Superintendent of Recreation

Date: 01/04/2021

Re: 2021 Beer Projection

Craig,

The projected budget numbers listed below reflect our re-sale usage for the upcoming 2021 year at the Frank White, Jr. Softball Complex and Parks Dept special events.

300-1654-57032

Central States \$ 3,000

County Beverage \$10,500

Any questions please contact me at Ext. 34872.

IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI

A RESOLUTION authorizing the County Executive to execute a Contract with the Jackson County Board of Services for the Developmentally Disabled to provide for partial funding of various programs of the Parks + Rec Department's Special Population Services Division.

RESOLUTION NO. 20623, February 16, 2021

INTRODUCED BY Tony Miller, County Legislator

WHEREAS, the Parks + Rec Department has applied to the Jackson County Board of Services for the Developmentally Disabled – EITAS, for funding assistance for the Department's Special Population Services Division for 2021; and,

WHEREAS, the Board has agreed to provide a maximum sum of \$200,000.00 pursuant to the attached Contract to assist the Division with its programming, which is based on how learned social, physical, athletic, and developmental skills transfer into the individual's every day and vocational life; and,

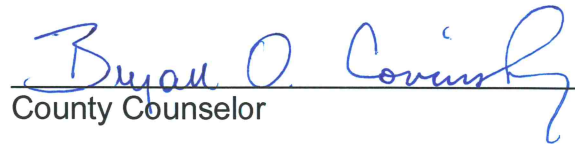
WHEREAS, execution of this Contract with the Board is in the best interest of the health, safety, and welfare of the citizens of the County; now therefore,

BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that the County Executive be and hereby is authorized to execute the attached Contract with the Jackson County Board of Services for the Developmentally Disabled.

Effective Date: This Resolution shall be effective immediately upon its passage by a majority of the Legislature.

APPROVED AS TO FORM:


Chief Deputy County Counselor


County Counselor

Certificate of Passage

I hereby certify that the attached resolution, Resolution No. 20623 of February 16, 2021, was duly passed on _____, 2021 by the Jackson County Legislature. The votes thereon were as follows:

Yeas _____

Nays _____

Abstaining _____

Absent _____

Date

Mary Jo Spino, Clerk of Legislature

Jackson County Parks & Recreation - 2021

Contract

This Contract entered into this 1st day of January 2021, by and between Jackson County, in behalf of Jackson County Parks and Recreation's Special Population Services, hereinafter referred to as "Provider", and Developmental Disability Services of Jackson County – Eitas, hereinafter referred to as "Eitas".

1. **Contract**

Eitas agrees to contract with Provider to fund specific services as described in the Provider's Proposal dated September 10, 2020 and approved by the Eitas Board of Directors on December 1, 2020.

Eitas has agreed to fund up to \$200,000 for these services.

2. **Term**

The term of this Contract shall be one year from January 1, 2021 to December 31, 2021.

3. **Client List**

The Provider shall provide to Eitas a list of all clients served in its program (those with a developmental disability and those without) for the prior six months and for each and every client as much of the following available information will be provided:

- (a) Date of birth;
- (b) Address, Provider and Zip Code;
- (c) Disability of each client;
- (d) Name of Sheltered Workshop in which client is employed or is supervised by;
- (e) Name and type of Residence facility in which client resides or is supervised by;
- (f) Percentage of clients in program who are residents of Jackson County, Missouri, who have developmental disabilities

pursuant to 205.968 R.S.Mo. et seq., and who are served by a Sheltered Workshop or Residential facility program.

At least two-thirds (2/3) of all clients participating in this program must "Eligible Persons" and meets Eitas' eligibility requirements as follows:

The term "Eligible Persons" for purposes of this Contract includes any person who is a resident of Jackson County, Missouri and has a primary diagnosis of a developmental disability.

For purposes of the preceding sentence, a developmental disability means either or both of:

(i) A disability which is attributable to an intellectual disability, cerebral palsy, autism, epilepsy, a learning disability related to a brain dysfunction or a similar condition found by comprehensive evaluation to be closely related to such conditions or require habilitation similar to that required for a person with an intellectual disability which originated before age 22 and which can be expected to continue indefinitely; and

(ii) A developmental disability as defined from time to time in Section 630.005 of the Statutes.

Persons with a primary diagnosis of a mental illness shall not be deemed eligible for Eitas funding.

Determination of who is a resident of Jackson County, Missouri shall, in situations in which there is doubt, and for all purposes of this Contract, be made by Eitas.

Both Provider and Eitas shall adhere to confidentiality standards and HIPAA regulations, pursuant to those governing the disclosure of client information as outlined by the Kansas City Regional Office concerning the release of specific client information.

4. Accountability

(a) As part of its funding contingencies, Eitas requires Provider to implement an agency wide Outcomes Measurement System for Eligible Persons served based upon the Missouri Quality Outcomes.

The Provider shall work cooperatively with Eitas Support Services staff in the development, review, evaluation and reporting of these Outcomes.

Provider shall afford access to designated Eitas staff the premises where person are served, identified individuals, pertinent records and to the guardian or parent where indicated pursuant to the development, review, evaluation and reporting on successful implementation of the Outcomes Measurement System.

In addition, Provider is to ensure that all staff are trained in the Missouri Quality Outcomes and their significance in working with individuals in the workplace.

(b) In the event that Eitas representatives become aware of problems, or observe situations that are detrimental to Eitas funded persons, Eitas will provide a written report to Provider detailing the issues.

A written response including an action plan and persons responsible for resolution shall be presented to Eitas within an agreed upon timeframe. Failure to address problems and issues brought to the attention of Provider may result in withholding or suspension of Eitas funding.

(c) Provider will comply with all local, state, and federal law. Provider will not discriminate against any Eligible Person on the basis of age, sex, religion, race or ethnicity, disability, sexual orientation, or financial status.

Provider shall maintain in effect an affirmative action policy, a sexual harassment policy, and a drugs and alcohol policy that are acceptable to Eitas and, in the case of the drugs and alcohol policy, satisfies all applicable standards for such policies applicable to drivers established by any transit authority with jurisdiction over Provider.

Provider will not use or permit the use of Eitas owned facilities for religious purposes.

5. Contract Billing and Payment

(a) The Provider shall, within 15 days following the end of each month during the Term, deliver to Eitas an invoice for compensation due under this Contract for the preceding month.

Each invoice shall provide information about the Services provided under this Contract for the preceding month that is sufficient for Eitas to confirm the amount of compensation owed by Eitas to Provider each such month, and each such invoice shall be signed by appropriate official of Provider and shall be certified by Provider to Eitas as being true and correct.

(b) The Provider shall on the monthly invoice list the name, title, and responsibilities of each employee, the dates so employed, and the amounts paid to said employees.

The Provider also further agrees to submit to Eitas with its quarterly reports, an activity report which document the number of events/programs provided the total number of individuals attending each event/program, and the number of developmentally disabled residents of Jackson County attending each event/program under the Provider program.

6. Eitas Policies

The Provider shall abide by the philosophy and written policies adopted by Eitas that pertain to related services. Eitas shall provide to the Provider a copy of all such policies and at all times as Eitas adopts new written policies. Any proposed policy shall be mailed to the Provider in advance of Eitas meeting at which any new policies will be considered for adoption by Eitas.

7. Religious Use

Provider agrees that it will not directly or indirectly use any Eitas owned facility for religious purposes, nor will Provider use any funds from Eitas either directly or indirectly for religious purposes.

8. Sexual Harassment Policy

Provider shall have in place a sexual harassment policy and submit a copy of the same to Eitas. Such policy shall include verified on-going

training for all personnel relating to sexual harassment and adequate procedural safeguards to report a complaint by either staff or clients.

9. Health Insurance Portability and Accountability Policy

Provider, if required by law, shall comply with all requirements of the Health Insurance Portability and Accountability Act hereinafter referred to as "HIPAA", as well as any and all federal rules and regulations pertaining to "HIPAA", as well as any and all federal rules and regulations pertaining to "HIPAA".

The parties further agree to timely enter into additional agreements or contracts as required by law to implement the requirements of "HIPAA". Provider shall submit to Eitas a copy of its policies regarding the same within thirty (30) days of the date any such policies are required by "HIPAA" law regulations.

10. Invoices

(a) Invoices for services rendered received 45 days or more after the month of service shall not be honored for payment unless approved by Eitas. All bills for services for calendar year 2020 must be submitted to Eitas by January 15, 2021.

(b) Eitas reserves the right to audit all invoices and to reject any invoice for good cause, including but not limited to the following reasons:

(i) The original invoice is not signed by the appropriate official of the Provider.

(ii) The units invoiced for an authorized client or service are in excess of the amount provided in the Budget.

(iii) The invoice includes services or costs not authorized by Eitas.

(iv) The amounts invoiced for an authorized cost or services are in excess of the known amounts provided.

(v) The price for a cost or service differs from the agreed upon price.

- (c) Eitas retains the right to deduct from an invoice of the Provider any overpayment made by Eitas on a prior invoice
- (d) Eitas retains the right to make invoice corrections/changes with appropriate notification to the Provider
- (e) An invoice system must be developed which will enable Eitas to track and account for its dollars through a reporting process, which will be provided to Provider by Eitas.

Such reporting procedures will be jointly reviewed by the parties prior to utilization. The reporting system shall be basically the same as that required of other agencies funded by Eitas and consistent with Eitas' financial systems management policies set forth in the Policy and Procedures manual and the Funding Application packet.

- (f) Eitas will pay the Provider for all services provided based on actual costs to the Provider that shall be documented to Eitas by appropriate documentation.

Unless, otherwise provided, Eitas shall not pay the Provider a monthly pro-rated amount based on the yearly contract.

11. Notices

Provider shall give to Eitas' Executive Director written notice of:

- (i) The death of an Eligible Person;
- (ii) A serious accident involving an Eligible Person;
- (iii) A life-threatening illness of an Eligible Person;
- (iv) The making of any formal allegations of mistreatment of an Eligible Person;
- (v) Notice of any investigation including but not limited to misuse of funds of an Eligible Person;
- (vi) Abuse, neglect, death or other investigation initiated by any accreditation or regulatory or other investigatory body with similar status, in each case within 24-hours after the Provider becomes aware of the occurrence of such event.

In addition, Provider shall furnish Eitas' Executive Director copies of:

- (i) Any and all reports issued by an investigatory agency promptly but to not exceed five work days of receipt concerning their respective findings;
- (ii) Any corrective action plan or quality improvement plan or recommendations issued to Provider as a result of an investigation; and
- (iii) Any other Provider response to an investigation.
- (iv) Provider also agrees to keep Eitas' Executive Director informed as to the course of any investigation and take active steps to secure any documents and/or reports related an investigation.
- (v) Provider shall notify Eitas' Executive Director within 24-hours of the occurrence of any event that impacts or might impact adversely on Provider's ability to comply fully with the terms and conditions of this Contract.

12. Laws to Govern

The Provider shall comply with all local, state and federal laws and regulations including but not limited to the Americans with Disabilities Act and Section 504 of the Rehabilitation Act, if the Provider is a recipient of federal financial assistance.

Eitas makes no commitment as to funding the requirements of any local, state or federal law or regulations.

13. Work Product

The Provider agrees and understands that all work products developed as a result of the Provider's services under this Contract are to be used solely for the purposes of this contract. If the Provider wishes to use any work product developed under this Contract for any other purpose it must have the prior written consent of Eitas to do so.

14. Sunshine Law

The parties agree that the Provider is a "Governmental Body" pursuant to the Sunshine Law of the State of Missouri, Section 610.010 et seq. R.S. Mo.

15. Inspections

The Provider agrees to allow Eitas or its designated agent to monitor the Providers programs at any reasonable time.

16. Audit

Provider shall furnish annually, on or before ninety (90) days after its fiscal year, its certified audit and the audit must contain a management letter.

17. Termination

(a) This Contract may be terminated by either party by giving 30 days prior written notice to the other party of such termination

(b) This contract may be terminated by Eitas if in the sole judgment of Eitas, the funding available to Eitas during the Term is significantly less than had been anticipated by Eitas at the time the Contract was made and the reduction in funding causes continued performance under the Contract by Eitas to be fiscally imprudent.

18. Documents

The Provider shall provide any and all documents required by this Contract by mail, or by delivery to Eitas or by e-mail to jjacobs@eitas.org or its successor.

19. Modifications

This agreement constitutes the complete understanding of the parties hereto with respect to the subject matter and may be modified or amended only by written instrument executed by the parties.

IN WITNESS WHEREOF, the parties set their hands this _____
day of _____, 20_____.

JACKSON COUNTY, MISSOURI

Approved as to Form:

By: _____
County Counselor

By: _____
Frank White, County Executive

**DEVELOPMENTAL DISABILITY SERVICES OF JACKSON COUNTY –
EITAS**

By: _____
Jake Jacobs, Executive Director

LEGISLATURE

By: _____
Mary Jo Spino, Clerk of Legislature

REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office:

Res/~~Ord~~ No.: 20623

Sponsor(s): Tony Miller

Date: February 16, 2021

| | | | | | | | | | | | | | | | | | |
|---|---|---|-----------------------|--|----------|--|-----------|--|----------|---|----------------------|-------|-----------|----------------------------|-----------------------|-------|-----------|
| SUBJECT | Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance Project/Title: <u>Authorizing the County Executive to execute a contract with Developmental Disability Services of Jackson County – EITAS.</u> | | | | | | | | | | | | | | | | |
| BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i> | <table border="1"> <tr> <td>Amount authorized by this legislation this fiscal year:</td><td>\$200,000</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>\$200,000</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; FROM / TO</td><td></td></tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p>OTHER FINANCIAL INFORMATION: <input checked="" 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: \$0.00</p> <p>Prior Year Budget (if applicable): \$234,200 Prior Year Actual Amount Spent (if applicable):</p> | Amount authorized by this legislation this fiscal year: | \$200,000 | Amount previously authorized this fiscal year: | \$ | Total amount authorized after this legislative action: | \$200,000 | Amount budgeted for this item * (including transfers): | \$0 | Source of funding (name of fund) and account code number; FROM / TO | | | | | | | |
| Amount authorized by this legislation this fiscal year: | \$200,000 | | | | | | | | | | | | | | | | |
| Amount previously authorized this fiscal year: | \$ | | | | | | | | | | | | | | | | |
| Total amount authorized after this legislative action: | \$200,000 | | | | | | | | | | | | | | | | |
| Amount budgeted for this item * (including transfers): | \$0 | | | | | | | | | | | | | | | | |
| Source of funding (name of fund) and account code number; FROM / TO | | | | | | | | | | | | | | | | | |
| PRIOR LEGISLATION | Prior ordinances and (date): Prior resolutions and (date): # 20369 March 4, 2020 | | | | | | | | | | | | | | | | |
| CONTACT INFORMATION | RLA drafted by (name, title, & phone): Tina M. Spallo Superintendent of Recreation 816-503-4872 | | | | | | | | | | | | | | | | |
| REQUEST SUMMARY | Resolution authorizing the County Executive to execute a contract with Developmental Disability Services of Jackson County – EITAS, accepting partial funding of various programs of the Parks + Rec Department's Special Population Services Division. The Parks + Rec Department has applied to EITAS for funding assistance for the Department's Special Population Services Division for 2021. The Board has agreed to provide up to \$200,000 for these services for the term of this contract, January 1, 2021 to December 31, 2021. | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | |
| REVIEW | <table border="1"> <tr> <td>Department Director:</td><td><i>Michele Newman</i></td><td>Date:</td><td>2/4/2021</td></tr> <tr> <td>Finance (Budget Approval):</td><td>N/A</td><td>Date:</td><td>2/9/2021</td></tr> <tr> <td>Division Manager:</td><td><i>Dan M. Schabo</i></td><td>Date:</td><td>2/11/2021</td></tr> <tr> <td>County Counselor's Office:</td><td><i>Bryan O. Conis</i></td><td>Date:</td><td>2/11/2021</td></tr> </table> | Department Director: | <i>Michele Newman</i> | Date: | 2/4/2021 | Finance (Budget Approval): | N/A | Date: | 2/9/2021 | Division Manager: | <i>Dan M. Schabo</i> | Date: | 2/11/2021 | County Counselor's Office: | <i>Bryan O. Conis</i> | Date: | 2/11/2021 |
| Department Director: | <i>Michele Newman</i> | Date: | 2/4/2021 | | | | | | | | | | | | | | |
| Finance (Budget Approval): | N/A | Date: | 2/9/2021 | | | | | | | | | | | | | | |
| Division Manager: | <i>Dan M. Schabo</i> | Date: | 2/11/2021 | | | | | | | | | | | | | | |
| County Counselor's Office: | <i>Bryan O. Conis</i> | Date: | 2/11/2021 | | | | | | | | | | | | | | |

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: |
|-----------------|----------------|-----------------------|
| | | |

- ☐ 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.