RECYEST PORT OF STATIVE ACTION

AUG 27 2019

Completed by County Counselor's Office: RESTOR No.: 5258

RustOrd No.:

Sponsor(s):

Theresa Galvin Sentember 9 2010

	Date: September 9,	2019					
SUBJECT	Action Requested Resolution Ordinance Project/Title: Appropriating \$366,404 from the undesignated fund balance in acceptant from Travelers as it relates to burst pipes at the Downtown Courthouse	ce of insurance proceeds					
BUDGET	The state of the s						
INFORMATION	Amount authorized by this locislet's with Good ways						
	Amount authorized by this legislation this fiscal year:	\$366,404					
To be completed	Amount previously authorized this fiscal year:	\$2,834,654					
By Requesting	Total amount authorized after this legislative action:	\$3,201,058					
Department and	Amount budgeted for this item * (including transfers):	\$0 m					
Finance	Source of funding (name of fund) and account code number:						
	FROM	FROM ACCT					
	001 (General Fund)-1240 (Courthouse Flood Insurance) -47040 (Reimbursement for Damage Claims)	\$366,404					
	ТО	TO ACCT					
	001 (General Fund) - 1240 (Courthouse Flood Insurance) – 55010 (Salary)	\$32,475.12					
	001 (General Fund) - 1240 (Courthouse Flood Insurance) – 55030 (Overtime)	\$37,622.49					
		\$20,964.04					
	001 (General Fund) - 1240 (Courthouse Flood Insurance) – 55055 (Union Pension)	1 1					
	001 (General Fund) - 1240 (Courthouse Flood Insurance) – 56790 (Other Contractual)	\$212,269.03					
	001 (General Fund) - 1240 (Courthouse Flood Insurance) – 57230 (Other Operating Supplies)	\$680.40					
	001 (General Fund) - 1240 (Courthouse Flood Insurance) – 58150 (Furniture & Fixtures)	\$61,931.17					
	001 (General Fund) - 1240 (Courthouse Flood Insurance) – 58170 (Other Equipment)	\$83.16					
	001 (General Fund) - 1240 (Courthouse Flood Insurance) – 58171 (Personal Computer/Accessories)	\$377.96					
	* If account includes additional funds for other expenses, total budgeted in the account is: \$ OTHER FINANCIAL INFORMATION: No budget impact (no fiscal note required) 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	Prior ordinances and (date): 5205 (3/11/19); 5211 (3/25/19); 5228 (5/20/19); 5232 (6/10	0/19); 5235 (6/10/19):					
LEGISLATION	Frior ordinances and (date): 3203 (3/11/19); 5211 (3/23/19); 3228 (3/20/19); 3232 (6/10/19); 3233 (6/10/19); 5237 (7/1/19); 5240 (7/22/19) Prior resolutions and (date):						
CONTACT							
INFORMATION	RLA drafted by (name, title, & phone): Sarah Matthes, Grant Audit & Risk Manager, 8	381.3202					
REQUEST	Travelers Insurance sent check #90429173 for \$91,061.64, check #90429175 for \$65,04						
SUMMARY	for \$94,242.29 and check # 90482669 for \$116,057.70 to go towards repairs and other						
	water line breaks at the Downtown Courthouse.						
	Requesting that the \$366,404 be appropriated into the following accounts:						
	001-1240-55010 \$32,475.12 Facilities Payroll						
	001-1240-55030 \$37,622.49 Facilities & Sheriff Overtime						
	001-1240-55055 \$20,964.04 Facilities Union Pension						
	001-1240-55055 \$20,964.04 Facilities Union Pension 001-1240-56790 \$212,269.03 Repairs						
	001-1240-56790 \$212,269.03 Repairs 001-1240-57230 \$680.40 Public Administrator surge protectors & Courts easel replacement						
	001-1240-58150 \$61,931.17 County & Courts furniture replacement						
	001-1240-58170 \$83.16 Courts juror room microwave replacement						
	001-1240-58170 \$83.16 County monitor replacement						
	001-1240-361/1 \$377.90 . County mointor replacement						

CLEAR	RANCE	Tax Clearance Completed (Purchasing & Department) N/A						
		Business License Verified (Purchasing & Department)						
		Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)						
COMPI	MPLIANCE MBE Goals							
		WBE Goals						
		☐ VBE Goals						
	CHMENTS	Copy of Travelers Insura	ince checks					
REVIEW		Department Director: Cheryl L. Colter		Date: 8/27/19				
		Finance (Budget Approval): Date:			Date:			
		If applicable (Dulai White		8/2+/19			
Division Manager:			MEN		Date: 8/28/19			
County Counselor's Office: Blesan Country				2	Date: 8/29/19			
Fiscal	Informatio	n (to be verified by B	udget Office in Finance Depart		*			
	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 suffi	afficient for this expenditure will be/were appropriated by Ordinance #						
\boxtimes	Funds sufficient for this appropriation and transfer are available from the source indicated below.							
	Account N	lumber:	Account Title:	Amount Not to Exceed:				
	001-1240-47040		General Fund – Courthouse Flood	ral Fund – Courthouse Flood \$366,404				
			Insurance – Reimbursement for					
			Damage Claims					
			11					
This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of								
	funds for sp	ecific purchases will, of n	ecessity, be determined as each using	agency places its order.				
This legislative action does not impact the County financially and does not require Finance/Budget approval.								

Supplemental Appropriation Request Jackson County, Missouri

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

Date:	September 3, 2019			ORD# 5258
Depa	rtment / Division	Character/Description	From	То
General Fund - 001			0	e =
1240 - Courtho	ouse Flood Ins	47040 - Reimb Damage Claims	366,404	
2810		Undesignated Fund Balance	12	366,404
2810		Undesignated Fund Balance	366,404	
1240 - Courtho	ouse Flood Ins	55010 - Salary	-	32,475
1240 - Courtho	ouse Flood Ins	55030 - Overtime	S	37,623
1240 - Courtho	ouse Flood Ins	55055 - Union Pension		20,964
1240 - Courtho	ouse Flood Ins	56790 - Other Contractual	2 	212,269
1240 - Courtho	ouse Flood Ins	57230 - Other Operating Supplies	5	681
1240 - Courtho	ouse Flood Ins	58150 - Furniture & Fixtures		61,931
1240 - Courtho	ouse Flood Ins	58170 - Other Equipment		83
1240 - Courtho	ouse Flood Ins	58171 - Personal Computer/Access		378
()	T. Company		-	¥8 3.————————————————————————————————————
8	6			-8 (
X 2				

Saul 11 9/3/19

THE TRAVELERS - TRAVELERS - PROPERT TRAVELERS - PROPERTY CLAIM P.O. BOX 430 BUFFALO NY 14240-0430

891A 90429175

TRAVELERS

DATE:

07/22/19

LOSS DATE:

02/03/19

FILE NUMBER:

877 FR FDH8522 P

AGENT:

LOCKTON COMPANIES LLC

ACCOUNT NAME-

JACKSON COUNTY, MO

THE TRAVELERS INDEMNITY COMPANY

- EXPLANATION OF PAYMENT

Personal Property Insured Extra Expense \$1969.04 TOTAL PAID \$65041.74

JACKSON COUNTY, MO

KANSAS CITY MO 64106-2706

415 E 12TH ST

\$63072.70

SA03005

DOI-1240-47040

Travelers PW DTCH 2/3/19#5

SUPPLEMENT - CONTENTS AND EXTRA EXPENSE

ATTN: SARAH MATTHES

FOR ADDITIONAL INFORMATION, CONTACT: DAVID B MCLEAN AT (913)967-9095

03003022

_ DETACH CHECK

UNSUMM -11131 OVRPUNS2-12129

DETACH CHECK

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

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

891A 90429175 62-20

DBM

P.O. BOX 430 NY 14240-0430 (913)967-9095

DATE

ACCOUNT NUMBER

FILE NUMBER

VOID IF NOT PRESENTED WITHIN

07/22/19

SA03005

J99

877 FR FDH8522 P

ONE YEAR AFTER DATE OF ISSUE

SIXTY FIVE THOUSAND FORTY ONE AND 74/100 -----

PAY: \$***65,041.74

PAY JACKSON COUNTY, MO TO THE 415 E 12TH ST ORDER OF KANSAS CITY MO 64106-2706 006027

Douglas te. AUTHORIZED SIGNATURE

THE TRAVELERS - TRAVELERS - PROPERT TRAVELERS - PROPERTY CLAIM P.O. BOX 430 BUFFALO NY 14240-0430

SA03004

90429173 891A

TRAVELERS

DATE:

07/22/19

LOSS DATE:

01/31/19

FILE NUMBER:

877 FR FDH7165 J

AGENT:

LOCKTON COMPANIES LLC

ACCOUNT NAME:

JACKSON COUNTY, MO

THE TRAVELERS INDEMNITY COMPANY

EXPLANATION OF PAYMENT

Extra Expense \$91061.64 TOTAL PAID \$91061.64

JACKSON COUNTY. MO

415 EAST 12TH ST. ROOM105 KANSAS CITY MO 64106

> 001-1240-47040 Travelers PW DTCH 1/31/19 #8

EXTRA EXPENSE ~ GUARD, COUNTRY WORKERS ATTN: SARAH MATTHES

FOR ADDITIONAL INFORMATION, CONTACT: DAVID B MCLEAN AT (913)967-9095

03003021

DETACH CHECK

UNSUMM -11131 OVRPUNS2-12129 DETACH CHECK

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

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

891A 90429173

P.O. BOX 430 NY 14240-0430 (913)967-9095

DATE 07/22/19 ACCOUNT NUMBER

NINETY ONE THOUSAND SIXTY ONE AND 64/100 -----

J99

FILE NUMBER

877 FR FDH7165 J

VOID IF NOT PRESENTED WITHIN ONE YEAR AFTER DATE OF ISSUE

PAY: \$***91,061,64

TO THE ORDER OF

JACKSON COUNTY, MO 415 EAST 12TH ST. ROOM105

006025

KANSAS CITY MO 64106

Touglas te.

THE TRAVELERS - TRAVELERS - PROPERT TRAVELERS - PROPERTY CLAIM P.O. BOX 430 BUFFALO NY 14240-0430

NY 14240-0430

JACKSON COUNTY, MO 415 EAST 12TH ST. ROOM105

KANSAS CITY MO 64106

SA03739

891A 90453014

TRAVELERS.

DATE:

08/01/19

LOSS DATE:

01/31/19

FILE NUMBER:

877 FR FDH7165 J

AGENT:

LOCKTON COMPANIES LLC

ACCOUNT NAME:

JACKSON COUNTY, MO

THE TRAVELERS INDEMNITY COMPANY

EXPLANATION OF PAYMENT

Buildina \$94242.29 TOTAL PAID \$94242.29

> 001-1240-47040 Travelers PW DTCH 1/31/19 #9

SUPPLEMENT - BUILDING ATTN: SARAH MATTHES

FOR ADDITIONAL INFORMATION, CONTACT: DAVID B MCLEAN AT (913)967-9095

13003759

DETACH CHECK

UNSUMM -11131 OVRPUNS2-12129! DETACH CHECK

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

Gitibank, N.A. One Penns Way New Castle DE 19720 TRAVELERS

891A

90453014

P.O. BOX 430 NY 14240-0430

(913) 967 - 9095

DATE 08/01/19 **ACCOUNT NUMBER**

J99

FILE NUMBER

877 FR FDH7165 J

VOID IF NOT PRESENTED WITHIN ONE YEAR AFTER DATE OF ISSUE

NINETY FOUR THOUSAND TWO HUNDRED FORTY TWO AND 29/100 ------

PAY: \$***94,242.29

PAY TO THE ORDER OF

JACKSON COUNTY, MO 415 EAST 12TH ST. ROOM105

007498 SA03739 KANSAS CITY MO 64106

Touglas te. AUTHORIZED SIGNATURE A. Maria Maria A. Maria Maria

THE TRAVELERS - TRAVELERS - PROPERT TRAVELERS - PROPERTY CLAIM P.O. BOX 430 P.O. BO. BUFFALO NY 14240-0430

891A 90482669

SA02939

TRAVELERS

DATE:

08/12/19

LOSS DATE:

02/03/19

FILE NUMBER:

877 FR FDH8522 P

AGENT:

LOCKTON COMPANIES LLC

ACCOUNT NAME: JACKSON COUNTY, MO

THE TRAVELERS INDEMNITY COMPANY

EXPLANATION OF PAYMENT

Building \$116057.70 TOTAL PAID \$116057.70

JACKSON COUNTY, MO

KANSAS CITY MO 64106-2706

415 E 12TH ST

001-1240-47040 Travelers Pw DTCH 2/3/19 #6

SUPPLEMENT - PROFESSIONAL FEES ATTN: SARAH MATTHES

FOR ADDITIONAL INFORMATION, CONTACT: DAVID B MCLEAN AT (913)967-9095

24002950 _ DETACH CHECK

UNSUMM -11131 OVRPUNS2-12129 DETACH CHECK

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

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

DATE

08/12/19

TRAVELERS J P.O. BOX 430 NY 14240-0430

(913) 967 - 9095

891A 90482669

DRM

ACCOUNT NUMBER J99

FILE NUMBER

877 FR FDH8522 P

ONE HUNDRED SIXTEEN THOUSAND FIFTY SEVEN AND 70/100 -----

VOID IF NOT PRESENTED WITHIN

ONE YEAR AFTER DATE OF ISSUE

PAY: \$**116,057.70

PAY JACKSON COUNTY, MO TO THE 415 E 12TH ST KANSAS CITY MO 64106-2706 ORDER OF 05890 iA02939

Torylar te. AUTHORIZED SIGNATURE