

FILED & RECORDED
OFFICE

1999 DEC 22 AM 9 38

*See attached***NOTICE OF MEETING OF THE
COMMISSIONERS COURT OF POLK COUNTY, TEXAS**

125

Notice is hereby given that a Regular meeting of the above named Commissioners' Court will be held on Tuesday, December 28, 1999 at 10 00 a.m in the County Courthouse, Livingston, Texas, at which time the following subjects will be discussed, to wit

SEE ATTACHED AGENDA

Dated Wednesday, December 22, 1999

Commissioners' Court of Polk County, Texas

By

John P. Thompson, County Judge

I, the undersigned County Clerk, do hereby certify that the above Notice of Meeting of Polk County Commissioners Court, is a true and correct copy of said Notice, and that I posted a true and correct copy of said notice in the County Courthouse of Polk County, Texas, at a place readily accessible to the general public at all times on Wednesday, December 22, 1999, and said notice remained so posted continuously for at least 72 hours preceding the scheduled time of said meeting

Notice filed, Wednesday, December 22, 1999

Barbara Middleton, County Clerk

By



POLK COUNTY, TEXAS

COMMISSIONERS COURT AGENDA

for: TUESDAY - DECEMBER 28, 1999 - 10 00 A M

CALL TO ORDER

1. WELCOME - Public Comments.
2. INFORMATIONAL REPORTS
3. CONSIDER APPROVAL OF MINUTES for meeting of, December 14, 1999

NEW BUSINESS

4. CONSIDER APPROVAL OF ORDER DESIGNATING SURPLUS PROPERTY
5. CONSIDER APPROVAL TO ADVERTISE FOR BIDS FOR THE SALE OF SURPLUS PROPERTY
6. CONSIDER APPROVAL OF AGREEMENT WITH NATIONAL HERITAGE INSURANCE CO FOR SOFTWARE RELATING TO AGING SERVICES
7. CONSIDER APPROVAL OF INTERLOCAL AGREEMENT WITH CITY OF ONALASKA FOR FIREFIGHTING SERVICES
8. CONSIDER APPROVAL OF INTERLOCAL AGREEMENT WITH TEXAS ASSOCIATION OF COUNTIES FOR WORKERS COMPENSATION COVERAGE
9. CONSIDER APPROVAL OF AGREEMENT FOR FIRE ALARM INSPECTION/MAINTENANCE SERVICES AT POLK COUNTY LAW ENFORCEMENT CENTER
10. CONSIDER APPROVAL OF OFFERS TO PURCHASE TAX FORECLOSURE PROPERTIES, (Pct. 2) Lots 412 & 414, Sportsmans Retreat #6, (Pct. 3) Lots 29 & 30A, Chester 100

CONSENT AGENDA ITEMS

11. CONSIDER APPROVAL OF BUDGET AMENDMENTS
12. CONSIDER APPROVAL AND PAYMENT OF BILLS (by Schedule)
13. CONSIDER APPROVAL OF PERSONNEL ACTION FORMS

ADJOURN

Next regularly scheduled meeting - January 11, 2000, 10 00 a m

STATE OF TEXAS }

DATE DECEMBER 28, 1999

COUNTY OF POLK }

"REGULAR" CALLED MEETING

Judge Thompson Absent

Commissioner Purvis Absent

"COMMISSIONERS COURT"

BE IT REMEMBERED ON THIS THE 28th DAY OF DECEMBER, 1999 THE HONORABLE COMMISSIONERS COURT MET IN A "REGULAR" CALLED MEETING WITH THE FOLLOWING OFFICERS AND MEMBERS PRESENT, TO WIT

COMMISSIONER BOBBY SMITH PRESIDING
B E Slim SPEIGHTS COUNTY COMMISSIONER PCT#1, BOBBY SMITH COUNTY COMMISSIONER PCT#2, R R "Dick" HUBERT COUNTY COMMISSIONER PCT#4, BARBARA MIDDLETON COUNTY CLERK & BILL LAW COUNTY AUDITOR, THE FOLLOWING AGENDA ITEMS ORDERS, AND DECREES WERE DULY HAD, CONSIDERED & PASSED

- 1 WELCOME & CALLED TO ORDER BY COMMISSIONER BOBBY SMITH AT 10 00 A M COMMISSIONER SMITH INFORMED EVERYONE, "THIS IS THE LAST COMMISSIONERS COURT OF THIS CENTURY "

REV JAMES JIM SHERRILL OF LIVINGSTON CHRISTIAN CENTER DELIVERED THE OPENING PRAYER

PUBLIC COMMENTS NONE

2 INFORMATIONAL REPORTS

A Commissioner Smith reported Judge Thompson & Commissioner Purvis is out of town on business

Precinct #2 Road & Bridge reported machinery (namely) an EXCAVATOR was burned (set on fire) by vandals on Christmas night It was parked on Ray Marsh Road just off of FM 350 North Commissioner Smith is offering a reward through CRIME STOPPERS for any information leading to the apprehension and conviction of any persons that did this to county equipment

- 3 MOTIONED BY R R "Dick" HUBERT, SECONDED BY B E "Slim" SPEIGHTS, APPROVAL OF MINUTES FOR MEETING OF DECEMBER 14, 1999 (with noted Corrections)
ALL VOTING YES

- 4 MOTIONED BY B, E, "Slim" SPEIGHTS, SECONDED BY R R "Dick" HUBERT, APPROVAL TO HAVE DEPARTMENTS INVENTORY & REPORT SURPLUS PROPERTY TO DETERMINE WHETHER THE COUNTY SHOULD SEE BY BID OR AUCTION
ALL VOTING YES

- 5 MOTIONED BY B E "Slim" SPEIGHTS, SECONDED BY R R "Dick" HUBERT,
APPROVAL TO ADVERTISE FOR BIDS FOR THE SALE OF SURPLUS
PROPERTY
ALL VOTING YES

- 7 MOTIONED BY B E "Slim" SPEIGHTS, SECONDED BY R R "Dick" HUBERT,
APPROVAL OF INTERLOCAL AGREEMENT WITH THE CITY OF ONALASKA
FOR FIREFIGHTING SERVICES
ALL VOTING YES (SEE ATTACHED)

- 8 MOTIONED BY B E "Slim" SPEIGHTS, SECONDED BY R R "Dick" HUBERT,
APPROVAL OF INTERLOCAL AGREEMENT WITH TEXAS ASSOCIATION OF
COUNTIES FOR WORKERS COMPENSATION COVERAGE
ALL VOTING YES (SEE ATTACHED)

- 6 MOTIONED BY R R "Dick" HUBERT, SECONDED BY B E "Slim" SPEIGHTS,
APPROVAL OF AGREEMENT WITH NATIONAL HERITAGE INSURANCE CO
FOR SOFTWARE RELATING TO AGING SERVICES
ALL VOTING YES, (SEE ATTACHED)

- 9 MOTIONED BY R R "Dick" HUBERT, SECONDED BY B E "Slim" SPEIGHTS,
APPROVAL OF AGREEMENT FOR FIRE ALARM INSPECTION /
MAINTENANCE SERVICES AT POLK COUNTY LAW ENFORCEMENT
CENTER
ALL VOTING YES (SEE ATTACHED)

- 10 CONSIDERATION OF OFFERS TO PURCHASE TAX FORECLOSURE
PROPERTY
 - A MOTIONED BY BOBBY SMITH, SECONDED BY B E "Slim" SPEIGHTS,
ACCEPT OFFER TO PURCHASE TAX FORECLOSURE PROPERTY,
PRFCINCT #2 LOTS 412 & 414, SPORTSMAN RETREAT SEC #6
ALL VOTING YES
 - B MOTIONED BY R R "Dick" HUBERT, SECONDED BY B E "Slim" SPEIGHTS,
TO TABLE ITEM FOR PRECINCT #3 PROPERTIES,
LOTS 29 & 30A, CHESTER 100
ALL VOTING YES

- 11 MOTIONED BY B E "Slim" SPEIGHTS SECONDED BY R R "Dick" HUBERT,
APPROVAL OF BUDGET AMENDMENTS #2000-06
ALL VOTING YES (SEE ATTACHED)

- 12 MOTIONED BY R R "Dick" HUBERT, SECONDED BY B E "Slim" SPEIGHTS,
APPROVAL AND PAYMENT OF BILLS (by schedule) plus addendum.
ALL VOTING YES (SEE ATTACHED)

| DATE | AMOUNT | CHECK NUMBERS |
|------------|--------|-----------------|
| 12 14 1999 | 4 75 | Void Ck #143014 |
| 12 14 1999 | 45 28 | Void Ck #143320 |

| DATE | AMOUNT | CHECK NUMBFRS |
|----------------|------------|---|
| 12 14 1999 | 314 81 | Void Ck #144537 |
| 12 14 1999 | 59 96 | Void Ck #144711 |
| 12 11 1999 | 37 610 70 | 146182 146188 |
| 12 14 1999 | 21 290 54 | 146189 146500 |
| 12 15 1999 | 90 000 00 | Electronic Transfer (Texpool Inv) |
| 12 15 1999 | 189 803 44 | 146501 146635 |
| 12 16 1999 | 15 050 28 | Electronic Transfer FICA |
| 12 16 1999 | 51 985 50 | 146636 146613 |
| 12 21 1999 | 58 119 19 | Electronic Transfer (FICA W/H) |
| 12 21 1999 | 186 970 72 | 146644 146666 |
| 12 22 1999 | 45 954 12 | 146667 146737 |
| 12 22 1999 | 128 967 68 | 146738 146884 |
| Add 12 28 1999 | 10 676 00 | (FY 2000) To appear on future schedule |

13 MOTIONED BY R R "Dick" HUBERT, SECONDED BY B E "Slim" SPEIGHTS,
APPROVAL OF PERSONNEL ACTION FORMS
ALL VOTING YES (SEE ATTACHED)

14 MOTIONED BY R R "Dick" HUBERT, SECONDED BY BOBBY SMITH AND
B E "Slim" SPEIGHTS, TO ADJOURN COURT THIS 28th DAY OF DECEMBER
1999 AT 10 10 A M
ALL VOTING YES

Commissioner Bobby Smith, Presiding
For JOHN P THOMPSON, COUNTY JUDGE

ATTEST


BARBARA MIDDLETON COUNTY CLERK

C:\WP51\COMMCRT9\DEC28 wpd

STATE OF TEXAS }

DATE DECEMBER 28, 1999

COUNTY OF POLK }

"REGULAR" CALLED MEETING
Judge Thompson Absent
Commissioner Purvis Absent

**** CORRECTED ****

"COMMISSIONERS COURT"

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COMMISSIONER PCT#2, R R 'Dick' HUBERT COUNTY COMMISSIONER PCT#4,
BARBARA MIDDLETON COUNTY CLERK & BILL LAW COUNTY AUDITOR, THE
FOLLOWING AGENDA ITEMS, ORDERS, AND DECREES WERE DULY HAD,
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10 00 A M COMMISSIONER SMITH INFORMED EVERYONE, "THIS IS
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REV JAMES JIM SHERRILL OF LIVINGSTON CHRISTIAN CENTER
DELIVERED THE OPENING PRAYER

PUBLIC COMMENTS NONE

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APPROVAL OF INTERLOCAL AGREEMENT WITH TEXAS ASSOCIATION OF
COUNTIES FOR WORKERS COMPENSATION COVERAGE, REMAINING IN
EFFECT
ALL VOTING YES
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BARBARA MIDDLETON COUNTY CLERK

C:\WP51\COMMCRT9\DEC28 wpd

VOL

45 PAGE 1184

#6

NHIC

COPY

National Heritage Insurance Company
12545 Riata Vista Circle
Austin Texas 78727
(512) 514 3000
An EDS Company

«Custom15»

«Org_ID»
«OrgName»
ATTN «ContactName»
«Address1»
«City» «State» «Zip»

Dear Provider

We understand that you will be filing your Long Term Care claims electronically to and retrieving information electronically from Long Term Care electronic services or you are interested in making a change or discontinuing your electronic services. Enclosed are two copies of the NHIC *Long Term Care Agreement for Electronic Data Interchange* and one *Request for LTC Electronic Services* form Please fill out one form for each contract Below please read the section of this letter that applies to you

New Access to Electronic Services

In order for you to access Long Term Care (LTC) electronic services there is some information that NHIC requires Sign BOTH copies of the *Long Term Care Agreement for Electronic Data Interchange* and complete the *Request for LTC Electronic Services* form As an electronic billing provider you have the option of submitting electronic data using one or more than one of various methods CMSconnect software vendor or in house developed software and a billing service (clearinghouse) If you will be using a vendor or in house software at your office you must first contact the NHIC Help Desk at (800) 626-4117 to request a Production ID Once this ID is obtained it must be included on the request form along with your provider number If you will be using a billing agent, you must obtain the Production ID from the billing agent and include it on the request form We cannot approve your request for access to LTC electronic services until all forms have complete information Return all forms to the following address.

National Heritage Insurance Company
Attention Provider Automation
12545 Riata Vista Circle, Second Floor
Austin, Texas 78727

Once the Agreement has been approved by NHIC, one copy will be returned to you for your files.

Change or Discontinue Electronic Services

If you are already an approved provider for LTC electronic services and would like to request a change to the method of accessing services or discontinue services or billing agents, complete the request form and OMIT the agreements.

Sincerely

NHIC Provider Automation Department

DATED MATERIAL - ACTION REQUIRED Enclosed Agreements must be signed and returned within 45 days of the issue date or it becomes null and void

NHIC**National Heritage Insurance Company**

12545 Riata Vista Circle
Austin, Texas 78727
(512) 514 3000
An EDS Company

LONG TERM CARE AGREEMENT FOR ELECTRONIC DATA INTERCHANGE

On this «Custom15» National Heritage Insurance Company hereinafter called "Contractor" and «OrgName» («Org_ID») hereinafter called the "Provider" enter into the following agreement. WHEREAS Contractor processes claims for Long Term Care programs, hereinafter called "LTC" in the State of Texas WHEREAS the Provider desires to submit claims for reimbursement under one or more of the LTC programs in a machine readable form via electronic media, NOW THEREFORE, Contractor and Provider agree between and among each of them as follows

- I The Contractor agrees to accept from the Provider (or from any billing agent he employs) electronic claims for reimbursement under the Texas Department of Human Services/Texas Department of Mental Health and Mental Retardation LTC programs and process such claims in the same manner as it would process claims submitted by the Provider on the appropriate paper claim form but only upon and subject to the terms and conditions of this Agreement.
- II. The Provider agrees
 - A That all electronic claims submitted by the Provider or his billing agent will (1) be in a format acceptable to Contractor for the program(s) involved (2) be submitted in accordance with the Contractor's electronic claims billing procedures (3) contain all information required by Contractor
 - B That no claims will be submitted through the electronic claims process that require individual consideration, including but not limited to claims requiring supporting documentation
 - C That the Provider has complied with the contractual and licensure requirements, laws and regulations of the various state and federal agencies, and conditions that would allow the Provider to participate in and receive reimbursement under the LTC program(s) for which claim is made
 - D That electronic claims submitted to Contractor by Provider or by any billing agent he/she might choose to employ shall contain true, accurate, and complete information
 - E. Provider will review for accuracy claims payment information from claims processed by Contractor. The Provider may request an adjustment request of a payment decision to the Contractor within the requisite number of days for the appropriate program under which the claim was filed.
 - F The cashing of each warrant or receipt of direct deposit for claims paid to the Provider will be a representation and certification that the Provider presented the bill for the services shown on the accompanying explanation of payment forms and that the services were personally rendered by the Provider or under his/her personal supervision.
 - G That every electronic claim entry submitted by the Provider or his/her billing agent is capable of being associated and identified with corresponding source documents. The source documents shall contain the same client authorizations and signatures as required for claims submitted on appropriate paper form
 - H That all source documents pertaining to each electronic claim submitted by the Provider will be retained by Provider or his agent for the records retention period specified in the Provider's contract(s) to provide services for the Texas Department of Human Services/Texas Department of Mental Health/Mental Retardation.
 - I That the Provider is solely responsible for the accuracy of all electronic claims submitted to the Contractor by the Provider or his billing agent.
 - J Provider will research and correct all billing discrepancies, and any incorrect payments discovered will be adjusted according to the applicable provisions then in effect for such claims.

NHIC

National Heritage Insurance Company

12545 Riata Vista Circle
Austin, Texas 78727
(512) 514 3000
An EDS Company

- K Provider will unconditionally upon request, provide free copies of and access to records pertaining to the services for which claims are submitted to LTC programs to representatives designated by the Texas Department of Human Services and/or Texas Department of Mental Health/Mental Retardation, the United States Department of Health and Human Services (HHS), the Texas Attorney General's Medicaid Fraud Control Unit and/or the health insuring contract for Medicaid, with respect to the operation of the Texas Medical Assistance Program.
- L Except as provided in K above that confidentiality of recourse and other information be maintained relating to clients in accordance with applicable State and Federal laws, rules, and regulations
- M The Provider shall assume all necessary personal responsibility and review of the internal procedures used to develop transcribe, data enter and transmit all required claim information for payment. The Provider shall also assume personal responsibility for verification of charges submitted for payment. This administrative control and review shall consist of the following minimum participation requirements
 - 1 The individual Provider's signature or an authorized provider representative's signature (as appropriate for the type of service) on the source document verifies that services were performed as billed.
 - 2 Each source document must reflect the information specified in the provider manual or regulation or instructions applicable to the service for which a bill is submitted
- N This Agreement shall become effective as of the date first herein above written, when executed by all parties and shall remain in effect until terminated by Provider or Contractor. Provider or Contractor may terminate this Agreement by giving thirty (30) days prior written notice thereof intent to terminate. IN WITNESS WHEREOF Contractor and Provider have caused this Agreement to be executed by their duly authorized representatives.
- III The Provider acknowledges that the claims will be paid from federal and/or state funds, and that anyone who submits falsified claims, or who misrepresents or falsifies, or causes to be misrepresented or falsified any record or other information relating to that claim or information that is required pursuant to this Agreement may upon conviction, be subject to fine and/or imprisonment under applicable federal state law
- IV The Provider agrees to submit a "Request for Services" form and understands that only through this form or the Request for Services Change" form will electronic submission privileges be assigned to a provider number (vendor/contract).
- V By signing this Agreement, the State, the Contractor and the Provider accept all of the stipulations in this Agreement and agree to each and every provision therein.

Provider

National Heritage Insurance Co

POLK COUNTY AGING SERVICES

Legal Name of Provider

John P. Thompson
Signature Provider Representative

Signature

John P. Thompson
Name of Person Signing (please type or print)

Date

POLK COUNTY JUDGE

Title

NHIC Provider Automation

P.O. BOX 1192

Address

LIVINGSTON, TEXAS 77351

City

76 27

NHIC

National Heritage Insurance Company
12545 Riata Vista Circle
Austin, Texas 78727
(512) 514 3000
An EDS Company

Request for LTC Electronic Services

All sections must be completed in order to process this request for access to LTC electronic services. If you have questions regarding this request form call the NHIC Help Desk at (800) 626-4117. Please fill out one form for each Production ID needed.

Section I Request type

Indicate the type of request

- Check "New" if this is an initial request to begin submitting and receiving electronic data
- Check "Change" if this request is to update your current profile by adding a billing service to alter the method in which you access LTC electronic services or to change the Production ID used to download the electronic Remittance & Status
- Check "Delete" if this is a request to delete a billing service or Production ID from your current profile

New Change Delete

Section II Method for submitting LTC data and/or accessing LTC electronic services

As an electronic billing provider you have the option of submitting electronic data by various methods: CMSconnect software vendor or in-house developed software and billing service or central billing office. It is possible to use a combination of services to access LTC electronic services. For example you may use your own billing service or software to submit claims and use CMSconnect to obtain claim status and request Medicaid eligibility and service authorization verification. Below indicate the method(s) you will use for submitting data and/or accessing LTC electronic services.

- If "CMSconnect" is checked below a CMSconnect Production ID will be sent by mail. To order the CMSconnect software complete the CMSconnect order form. If multiple stations are used you may order a production ID for each station. A separate "Request for Electronic Services" should be submitted for each production ID needed.
- If "Billing Service" is checked below provide the billing service name and Production ID. You may list more than one billing service.
- If "Vendor Software" is checked below provide the name of the software and call the NHIC Help Desk to request a Production ID. It takes approximately two days to obtain a Production ID from NHIC. It is required to obtain the ID to complete this request.

This request for LTC electronic services cannot be processed without complete information. If you are making changes to existing electronic services provide the new information.

| | |
|--|--|
| <input checked="" type="checkbox"/> CMSconnect Production ID | <input type="checkbox"/> Billing Service 1 Name _____ Production ID _____ |
| <input type="checkbox"/> Vendor/In-house Software (used in your office) Brand name _____ Production ID _____ | Billing Service 2 Name _____ Production ID _____ |
| <input type="checkbox"/> Central Billing Office Name _____ Production ID _____ | Billing Service 3 Name _____ Production ID _____ |

National Heritage Insurance Company

12545 Riata Vista Circle
Austin, Texas 78721
(512) 514 3000
An EDS Company

Section III Provider (vendor/contract) Numbers Associated with the production ID's listed above

List the provider numbers you wish to associate with the production ID's listed above. This will enable the users of the production ID's specified to process transactions for the listed provider numbers

Table with 2 columns: Facility Name, Provider/Vendor Number. Row 1: POLK COUNTY AGING SERVICES, 001000824

Section IV Remittance & Status Reports (R&S)

If you submit claim data electronically it is necessary to download R&S data electronically. Indicate the Production ID (electronic mailbox ID) to be used in downloading the electronic R&S. R&S data can only be sent to one mailbox

- If you are using this form to request a CMSconnect Production ID and would like the R&S assigned to it, check the first box
• If using vendor or in house software in your office call the NHIC Help Desk to request a Production ID. It takes approximately two days to obtain an ID from NHIC. If a billing service should receive the R&S contact them for their Production ID. Only one ID may be entered on the line below as R&S data may only be sent to one mailbox at a time
• If electronic R&S retrieval is unavailable check Temporary paper R&S for 30 days. Paper R&S reports will be distributed to you for a four week period

[X] Assign R&S Report to CMSconnect Production ID generated by this request.

[] New or changed Production ID for downloading the electronic R&S

[] Temporary paper R&S for 30 days

Section V Provider address information

Print or type the information below. This request cannot be processed without this information

Legal name of provider: POLK COUNTY AGING SERVICES (if different than facility)
Contact name: LEZLI MYERS Telephone number: 409 327-6844
Mailing address: P O BOX 1192
LIVINGSTON, TEXAS 77351

Section VI Provider Attestment

I (we) attest to the accuracy of the information provided on this request. I (we) authorize the exchange of data as defined in this request.

Signature: [Handwritten Signature] Date: 12/28/99

Name (please print): John P. Thompson, County Judge Title

NHIC**National Heritage Insurance Company**

12545 Riata Vista Circle
Austin, Texas 78727
(512) 514 3000
An EDS Company

CMSSconnect Software Order Form

Complete and submit this form to receive a copy of the CMSSconnect software. Installation of multiple p c s for each individual facility location can be made from a single set of software diskettes. It is necessary to submit a Request for LTC Electronic Services form to order a Production and TexMedNet ID and initiate security. These are necessary for the operation of the software. Please duplicate the form if you would like CMSSconnect mailed to other locations.

Indicate what form you would like the software in

3 5" diskettes CD-ROM

Indicate the mailing address for the CMSSconnect software

001000824

Provider Number

POLK COUNTY AGING SERVICES

Company Name

P O. BOX 1192

Address

LIVINGSTON, TEXAS 77351

Address

LEZLI MYERS

Attention

(409) 327-6844

Phone Number


Signature

12/28/99
Date

#7



JOHN P THOMPSON
COUNTY JUDGE

COPY

January 7, 2000

Jeanne Ann Byrd, Mayor
City of Onalaska
P O Box 880
Onalaska, Texas 77360

Dear Jeanne Ann

Please allow this letter to serve as official notification that the Polk County Commissioners Court an a regular session held December 28, 1999, ratified the continuation of the Interlocal Agreement for firefighting services executed between the City of Onalaska and Polk County on May 22, 1995

For your information and record, I have enclosed a copy of the agreement As you can see, the initial term stated in the agreement is 5/22/95 - 12/31/99, with an automatic continuation from year to year hence, until terminated by either party Unless I hear differently from you, I will assume that the Court's ratification of this agreement continuation meets with the approval of the City of Onalaska

On behalf of the Commissioners Court, we very much appreciate the service provided by the Onalaska Volunteer Fire Department and further appreciate the opportunity to continue our Interlocal Agreement

Sincerely,

A handwritten signature in cursive script that reads "John P. Thompson".

John P Thompson
County Judge
Polk County, Texas

Item # 9

Lake Communication Co Inc dba Eastex Security shall perform according to the terms and conditions of the pages here in by reference and listed below

Type of Service Fire Alarm System Quarterly Test and Inspection
Automatic fire extinguishing system test and inspection

Base Annual Amount Four Hundred Dollars (\$400)

Services shall commence on Signing of contract

Total Annual Amount including selected Options from the Special Provisions Page(s)

The Customer agrees to purchase and Lake Communication Co Inc dba Eastex Security agrees to provide the services identified in this Agreement subject to Lake Communication Co Inc dba Eastex Security approval and continuance of credit approval by Lake Communication Co Inc dba Eastex Security No waiver change or modification of any terms or conditions of the Agreement shall be binding on Lake Communication Co Inc dba Eastex Security unless made in writing and signed by an officer or authorized manager of Lake Communication Co Inc dba Eastex Security The terms on the reverse side are part of this Agreement and are hereby accepted by the undersigned

Lake Communication Co Inc dba Eastex Security

APPROVED FOR Lake Communication Co Inc dba Eastex Security

By *Glenn M. [Signature]* Date 1-11-00
Title R A S #0792 P O Number _____

Proposal No 1028
Agreement No _____
Page 2 of 6

Fire Alarm System Testing and Inspection

Lake Communication Co , Inc , dba Eastex Security will test and maintain the fire Alarm System described in the attached list of equipment and/or on the following, system drawings

**** Please see attached list of equipment****

Preventive Maintenance Inspections

Each Preventive Maintenance Inspection will be scheduled by Lake Communication Co , Inc , dba Eastex Security so that all tasks are performed using properly trained technicians and the special tools and instruments required to analyze the system to maintain the system in good working order

Tasks include System performance evaluation adjustment of system components

Testing

Lake Communication Co , Inc dba Eastex Security will perform 4 @ 25% test(s) per year on initiating devices and indicating appliances to ensure system integrity

Lake Communication Co , Inc , dba Eastex Security will provide the Customer with a report that such tests have been completed along with a list of any deficiencies found and recommendations for correcting them

Customer Training

During each scheduled test, Lake Communication Co , Inc , dba Eastex Security will provide ongoing system operator training and instructions upon request by the Customer

Predictive Maintenance

Lake Communication Co., Inc , dba Eastex Security will analyze equipment covered under this Agreement to detect potential failures. If corrective actions are found necessary, repair proposals will be submitted for Customer's approval

Lake Communication Co., Inc ,
 dba Eastex Security

Proposal No 1028
 Agreement No _____
 Page 3 of 6

List of Equipment

| Qty | Component | Serial No | Manufactura | Description/Location |
|-----|-----------|-----------|-------------|---|
| 1 | FACP | 4800 | Notifier | Fire Alarm Control Panel |
| 1 | FACP | 6000 | Firealarm | Fire Alarm Control Panel |
| 125 | SD | * | SBO | Smoke Detector |
| 12 | DD | * | SBO | Duct Detector |
| 3 | HD | * | SBO | Heat Detector |
| 0 | PS | * | SBO | Pull Station |
| 2 | STR | * | SBO | Strobe |
| 2 | FS | * | SBO | Flow Switch |
| 4 | HIS | * | SBO | Horn Strobe |
| 3 | TS | * | SBO | Tamper Switch |
| All | AF | * | SBO | Auxiliary Functions (Fans, Relays etc) |

Proposal No 1028
Agreement No _____
Page 4 of 6

Special Provisions

- 1 Customer agrees to provide all access to equipment pertaining to the fire alarm system initiating and indicating appliances. Customer also agrees to provide all ladders and lifts to reach detectors over 8 feet high.
- 2 Lake Communication Co, Inc dba Eastex Security will perform four (25%) functional common area fire alarm tests and inspections per year during normal business hours. Following each test, Lake Communication Co, Inc, dba Eastex Security will submit a complete report outlining any deficiencies and recommendations.
- 3 All services included in this agreement will be performed by or under the supervision of Lake Communication Co, Inc dba Eastex Security factory trained technicians following manufacturer's specifications.
- 4 Smoke and duct detector cleaning and sensitivity testing as required by the Texas Commission on Fire Protection and NFPA 72E, 1990 edition is not included in this agreement unless specifically selected as an option.
- 5 All labor outside the scope of this agreement will be billed at our preferred customer rate \$42 /hr \$65 min
- 6 Emergency service jobsite response time shall be within twenty-four (24) hours or less from receipt of call.
- 7 Customer operator training if requested is at no additional charge.
- 8 Lake Communication Co, Inc dba Eastex Security will provide and maintain a Life Safety System Log on the customer's premises. All inspection reports and field service orders will be filed in the book.
- 9 Following each inspection customer will receive a complete computer generated line item report of the test outlining all devices tested as well as failures and recommendations.

Customer

Lake Communication Co, Inc, dba Eastex Security

Date

1-11-06

Lake Communication Co, Inc,
dba Eastex Security

Proposal No 1028
Agreement No _____
Page 5 of 6

Special Provisions

Option 1

Annual Sprinkler System Test and Inspection

Lake Communication Co, Inc, dba Eastex Security will provide one annual test and inspection on hose reels hose cabinets and sprinkler system Results of the test will be provided to the customer Recommendations and cost of any repairs needed will also be submitted to the customer Repairs of the system are not included in this proposal

Additional Annual Agreement Amount One Hundred Ten Dollars (\$110)

Customer John P. Thompson

Lake Communication Co, Inc, dba Eastex Security Glen Mulvaney

Date 1-11-00

Lake Communication Co , Inc ,
dba Eastex Security

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Proposal No 1028
Agreement No _____
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Special Provisions

Option 2

50% Smoke and Duct Detector Cleaning and Sensitivity Testing

This option provides smoke and duct detector cleaning and sensitivity testing as follows:

Lake Communication Co, Inc dba Eastex Security will clean 50% of the smoke and duct detectors as per manufacturer's specifications. Following cleaning, Lake Communication Co, Inc dba Eastex Security will test the sensitivity of each detector using a calibrated sensitivity test instrument. The results of each detector will be documented on an inspection report. Detector readings not within the manufacturer's specifications will be recommended for replacement.

By testing 50% of the detectors each year, Lake Communication Co, Inc dba Eastex Security will achieve 100% every two years as required by NFPA 72E and The Texas Commission on Fire Prevention.

Additional Annual Agreement Amount Five Hundred Twenty-Three Dollars (\$523)

Customer: *John P. [Signature]*
Lake Communication Co, Inc dba Eastex Security *Glenn [Signature]*
Date: 1-11-00

VOL

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POLK COUNTY
By Bid Law County Auditor

Budget Revision
#2000-06

December 28 1999

| Fund Account | Description | Increase | Decrease | Comments | Original Budget | Amended Budget | Net Change |
|-----------------|-----------------------|-----------------|-----------------|--------------------|-----------------|----------------|------------|
| 010-401-352 | Contingencies | | | Per Judge Thompson | 50 000 00 | 44,272 33 | 5 727 67 |
| 010-691-495 | Landscaping | 3 087 00 | | Per Judge Thompson | 0 00 | 3 087 00 | 3 087 00 |
| 010-499-427 | Travel/Training | | 65 00 | Per Bid Smith | 2 500 00 | 2 085 00 | -415 00 |
| 010-499-481 | Dues | 65 00 | | Per Bid Smith | 700 00 | 1 115 00 | 415 00 |
| 010-499-484 | Voter | | 302 40 | Per Bid Smith | 5 000 00 | 4 697 60 | 302 40 |
| 010-499-108 | Part Time Salaries | 302 40 | | Per Bid Smith | 2 101.25 | 2 403 65 | 302 40 |
| 010-511-450 | Maintenance Building | | 5 700 00 | Per Don Maxwell | 80 000 00 | 74 240 00 | 5 760 00 |
| 010-511-466-573 | Capital Outlay | 5 700 00 | | Per Don Maxwell | 9 800 00 | 17 202 00 | 7 402 00 |
| 010-512-334 | Paper/Sundry Supplies | | | Per Wyatt Cooksey | 7 500 00 | 7 200 00 | 300 00 |
| 010-512-490 | Miscellaneous | 300 00 | | Per Wyatt Cooksey | 500 00 | 800 00 | 300 00 |
| | Total | 9 454 40 | 9 454 40 | | | | |

| Fund Account | Description | Increase | Decrease | Comments | Original Budget | Amended Budget | Net Change |
|--------------|----------------------------|-----------------|-------------|--------------------------------|-----------------|----------------|------------|
| 010-333-100 | Unclaimed Capital Credits | 9 459 11 | | Balance Carry Forward/Bill Law | 0 00 | 9 459 11 | 9 459 11 |
| 010-691-467 | Capital Credit Expenditure | 7 524 00 | | Per Judge Thompson | 0 00 | 7 524 00 | 7 524 00 |
| | Total | 1 935 11 | 0 00 | | | | |

Approved By 
12/28/99

VOL

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CHECK # 143014

BANK ACCT MAIN 12/14/1999 \$4 75
*** VOID *** VOID *** VOID *** VOID *** VOID *** VOID ***
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75

*****4

BROOKSHIRE BROTHERS #21
ACCTS RECEIVABLE
1253 W CHURCH
LIVINGSTON TX 77351

CHECK # 143014

010-228-000 GENERAL FUND INSK 4 75
*** VOID *** VOID *** VOID *** VOID *** VOID *** VOID ***
*** VOID *** VOID *** VOID *** VOID *** VOID *** VOID ***



CHECK # 143320

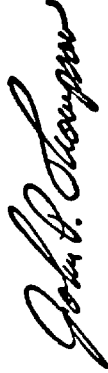
BANK ACCT MAIN
12/14/1999 \$45 28
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*** VOID *** VOID *** VOID *** VOID *** VOID *** VOID *** VOID ***

*****45 28

C & D FURNITURE
C/O MONA STAINE
915 N SAN JACINTO TX 77002
HOUSTON

CHECK # 143320

010-228-000 GENERAL FUND INSK 45 28
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*** VOID *** VOID *** VOID *** VOID *** VOID *** VOID *** VOID ***



CHECK # 144537

BANJ ACCT MAIN
 12/14/1999 \$314 81
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 *** VOID *** VOID *** VOID *** VOID *** VOID *** VOID *** VOID ***
 *****314 81

HINES ELECTRONICS

836 WEST CHURCH
LIVINGSTON TX 77351

CHECK # 144537

010-695-572 GENERAL FUND 926600 314 81
 *** VOID *** VOID *** VOID *** VOID *** VOID *** VOID *** VOID ***
 *** VOID *** VOID *** VOID *** VOID *** VOID *** VOID *** VOID ***



CHECK # 144711

BANK ACCT MAIN 12/14/1999 \$59 96
*** VOID *** VOID *** VOID *** VOID *** VOID ***
*** VOID *** VOID *** VOID *** VOID *** VOID ***

*****59 96

HINES ELECTRONICS
836 WEST CHURCH TX 77351
LIVINGSTON

CHECK # 144711

010-475-572 GENERAL FUND 927300 59 96
*** VOID *** VOID *** VOID *** VOID *** VOID *** VOID ***
*** VOID *** VOID *** VOID *** VOID *** VOID *** VOID ***



SCHEDULE OF BILLS BY FUND

| FUND DESCRIPTION | DISBURSEMENTS |
|----------------------------|---------------|
| 010 GENERAL FUND | 727 26 |
| 015 ROAD & BRIDGE ADM | 36 760 00 |
| 032 ENVIRONMENTAL SERVICES | 153 44 |
| TOTAL OF ALL FUNDS | 37 640 70 |

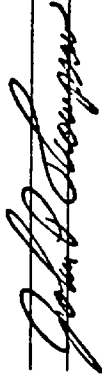
THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR PAYMENT

W H LAW

COUNTY AUDITOR

JOHN THOMPSON

COUNTY JUDGE



SCHEDULE OF BILLS BY FUND

| FUND DESCRIPTION | DISBURSEMENTS |
|----------------------------|---------------|
| 010 GENERAL FUND | 20 689 61 |
| 032 ENVIRONMENTAL SERVICES | 600 93 |
| TOTAL OF ALL FUNDS | 21 290 54 |

THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR PAYMENT

W H Law

W H LAW

COUNTY AUDITOR

JOHN THOMPSON

COUNTY JUDGE

John P. Thompson

DATE 12/15/1999 ELECTRONIC FEDERAL TAX PAYMENTS VCH011 PAGE 1

| | | | |
|--------|-------|--------------|-------------|
| REF # | VEN # | VENDOR NAME | AMOUNT |
| ACH073 | | TEXPOOL | \$90 000 00 |
| | | TOTAL AMOUNT | \$90 000 00 |

| | | | | |
|---------|------------------------------|-------------|------------------------------|-----------|
| TEXPOOL | 8000 061 101-000 INVESTMENTS | TRANSFER TO | DEBT SERVICE 12/14/99 M N 03 | 90 000 00 |
| | | | | 90 000 00 |

John H. Thompson

SCHEDULE OF BILLS BY FUND

| FUND DESCRIPTION | DISBURSEMENTS |
|----------------------------------|---------------|
| 010 GENERAL FUND | 43 697 52 |
| 015 ROAD & BRIDGE ADM | 584 15 |
| 032 ENVIRONMENTAL SERVICES | 200 51 |
| 049 DISTRICT ATTY HOT CHECK FUND | 309 83 |
| 051 AGING DEPT | 215 25 |
| 041 DEBT SERVICE FUND | 143 525 14 |
| 088 JUDICIARY FUND | 1 132 64 |
| 093 CO CLERK RECORDS MGMT FUND | 138 40 |
| TOTAL OF ALL FUNDS | 189 803 44 |

THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR PAYMENT

V H LAW

COUNTY AUDITOR

JOHN THOMPSON

COUNTY JUDGE

M. H. Law

John P. Thompson

DATE 12/16/1999 ELECTRONIC FEDERAL TAX PAYMENTS VCH011 PAGE 1

REF # VEN # VENDOP NAME AMOUNT
 ACH074 FIRST STATE BANK \$15 050 28
 TOTAL AMOUNT \$15 050 28

FIRST STATE BANK

| | | |
|-----------------------------------|-------------------------------|-----------------|
| 2000 051-202-100 SALARIES PAYABLE | FICA/WH PPE 12/17/99 12/16/99 | 26 97 |
| 2000 051-202-100 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 14 97 |
| 2000 010-502-200 SALARIES PAYABLE | FICA/WH PPE 12/17/99 12/16/99 | 4 800 78 |
| 2000 010-502-200 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 133 11 |
| 2000 010-403-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 9 18 |
| 2000 010-403-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 206 55 |
| 2000 010-405-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 22 95 |
| 2000 010-424-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 84 75 |
| 2000 010-450-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 257 04 |
| 2000 010-454-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 41 31 |
| 2000 010-456-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 96 39 |
| 2000 010-457-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 82 52 |
| 2000 010-458-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 64 26 |
| 2000 010-475-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 204 55 |
| 2000 010-495-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 50 49 |
| 2000 010-497-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 55 08 |
| 2000 010-499-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 440 64 |
| 2000 010-503-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 100 88 |
| 2000 010-510-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 85 85 |
| 2000 010-511-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 32 13 |
| | | 8 795 60 |

FIRST STATE BANK

| | | |
|-----------------------------------|-------------------------------|-----------------|
| 2000 010-512-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 234 09 |
| 2000 010-551-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 4 59 |
| 2000 010-553-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 32 13 |
| 2000 010-554-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 674 73 |
| 2000 010-630-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 13 77 |
| 2000 010-645-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 162 29 |
| 2000 010-662-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 36 72 |
| 2000 010-692-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 4 59 |
| 2000 010-703-100 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 55 08 |
| 2000 015-410-201 SALARIES PAYABLE | FICA/WH PPE 12/17/99 12/16/99 | 32 13 |
| 2000 015-431-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 2 042 51 |
| 2000 015-622-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 234 09 |
| 2000 015-623-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 211 14 |
| 2000 015-624-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 169 83 |
| 2000 027-202-100 SALARIES PAYABLE | FICA/WH PPE 12/17/99 12/16/99 | 224 91 |
| 2000 027-202-100 SALARIES PAYABLE | FICA/WH PPE 12/17/99 12/16/99 | 252 45 |
| 2000 027-580-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 18 36 |
| 2000 032-202-100 SALARIES PAYABLE | FICA/WH PPE 12/17/99 12/16/99 | 172 10 |
| | | 4 628 00 |

FIRST STATE BANK

| | | |
|-----------------------------------|-------------------------------|-----------------|
| 2000 032-595-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 160 65 |
| 2000 051-202-100 SALARIES PAYABLE | FICA/WH PPE 12/17/99 12/16/99 | 975 45 |
| 2000 051-449-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 672 77 |
| 2000 083-202-100 SALARIES PAYABLE | FICA/WH PPE 12/17/99 12/16/99 | 10 63 |
| 2000 083-442-201 SOCIAL SECURITY | FICA/WH PPE 12/17/99 12/16/99 | 9 18 |
| | | 1 628 68 |

John P. Thompson

SCHEDULE OF BILLS BY FUND

| FUND DESCRIPTION | DISBURSEMENTS |
|----------------------------|---------------|
| 010 GENERAL FUND | 33 624 43 |
| 015 ROAD & BRIDGE ADM | 11 237 89 |
| 027 SECURITY FUND | 204 84 |
| 032 ENVIRONMENTAL SERVICES | 1 890 48 |
| 051 AGING DEPT | 4 926 89 |
| 083 MUSEUM OPERATING FUND | 100 97 |
| TOTAL OF ALL FUNDS | 51 985 50 |

THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR PAYMENT

M. H. Law

W H LAW

COUNTY AUDITOR

JOHN THOMPSON

COUNTY JUDGE

John J. Thompson

SCHEDULE OF BILLS BY FUND

| FUND DESCRIPTION | DISBURSEMENTS |
|--------------------------------|---------------|
| 010 GENERAL FUND | 111 683 39 |
| 015 ROAD & BRIDGE ADM | 28 938 21 |
| 027 SECURITY FUND | 830 84 |
| 032 ENVIRONMENTAL SERVICES | 9 330 91 |
| 048 DISTRICT ATTY SPECIAL FUND | 380 63 |
| 051 AGING DEPT | 5 976 18 |
| 083 MUSEUM OPERATING FUND | 262 05 |
| 084 BIG THICKET BRIDGE PROJECT | 296 85 |
| 101 ADULT SUPERVISION | 18 151 21 |
| 104 OTP - CSR | 288 14 |
| 108 CCP - SURVEILLANCE | 2 000 38 |
| 109 SPECIALIZED CASELOAD CCP | 988 70 |
| 184 JUVEN LE PROBATION | 2 617 69 |
| 185 CCAP - JUVENILE PROBATION | 5 223 54 |
| TOTAL OF ALL FUNDS | 186 970 72 |

THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR PAYMENT

W H LAW

COUNTY AUDITOR

JOHN THOMPSON

COUNTY JUDGE



SCHEDULE OF BILLS BY FUND

| FUND DESCRIPTION | DISBURSEMENTS |
|----------------------------|---------------|
| 010 GENERAL FUND | 44 651 31 |
| 015 ROAD & BRIDGE ADM | 771 94 |
| 032 ENVIRONMENTAL SERVICES | 337 74 |
| 088 JUDICIARY FUND | 193 13 |
| TOTAL OF ALL FUNDS | 45 954 12 |

THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR PAYMENT

W H Law

W H LAW
COUNTY AUDITOR
JOHN THOMPSON
COUNTY JUDGE

John P. Thompson

SCHEDULE OF BILLS BY FUND

| FUND DESCRIPTION | DISBURSEMENTS |
|----------------------------------|---------------|
| 010 GENERAL FUND | 76 772 58 |
| 015 ROAD & BRIDGE ADM | 25 132 53 |
| 022 ENVIRONMENTAL SERVICES | 13 301 81 |
| 040 LAW LIBRARY FUND | 329 72 |
| 049 DISTRICT ATTY HQT CHECK FUND | 88 61 |
| 051 AGING DEPT | 5 211 22 |
| 061 DEBT SERVICE FUND | 6 668 35 |
| 073 CO CLERK RECORDS MGMT FUND | 1 000 00 |
| 074 COUNTY RECORDS MGMT FUND | 1 462 86 |
| TOTAL OF ALL FUNDS | 128 967 48 |

THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR PAYMENT

W H Law

W H LAW

John P. Thompson

COUNTY AUDITOR
JOHN THOMPSON
COUNTY JUDGE

Addendum Schedule of Bills for Court Dated 12/28/99

FY 2000

| | | |
|------------------|-------------|--------------------|
| Detcog | \$7,524 00 | Capital Credit Exp |
| T A C A | \$65 00 | Tax Office |
| Tropical Gardens | \$3,087 00 | Landscaping |
| | <hr/> | |
| TOTAL | \$10,676 00 | |

John P. Thompson

DATE DECEMBER 15 1999 THROUGH DECEMBER 28 1999

| NO | EMPLOYEE | DEPT | JOB | TYPE OF | SALARY GROUP | ACTION |
|------|-----------------|------------------|-------------------------------|-------------------|---------------------|---|
| (1) | TIMOTHY TRIMBLE | WASTE MANAGEMENT | #904 COLLECTION STATION ATTEN | LABOR POOL | UNCLASSIFIED \$5.15 | NEW HIRE EFFECTIVE 12/20/99 |
| (2) | JOSEPH SPURLING | WASTE MANAGEMENT | #904 COLLECTION STATION ATTEN | REGULAR PART TIME | UNCLASSIFIED \$5.41 | CHANGE TO LABOR POOL (#900) HRS EFFECTIVE 12 22-99 |
| (3) | JACK LAM | WASTE MANAGEMENT | #904 COLLECTION STATION ATTEN | LABOR POOL | UNCLASSIFIED \$5.28 | CHANGE TO REGULAR P/T UNCLASS \$5.41 (+900) EFFECTIVE 12/22/99 5 28 |
| (4) | | | | | | |
| (5) | | | | | | |
| (6) | | | | | | |
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| (9) | | | | | | |
| (10) | | | | | | |
| (11) | | | | | | |
| (12) | | | | | | |
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| (18) | | | | | | |
| (19) | | | | | | |
| (20) | | | | | | |
| (21) | | | | | | |