

POLK COUNTY COMMISSIONERS COURT

August 13, 2002 10 00 A M

Polk County Courthouse 3rd floor

Livingston Texas

2002-085

NOTICE

is hereby given that a regular meeting of the Polk County Commissioners Court will be held on the date stated above at which time the following subjects will be discussed

Agenda topics

- CALL TO ORDER
- PUBLIC COMMENTS
- INFORMATIONAL REPORTS
- APPROVAL OF MINUTES OF THE MEETING OF July 23 2002 (Regular)
- CONSIDER APPROVAL OF MEMORANDUM OF UNDERSTANDING FOR RURAL EDUCATION SYSTEM NETWORK (RESNET) SERVICES
- CONSIDER COUNTY TREASURER'S REQUEST TO APPROVE RESOLUTION AMENDING TEXPOOL AUTHORIZED REPRESENTATIVES
- CONSIDER ADVERTISING FOR REQUEST FOR PROPOSALS (RFP S) FOR INDEPENDENT AUDIT SERVICES
- CONSIDER ANY/ALL NECESSARY ACTION PERTAINING TO BID #2002-08 "SALE OF SURPLUS GENERATOR
- CONSIDER ACCEPTANCE OF ROADS IN FOREST HILLS SUBDIVISION PCT 2 PENDING PROPERTY OWNERS PAYMENT OF COSTS TO BRING EXISTING ROADS TO STANDARDS
- CONSIDER APPROVAL OF CONTRACT WITH UTMB FOR PROVISION OF INDIGENT HEALTHCARE 10 **SERVICES**
- CONSIDER REQUEST OF VETERANS SERVICE OFFICER TO ATTEND ANNUAL STATEWIDE CONFERENCE IN SEPTEMBER
- CONSIDER APPROVAL OF PERMANENT ROAD FUND EXPENDITURE IN THE AMOUNT OF \$30 242 93 (TAYLOR LAKES BARNETT ROAD LAKE LIVINGSTON I) PCT | 12
- CONSIDER AMENDMENT TO CONTRACT WITH SANTEK ENVIRONMENTAL REGARDING PROCESS AND CALCULATION OF TIPPING FEES 13
- CONSIDER APPROVAL OF GUIDELINES FOR THE BILINGUAL INCENTIVE/SPANISH AS A SECOND LANGUAGE PROGRAM
- CONSIDER APPROVAL OF BUDGIT REVISIONS # 2002 21(a)
- CONSIDER APPROVAL OF BUDGET AMENDMENTS AS FOLLOWS 16
 - Increase Waste Management Revenues to reflect Santek contract payments in the amount of \$119 086 91
 - Increase Judicial salaries/benefits to account for transfer of 411th Court Reporter to Polk County from San Jacinto County including adjustments to pro-rate reimbursements in the amount of \$54.365.51
 - Increase Retirement funds to provide County's portion of TCDRS Buyback for three employees, totaling \$11 288 16 from General Fund balance
 - Increase General Fund revenue to record Indigent Health Care reimbursements in the amount of \$82 565 87
- 17 CONSIDER APPROVAL OF SCHEDULE OF BILLS
- 18 CONSIDER APPROVAL OF PERSONNEL ACTION FORMS

ADJOURN

Posted August 7 2002

By John P Thompson County Judge

I the undersigned County Clerk do hereby certify that the above Notice of Meeting of the Polk County Commissioners Court is a true an correct copy of said Notice and that I posted a true and correct copy of said Notice in the Polk County Courthouse at a place readil accessible to the general public at all times on Wednesday August 7 2002 and that said Notice remained apposted continuously for a least 72 hours preceding the scheduled time of said Meeting

BARBARA MIDDLETON COUNTY CLERK

Page I For July 23 2002

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COMMISSIONERS COURT

of Polk County, Texas County Courthouse, 3rd floor

Livingston, Texas ADDENDUM to Posting # 2002-085

The following will serve to amend the Agenda of the Commissioners Court Meeting scheduled for August 13, 2002 at 10 00 A M

AMEND TO READ

- AMEND TO READ

 # 2002-21

 CONSIDER APPROVAL OF BUDGET AMENDMENTS AS FOLLOWS (in addition to items listed on 16 original Agenda posting)
 - Correction to reverse entry on #2002 19 in the amount of \$5 793 00
 - Correction to reverse entry on 2002 20 in the amount of \$4 199 76
 - Increase "Autopsies" line item from Gen Fund balance in the amount of \$5 080 00
 - Increase Env Enf Vehicle repair and related insurance reimb. In the amount of \$9,242.88
 - Increase Sheriff's Dept vehicle repair and related insurance reimb. In the amount of \$1 408 74
 - Record Pct 1 reimb for materials and related Perm Road expense in the amount of \$5 000 00
 - Record Pct. 2 reimb for materials and related construction expense in the amount of \$57.789.93 Record Pct 2 re budgeting from FY01 Perm Road Fund Balance in the amount of \$24 004 87

 - Record Pct 3 revenue of surplus sale and related increase of tire/tube exp of \$408.80 Correction to reverse entry on 2002 15 in the amount of \$23 000 00

(delete)

Judicial salaries/benefits transfer in the amount of \$54 365 51

AMEND TO ADD,

CONSIDER APPROVAL OF PCT 2 PERMANENT ROAD FUND EXPENDITURE IN THE AMOUNT 19 OF \$3 600 00

Dated Friday August 9 2002

Commissioners Court of Polk County Texas

Oleonary John P Thompson County Judge

I, the undersigned County Clerk, do hereby certify that the above Addendum to the Notice of Meeting of the Polk County Commissioners Court is a true and correct copy of said Addendum and that I posted a true and correct copy of said Addendum at the door of the Polk County Courthouse at a place readily accessible to the general public at all times on Friday August 9 2002 and that said Addendum remained so posted continuously for at least 72 hours preceding the scheduled time of said Meeting.

BARBARA MIDDLETON COUNTY CLERK

BY Schelana Walker

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STATE OF TEXAS }

COUNTY OF POLK }

"REGULAR" MEETING
All members Present

DATE AUGUST 13, 2002

"COMMISSIONERS COURT" POSTING # 2002 - 085

BE IT REMEMBERED ON THIS THE 13th DAY OF AUGUST, 2002 THE HONORABLE COMMISSIONERS COURT MET IN "REGULAR" CALLED MEETING WITH THE FOLLOWING OFFICERS AND MEMBERS PRESENT, TO WIT

JUDGE JOHN P THOMPSON, COUNTY JUDGE, PRESIDING BOB WILLIS COMMISSIONER PCT#1, BOBBY SMITH COUNTY COMMISSIONER PCT #2, JAMES J "Buddy" PURVIS COUNTY COMMISSIONER PCT #3, 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 MADE, CONSIDERED & PASSED

1 WELCOME & CALLED TO ORDER BY JUDGE JOHN P THOMPSON AT 10 00 A.M REV ROD PEACOCK OF FIRST PRESBYTERIAN CHURCH GAVE THE OPENING PRAYER

2 PUBLIC COMMENTS

A. DAVID VEINOTTE & THREE OTHER MEMBERS OF TEXAS LANDING PROPERTY OWNERS ASSOCIATION PRESENTED COMMISSIONER WILLIS WITH A PLAQUE THANKING HIM FOR ASSISTING THEM IN REPAIRING THEIR ROADS WITHIN THE SUBDIVISION

3 INFORMATIONAL REPORTS

- A.COMMISSIONER SMITH INVITED EVERYONE TO THE ANNUAL GO TEXAN BAR B QUE COOK OFF SCHEDULED FOR AUGUST 23rd & 24th IN ONALASKA. THE COOK OFF HELPS RAISE SCHOLARSHIP MONEY FOR POLK COUNTY YOUTH DURING THE HOUSTON LIVESTOCK SHOW & RODEO HE ALSO THANKED THE PROPERTY OWNERS ASSOCIATIONS IN YAUPON COVE AND IDLEWIDLE ESTATES FOR PARTNERING WITH PRECINCT#2 IN REPAIRING THEIR ROADS
- B ROBERT BELT OF SANDERSON, KNOX, & BELT L L P PRESENTED JUDGE THOMPSON WITH THE G F O.A. BUDGET AWARD FOR FY-2001 THIS IS THE FOURTH CONSECTIVE YEAR THAT POLK COUNTY HAS WON THIS AWARD FOR EXCELLANCE IN BUDGET PREPARATION POLK COUNTY IS ONE OF THREE COUNTIES IN THE STATE OF TEXAS THAT HAS BEEN GIVEN THIS AWARD HE THANKED MARCIA COOK, THE COURT AND ELECTED OFFICALS & DEPARTMENT HEADS FOR ALL THEIR HELP IN ACHIEVING THIS SUCCESS AND AWARD
- C COMMISSIONER WILLIS THANKED ALL THE PROPERTY OWNERS ASSOCIATIONS FOR THEIR PARTNERING WITH THE COUNTY AND FOR THEIR CONTINUED SUPPORT

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- D SHEP GREEN OF BIG THICKET LAKE ESTATES GAVE REMARKS CONCERNING THE MAINTENANCE OF THEIR ROADS AND BRIDGE
- 4 MOTIONED BY BOBBY SMITH, SECONDED BY BOB WILLIS, TO APPROVE MINUTES OF THE MEETING OF JULY 23, 2002 (REGULAR)
 ALL VOTING YES
- 5 MOTIONED BY BOB WILLIS, SECONDED BY BOBBY SMITH, TO APPROVE MEMORANDUM OF UNDERSTANDING FOR RURAL EDUCATION SYSTEM NETWORK (RESNET) SERVICES
 ALL VOTING YES (SEE ATTACHED)
- 6 MOTIONED BY BOB WILLIS, SECONDED BY BOBBY SMITH, TO APPROVE "RESOLUTION" AMENDING TEXPOOL AUTHORIZED REPRESENTATIVES TO INCLUDE MISTY WIDEMAN, AS PER TREASURER'S REQUEST ALL VOTING YES (SEE ATTACHED)
- 7 MOTIONED BY BOBBY SMITH, SECONDED BY R R. "Dick" HUBERT, TO APPROVE ADVERTISING FOR REQUEST FOR PROPOSALS (RFP'S) FOR INDEPENDENT AUDIT SERVICES ALL VOTING YES
- 8 BID #2002-08 "SALE OF SURPLUS GENERATOR"
 - (A) MOTIONED BY BOBBY SMITH TO ACCEPT BID FROM HASTINS SALVAGE FOR \$500 00

 JUDGE THOMPSON CALLED FOR A SECOND, CALLED FOR A SECOND, AND CALLED A THIRD TIME FOR A SECOND

 MOTIONED DIED FOR LACK OF A SECOND
 - (B) MOTIONED BY BOB WILLIS, SECONDED BY R R "Dick" HUBERT, TO REJECT ALL BIDS AND RE-ADVERTISE FOR SALE OF SURPLUS GENERATOR
 ALL VOTING YES
- 9 MOTIONED BY BOBBY SMITH, SECONDED BY JAMES J "Buddy" PURVIS, TO APPROVE ACCEPTANCE OF CERTAIN ROADS (as, listed) IN FOREST HILLS SUBDIVISION,

PRECINCT #2, PENDING PROPERTY OWNERS PAYMENT OF COSTS TO BRING EXISTING ROADS UP TO STANDARD SPECIFICATIONS ALL VOTING YES (SEE ATTACHED)

- 10 MOTIONED BY R R "Dick" HUBERT, SECONDED BY JAMES J "Buddy" PURVIS, TO APPROVE CONTRACT WITH U T M B FOR PROVISION OF INDIGENT HEALTHCARE SERVICES, PENDING FINAL REVIEW OF CONTRACT NEGOIATIONS WITH JIM ALLISON & BARBARA HAYES, AND AUTHORIZING JUDGE THOMPSON TO SIGN ON BEHALF OF COUNTY ALL VOTING YES (SEE ATTACHED)
- 11 MOTIONED BY R R "Dick" HUBERT, SECONDED BY JAMES J "Buddy" PURVIS, TO APPROVE REQUEST OF VETERANS SERVICE OFFICER TO ATTEND ANNUAL STATEWIDE CONFERENCE IN SEPTEMBER ALL VOTING YES
- 12 MOTIONED BY BOB WILLIS, SECONDED BY BOBBY SMITH, TO APPROVE PRECINCT #1 PERMANENT ROAD FUND EXPENDITURS IN THE AMOUNT

Page 2

OF \$30,242 93, FOR TAYLOR LAKES BARNETT ROAD, LAKE LIVINGSTON **ESTATES - SECTION (1)** ALL VOTING YES

- 13 MOTIONED BY BOBBY SMITH, SECONDED BY R R "Dick" HUBERT, TO APPROVE AMENDMENT TO CONTRACT WITH SANTEK ENVIROMENTAL REGARDING PROCESS OF MEASURE (TO CONTINUE USING THE CUBIC YARD SYSTEM) FOR CALCULATION OF TIPPING FEES ALL VOTING YES (SEE ATTACHED)
- 14 MOTIONED BY BOBBY SMITH, SECONDED BY JAMES J "Buddy" PURVIS, TO APPROVE GUIDELINES FOR THE BILINGUAL INCENTIVE FOR SPANISH AS A SECOND LANGUAGE PROGRAM, AS RECOMMENDED BY THE COMMITTEE OF JUDY ISAACS AND ANNA QUINONES ANGELINA COLLEGE WILL TEACH THE CLASSES AND SYDNEY MURPHY WILL BE ADMINISTERING THE EXAMS (SEE ATTACHED)

COURT RECORDED VOTES AS FOLLOWS

Judge Thompson

Yes

Commissioner Willis

Abstain

Commissioner Smith

Yes

Commissioner Purvis

Yes

Commissioner Hubert

No

15 MOTIONED BY BOBBY SMITH, SECONDED BY JAMES J "Buddy" PURVIS, TO APPROVE BUDGET REVISIONS #2002-21 (a), AS SUBMITTED BY BILL LAW COUNTY AUDITOR

ALL VOTING YES

(SEE ATTACHED)

16 MOTIONED BY BOBBY SMITH, SECONDED BY JAMES J "Buddy" PURVIS, TO APPROVE BUDGET AMENDMENTS #2002-21, INCLUDING REVISED LIST, AS SUBMITTED BY BILL LAW COUNTY AUDITOR ALL VOTING YES (SEE ATTACHED)

17 MOTIONED BY BOBBY SMITH, SECONDED BY JAMES J "Buddy" PURVIS, APPROVAL AND PAYMENT OF BILLS BY SCHEDULE, PLUS ADDENDUMS ALL VOTING YES (SEE ATTACHED)

DATE	AMOUNT	CHECK NUMBERS
7 22 2002	\$ 5,387 25	399
7 22 2002	400 28	171616
7 23 2002	94,761 17	171617 171661
7 24 2002	62,846 84	Electronic Transfer
7 24 2002	633 00	Electronic Transfer
7 25 2002	80 00	743
7 26 2002	(600)	Void Ck#171492
7 26 2002	1,584 90	171662 171664
7 29 2002	237 00	511
7 29 2002	5,369 50	400

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	DATE	AMOUNT	CHECK NUMBERS	
7	30 2002	110,464 46	171665	
7	31 2002	23,479 27	171666 171673	
7	31 2002	5,215 62 401		
8	01 2002	6,085 70	171674 171689	
8	-01 2002	60,263 35	ACH 273 FICA/WH	
8	01 2002	191,330 96	ACH 274 Salaries	
8	05 2002	107 00	513	
8	06 2002	598 63	744 745	
8	07 2002	119,607 31	171690 - 171744	
Add 8	08 2002	201,824 64	171745 171898	
Add 8	09 2002	6,827 00	402	
Add 8	09 2002	370 69	514	
Add 8	12 2002	2,076 00	171899 172063	
Add 8	13 2002	179,667 31	Addendum to appear on future schedule	
	Total	\$ 1,079,211 88		

- 18 MOTIONED BY BOB WILLIS, SECONDED BY BOBBY SMITH, TO APPROVE PERSONNEL ACTION FORMS, AS SUBMITTED ALL VOTING YES (SEE ATTACHED)
- 19 MOTIONED BY BOBBY SMITH, SECONDED BY R R "Dick" HUBERT, APPROVAL OF PRECINCT #2 PERMANENT ROAD FUND EXPENDITURE IN THE AMOUNT OF \$ 3,600 00
 ALL VOTING YES (see attached)

20 MOTIONED BY R R "Dick" HUBERT, SECONDED BY BOBBY SMITH, TO ADJOURN COURT THIS 13th DAY OF AUGUST 2002 AT 10 43 AM ALL VOTING YES

JOHN P THOMPSON, COUNTY JUDGE

ATTEST

BARBARA MIDDLETON, COUNTY CLERK

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Jew #5

RESNET



Resnet Partners- Memorandum of Understanding (MOU)
Interlocal Collaborative Agreement

Polk County Government
Livingston Memorial Health Care Center
Alabama-Coushata Indian Reservation
Livingston ISD
Big Sandy ISD
Woodville ISD
Tyler County Hospital System
Allan Shivers Library/Tyler County Library
Sam Houston Electric Co-Op

I realize that this letter is a long and involved piece, but I really need you to read and understand everything that is listed

According to the operating agreement, the School Partners pay \$7.50 per student, per year according to their Average Daily Attendance (ADA) as of PIEMS data on September 1, 2002. The Hospital Government and Library Partners pay \$150.00 per month. Sam Houston (SHECO) as a partner maintains the fiber-optic cabling as its portion of the partnership.

Example- Woodville ISD 2001 ADA= 1395 x \$7 50 = \$10,462 50 Polk County Government- \$150 x 12 = \$1,800

Here's how we have reconciled the tangled web Sam Houston, as the fiscal agent for Houston Endowment has been paying for line charges for our network. The amount is staggering, \$3 000 per month for the DS-3 line and \$700 per month for the T-1 line. We could not use the DS-3 line because there was no commodity Internet. That would have cost another 2 200 per month for a total of \$5 200 per month. We could not afford that for very long, so we cut that line and negotiated a new deal with Southwestern Bell for \$2 400 per month, which includes commodity internet. This will run on a bundled T-3 line to the SouthWestern Bell ATM Cloud. This will run three times faster than current and will handle all of our traffic plus the addition of Livingston ISD. We have the capability of "turning up the speed" if we should need to at any time, of course with a corresponding higher charge. We have to commit to a three year agreement, which includes the line charges, router and all equipment necessary to provide Internet access.

We have approximately \$77,000 left in the account at Sam Houston State Dr Gordon Plishker has agreed to this new arrangement and will pay for the new line as long as funds are available. We have filed an appeal to DIR to either get a years worth of credit for the DS-3 line that didn't work or get a refund. That amounts to approximately \$36,000. We have not received resolution to that appeal.

YOL

To allow a clean start and continued service, we will begin the new operation September 1, 2002. This is how it will operate

Woodville ISD will pay the \$2,400 per month (the House Bill 2128 rate) to Southwestern Bell, Sam Houston State will reimburse WISD on a quarterly basis. The reason for this is that we are filing for e-Rate in the fall of 2002 to take effect July of 2003. What this will do for us, after one year of regular charges, is to pay only 23% of the bill and e-Rate will pay the remaining 77%. We will gain at least a couple of additional years out of the grant by doing this. The Partners will pay their portion in September, which will go into an account that will be used to maintain and provide service for the network. The initial amount that we have in the bank is \$20,000. We have not touched that, instead we used another grant that Woodville ISD received to pay for the switch that operates RESNET. We need to keep the initial account to use in case of equipment failure or software maintenance needs.

I am sending this letter for your information and to allow you to budget for the amount to remit to Woodville ISD. It would be most appreciated if you can remit the funds in one check, in September Woodville ISD will "float" everyone for the first quarter, but due to our small size, a longer period is not possible. I think we have a good handle on this and can make RESNET solvent and a fantastic tool for all Partners. We have a lot to gain from the efficient operation of this great network. Thanks for your patience and understanding during this interim period of operation.

Dell W Brown RESNET Chairman

RESNET Partner- Polk County Government

Signature of Partner Official-

John P Thompson County Judge

(approved by Commissioners Court on August 13, 2002)

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and



AMENDING AUTHORIZED REPRESENTATIVES

WHEREAS, Polk County					
Participant ') is a local government of the State of Texas and is empowered to delegate to a public funds					
investment pool the authority to invest funds and to act as custodian of investments purchased with local					
vestment funds, and					
WHEREAS it is in the best interest of the Participant to invest local funds in investments that provide					
r the preservation and safety of principal, liquidity and yield consistent with the Public Funds Investment Act,					

WHEREAS the Texas Local Government Investment Pool ('TexPool') a public funds investment pool, was created on behalf of entities whose investment objective in order of priority are preservation and safety of principal liquidity and yield consistent with the Public Funds Investment Act

NOW THEREFORE be it resolved as follows

- A That the individuals, whose signatures appear in this Resolution are Authorized Representatives of the Participant and are each hereby authorized to transmit funds for investment in TexPool and are each further authorized to withdraw funds from time to time, to issue letters of instruction, and to take all other actions deemed necessary or appropriate for the investment of local funds
- B That an Authorized Representative of the Participant may be deleted by a written instrument signed by all remaining Authorized Representatives provided that the deleted Authorized Representative

 (1) is assigned job duties that no longer require access to the Participant's TexPool account or (2) is no longer employed by the Participant, and
- C. That the Participant may by Amending Resolution signed by the Participant add an Authorized Representative provided the additional Authorized Representative is an officer employee, or agent of the Participant,

List the Authorized Representatives of the Participant. These individuals will be issued P I N. numbers to transact business via the phone with a participant service representative.

1 Name	Nola Reneau	Tide Treasurer
Signature	Mola Reneau	Phone Number (936) 327-6816
	·	TEX - REP

OL 48PA	GE 824			
Name M1	sty Wideman		Title	Chief Deputy Treasurer
Signature <u>M</u>	Sill why	mpo		Number (936) 327-6816
Name			Title	
Signature List the name of the transactions and rec	Authorized Represerving confirmati	resentative listed above that will ons and monthly statements und	have n	Number
Name No1	a Reneau neau@samlink			
perform only inqui	ry of selected info	articipant, one additional Authormation. This limited representa a representative with inquiry na	itive ca	epresentative can be designated to nnot make deposits or withdrawals. ly complete the following
4 Name			Title	
	William Law			County Auditor
revoked by the Pari	ticipant, and until y introduced and	TexPool receives a copy of any adopted by the Participant at its	such a	orce and effect until amended or mendment or revocation This r/अवस्थान meeting held on the
NAME OF PA	RTICIPANT _	POLK COUNTY		
	ВҮ			
	S	ignature		
		John P Thompson		
	-	County Judge		· · · · · · · · · · · · · · · · · · ·
	ATTEST		Oct	<u></u>
	P	Barbara Middleton Printed Name		
	-	County Clerk		
	1	fitle		OFFICIAL SEAL
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TEX - REP

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Item#9



BOBBY SMITH County Commissioner Precinct 2 (936) 646-5929 Pass (936) 646-5712

Polk County Sub-Courthouse Highway 190 West P O Box 1388 Onalaska, TX 77360

August 5, 2002

In Ret Forest Hills Subdivision

Forest Hills Property Owners Association, PCT 2 request the following roads he accepted as county roads under the following conditions.

Forest Hills agrees to furnish the following materials:

Rd Name	Chip & Seal Yards	·	Per Yard		Total
Lazy Hollow	2112 Square Yards	0	\$2.21	s	4667.50
Pine Ridge	2112 Square Yards	(R)	5 2.21		4667.52
Echo IIIIs	1756 Square Yards	8	\$2.21		3820.76
Pine Wood	3212 Square Yards	ď	\$2.21		7093.52
Lakeview Hills	300 Square Yards	ĕ	\$2.21		1763.00
Total				\$	22082,32
_	60-24 Yarda Rock	•	2120'90	\$	10300.00
	Total All			\$	32882.32

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AGREEMENT TO PROVIDE MEDICAL SERVICES BFTWEEN THE UNIVERSITY OF TEXAS MFDICAL BRANCH AT GALVESTON AND THE COUNTY OF POLK

This agreement ("Agreement") is made by and between The University of Texas Medical Branch at Galveston (UTMB ') and Polk County, Texas (the 'County') for the provision of medical services to the County's eligible indigent population

NOTE This Agreement is subject to the provisions of the Texas Indigent Health Care and Treatment Act (the "Act") Section 61 001 et seq Texas Health & Safety Code Nothing in this Agreement shall be construed as increasing the County's responsibility for the treatment of indigents, including the dollar limit per individual, beyond that contained in the Act.

I Definitions - Specific terms used in this agreement are

- 1 1 Eligible Resident A County resident meeting the financial criteria outlined by the County Eligible Residents must
 - 1 1 1 Present a valid county identification card to UTMB, and
 - 1 1 2 Have a valid referral from the County indigent health care office or a physician designated by the County indigent health care office as able to make referrals
 - 1 1 3 Possess a valid authorization for that visit
- 12 Emergency Care Any injury or illness that causes serious impairment to bodily functions, serious dysfunction of any bodily organ or part, serious disfigurement and/or in the case of a pregnant woman a threat to the health of the mother or of the fetus
- 1 3 Primary Care General medical care that is provided by family practitioners, pediatricians, and internal medicine physicians
- 1 4 Provisional Pay Status If the patient is deemed not an Eligible Resident, then fees will be payable based upon their financial position in accordance with UTMB established criteria. Services are contingent upon patient meeting UTMB's financial criteria for their particular status as it relates to the federal poverty level.
- 1 5 Secondary Care Specialty medical care or service provided by a specialist who is asked to provide more insight and treatment regarding the medical problem of a patient who has been referred to UTMB
- 1 6 Tertiary Care Health care treatment and services within a sophisticated specialty care setting that is serving as a referral and support alternative to primary and secondary care

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II Eligibility - The following County residents are covered

Eligible Residents-UTMB will provide Secondary/Tertiary Care for County residents meeting the County's financial criteria and satisfying the requirements of Section 1 1 above Patients presenting for service without meeting all criteria as outlined in Section 1 1 will be placed in the provisional pay status

III. Scope of Services - Each contracting party has these responsibilities

3 1 County's Responsibilities

- The County agrees to pay fees in accordance with Section IV below for health care services provided to Eligible Residents within forty-five (45) days of the invoice date to the UTMB Accounting Department, P O Box 4786-762, Houston, Texas 77210-4786
- 3 1 2 The County shall screen and register patients in accordance with the provisions of the Act and the County's internal procedures in advance of treatment
- 3 1 3 The County shall provide each indigent patient with a card that identifies the patient as an Eligible Resident and containing the information in the form identified in Exhibit A. Use this exhibit as a guideline for minimal information requirements
- 3 1 4 The County agrees to refer Eligible Patients through its indigent health care office or a physician designated by the County indigent health care office as able to make referrals
- 3 1 5 The County agrees to complete the UTMB referral form as identified in Exhibit B in advance in order to authorize treatment for all Eligible Residents
- 3 1 6 The County shall identify specific indigent health care officials who can make referrals and confirm Eligible Resident status, including the name, address and phone numbers of County officials for telephone eligibility verification and patient referral
- 3 1 7 The County shall be solely responsible for arranging for any followup medical care including referral form completion for Eligible Residents treated at UTMB, subject to the Texas Indigent Health Care and Treatment Act

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- 3 1 8 All referrals shall contain a valid and unique authorization for each patient encounter
- 3 1 9 County agrees to pay in accordance with Section IV those emergency room charges for Eligible Residents treated at the UTMB Emergency Room
- 3 1 10 County is responsible for monitoring the Eligible Resident's accrued charges so that those charges do not exceed County's statutory responsibility of \$30,000 Should appointments and authorizations be given after the county has knowledge of the Eligible Resident reaching this cap and without proper written notice, the County would be responsible for payment of those charges
- 3 1 11 Should a charge be denied on the monthly report, County agrees to document that denial using the Denial Form (Exhibit C) provided with this contract Payment will be deemed "unpaid' until this is received

3.2 UTMB's responsibilities

- 3 2 1 UTMB agrees to provide a monthly invoice to the County
- 3 2 2 UTMB only agrees to provide Specialty and Tertiary Care to Eligible Residents unless the County otherwise requested and authorized in writing subject to medical emergency treatment and available UTMB resources
- UTMB agrees to invoice the County solely for Eligible Residents referred to UTMB by the County indigent health care office or a physician designated by the County indigent health care office as able to make referrals. Should a patient appear on the monthly billing who is not an Eligible Resident, the Denial Form (Exhibit C) must be filled out completely and accurately in order to receive credit.
- 3 2 4 UTMB may re-bill County for any denied charge if and when the reason for denial can be rectified
- 3 2 5 UTMB agrees to provide discharge summaries and consultation reports to the County's indigent health care office if so requested by the County subject to UTMB's confidentiality requirements
- 3 2 6 UTMB agrees to refer all Eligible Residents back to the County's indigent care office for any follow-up treatment of the referred condition

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- 3 2 7 UTMB agrees to invoice County solely for health care services rendered to Eligible Residents holding the appropriate consultation form as identified in Exhibit B
- 3 2 8 UTMB agrees to invoice the County indigent health care office monthly for all hospital and physician services
- 3 2 9 UTMB agrees to use reasonable efforts to inform the County of the cumulative invoiced billed charges
- 3 2 10 UTMB agrees to provide names, addresses and phone numbers for personnel responsible for arranging for services under this Agreement
- 3 2 11 UTMB will comply with Federal and State laws regarding emergency services. County residents presenting with non-emergent medical conditions will be referred to the County's indigent health care office for referral in accordance with the provisions of this Agreement.
- 3 2 12 UTMB agrees to provide services for non-emergent, non-eligible residents in accordance with UTMB's Provisional Pay Status
- 3 2 13 UTMB shall maintain a self-funded program for professional liability coverage for faculty physicians against any liabilities or claims for damages arising by reason of personal injury or death occasioned directly or indirectly by the negligent acts or omissions of UTMB faculty physicians. As an agency of the State of Texas, liability for the tortuous conduct of non physician UTMB employees is provided solely by the provisions of Chapters 101 and 104 of the Texas Civil Practice and Remedies Code.

3.3 Services not UTMB's responsibility

- 3 3 1 Behavioral Health, including drug and alcohol addiction
- 332 Plastic Surgery
- 333 Oral Surgery
- 3 3 4 Outpatient Pharmacy
- 3 3 5 Transportation to and from UTMB
- 3 3 6 Take Home Medical Supplies

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3 3 7 Primary Care patients

IV. Fee Schedule - The charges for services will be as follows

- 41 UTMB agrees to provide all Eligible Resident services for a fee based on Thirty Four Percent (34%) of UTMB charges
- 4 2 All patients will be required to pay a co-pay at the time of service
- 43 All patients will be required to pay a co-pay for hospital admissions
- If a patient is unable or unwilling to pay the co-pay at the time of service or hospital admission, the County agrees to pay the co-pay on behalf of the patient through a mutually agreeable voucher system at the time of service or hospital admission as identified in Exhibit D

V. Miscellaneous—Both parties agree to the following

- 5 1 To the extent authorized by the Constitution and laws of the State of Texas, the County shall hold harmless and indemnify UTMB, the State of Texas, Board of Regents, University of Texas System and their officers employees and agents, from and against, any and all claims, liabilities, losses, judgments, expenses and/or damages, including reasonable attorney's fees and court costs, resulting from or attributable to any act or omission of County, its officers, employees, and/or agents, including any acts constituting negligence or gross negligence. To the extent authorized by the Constitution and laws of the State of Texas, UTMB shall hold harmless and indemnify County from and against, any and all claims, liabilities, losses, judgments, expenses and/or damages resulting from or attributable to any act or omission of UTMB, its officers, medical staff or employees, including any acts constituting negligence or gross negligence
- 5 2 This term of this Agreement shall be from September 1, 2002 through August 31, 2003, regardless of the date of execution. This Agreement may be terminated earlier by either party by giving thirty (30) days written notice to the other party. Should the County terminate, County agrees to honor all appointments and authorizations in existence at the time of termination. Execution of this Agreement shall supercede and replace the previous agreement for indigent health care between County and UTMB
- 5 3 The parties agree to use the dispute resolution process provided for in Chapter 2260 of the Texas Government Code for UTMB and the County to attempt to resolve all disputes arising under this Agreement. The County must give written notice to UTMB of a claim for breach of this Agreement not later than the 180th day after the date of the event giving rise to the claim. By its execution of this Agreement, the County acknowledges and knowingly and voluntarily agrees that neither the execution of this Agreement, nor the conduct, act or inaction by any

07/18/02

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person in the execution, administration or performance of this Agreement constitutes or is intended to constitute a waiver of UTMB's or the County's immunity from suit. The parties agree that this Agreement shall be construed in accordance with the laws of the State of Texas and any action shall be brought in a court of competent jurisdiction in Galveston County, Texas

- 5 4 This Agreement constitutes the entire Agreement between the parties This Agreement may be amended/modified only in writing and signed by both parties
- 5 5 UTMB agrees to accept County's payment as payment in full for medical services provided to Eligible Residents. In the event that Eligible Resident is entitled to payment for medical services from a third party payer, UTMB shall not demand from County any amount received by County for reimbursement from a third party payer. In the event that UTMB receives payment from both the County and a third party payer, UTMB agrees to credit the County for the amount received from the third party payer not to exceed the amount paid by the County. For purposes of accomplishing the intent of this section, the County assigns to UTMB its rights to collection for any third party claim for services rendered by UTMB to Eligible Residents.

VI. Notices Notices shall be effective only when in writing and addressed as follows

UTMB Richard S Moore

Vice President for Business and Administration

UTMB Administration Bldg

Suite 621

Galveston, Texas 77555-0126

409-772-6454

County The Honorable John Thompson

Polk County Judge Polk County Courthouse Livingston, Texas 77351

07/18/02

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COUNTY OF POLK	THE UNIVERSITY OF TEXAS MEDICAL BRANCH AT GALVESTON
County Judge	Richard S Moore Vice President for Business and Administration
Date	Date

07/18/02

7

Exhibit A

Front of Card

County Indigent Care Card No
Effective Date 10-01 98 Expiration Date: 10-31 98
County kientification No 123456 Coverage,
Name Mr/Mrs County Resident
Address 1313 Mam Street
Your County Texas 00000
Telephone 409-555-5555
Social Security # 111-22-3333 Date of Birth 10-23 1949
Primary Care Provider Dr UTMB Physician
Signature
County Indigent Care Coordinator
Signature
County Indigent Patients Signature

Cards are to be created by the County under contract to UTMB

Each card should have a unique number assigned as a security precaution and tracking mechanism.

Each card should have an original signature by the appropriate representative of the county

Each card should have an original signature by the resident

Each covered family member should have their own card issued. This would replace existing letters.

Card would need to be 3 ½" x 2"

Rear of Card

UTI	MB Contract County Specialty Card
Patient Must Present	t This Card at Time of Registration.
Outpatient Co-pay Impatient Co-pay	\$ \$
This card is not an er of eligibility will be a Coordinator's Office	vidence of eligibility for benefits. Determination established through the County Indigent Care
All appointments are Coordinator's Office	to be scheduled through the County Indigent Care at (409) 560-1111 Only Specialty/Tertary Care made to the University of Texas Medical Branch.

48 PAGE 835 VOL

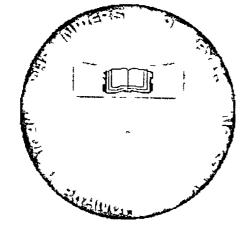
DateForm initiated	pa	(county/dist) Ph #	fax #
Faculty/PCP	Provider #	Ph #	fax #
SCP (Specialty Physician's Name)	Provider #	Ph #	fax #
(Specialty Physician's Name) Select appropriate request	Approval for	Procedure [] Consultation []	Referral []
Procedure/Service Requested		Consultation []	More Visits []
			СРТ
Diagnosis			ICD-9
Symptoms			
Pertinent History			
revious Treatments			
Current Meds			
reatment Plan			
inancial Information			
County/District Name		Phone #	
ounty/Dist rep s name	Phone # Patient's Phone # SS# County # Expiration date of approval		
atient Name		SS#	
o of visits approved	Com.	ty#	Case in computer? Y / 1
other pertinent information	E	xpuration date of approval	
	Patient notifie	d? Y/N	
F denied, MD notified? Y/N	Date/Time of Appointment IF denied, patient notified? Y/N		
authorization obtained by			Date
Write in Patient Information	/Affix Label,	Contr	act Care Approval Form
ame		_	e University of Texas

UH#

EXHIBIT C

UTMB Monthly Disputed Charges

		Month of		
County			——————————————————————————————————————	
Section 1 (Please Check Bo	ox if applicable)			
□ All Emanana, Channa		In Section 2 please	state why all charge	s are denied
☐ All Emergency Charges ar		CX All padents are	residents of local Hospit	al District
All Inpatient Charges are		If multiple reasons	exist, give reason an	d name of
All Outpatient Charges are	e Denied	patient only		
		Ex Medicaid – Joh All other paties	in Doe, John Brown, and nt visits were unauthoriz	Mary Green
Section 2		7 til other pade	TIC VISICS WE'LE UTIAULIONIZ	ed
Please use the following Numbers I	for Denial Reason	S		
1 Appointment Not Authorized		2	Medicaid (** Must pr	ovide #, Active
Not on County Indigent HealthOther (please state reason)	care Coverage	4	date, & Add date**) Non-county Resident	
•			Non-county resident	
Denial Reason Patient N	1	Medical Record	_	
Reason Patient N	vame	Number	Service Date	Total Charges
				
		* *************************************		
	·	-		
		•		
				
				
	· · · · · · · · · · · · · · · · · · ·	-		
	 	-		
		-		
		-	•	



County Indigent Care Co-Pay Voucher

Patient Name	Amt.\$
Voucher #	Date
Clinic	Appt Date
County Name	Phone
County Official Signature	

Clinics Please accept this voucher in lieu of co-pay for clinic visits or hospital admissions Return voucher to Office of County Affairs, Rt 0974 for billing This voucher is only good for the appointment/admission date above only This voucher is only good in the clinic designated above

Instructions

This voucher is to be issued by the county/hospital district for those residents in their program that are deemed to be "pure indigents" This voucher can be for clinic visits (\$12) or hospital admissions (\$100)

Patient Name

Fill in the patients name the way it appears on the referral

Amount

Enter the amount of the voucher (\$12 or \$100)

Voucher #

Enter a unique number on this form to enable you to reconcile with

Your billing This should be a number that will prevent duplication of

The document.

Date

Date the voucher was issued

Clinic

Department where the patient will present the voucher For admissions

write "hospital"

Appt. Date

Date the voucher is to be used No voucher will be accepted on a date other

Than the one on this form

County Name

Enter the name of your county or hospital district & Phone Number

County Official

Issuing person in the county/district to sign

UTMB is not responsible for duplication of this document. UTMB suggest that counties use colored paper (possibly changed each month) and or have numbered forms printed with unique numbering specific to your county and for each visit. The voucher should however retain the same form as the sample above County is fiscally responsible for all vouchers presented at **UTMB**

Any form appearing to be altered may result in the county/district being called to verify the validity of the voucher

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UTMB CONTRACT REVIEW & RECOMMENDATIONS

UTMB contractual arrangement is unnecessary All local services are being utilized. If the Court determines to continue contractual arrangements my recommendations are as follows

Beginning paragraphs

- (1) Recommend "county referral" contract-eliminating "mandated provider" status
- (2) UTMB "Note" section "including the dollar limit per individual" should also include "30 day hospital stay"

I-Definitions

1 1 Eligible Resident

Section 1 1 Eliminate financial and "change to IHC and County Criteria"

Section 1 1 1 Present a valid county identification card or "IHC State

Form 109"

NOTE The card specified in Exhibit A is very costly to counties as the counties must also provide State IHC

Form 109 to eligible residence

II-Eligibility Eliminate financial and "change to IHC and County

criteria"

III-Scope of Services

3 1 County Responsibility

Section 3 1 1 Eliminate invoice date and change to "postage date"

Add-payment will be based upon allowed IHC services and payments

and payments

Section 3 1 3 Provide each indigent patient with a card "or IHC Letter"

Section 3 1 7 Need clarification and example of "referral form

completion"

Page two UTMB Contract Review

Section 3 1 10

Statutory responsibility of \$30,000-should include "30 day

length of stay"

3 2 UTMB responsibilities

Section 3 2 1

Eliminate or accompany monthly invoice and "change to

UB-92 and HCFA-1500" Forms

Section 3 2 3

Second sentence Should include unauthorized or

disallowed services

Section 3 2 8

Include UB-92 and HCFA 1500 Forms

IV-Fee Schedule

Section 44

Recommend deletion Patient should be responsible or

request UTMB to execute a waiver

V-Miscellaneous

Section 5 2

This section is a concern if the County is in negotiations The concerns are

> Clause Beginning of contract is September 1, 2002 through August 31, 2002 "regardless of the execution date"

> Clause "County agrees to honor all appointments and authorizations in existence a the time of termination" (should add if otherwise cancelled by County)

> Clause "Execution of this Agreement shall supercede and replace the previous agreement for indigent health care between County and UTMB" If the County is in negotiations does the clause "regardless of the date of execution" take priority? (Recommend Legal Counsel review and clarification)

Page three UTMB Contract Review

Section 5 5

Clause "UTMB agrees to credit the County for the amount received from the third party payer, UTMB agrees to credit the County" recommend substitute credit with refund. Could UTMB, at their discretion, issue credit toward future County charges instead of actual funds? (Recommend Legal Counsel review and clarification)

VI-Notices

Add 101 W Church Street to Judge Thompson address and telephone number 936-327-6813

Unable to locate in the contract Attorney Allison's recommended addendum "If UTMB contracts with another county upon different terms than those included in this Agreement, UTMB will offer those terms to Polk County at its option

Reviewed by

Barbara Hayes Medical Revenue Services, Inc.

COPY

Tterut 13

June 27, 2002



650 25th Street, N W Suite 100 Cleveland, Tennessee 37311 (423)476-9160 Toll Free (800)467 9160 Fax: (423)479-1952

Email mail@santekenviro.com

Honorable John P Thompson County Judge Polk County Courthouse, 3rd Floor 101 W Church Street Livingston Texas 77351

Dear Judge Thompson,

When Polk County and Santek entered into a landfill operations agreement last November, Section 6.7 of the contract indicated that Santek would be responsible for purchasing and installing scales at the scalehouse

In February, Santek installed a set of temporary scales for the purpose of getting an accurate account of the volume and weight of waste entering the landfill. After compiling four months of data, we discovered that calculating tipping fees according to tons versus cubic yards resulted in less revenue to the landfill. This not only impacts Santek, but it has negative repercussions to Polk County in the form of lost host fees. As you know, Santek is currently paying the county a 25-percent royalty on all non Polk-County generated solid waste which will eventually increase to at least five percent.

We are requesting that the county relieve us from the contractual obligation of installing scales and to allow us to continue using the cubic yard system to calculate tipping fees. We believe this will be a benefit to both the county and Santek.

Please be assured that Santek remains committed to making aesthetic improvements to the landfill's entrance including the paving of the entrance road and landscaping

To acknowledge your approval of this request, please sign the signature line at the bottom of the page

Edward A Caylor President

EAC/cld

POLK COUNTY, TEXAS

By
Title

Sincerely,

Printed on recycled paper

Judy B Isaacs Pasonnd Offica

Personnel Office • Courthouse • Livingston Texas 77351

936 327 6802 • Fax 936 327 6879

TO

All Polk County Employees

FROM

Judy Isaacs, Personnel Director

RE

Spanish as a Second Language Program

2002

Polk County wishes to encourage county employees to learn Spanish as a second language to be able to effectively communicate with the Spanish-speaking public. Polk County is extending the opportunity to every employee to enhance or develop Spanish speaking skills by offering an incentive program called Spanish as a Second Language. An employee, by learning to effectively communicate in Spanish and eventually being able to pass an oral proficiency exam, could earn a one step raise in pay. Following, is information about the classes and exam. Should you have additional questions about the program, please contact the Personnel Office.

GOAL

The goal of this program is for each student/employee to reach a level of proficiency which will enable them to successfully communicate in Spanish with the Spanish-speaking public and to pass an oral proficiency exam

Polk County's goal is to better serve the Spanish-speaking public by providing employees with communication skills in Spanish and, in turn, reward those employees for their successful efforts

CLASSES

Angelina College has developed a Spanish curriculum designed to facilitate communication between county employees and the Spanish-speaking residents of our county. Two classes will be offered. The first class will begin in September and is called a Basic/Refresher Spanish. Course. This class is geared toward the student with basic or limited knowledge of the Spanish language. It will be a ten-week course with classes held once weekly from 6.00 p.m. on Tuesday or Thursday at the Livingston High School. The second class will be an Advanced.

VOL

Spanish Course This class is geared toward the student that has already taken Spanish classes in either high school or college and /or the Angelina College Spanish Basic/Refresher Course designed for county employees This course will also be a ten-week course with classes held once weekly, and will begin November 12, 2002 at the Livingston High School Please note that you will not be graded in these classes, they are neither pass or fail classes. Only your desire and determination to learn Spanish will ascertain how much you learn. Each class will have an enrollment limit of 15 students. Please note these particular classes are non-college credit and will not be TCLEOSE certified

CLASS FEES/ REGISTRATION INFORMATION

Each class has an enrollment fee of \$ 75 00 plus a \$ 15 00 book fee payable to Angelina College Enrollment fees will be paid by the employee at registration The enrollment fee of \$ 75 00 will be reimbursed to the employee by Polk County upon successfully completing the course and passing the Spanish Oral Proficiency Exam

Registration will be at the Livingston High School through Ms Kitty Walters You may register on Thursday, August, 22, 2002 or Monday through Thursday, August 26 - 29, 2002 or Tuesday through Thursday, September 3 - 5, 2002 between the hours of 5 00 - 7 00 p m each evening To register with Ms Walters, go into the main entrance of the Livingston High School then up the stairwell. At the top of the stairs turn right and go all the way to the end of the hallway When you reach the end of the hallway take a left then go to room # 107 which will be on your

EXAM

For the purpose of this County program (Spanish as a Second Language), the exam will be called the Spanish Oral Proficiency Exam This exam will be administered by a qualified, independent person of Polk County's choosing. The exam will be administered orally and will consist of your ability to ask and/or say in Spanish, questions or phrases specifically related to your particular job in dealing with the Spanish-speaking public

The fee for the Spanish Oral Proficiency Exam is \$ 50 00 This fee is payable to the independent (not a Polk County employee) Examiner Polk County will reimburse to an employee the fee of \$ 50 00 for the first exam, if the employee passes Should an employee not successfully pass the exam, the employee can re-take the exam at a later date, but, the employee will assume responsibility for payment of the exam fee

The Spanish Oral Proficiency Exam will be administered by appointment only To register for the exam you must call the Personnel Department so that we can schedule your test date with the Examiner The Examiner will notify the Polk County Personnel Office in writing, within two business days, of the results of your exam When an employee successfully passes the Spanish Oral Proficiency Exam, a Personnel Action Form will be submitted to the next regularly scheduled Commissioner Court meeting for an approval of the employee's one step increase, and will normally be effective the payroll period following the Court's approval

REASSESSMENT REQUIREMENT

In order to validate the effectiveness of this program and to justify the one step increase an employee receives, it is necessary to implement a reassessment requirement. This means that once an employee passes the Spanish Oral Proficiency Exam and their one step incentive raise has become effective, the employee must be reassessed for Spanish proficiency on or before the two (2) year anniversary of the one step incentive raise and every two (2) years thereafter, at the employee's expense. This requirement must be met in order for an employee to maintain the one step increase.

ADDITIONAL INFORMATION

Depending on your Spanish language capabilities, you may choose to enroll in the Basic/Refresher Course first complete it and enroll for the Advanced Course at a later date, or you may choose to enroll directly into the Advanced Course - that is entirely up to you No employee interested in the Spanish as a Second Language Program is required to take the courses mentioned above in order to take the Spanish Oral Proficiency Exam. For instance, an employee may decide to study and practice at their own pace using video or audio tapes or take a Spanish course through another college. Whatever means an employee chooses, once they feel confident enough, they can call the Personnel Office and register for the exam.

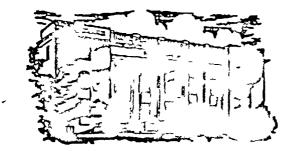
The incentive program, Spanish as a Second Language, is a pilot program designed for Polk County employees. We are anticipating great participation in the program and are hoping for it to be a huge success. Once the registration begins, it will be on a first-come first-serve basis. Should you not be able to take the first class for any reason, it will be offered again at a later date.

Because this is an incentive program which may affect an employee's earnings and pay step, the program will not be available to an employee's family member or anyone not employed by Polk County unless there is an insufficient number of employees signed up for a class. Should you have a family member or friend interested in taking the class, you may contact me and I will be glad to put their name on a "waiting list". Should there be a vacant slot available in one of the classes, the people on the "waiting list" will be contacted in the order they signed up and given an opportunity to participate in the class.

Attached you will find a 'Statement of Understanding between Polk County and Employee" Please bring it to the Personnel Office prior to beginning the class We will witness your signature and keep the form in your Personnel file

Also, attached you will find a Study Guide for Polk County Employees The information was put together by Angelina College based on a study of the County's employees present and future needs to improve communications with the Hispanic Community of Polk County We strongly encourage interested participants to study all aspects of this basic information, such as speaking and for pronunciation, and listening as well as meaning Good Luck!

Please call me at (936) 327-6802, ext 1121 if there are any questions or concerns



Witnessed by _

48 PAGE 845 YOL Polk County, Texas

Gudy B Isaacs Iwonnd Ofica

Personnel Office • Courthouse • Livingston Texas 77351

936 327 6802 • Fax 936 327 6879

SPANISH AS A SECOND LANGUAGE PROGRAM

STATEMENT OF UNDERSTANDING BETWEEN POLK COUNTY AND EMPLOYEE

Date	Employee#
Employee	Social Security #
Employee(please print clearly)	
Department	
. an employ	yee of Polk County, have reviewed the Spanish as a
Second Language Program Study Guide prev	prously distributed by the Personnel Office and have erstand that participation in any aspect of this
	o a one step raise Only my successfully passing the
Oral Proficiency Exam entitles me to the one	
I also understand that all classes and exams we Polk County upon my successfully passing the	will be at my expense and will only be reimbursed by he Oral Proficiency Exam
I choose to enroll in one or both of these class County or anyone associated with the classes	ge classes being offered by Angelina College, should sees, I do so with the express understanding that Polk is or the program, will not be held responsible should hency required to pass the Oral Proficiency Exam soon of Polk County is choosing
Form will be submitted to the next regularly approval of my one step increase, and that no following the Court's approval I understand	scheduled Commissioners Court meeting for ormally it will be effective the payroll period d that the program Spanish as a Second Language is has tried to address every question or situation that missioners Court approval
incentive raise has become effective, I must the two (2) year anniversary date of the one	be reassessed for Spanish proficiency on or before step incentive raise and every two (2) years thereafter net in order for me to maintain the step increase
Signature	Date

V	O	ι

Amended Amen	POLK COUNTY By Bill Law County Auditor	udikor		Budpe	Budget Revision #2002 21a FY02			August 13 2002
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Approved By Date

August 13 2002

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	Capital Outlay Repaira/Supplies/Workcrew	Office Supplies	Mobil Phones/Pagers	Electricity	Water	Materials/Supplies	Construction Materials	Emergency Repairs	Parts/Repairs	Construction Materials	Tires & Tubes	Construction Materials		Construction materials	Permanent Road Pct 4	Parts & Repairs	Construction materials	Miscellaneous	Construction Materials	Tires & Tubes	Culverts		Equipment Repairs	Pest Control	H B Meal Delivery	Gas & Heat	Miscellaneous	Equipment/Furnishings	Restoration/Automation/Preservation	Computer Network	•
	015-610-573 015-610-456	015-621 315	015-621-423	015-621-440	015-621-442	015-610-337	015-622 339	015-625-102	015-622-456	015-622-330	015-623-354	015-623-339		015-624-339	015-620-624	015-624-456	015-624-339	015-624-490	015-624-339	015-624-354	015-624 338		051-645-351	051-645-356	051-645-334	051-645-441	051-645-490	051-045-572	094-426-435	084-426-437	

Approved By: Dete

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By Bill Law County Auditor	Sounty Auditor		5	#2002 21			August 13
Fund Account	Descripton	hgresse	Decresse	Comments	Original Budget	Amended Budget	Change
010-330-697	Detag Enforcement Grant Detag Enforcement Grant	5 793 00	5783 00	Reverse entry from2002 19/corr line item # Enter correct line dem #			
010-390-696 010-370-693	Fema-Engt Management Fema-Engt Management	→ 199 76	4199 76	Reverse entry from 2002 20/corr line item# Enter correct line item#			
010-370-630	Indigent Health Care Reimbursement	-82 565 87		Per Bill Law	8	-82565 87	-82 565 87
010-455-203 010-457 203 010-650-203 010-271-000	Retrement Retrement Retrement General Fund Balance	273 16 2 763 00 6,252 00	11288 16	Buyback Retirement/ M Coppock /per Bill Law Buyback retirement/B Fortune/per Bill Law Buyback retirement/W Bobinger/Per Bill Law Per Bill Law	3962 45 4593 35 1162 99 0 00	4235 61 7356 35 9414 99 0 00	273 16 2 763 00 8 252 00 0 00
010-691-405 010-271-000	Autopsies General Fund Balance	5 080 00	2080 00	Per Judge Thompson Per Judge Thompson	25000 00	30080 00	5 080 00
010-342-600 010-697-456	Insurance Claims Rembursement Repairs/Supplies	9,242 88	9242 88	Ck from TAC Ins/Jay Barbee s Wreck Ck from TAC Ins/Jay Barbee s Wreck	0 00 1850 00	-41700 32 11092 88	41 700 32 9 242 88
010-342-600 010-560-450	Insurance Clarns Rembursement Repars/Vehicles/Ins	1 408 74	1408 74	Ck from TAC Ins/Sheriff Dept Ck from TAC Ins/Sheriff Dept	98	-43109 06 5816 18	-43 109 06 5 816 18
015-369-100 015-620-621	Rembursement for Matenals Permanent Road	-5 000 00	2000 00	ck from Lake Liv Estates#1/Per Comm Willis ck from Lake Liv Estates#1/Per Comm Willis	20000 00	-87205 33 58000 00	-87 205 33 58 000 00
015-369-200 015-369-200 015-369-200 015-622 339	Rembursement for Matenals Rembursement for Matenals Rembursement for Matenals Construction Materials	-31 680 00 25 929 93 180 00 57 789 93		ck from Idlewide Estates/per Comm Smith Ck from Yaypon Cove Pro/Per Comm Smith Ck from City of Onalaska /Per Comm Smith cks from varous/Per Comm Smith	0 00 0 00 0 00 92000 00	124901 80 150831 73 151011 73 242611 73	124 901 80 150 831 73 151 011 73 150 611 73
015-620-622 015-271-000	Permanent Rd Pct 2 Road & Bridge Fund Balance	24 004 67	24 004 87	Rebudget balance left from FY01/Per Bill Law Rebudget balance left from FY01/Per Bill Law	20000 00	84004 67	34 004 67
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015-364-300 015-623-354	032-344-601	047 333-475 047-475-405	048-330-475 048-476-400	
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Approved By Date SCHOOLS OF BILLS BY PURD

DISSURSBOOTS FUND DESCRIPTION

012 ELECTED OFFICIALS PER ACCOUNTS

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JOHN P THOMPSOM COCHITY ADDITION W H LAN

COCHITY JUDGE

FUED DESCRIPTION 010 GENERAL FUND

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THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPRO

COCETY JUDGE

SCHEDULE OF BILLS BY FUND

FUND	FUND DESCRIPTION D	DISBURSEMENTS
010	GENERAL FUND	63 979 01
110	HOTEL OCCUPANCY TA . FUND	1 134 10
015	ROAD & ERIDGE ADM	14 118 40
051	AGING DEPT	00 66
070	ENV SERVICE - 94 CO ISSUE	13 974 64
094	COUNTY RECORDS MENT FUND	1 456 02
	TOTAL OF ALL FUNDS	94 761 17
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JOHN P THOMPSON

DATE 07/24/2002 TO 07/24/2002

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_QATE 07/24/2002 TD 07/24/2002	2005	ACH CLAIMS LIST	HS LIST		¥	CHK107 PAGE 2
		TOTAL AI	TOTAL ALL ITEMS			
VENDOR NAME	ACCOUNT #	ACCOUNT NAME	I TEM/REASON	DATE	*	AMOUNT
		#63300	TOTAL ITEMS WRITTEN GRAND TOTAL AMOUNT			633 00
THE PRECEDING LIST OF BILLS		PAYABLE WAS REVIEWED AND APPROVED FOR PAYMENT W H LAW	ROVED FOR PAYMENT / ZAW			
		COUNTY AUDITOR JOHN P THOMPSON COUNTY JUDGE	John & Thousen]		

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SCHEDULE OF BILLS BY PUBD

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TOTAL OF ALL PURDS

THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED

COUNTY AUDITOR

JORDE P THORPSON COUNTY JUDGE

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*** VOID #** 8 9******** HOOD/ ALMA ROSIE

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SCHEDULE OF BILLS BY FUND

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JOHN P THOMPSON

COUNTY JUDGE

THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED APPLYMENT

COUNTY AUDITOR

SCHOOLS OF BILLS BY PURD

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051 AGING DEPT

TOTAL OF ALL FUNDS

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

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SCHOOLS OF BILLS BY YOU

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COUNTY AUDITOR

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SCHEDULE

NTS	76 466 62 19 415 40 400 28 800 54 7 819 83 1 129 95 400 28 800 56 3 230 98	ND APPROVED FOR HATTENT
DESCRIPTION DISBURSEMENTS	GENERAL FUND ROAD & BRIDGE ADM SECURITY FUND AGING DEPT ADULT SUPERT CCP - SURVEILLANCE SPECIALIZED CASELOAD CCP JUVENILE PROBATION CCAP - JUVENILE PROBATION TOTAL OF ALL FUNDS	THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR HAPPEN OF BLLS PAYABLE WAS REVIEWED AND APPROVED FOR HAPPEN COUNTY AUDIGE
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DESCRIPTION	GENEPAL FUND PC4D & EPIDSE ADM SING DEPT JUDICIAPY FUND ACULT SUPERVISION CC+ - SURVEILANCE CCAP - JUVENILE FRORATYON	TOTAL OF ALL FUNDS	THE PPECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED DOR PAYMENT WH LAW COUNTY AUDITOR JOHN P THOMPSON COUNTY JUDGE
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THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR PATE

COUNTY AMDITOR

JOHN P THOMPSON

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SCHEDULE OF BILLS BY FUND

DISBURSEMENTS	3 157 82 659 42 30 00 37 00 1 199 60 350 50 135 00 526 36	D AND APPROVED FOR PAYMENT ALL EN X ZEUC OR PSON SON
DESCRIPTION DISBURS	GENERAL FUND ROAD & BRIDGE ADM SECURITY FUND AGING DEPT ADULT SUPERVISION COP - SURVEILLANCE JUVENILE PROBATION CCAP - JUVENILE PROBATION - TOTAL OF ALL FUNDS	THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR PAYMENT WHILAW COUNTY AUDITOR JOHN P THOMPSON COUNTY JUDGE
FUND	010 015 027 051 101 108 184	A 8

CHK107 PAGE 13 85 85 85 85 ACH #273 AMOUNT DATE # 62,35 GRAND TOTAL AMOUNT THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR MAYMENT ITEM/REASON TOTAL ALL ITEMS ACH CLAIMS LIST JOHN P THOMPSON COUNTY AUDITOR COUNTY JUDGE ACCOUNT NAME AY H A ACCOUNT # JATE 08/01/2002 TO 08/01/2002

VENDOR NAME

48 PAGE 866 ACH #274 AMOUNT 55 Ę CHK107 PAGE DATE TOTAL ITEMS WRITTEN GRAND TOTAL ANDUNT THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR PAYMENT I TEH/REASON TOTAL ALL ITEMS ACH CLAIMS LIST JOHN P THOMPSON COUNTY AUDITOR COUNTY JUDGE ACCOUNT NAME A H CAN ACCOUNT * 3ATE 08/01/2002 TD 08/01/2002 VENDOR NAME

SCHEDULE OF BILLS BY PURD

FUND DESCRIPTION 051 AGING DEPT

107 00

TOTAL OF ALL PURDS

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

SCHOOLS OF BILLS BY PURD

DISBURGIDANTS FUED DESCRIPTION

028 POLK COUNTY HISTORICAL COMM

TOTAL OF ALL PURES

THE PRECEDURE LIST OF BILLS PAYABLE HAS REVIEWED AND APPLOYED FOR

JOHN P THOMPSON COURTY AUDITOR

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DISBURSEMENTS	62 255 85 1 479 21	60 00 60 10 72 E63 17 73 60 61	137	119 607 31
FUND DESCRIPTION	010 GENERAL FUND 015 ROAD & BRIDGE ADM 027 SECHPITY FIND	049 DISTRICT ATTY HOT CHECK FUND 051 AGING DEPT 061 DEBT SERVICE FUND		TOTAL OF ALL FUNDS

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

JOHN P THOMPSON COUNTY AUDITOR

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DESCRIPTION	GENERAL FUND	POAD & BRIDGE ADM	SECURITY FUND	LAW LIBRARY FUND	DISTRICT ATTY HOT CHECK FUND	AGING DEPT	DEBT SERVICE FUND	CO CLEPK RECORDS MGMT FUND	TOTAL OF ALL FUNDS
FUND	010	015	027	040	049	051	061	E60	

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

JOHN P THOMPSON COUNTY AUDITOR

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PUND DESCRIPTION

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TOTAL OF ALL PURDS

THE PRECEDURG LIST OF BILLS PAYABLE WAS REVIENDS AND APPROVED FOR PAY

JOHN P TRONDSON COUNTY AUDITOR

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	370 69	•		TOTAL CHBCKS MAITTEE TOTAL VOID CHBCKS	rr			
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	215 70 154 99		08/09/2002	8/5 8/9/02 8 /1 3 /5/02		2002 051 207 300 DUE TO FIRST STATE BANK 2002 051 207 300 DUE TO FIRST STATE BANK	2002 051	POLE COURTY OPERATING
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-	CHELOS PACE		TO: 000514	FROM: 000514 TO: 000514 BARK ACCOUNT:CORRAGING	CHECK PROISTER LIVE CHECKS			DATE 06/09/2002
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SCHEDULE OF BILLS BY FUND

DISBURSEMENTS

FUND DESCRIPTION

010 GENERAL FUND

TOTAL OF ALL FUNDS

THE PRECEDING LIST OF BILLS PAYABLE WAS REVIEWED AND APPROVED FOR PAYING 2 076 00

COUNTY AUDITOR H LAU

JOHN P THOMPSON

Vendor	Amount	Explanation	
A TO Z TIRE & BATTERY INC	\$ 182 00	R&B#3	
ACS	\$ 4 092 11	DIST CLK/RECORDS MGT	
AMBEAUX/ LOUIS PABS	\$ 152.47	INDIGENT CARE	
ANGELINA DIAGNOSTIC	\$ 107.22	INDIGENT CARE	
ANGELINA DIAGNOSTIC	\$ 764	JAIL INMATE	
BEST AIR CONDITIONING	\$ 144 00	AGING	
BROOKSHIRE BROTHERS LTD	\$ 202.75	JAIL INMATE	
CAMPBELL UROLOGY	\$ 240 63	INDIGENT CARE	
COUNTY & DISTRICT CLERK'S ASSO	\$ 80 00	DISTRICT CLERK	
CITY OFFICE & TEACHER SUPPLY	\$ 15 90	R&B#1	
CHOICE POINT SERVICE INC	\$ 358 00	DISTRICT ATTY/ SPL PROS	
DELOACH/ GEORGE DR	\$ 196 11	INDIGENT CARE	
DYNACARE LABORATORIES	\$ 76.06	INDIGENT CARE	
EAST TEXAS ASPHALT CO LTD	\$ 561 96	R&B#4	
FEDERAL COURT REPORTORS OF SAN ANTONIO	\$ 154 00	DISTRICT ATTY/ SPL PROS	
FEDERAL EXPRESS	\$ 87.36	DISTRICT ATTY/ SPL PROS	
GUYS AUTO	\$ 400.73	R&B#2	
HOOT'S LOADER SERVICE	\$ 360000	R&B#2 PERMMANT RD	
HOOT'S LOADER SERVICE	\$ 972200	R&B#2 LATERAL RD	
HOOT'S LOADER SERVICE	\$ 665800	R&B#2	
HOOTS LOADER SERVICE	\$ 162000	R&B#4	
INDUSTRIAL CHEMICAL CLEANER INC	\$ 43.55	R&B#2	
ISAACS JUDY B	\$ 275 25	PERSONNEL OFFICE	
JOHN S HOLLENAN	\$ 208 44	DISTRICT ATTY/ SPL PROS	
KIMBALL MIDWEST	\$ 451.78	R&B#4	
LABCORP OF AMERICA HOLDINGS	\$ 251 16	INDIGENT CARE	
LAKE LIVINGSTON TOURISOM COUNCIL	\$ 2780 08	HOTEL OCCUPANCY	
LEGGETT PLUMBING	\$ 443.08	AGING	
LIVINGSTON PHYSICAL THERAPY	\$ 224 88	INDIGENT CARE	
LUFKIN PATHOLOGY	\$ 405500	AUTOPSIES	
M&M AUTO SUPPLY #	\$ 426 01	R&B#2	
MALIADI & REDDY DR	\$ 43.91	INDIGENT CARE	
MEMORIAL MEDICAL CNETER LIVINGSTON	\$ 1966 03	INDIGENT CARE	
MEMORIAL MEDICAL CNETER LIVINGSTON	\$ 403 30	JAIL INMATE	
MUSIC MOUNTIAN	\$ 13 50	JURY	
MUSTANG TRACTOR & EQUIPMENT CO	\$ 1253 00	R&B#4	
MUSTANG TRACTOR & EQUIPMENT CO	\$ 10 307 75	R&B#2	
OIL CITY TRACTORS INC	\$ 206 94	R&B#2	
OIL CITY TRACTORS INC	\$ 206 94	R&B#4	
OMNI HOTELS	\$ 250 70	DISTRICT CLERK	
CHUCK S DIESEL SERVICE	\$ 735 00	R&B#2	
PINTO CONSTRUCTION INC	\$ 32 032 08	R&B#1/PERM & TAYLOR LK	
POLK CENTRAL APPRAISAL DISTRICT	\$ 54 735 00	APPRAISAL DISTRICT	
POLK COUNTY CHAMBER OF COMMERCE	\$ 100000	HOTEL OCCUPANCY	
POLK COUNTY CHAMBER OF COMMERCE	\$ 7 992 74	HOTEL OCCUPANCY	
POLK COUNTY RAP FUND	\$ 4 092 11	TRANSFER FROM GENERA	
POLK COUNTY TRACTOR	\$ 78 17	R&B#2	
	4 1011	NOD#Z	

Page-1

Addendum Schedule of Bills for Court Dated 08/13/02 FY-02

QUALITY WHOLESALE TIRES	\$ 959 80	D. S. 110
RANDALL MEDICAL CLINIC		R&B#3
SAMUEL/ V R DR	\$ 1 252 80	INDIGENT CARE
	\$ 150 57	INDIGENT CARE
SCRIPT CARE INC	\$ 5 998 93	INDIGENT CARE
SCRIPT CARE INC	\$ 235 14	
SPECTOR/ MARC DR		JAIL INMATE
	\$ 65 47	INDIGENT CARE
AUTRY'S A 1 ADVERTISING SPECIALTIES	\$ 15 50	R&B#1
TEXAS ASSOCIATION OF CHILD SUPPORT REG	\$ 150 00	DISTRICT CLERK
TEXAS NATURAL RESOURCE CONS COMM	\$ 315 00	
THE HEART INSTITUTE	0,000	COMMISSIONERS CRT
TOLLS/RONALD DR	\$ 1 441 92	INDIGENT CARE
	\$ 953 16	INDIGENT CARE
TRINITY MATERIALS	\$ 561336	R&B#4
UNIVERSITY OF TEXAS MEDICAL BRANCH	\$ 713787	· - · - · · ·
WILLIAMS/ KERRI	\$ 298 43	INDIGENT CARE
BILL WILLIS		AGING LIVINGSTON
***** ********************************	\$ 1 944 02	DISTRICT ATTY/ SPL PROS
	\$ 179 667 31	

John P. Thoupour

Page - 2

ADDITIONAL 28 EFFECTIVE 08/19/2002 EFFECTIVE 06/14/2002 EFFECTIVE 06/14/2002 ACTION TAKEN NEW HIRE NEW HIRE REHIME JULY 24 THROUGH AUGUST 13, 2002 TYPE OF GROUP
EMPLOYMENT STEP & WAGE \$7 00 HR. \$19 161 61 (9/(1) \$7 pa 121 TEMPORARY LABOR POOL PART TIME REGULAR -900 HRS FULL TIME JOB DESCRIPTION SECRETARY II SECRETARY SECRETARY #102 #102 #103 PERSONNEL SERVICES DATE SOCIAL DEPT TIMBERLEE NICOLE EMPLOYEE CYNTHIA DAVIES SLADE SHEILA

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HOOT'S LOADER SERVICE PO Box 34 OAKHURST, TEXAS 77359-0034

409-377-4982 (Pit) 409-825-6392

SOLD TO

vol INVOICE

48 PAGE 877 001136

voice Date Your Order No Our Order No
July 31, 2002

SHIPPED TO- (if other than SOLD TO)

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Shipped Salesperson Terms Shipp

Bobby Smith Pct. 2
 P O. Box 1388
 Onalaska, Texas 77360–1388

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Reorder New MWR72T The Drawing Board PO Box 2944 Hartlord, CT 08104 2944

FOLD AT () TO FIT DRAWING BOARD 2/YEW ENVELOPE & EWSOW

ORIGINAL

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