

The Board of Supervisors met on 1/2/19 at 10:00 a.m. in the Story County Administration Building. Members present: Rick Sanders, Lauris Olson, and Linda Murken. (all audio of meetings available at storycountyia.gov).

ORGANIZATION OF THE BOARD: Sanders moved Murken as chairperson and Olson as Vice-Chair. Motion died for lack of a second. Murken moved Olson as Chairperson, Olson seconded. Murken aye, Olson aye, Sanders nay. Motion carried. Sanders moved Murken as Vice Chair, Olson seconded. Motion carried unanimously (MCU) on a roll call vote. Sanders moved to set Tuesdays at 10 a.m. as the day and time of regular Board meetings. Murken seconded. Roll call vote. (MCU)

MINUTES: 12/18/18, 12/26/18 Minutes, and 12/18/18 Ballard Community School District Canvass Minutes – Sanders moved, Murken seconded the approval of Minutes as presented. Roll call vote. (MCU)

PERSONNEL ACTIONS: 1) correction - new hire in Attorney's Office, effective 1/2/19, for Kollan Kolthoff @ \$10.00/hr; effective 1/14/19 for McKenzie Meradith @ \$10.00/hr; effective 1/15/19 for Zachary Johnson @ \$10.00/hr; effective 1/24/19 for Spencer Willems @ \$10.00/hr; 2) new hire, effective 1/7/19 in a) Attorney's Office for David Fountain @ \$2,520.96/bw; effective 1/15/19 in b) Board of Supervisor's Office for Katie Neilsen @ \$11.00/hr; 3) pay adjustment, a) Recorder's Office, effective 12/23/18, for Kristie See @ \$17.72/hr. Sanders moved, Murken seconded the approval of Personnel Actions as presented. Roll call vote. (MCU)

Sanders moved, Murken seconded the approval of Consent Agenda as presented.

1. Appointment of Medical Examiner: Jamie Weydert for a two-year term ending 12/31/20
2. Appointment of Medical Examiner Deputies: Chris Johnson and Trisha Schlick for two-year terms ending 12/31/20
3. Appointment of Medical Examiner Investigators including Professional Consultant Services Agreements: Jessica Jessen and Amy Fritz for two-year terms ending 12/31/20
4. Appointment of Permanent Clerk to the Board of Supervisors for Calendar Year 2019 – Michelle Bellile
5. Appointment of Story County Weed Commissioner for Calendar Year 2019 – Joe Kooiker
6. Designation of Official Legal Newspapers for Story County for Calendar Year 2019 – Ames Tribune, Nevada Journal, and the Tri-County Times
7. Resolution #19-49, Appointment of Deputy Recorder
8. Resolution #19-50, Appointment of First Assistant Story County Attorney
9. Resolution #19-53, Appointment of Deputy Treasurers
10. Sheriff's Office to increase the mileage fee charged from \$.545 to \$.58 per mile to remain in line with the allowable fees permitted by the Internal Revenue Service, effective 1/1/19
11. Promotions within the Sheriff's Office, effective 1/6/19
12. Service Contract with Johnson Controls for testing and inspection of fire alarm at the Human Services Center (HSC), 1/1/19-12/31/19 for \$2,559.05
13. Service Contract with Johnson Controls for testing and inspection of fire alarm at the Justice Center, 1/1/19-12/31/19, for \$1,341.66
14. Acknowledgment of Appointment to the Compensation Board by the Treasurer of Joshua Opperman for a term expiring 6/30/19 (to fill a vacancy)
15. Renewal of Class E Liquor License (LE) for Casey's Marketing Co, Casey's General Store #2301, 17005 US Highway 69, Gilbert, Iowa, effective 2/28/19-2/27/20, including Class B Native Wine Permit, Class C Beer Permit (carryout beer), Class E Liquor License (LE), and Sunday sales
16. Additional Lease Contract between Marco Printing and Information Technology for print services for Story County Conservation for \$132.58/month, Facilities \$106.75/month, and Board of Supervisor \$29.88/month
17. Appointment to the Planning and Zoning Commission for a five-year term ending 12/31/23 – Marvin Smith
18. Appointment to the Analysis of Social Services Evaluation Team (ASSET) for a one-year term ending 3/31/20 – Lisa McCoy
19. Renewal Class B Beer (BB)(includes wine coolers) for Alluvial Brewing Company, LLC, 3715 West 190th Street, Ames, Iowa, effective 3/1/19-2/28/20, including Outdoor Service, and Sunday sales
20. Acknowledgment of Nonresident Re-Appointment for a five-year term to the Maxwell Public Library Board of Trustees with the term ending 6/30/24 – Jill Leonard

Roll call vote. (MCU)

CHANGES TO PROCESSES CONCERNING THE VETERANS AFFAIRS (VA) COMMISSION – Olson provided background information, and concerns shared by the commissioners. Discussion took place. Brett Mclain, VA Director, provided additional detail. Deb Schildroth, Director of External Operations, provided detail about the application process, legal requirements for gender balance and community representation, and length of terms. Sanders stated the process is very similar for all appointments made by the Board. Mclain stated full support for the Board, and suggested communication is the root of the concerns. Discussion took place. Schildroth reported on quarterly meetings, budget, and additional outreach; she stated there has been ongoing communication. Lynn Lathrop, Nevada, reported on concerns. Sanders reiterated the interview process. Terry Greenfield, Story City, stated concerns with the process. Jessica Reynolds, County Attorney, reported on email communications. Olson stated a potential change in the process is for all three supervisors interview applicants, two VA commissioners provide feedback, and VA commissioner make recommendations. Murken recommends a template for all boards and commissions, customized to comply with the *Code of Iowa* as required, and to keep the process transparent. Schildroth reported on the applications process. Sanders concurs with Murken. Mclain recommended he review applications and recorded discharge papers as part of the process. Sanders stated the need to fill the existing two vacancies on the VA Commission by posting and receiving applications. Olson stated to revisit the issue as part of the 1/29/19 agenda, and asked if the Board members would meet quarterly with VA commissioners. Murken and Sanders concurred the Board Chair will meet with the Commission. Pat Peakin, Colo, VA Commissioner, thanked the Board for hearing concerns. Sanders asked to move up the effective date for the Kate Gregory appointment. Murken agreed. Sanders stated to add to an upcoming agenda. The Board concurred to address at the 1/8/19 meeting.

RESOLUTION #19-58, 2019 CENTRAL IOWA REGIONAL TRANSPORTATION PLANNING ALLIANCE

APPOINTMENTS – Olson reported on recommendations. Sanders moved, Murken seconded approval of Resolution

#19-58 as recommended. Policy Committee – Lauris Olson, Rick Sanders, alternate; and Technical Committee – Darren Moon, Tyler Sparks, alternate. Roll call vote. (MCU)

THE BOARD OF SUPERVISORS RETAINING A VOTING MEMBERSHIP ON THE STORY COUNTY BOARD OF HEALTH – Olson provided an overview of legal requirements and options. Discussion took place. Sanders moved, Murken seconded to have non-voting representation on the Board of Health. Roll call vote. (MCU)

APPOINTMENT OF SUPERVISORS AS REPRESENTATIVES FOR CALENDAR YEAR 2019 FOR THE

FOLLOWING: Olson noted a change in her document and asked how the Board wanted to proceed. Murken stated to go through each item and note changes and approve all recommendations in one motion. The Board made changes with the removal of items #10 and #11 (see above).

1) Aging Resources of Central Iowa Board of Directors – Lauris Olson, Linda Murken alternate

2) Ames Assessor Mini-Board – Lauris Olson, Rick Sanders alternate. Sanders requested Olson as appointee with Sanders as alternate.

3) Ames Economic Development Commission (AEDC) – Lauris Olson, Linda Murken alternate

4) Ames Metropolitan Planning Organization Transportation Policy Committee – Lauris Olson, Rick Sanders alternate

5) Ames Metropolitan Planning Organization Transportation Technical Committee (TTC) – Darren Moon, Tyler Sparks alternate

6) Board of Health – Lauris Olson, Linda Murken alternate. Sanders noted this is a non-voting position and see above.

7) BooST Together for Children (Boone and Story Counties Early Childhood Iowa (ECI) Area Board) – Linda Murken

8) Central Iowa Community Services (Regional Board) – Linda Murken, Lauris Olson alternate

9) Central Iowa Juvenile Detention Board – Lauris Olson, Rick Sanders alternate. Olson substituted Murken for Olson.

12) Central Iowa Region 11 Workforce Development CEO Board – Rick Sanders. Sanders stated no alternate for this.

13) Central Iowa Region Housing Authority Executive Board – Lauris Olson

14) Conservation Board (non-voting) – Rick Sanders

15) DeCat Board – Linda Murken, Rick Sanders alternate

16) Emergency Management Commission – Rick Sanders, Lauris Olson alternate

17) Four Mile Creek Watershed Authority – Leanne Harter, Linda Murken alternate

18) Heart of Iowa Regional Transit Agency (HIRTA) – Lauris Olson, Rick Sanders alternate

19) Prairie Rivers of Iowa (subject to invitation) – Linda Murken, Lauris Olson alternate

21) Second Judicial District Department of Corrections – Lauris Olson, Rick Sanders alternate

22) Story County Assessor Mini-Board – Linda Murken

23) Story County E-911 Service Board – Paul Fitzgerald, Linda Murken alternate. Olson asked to change to Murken as alternate. Fitzgerald reported on StoryComm project.

24) Squaw Creek Watershed Authority – Linda Murken

25) South Skunk Watershed Authority – Linda Murken

Sanders moved, Murken seconded approval of Board of Supervisors Appointments as presented with noted changes. Roll call vote. (MCU)

20) Safety Committee – Linda Murken. Sanders stated official appointment is not required. Murken stated to take off list as an official representative but she will attend.

26) Wellness Committee – Linda Murken. Sanders stated official appointment is not required. Murken stated to take off list as an official representative but she will attend.

THE BOARD CHAIRPERSON USING THE COUNTY'S OFFICIAL YOUTUBE CHANNEL AND OTHER SOCIAL MEDIA FOR MEETING PREVIEWS, REVIEWS AND OTHER MESSAGES RELATED TO COUNTY BUSINESS –

Olson reported on previous year's postings, and for the Board review and discuss the practice. Sanders encouraged Olson to continue postings, and stated no motion necessary. Murken stated no issues with the postings, concurred no motion is necessary, and stated the process is covered by existing Information Technology policy. Discussion took place.

SUPERVISORS' INTEREST AREAS, FUTURE INITIATIVE PLANS AND UPDATES ON CURRENT

SUPERVISORS' PROJECTS, INITIATIVES AND COMMUNITY/SPECIAL INTEREST GROUPS REQUESTS –

Olson opened discussion. Sanders reviewed details on updating the E911 system and his appointments. Murken reported on her areas of interest. Olson reviewed her interests and initiatives. Sanders stated A Mid-Iowa Organizing Strategy (AMOS) has requested a meeting.

LIAISON ASSIGNMENTS, COMMITTEE MEETINGS UPDATES, AND ANNOUNCEMENTS FROM THE

SUPERVISORS: Members reported on meetings. Olson reported on upcoming budget workshops and meetings, a possible special meeting for master matrix on 1/22/19, and insurance review.

Sanders moved, Murken seconded to adjourn at 11:57 p.m. Roll call vote. (MCU)

Story County
Board of Supervisors Meeting - Organizational
Tentative Agenda
1/2/19

1. CALL TO ORDER: 10:00 A.M.
2. PLEDGE OF ALLEGIANCE:
3. PUBLIC COMMENT #1:
This comment period is for the public to address topics on today's agenda
4. ORGANIZATION OF THE BOARD:
 1. Election of Officers
 2. Set day and time of regular meetings

Department Submitting Auditor

5. CONSIDERATION OF MINUTES:
 - I. 12/18/18 & 12/26/18 Minutes And 12/18/18 Ballard CSD Canvass Minutes

Department Submitting Auditor

6. CONSIDERATION OF PERSONNEL ACTIONS:

- I. Action Forms
 - 1) correction - new hire in Attorney's Office, effective 1/2/19 for Kollan Kolthoff @ \$10.00/hr; effective 1/14/19 for McKenzie Meradith @ \$10.00/hr; effective 1/15/19 for Zachary Johnson @ \$10.00/hr; effective 1/24/19 for Spencer Willems @ \$10.00/hr; 2) new hire, effective 1/7/19 in a) Attorney's Office for David Fountain @ \$2,520.96/bw; effective 1/15/19 in b) Board of Supervisor's Office for Katie Nielsen @ \$11.00/hr; 3) pay adjustment, a) Recorder's Office, effective 12/23/18, for Kristie See @ \$17.72/hr

Department Submitting HR

7. CONSENT AGENDA:
(All items listed under the consent agenda will be enacted by one motion. There will be no separate discussion of these items unless a request is made prior to the time the Board votes on the motion.)

- I. Consideration Of Appointment Of Medical Examiner: Jamie Weydert For A 2 Year Term Ending 12/31/20

Department Submitting Auditor

- II. Consideration Of Appointment Of Medical Examiner Deputies: Chris Johnson And Trisha Schlick For A 2 Year Term Ending 12/31/20

Department Submitting Auditor

- III. Consideration Of Appointment Of Medical Examiner Investigators Including Professional Consultant Services Agreements: Jessica Jessen And Amy Fritz For A 2 Year Term Ending 12/31/20

Department Submitting Auditor

- IV. Consideration Of Appointment For Permanent Clerk To Board Of Supervisors For Calendar Year 2019 – Michelle Bellile

Department Submitting Auditor

- V. Consideration Of Appointment To Story County Weed Commissioner For The Calendar Year 2019 - Joe Kooiker

Department Submitting Auditor

- VI. Consideration Of The Official Legal Newspapers For Story County – Ames Tribune, Nevada Journal, And The Tri-County Times For The 2019 Year

Department Submitting Auditor

- VII. Consideration Of Resolution #19-49, Appointment Of Deputy Recorder For James M. Cheek For A 4 Year Term Ending 12/31/22

Department Submitting recorder

Documents:

DEPUTY RESOLUTION 2019.PDF

- VIII. Consideration Of Resolution #19-50 Appointment Of First Assistant Story County Attorney For Tim C. Meals For A 4 Year Term Ending 12/31/22

Department Submitting Attorney

Documents:

DEPUTY RESOLUTION TEMPLATE.DOCX

- IX. Consideration Of Resolution #19-53, Appointment Of Deputy Treasurers

Department Submitting Auditor

Documents:

TREASURER DEPUTIES RESOLUTION.PDF

- X. Consideration For The Sheriff's Office To Increase The Mileage Fee Charged From \$.545 To \$.58 Per Mile To Remain In Line With The Allowable Fees Permitted By The IRS Effective 1/1/19

Department Submitting Sheriff

Documents:

MILEAGE INCREASE.PDF

XI. Consideration Of Promotions Within The Sheriff's Office Effective 1/6/19

Department Submitting Sheriff

Documents:

PROMOTION REQUEST.PDF

XII. Consideration Of Service Contract With Johnson Controls For Testing And Inspection Of Fire Alarm At Human Services Center 1/1/19-12/31/19 For \$2,559.05

Department Submitting Facilities Management

Documents:

JOHNSONHSC.PDF

XIII. Consideration Of Service Contract With Johnson Controls For Testing And Inspection Of Fire Alarm At Justice Center 1/1/19-12/31/19 For \$1,341.66

Department Submitting Facilities management

Documents:

JOHNSONJC.PDF

XIV. Acknowledgment Of Appointment To The Compensation Board By The Treasurer Of Joshua Opperman For A Term Expiring 6/30/19 (To Fill A Vacancy)

Department Submitting Auditor

XV. Consideration Of Renewal Of Class E Liquor License (LE) For Casey's Marketing Co, Casey's General Store #2301, 17005 Hwy 69, Gilbert, Ia., Effective 2/28/19 - 2/27/20, Including Class B Native Wine Permit, Class C Beer Permit (Carryout Beer), Class E Liquor License (LE), And Sunday Sales

Department Submitting Auditor

Documents:

CASEYS.PDF

XVI. Consideration Of Additional Lease Contract Between Marco Printing And Information Technology For Print Services For Story County Conservation For \$132.58/Mo, Facilities \$106.75/Mo, And Board Of Supervisor \$29.88/Mo

Department Submitting Information Technology

Documents:

STORY COUNTY MAPS.PDF
STORY COUNTY POOL 1 THRU 8.PDF
STORY COUNTY POOL 9 THRU 16.PDF
STORY COUNTY POOL 17 THRU 22.PDF
STORY COUNTY SLG.PDF

- XVII. Consideration Of Appointment For Planning And Zoning Commission For A 5 Year Term Ending 12/31/23 - Marvin Smith

Department Submitting Board of Supervisors

- XVIII. Consideration Of Appointment For ASSET For A 1 Year Term Ending 3/31/20 - Lisa McCoy

Department Submitting Board of Supervisors

- XIX. Consideration Of Renewal Class B Beer (BB)(Includes Wine Coolers) For Alluvial Brewing Company, LLC, 3715 West 190th St., Ames, Ia., Effective 3/1/19-2/28/20, Including Outdoor Service, And Sunday Sales

Department Submitting Auditor

Documents:

ALLUVIAL.PDF

- XX. Acknowledgment Of Nonresident Re-Appointment For A 5 Year Term To The Maxwell Public Library Board Of Trustees With The Term Ending 6/30/24 - Jill Leonard

Department Submitting Board of Supervisors

8. PUBLIC HEARING ITEMS:

9. ADDITIONAL ITEMS:

- I. Discussion And Consideration Of Changes To Processes With Veterans Affairs Commission - Lauris Olson

Department Submitting Board of Supervisors

- II. Discussion And Consideration Of Resolution #19-58, 2019 Central Iowa Regional Transportation Planning Alliance Appointments

Department Submitting BOS

Documents:

RESOLUTION 1958.PDF

- III. Discussion And Consideration Of The Board Of Supervisors Retaining A Voting Membership On The Story County Board Of Health - Lauris Olson

Department Submitting Board of Supervisors

IV. Discussion And Consideration Of Appointment Of Supervisors As Representatives For Calendar Year 2019 For The Following:

- 1) Aging Resources of Central Iowa Board of Directors – Lauris Olson; Linda Murken alternate
- 2) Ames Assessor Mini-Board – Rick Sanders, Lauris Olson alternate
- 3) Ames Economic Development Commission (AEDC) –Lauris Olson, Linda Murken alternate
- 4) Ames Metropolitan Planning Organization Transportation Policy Committee – Lauris Olson; Rick Sanders, alternate
- 5) Ames Metropolitan Planning Organization Transportation Technical Committee (TTC) – Darren Moon; Tyler Sparks, alternate
- 6) Board of Health – Lauris Olson; Linda Murken, alternate
- 7) BooST Together for Children (Boone and Story counties Early Childhood Iowa (ECI) Area Board) – Linda Murken,
- 8) Central Iowa Community Services (Regional Board) – Linda Murken; Lauris Olson alternate
- 9) Central Iowa Juvenile Detention Board – ^{Olson} Linda Murken; Rick Sanders, alternate
- 10) Central Iowa Regional Transportation Planning Alliance (CIRTPA) Policy Committee – Lauris Olson; Rick Sanders, alternate
- 11) Central Iowa Regional Transportation Planning Alliance (CIRTPA) Technical Committee - Darren Moon; Tyler Sparks, alternate
- 12) Central Iowa Region 11 Workforce Development CEO Board – Rick Sanders; Lauris Olson, alternate
- 13) Central Iowa Region Housing Authority Executive Board – Lauris Olson
- 14) Conservation Board (ex-officio) – Rick Sanders
- 15) DeCat Board – Linda Murken; Rick Sanders, alternate
- 16) Emergency Management Commission – Rick Sanders; Lauris Olson, alternate
- 17) Four Mile Creek Watershed Authority: Leanne Harter; Linda Murken, alternate
- 18) Heart of Iowa Regional Transit Agency (HIRTA) – Lauris Olson; Rick Sanders,

alternate

19) Prairie Rivers RC&D (subject to invitation) – Linda Murken; Lauris Olson, alternate

20) Safety Committee – Linda Murken

21) Second Judicial District Department of Corrections – Lauris Olson; Rick Sanders,

alternate

22) Story County Assessor Mini-Board – Linda Murken

23) Story County E-911 Service Board – Paul Fitzgerald; ^{Murken}~~Lauris Olson~~, alternate

24) Squaw Creek Watershed Authority – Linda Murken

25) South Skunk Watershed Authority – Linda Murken

26) Wellness Committee – Linda Murken

Department Submitting Auditor

Documents:

2019 RECOMMENDATIONS BOARDS COMMISSIONS ASSIGNMENTS.PDF
VOLUNTARY SERVICE.PDF

- V. Discussion And Consideration Of The Board Chairperson Using The County's Official YouTube Channel And Other Social Media For Meeting Previews, Reviews And Other Messages Related To County Business - Lauris Olson

Department Submitting Board of Supervisors

- VI. Discussion Of Supervisors' Interest Areas, Future Initiative Plans And Updates On Current Supervisors' Projects, Initiatives And Community/Special Interest Groups Requests - Lauris Olson

Department Submitting Board of Supervisors

10. AGENCY REPORTS:

11. DEPARTMENTAL REPORTS:

12. OTHER REPORTS:

13. PUBLIC FORUM #2:

Comments from the Public on Items not on this Agenda. The Board may not take any Action on the Comments due to the Requirements of the Open Meetings Law, but May Do So In the Future.

14. LIAISON ASSIGNMENTS, COMMITTEE MEETINGS UPDATES, AND ANNOUNCEMENTS FROM THE SUPERVISORS:

15. ADJOURNMENT:

1

Story County strives to ensure that its programs and activities do not discriminate on the basis of race, color, national origin, sex, age or disability. Persons requiring assistance, auxiliary aids or services, or accommodation because of a disability may contact the county's ADA coordinator at (515) 382-7204.

Story County Board of Supervisors
Meeting
1/02/19

NAME

ADDRESS

Paul H. Fitzgerald
 Meredith Kuebler
 Carl
 Morrison
 Jane Halliburton
 Patrice Peake
 Brett McLain
 John K. Paul
 Justin Ingram
 Jerry Moore
 Jessy Reynolds
 Erin Deweats
 Terry Greenfield
 Mathew Evans
 Kaila Webb
 Mary Hubbard
 John Niles
 Todd Lundvall
 Deb Schildroth
 Constance Tressdale
 Allissa Wignell

Sheriff
 Deputy
 628 8th Ames IA
 628 8th Ames IA
 Ames
 102 MAPLE COLO
 Story Co. IA Dir.
 Ames - LWB
 304 Main St. Ames, IA
 P&D Dept
 SCAO
 Community Services
 Personal
 Bps
 Community Services
 emergency office
 Gilbert T.A.
 BOS
 BOS office
 SCSO
 BOS

NOTICE OF APPOINTMENT

PERSON APPOINTED: Jamie Weydert

BOARD COMMISSION OR COMMITTEE APPOINTED TO:
Medical Examiner

LENGTH OF TERM: 2 years

(IS THIS APPOINTMENT TO FILL AN UNEXPIRED TERM? no

IF SO, WHOSE TERM? _____

WHO NEEDS TO BE NOTIFIED? Board of Supervisors

DATE APPOINTED: 1/02/2019

DATE TERM EXPIRES: 12/31/20

APPROVED **DENIED**
Board Member Initials: [Signature]
Meeting Date: 1-2-19
Follow-up action: _____

NOTICE OF APPOINTMENT

PERSON APPOINTED: Chris Johnson & Trisha Schlick

BOARD COMMISSION OR COMMITTEE APPOINTED TO:

Medical Examiner Deputies

LENGTH OF TERM: 2 years

(IS THIS APPOINTMENT TO FILL AN UNEXPIRED TERM? no

IF SO, WHOSE TERM? _____

WHO NEEDS TO BE NOTIFIED? Board of Supervisors

DATE APPOINTED: 1/02/2019

DATE TERM EXPIRES: 12/31/20

APPROVED **DENIED**
Board Member Initials: JS
Meeting Date: 1-2-19
Follow-up action: _____

PROFESSIONAL CONSULTANT SERVICES AGREEMENT

(Contracted Services)

Under the provision of Section 3401 of the Internal Revenue Code of 1954, an employer must withhold income tax from all remuneration actually or constructively paid to an employee. This agreement covers professional services provided by Jessica Jesse as an independent contractor. Jessica Jesse assumes all responsibility for payroll taxes and required FOAB contributions.

In general, an individual who is subject to the control and direction of another only as to the results of their work, and not as the means by which it is accomplished in an independent contractor and is not an employee.

AGREEMENT

NAME OF CONTRACTOR Jessica Jessen

MAILING ADDRESS 2219 SW College Ave Ankeny, IA 50023

BUSINESS PHONE NO. 515-975-5979 Email: Jessica Jane Jessen@gmail.com

1. DESCRIPTION OF SERVICES: Medical Examiner Investigations/On Call

2. DATE (S): 1/1/2019 - 12/31/2020

3. TIME (S): To be determined by the Story County Medical Examiner

4. LOCATION: To be determined by the Story County Medical Examiner

5. PROFESSIONAL FEES: \$150.00/per investigation plus in County mileage pd at current County rate.

6. SPECIAL CONDITIONS: Investigations conducted at the scene of an unattended death as outline in Iowa Code ch; 331.802 at the direction of the Story County Medical Examiner.

CERTIFICATION

I certify that I have read the above statement regarding the requirements of the IRS for an "independent contractor" and I assume the responsibility for payroll and FOAB contributions. I agree to the conditions stated above for services provided by myself to Story County.

Signature Jessica Jesse Date 12/16/18

Approved by [Signature] Date 1-2-19

W-9 completed yes

PROFESSIONAL CONSULTANT SERVICES AGREEMENT

(Contracted Services)

Under the provision of Section 3401 of the Internal Revenue Code of 1954, an employer must withhold income tax from all remuneration actually or constructively paid to an employee. This agreement covers professional services provided by Amy Fritz as an independent contractor. Amy Fritz assumes all responsibility for payroll taxes and required FOAB contributions.

In general, an individual who is subject to the control and direction of another only as to the results of their work, and not as the means by which it is accomplished in an independent contractor and is not an employee.

AGREEMENT

NAME OF CONTRACTOR Amy Fritz

MAILING ADDRESS 705 15th St Nevada IA 50201

BUSINESS PHONE NO. 515-290-6937 Email: afritz@mc-farlandclinic.com

1. DESCRIPTION OF SERVICES: Medical Examiner Investigations/On Call

2. DATE (S): 1/1/2019 - 12/31/2020

3. TIME (S): To be determined by the Story County Medical Examiner

4. LOCATION: To be determined by the Story County Medical Examiner

5. PROFESSIONAL FEES: \$150.00/per investigation plus in County mileage pd at current County rate.

6. SPECIAL CONDITIONS: Investigations conducted at the scene of an unattended death as outline in Iowa Code ch; 331.802 at the direction of the Story County Medical Examiner.

CERTIFICATION

I certify that I have read the above statement regarding the requirements of the IRS for an "independent contractor" and I assume the responsibility for payroll and FOAB contributions. I agree to the conditions stated above for services provided by myself to Story County.

Signature [Signature] Date 12-10-18

Approved by [Signature] Date 1-2-19

W-9 completed [Signature]

NOTICE OF APPOINTMENT

PERSON APPOINTED: Michelle Bellile

BOARD COMMISSION OR COMMITTEE APPOINTED TO:
Permanent Clerk

LENGTH OF TERM: 1 year

(IS THIS APPOINTMENT TO FILL AN UNEXPIRED TERM? no

IF SO, WHOSE TERM? _____

WHO NEEDS TO BE NOTIFIED? Auditor

DATE APPOINTED: 1/02/2019

DATE TERM EXPIRES: 12/31/2019

APPROVED **DENIED**
Board Member Initials: [Signature]
Meeting Date: 1-2-19
Follow-up action: _____

NOTICE OF APPOINTMENT

PERSON APPOINTED: Joe Kooiker

BOARD COMMISSION OR COMMITTEE APPOINTED TO:
Story County Weed Commissioner

LENGTH OF TERM: 1 year

(IS THIS APPOINTMENT TO FILL AN UNEXPIRED TERM? no

IF SO, WHOSE TERM? _____

WHO NEEDS TO BE NOTIFIED? Board of Supervisors

DATE APPOINTED: 1/02/2019

DATE TERM EXPIRES: 12/31/2019

APPROVED **DENIED**
Board Member Initials: 
Meeting Date: 1-2-19
Follow-up action: _____

NOTICE OF APPOINTMENT

PERSON APPOINTED: Ames Tribune, Nevada Journal, Tri-County Times

BOARD COMMISSION OR COMMITTEE APPOINTED TO:

Story County Official Legal Newspapers

LENGTH OF TERM: 1 year

(IS THIS APPOINTMENT TO FILL AN UNEXPIRED TERM? no

IF SO, WHOSE TERM? _____

WHO NEEDS TO BE NOTIFIED? Board of Supervisors

DATE APPOINTED: 1/02/2019

DATE TERM EXPIRES: 12/31/2019

APPROVED **DENIED**
Board Member Initials: Lo
Meeting Date: 1-2-19
Follow-up action: _____

STORY COUNTY, IOWA
RESOLUTION OF THE BOARD OF SUPERVISORS
RESOLUTION 19-49

Appointment of Deputy Recorder

WHEREAS, the Story County Recorder was duly elected on November 6, 2018 and sworn in to office on January 2, 2019; and

WHEREAS, per §331.903(1) of the *Code of Iowa*, each officer may appoint one or more deputies, assistants, or clerks for whose acts the principal officer is responsible...and approval of each appointment shall be adopted by a resolution recorded in the minutes of the board;

NOW, THEREFORE, BE IT RESOLVED by the Story County Board of Supervisors that the following appointment by the Recorder is approved:

James M. Cheek Deputy Recorder

Motion by: Sanders _____, Seconded by: Murken _____

Voting Aye: Sanders, Murken, Olson _____

Voting Nay: None _____

Abstaining: None _____

Absent: None _____

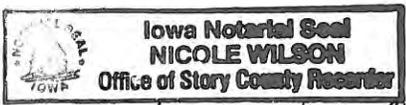
Approved this 2nd day of January, 2019.


Chairman, Board of Supervisors

Attest: 
Lucy Martin, County Auditor

CERTIFICATE OF APPOINTMENT OF DEPUTY OR ASSISTANT

STATE OF IOWA, STORY COUNTY, ss. I, STACIE HERRIDGE, RECORDER of STORY County, Iowa, do hereby constitute and appoint JAMES M. CHEEK as Deputy for a period of 4 YEARS, from JANUARY 1, 2019, and do hereby authorize and empower him/her to do and perform in my name as such DEPUTY RECORDER, all acts and things that may lawfully be done by him/her as such Deputy RECORDER. This commission expires DECEMBER 31, 2022, unless sooner revoked, or when said Deputy ceases to perform above named duties. Given under my hand this 2nd day of JANUARY, A. D. 2019.



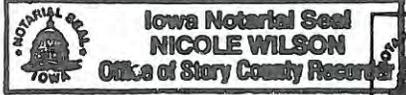
exp. 12/31/2018 Nicole Wilson

Stacie Herridge RECORDER, of STORY County.

STATE OF IOWA, STORY COUNTY, ss. I, JAMES M. CHEEK, having been appointed a DEPUTY RECORDER of STORY County, under STACIE HERRIDGE RECORDER of said County, do solemnly swear that I will support the Constitution of the United States and the Constitution of the State of Iowa, and that I will faithfully discharge the duties of DEPUTY RECORDER according to the best of my ability, so help me, God.

Subscribed and sworn to before me, this 2nd day of JANUARY, A. D. 2019.

Nicole Wilson exp. 12/31/2018 Michelle L. Bellile James M. Cheek



Above appointment approved by the Board of Supervisors, STORY County, this 2nd day of JANUARY, 2019, by resolution 19-49, Minute Book Y Page 1357.

Lauri Olson, Chairperson.

REVOCATION OF APPOINTMENT

STATE OF IOWA, COUNTY, ss. I, of above named County, who made the within appointment of as hereby revoke and cancel said appointment

This revocation shall be effective on and after , 20 . Given under my hand this day of , 20 .

STORY COUNTY, IOWA
RESOLUTION OF THE BOARD OF SUPERVISORS
RESOLUTION 19-50

Appointment of First Assistant County Attorney

WHEREAS, the Story County Attorney was duly elected on November 6, 2018 and sworn in to office on January 2, 2019; and

WHEREAS, per §331.903(1) of the *Code of Iowa*, each officer may appoint one or more deputies, assistants, or clerks for whose acts the principal officer is responsible...and approval of each appointment shall be adopted by a resolution recorded in the minutes of the board;

NOW, THEREFORE, BE IT RESOLVED by the Story County Board of Supervisors that the following appointment by the County Attorney is approved:

Tim C. Meals First Assistant Attorney

Motion by: Sanders _____, Seconded by: Murken _____

Voting Aye: Sanders, Murken, Olson _____

Voting Nay: None _____

Abstaining: None _____

Absent: None _____

Approved this 2nd day of January, 2019


Chair, Board of Supervisors

Attest: 
County Auditor

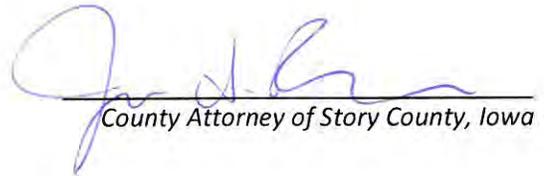
CERTIFICATE OF APPOINTMENT OF DEPUTY OR ASSISTANT

STATE OF IOWA, STORY COUNTY, ss.

I, Jessica A. Reynolds, County Attorney of Story County, Iowa, do hereby constitute and appoint Tim C. Meals as First Assistant County Attorney for a period of four years, and do hereby authorize and empower him to do and perform in my name as such First Assistant County Attorney all acts and things that may lawfully be done by him as such First Assistant County Attorney.

This commission expires December 31, 2022 unless sooner revoked, or when said Assistant ceases to perform above named duties.

Given under my hand this 2nd day of January, 2019.


County Attorney of Story County, Iowa

STATE OF IOWA, STORY COUNTY, ss.

I, Tim C. Meals, having been appointed First Assistant County Attorney of Story County, Iowa, under Jessica A. Reynolds, County Attorney of Story County, do solemnly swear that I will support the Constitution of the United States, and the Constitution of the State of Iowa, and that I will faithfully and impartially, to the best of my ability, discharge all the duties of Deputy Auditor, in Story County, Iowa, now or hereafter by law.

Subscribed and sworn to before me, this 2nd day of January, 2019.



Above appointment approved by the Board of Supervisors of Story County, the 2nd day of January, 2019, by resolution #19-50 Minute Book 4, Page 1357.


Chairperson

REVOCATION OF APPOINTMENT

STATE OF IOWA, STORY COUNTY, ss.

I, _____, _____ of Story County, Iowa, who made the within appointment of _____ as Deputy _____ do hereby revoke and cancel said appointment.

This revocation shall be effective on and after _____, _____.

Given under my hand this _____ day of _____, _____.

STORY COUNTY, IOWA
RESOLUTION OF THE BOARD OF SUPERVISORS
RESOLUTION 19-53

Appointment of Deputy Treasurers

WHEREAS, the Story County Treasurer was duly elected on November 6, 2018 and sworn in to office on January 2, 2019; and

WHEREAS, per §331.903(1) of the *Code of Iowa*, each officer may appoint one or more deputies, assistants, or clerks for whose acts the principal officer is responsible...and approval of each appointment shall be adopted by a resolution recorded in the minutes of the board;

NOW, THEREFORE, BE IT RESOLVED by the Story County Board of Supervisors that the following appointments by the Treasurer are approved:

Ardis Baldwin	Deputy Treasurer
Lori McDonald	Deputy Treasurer

Motion by: Sanders, Seconded by: Murken

Voting Aye: Sanders, Murken, Olson

Voting Nay: None

Abstaining: None

Absent: None

Approved this 2nd day of January, 2019


Chair, Board of Supervisors

Attest: 
County Auditor

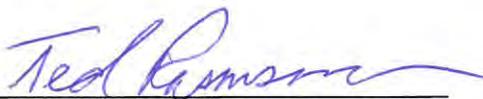
CERTIFICATE OF APPOINTMENT OF DEPUTY OR ASSISTANT

STATE OF IOWA, STORY COUNTY, ss.

I, Ted Rasmusson, Treasurer of Story County, Iowa, do hereby constitute and appoint Ardis Baldwin as Deputy Treasurer for a period of four years, and do hereby authorize and empower her to do and perform in my name as such Deputy Treasurer, all acts and things that may lawfully be done by her as such Deputy Treasurer.

This commission expires December 31, 2022 unless sooner revoked, or when said Deputy ceases to perform above named duties.

Given under my hand this 2nd day of January, 2019.


Treasurer of Story County, Iowa

STATE OF IOWA, STORY COUNTY, ss.

I, Ardis Baldwin, having been appointed Deputy Treasurer of Story County, Iowa, under Ted Rasmusson, Treasurer of Story County, do solemnly swear that I will support the Constitution of the United States, and the Constitution of the State of Iowa, and that I will faithfully and impartially, to the best of my ability, discharge all the duties of Deputy Treasurer, in Story County, Iowa, now or hereafter by law.

Subscribed and sworn to before me, this 2nd day of January, 2019.




Ardis A. Baldwin

Above appointment approved by the Board of Supervisors of Story County, the 2nd day of January, 2019, by resolution #19-53, Minute Book Y, Page 1,357.


Chairperson

REVOCATION OF APPOINTMENT

STATE OF IOWA, STORY COUNTY, ss.

I, Ted Rasmusson, Treasurer of Story County, Iowa, who made the within appointment of Ardis Baldwin as Deputy Treasurer do hereby revoke and cancel said appointment.

This revocation shall be effective on and after _____, _____.

Given under my hand this _____ day of _____, _____.

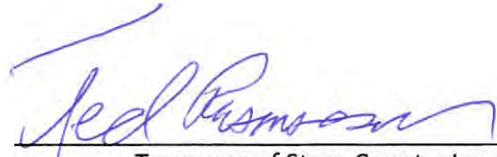
CERTIFICATE OF APPOINTMENT OF DEPUTY OR ASSISTANT

STATE OF IOWA, STORY COUNTY, ss.

I, Ted Rasmusson, Treasurer of Story County, Iowa, do hereby constitute and appoint Lori McDonald as Deputy Treasurer for a period of four years, and do hereby authorize and empower her to do and perform in my name as such Deputy Treasurer, all acts and things that may lawfully be done by her as such Deputy Treasurer.

This commission expires December 31, 2022 unless sooner revoked, or when said Deputy ceases to perform above named duties.

Given under my hand this 2nd day of January, 2019.


Treasurer of Story County, Iowa

STATE OF IOWA, STORY COUNTY, ss.

I, Lori McDonald, having been appointed Deputy Treasurer of Story County, Iowa, under Ted Rasmusson, Treasurer of Story County, do solemnly swear that I will support the Constitution of the United States, and the Constitution of the State of Iowa, and that I will faithfully and impartially, to the best of my ability, discharge all the duties of Deputy Treasurer, in Story County, Iowa, now or hereafter by law.

Subscribed and sworn to before me, this 2nd day of January, 2019.





Above appointment approved by the Board of Supervisors of Story County, the 2nd day of January, 2019, by resolution #19-53, Minute Book Y, Page 1,357.


Chairperson

REVOCATION OF APPOINTMENT

STATE OF IOWA, STORY COUNTY, ss.

I, Ted Rasmusson, Treasurer of Story County, Iowa, who made the within appointment of Lori McDonald as Deputy Treasurer do hereby revoke and cancel said appointment.

This revocation shall be effective on and after _____, _____.

Given under my hand this _____ day of _____, _____.



Sheriff's Office

Story County
PAUL H. FITZGERALD, Sheriff



Emergency 911 • Office: 515-382-6566 • Fax #: 515-382-7479 • P.O. Box 265 • Nevada, Iowa 50201

December 17, 2019

Rick Sanders, Chairperson
Story County Board of Supervisors
Marty Chitty
Lauris Olson

Dear Board of Supervisors:

It has come to the attention of my office, effective January 1, 2019 the IRS will increase their mileage rate from \$.545 to \$.58. As you are aware the Sheriff's mileage fee is governed by the Code of Iowa, Chapter 331.655(1)(j). Code of Iowa, Chapter 70A.9 states we may charge a mileage fee up to the maximum allowed under federal internal revenue service rules.

Therefore, to remain in line with the allowable fees permitted by the IRS, we request your approval to increase the current mileage fee charged to the rate of \$.58 to be effective January 1, 2019.

Respectfully,

Paul H. Fitzgerald
Story County Sheriff

PHF/jj

APPROVED **DENIED**

Board Member Initials: *LC*

Meeting Date: 1-2-19

Follow-up action: _____

APSH.

ALL SHERIFFS DEPTS IOWA

ATTN: CIVIL DIVISIONS

THE 2019 IRS ALLOWABLE MILEAGE RATE WILL BE 58 CENTS A MILE
EFFECTIVE JANUARY 1ST, 2019

ANY QUESTIONS CONTACT CAPT ROWLAND 57-8 AT 319-892-6162

CAPT RANDY ROWLAND LINN COUNTY SHERIFFS DEPT
CEDAR RAPIDS, IA S572/SAO

;201812141013/201812141013
S851 148
MESSAGE FROM S572
104407



District # 320
 11318 AURORA AVE
 URBANDALE, IA 50322-
 515-278-4100

Johnson Controls Fire Protection LP

INVOICE NO.
20640482
DATE OF INVOICE
12-03-18

INVOICE CONTRACT DETAIL

Service Plan Name	Billing Start Date	Billing End Date	Ship To Address	Covered Product	Qty	Description	Amount
Fire Alarm Test & Inspect	01-JAN-19	31-DEC-19	126 S Kellogg Ave, , AMES, IA	SYSTEM-FA-SMPLX	1	SIMPLEX 4004/4005 SYSTEM	\$2,559.05
				4004/4005	1	LIFEALARM FACP 8 IDS 4	
				4005-9101	1	NAC BG	
				S/N J92908GS	1	SERIAL ANNUNCIATOR-RCU	
				4602-9102	131	PHOTO DETECTOR	
				4098-9601	11	DETECTOR BASE 4-WIRE	
				4098-9682	4	HEAT DETECTOR 135 ROR	
				4098-9613	10	V/O 24VDC 15CD RED 1 HZ	
				4904-9137	17	MANUAL STATION - SINGLE ACTION	
				2099-9754	24	A/V 24VDC 15CD RED 1HZ HORIZ	
				4903-9236	8	HEAT DETECTOR CF135-2	
				4098-9429	1	AFMKT CCDACT FOR 4005	
				4005-9810	2	PHOTO DETECTOR	
				4098-9601	133	** IB ONLY ** CLEAN	
				FA-SMK CLEAN	133	** IB ONLY ** SENSITIVITY TEST	
				FA-SENSVTY			



D-U-N-S 09-4738007
FED. ID 58-260861

District # 320
11318 AURORA AVE
URBANDALE, IA 50322-
515-278-4100

Johnson Controls Fire Protection LP

INVOICE NO.
20640430

INVOICE DATE
12-03-18

CUSTOMER PO

CONTRACT #
141655

MODIFIER
R08-SEP-2017

PAYMENT TERMS
NET 30

Bill To: 320-00289793

Story Co Facilities Management
900 6th St
NEVADA IA 50201-2004

Ship To: 320-00786150

Story County Justice Center
1315 S B Ave
NEVADA IA 50201-2806

Requestors Name: Hahn, Al

CONTRACT DESCRIPTION	CONTRACT START DATE	CONTRACT END DATE
STORY COUNTY JUSTICE CENTER-1315 S B AVE-00786150	01-JAN-18	31-DEC-20

INVOICE NOTES:

Annual Fire Alarm Testing and Inspection

APPROVED **DENIED**

Board Member Initials: Lo

Meeting Date: 1-2-19

Follow-up action: _____

Total Contract Amount	-	\$4,024.98	Amount Of Current Invoice	-	\$1,341.66
			Sales Tax	-	\$0.00
			Total Amount Included	-	\$1,341.66
			Payment Received	-	\$0.00
Total Amount Due					\$1,341.66



REMITTANCE COPY

PLEASE TEAR OFF AND RETURN THIS PORTION WITH YOUR PAYMENT - WRITE INVOICE NO. ON YOUR CHECK.

TOTAL AMOUNT DUE
1,341.66

BILL TO Story Co Facilities Management
320-00289793

INVOICE NUMBER 20640430

SHIP TO Story County Justice Center
320-00786150

INVOICE DATE 12-03-18

CUSTOMER P.O.

REMIT TO Johnson Controls Fire Protection LP
Dept. CH 10320
Palatine, IL 60055-0320

1000134166720640430

NOTICE OF APPOINTMENT

PERSON APPOINTED: Joshua Opperman

BOARD COMMISSION OR COMMITTEE APPOINTED TO:
Compensation Board

LENGTH OF TERM: _____

(IS THIS APPOINTMENT TO FILL AN UNEXPIRED TERM? yes

IF SO, WHOSE TERM? Rebecca Reisinger

WHO NEEDS TO BE NOTIFIED? Treasurer

DATE APPOINTED: 1/02/19

DATE TERM EXPIRES: 06/30/19

Acknowledgment
APPROVED **DENIED**
Board Member Initials: LO
Meeting Date: 1-2-19
Follow-up action: _____

Applicant License Application (LE0002103)

Name of Applicant: <u>Casey's Marketing Company</u>		
Name of Business (DBA): <u>Casey's General Store #2301</u>		
Address of Premises: <u>17005 Hwy 69</u>		
City <u>Gilbert</u>	County: <u>Story</u>	Zip: <u>50010</u>
Business	<u>(515) 233-5069</u>	
Mailing	<u>PO Box 3001</u>	
City <u>Ankeny</u>	State <u>IA</u>	Zip: <u>500218045</u>

Contact Person

Name <u>JESSICA FISHER, Store Operations</u>	
Phone: <u>(515) 446-6404</u>	Email <u>JESSICA.FISHER@caseys.com</u>

Classification Class E Liquor License (LE)

Term: 12 months

Effective Date: 02/28/2018 2019

Expiration Date: 02/27/2019 2020

Privileges:

- Class B Native Wine Permit
- Class C Beer Permit (Carryout Beer)
- Class E Liquor License (LE)
- Sunday Sales

APPROVED **DENIED**
Board Member Initials: [Signature]
Meeting Date: 1-2-19
Follow-up action: _____

Status of Business

BusinessType: <u>Publicly Traded Corporation</u>	
Corporate ID Number: <u>XXXXXXXXXX</u>	Federal Employer ID <u>XXXXXXXXXX</u>

Ownership

42-0935283 Casey's General

Stores, Inc.

First Name: 42-0935283

Last Name: Casey's General Stores, Inc.

City: Ankeny

State: Iowa **Zip:** 50021-804

Position: Owner

% of Ownership: 100.00%

U.S. Citizen: Yes

Michael Richardson

First Name: Michael

Last Name: Richardson

City: Pleasant Hill

State: Iowa **Zip:** 50327

Position: President

% of Ownership: 0.00%

U.S. Citizen: Yes

Julia L. Jackowski

First Name: Julia L.

Last Name: Jackowski



MAP Supplement

APPLICATION NO. 1416421	MAP AGREEMENT NO. 1202967	SUPPLEMENT NO. 1202967-004
----------------------------	------------------------------	-------------------------------

Meter Reading Contact Person: 0

CUSTOMER INFORMATION

FULL LEGAL NAME: Story, County Of
 STREET ADDRESS: 900 Sixth St
 CITY: Nevada STATE: IA ZIP: 50201 PHONE: 515-382-6581 FAX:
 BILLING NAME (IF DIFFERENT FROM ABOVE):
 BILLING STREET ADDRESS:
 CITY: STATE: ZIP: E-MAIL:

EQUIPMENT WITH CONSOLIDATED MINIMUMS - ADDED

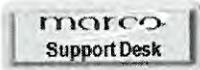
MAKE/MODEL/ACCESSORIES	SERIAL NUMBER	START METER COLOR	START METER BW
1. See Attached Pool Billing			
2.			
3.			

Minimum Payment* \$ See Attached B&W Print Allowance See Attached Excess B&W Print Charge* \$ See Attached
 *plus applicable taxes

EQUIPMENT WITH CONSOLIDATED MINIMUMS - DELETED

MAKE/MODEL/ACCESSORIES	SERIAL NUMBER	END METER COLOR	END METER BW
1.			

MARCO SUPPORT DESK (By selecting "YES" you agree that the Marco Support Desk Monthly Fee will be added to this Supplement's monthly invoice.)



Do you wish to enroll in the Marco Support Desk for equipment listed herein?
 Yes OR No

Combined Total of all Equipment Enrolled:

Marco Support Desk Device Monthly Fees		
1 - 5 Devices: \$10	6 - 15 Devices: \$20	16+ Devices: \$30

If enrolled, the equipment on this Supplement will qualify for Marco Support Desk in addition to any other equipment enrolled under the MAP Agreement. If no box is checked, then you have elected to waive Marco Support Desk coverage for equipment listed herein.

FREQUENCY OF MINIMUM PAYMENT

Please Check One: Monthly Quarterly Semi-Annually Annually
 (If no box is checked, frequency will be Monthly)

METER READING FREQUENCY

Please Check One: Monthly Quarterly Semi-Annually Annually
 (If no box is checked, frequency will be Monthly)

TERM

35 Mos. End of Term of this Supplement coincides with the End of Term set forth in the MAP Agreement (coterminous) and/or previous Supplement(s) (as applicable).
 Mos. Term applies to this Supplement only.

SUPPLIES COVERAGE LEVELS: Please Check One: All Inclusive HP OEM No Supplies Included
 (If no box is checked, no supplies will be included) (Billed at Standard Pricing)

TERMS AND CONDITIONS

You have requested this Supplement to the MAP Agreement between the Owner and Customer as identified in Owner's records by the MAP Agreement set forth above. If this Supplement relates to Equipment not subject to the MAP Agreement (i.e., additional Equipment), this Supplement, together with the preprinted terms of the MAP Agreement (as amended), constitutes an agreement between Customer and Owner with respect to the Equipment referenced herein, separate and distinct from the MAP Agreement. Customer agrees to be bound by the terms of this Supplement, which includes the preprinted terms of the MAP Agreement (as amended) and agrees this Supplement shall commence on the date of Owner's acceptance. The original of this Supplement shall be that copy which bears a facsimile or original of Customer's signature and which bears Owner's original signature. If any provision in this Supplement conflicts with a provision in the MAP Agreement, the provision in this Supplement shall control. If this Supplement relates to Equipment subject to the MAP Agreement (i.e. replaced or removed Equipment and/or payment modifications), the MAP Agreement shall be modified or supplemented as set forth above as of the date Owner accepts this Supplement. Except as specifically modified by this Supplement, all other terms and conditions of the MAP Agreement (as amended) and any personal guaranty(s) remain in full force and effect.

OWNER ACCEPTANCE

Print Name: _____ Signature: _____ Title: _____
 Owner: **Marco Technologies, LLC** Dated: _____

PRIVACY AND INFORMATION SECURITY

You acknowledge that the Equipment you have received may be equipped with a hard drive that may store personal and confidential information ("PCI") and you understand the privacy and information security risks associated with PCI that may be stored on your Equipment. You agree to be responsible for safeguarding any PCI and you agree to indemnify and hold Marco Technologies LLC harmless from any loss, misappropriation or breach of the PCI that may be stored on your Equipment.

Story, County Of
 CUSTOMER (as referenced above) SIGNATURE:
 TITLE: Chair, Board of Supervisors
 DATED: 1/2/19

CUSTOMER ACCEPTANCE

By signing below, you certify that you have reviewed and do agree to all terms and conditions of the MAP Agreement and this Supplement.

Story, County Of
 CUSTOMER (as referenced above) SIGNATURE:
 TITLE: Chair, Board of Supervisors
 DATED: 1/2/19
 42-6005024
 FEDERAL TAX I.D. # PRINT NAME: Louis Asan



MAP Supplement
Pool Billing Schedule

APPLICATION NO.
1416421

AGREEMENT NO.

Meter Reading Contact Person: 0

Managed Account Program

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 1 NAME: Board of Supervisors copiers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5 are empty.

Minimum Payment* \$ 125.00
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

POOL 2 NAME: Board of Supervisors - Printers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5 are empty.

Minimum Payment* \$ 13.14
*plus applicable taxes
B&W Print Allowance 0
Excess B&W Print Charge* \$ 0.010000

POOL 3 NAME: Information desk - printers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5 are empty.

Minimum Payment* \$ 13.14
*plus applicable taxes
B&W Print Allowance 0
Excess B&W Print Charge* \$ 0.010000

POOL 4 NAME: Attorney Ames- copiers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5 are empty.

Minimum Payment* \$ 173.93
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Story, County Of
CUSTOMER (as referenced above)

SIGNATURE (Handwritten signature)

TITLE: Chair, Board of Supervisors
DATED: 1/2/19



MAP Supplement
Pool Billing Schedule

APPLICATION NO.
1416421

AGREEMENT NO.

Meter Reading Contact Person: 0

Managed Account Program

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 5 NAME: Attorney Ames- printers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 13.14

*plus applicable taxes

B&W Print Allowance 0

Excess B&W Print Charge* \$ 0.010000

POOL 6 NAME: Engineering - copiers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 99.29

*plus applicable taxes

Color Print Allowance 0

Excess Color Print Charge* \$ 0.045000

B&W Print Allowance 0

Excess B&W Print Charge* \$ 0.004500

POOL 7 NAME: Engineering - printers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 13.14

*plus applicable taxes

B&W Print Allowance 0

Excess B&W Print Charge* \$ 0.010000

POOL 8 NAME: Facilities -copiers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 85.00

*plus applicable taxes

Color Print Allowance 0

Excess Color Print Charge* \$ 0.045000

B&W Print Allowance 0

Excess B&W Print Charge* \$ 0.004500

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Story, County Of
CUSTOMER (as referenced above)

SIGNATURE (Handwritten signature)

TITLE Chair, Board of Supervisors
DATED 1/2/19



MAP Supplement
Schedule

APPLICATION NO.
1416421

AGREEMENT NO.

Meter Reading Contact Person: _____

Managed Account Program Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and **Marco Technologies, LLC**.

POOL 9 NAME: Plan & Zone Health copiers

Pool Location: _____

MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW

1. _____
2. _____
3. _____
4. _____
5. _____

Minimum Payment* \$ <u>75.00</u>	Color Print Allowance <u>0</u>	Excess Color Print Charge* \$ <u>0.045000</u>
<i>*plus applicable taxes</i>	B&W Print Allowance <u>0</u>	Excess B&W Print Charge* \$ <u>0.004500</u>

POOL 10 NAME: Information Technology copiers

Pool Location: _____

MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW

1. _____
2. _____
3. _____
4. _____
5. _____

Minimum Payment* \$ <u>85.00</u>	Color Print Allowance <u>0</u>	Excess Color Print Charge* \$ <u>0.045000</u>
<i>*plus applicable taxes</i>	B&W Print Allowance <u>0</u>	Excess B&W Print Charge* \$ <u>0.004500</u>

POOL 11 NAME: Recorder copiers

Pool Location: _____

MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW

1. _____
2. _____
3. _____
4. _____
5. _____

Minimum Payment* \$ <u>78.61</u>	Color Print Allowance <u>0</u>	Excess Color Print Charge* \$ <u>0.045000</u>
<i>*plus applicable taxes</i>	B&W Print Allowance <u>0</u>	Excess B&W Print Charge* \$ <u>0.004500</u>

POOL 12 NAME: Treasurer Printers

Pool Location: _____

MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW

1. _____
2. _____
3. _____
4. _____
5. _____

Minimum Payment* \$ <u>63.68</u>	Color Print Allowance <u>na</u>	Excess Color Print Charge* \$ <u>na</u>
<i>*plus applicable taxes</i>	B&W Print Allowance <u>0</u>	Excess B&W Print Charge* \$ <u>0.010000</u>

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Story, County Of
CUSTOMER (as referenced above)



SIGNATURE

TITLE Chair Board of Supervisors
DATED 1/2/19



MAP Supplement
Schedule

APPLICATION NO.

1416421

AGREEMENT NO.

Meter Reading Contact Person: _____

Managed Account Program

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 13 NAME: Treasurer - copiers

Pool Location: _____

MAKE/MODEL/ACCESSORIES	SERIAL NUMBER	START METER COLOR	START METER BW
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

Minimum Payment* \$ <u>119.00</u>	Color Print Allowance <u>0</u>	Excess Color Print Charge* \$ <u>0.045000</u>
<i>*plus applicable taxes</i>	B&W Print Allowance <u>0</u>	Excess B&W Print Charge* \$ <u>0.004500</u>

POOL 14 NAME: Conservation copiers

Pool Location: _____

MAKE/MODEL/ACCESSORIES	SERIAL NUMBER	START METER COLOR	START METER BW
1. KONICA BIZHUB C258	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

Minimum Payment* \$ <u>250.83</u>	Color Print Allowance <u>0</u>	Excess Color Print Charge* \$ <u>0.045000</u>
<i>*plus applicable taxes</i>	B&W Print Allowance <u>0</u>	Excess B&W Print Charge* \$ <u>0.004500</u>

POOL 15 NAME: Attorney Nevada copiers

Pool Location: _____

MAKE/MODEL/ACCESSORIES	SERIAL NUMBER	START METER COLOR	START METER BW
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

Minimum Payment* \$ <u>214.74</u>	Color Print Allowance <u>0</u>	Excess Color Print Charge* \$ <u>0.045000</u>
<i>*plus applicable taxes</i>	B&W Print Allowance <u>0</u>	Excess B&W Print Charge* \$ <u>0.004500</u>

POOL 16 NAME: Attorney Nevada printers

Pool Location: _____

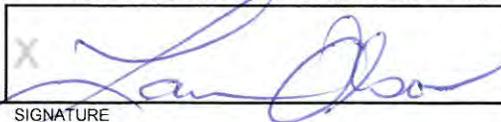
MAKE/MODEL/ACCESSORIES	SERIAL NUMBER	START METER COLOR	START METER BW
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

Minimum Payment* \$ <u>13.82</u>	Color Print Allowance <u>na</u>	Excess Color Print Charge* \$ <u>na</u>
<i>*plus applicable taxes</i>	B&W Print Allowance <u>0</u>	Excess B&W Print Charge* \$ <u>0.010000</u>

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Story, County Of
CUSTOMER (as referenced above)



SIGNATURE

TITLE Chair Board of Supervisors
DATED 11/21/19



MAP Supplement
Schedule

APPLICATION NO.
1416421

AGREEMENT NO.

Meter Reading Contact Person:

Managed Account Program

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 17 NAME: Community service copiers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 121.00
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

POOL 18 NAME: Auditors and Elections copiers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 127.00
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

POOL 19 NAME: IT-E911 printers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 21.00
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.090000
Excess B&W Print Charge* \$ 0.010000

POOL 20 NAME Recorders printers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 13.14
*plus applicable taxes
Color Print Allowance na
B&W Print Allowance 0
Excess Color Print Charge* \$ na
Excess B&W Print Charge* \$ 0.010000

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Story, County Of
CUSTOMER (as referenced above)

SIGNATURE (Handwritten signature)

TITLE Chair, Board of Supervisors
DATED 11/2/19



MAP Supplement
Schedule

APPLICATION NO.
1416421

AGREEMENT NO.

Meter Reading Contact Person: _____

Managed Account Program

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and **Marco Technologies, LLC**.

POOL 21 NAME: Safety Coordinator - printer

Pool Location: _____

MAKE/MODEL/ACCESSORIES	SERIAL NUMBER	START METER COLOR	START METER BW
1. HP M426FDW			
2.			
3.			
4.			
5.			

Minimum Payment* \$ <u>29.88</u>	Color Print Allowance <u>na</u>	Excess Color Print Charge* \$ <u>na</u>
<i>*plus applicable taxes</i>	B&W Print Allowance <u>0</u>	Excess B&W Print Charge* \$ <u>0.010000</u>

POOL 22 NAME: Facilities -printers

Pool Location: _____

MAKE/MODEL/ACCESSORIES	SERIAL NUMBER	START METER COLOR	START METER BW
1. HP M527F			
2.			
3.			
4.			
5.			

Minimum Payment* \$ <u>81.52</u>	Color Print Allowance <u>na</u>	Excess Color Print Charge* \$ <u>na</u>
<i>*plus applicable taxes</i>	B&W Print Allowance <u>0</u>	Excess B&W Print Charge* \$ <u>0.010000</u>

POOL 23 NAME:

Pool Location: _____

MAKE/MODEL/ACCESSORIES	SERIAL NUMBER	START METER COLOR	START METER BW
1.			
2.			
3.			
4.			
5.			

Minimum Payment* \$ _____	Color Print Allowance _____	Excess Color Print Charge* \$ _____
<i>*plus applicable taxes</i>	B&W Print Allowance _____	Excess B&W Print Charge* \$ _____

POOL 24 NAME:

Pool Location: _____

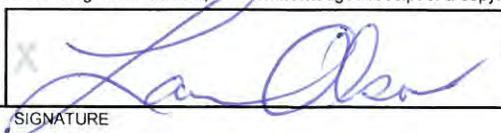
MAKE/MODEL/ACCESSORIES	SERIAL NUMBER	START METER COLOR	START METER BW
1.			
2.			
3.			
4.			
5.			

Minimum Payment* \$ _____	Color Print Allowance _____	Excess Color Print Charge* \$ _____
<i>*plus applicable taxes</i>	B&W Print Allowance _____	Excess B&W Print Charge* \$ _____

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Story, County Of
CUSTOMER (as referenced above)



SIGNATURE

TITLE Chair, Board of Supervisors
DATED 1/2/19



STATE AND LOCAL GOVERNMENT ADDENDUM

AGREEMENT NO.

Phone: 800.892.8548 | Fax: 800.847.3087

Addendum to Agreement _____, between _____ Story, County Of _____ as Customer and Marco Technologies LLC, as Lessor.

The parties wish to amend the above-referenced Agreement by adding the following language:

REPRESENTATIONS AND WARRANTIES OF CUSTOMER: You hereby represent and warrant to us that: (a) you have been duly authorized by the Constitution and laws of the applicable jurisdiction and by a resolution of your governing body to execute and deliver the Agreement and to carry out its obligations hereunder; (b) all legal requirements have been met, and procedures have been followed, including public bidding, in order to ensure the enforceability of the Agreement; (c) this Agreement is in compliance with all laws applicable to you, including any debt limitations or limitations on interest rates or finance charges; (d) the Equipment will be used by you only for essential governmental or proprietary functions of you consistent with the scope of your authority, will not be used in a trade or business of any person or entity, by the federal government or for any personal, family or household use; and your need for the Equipment is not expected to diminish during the term of the Agreement; (e) you have funds available to pay contracted Payments until the end of your current appropriation period, and you intend to request funds to make contracted Payments in each appropriation period, from now until the end of the term of this Agreement; and (f) your exact legal name is as set forth on page one of the Agreement.

NON-APPROPRIATION OR RENEWAL: If either sufficient funds are not appropriated to make contracted Payments or any other amounts due under this Agreement or (to the extent required by applicable law) this Agreement is not renewed, this Agreement shall terminate and you shall not be obligated to make contracted Payments under the Agreement beyond the then-current fiscal year for which funds have been appropriated. Upon such an event, you shall, no later than the end of the fiscal year for which contracted Payments have been appropriated, deliver possession of the Equipment to us. If you fail to deliver possession of the Equipment to us, the termination shall nevertheless be effective but you shall be responsible, to the extent permitted by law and legally available funds, for the payment of damages in an amount equal to the portion of contracted Payments thereafter coming due that is attributable to the number of days after the termination during which you fail to deliver possession and for any other loss suffered by us as a result of your failure to deliver possession as required. You shall notify us in writing within seven days after your failure to appropriate funds sufficient for the payment of the contracted Payments or (to the extent required by applicable law) this Agreement is not renewed, but failure to provide such notice shall not operate to extend the Agreement term or result in any liability to you.

TITLE TO THE EQUIPMENT: If the selected purchase option for this Agreement is \$1.00 or \$101.00, unless otherwise required by law, upon your acceptance of the Equipment, title to the Equipment shall be in your name, subject to our interest under this Agreement.

The parties wish to amend the above-referenced Agreement by adding the following language:

Any provision in the Agreement stating that the Agreement shall automatically renew unless the Equipment is purchased, returned or a notice requirement is satisfied is hereby amended and restated as follows: "This Agreement will renew for month-to-month terms unless you purchase or return the Equipment (according to the conditions herein) or send us written notice at least 30 days (before the end of any term) that you do not want it renewed."

Any provision in the Agreement stating that we may assign this Agreement is hereby amended and restated as follows: "We may sell, assign, or transfer this Agreement without notice to or consent from you, and you waive any right you may have to such notice or consent."

Any provision in the Agreement stating that you grant us a security interest in the Equipment to secure all amounts owed to us under any agreement is hereby amended and restated as follows: "To the extent permitted by law, you grant us a security interest in the Equipment to secure all amounts you owe us under this Agreement, and you authorize us to file a UCC-1 financing statement."

NOTE: A FACSIMILE, ELECTRONIC OR SCANNED VERSION OF THIS DOCUMENT WITH SIGNATURE SHALL BE CONSIDERED BE AN ORIGINAL. CAPITALIZED TERMS IN THIS DOCUMENT ARE DEFINED AS IN THE AGREEMENT, UNLESS SPECIFICALLY STATED OTHERWISE.

Any provision in the Agreement stating that you shall indemnify and hold us harmless is hereby amended and restated as follows: "You shall not be required to indemnify or hold us harmless against liabilities arising from the Agreement. However, as between you and us, and to the extent permitted by law and legally available funds, you shall bear the risk of loss for, shall pay directly, and shall defend against any and all claims, liabilities, proceedings, actions, expenses, damages or losses arising under or related to the Equipment, including, but not limited to, the possession, ownership, lease, use or operation thereof, except that you shall not bear the risk of loss of, nor pay for, any claims, liabilities, proceedings, actions, expenses, damages or losses that arise directly from events occurring after you have surrendered possession of the Equipment in accordance with the terms of the Agreement to us or that arise directly from our gross negligence or willful misconduct."

Any provision in the Agreement stating that a default by you under any agreement with our affiliates or other lenders shall be an event of default under the Agreement is hereby amended and restated as follows: "You will be in default if: (a) you do not pay any Payment or other sum due to us under the Agreement when due or if you fail to perform in accordance with the covenants, terms and conditions of this Agreement, (b) you make or have made any false statement or misrepresentation to us, (c) you dissolve, terminate your existence or file bankruptcy, or (d) there has been a material adverse change in your financial, business or operating condition."

Any provision in the Agreement stating that you shall pay our attorneys' fees is hereby amended and restated as follows: "In the event of any dispute or enforcement of rights under this Agreement or any related agreement, you agree to pay, to the extent permitted by law and to extent of legally available funds, our reasonable attorneys' fees (including any incurred before or at trial, on appeal or in any other proceeding), actual court costs and any other collection costs, including any collection agency fee."

Any provision in the Agreement requiring you to pay amounts due under the Agreement upon the occurrence of a default, failure to appropriate funds or failure to renew the Agreement is hereby amended to limit such requirement to the extent permitted by law and legally available funds.

Any provision in the Agreement stating that the Agreement is governed by a particular state's laws and you consent to such jurisdiction and venue is hereby amended and restated as follows: "This Agreement will be governed by and construed in accordance with the laws of the state where you are located. You consent to jurisdiction and venue of any state or federal court in such state and waive the defense of inconvenient forum."

By signing this Addendum, Customer acknowledges the above changes to the Agreement and authorizes Lessor to make such changes. In all other respects, the terms and conditions of the Agreement remain in full force and effect and remain binding on Customer.

CUSTOMER ACCEPTANCE

Marco Technologies LLC
LESSOR

X
SIGNATURE

TITLE DATE

Story, County Of
CUSTOMER

X *La Olso*
SIGNATURE
Chair, Board of Supervisors 1/2/19
TITLE DATE

NOTE: A FACSIMILE, ELECTRONIC OR SCANNED VERSION OF THIS DOCUMENT WITH SIGNATURE SHALL BE CONSIDERED BE AN ORIGINAL. CAPITALIZED TERMS IN THIS DOCUMENT ARE DEFINED AS IN THE AGREEMENT, UNLESS SPECIFICALLY STATED OTHERWISE.

NOTICE OF APPOINTMENT

PERSON APPOINTED: Marvin Smith

BOARD COMMISSION OR COMMITTEE APPOINTED TO:
Planning & Zoning Commission

LENGTH OF TERM: 5 years

(IS THIS APPOINTMENT TO FILL AN UNEXPIRED TERM? No

IF SO, WHOSE TERM? _____

WHO NEEDS TO BE NOTIFIED? _____

DATE APPOINTED: 1/02/19

DATE TERM EXPIRES: 12/31/23

APPROVED **DENIED**
Board Member Initials: MS
Meeting Date: 1-2-19
Follow-up action: _____

NOTICE OF APPOINTMENT

PERSON APPOINTED: Lisa McCoy

BOARD COMMISSION OR COMMITTEE APPOINTED TO:

ASSET

LENGTH OF TERM: 1 year

(IS THIS APPOINTMENT TO FILL AN UNEXPIRED TERM? No

IF SO, WHOSE TERM? _____

WHO NEEDS TO BE NOTIFIED? _____

DATE APPOINTED: 1/02/19

DATE TERM EXPIRES: 3/31/20

APPROVED **DENIED**
Board Member Initials: LM
Meeting Date: 1-2-19
Follow-up action: _____

Applicant License Application (BB0035475)

Name of Applicant: Alluvial Brewing Company, LLC
Name of Business (DBA): Alluvial Brewing Company
Address of Premises: 3715 West 190th Street
City Ames **County:** Story **Zip:** 50014
Business (515) 337-1182
Mailing 3715 West 190th Street
City Ames **State** IA **Zip:** 50014

Contact Person

Name Elliot Thompson
Phone: (515) 460-6581 **Email** elliott@alluvialbrewing.com

Classification Class B Beer (BB) (Includes Wine Coolers)

Term: 12 months

Effective Date: 03/01/2018 2019

Expiration Date: 02/28/2019 2020

Privileges:

- Class B Beer (BB) (Includes Wine Coolers)
- Outdoor Service
- Sunday Sales

APPROVED **DENIED**
Board Member Initials: ET
Meeting Date: 1-2-19
Follow-up action: _____

Status of Business

BusinessType: Limited Liability Company
Corporate ID Number: XXXXXXXXXX **Federal Employer ID** XXXXXXXXXX

Ownership

Elliot Thompson

First Name: Elliot **Last Name:** Thompson
City: Ames **State:** Iowa **Zip:** 50014
Position: Owner
% of Ownership: 100.00% **U.S. Citizen:** Yes

Insurance Company Information

Insurance Company: Selective Insurance Company of America
Policy Effective Date: 03/01/2018 **Policy Expiration** 03/01/2019
Bond Effective **Dram Cancel Date:**
Outdoor Service Effective **Outdoor Service Expiration**
Temp Transfer Effective Date **Temp Transfer Expiration Date:**

NOTICE OF APPOINTMENT

PERSON APPOINTED: Jill Leonard

BOARD COMMISSION OR COMMITTEE APPOINTED TO:

Nonresident Maxwell Public Library Board Of Trustees

LENGTH OF TERM: 5 years

(IS THIS APPOINTMENT TO FILL AN UNEXPIRED TERM? No

IF SO, WHOSE TERM? _____

WHO NEEDS TO BE NOTIFIED? _____

DATE APPOINTED: _____

DATE TERM EXPIRES: 06/30/24

Acknowledgment
APPROVED

DENIED

Board Member Initials: LO

Meeting Date: 1-2-19

Follow-up action: _____

RESOLUTION #19-58
2019 CENTRAL IOWA REGIONAL
TRANSPORTATION PLANNING ALLIANCE
APPOINTMENTS

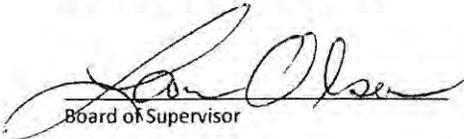
WHEREAS, the Story County Board of Supervisors of Story County, Iowa, annually appoints or to reappoint, persons to represent that member government on the Central Iowa Regional Transportation Planning Alliance (CIRPTA) Transportation Policy Committee (TPC) and on the CIRPTA Transportation Technical Committee (TTC).

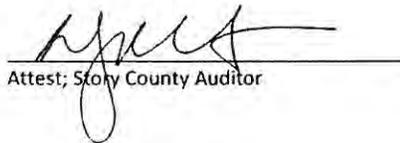
AND WHEREAS, Story County Board of Supervisor of Story County, Iowa, through the Amended and Substituted Agreement Establishing the Central Iowa Regional Transportation Planning Alliance under Chapter 28E, Code of Iowa (28E Agreement) is entitled to one primary representative and to one alternate representative to both the CIRPTA TPC and to the CIRPTA TTC.

NOW, THEREFORE, BE IT RESOLVED that the Story County's current representation is:

CIRPTA TPC Primary Representative	<u>Lauris Olson</u>
CIRPTA TPC Alternate Representative	<u>Rick Sanders</u>
CIRPTA TCC Primary Representative	<u>Darren Moon</u>
CIRPTA TTC Alternate Representative	<u>Tyler Sparks</u>

Dated this 2nd day of January, 2019


Board of Supervisor


Attest; Story County Auditor

Moved by: Sanders

Seconded by: Murken

Voting Aye: Sanders, Murken, Olson

Voting Nay: None

Absent: None



420 Watson Powell Jr. Parkway, Suite 200
Des Moines, Iowa 50309
Phone: 515.334.0075
www.cirtpa.org

2019 Representative Information

(Please fill in all information to guarantee contact information is up-to-date in our records)

CIRTPA Policy Committee - Primary

Name: Lauris Olson

Title: Board of Supervisors Chair

Jurisdiction/Agency: Story County

Address: 900 6th St., Nevada, Ia.

City, State, Zip (9 digits, if available): 50201

Work (515) 382-7202 Cell (515) 451-7293

E-Mail lolson@storycountyiowa.gov

If and additional staff person should receive copies of emails for the representative, please provide the following:

Name: _____

Title: _____

E-Mail _____

RETURN TO:

Tracey Deckard, Office Manager
CIRTPA
420 Watson Powell Jr., Way | Suite 200
Des Moines, Iowa 50309
Phone: (515) 334-0075
tdeckard@dmampo.org

Boone County • Dallas County • Jasper County • Madison County
Marion County • Polk County • Story County • Warren County
Adel • Boone • Huxley • Indianola • Knoxville • Nevada
Newton • Pella • Perry • Story City • Winterset



420 Watson Powell Jr. Parkway, Suite 200
Des Moines, Iowa 50309
Phone: 515.334.0075
www.cirtpa.org

2019 Representative Information

(Please fill in all information to guarantee contact information is up-to-date in our records)

CIRTPA Policy Committee - Alternate

Name: Rick Sanders
Title: Board of Supervisor
Jurisdiction/Agency: Story County
Address: 900 6th St., Nevada, Ia.
City, State, Zip (9 digits, if available): 50201
Work (515) 382-7200 Cell (515) 708-0158
E-Mail rsanders@storycountyiowa.gov

If and additional staff person should receive copies of emails for the representative, please provide the following:

Name: _____
Title: _____
E-Mail _____

RETURN TO:

Tracey Deckard, Office Manager
CIRTPA
420 Watson Powell Jr., Way | Suite 200
Des Moines, Iowa 50309
Phone: (515) 334-0075
tdeckard@dmampo.org

Boone County • Dallas County • Jasper County • Madison County
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Newton • Pella • Perry • Story City • Winterset

CENTRAL IOWA REGIONAL
CIRTPA
TRANSPORTATION PLANNING ALLIANCE

420 Watson Powell Jr. Parkway, Suite 200
Des Moines, Iowa 50309
Phone: 515.334.0075
www.cirtpa.org

2019 Representative Information

(Please fill in all information to guarantee contact information is up-to-date in our records)

CIRTPA
Transportation Technical Committee (TTC)- Primary

Name: Darren Moon

Title: Story County Engineer

Jurisdiction/Agency: Story County

Address: 837 N Ave.

City, State, Zip (9 digits, if available): Nevada, Ia. 50201

Work (515) 382-7359 Cell (515) 460-1698

E-Mail dmoon@storycountyia.gov

If and additional staff person should receive copies of emails for the representative, please provide the following:

Name: _____

Title: _____

E-Mail _____

RETURN TO:

Tracey Deckard, Office Manager
CIRTPA
420 Watson Powell Jr., Way | Suite 200
Des Moines, Iowa 50309
Phone: (515) 334-0075
tdeckard@dmampo.org

Boone County • Dallas County • Jasper County • Madison County
Marion County • Polk County • Story County • Warren County
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420 Watson Powell Jr. Parkway, Suite 200
Des Moines, Iowa 50309
Phone: 515.334.0075
www.cirtpa.org

2019 Representative Information

(Please fill in all information to guarantee contact information is up-to-date in our records)

CIRTPA

Transportation Technical Committee (TTC)- Alternative

Name: Tyler Sparks

Title: Story County Assistant Engineer

Jurisdiction/Agency: Story County

Address: 837 N Ave.

City, State, Zip (9 digits, if available): Nevada, Ia. 50201

Work (515) 382-7356 Cell (712) 260-6454

E-Mail tsparks@storycountyiowa.gov

If and additional staff person should receive copies of emails for the representative, please provide the following:

Name: _____

Title: _____

E-Mail _____

RETURN TO:

Tracey Deckard, Office Manager
CIRTPA
420 Watson Powell Jr., Way | Suite 200
Des Moines, Iowa 50309
Phone: (515) 334-0075
tdeckard@dmampo.org

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Marion County • Polk County • Story County • Warren County
Adel • Boone • Huxley • Indianola • Knoxville • Nevada
Newton • Pella • Perry • Story City • Winterset



Brad Golightly, Dallas County
Transportation Policy Committee Chair

Todd Hagan, Madison County
Transportation Technical Committee Vice Chair

420 Watson Powell Jr. Parkway, Suite 200
Des Moines, Iowa 50309
Phone: 515.334.0075
www.cirtpa.org

December 12, 2018

Rick Sanders
Story County Board of Supervisors
900 6th Avenue
Nevada, IA 50201

RECEIVED

DEC 20 2018

STORY COUNTY
BOARD OF SUPERVISORS

Subject: Calendar Year 2019 CIRTPA Representation

Dear Supervisor Sanders:

The Central Iowa Regional Transportation Planning Alliance (CIRTPA) annually requests its member governments to appoint or to reappoint, by Board of Supervisors' action, persons to represent that member government on the CIRTPA Transportation Policy Committee (TPC) and on the CIRTPA Transportation Technical Committee (TTC).

Story County, through the Amended and Substituted Agreement Establishing the Central Iowa Regional Transportation Planning Alliance under Chapter 28E, Code of Iowa (28E Agreement) is entitled to one primary representative and to one alternate representative to both the CIRTPA TPC and to the CIRTPA TTC. Story County County's current representation is:

CIRTPA TPC Primary Representative	Lauris Olson
CIRTPA TPC Alternate Representative	Rick Sanders
CIRTPA TTC Primary Representative	Darren Moon
CIRTPA TTC Alternate Representative	Tyler Sparks

There should be a strong link between the Story County Board of Supervisors and its CIRTPA representatives to enhance communication among our member governments through the CIRTPA process. The CIRTPA, in accordance with Title VI of the Civil Rights Act of 1964, urges our member governments to consider minority individuals when making these appointments.

This correspondence is to request Story County submit the names and contact information of each of the two newly appointed or reappointed representatives to the CIRTPA TPC and the two representatives to the CIRTPA TTC on the enclosed forms. **These forms are due to the CIRTPA on or before January 10, 2019.**

Thank you for your cooperation. If you have any questions regarding this request, please contact Tracey Deckard by telephone at (515) 334-0075 or by e-mail at tdeckard@dmampo.org.

Respectfully yours,

R. Todd Ashby
Program Coordinator

cc: County Auditor



420 Watson Powell Jr. Parkway, Suite 200
Des Moines, Iowa 50309
Phone: 515.334.0075
www.cirtpa.org

Reminder:

- **Please fill out each representation form completely and clearly.**
- **Make sure to include a current email address as all meeting notices are sent out via email.**
- **Please include a signed copy of the Resolution appointing the representative(s).**

Boone County • Dallas County • Jasper County • Madison County
Marion County • Polk County • Story County • Warren County
Adel • Boone • Huxley • Indianola • Knoxville • Nevada
Newton • Pella • Perry • Story City • Winterset

Calendar Year 2018 CIRTPA meeting schedule
Meetings begin at 9:30 a.m.

CIRTPA JOINT COMMITTEE	
THURSDAY	JANUARY 17, 2019
THURSDAY	MARCH 21, 2019
THURSDAY	MAY 16, 2019
THURSDAY	JULY 18, 2019
THURSDAY	SEPTEMBER 19, 2019
THURSDAY	NOVEMBER 21, 2019

CIRTPA TTC COMMITTEE*	
<i>THURSDAY</i>	<i>FEBRUARY 21, 2019</i>
<i>THURSDAY</i>	<i>APRIL 18, 2019</i>
<i>THURSDAY</i>	<i>JUNE 20, 2019</i>
<i>THURSDAY</i>	<i>AUGUST 15, 2019</i>
<i>THURSDAY</i>	<i>OCTOBER 17, 2019</i>
<i>THURSDAY</i>	<i>DECEMBER 12, 2019</i>

***TTC meeting dates are not standing and only held when necessary.**

Date: 1/2/19

To: pattee.yetmar@iowa.gov

At the organizational meeting of the **Story County Board of Supervisors**, which was held on 1/2/19, Lauris Olson was appointed to serve on the Board of Directors, pursuant to Chapter 905 of the Code of Iowa.

The preferred **business** information for this delegate to the Board of Directors, **to be listed to the public**, is as follows:

Business Address:	<u>900-6th St</u> <u>Nevada, IA 50201</u>	Business Phone:	<u>515-382-7202</u>
		Business Email:	<u>lolson@storycountyiowa.gov</u>

The preferred **contact** information for this delegate to the Board of Directors, **to receive Board specific communication**, is as follows (this information will be kept on a separate and confidential list):

Contact Address:	<u>900-6th St</u> <u>Nevada, IA 50201</u>	Contact Cell Phone:	<u>515/451-7293</u>
		Contact Email:	<u>lolson@storycountyiowa.gov</u>

Rick Sanders was appointed to serve as alternate delegate.

The preferred **contact** information for the alternate to the Board of Directors, **to receive Board specific communication**, is as follows (this information will be kept on a separate and confidential list):

Contact Address:	<u>900-6th St</u> <u>Nevada, IA 50201</u>	Contact Cell Phone:	<u>515/708-0158</u>
		Contact Email:	<u>rsanders@storycountyiowa.gov</u>

Our official Board meetings are held on the following dates and times:

Tuesdays @ 10 AM

Chairperson,



Story County Board of Supervisors

Table 1: Record of Supervisors' 2018 Boards, Commissions and Committees Involvement and SUGGESTED 2019 Assignments

Officially Representing County <i>BOS appointment required</i>	Board name & research notes * = BOS appointed in 2018	Story County Attorney's 12.28.18 notation	Meeting information & frequency	2018 Primary Representatives	Suggested 2019 Primary & (Alternate)
State-mandated & 28E					
	Ames Mini-Assessors Board *	IA Code 441.2	1-2 times/year	Rick Sanders (Olson)	
	Ames Area Metropolitan Planning Organization Policy *	28E	4-5 times/year	Lauris Olson (Sanders)	
	Ames Area Metropolitan Planning Organization: Technical *	28E	4-5 times/year	Darren Moon (Tyler Sparks)	
APPROVED					
DEMED					
Card Member Initials: <i>[Signature]</i>					
Meeting Date: <i>10-19</i>	Central Iowa Regional Transportation Planning Alliance (CIRTPA) Policy *	28E	Every Other Month	Lauris Olson (Sanders)	
<i>no motion</i>	Central Iowa Regional Transportation Planning Alliance (CIRTPA) Technical *	28E	As Needed	Darren Moon (Tyler Sparks)	
	Central Iowa Regional 11 Workforce Development CEO Board (CIWDB) * <i>(Regional organization may occur.)</i>	28E	Quarterly	Rick Sanders (Olson)	
	Central Iowa Regional Housing Authority Executive Board (CIRHA) * <i>(Annual meeting in Spring. There all present appointees from Story County [county & cities] will vote to select the Executive Board member for Story County.)</i>	28E	1-3 per year as long as alternate. Board meets monthly.	Lauris Olson, representing Story County. Ames must appoint Vanessa separately.	
	Central Iowa Community Services *	IA Code 331.389	Monthly	Linda Murken (Olson)	
	Central Iowa Juvenile Detention *	28E	Quarterly	Linda Murken (Sanders)	
	DeCategorization Board *	IA Code 232.188	Monthly	Linda Murken (Sanders)	
	E-911 Service Board (Story County) *	28E	Quarterly	Paul Fitzgerald (Lauris Olson)	

Table 1: Record of Supervisors' 2018 Boards, Commissions and Committees Involvement and SUGGESTED 2019 Assignments

	Emergency Management Commission *	IA Code 29.c(9)	Monthly		Rick Sanders (Olson)
	Four Mile Creek Watershed Authority *	28E	Quarterly		Leanne Harter (Murken)
	Heart of Iowa Regional Transit *	28E	Monthly		Lauris Olson (Murken)
	Second Judicial District, Dept. of Corrections Services *	IA Code 905.3	Quarterly		Lauris Olson (Sanders)
	Squaw Creek Watershed Authority *	28E	Quarterly		Linda Murken (Sanders)
	South Skunk Watershed Authority	28E	Quarterly		Linda Murken (Sanders)
	Story County Assessor Mini-Board *	IA Code 441.2	1-2 times/year		Linda Murken (Olson)
	State created - Voluntary				
	Aging Resources of Central Iowa * (State-created regions, recommendation is supervisor from each county, but not required)	Voluntary	Monthly		Lauris Olson (Murken)
	Cherokee Mental Health Institute Advisory Council *	Voluntary	Never attended		n/a
	Other County - Voluntary				
	Safety Committee (Internal required) *	Voluntary	Monthly		Linda Murken
	Wellness Committee (Internal required) *	Voluntary ISAC-led initiative			Linda Murken
	Conservation Board (Ex-officio) *	IA Code 350.2	Monthly		Rick Sanders (Murken)
	Story County Board of Health * (Code does not require one member to be a Supervisor. Reconfiguration proposal will be on Jan. 2 agenda.)	IA Code 137.4	Every Other Month		Lauris Olson (Murken)
	Contracted services (seat in lieu of paid membership)				

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	Ames Economic Development Corp. *	Voluntary	Twice monthly (Exec Committee once, full board once)		Lauris Olson (Murken)
Our request for board seat as major funder					
	Story County Housing Trust Fund * (LO is communicating with SCHTF chair about appointment conditions.)		Monthly		To be determined at a later date
Other County – Voluntary NO BOS appointment required.					
	Local Emergency Planning Commission (Open to more than one Supervisor serving at the same time. Membership nomination via Em. Mgmt. Director, approval by Iowa Emergency Mgmt office.)	Quarterly			Lauris Olson
Not Officially Representing Story County NO BOS appointment required					
Open to all interested					
	Story County Economic Development Commission (All three Supervisors may attend in ex-officio roles; Story County has no membership seat per bylaws.)	Voluntary	Quarterly		any
	Story County Hunger Collaboration	Voluntary	Monthly		any
	Story County Juvenile Justice Committee	Voluntary	Monthly Sept. through May		any
	Story County Opioid Task Force	Voluntary	Monthly		any

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	<i>(Also attended by personnel from Story County Attorney and Sheriff's offices, and Community Services, Veterans Affairs departments and BOS staff)</i>					
	<i>Transportation Collaboration (Also attended by personnel from Community Services/ BOS staff)</i>	Voluntary	Quarterly			any
	<i>Two Rivers Housing Coordination (policy & outreach group) (Also attended by personnel from Community Services.)</i>	Voluntary	Monthly			any
By Invitation (BOS member not specifically included in organization's bylaws)						
	Boys & Girls Club of Story County *					n/a
	Community & Family Resources * <i>(Prefers a supervisor from each of 8 counties served to be on the board.)</i>	Voluntary	Monthly			Lauris Olson
	Boone/Story County Early Childhood Iowa Area Board –Boost * <i>(One board member must be an elected official. Director prefers it to be a Supervisor from Story County since county is the fiscal agent.)</i>	Voluntary	Monthly			Linda Murken
	Mid-Iowa Community Action * <i>(Requires an elected official on board, not specific to county Supervisor)</i>	Voluntary	Monthly			Rick Sanders
	Prairie Rivers of Iowa * <i>(PRI director prefers to have Story County Supervisor on board since the county is often a partner in grant applications and project work, even if project not funded by county. Note that Conservation Director Mike Cox also serves on this board by invitation, not county appointment.)</i>	Voluntary	Monthly			Linda Murken

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Outside third-party appointments (Not serving as official county representative)	Judicial Magistrate Appointment Commission					Rick Sanders
	State of Iowa Mental Health and Developmental Disabilities Board					Rick Sanders
	Iowa Association of Counties : 2 nd VP for Supervisors affiliate Policy Committee, Chair Continuing Education, Chair					Rick Sanders
	Natl. Association of Counties: Member of Intl. Economic Dev. Task Force					Rick Sanders

Board appointment recommended or required:

Linda Murken	Lauris Olson	Rick Sanders
Central Iowa Community Services *	Ames Ec. Development Comm. *	Emergency Management *
Monthly	Twice Monthly	Monthly
DeCategorization (Unreserved DHS \$) *	HIRTA *	Conservation (ex-officio) *
Monthly	Monthly	Monthly
Boost (Early Childhood 0 - 5) *	Aging Resources of Central Iowa *	Central Iowa Region 11 Workforce Development CEO Board (CIWDB) * Quarterly
Monthly	Monthly	
Wellness Committee *	Board of Health **	
Monthly	Every Other Month	
Safety Committee *	Central Iowa Regional Transportation Planning Alliance (CIRTPA) Policy *	
Monthly	Every Other Month	
Prairie Rivers of Iowa *	Second Judicial District: Corrections *	
Monthly	Quarterly	
Squaw Creek Watershed Authority *	E-911 Board (alternate to Sheriff) *	
Quarterly	Quarterly	
South Skunk Watershed Authority*		
Quarterly		
Central Iowa Juvenile Detention *	Ames Area Metropolitan Planning Organization Policy *	
Quarterly	4-5 per yr.	
Story County Assessor Mini-Board *	Central Iowa Regional Housing Authority Executive Board (CIRHA) *	Ames Mini-Assessors Board *
1-2 Annual	1-3 per yr.	1-2 Annual

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* Assigned In 2018

** Voting Member, Ex-Officio or No Position to be decided Jan. 2, 2019.

Bolded are state mandated & 28E board seats

Table 2: Voluntary service at individual Supervisor’s discretion

Linda Murken	Lauris Olson	Rick Sanders
	Community & Family Resources * Monthly	Mid-Iowa Community Action* Monthly
Story County Economic Development Commission Quarterly	Story County Economic Development Commission Quarterly	Story County Economic Development Commission Quarterly
	Story County Hunger Collaboration Monthly	Judicial Magistrate Appointment Commission Irregular schedule
	Transportation Collaboration Quarterly	State of Iowa Mental Health and Developmental Disabilities Board Monthly
	Story County Juvenile Justice Committee 9 months of the year	Iowa Association of Counties : 2 nd VP for Supervisors affiliate Policy Committee, Chair Continuing Education, Chair Irregular Schedule
	Story County Opioid Task Force Monthly	Natl. Association of Counties: Member of Intl. Economic Dev. Task Force Irregular Schedule
	Two Rivers Housing Coordination (policy & outreach group) Monthly	

Board appointments recommended to be dropped:

- Cherokee Mental Health Institute Advisory Council *
- Boys & Girls Club of Story County *