MINUTES OF A REGULAR MEETING OF THE BOARD OF DIRECTORS MONTGOMERY COUNTY HOSPITAL DISTRICT

The regular meeting of the Board of Directors of Montgomery County Hospital District was duly convened at 4:00 p.m., October 25, 2016, 2016 in the Administrative offices of the Montgomery County Hospital District, 1400 South Loop 336 West, Conroe, Montgomery County, Texas.

1. Call to Order

Meeting called to order at 4:13 p.m.

2. Invocation

Led by Mr. Grice

3. Pledge of Allegiance

Led by Mrs. Wagner

4. Roll Call

Present:

Bob Bagley Chris Grice Mark Cole Harold Posey Sandy Wagner Kenn Fawn Georgette Whatley

5. Public Comment

Sandi Raimer – made a public comment to the board concerning the conduct of Stephani Ochoa and Melissa Miller.

6. Special Recognition –

Non-Field - Kimberly Brown

Field -Lori Fikac, and Kyle Sleezer

7. Consider and act on ratification of contracts with additional network providers for indigent care. (Mrs. Wagner, Chair - Indigent Care Committee)

Mrs. Wagner made a motion to consider and act on ratification of contracts with additional network providers for indigent care. Mr. Fawn offered a second and motion passed unanimously.

8. CEO Report to include update on District operations, strategic plan, capital purchases, employee issues and benefits, transition plans and other healthcare matters, grants and any other related district matters.

Mr. Randy Johnson, CEO presented a report to the board.

9. Presentation of Quarterly Employee Turnover Report. (Ms. Whatley, Chair – Personnel Committee) (attached)

Mr. Randy Johnson, CEO made a presentation to the board.

10. Presentation of Focal Date Evaluations for FY 2016-2017. (Ms. Whatley, Chair – Personnel Committee)

Mr. Brett Allen, CFO made a presentation to the board.

11. Consider and act on the November and December, 2016 MCHD Regular Board of Directors meeting dates and times. (Mr. Posey, Chairman – MCHD Board) (attached)

Mr. Posey made a motion for the November Special board meeting to canvass the 2016 vote be held November 21st at 10:00 a.m.. Ms. Whatley offered a second and motion passed unanimously.

Mr. Posey made a motion for the November Regular board meeting to be set for November 15th. Mrs. Wagner offered a second and motion passed unanimously.

Mr. Posey made a motion for December Regular board meeting to be set for December 20th. Ms. Whatley offered a second and motion passed unanimously.

12. EMS Director Report to include updates on EMS staffing, performance measures, staff activities, patient concerns, transport destinations and fleet.

Mr. Jared Cosper, EMS Director presented a report to the board.

13. COO Report to include updates on infrastructure, facilities, radio system, warehousing, staff activities, community paramedicine, emergency management, and purchasing.

Mrs. Melissa Miller, COO presented a report to the board.

14. Consider and act on Sole Source Letter for Stryker Powerload Pro Cot, Powerload System and Stair Pro for Medic Unit No. 47. (Mr. Bagley, Chair – PADCOM Committee) (attached)

Mr. Bagley made a motion to consider and act on Sole Source Letter for Stryker Powerload Pro Cot, Powerload System and Stair Pro for Medic Unit No. 47. Mr. Cole offered a second and motion passed unanimously.

15. Consider and act on Stryker Powerload Pro Cot, Powerload System and Stair Pro for Medic Unit No. 47. (Mr. Bagley, Chair – PADCOM Committee) (attached)

Mr. Bagley made a motion to consider and act on Stryker Powerload Pro Cot, Powerload System and Stair Pro for Medic Unit No. 47. Mr. Grice offered a second and motion passed unanimously.

16. Consider and act on sole source letter for Zoll X-Series Monitor. (Mr. Bagley, Chair – PADCOM Committee) (attached)

Mr. Bagley made a motion to consider and act on sole source letter for Zoll X-Series Monitor. Mr. Cole offered a second and motion passed unanimously.

17. Consider and act on one Zoll X-Series Monitor. (Mr. Bagley, Chair – PADCOM Committee) (attached)

Mr. Bagley made a motion to consider and act on one Zoll X-Series Monitor. Ms. Whatley offered a second and motion passed unanimously.

18. Consider and act on payment of Electrical Bill for Station 41. (Mr. Bagley, Chair – PADOM Committee) (attached)

Mr. Bagley made a motion to consider and act on payment of Electrical Bill for Station 41. Ms. Whatley offered a second and motion passed unanimously.

19. Health Care Services Report to include regulatory update, outreach, eligibility, service, utilization, community education, clinical services, epidemiology, and emergency preparedness.

Mrs. Melissa Miller, COO presented a report to the board.

20. Consider and act on Healthcare Assistance Program claims from Non-Medicaid 1115 Waiver providers processed by Boon-Chapman. (Mrs. Wagner, Chair - Indigent Care Committee)

Mrs. Wagner made a motion to consider and act on Healthcare Assistance Program claims from Non-Medicaid 1115 Waiver providers processed by Boon-Chapman. Mr. Fawn offered a second and motion passed unanimously.

21. Consider and act on ratification of voluntary contributions to the Medicaid 1115 Waiver program of Healthcare Assistance Program claims processed by Boon Chapman. (Mrs. Wagner, Chair – Indigent Care Committee)

Mrs. Wagner made a motion to consider and act on ratification of voluntary contributions to the Medicaid 1115 Waiver program of Healthcare Assistance Program claims processed by Boon Chapman. Mr. Fawn offered a second and motion passed unanimously.

22. Presentation of preliminary Financial Report for twelve months ended September 30, 2016 – Brett Allen, CFO, report to include Financial Summary, Financial Statements, Supplemental EMS Billing Information, and Supplemental Schedules.

Mr. Brett Allen, CFO presented financial report to the board.

23. Presentation of Investment Report for the quarter ended September 30, 2016. (attached)

Mr. Brett Allen, CFO presented financial report to the board.

24. Consider and act upon recommendation for amendment(s) to the budget for fiscal year ending September 30, 2016. (Mr. Grice, Treasurer - MCHD Board) (attached)

Mr. Grice made a motion to consider and act upon recommendation for amendment(s) to the budget for fiscal year ending September 30, 2016. Mrs. Wagner offered a second and motion passed unanimously.

25. Consider and act upon recommendation for amendment(s) to the budget for fiscal year ending September 30, 2017. (Mr. Grice, Treasurer - MCHD Board) (attached)

Mr. Grice made a motion to consider and act upon recommendation for amendment(s) to the budget for fiscal year ending September 30, 2017. Mr. Bagley offered a second and motion passed unanimously.

26. Consider and act on ratification of payment of District invoices. (Mr. Grice, Treasurer - MCHD Board)

Mr. Grice made a motion to consider and act on ratification of payment of District invoices. Mr. Bagley offered a second and motion passed unanimously.

27. Consider and act on salvage and surplus. (Mr. Grice, Treasurer – MCHD Board) (attached)

Mr. Grice made a motion to consider and act on salvage and surplus. Mr. Bagley offered a second and motion passed unanimously.

28. Secretary's Report - Consider and act on minutes for the September 27, 2016 Regular BOD meeting. (Mrs. Wagner, Secretary - MCHD Board)

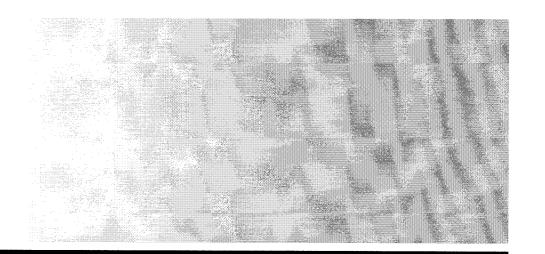
Mrs. Wagner made a motion to consider and act on minutes for the September 27, 2016 Regular BOD Meeting. Mr. Fawn offered a second and motion passed unanimously.

29. Adjourn

Meeting adjourned at 5:19 p.m.

Sandy Wagner, Secretary



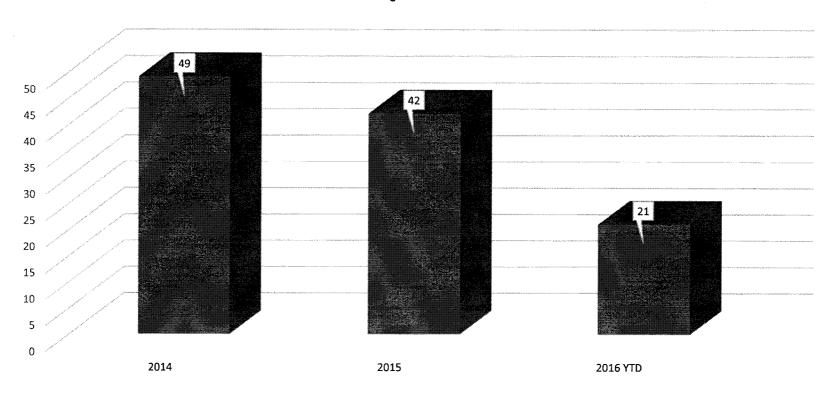


MCHD Turnover

Jodi Andersen Human Resources Manager October 2016

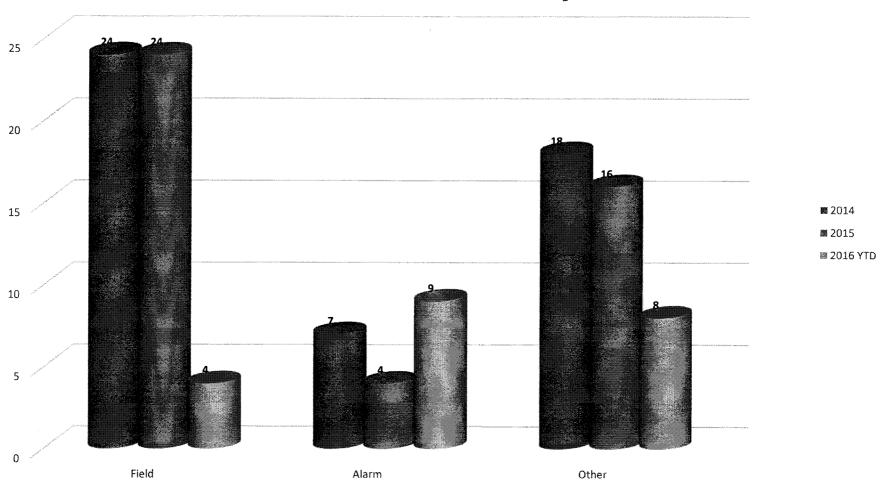


Terminations per Calendar Year





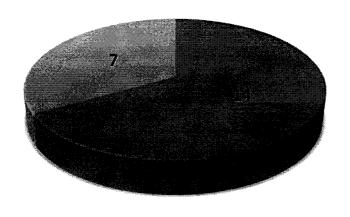
Number of Terminations by Calendar Year





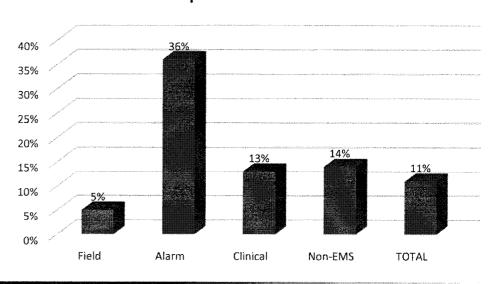
2016 YTD Overview

MCHD 2016 Voluntary vs Involuntary Terminations YTD



■ Voluntary
■ Involuntary

ANNUAL EMPLOYEE TURNOVER RATES September 2016



Agenda Item # 10



To: Board of Directors

From: Brett Allen

Date: October 25, 2016

Re: Focal Date Evaluations

Presentation of Focal Date Evaluations for FY 2016-2017. (Ms. Whatley, Chair – Personnel Committee)



Focal Date Performance Reviews



What does focal date mean?

 All performance reviews occur at one set time rather than on "anniversary" dates.



Why change?

- Advantages
 - > Everyone's performance is reviewed at the same time
 - > More fair and consistent evaluations of performance
 - > More fair and consistent compensation adjustments
 - More timely

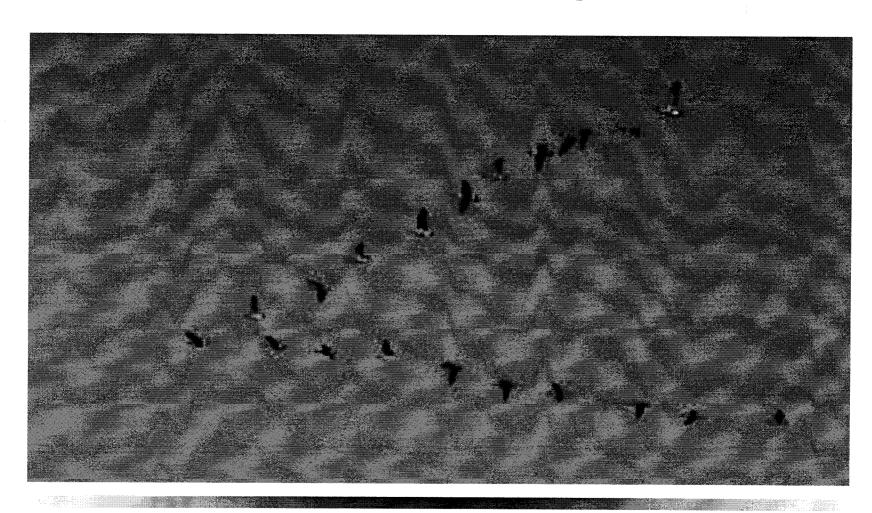


Why change?

- More Advantages
 - > Easier to conduct manager training of review process
 - Changes to evaluation criteria rolled out to everyone at same time
 - > Step toward true merit increases
 - > And...



Goals can be aligned.





Why change?

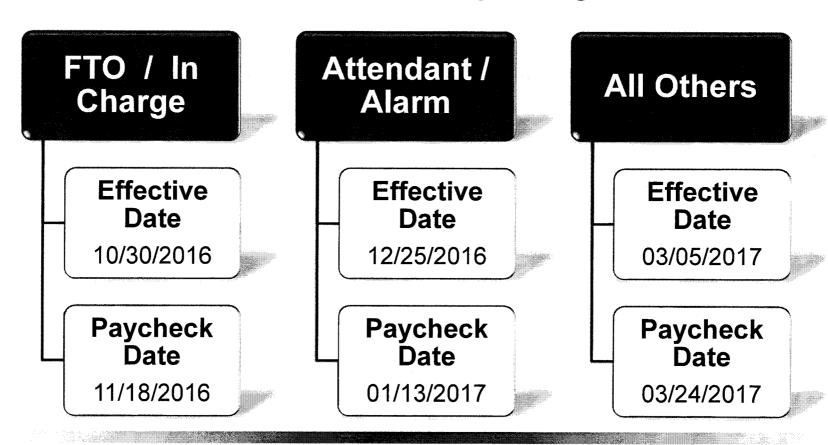
Disadvantages

- New employees and those new to a role will have less than one year of performance to be evaluated.
- Managers will need to dedicate significant time to the process.



When?

We plan three focal dates beginning in FY 2017:





How does this affect me financially?

Let's look at an example...

	Summary of Calcu	lation	
	08/07/16	08/07/16	
	to 08/06/17	to 08/06/17	
		Traditional	
	New Focal Date	Anniversary Date	
Year	Calculation	Calculation	Difference
Year 1	\$67,155.83	\$66,800.00	\$355.83
Year 2	\$68,814.92	\$68,804.00	\$10.92
Year 3	\$70,879.45	\$70,868.12	\$11.33

			10.00			Calculati	on Details					
Current Hourly Rate	\$20,0000											
alary Capped?	N											
Merit Increase %	3.0000%											
chedule	56	Average Hours /	Week									
oday	10/24/16											
ate of Last Increase	08/07/16	**		last increase prior								
ocal Date	10/30/16			or merit increases.								
of Pay Periods Early otal Pay Periods	26	-		between the Date	e of Last Increase	and the Focal Da	te.					
nairay reilogs		There are 26 Pay	rerious each ye	ar.								
		Transiti	on: Traditional,	Anniversary Date	to Focal Date				No Chan	ge: Continue with	Traditional Ann	iversary Date
								08/07/16				08/07/16
	08/07/16					10/30/16		to 08/06/17		08/07/16		to 08/06/17
	52,5.720		Α	В	AxB	10/30/10		08/00/17		08/07/18		08/08/17
	Beginning	Beginning			Adjusted	New	New		l l			
	Hourly	Annualized	Merit	Pro Rata	Merit	Hourly	Annualized	Actual	İ	Hourly	Merit	Actual
Year	Rate	Earnings	Increase	Multiplier	Increase	Rate	Earnings	Earnings	Year	Rate	Increase	Earnings
ocal Date - Year 1 [A]	\$20.0000	\$66,800.00	3.0000%	0.230769	0.50000/	400 4005	******	400 100 00				
/cui Date Teui I	\$20.0000	\$60,600.00	3.0000%	0.230769	0.6923%	\$20.1385	\$67,262.59	\$67,155.83	Year 1	\$20.0000	3.0000%	\$66,800.00
		\$67,262.59	3.0000%	1.000000	3.0000%	\$20.7427	\$69,280.62	\$68,814.92	Year 2	\$20.6000	3.0000%	\$68,804.00
ocal Date - Year 2 ^(B)	\$20,1385		0.0000,0			•	\$71,359.10			\$20.3000		
ocal Date - Year 2 ⁽⁸⁾	\$20.1385 \$20.7427	\$69,280.62	3.0000%	1.000000	3.0000%	\$21.3650		\$70,879.45	Year 3		3.0000%	\$70,868.12

	Tran	sition to Focal Da	ite	Traditional Ann	iversary Date	Difference
	08/07/16 Rate	10/30/16 New Rate	08/07/16 to 08/06/17 Earnings	08/07/16 to 08/06/17 Earnings	Difference	Difference
Hourly Rate	\$20.0000	\$20.1385		\$20,0000		\$0.138
Annual Hours	3,340	3,340		3,340		3,340
Annual Earnings	\$66,800.00	\$67,262.59		\$66,800.00		\$462.5
Number of Pay Periods	6	20		26		20
Pay Periods per Year	26	26		26		26
Pro Rata Annual Earnings	\$15,415.38	\$51,740.45	\$67,155.83	\$66,800.00	\$355.83	\$355.8

		A	November 2016			
Sun	Mon	Tue 1	Wed 2	Thu 3	Fri 4	Sat 5
6 Daylight Saving Time Ends	7	8 Election Day	9	10	11 Veterans' Day MCHD Offices Glosed	12
13	14	15 Recommendation for November Regular BOD Meeting 4:00 p.m.	16	17	18	
20	Recommendation for Special Meeting — Canvass Votes— Maybe a morning meeting 10:00 a.m.	22	23	24 Thanksgiving MCHD Offices Closed	MCHD Offices Closed	26
27	28	29	30	Notes:		

		The second secon	December 20	16		Toward State
Sun	Mon	Tue	Wed	Thu 1	Fri 2	Sat 3
isto	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20 Recommendation December Regular BOD Meeting 4:00 p.m.	21	22 MCHD Offices Closed	23 MCHD Offices Closed	24
25 Christmas	26 MCHD Offices Closed	27	28	29	30 MCHD Offices Closed	31

Sam Bossley
Associate Marketing Manager – EMS

3800 E. Centre Ave. Portage, MI 49002 t: 269 389 6628 sam.bossley@stryker.com



Medical

Date: October 19, 2016

Re: Power-PRO XT Ambulance Cot Sole Source Information

To Whom It May Concern,

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-PRO XT (Model 6506). This correspondence is to inform you of the unique characteristics of the Power-PRO XT Ambulance Cot. These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use and Maintenance.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-PRO conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance.

Ease of Use and Maintenance

- The cot has a weight capacity of 700lbs.
- When unloading with the manual release handle, the cot utilizes hydraulic dampening. Thus, the cot will not abruptly jar the operator or the patient.
- The battery is placed at the foot-end of the stretcher.
- The cot legs power-retract in 2.4 seconds which speeds load times.
- The cot provides the highest possible load height of any cot on the market at 36" and is operator adjustable to match the deck height of individual ambulances.
- The foot-end of the cot provides lifting bars and operator controls at two different heights, thus providing optimum ergonomics to most operator heights.
- The foot-end of the cot contains a large battery indicator light which displays amber or green which indicates battery level. A warning is given by a flashing amber light, providing the operator the time to change the battery before full depletion of power.
- The Model 6506 has 6" x 2" sealed bearing casters the largest in the industry.
- The cot features a foot-end-mounted hourly usage meter. This is an easy tool to determine the timing of preventative maintenance checks.

¹ Only conforms when used with Power-LOAD (model 6390).

- The cot features powder-coating of the entire aluminum frame (including the patient handling surfaces), thus eliminating aluminum oxidation throughout the cot.
- All caster bearings are sealed, eliminating timely and costly lubrication.
- The cot is power-washable.

Please forward any further questions to your Stryker sales representative.

Sincerely,

Sam Bossley



EMS Equipment

Remit To: 1901 Romence Road Parkway Portage, MI 49092

Purchase Order #

Billing Address

Diane Sandel MCHD-EMS 1300 S. Loop 336 West Conroe, Texas 77304 936-521-5622 dsandel@mchd-tx.org Shipping Address

Diane Sandel MCHD-EMS 1300 S. Loop 336 West Conroe, Texas 77304 936-521-5622 dsandel@mchd-tx.org Quote Info

Date: 10/4/16 Quote #: 01205 Terms: Net 30

Contact: Gary Montana Phone: 817-846-0415 Fax: 866-384-4353

Email: gary.montana@stryker.com

	WE T	nce Cot	GOLDHARD RESTANDARD REPORTED THE SECOND RESTAURANCE OF THE SECOND REST		\$35,779.88
Oto	uici	Part #	Description	Unit	Extended
E.U.A	2	6506	Power-PRO XT	\$13,494.74	\$26,989.48
	1827.49	6506-040-00 0	XPS Side Rall	\$1,697.40	\$3,394.80
1116	2	6500-310-00 0	2 Stage IV Pole (patient right)	\$229.60	\$459.20
	2	6500- 147- 00 0	Equipment Hook	\$44.28	\$88.56
	2	6506-1 27- 00 0	Power-LOAD Cot Compatibility	\$1,437.46	\$2,874.92
	2	6500-130-00 0	Pocketed Back Rest Pouch	\$218.94	\$437.88
178 98G/V	2	6500-128-00 0	Head End Storage Flat	\$117.26	\$234.52
	2	6506-038-00 0	Steer-Lock Table 1997	\$650.26	\$1,300.52

Power-LOAD Syste	ma 2000 a sa s		医多氯化铁 机		\$22,960.00
Qty Part #	Description			Unit	Extended
1 6390	Power-LOAD	Hang the Pi		\$22,960 .00	\$22,960.00

Stair-Pl	70			\$3,123.52
Qty	Part #	Description	Unit	Extended
	6252	Stair-PRO	\$3,058.16	\$3,058.16
1		Head Support	\$65.36	\$65.36

Sub-Total \$61,863.40

Grand Total \$61,863.40

Terms & Conditions

Terms and conditions: Cot, all cot accessories on original order, and aftermarket accessories FOB origin. Applicable sales tax will be applied at time of invoicing. Order subject to Stryker Corporation's approval. Credit cannot be allowed on return of special or modified items. All approved returns will be accepted only in Kalamazoo, Michigan. Proposal valid for 30 days from submittal.

Printed Name	Signature	Date
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269 Mill Road Chelmsford, Massachusetts 01824-4105 978-421-9655 (main) 978-421-0025 (fax) www.zoli.com

October 19th, 2016

Montgomery County Hospital District EMS Att: Diane Sandel 1300 South Loop 336 West Conroe, Texas 77304

Dear Diane Sandel,

We appreciate your selection of ZOLL® products for Montgomery County Hospital District EMS. This letter serves as confirmation that ZOLL® Medical Corporation at 269 Mill Road in Chelmsford, Massachusetts, is the sole manufacturer and source of X Series® Defibrillators for the EMS Market. ZOLL® or Steve Bagwell, Territory Manager, will not sell an X Series® Defibrillator to Montgomery County Hospital District EMS through any vendor or dealer.

Should you have any questions or require additional information please don't hesitate to contact me at (800) 348-9011 x 9674.

Sincerely,

Kinga Kardasinska, M.S.

Dulandavonaha Guillo

Contracts Specialist



TO: Montgomery County Hospital District

1300 South Loop 336 West Conroe, TX 77304

Attn: Diane Sandel

email: dsandel@mchd-tx.org

Tel: 🕟

ZOLL Medical Corporation

Worldwide HeadQuarters 269 Mill Rd Chelmsford, Massachusetts 01824-4105 (978) 421-9655 Main

(978) 421-9655 mair (800) 348-9011

(978) 421-0015 Customer Support

FEDERAL ID#: 04-2711626

QUOTATION 225945 V:1

DATE: September 13, 2016

TERMS: Net 30 Days

FOB:

Shipping Point

FREIGHT: Prepay and Add

м	MODEL NUMBER	DESCRIPTION	QTY.	UNIT PRICE	DISC PRICE	TOTAL PRICE
	601-2221411-01	X Series & Manual Monitor/Defibrillator \$14,995 with 4 trace tri-mode display monitor/ defibrillator/ printer, comes with Real CPR Help®, advisory algorithm, advanced communications package (Wi-Fi, Bluetooth, USB cellular modem capable) USB data transfer capable and large 6.5"(16.5cm) diagonal screen, full 12 ECG lead view with both dynamic and static 12-lead mode display.		\$38,270.00	\$31,381.40	\$31,381,40
		Accessories Included: Six (6) foot 3- Lead ECG cable MFC cable MFC CPR connector A/C power adapter/ battery charger A/C power cord One (1) roll printer paper 6.6 Ah LI-ion battery Carry case Declaration of Conformity Operator's Manual Quick Reference Guide				
		* One (1)-year EMS warranty Advanced Options: Real CPR Help Expension Pack \$ 995 CPR Dashboard quantitive depth and rate in real time, release indicator, interruption timer, perfusion performance indicator (PPI)		And the state of t		
		See - Thru CPR entifact filtering ZOLL Noninvasive Pacing Technology: \$2,550				

This quote is made subject to ZOLL's standard commercial terms and conditions (ZQLL T's + C's) which accompany this quote. Any purchase order (P.O.) issued in response to this quotation will be deemed to incorporate ZOLL T's + C's. Any modification of the ZOLL T's + C's must be set forth or referenced in the customer's P.O. No commercial terms or conditions shall apply to the sale of goods or services governed by this quote and the customer's P.O unless set forth in or referenced by either document.

- 1. DELIVERY WILL BE MADE 60-90 DAYS AFTER RECEIPT OF ACCEPTED PURCHASE ORDER.
- 2, PRICES QUOTED ARE VALID FOR 60 DAYS.
- 3. APPLICABLE TAX, SHIPPING & HANDLING WILL BE ADDED AT THE TIME OF INVOICING.
- 4. ALL PURCHASE ORDERS ARE SUBJECT TO CREDIT APPROVAL BEFORE ACCEPTABLE BY ZOLL.
- 5, FAX PURCHASE ORDER AND QUOTATION TO ZOLL CUSTOMER SUPPORT AT 978-421-0015 OR EMAIL TO ESALES@ZOLL.COM.
- 6. ALL DISCOUNTS OFF LIST PRICE ARE CONTINGENT UPON PAYMENT WITHIN AGREED UPON TERMS.
- 7. PLACE YOUR ACCESSORY ORDERS ONLINE BY VISITING www.zallwebstore.com.

Steven Bagwell EMS Territory Manager 800-242-9150, x9295



TO: Montgomery County Hospital District

1300 South Loop 336 West Conroe, TX 77304

Attn: Diane Sandel

dsandel@mchd-tx.org email:

Tel:

ZOLL Medical Corporation

Worldwide HeadQuarters

269 Mill Rd

Chelmsford, Massachusetts 01824-4105

(978) 421-9655 Main

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Shipping Point

FREIGHT: Prepay and Add

rem	MODEL NUMBER	DESCRIPTION	QTY.	UNIT PRICE	DISC PRICE	TOTAL PRICE
		Masimo Pulse Oximetry				. ***
-	٠.	SP02 \$1,795	· ·			
		Signal Extraction Technology (SET)				
		Rainbow SET				
		NIBP Welch Allyn Includes: \$3,495 • Smartcuff 10 foot Dual Lumen hose				
		SureBP Reusable Adult Medium Cuff		:		
		End Tidal Carbon Dioxide monitoring (ETCO2)				
		Oridion Microstream Technology: \$4,995	ľ			
		Order required Microstream tubing sets separately				
		Interpretative 12- Lead ECG: \$8,450				
		12-Lead one step ECG cable- includes 4- Lead				
		limb lead cable and removable precordial 6- Lead set			:	:
		Two Temperature monitoring channels with digital	***************************************	:		
	-	displays: \$ 995				
		Order Temperature probes separately				
?	8000-0330	SpO2 Rainbow Reusable Patient Cable: Connects	1	\$295.00	\$221.25	\$221.25
		to LNCS Single Use and Reusable Sensors (4 ft)			;	
	8000-0294	SpO2 LNCS Adult Reusable Sensor (1 each)	1	\$295.00	\$221.25	\$2 21. 2 5
	_		•			
	8000-0580-01	Six hour rechargeable Smart battery	2	\$495.00	\$405,90	\$811.80
	necessary and the second secon					•••••
		standard commercial terms and conditions (ZOLL T's + C's) which		L	<u> </u>	

accompany this quote. Any purchase order (P.O.) issued in response to this quotation will be deemed to incorporate ZOLL T's + C's. Any modification of the ZOLL T's + C's must be set forth or referenced in the customer's P.O. No commercial terms or conditions shall apply to the sale of goods or services governed by this quote and the customer's P.O unless set forth in or referenced by either document.

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Steven Bagwell **EMS Territory Manager** 800-242-9150, x9295



TO: Montgomery County Hospital District

1300 South Loop 336 West Conroe, TX 77304

Attn: Diane Sandel

email: dsandel@mchd-tx.org

Tel: .

ZOLL Medical Corporation

Worldwide HeadQuarters Chelmsford, Massachusetts 01824-4105

(978) 421-9655 Main

(978) 421-0015 Customer Support FEDERAL ID#: 04-2711626

(800) 348-9011

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M	MODEL NUMBER	DESCRIPTION	QTY.	UNIT PRICE	DISC PRICE	TOTAL PRICE
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- 2. PRICES QUOTED ARE VALID FOR 60 DAYS.
- 3. APPLICABLE TAX, SHIPPING & HANDLING WILL BE ADDED AT THE TIME OF INVOICING.
- 4. ALL PURCHASE ORDERS ARE SUBJECT TO CREDIT APPROVAL BEFORE ACCEPTABLE BY ZOLL.
- 5, FAX PURCHASE ORDER AND QUOTATION TO ZOLL CUSTOMER SUPPORT AT 978-421-0015 OR EMAIL TO ESALES@ZOLL.COM.
- 6. ALL DISCOUNTS OFF LIST PRICE ARE CONTINGENT UPON PAYMENT WITHIN AGREED UPON TERMS.
- 7. PLACE YOUR ACCESSORY ORDERS ONLINE BY VISITING www.zollwebstore.com.

Steven Bagwell **EMS Territory Manager** 800-242-9150, x9295

ZOLL QUOTATION GENERAL TERMS & CONDITIONS

1. ACCEPTANCE. This Quotation constitutes an ofter by ZOLL Medical Corporation to soli to the Customer the exponent (including a license to use certain software) fasted in this Objection and described in the specifications entire structure to or referred to in this Quotation therefore notions as Equipment). Any acceptance of such ofter is expressly limited to the terms of this Quotation including these General Terms and Conditions. Acceptance shall be so finited to this Quotation notwithdeading if any conficing winton or east representations made by ZOLL Medical Corporation or the properties of any purchase order, specification, or other document issued by the Customer. Any such document shall be writted ynapplicable to any east made pursuant to this Quotation, and shall not be binding in any way on ZOLL Medical Corporation.

Acceptance of this Quotation by the Customer shall create an agreement between ZCX1. Medical Corporation and the Customer (hereinafter referred to as the "Contract" the terms and conditions of which are expressly limited to the provisions of this Quotation including these Terms and Conditions. No waive cherge or modification of any of the provisions of this Quotation or the Contract shall be briding on ZOX1. Medical Corporation unless such weeker, change or modification (i) is, made in whiling (ii) expressly states that it is a waiver, change or modification of this Quotation or the Contract and (iii) is acceed by an authorized representative of ZOX1. Medical Corporation.

- DELIVERY AND RISK OF LOSS. Unless otherwise stated, all deliveries shall be F.O.S. ZOLL Medical Corporation's facility. Risk of loss or damage to the Equipment shall pass to the Customer upon delivery of the Equipment to the center.
- 3. TERMS OF PAYMENT. Unless otherwise stated in its Quotation payment by Customer is due thirty (30) days after the step date appearing on ZOLI. Medical Corporation invoice. Any amounts payable horaunder which remain empaid after the date shall be subject to a late charge equal to 1.5% per month from the due date until such amount is paid.
- 4. CREDIT APPROVAL. All shipments and deliveries shall all times be subject to the approval of crads by ZOLL Medical Corporation. ZOLL Medical Corporation may at any time decime to make any shipment or delivery except upon receipt of payment or security or upon terms regarding cradit or security satisfactory to ZOLL Medical Corporation.
- 5. TAXES & FEES. The pricing quoted in its Quoteston do not include sales use, exists, or other similar taxes or any cuses or customs charges, or any order processing fees. The Customer shall pay its addition for the prices quoted the amount of any present or fature sales, excise or other similar tax or customs ofky or charge applicable to the sale or use of the Equipment said horizonder (except any tax based on the rest income of ZCLL. Medical Corporation), and any under processing fees that ZCLL may spotly from time to time. In this thereof the Customer may provide ZCLL. Medical Corporation with a lox meantition certificate acceptable to the taxing authorities.
- Examplion certificats acceptable to the taring authorities.

 6. WARRANTY, (a) ZOLL Musical Corporation warrants to the Castioner that from the earlier of the date of installation or thaty (30) days inflor the date of supprient from ZOLL Medical Corporation's facility, the Equipment (other than accessories and electrodies) will be free from defects in misterial and warrantship under normal use and service for the period noted on the reverse side. Accessories and electrodies shall be warranted for minety (90) days from the date of superior or replace (et ZOLL Medical Corporation's soil option), and the continuer relation reper or replace (et ZOLL Medical Corporation's soil option), and part of the Equipment found by ZOLL Medical Corporation to be defective in material or workmanship. ZOLL Medical Corporation's suspection detects no objects in material or workmanship. ZOLL Medical Corporation's suspection detects no objects in material or workmanship. ZOLL Medical Corporation's sequer service charges shall apply, (b) ZOLL Medical Corporation shall not be responsible for any Equipment detects and perform any specified function, or any other necessor and appropriate accessory or software natispected by ZOLL Medical Corporation in the late of the Equipment accessory or software natispected by ZOLL Medical Corporation, or (s) any misses or belose of the Equipment (v) exposure of the Equipment (v) exposure of the Equipment of the properties of the Equipment (v) exposure of the Equipment of the properties of the Equipment (v) exposure of the Equipment (v) exposure of the Equipment of the properties of the Equipment (v) exposure of the Eq
- T. SOFTWARE LICENSE. (a) All software (the "Software" which term shall include furnivere) included as part of the Englament is licensed to Customer pursuant to a namericusive limited blockers on this series hereinstate as forth, (b) Customer any not copy, distribute, motify, translate or adapt the Software, and may not discussed the software or seek in any monater to discover, disclose or use any proprietary algorithms, techniques or of other confidential information contained therein, (c) All rights in the Software remain the product of ZOLL Medical Corporation, and Customer's that have no right or releast therein; except as expressly provided herein, (d) Customer's right to use the Software may be imminished by ZOLL Medical Corporation in the event of any failure to comply with misson of this question, (e) Customer may transfer the Icense conformed hereby only in connection with a transfer of the Englament and may not retain any copies of the Software following such transfer. (f) ZOLL Medical Corporation warrants that the read-only memory or other medic on which the Software for recorded will be free from defects in malerials and workmanship for the period and on terms set forth in section 5. (g) Customer understants that the Software is complex and sophistically software product shall no assurance can be given that operation of the Software will be uninterrupted or enro-free, or that the Software will be uninterrupted or enro-free, or that the Software will be uninterrupted or enro-free, or that the Software will be uninterrupted or enro-free, or that the Software is a complex and sophistically software product shall no assurance can be given that operation of the Software will be uninterrupted or enro-free, or that the Software will be uninterrupted or enro-free, or that the Software will be uninterrupted or enro-free, or that the Software will be uninterrupted or enro-free, or the Software will be uninterrupted or enro-free, or the Software will be uninterrupted or enro-free, or the Software will be uninte
- 8. DELAYS IN DELIVERY. ZOLL Medical Corporation shall not be liable for any detay in the delivery of any grant of the Epspenerit if such delay is due to any crease beyond the control of the ZOLL Medical Corporation including but not limited to acts of God fires, epidemics, floods, riots, wers, sebolage, labor depotes, governmental actions, installing to obtain materials, components, manufacturing fecilities or inseparation of any other cause beyond the control of ZOLL Medical Corporation. In addition ZOLL Medical Corporation in addition ZOLL desired any increases y information in a kinely manner. In the event of any such sidely, the data of such datay. In the event of such delay ZOLL Medical Corporation may allocate available Excignment among its Customers or any reasonable and equivative basis. The delivery datas is form in this Customers or any reasonable and equivative basis. The delivery datas is form in this Customers or any reasonable and equivative basis. The delivery datas is form in this Customers to breached by, any delivery by ZOLL Medical Corporation shall not be fielde for a stell the Confeccion to breached by, any delivery by ZOLL Medical Corporation within a reasonable line and excitate basis.

- 9. LIMITATIONS OF LIABILITY. IN NO EVENT SHALL ZOLL MEDICAL CORPORATION BE LIABLE FOR INDIRECT SPECIAL OR CONSEQUENTIAL DAMAGES RESULTING FROM ZOLL MEDICAL CORPORATIONS FERFORMANCE OR FAILURE TO PERFORM PURSUANT TO THIS QUOTATION OR THE CONTRACT OR THE FURNISHING, PERFORMANCE, OR USE OF ANY EQUIPMENT OR SCHIVARE SOLD HERETO, WIETHER DUE TO A BREACH OF CONTRACT, BREACH OF WARRANTY, THE NEGLIGENCE OF ZOLL MEDICAL CORPORATION OR OTHERWISE.
- 10. PATENT INDEMNITY, ZOLL Medical Corporation shell at its own expense defend any suit that may be instituted against the Customer for alloged intingerment of any United States patents or copyrights related to the parts of the Equipment or the Software manufactured by ZOLL Medical Corporation, provided that (i) such alleged infringement corelists only in the use of such Equipment or those by itself and not as a part of or in containation with any other devices or parts. (i) the Customer gives ZOLL Medical Corporation immediate notice in writing of any such suit and promits ZOLL Medical Corporation twoigh counsed of its choice, to asswer the change of infirmperment and defend such suf, and (iii) the Customer gives ZOLL Medical Corporation at requested information, assistance and authority at ZOLL Medical Corporation's repense, to ensist ZOLL Medical Corporation to defend such suit.

In the case of a linal eword of damages for intragement in any such suit. ZOLL Medical Corporation will pay such award, but it shall not be responsible for any authometimatic wilhout its written concent.

Section 10 states ZOLL Medical Corporation's total responsibility and liabilitys, and the Customer's sole remedy for any octual or allegad infringement of any patent by the Equipment or the Software or any part thereof provided networker. In no event shall ZOLL Medical Corporation be liable for any indirect, special, or consequential demages resulting from any such infringement.

- 11, CLAIMS FOR SHORTAGE, Each shipment of Equipment shall be promptly examined by the Customer upon receipt thoreof. The Customer shall inform ZOLL Medical Corporation of any shortage in any shipment within ten (10) days of receipt of Equipment if in a such shortage is reported within ten (10) day period, the shipment since he conclusively desented to have been complete.
- 12. RETURNS AND CANCELLATION. (a) The Contemp and obtain authorization from ZOLL Modical Corporation prior to returning any of the Equipment. (b) The Contemp receives authorization from ZOLL Medical Corporation to return a product for credit, the Contemps shall be subject to a restocking charge of leverity personal (20%) of the original list purchase price, but and less than \$50.00 per product (c) Any such change in delivery caused by the Contemp first causes a delivery data greater than \$6.00 months from the Contemp's original order data shall constitute a new order for the affected Equipment in determining the appropriate list price.
- 13. APPLICABLE LAW. This Quotation and the Contract shall be governed by the substantive laws of the Commonwealth of Massachusetts without regard to any choice of law provisions thereof.
- 14. COMPLIANCE WITH LAWS. (a) ZOLL Medical Corporation represents that all goods and services delivered pursuant to the Contract with he produced and supplied in compliance with all applicable state and federal laws and regulations, including the requirements of the Fair Labor Standards of 1938, as amended. (b) The Customer shall be responsible for compliance with any federal, state and local laws and regulations applicable to the installation or use of the Equipment furnished hereunder, and will obtain any permits required for such installation and use.
- 15. NON-WAIVER OF DEFAULT. In the event of any default by the Customer, ZOLL Medical Corporation may declare to make further stipments or render any further warranty or other services without in any way affecting its right under such order, if despite any default by Customer. ZOLL Medical Corporation elects to contieus to make shapments its action shall not constitute a wayer of any default by the Customer or in any way affect ZOLL Medical Corporations, legal remedies regarding any such default. No claim or right arising out of a breach of the Agreement by the Customer can be declarated in whole or in part by waver or remediation of the claim or right unless the waver or remediation is supported by consideration and is in writing signed by ZOLL Medical Corporation.
- 16. ASSIGNMENT. This Quotation, and the Contract, may not be assigned by the Customer without the prior written consent of ZOLI. Medical Corposation, and any assignment without such consent shall be not so only and prior to the consent shall be not so only and prior to the consent shall be not so only and the consent shall be not shall be not so only and the consent shall be not so only and the consent shall be not - 17. TITLE TO PRODUCTS. Tide to right of possession of the products sold horounder shall miniar with ZOLL Medical Corporation delivers the Equipment to the corner and agrees to do all acts necessary to perfect and maintain such right and life in ZOLL Medical Corporation. Feature of the Customer to pay the purchase price for any product when due shall give ZOLL Medical Corporation the right, without satisfy to repossess the Equipment, with or without notice, and to available of any remedy provided by law.
- 18. EQUAL EMPLOYMENT OPPORTUNITY / AFFIRMATIVE ACTION.

VETERAN'S EMPLOYMENT - If this order is subject to Executive Order 11710 and the rules, regulations, or orders of the Secretary of Labor Issued thereunder the contract clause as set forth at 41 CFR 60-250.4 is hereby included as part of this order.

EMPLOYMENT OF HANDICAPPED - if this order is subject to Section 503 of the Rehabilitation Act of 1973, as amended and line rates, regulations or orders of the Secretary of Labor as issued thereconder, the contract clause at 41 CPR 80-741, Fis hereby included as part of this order.

EQUAL OPPORTUNITY EMPLOYMENT - if this order is subject to the provisions of Executive Order 11246, as amended, and the nates, regulations or orders of the Secretary of Labor issued thereunder, the contract clause set total at 41 CFR 60-1.4 (a) and 60-1.4 (b) are heavily included as a part of this order and Seller agrees to comply with the reporting requirements at forth at 41 CFR 60-1.7 and the efficience program requirements set total as 41 CFR 60-1.40.

- 19. VALIDITY OF QUOTATION. This Quotation shall be valid and subject to acceptance by the Customer, in accordance with the terms of Section 1 hereof for the period set forth on the face hereof. After such period, the acceptance of this Quotation shall not be bridge upon ZOLL Medical Corporation, and shall not regate a contract, unless such acceptance is accessfully and acceptance by ZOLL Medical Corporation by a writing signed by an authorized representative of ZOLL Medical Corporation.
- 20. GENERAL. Any Contract resulting from this Contation shall be governed by and interpreted in accordance with the laws of the Commonwealth of Massachusetts. This constitutes the entire agreement between beyor and Supplier with respect to the purchase and sale of the Products decribed in the face hereof, sed only representations, or statements contained faceth shall be brinding upon Supplier as a warming or otherwise. Acceptance or exceptanced therein shall be brinding upon Supplier as a warming to otherwise. Acceptance or exceptanced the performance and opportunity for acceptance or purchased the performance and opportunity for adjection. No addition to a modification of any of the terms and conditions specified furors shall be brinding upon Supplier unless made in writing and signed by a duly sutherized representative of Supplier. The forms and conditions appointed that prevail notatinating any variance from the terms and conditions of any entire or other from submitted by Supplier for the Products set form on the face of this Agreement. To the octant that this writing may be treated as an acceptance of Buyer's prior ofter, such acceptance is expressly made conditions and one of the form submitted or submitted or submitted the submitted or submitted instation, acceptance of the goods by Buyer shall consistate such assemble to the latter before) and window the Buyer's prior ofter, such acceptance of the goods by Buyer shall consistate such assemble to the latter before) and window the Buyer's prior ofter.



7303 Windfern Rd., Suite 200 • Houston, Texas 77040 (832) 399-4000 Fax: (832) 399-4090

		·	·		. Statement		
			Invoice Date	77	31/16	Invoice No.	54638
		YTY HOSP DIST	7				
ģ. 435S	00 SOUTH LOD	336 WEST		Project MOIN	TGOMERY	COUNTY	HOSPITAL
411 Car	EN-COCHRAN IROE	TX 00007730	4	Address			
				Contract or P.O No. and Date			
L				Cust. 1: No.	3641	Our Job No.	1333
PER ATT	(ACHED			,			
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		GROSS AMOL		* * * * * * \$	29,28	36.01	
		SALES TAX.		* * * * * * * * * * * * * * * * * * *		.00	
					iideiiii ilmainin karin madalamaana		
		AMOUNT DUE THIS INVO	DICE				29,286.01

TERMS: NET 15 - INTEREST AND CARRYING CHARGES TO BE ADDED AFTER MATURITY.

Invoice No.	54638

INVOICE

Partners Electrical Services

7303 Windfern, Suite 200 Houston, Texas 77040-TECL#18678

United States Tel: 832-399-4000 Fax: 832-399-4000

Billing address:

Montgomery County Hospital District

Attn: James Cochran 1400 South Loop 336 West Conroe, Texas 77304 **United States**

Tel: 936-537-6154

Invoice date:

Aug. 06, 2016

JOB#

1333 46172

File#

Site address:

Customer Ref. # Page number:

Montgomery County Hospital District

1

Attn: James Cochran 1400 South Loop 336 West Conroe, Texas 77304 United States

Work Description

Station #41 Install dedicated circuit for fire alarm Install dedicated circuit for IT closet Install cut oof switch for range Install dedicated circuit for radio Shore line

Install exit/egress lighting Power to fire pump

PROGRESS BILLING

Item Description	Qty	U	Mat \$
1/2" EMT CONDUIT	160	С	48.00
3/4" EMT CONDUIT	120	С	75.70
1" EMT CONDUIT	10	С	10.98
3" EMT CONDUIT	10	С	41.74
1 1/4" EMT DC COMP CONN	2	С	7.64
1/2" EMT STL SS CONN	17	Ε	15.30
3/4" EMT STL SS CONN	4	С	8.49
1" EMT STL SS CONN	8	С	29.17
1/2" EMT STL COMP CONN	9	С	17.46
3/4" EMT STL COMP CONN	2	С	5.45
1 1/4" EMT STL COMP CONN	2	С	17.45
3" EMT STL COMP CONN	2	С	209.28
1/2" EMT STL SS CPLG	11	С	19.04
3/4" EMT STL SS CPLG	12	С	31.33
1/2" EMT STL COMP CPLG	2	С	4.67
3/4" EMT STL COMP CPLG	2	С	6.40
1/2" EMT 1-H STEEL STRAP	73	С	22.62
3/4" EMT 1-H STEEL STRAP	24	C	9.95
1" EMT STRUT CLAMP	4	С	8.06
1/2" SPRING STL CONDUIT CLAMP W/ BOLT	9	С	4.27
3" SPRING STL CONDUIT CLAMP W/ BOLT	2	С	3.43
2" WEATHER HEAD ENTR FTG	1	Ε	72.66
3" WEATHER HEAD ENTR FTG	1	Ε	72.66
2" GRC (GALV)	10	С	52.20
3" GRC (GALV)	10	C	128.68
1 1/4" GRC MYERS HUB	1	C	6.19
3" GRC MYERS HUB	3	C	72.20
1 1/4" GRC NO-THREAD CPLG	1	C	19.75
3" SEALING LOCKNUT		Ċ	46.95
1" PLASTIC BUSHING		Č	6.44
1 1/4" PLASTIC BUSHING	2	Č	1.58

Partners Electrical Services 7303 Windfern, Suite 200 Houston, Texas 77040-TECL#18678 United States

Invoice date:

Aug. 06, 2016

JOB#

1333

File #

46172

2 Page number:

Item Description	Qty	U	Mat \$
1 > 1/2" FEMALE REDUCER	4	С	18.50
3/4" LT FLEX	5	C	20.98
1/2" LT STRAIGHT CONN	2	C	8.11
3/4" STEEL FLEX	40	C	23.66
1" STEEL FLEX	10	C	11.63
1" STL FLEX CONN	1	C	6.36
3/4" STL 90 DEG FLEX CONN	2	C	13.74
1" STL 90 DEG FLEX CONN	1	C	11.90
#12 THHN	455	M	51.97
#10 THHN	385	M	67.27
#8 THHN	28	M	7.34
#6 THHN	5	M	2.00
#4 THHN	90	M	59.62
#3 THHN	94	M	69.49
#1/0 THHN	20	M	31.06
#600MCM_THHN		M	1,090.13
#12/2C MC CABLE AL ARMOR	610		309.63
#12/3C MC CABLE AL ARMOR	165		141.94
#10/3C MC CABLE AL ARMOR		M	65.26
#10/3C SOW CORD		M	176.15
RED ADHESIVE PLATE		E	74.52
3/8" AC-90/MC DC SS CONN		C	33.58
10/3 Kelllem grip		E	130.52
cord cap	2	E	65.00
#2 MECH LUG		C	5.93
RED WIRE NUT		С	59.34
POLYTWINE		M	1.72
ANTI-SHORTS		E	16.24
DEV BOX 2 3/4" DEEP COMB KO+EARS		Ō.	20.82
4x1 1/2" OCT BOX COMB KO		Č	11.17
4x2 1/8" SQ BOX COMB KO		Č	79.79
4" SQ BLANK COVER		Č	14.70
4" SQ 2xDUPLEX RECPT COVER		Č	2.93
4" SQ 1.594" DIAM REC COVER		Č	4.05
4 11/16x1 1/2" SQ BOX COMB KO		Č	12.89
4 11/16x2 1/8" SQ BOX 1" KO		C	27.26
4 11/16" SQ BLANK COVER		Č	1.76
SHEET ROCK CLAMPS		Č	6.13
270L BELL BOX W/ 3 1/2" HUBS	1	Ĕ	6.78
950 BELL BOX EXT RING		Ē	5.22
385-5L BELL BOX ROUND		Ē	10.82
20A 120-277V 3/W SW (SG)		Ē	18.80
20A 125V DUPLEX REC (SG)		Ē	28.20
20A 125V DUP REC DECOR (CS)		Ē	9.40
1G DECOR PLATE PLASTIC		C	1.97
20A 3WIRE 1PH TW-LOCK REC		Ë	39.04
1G S/S BLANK PLATE		Ċ	2.97
P-3300 7/8" STRUT		č	42.04
P-1000 1 5/8" STRUT	15		21.02
1/4" SPRING NUT	20		
1/4x1 3/4" WEDGE ANCHOR	45 ±		25,01 25,95
1/4-20x1" BOLT (PLATED)	45 P		
1/4-20 HEX NUT (PLATED)		C.	3.02
3/8-16 HEX NUT (PLATED)			0.23
1/4" FENDER WASHER		C.	0.57
#6 x 3/4" F/H SELF-TAP SCREW	51		2.64
1/4x3" LAG BOLT	138		4.82
IMAN LAG DOLT	28	V.	4.22

Partners Electrical Services

7303 Windfern, Suite 200 Houston, Texas 77040-TECL#18678

United States

Invoice date:

Aug. 06, 2016

JOB#

1333

File#

46172

3 Page number:

Item Description			U	Mat \$
TY-523M TY-RAP (4")		2	C	0.23
TY-526M TY-RAP (11")		20	C	5.01
BAR HANGER KIT		3	Ε	51.54
ZIPPITS		15	E	15.60
1-P/B STATION BOX NEMA 1		1	Е	164.92
60A 2P 600V CONTACTOR NEMA 1		2	E	1,904.40
120-1800W PHOTOCELL		2	E	40.72
20A 1P BREAKER BOLT-ON		2	Ē	39.34
20/20 breaker		2	Ē	39.34
400A 600V NON-FUS DSN SW NEMA 3R		1	E	1,421.94
300A 250V ONE TIME FUSE		2	E	165.60
3/4"x10' GALV GRD ROD		1	Ē	13.66
5/8"x10' CU CLAD GRD ROD		1	E	13.66
ACORN CLAMP		1	E E	4.49 97.30
1' x 4' SURFACE		2	E	97.30 277.04
EXIT-EMERGENCY COMB		4	E	10.76
F32T8/SP41 LAMP		4	C .	10.70
Total (T+C)				\$8,349.10
S				Total (\$)
Summary Subtotal Material			***************************************	8,349.10
In the state of th	(230.00 Hrs @ \$77.50)			17,825.00
Journeyman Apprentice	(36.50 Hrs @ \$41.50)			1,514.75
Apprentice	, ,			
Payment to Center Point	(1.00 @ \$1,577.80)			1,577.80
2x4x8 lumber	(2.00 @ \$6.83)			13.66 5.70
Great Stuff Foam	(1.00 @ \$5.70)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5.70
Total				\$29,286.01

AGENDA ITEM# 23

Presentation of Investment Report for the quarter ended September 30, 2016

Montgomery County Hospital District Investment Report Quarter Ended September 30, 2016

		Market										Market	Percentage	Yield
		Value									Total	Value	Qtr Ended	Fiscal Year
Investment	_	6/30/2016		Additions			Withdrawals		Interest	<u>Ir</u>	crease (Decrease)	9/30/2016	9/30/2016	To Date
Woodforest Special Liquidity Fund - Capital														
Replacement Sinking Fund (13300)	\$	3,716,698.75	\$		-	\$	-	\$	4,595.97	\$	4,595.97	3,721,294.72	0.4933%	0.3558%
Woodforest Special Liquidity Fund - HCAP														
Catastrophic Fund (13600)	\$	3,082,346.66	\$		_	\$	-	\$	3,811.55	\$	3,811.55	3,086,158,21	0.4933%	0.3558%
Woodforest Securities - Certificate of Deposits (13500 + 13501)	\$	8,505,999.76	\$		-	\$	(2,009,555.04)	\$	6,893.79	¢	(2,002,661.25) \$	6,503,338.51	0.1100%	0.1098%
2 Specific (1988) 1989 17	•	0,000,000.10	•			*	(2,000,000.04)	Ψ	0,000.10	Ψ	(2,002,001.20)	0,000,000.01	0.110076	0.100076
Texas Local Government Investment Pool	•	44 000 000 04	•			•	(4.000.000.00)		0.004.00		(4.700.005.00)			
(13100)	\$	11,636,302.81	Þ		-	Ъ	(1,800,000.00)	\$	9,994.68	\$	(1,790,005.32) \$	9,846,297.49	0.3820%	0.2870%
TexSTAR Local Government Investment														
Pool (13400)	\$	11,625,161.32	\$		-	\$	(2,300,000.00)	\$	10,590.64	\$	(2,289,409.36) \$	9,335,751.96	0.3991%	0.3058%
Total		38,566,509.30	\$			\$	(6,109,555.04)	\$	35,886.63	\$	(6.073,668.41) \$	32,492,840.89		
	-	25,523,000.00	<u> </u>			_	(5),55,000.04)	<u> </u>	00,000,00	Ť	(3,373,000.41)	52, 152,040.05		

This report and its attachments complies with the Investment Strategies and the Investment Policy of Montgomery County Hospital District, as well as Government Code Section 2256 ("Public Funds Investment Act") of the State of Texas.

Randy Johnson

Chief Executive Officer
Investment Officer, Montgomery County Hospital District

D. Brett Allen, CPA

Chief Financial Officer
Investment Officer, Montgomery County Hospital District

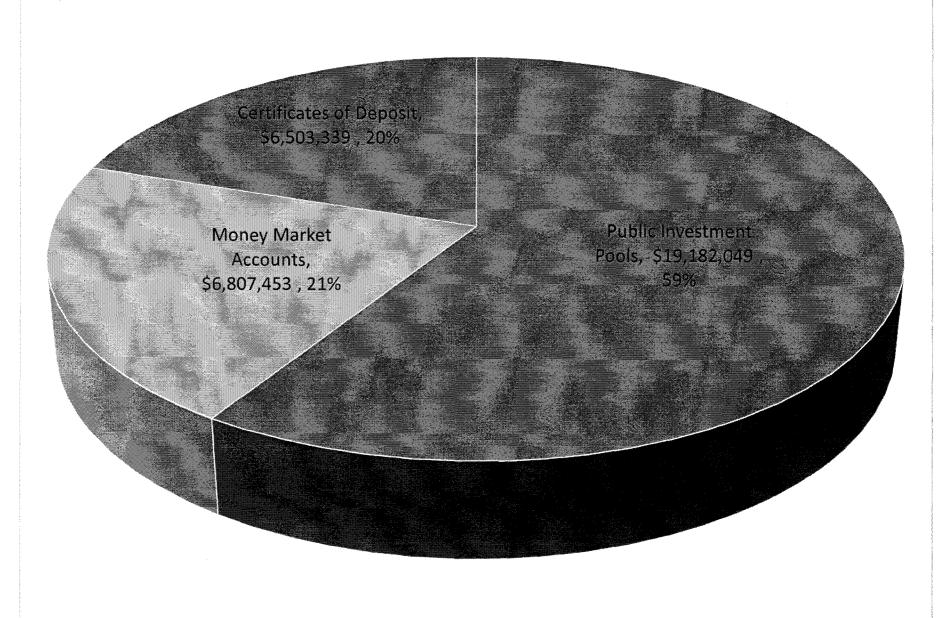
Chris Grice

Chris Grice, Treasurer, MCHD Board Investment Officer, Montgomery County Hospital District

Investment Report Quarter Ended September 30, 2016

					BOOK VALUE				MARKE	T VALUE		
Investment	Fnd	Maturity Date	Book Value Book Value 6/30/2016	Additions	Deletions	Interest	Book Value 9/30/2016	Market Value 6/30/2016	Net Book Activity	Market Value Change	Market Value 9/30/2016	Accrued Interest YTD
<u>General Fund</u> <u>Money Market Accounts</u> Woodforest Bank	01	N/A	\$ 3,716,698.7	5 \$ -	\$ -	\$ 4,595.97 \$	3,721,294.72	\$ 3,716,698.	75 \$ 4,595.97	's - s	3,721,294.72	\$ 13,116.02
Woodforest Special Liquidity	01	N/A	\$ 3,082,346.6		\$ -	\$ 3,811.55 \$	<u> </u>	\$ 3,082,346.		<u> </u>	3,086,158.21	\$ 10,921.70
Certificates of Deposit Woodforest Securities	_ ₀₁	Various	\$ 8,507,209.6	2 \$ -	\$ (2,010,670.04	\$ 6,893.79 \$	6,503,433.37	\$ 8,505,999.	76 \$ (2,003,776.25) \$ 1,115.00 \$	6,503,338.51	\$ 18,187.29
Public Investment Pools Texpool	- 01	N/A	\$ 11,636,302.8	<u>1</u> \$ -	\$ (1,800,000.00	9,994.68 \$	9,846,297.49	\$ 11,636,302.	<u>\$ (1,790,005.32</u>) \$ - \$	9,846,297.49	\$ 37,023.35
TexSTAR	01	N/A	\$ 11,625,161.3	2 \$ -	\$ (2,300,000.00) \$ 10,590.64 \$	9,335,751.96	\$ 11,625,161.	\$ (2,289,409.36) <u>\$ -</u> <u>\$</u>	9,335,751.96	\$ 39,432.90
Total General Fund			\$ 38,567,719.1	6 \$ -	\$ (6,110,670.04	\$ 35,886.63 \$	32,492,935.75	\$ 38,566,509.	<u>\$ (6,074,783.41</u>) \$ 1,115.00 \$	32,492,840.89	\$ 118,681.26
Grand Total			\$ 38,567,719.1	6 \$ -	\$ (6,110,670.04	s) \$ 35,886.63 \$	32,492,935.75	\$ 38,566,509.	80 \$ (6,074,783.41) \$ 1,115.00 \$	32,492,840.89	\$ 118,681.26

Market Value as of 09/30/2016



AGENDA ITEM: 24

CONSIDER AND ACT UPON RECOMMENDATIONS FOR AMENDMENTS TO BUDGET FOR FISCAL YEAR ENDING SEPTEMBER 30, 2016

BUDGET AMENDMENT - SEPTEMBER 30, 2016

THAT WHEREAS, therefore on September 1, 2015 the Board heard and approved the budget for the year 2015/2016 for the benefit of Montgomery County Hospital District; and

WHEREAS, to meet unusual and unforeseen conditions, which could not by reasonable and diligent thought and attention, have been included in the budget for 2015/16 adopted on September 1, 2015, or a line item transfer has been requested with no impact on the original budget, or a line item transfer has been requested with a positive impact on the original budget; and

WHEREAS, the Board by and through this budget amendment intends to reflect the funding provided and expenses incurred as a result of its operation and management of the Montgomery County Hospital District for the year 2015/2016 pursuant to its contractual responsibilities therefore.

NOW, THEREFORE, BE IT RESOLVED that upon motion of	MR.GZRE	, seconded
by LP3. Dague? and duly carried by the	e following vote: AYES:	NAYS: ,
the following amendment(s) to said budget is/are hereby author	rized:	

		Budget Amendment 5 - September	30, 2016		
	Account	Account	FY 2016 Annual	FY 2016 Amended	Increase / (Decrease) Net Revenue Over
Line	Number	Description	Budget	Budget	Expenses
1	10-001-51100	Regular Pay-Admin	674,312.00	647,007.34	(27,304.66)
2	10-001-51200	Overtime Pay-Admin	0.00	576.90	576.90
3	10-001-52300	Bank Charges-Admin	0.00	3,151.73	3,151.73
4	10-001-52950	Community Education-Admin	1,900.00	3,405.30	1,505.30
5	10-001-53150	Conferences - Fees, Travel, & Meals-Admin	2,973.00	18,095.20	15,122.20
6	10-001-53310	Contractual Obligations-County Appraisal-Admin	288,000.00	295,944.00	7,944.00
7	10-001-57100	Professional Fees-Admin	18,700.00	32,030.91	13,330.91
8	10-001-58600	Travel Expenses-Admin	0.00	309.82	309.82
9	10-002-51100	Regular Pay-PA	641,273.00	568,400.02	(72,872.98)
10	10-002-51300	Paid Time Off-PA	1,900.00	55,827.54	53,927.54
11	10-002-53350	Contractual Obligations-Conroe Regional Med. CtrPA	2,753,731.00	2,210,032.42	(543,698.58)
12	10-002-55700	Management Fees-PA	559,019.00	462,252.75	(96,766.25)
13	10-002-57 750	Small Equipment & Furniture-PA	0.00	67.38	67.38
14	10-002-57850	Specialty Healthcare Providers-PA	4,269,223.00	3,490,660.43	(778,562.57)
15	10-004-51100	Regular Pay-Radio	188,023.00	158,818.22	(29,204.78)
16	10-004-51300	Paid Time Off-Radio	5,000.00	26,793.35	21,793.35
17	10-004-51700	Health & Dental-Radio	53,094.00	54,679.34	1,585.34
18	10-004-52754	Capital Purchase - Equipment-Radio	1,237,555.88	665,380.12	(572,175.76)
19	10-004-53000	Computer Maintenance-Radio	37,500.00	1,289.00	(36,211.00)
20	10-004-53050	Computer Software-Radio	69,638.42	41,908.84	(27,729.58)
21	10-004-53150	Conferences - Fees, Travel, & Meals-Radio	33,649.00	13,702.29	(19,946.71)
22	10-004-55025	Interest Expense-Radio	23,595.00	23,596.72	1.72
23	10-004-55600	Maintenance & Repairs-Buildings-Radio	19,200.00	20,563.65	1,363.65
24	10-004-55650	Maintenance-Contract Equipment-Radio	346,687.92	284,675.49	(62,012.43)
25	10-004-57100	Professional Fees-Radio	379,474.70	184,206.26	(195,268.44)
26	10-004-57200	Radio Repairs - Outsourced (Depot)-Radio	39,994.00	15,444.98	(24,549.02)

AGENDA ITEM: 24 CONSIDER AND ACT UPON RECOMMENDATIONS FOR AMENDMENTS TO BUDGET FOR FISCAL YEAR ENDING SEPTEMBER 30, 2016

		Budget Amendment 5 - Septe	mber 30, 2016		
Line	Account Number	Account Description	FY 2016 Annual Budget	FY 2016 Amended Budget	Increase / (Decrease) Net Revenue Over Expenses
27	10-004-57225	Radio Repair - Parts-Radio	42,495,05	51.075.41	7.504.05
28	10-004-57650	Repair-Equipment-Radio	43,485.06 7,200.00	51,076.41 8,129.91	7,591.35 929.91
29	10-004-57725	Shop Supplies-Radio	10,151.97	14,093.16	
30	10-004-58200	Telephones-Cellular-Radio	4,170.00	4,588.64	3,941.19
31	10-004-58900	Vehicle-Batteries-Radio	900.00	1,671.45	418.64
32	10-005-51100	Regular Pay-Accou	293,354.00	216,012.97	771.45
33	10-005-51300	Paid Time Off-Accou		· 1	(77,341.03)
34	10-005-52300	Bank Charges-Accou	1,000.00	21,061.48	20,061.48
35	10-005-52300	Conferences - Fees, Travel, & Meals-Accou	0.00	10.00	10.00
36	10-005-54100	Dues/Subscriptions-Accou	715.00	2,168.50	1,453.50
37	10-005-56200	· · · · · · · · · · · · · · · · · · ·	600.00	1,075.00	475.00
38	10-005-57100	Mileage Reimbursements-Accou Professional Fees-Accou	0.00	192.77	192.77
39	10-005-57100	Regular Pay-Alarm	0.00	1,800.00	1,800.00
40	10-006-51200		1,180,666.00	1,104,270.02	(76,395.98)
41	10-006-51300	Overtime Pay-Alarm Paid Time Off-Alarm	157,672.00	249,127.12	91,455.12
42	10-006-51500	Payroll Taxes-Alarm	1,850.00	104,052.59	102,202.59
43	10-006-51650	TCDRS Plan-Alarm	103,748.00	105,590.10	1,842.10
44	10-006-51700	Health & Dental-Alarm	117,192.00	117,614.47	422.47
45	10-006-57100	Professional Fees-Alarm	301,278.00	251,776.43	(49,501.57)
46			30,000.00	0.00	(30,000.00)
	10-007-51100 10-007-51200	Regular Pay-EMS	7,221,002.00	6,991,496.15	(229,505.85)
47		Overtime Pay-EMS	4,436,573.00	4,117,198.34	(319,374.66)
48	10-007-51300	Paid Time Off-EMS	57,550.00	955,293.00	897,743.00
49	10-007-51400	Stipend Pay-EMS	175,421.00	263,453.12	88,032.12
50	10-007-51500	Payroll Taxes-EMS	902,863.00	879,141.76	(23,721.24)
51 52	10-007-51650	TCDRS Plan-EMS	1,026,151.00	1,006,143.89	(20,007.11)
53	10-007-51700	Health & Dental-EMS	23,325,600.00	23,040,683.65	(284,916.35)
1	10-007-52700	Business Licenses-EMS	\$7,200.00	7,472.00	272.00
54 55	10-007-52725 10-007-52754	Capital Russhage Spuings and SAAS	\$206,258.00	206,258.28	0.28
56	10-007-53150	Capital Purchase - Equipment-EMS Conferences - Fees, Travel, & Meals-EMS	\$1,552,000.00 \$25,835.00	1,381,355.70	(170,644.30)
57	10-007-53330	Contractual Obligations- Other-EMS	\$3,600.00	38,063.00	12,228.00
58	10-007-54500	Equipment Rental-EMS	0.00	5,681.94 357.13	2,081.94 357.13
59	10-007-55025	Interest Expense-EMS	29,077.00	29,077.48	357.13 0.48
60	10-007-56550	Other Services - DSRIP-EMS	1,018,759.00	682,094.15	(336,664.85)
61	10-007-57100	Professional Fees-EMS	594,661.00	859,883.55	265,222.55
62	10-007-58500	Training/Related Expenses-CE-EMS	0.00	1,493.00	1,493.00
63	10-008-51100	Regular Pay-Matls. Mgmt.	351,263.00	357,106.11	5,843.11
64	10-008-51300	Paid Time Off-Matls. Mgmt.	\$5,800.00	32,755.19	26,955.19
65	10-008-51400	Stipend Pay-Mater	\$152.00	1,050.00	898.00
66	10-008-51650	TCDRS Plan-Matls. Mgmt.	\$31,988.00	32,718.78	730.78
67	10-008-51700	Health & Dental-Matis. Mgmt.	\$93,918.00	100,616.30	6,698.30
68	10-008-52500	Bio-Waste Removal-Mater	\$33,996.00	37,818.48	3,822.48
69	10-008-52754	Capital Purchase - Equipment-Mater	\$203,885.00	182,344.86	(21,540.14)
70	10-008-53050	Computer Software-Matls. Mgmt.	0.00	400.00	400.00
71	10-008-53150	Conferences - Fees, Travel, & Meals-Mater	1,032.00	2,226.40	1,194.40

AGENDA ITEM: 24 CONSIDER AND ACT UPON RECOMMENDATIONS FOR AMENDMENTS TO BUDGET FOR FISCAL YEAR ENDING SEPTEMBER 30, 2016

		Budget Amendment 5 - Septer	nber 30, 2016		
Line	Account Number	Account Description	FY 2016 Annual Budget	FY 2016 Amended Budget	Increase / (Decrease) Net Revenue Over Expenses
72	10-008-53800	Disposable Linen-Mater	55,560.00	79,376.06	23,816.06
73	10-008-53900	Disposable Medical Supplies-Mater	888,920.68	864,967.37	(23,953.31)
74	10-008-54000	Drug Supplies-Mater	\$141,586.26	141,731.30	145.04
75	10-008-54100	Dues/Subscriptions-Mater	\$225.00	442.17	217.17
76	10-008-54450	Employee Recognition-Matls. Mgmt.	\$675.00	904.62	229.62
77	10-008-55650	Maintenance-Contract Equipment-Mater	\$107,900.00	469,850.24	361,950.24
78	10-008-56200	Mileage Reimbursements-Matls. Mgmt.	\$120.00	205.65	85.65
79	10-008-57900	Station Supplies-Mater	49,047.94	58,730.12	9,682.18
80	10-008-58500	Training/Related Expenses-CE-Matls. Mgmt.	0.00	29.77	29.77
81	10-008-58700	Uniforms-Matls. Mgmt.	151,921.07	179,740.24	27,819.17
82	10-009-51100	Regular Pay-OMD	690,361.00	667,254.14	(23,106.86)
83	10-009-51200	Overtime Pay-OMD	10,638.00	50,521.69	39,883.69
84	10-009-51300	Paid Time Off-OMD	2,100.00	21,756.74	19,656.74
85	10-009-51400	Stipend Pay-Dept	2,501.00	4,773.07	2,272.07
86	10-009-51650	TCDRS Plan-OMD	51,895.00	59,535.35	7,640.35
87	10-009-52600	Books/Materials-OMD	35,103.90	16,644.83	(18,459.07)
88	10-009-53150	Conferences - Fees, Travel, & Meals-Dept	44,830.00	25,743.99	(19,086.01)
89	10-009-54000	Drug Supplies-OMD	0.00	335.16	335.16
90	10-009-54100	Dues/Subscriptions-OMD	9,575.00	24,413.00	14,838.00
91	10-009-54450	Employee Recognition-OMD	3,072.00	8,180.11	5,108.11
92	10-009-56100	Meeting Expenses-OMD	11,900.00	14,138.59	2,238.59
93	10-009-57650	Repair-Equipment-OMD	600.00	2,606.67	2,006.67
94	10-009-58200	Telephones-Cellular-OMD	2,280.00	2,442.48	162.48
95	10-009-58600	Travel Expenses-OMD	0.00	112.00	112.00
96	10-010-51100	Regular Pay-Fleet	\$365,215.00	316,721.34	(48,493.66)
97	10-010-51200	Overtime Pay-Fleet	\$10,440.00	12,547.61	2,107.61
98	10-010-51300	Paid Time Off-Fleet	\$1,800.00	33,807.31	32,007.31
99	10-010-52600	Books/Materials-Fleet	\$100.00	296.94	196.94
100	10-010-52754	Capital Purchase - Equipment-Fleet	\$467,850.00	473,984.00	6,134.00
101	10-010-52755	Capital Purchase - Vehicles-Fleet	\$1,311,145.00	1,332,401.95	21,256.95
102	10-010-54100	Dues/Subscriptions-Fleet	\$7,325.00	8,310.95	985.95
103	10-010-54700	Fuel-Fleet	445,458.00	336,223.76	(109,234.24)
104	10-010-55100	Laundry Service & Purchase-Fleet	4,940.00	5,021.06	81.06
105	10-010-55900	Meals - Business and Travel-Fleet	0.00	388.97	388.97
106	10-010-56200	Mileage Reimbursements-Fleet	2,220.00	3,102.04	882.04
107	10-010-56400	Oil & Lubricants-Fleet	22,078.00	26,541.92	4,463.92
108	10-010-57725	Shop Supplies-Fleet	15,600.00	16,370.00	770.00
109	10-010-57750	Small Equipment & Furniture-Fleet	\$13,800.00	27,494.80	13,694.80
110	10-010-57900	Station Supplies-Fleet	\$0.00	13.56	13.56
111	10-010-58600	Travel Expenses-Fleet	\$0.00	3,042.50	3,042.50
112	10-010-59000	Vehicle-Outside Services-Fleet	\$16,200.00	39,474.36	23,274.36
113	10-010-59050	Vehicle-Parts-Fleet	\$289,566.56	242,512.77	(47,053.79)
114	10-011-51100	Regular Pay-Bill	\$693,571.00	603,835.45	(89,735.55)
115	10-011-51200	Overtime Pay-Bill	70,020.00	70,412.60	392.60
116	10-011-51300	Paid Time Off-Bill	4,500.00	75,201.39	70,701.39

AGENDA ITEM: 24 CONSIDER AND ACT UPON RECOMMENDATIONS FOR AMENDMENTS TO BUDGET FOR FISCAL YEAR ENDING SEPTEMBER 30, 2016

	Budget Amendment 5 - September 30, 2016					
			FY 2016	FY 2016	Increase / (Decrease) Net Revenue	
	Account	Account	Annual	Amended	Over	
Line	Number	Description	Budget	Budget	Expenses	
Line	- Namber	Description	Duager	Budget	Expenses	
117	10-011-51700	Health & Dental-Bill	150,732.00	122,328.23	(28,403.77)	
118	10-011-52350	Credit Card Processing Fee-EMS Billing	79,100.00	35,503.63	(43,596.37)	
119	10-011-52900	Collection Fees-Bill	\$342,814.00	291,001.22	(51,812.78)	
120	10-011-53150	Conferences - Fees, Travel, & Meals-Billi	\$12,101.00	13,377.39	1,276.39	
121	10-011-58200	Telephones-Cellular-Bill	\$900.00	1,255.59	355.59	
122	10-015-51100	Regular Pay-Information Technology	\$346,917.00	318,504.36	(28,412.64)	
123	10-015-51300	Paid Time Off-Information Technology	\$7,500.00	14,660.36	7,160.36	
124	10-015-51400	Stipend Pay-Information Technology	3,273.00	5,775.00	2,502.00	
125	10-015-52700	Business Licenses-Information Technology	1,812.00	1,985.00	173.00	
126	10-015-52754	Capital Purchase - Equipment-Infor	292,986.00	216,732.28	(76,253.72)	
127	10-015-53000	Computer Maintenance-Information Technology	228,432.00	201,326.04	(27,105.96)	
128	10-015-53050	Computer Software-Information Technology	625,738.16	564,371.97	(61,366.19)	
129	10-015-53075	Computer Software - MDC First Responder-Infor	25,000.00	33,508.09	8,508.09	
130	10-015-55400	Leases/Contracts-Information Technology	67,400.00	74,640.37	7,240.37	
131	10-015-55900	Meals - Business and Travel-Information Technology	120.00	356.87	236.87	
132	10-015-57100	Professional Fees-Information Technology	448,630.00	426,279.55	(22,350.45)	
133	10-015-57750	Small Equipment & Furniture-Information Technology	71,850.00	48,361.67	(23,488.33)	
134	10-015-58200	Telephones-Cellular-Information Technology	22,080.00	16,961.78	(5,118.22)	
135	10-015-58310	Telephones-Service-Information Technology	190,080.00	149,628.42	(40,451.58)	
136	10-015-58320	Telephones - Long Distance-Information Technology	7,200.00	8,727.91	1,527.91	
137	10-015-58500	Training/Related Expenses-CE-Information Technology	3,370.00	3,945.00	575.00	
138	10-015-58800	Utilities-Information Technology	1,100.00	1,189.60	89.60	
139	10-016-51100	Regular Pay-Facil	226,855.00	180,718.02	(46,136.98)	
140	10-016-51300	Paid Time Off-Facil	0.00	19,601.32	19,601.32	
141	10-016-51400	Stipend Pay-Facil	\$12,502.00	17,555.00	5,053.00	
142	10-016-52753	Capital Purchase - Building/Improvements-Facil	\$0.00	13,323.58	13,323.58	
143	10-016-52754	Capital Purchase - Equipment-Facil	\$250,530.50	27,483.40	(223,047.10)	
144	10-016-54500	Equipment Rental-Facil	\$5,000.00	8,150.30	3,150.30	
145	10-016-55600	Maintenance & Repairs-Buildings-Facil	\$498,974.50	348,003.82	(150,970.68)	
146	10-016-57500	Rent-Facil	\$157,934.00	138,314.40	(19,619.60)	
147	10-016-57650	Repair-Equipment-Facil	\$3,600.00	17,457.26	13,857.26	
148	10-016-57725	Shop Supplies-Facil	50,004.00	17,548.96	(32,455.04)	
149	10-016-57750	Small Equipment & Furniture-Facil	48,513.33	15,230.88	(33,282.45)	
150	10-016-57900	Station Supplies-Facil	0.00	10.35	10.35	
151	10-016-58800	Utilities-Facil	338,535.00	339,079.23	544.23	
152	10-025-51100	Regular Pay-Human	213,685.00	191,171.56	(22,513.44)	
153	10-025-51200	Overtime Pay-Human	2,918.00	5,772.57	2,854.57	
154	10-025-51300	Paid Time Off-Human	\$1,000.00	11,666.83	10,666.83	
155	10-025-51650	TCDRS Plan-Human	\$20,333.00	2,852,019.34	2,831,686.34	
156	10-025-51700	Health & Dental-Human	\$69,048.00	42,159.23	(26,888.77)	
157	10-025-51800	Unemployment InsHuman	\$54,355.00	15,725.91	(38,629.09)	
158	10-025-54100	Dues/Subscriptions-Human	\$2,225.00	3,242.48	1,017.48	
159	10-025-55500	Legal Fees-Human	\$0.00	14,680.40	14,680.40	
160	10-025-55900	Meals - Business and Travel-Human	0.00	902.67	902.67	
161	10-025-56200	Mileage Reimbursements-Human	535.00	606.60	71.60	

AGENDA ITEM: 24 CONSIDER AND ACT UPON RECOMMENDATIONS FOR AMENDMENTS TO BUDGET FOR FISCAL YEAR ENDING SEPTEMBER 30, 2016

	Budget Amendment 5 - September 30, 2016					
Line	Account Number			FY 2016 Amended Budget	Increase / (Decrease) Net Revenue Over Expenses	
162	10-025-57100	Professional Fees-Human	99,475.00	104 130 75	4 6 4 5 7 7 7	
163	10-025-58550	Tuition Reimbursement-Human	15,000.00	104,120.75	4,645.75	
164	10-025-59350	Worker's Compensation Insurance-Human	\$475,562.00	34,822.88 420,046.19	19,822.88 (55,515.81)	
165	10-026-51300	Paid Time Off-Recor	\$1,900.00	13,078.13	11,178.13	
166	10-026-51700	Health & Dental-Recor	\$28,356.00	30,811.20	2,455.20	
167	10-026-54300	Election Expenses-Recor	\$105,000.00	173,120.00	68,120.00	
168	10-026-54900	Insurance-Recor	\$0.00	71.00	71.00	
169	10-026-56500	Other Services-Recor	2,400.00	2,550.35	150.35	
170	10-026-58200	Telephones-Cellular-Recor	360.00	441.52	81.52	
171	10-026-58500	Training/Related Expenses-CE-Recor	35,000.00	208.99	(34,791.01)	
172	10-027-51100	Regular Pay-Emerg	59,613.00	61,456.62	1,843.62	
173	10-027-51650	TCDRS Plan-Emerg	5,187.00	5,349.08	162.08	
174	10-027-54000	Drug Supplies-Emerg	1,650.00	1,678.63	28.63	
175	10-027-54900	Insurance-Emerg	564,138.00	568,075.73	3.937.73	
176	10-027-55900	Meals - Business and Travel-Emerg	0.00	467.00	467.00	
177	10-027-56200	Mileage Reimbursements-Emerg	600.00	747.27	147.27	
178	10-027-58500	Training/Related Expenses-CE-Emerg	60.00	214.20	154.20	
179	10-035-53150	Conferences - Fees, Travel, & Meals-MCHD	0.00	330.00	330.00	
180	10-035-56200	Mileage Reimbursements-MCHD	0.00	97.74	97.74	
181	10-035-57000	Printing Services-MCHD	0.00	742.50	742.50	
182	10-035-58700	Uniforms-MCHD	0.00	1,166.00	1,166.00	
183	10-039-51100	Regular Pay-Param	315,469.00	242,958.81	(72,510.19)	
184	10-039-51200	Overtime Pay-Param	20,190.00	35,634.07	15,444.07	
185	10-039-51300	Paid Time Off-Param	2,500.00	33,864.95	31,364.95	
186	10-039-54450	Employee Recognition-Param	\$375.00	419.70	44.70	
187	10-039-55400	Leases/Contracts-Param	\$14,000.00	21,500.00	7,500.00	
188	10-039-57100	Professional Fees-Param	\$87,376.00	47,110.88	(40,265.12)	
189	10-039-58200	Telephones-Cellular-Param	\$5,760.00	5,914.67	154.67	
190	10-040-52725	Capital Lease Expense-Build	\$274,218.00	285,328.31	11,110.31	
191	10-040-52753	Capital Purchase - Building/Improvements-Build	\$630,580.00	871,022.56	240,442.56	
192	10-040-52754	Capital Purchase - Equipment-Build	\$54,252.00	22,302.86	(31,949.14)	
193	10-040-57750	Small Equipment & Furniture-Build	9,980.00	16,381.90	6,401.90	
		Subtotal - Expenses	68,900,332.85	68,900,332.85	(0.00)	
		Increase / (Decrease) Net Revenue over Expenses			(0.00)	
		FY 2016 Annual Budget Change in Fund Balance			5,917,561.52	
		FY 2016 Amended Budget Change in Fund Balance			5,917,561.52	

AGENDA ITEM: 24

CONSIDER AND ACT UPON RECOMMENDATIONS FOR AMENDMENTS TO BUDGET FOR FISCAL YEAR ENDING SEPTEMBER 30, 2016

BUDGET AMENDMENT - SEPTEMBER 30, 2016

BOARD MEETING DATE: October 25, 2016

APPROVED BY:

Harold Posey Chairman

Mal

Sandy Wagner, Secretary

Chris Grice, Treasurer

Bob Bagley, Member

Georgette Whatley, Member

Kenn Fawn, Member

AGENDA ITEM: 25

CONSIDER AND ACT UPON RECOMMENDATIONS FOR AMENDMENTS TO BUDGET FOR FISCAL YEAR ENDING SEPTEMBER 30, 2017

BUDGET AMENDMENT - SEPTEMBER 30, 2017

THAT WHEREAS, therefore on September 6, 2016 the Board heard and approved the budget for the year 2016/2017 for the benefit of Montgomery County Hospital District; and

WHEREAS, to meet unusual and unforeseen conditions, which could not by reasonable and diligent thought and attention, have been included in the budget for 2016/17 adopted on September 6, 20165, or a line item transfer has been requested with no impact on the original budget, or a line item transfer has been requested with a positive impact on the original budget; and

WHEREAS, the Board by and through this budget amendment intends to reflect the funding provided and expenses incurred as a result of its operation and management of the Montgomery County Hospital District for the year 2016/2017 pursuant to its contractual responsibilities therefore.

NOW, THEREFORE, BE IT RESOL			, seconded
by UR. Buglan	and duly carried by the	e following vote: AYES:	NAYS: Z
the following amendment(s) to said be	udget is/are hereby author	rized:	•

Budget Amendment 1 - September 30, 2017						
	Account	Account	FY 2017 Annual	FY 2017 Amended	Increase / (Decrease) Net Revenue Over Expenses	
Line	Number	Description	Budget	Budget	expenses	
1	10-004-52753	Capital Purchase/Building Improvements	0.00	9,986.00	9,986.00	
2	10-004-52754	Capital Purchase - Equipment	1,907,722.00	2,206,091.14	298,369.14	
3	10-004-53000	Computer Maintenance	35,500.00	41,038.00	5,538.00	
4	10-004-54450	Employee Recognition	169.00	333.82	164.82	
5	10-004-55650	Maintenance - Contract Equipment	218,800.00	264,382.08	45,582.08	
6	10-004-57100	Professional Fees-Radio	366,700.00	465,976.16	99,276.16	
7	10-004-57200	Radio Repairs - Outsourced (Depot)	39,995.00	41,475.00	1,480.00	
8	10-004-57225	Radio Repair - Parts	39,300.00	40,829.47	1,529.47	
9	10-004-57725	Shop Supplies	12,100.00	12,456.00	356.00	
10	10-004-58500	Training/Related Expenses-CE	5,000.00	9,000.00	4,000.00	
11	10-006-57750	Small Equipment & Furniture	11,320.00	13,445.44	2,125.44	
12	10-007-57750	Small Equipment & Furniture	25,871.00	27,079.48	1,208.48	
13	10-008-53900	Disposable Medical Supplies	1,088,310.00	1,102,391.58	14,081.58	
14	10-008-54000	Drug Supplies	149,110.00	153,359.50	4,249.50	
15	10-008-56300	Office Supplies	30,000.00	30,014.78	14.78	
16	10-008-56600	Oxygen & Gases	75,000.00	75,518.81	518.81	
17	10-008-57650	Repair - Equipment	9,864.00	10,064.00	200.00	
18	10-008-57900	Station Supplies	71,472.00	71,593.46	121.46	
19	10-008-58700	Uniforms	243,300.00	253,806.10	10,506.10	
20	10-009-54450	Employee Recognition	2,906.00	3,003.50	97.50	
21	10-010-52754	Capital Purchase - Equipment	138,700.00	144,095.00	5,395.00	
22	10-010-52755	Capital Purchase - Vehicles	1,050,502.00	1,101,358.00	50,856.00	
23	10-010-57725	Shop Supplies	19,992.00	20,128.45	136.45	
24	10-010-57750	Small Equipment & Furniture	2,400.00	2,590.48	190.48	
25	10-010-59050	Vehicle - Parts	249,996.00	251,030.68	1,034.68	
26	10-015-52754	Capital Purchase - Equipment	253,900.00	327,146.71	73,246.71	
27	10-015-53000	Computer Maintenance	287,828.00	311,554.00	23,726.00	

AGENDA ITEM: 25 CONSIDER AND ACT UPON RECOMMENDATIONS FOR AMENDMENTS TO BUDGET FOR FISCAL YEAR ENDING SEPTEMBER 30, 2017

Budget Amendment 1 - September 30, 2017						
	_	FY 2017 FY 2017			Increase / (Decrease) Net Revenue	
	Account	Account	Annual	Amended	Over	
Line	Number	Description	Budget	Budget	Expenses	
28	10-015-53050	Computer Software	656,681.00	658,361.00	1,680.00	
29	10-015-53100	Computer Supplies/Non Cap.	\$32,100.00	32,607.98	507.98	
30	10-015-57100	Professional Fees	\$565,534.00	576,894.77	11,360.77	
31	10-016-5275 3	Capital Purchase - Building/Improvements	\$47,000.00	56,820.00	9,820.00	
32	10-016-52754	Capital Purchase - Equipment	\$327,500.00	349,098.54	21,598.54	
33	10-016-55 600	Maintenance & Repairs - Buildings	\$454,600.00	456,488.94	1,888.94	
34	10-016-57725	Shop Supplies	32,808.00	34,716.00	1,908.00	
35	10-016-57750	Small Equipment & Furniture	41,400.00	43,572.16	2,172.16	
36	10-025-54450	Employee Recognition	41,387.00	58,954.82	17,567.82	
37	10-040-52753	Capital Purchase - Building/Improvements	0.00	77,684.74	77,684.74	
		Subtotal - Expenses	8,534,767.00	9,334,946.59	800,179.59	
		Increase / (Decrease) Net Revenue over Expenses FY 2017 Annual Budget Change in Fund Balance FY 2017 Amended Budget Change in Fund Balance			800,179.59 278,306.00 (521,873.59)	

BUDGET AMENDMENT – SEPTEMBER 30, 2017

BOARD MEETING DATE: October 25, 2016	
APPROVED BY:	
Handel E. Fory	
Harold Posey, Chairman	~ 2
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Mark Cole, Vice Chairman	Bob Bagley, Member
Tendel Lagres	Grougette Sthatley
Sandy Wagner, Secretary	Georgette Whatley, Member
_ (hu Dru	Kenn Fracon
Chris Grice, Treasurer	Kenn Fawn, Member

MCHD Surplus/Salvage October 2016

Qty	Serial Number	MCHD Tag	Product Description	s/s	Reason
1	3512	7719	Nitronox Unit	Salvage	Unit is damaged and cannot be repaired per manufacturer
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