### **Lindsey Wilmoth**

From:

Angi Brodfuehrer <angi.brodfuehrer@skofirm.com>

Sent:

Monday, December 2, 2024 1:54 PM

To:

Lindsey Wilmoth

Cc:

D. Keith Pulliam

Subject:

RE: 12/9/2024 County Council Meeting

Lindsey -

Please add Tri-Township to the 12/16/2024 agenda.

Thank you!

Angi Brodfuehrer

didenter Direct

Paralegal

Direct: 502.568.5755

From: Lindsey Wilmoth < lwilmoth@clarkcounty.in.gov>

Sent: Monday, December 2, 2024 12:24 PM

To: Angi Brodfuehrer <angi.brodfuehrer@skofirm.com>
Cc: D. Keith Pulliam <keith.pulliam@skofirm.com>
Subject: RE: 12/9/2024 County Council Meeting

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi Angi,

Sorry for the delay. The December Council meeting has been rescheduled to 12/16/2024 at 6pm. Would you like me to add this to the 12/16/2024 agenda?

Thank you,

### Lindsey Wilmoth

Chief Deputy Auditor
Clark County Auditor's Office
300 Corporate Drive, Suite 106
Jeffersonville, IN 47130
812-285-6219
<a href="mailto:lwille.gov">lwilmoth@clarkcounty.in.gov</a>

From: Angi Brodfuehrer < angi.brodfuehrer@skofirm.com>

Sent: Wednesday, November 27, 2024 9:54 AM
To: Lindsey Wilmoth < lwilmoth@clarkcounty.in.gov >
Cc: D. Keith Pulliam < keith.pulliam@skofirm.com >
Subject: 12/9/2024 County Council Meeting

Lindsey –

Will you please add Tri-Township Fire Protection District to the 12/9/2024 County Council agenda? If needed, the topic is for approval of financing for the municipal lease of fire apparatus.

If you have any questions, please do not hesitate to reach out to Keith or me.

### Thank you.



### Angi Brodfuehrer Paralegal

angi.brodfuehrer@skofirm.com

Direct:

502.568.5755

Main:

502.333.6000

Stoll Keenon Ogden PLLC 400 West Market St., Suite 2700

Louisville, KY 40202

### Louisville | Lexington | Indianapolis | Evansville | Frankfort | Jeffersonville

Stoll Keenon Ogden PLLC is Mansfield Certified. skofirm.com

Confidentiality Notice: This e-mail message is for the sole use of the recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient(s), please contact the sender by reply e-mail and destroy all copies of the original message.

If you are a client of this firm, we respectfully remind you that to avoid waiver of the attorney-client privilege, you should not send, forward, or show this e-mail or attachments to anyone else. Thank you.

### FOR ADDITIONAL APPROPRIATION

TO: DANNY YOST

**CLARK COUNTY AUDITOR** 

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending December 31, 2024.

I, therefore do hereby request you to give notice to the Clark County Council, and public in the manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

1173-20080-062	MVH Restricted Sub Fund – Bituminous	\$400,000
1173-30051-062	MVH Restricted Sub Fund - Contract Services	\$75,000
1173-40014-063	MVH Restricted Sub Fund – Equipment	\$200,000

TOTAL: \$675,000

Board of Commissioners

# Amendment No. 1 To the Supplemental Information Form For Additional Appropriation Request From the Clark County General Fund and all other Funds

Are there sufficient funds in the account you are requesting the appropriations from to sustain your request? Yes.

Why is this appropriation deemed to be an emergency at this time? (Detail your Answer.) Yes. Invoices are due.

Please include an itemized list of purchases, leases, and/or services for this appropriation.

MVH Restricted Sub Fund – Bituminous	Asphalt Invoices for Paving
MVH Restricted Sub Fund – Contract Services	Pavement Asset Mgmt. Plan & Striping
MVH Restricted Sub Fund – Equipment	Equipment Payments

Will the denial of this request prevent your office or department from executing its daily Duties?

If the Additional Appropriation request includes a Salary Ordinance, please list the exact amount of the salary increase, the current salary, and from what fund the salary is being paid from.

### NOTE:

- A. The elected officeholder or department head must appear before the County Council to Explain his/her request.
- B. The Supplement request forms (with amendments) musts be signed by the Elected Office holder making the request.
- C. If any part of the supplemental forms (with Amendments) is not in compliance, the Noncompliance will constitute an automatic denial of the request.

Date completed and submitted:	1804
	Board of Commissioners

### FOR ADDITIONAL APPROPRIATION

TO: DANNY YOST

**CLARK COUNTY AUDITOR** 

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending December 31, 2024.

I, therefore do hereby request you to give notice to the Clark County Council, and public in the manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

4912-30051-030

Landowner Liability- Contract Services

\$75,000

TOTAL: \$75,000

**Board of Commissioners** 

# Amendment No. 1 To the Supplemental Information Form For Additional Appropriation Request From the Clark County General Fund and all other Funds

Are there sufficient funds in the account you are requesting the appropriations from to sustain your request? Yes.

Why is this appropriation deemed to be an emergency at this time? (Detail your Answer.) Yes. Invoices are due.

Please include an itemized list of purchases, leases, and/or services for this appropriation.

JTL Engineering Services

Will the denial of this request prevent your office or department from executing its daily Duties?

If the Additional Appropriation request includes a Salary Ordinance, please list the exact amount of the salary increase, the current salary, and from what fund the salary is being paid from.

### NOTE:

- A. The elected officeholder or department head must appear before the County Council to Explain his/her request.
- B. The Supplement request forms (with amendments) musts be signed by the Elected Office holder making the request.
- C. If any part of the supplemental forms (with Amendments) is not in compliance, the Noncompliance will constitute an automatic denial of the request.

Date completed and submitted:	BUT
	Board of Commissioners

### **REQUISITION FOR TRANSFER OF FUNDS**

Danny Yost, Auditor Clark County, Indiana

WHEREAS, due to an extraordinary emergency it is necessary that the following Transfer of Funds be made for the fiscal year ending December 31, 2024.

I, therefore do hereby request you to give to the Clark County Council in the manner required by law that Transfer of Funds for the fiscal year ending December 31, 2024 be made for the purpose and department following:

FROM:	4916-20060-030	SUPPLIES	\$350.00
то:	4916-31017-030	PROMOTIONS	\$350.00
	DEC 0 4 2024  Dans F. Grant Auditor, Clark County	Board of Commissioners	) ,
WITNESS	: My hand and seal this	day of December, 2024.	

Auditor of Clark County, Indiana

### **REQUISITION FOR TRANSFER OF FUNDS**

Danny Yost; Auditor Clark County, Indiana

WEREAS, due to an extraordinary emergency it is necessary that the following transfer of Funds be made for the fiscal year ending December 31, 2024.

I, therefore do hereby request you to give to the Clark County Council in the manner required by law that Transfer of Funds for the fiscal year ending December 31, 2024 for the purpose and department following:

FROM: 1000-20021-032	Gas and Oil	\$77,140.06
TO: 1000-30051-032	Contracts	\$60,000.00
TO: 1000-30083-032	Care of Inmates (housing)	\$8547.50
TO: 1000-30017-032	Training	\$8592.56

SIGNATURE OF DEPARTMENT HEAD

**SHERIFF** 

WITNESS:	My hand and seal this	day of		_•
			Auditor of Clark County Indiana	

In an effort to NOT ask for Additional Appropriations, the Sheriff's Department would like to make the following Transfers to finish out the year 2024:

- 1) 1000-20021-032 Gas and Oil to Contracts 1000-30051-032, \$60,000
- 2) 1000-20021-032 Gas and Oil to Inmate care 1000-30083-032, \$8,547.50
- 3) 1000-20021-032 Gas and Oil to Training 1000-30017-032, \$8592.56

#1-Our Contracts appropriation is completely depleted, mostly because the medical "cost pool" is paid out of this account and we have had inmates with several hospital visits, cancer treatments, ect., We also have had several issues in the jail and had to sign contracts with Koorsen Fire to repair these issues. We are asking to transfer appropriation from Gas and Oil to Contracts to help cover the rest of the invoices for 2024.

#2- In addition to the transfer to Contracts we are needing to transfer Gas and Oil to Inmate Care (housing inmates), 30083. I have attached invoices from Scott County for the housing of Jamey Noel, and one invoice from Rockville Correctional Facility for the housing of inmate Lori Carpenter.

#3-Also, we had a situation back in 2019 to where we overspent our training Fund #2512. At that time no one told us this had to be fixed, so nothing was done about it. We have since been told by the Auditor's office that this Fund cannot carry over a negative balance. We are now asking to move money from Gas and Oil to Inmate care to fix this issue.

Thanks.

Diane Shahroudi

### SCOTT CO SHERIFF'S OFFICE

111 S. FIRST STREET SCOTTSBURG, IN 47170 812-752-8400

Invoice # 101

11/1/2024

Bill To

Clark Co. Sheriff's Office 501 E. Court Ave Jeffersonville, IN 47130 812-283-4471 For

Inmate Housing

Item Description	Amount
Jamey Noel	
199 days X 1 inmate X \$37.50 a day=	\$7,462.50
April 9 thru Oct. 24, 2024= 198	
Subtotal	\$7,462.50
Tax Rate	
Other Costs	
Total Cost	\$7,462.50

Make all checks payable to Scott Co. Sheriff's Office

If you have any questions concerning this invoice, use the following contact information: Patti Combs@ 812-752-8400 Thank you for your business!

### Rockville Correctional Facility 4490 W Reformatory Road Pendleton IN 46064

### Invoice

Date	Invoice#
11/18/2024	RTC-100010

Bill to
Clark County Sheriff Department
501 East Court Avenue
Jeffersonville IN 47130
dshahroudi@clarkcosheriff.com

			P.O. No.	Term	S	Project
				Due on recipt		
Quantity	Descrition			Rate		Amount
31	Carpenter, Lori; DOC# 296666; Oct	1-31, 2024	1	\$	35.00	\$ 1,085.00
		ar.			*	

Please make check payable to the Rockville Correctional Facility.

Total:

\$ 1,085.00

Mail payment to the attention of Laura Neill 4490 W Reformatory Rd., Pendleton IN 46064 THANK YOU!

Fund 2512 Co. Law Enforcement #2

Loc 0000 Dummy Location

Location Totals Current Total	2512.00047.00000.0000 Fees 03/12 05/13 07/09 09/06	Account Code Date  2512.00000.00000.0000 Dummy Receipt  01/01/2024 0  Current Total	Eoc ages Dullink Foreign
als Current Total	Fees 03/12/2024 05/13/2024 07/08/2024 09/06/2024 Current Total	Date Dummy Rec 01/01/2024 Current Total	
	03/12/2024 05/13/2024 07/09/2024 07/09/2024 09/06/2024	Date Date  Dummy Receipt 01/01/2024  Current Total	
Estimated Revenue 0.00	Rec/AutoRcpt Rec/AutoRcpt Rec/AutoRcpt Rec/AutoRcpt Estimated Revenue 0.00	Type  Rec/CarryFwdRec  Estimated  Revenue  0.00  0.00	
Receipts 0.00 (8,582.56)	Dummy Location 240.0 316.0 296.0 264.0 Receipts 0.00 1,116.00	Amou Durnmy Location (9,698.5 Receipts 0.00 (9,698.56)	
Appropriation 0.00	2 0000	Amount Other Data Location (9,698.56) Carry Forward Appropriation 0.00 0.00	
Expenditure 0.00 0.00	Rec:065042 BK:080 CLARK COUNTY SHE Rec:065511 BK:080 CLARK COUNTY SHE Rec:065971 BK:080 Sheniff's Office Rec:066473 BK:080 CLARK COUNTY SHE  propriation Expenditure 0.00 0.00 0.00 0.00	Expenditure 0.00 0.00	
Unexpended: Cash:	Unexpended:	Unexpended: Cash:	

(9,698.56)

0.00

(8,582.56)

0.00

1,116.00

0.00

The Last Posted Date is 01/01/2024.

Fund 2512 Co. Law Enforcement #2

Loc 0005 County Police

Location Totals Current Total			Budget Effective Transact Account Code Date Date 2512.30031.00000.0005 Schools & Conferences
als Current Total	Current Total	01/01/2024 01/01/2024	Effective Date Schools & Co
			Effective Transaction Transaction Date Date Type Schools & Conferences
Estimated Revenue 0.00	Estimated Revenue 0.00	Approp/BdgtProj	Transaction Type
Receipts 0.00 0.00	Receipts 0.00 0.00	20,0	Am County Police
Appropriation 0.00 20,000.00	Appropriation 0.00 20,000.00	20,000.00	Amount Other Data
Expenditure 0.00 0.00	Expenditure 0.00 0.00	ų	
Unexpended: Cash:	Unexpended: Cash:	×	

20,000.00

20,000.00

# Cornbined Ledger by Location (All Detail) within Date Span 01/01/2024 thru 10/31/2024 The Last Posted Date is 01/01/2024.

Clark County Government

Fund 2512 Co. Law Enforcement #2

Fund Totals Current Total	→ Outstanding Investments Current Total	Total	Normal Current		
0.00		0.00	0.00	Revenue	Estimated
0.00 (8,582.56)	0.00	(8,582.56)	0.00	Receipts	
0.00 20,000.00	e •	20,000.00	0.00	Appropriation	
0.00		0.00	0.00	Expenditure	
Cash:		Cash:	Unexpended:		
(8,582.56)		(8,582.56)	20,000.00		

In an effort to NOT ask for Additional Appropriations, the Sheriff's Department would like to make the following Transfers to finish out the year 2024:

1) 1170-20043-032 Inmate Meals to Utilities 1170-30046-032, \$50,000

The Sheriff's Department currently has a balance of \$1,042 for utilities, but has over \$30,000 in invoices, and we are expected to get around \$20K more by the end of December.

Thanks.

Diane Shahroudi

### **REQUISITION FOR TRANSFER OF FUNDS**

Danny Yost; Auditor Clark County, Indiana

WEREAS, due to an extraordinary emergency it is necessary that the following transfer of Funds be made for the fiscal year ending December 31, 2024.

I, therefore do hereby request you to give to the Clark County Council in the manner required by law that Transfer of Funds for the fiscal year ending December 31, 2024 for the purpose and department following:

FROM: 1170-20043-032 Food Supplies \$50,000.00
TO: 1170-30046-032 Utilities \$50,000.00

SIGNATURE OF DEPARTMENT HEAD

**SHERIFF** 

WITNESS:	My hand and seal this	day of	
			Auditor of Clark County, Indiana

TO: Danny Yost, Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending 2024.

I, therefore do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

**FUND NAME: HIV Prevention** 

Budget #	<b>Line Item Description</b>	Amount
9151-11173-071	Group Insurance	\$450.00
	Em Yzl	) 00
	Signature of	Dept. Head
	Clark County	y Health Dept.
WITNESS: My hand a	and seal this_ 20_day of _Novem	ber _2024
	Auditor of Clark C	ounty, Indiana

TO: Danny Yost, Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending 2024.

I, therefore do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

**FUND NAME: Ryan White Services** 

Budget #	Line Item Description	Amount
8234-11173-071	Group Insurance	2000.00

Emyzl no

Signature of Dept. Head

Clark County Health Dept.

WITNESS: My hand and seal this\_\_21\_day of \_November \_2024\_\_\_\_.

Auditor of Clark County, Indiana

TO: Danny Yost, Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending 2024.

I, therefore do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

**Line Item Description** 

**Amount** 

Auditor of Clark County, Indiana

**FUND NAME: Prepardness** 

Budget #

Equipment \$10,000.00

Guyy 

Signature of Dept. Head

Clark County Health Dept.

WITNESS: My hand and seal this \_3 day of December \_2024\_\_\_\_.

TO: Donny Yost, Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending 2014.

I, therefore do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

Daves al Sor

	<b>FUND NAME</b>	rersonal oci	•1
1122	Projectincome	- 1122-11107-91	9 \$ 35,355.23
	Budget #	Line Item Description	Amount
		<b>x.</b>	
This	is nelled	eng	
	00000	· .	
du	ecar e	- Caller	
01	\$ 20,301.4	5 for raises	
OP			110
. ~0	erical en	ror.	Wisallard
9 0	1. Tion	raises	Signature of Dept. Head
For	\$20,301.4 erical err probation pestments		Community Com.
1	a stment		
aa	and the second	*	Department
U			
	WII	NESS: My hand and sea	I this day of,
		Audi	tor of Clark County, Indiana
			5 /

Fund#9	102
Location#	090

### STATEMENT OF SALARIES AND WAGES PROPOSED TO BE PAID OFFICERS AND EMPLOYEES **CALENDAR YEAR 2024**

Clark County Community Corrections, Inc.	diana (Name of Office, Department, Board or Agency)
The following statement shows the salaries and w employees of the above-named office, department, board 2024.	ages proposed to be paid to officers and or agency during the calendar year
Administrative	\$18.00
Title of Position or Employee Classification	Rate of Pay Per Hour
FULL TIME SALARIED OFFICER	AND EMPLOYEES
PART TIME AND HOURLY RAT	ED EMPLOYEES
Carol Noble Adminstrative\$18.0 Title of Position or Employee Classification & Name Total annual salaries Effect	0
Date: 11.22.2024 Submitted By: Gal Title: Community	ladriel Ballard & Balland y Corrections Supervisor
NOTES:	

(1) This statement must be filed in DUPLICATE with the County Auditor on or before July 1 each year for salaries and wages to be paid in the ensuring year.

(2) The number and salaries to be paid full time officers and employees must be fixed by the County Council. The rates of pay for part time and hourly employees shall likewise be fixed by the County Council but the number to be employed is limited only by the funds appropriated therefore, thus the amount to be requested in the budget for part time and hourly employees need not be included in this statement.

(3) The County Auditor shall complete the reverse side of this form and return one copy to the officer or head of the department, board or agency within 3 days after action thereon by the County Council.

Fund#	9102
Location#	090

## STATEMENT OF SALARIES AND WAGES PROPOSED TO BE PAID OFFICERS AND EMPLOYEES CALENDAR YEAR 2024

Clark County Community Corr The following statement shows the sale employees of the above named office, departing 2024.	aries and wages proposed	to be paid to officers and
Title of Position or Employee Classification		Rate of Pay Per Hour
FULL TIME SALARIED	OFFICER AND EMPLO	OYEES
Crystal Juhasz, Probation Officer	\$44221.00 Effective	date 12/9/2024-12/22/2024
PART TIME AND HOU	IRLY RATED EMPLOY	YEES
Title of Position or Employee Classification & Name	Effective date	Total annual salaries
	tted By: Galadriel Ballard Director	Spallard

### NOTES:

(1) This statement must be filed in DUPLICATE with the County Auditor on or before July 1 each year for salaries and wages to be paid in the ensuring year.

(2) The number and salaries to be paid full time officers and employees must be fixed by the County Council. The rates of pay for part time and hourly employees shall likewise be fixed by the County Council but the number to be employed is limited only by the funds appropriated therefore,; thus the amount to be requested in the budget for part time and hourly employees need not be included in this statement.

(3) The County Auditor shall complete the reverse side of this form and return one copy to the officer or head of the department, board or agency within 3 days after action thereon by the County Council.

### **REQUISITION FOR TRANSFER OF FUNDS**

Danny Yost, Auditor Clark County, Indiana

WHEREAS, due to an extraordinary emergency it is necessary that the following Transfer of Funds be made for the fiscal year ending December 31, 2024.

I, therefore do hereby request you to give to the Clark County Council in the manner required by law that Transfer of Funds for the fiscal year ending December 31, 2024 be made for the purpose and department following:

	Fund – Account - Location	Account Name	Amount
From:	9102-11107-90	Personal Services	20,000.00
Го:	9102-20060-90	Supplies	20,000.00
	Fund – Account - Location	Account Name	Amount
From:			
Го:			Ц.
	Fund – Account - Location	Account Name	Amount
From:	1		T*
Γo:			l. s
Clark Coun Departmen	nty Community Corrections	Signature of Departmen	
WITNESS.	: My hand and seal this the 19 da	y of November	<i>2024</i> .

### **REQUISITION FOR TRANSFER OF FUNDS**

Danny Yost; Auditor Clark County, Indiana

WHEREAS, due to an extraordinary emergency it is necessary that the following transfer of Funds be made for the fiscal year ending December 31, 2024.

I, therefore do hereby request you to give to the Clark County Council in the manner required by law that Transfer of Funds for the fiscal year ending December 31, 2024 for the purpose and department following:

### FUND # 9105-08

FROM: 30013 Travel TO: 11107 Personal Services TO: 11171 FICA TO: 11176 PERF	\$376.00 \$301.00 \$37.00 \$38.00	
	SIGNATURE OF DEPARTMENT HEAD	•
•	Prosecutor's Office DEPARTMENT	
of	WITNESS: My hand and seal this	_day

Auditor of Clark County, Indiana

Mattingly, Todd A	\$ 33,600.00 \$ 600.00	<b>*</b> ≈
HIV Outreach Tester 1	\$ 33,600.00 \$ 600.00	\$ 3
Moye, Courtney	\$ 32,000.00	\$ 3. \$ 3:
HIV Counselor	\$ 32,000.00	
Waterhouse, Dorothy M 1	5 18,375.00 5 3,000,00	\$ 3:
HIV & STD Program Director 1	\$ 18,375.00 \$ 3,000.00	\$ 2° 5 2°
1205	\$ 23,400.00	1 7
0071 Health Department 1	\$ 23,400.00	2
\$30 per hour 1	\$ 23,400.00	\$ 25
PT Substance Use Disorder Dutreach Educ 1	\$ 23,400,00	\$ 21
8207	\$ 42,000.00	\$ 21
0071 Health Department 1	\$ 42,000.00	
Allen, Mary E	\$ 12,000.00	\$ 42
Diseaso Intervent Specialist 1	\$ 42,000.00	\$ 42
8212	\$ 50,000.00	\$ 42
0071 Health Department 2	\$ 50,000.00	\$ SO
\$30 per hour	\$ 25,000.00	\$ SO
PT Public Health Coordinator 1	5 25,000.00	\$ 25
Johanna Polk	\$ 25,000.00	\$ 25
Public Health Prep/Acc 1	\$ 25,000.00	\$ 25
8216	\$ 18,000.00 \$ 600.00	\$ 25
0071 Health Department 1	\$ 18,000.00 \$ 600.00	\$ 18
Smith, Angelia K	5 18,000.00 \$ 600.00	\$ 18,
Administrative Assistant	The state of the s	\$ 18
3218		\$ 18,
0071 Health Department	\$ 44,100.00 \$ 3,000.00 \$ 44,100.00 \$ 3,000.00	\$ 47,
Shields, Jessica L		\$ 47,
Disease Intervent Specialist	\$ 44,100.00 \$ 3,000.00 \$ 44,100.00 \$ 3,000.00	\$ 47.
1224		\$ 47,
0071 Health Department	\$ 80,500.00 \$ 80,500.00	, Ş 80,
\$45 per hour		\$ 80,
PT Vaccine Clinic Nurse		\$ 80,
1228		\$ 80,
0071 Health Department 1	The second secon	<b>S</b>
And the second of	\$	\$
	\$	S
***	\$	5
	\$ 72,609.00	5 72,
	\$ 72,609.00	\$ 72,
	\$ \$9,609.00	5 59,
Case Manager 1	\$ 59,609.00	\$ 59,
Scybold, Joshua E I Coordinator	\$ 8,000.00	\$ a,
A STATE OF THE STA	\$ 8,000.00	S 8,
	\$ 5,000.00	S 5.
Admistrative Staff 1	\$ 5,000.00	\$ 5,
234	\$ 129,150.00 \$ 1,950.00	5 131,
0071 Health Department	\$ 129,150.00 \$ 1,950.00	\$ 131,
Dayvault, Casey	\$ 43,050.00	5 43,
Non Medical Case Management 1	\$ 43,050.00	5 43,1
Durall, Alex W 1	\$ 44,100.00 \$ 1,950.00	5 46,1
Non Medical Case Management 1	\$ 44,100.00 S 1,950.00	5 46,1
Orman, Candace	\$ 47,000.00	\$ 42,0
Non Medical Case Management 1	\$ 42,000.00	5 42,1 5 42,1
1	\$ 210,600.00	5 210,6
0071 Health Department 1	\$ 210,600.00	5 210,6
\$-15 per hour	\$ 210,600.00	\$ 210,6
PT School Nurse Liason 1	\$ 110,600.00	\$ 210,8
2	\$ 65,570.40	\$ 65,5
0302 All Courts (Veteran Court) 2	\$ 65,570.40	\$ 65,5
Miller, Jamie B	5 65,570.40	
Probation Officer 1	\$ 65,570.40	3 3747
Vacant 1	\$ .	\$ 65,5 5
Reentry Coordinator 1	\$	S S
91 1	\$ 5,000.00	1
0302 All Courts (Circuit 1)	\$ 5,000.00	ACCORDING TO SELECT A STREET, MANAGEMENT AND ADDRESS OF THE PARTY OF T
Seybold, Joshua E	\$ 5,000.00	\$ 5,0
Probation Officer 1	5 5,000.00	\$ 5,0
96 3	\$ 34,000,00	\$ . 5,0
0008 Prosecutor 1	The state of the s	\$ 34,0
Joshi, Maria 1	<b>,</b>	5
PT Prosecutor 1	\$ .	\$
0090 Community Corrections	\$ 34,000.00	\$
\$15 per hourPart-Time 1	5 34,000.00	\$ 34,0
Part Time 1	\$ 34,000.00	\$ 34,0
0369 Probation 1	\$ :	\$ 34,0
Various 1		\$
PT Assessor 1	\$ -	s
97	\$ 47,423.15	S
0034 Prasecutor IV-D 3	\$ 47,423.15	5 47,4
Fox, Sunshine A	\$ 4,870.58	\$ 47,4
Administrative Assistant 1	5 4,870.5B	\$ 4,8
Hart, Sarah M 1	\$ 4,500.00	5 4,8
Third Deputy Prosecuting Attorney 1	\$ 4,500.00	\$ 4,5
Rebecca Haxton 1	\$ 38,052.57	\$ 4,51
Case Worker Prosecutor 1	\$ 38,052.57	\$ 38,00
	\$ .	\$ 38,00
99 1	The second secon	<u>\$</u> _
0001 Clerk 1		s
	<b>.</b>	
0001 Clerk 1 James, Kristi A 1	\$ . \$	s
0001 Clerk 1  James, Kristi A 1  Deputy Clerk 1	S .	5
0001 Clerk 1  James, Kristi A 1  Deputy Clerk 1  55 3	5 . 5 161,150.00 5 1,650.00	\$ \$ 162,80
0001 Clerk 1  James, Kristi A 1  Deputy Clerk 1  3  0008 Prosecutor 3	\$	\$ \$ 162,80 \$ 162,80
0001 Clerk 1 James, Kristi A 1 Deputy Clerk 1 15 5 3 0008 Prosecutor 3 Lutz, Robert A 1	\$ 161,150.00 \$ 1,650.00 \$ 1650.00 \$ 1,650.00 \$ 1,650.00 \$ 1,650.00 \$ 1,650.00 \$ 5 3,500.00	\$ \$ 162,80 \$ 162,80
0001 Clerk 1  James, Kristi A 1  Deputy Clerk 1  35 3  0008 Prosecutor 3  Lutz, Robert A 1  Investigator 1	\$ 161,150.00 \$ 1,650.00 \$ 161,150.00 \$ 1,650.00 \$ 52,500.00 \$ 52,500.00	\$ 162,80 \$ 162,80 \$ 52,50 \$ 52,50
0001 Clerk	\$ 161,150.00 \$ 1,650.00 \$ 161,150.00 \$ 1,650.00 \$ 52,500.00 \$ 57,500.00 \$ 64,250.00 \$ 900.00	\$ 162,80 \$ 162,80 \$ 52,50 \$ 52,50
0001 Clerk	\$ 161,150.00 \$ 1,650.00 \$ 161,150.00 \$ 1,650.00 \$ 52,500.00 \$ 57,500.00 \$ 64,250.00 \$ 900.00 \$ 64,250.00 \$ 900.00	5 5 162,80 5 152,80 5 52,50 5 52,50
0001 Clerk	\$ 161,150.00 \$ 1,650.00 \$ 161,150.00 \$ 1,650.00 \$ 52,500.00 \$ 57,500.00 \$ 64,250.00 \$ 900.00 \$ 64,250.00 \$ 900.00 \$ 64,260.00 \$ 900.00 \$ 44,400.00 \$ 750.00	\$ 162,80 \$ 162,80 \$ 52,50 \$ 52,50 \$ 65,12
0001 Clerk	\$ 161,150.00 \$ 1,650.00 \$ 161,150.00 \$ 1,650.00 \$ 52,500.00 \$ 57,500.00 \$ 64,250.00 \$ 900.00 \$ 64,250.00 \$ 900.00	\$ 162,86 \$ 162,86 \$ 52,55 \$ 52,55 \$ 65,11 \$ 65,12

Charles continued

		PERF			
			11176	\$ 5,864.00	\$ 6,023.00
Y		Supplies	20060	\$ 5,000.00	\$ 5,000.00
		Travel	30013	\$ 5,000.00	\$ 5,000.00
		Equipment	40014	\$ 10,000.00	\$ 8,495.00
		Totals		\$ 102,049.00	\$ 102,049.00
9102	90	Community Corrections !!			
	00	Community Corrections-#1 Personal Services			
		FICA/Medicare	11107	\$ 281,331.00	\$ 281,331.00
			11171	\$ 21,522.00	\$ 21,522.00
		Group Insurance PERF	11173	\$ 53,791.00	\$ 53,791.00
			11176	\$ 35,729.00	\$ 35,729.00
		Repair and Maintenance	20012	\$ 200.00	\$ 200.00
		Gas & Oil	20021	\$ 800.00	\$ 800.00
		Supplies	20060	\$ 13,500.00	\$ 13,500.00
		Books and Supplements	20062	\$ 3,000.00	\$ 3,000.00
		Travel	30013	\$ 3,000.00	\$ 3,000.00
		Telephone	30014	\$ 3,000.00	\$ 3,000.00
		Training	30017	\$ 2,300.00	\$ 2,300.00
		Contract Services	30051	\$ 116,670.00	\$ 116,670.00
		Dues	30067	\$ 2,000.00	\$ 2,000.00
		Drug Screening	30115	\$ 1,000.00	\$ 1,000.00
		Lease/Bond payment	31003	\$ 4,700.00	\$ 4,700.00
		Totals		\$ 542,543.00	\$ 542,543.00
9105	8	Adult Droto di co O			
0.00	Ü	Adult Protective Serv			
		Personal Services	11107	\$ 162,500.00	\$ 162,500.00
		FICA / Medicare	11171	\$ 12,431.00	\$ 12,431.00
		Group Insurance	11173	\$ 9,884.00	\$ 9,884.00
		PERF	11176	\$ 20,638.00	\$ 20,638.00
		Gas & Oil	20021	\$ 3,000.00	\$ 3,000.00
		Clothing/Linen/Hygeine	20041	\$ 500.00	\$ 500.00
		Supplies	20060	\$ 1,500.00	\$ 1,500.00
		Travel	30013	\$ 3,000.00	\$ 3,000.00
		Telephone	30014	\$ 4,000.00	\$ 4,000.00
		Training	30017	\$ 3,000.00	\$ 3,000.00
		Vehicle Maint	30024	\$ 2,500.00	\$ 2,500.00
		Contract Services	30051	\$ 5,700.00	\$ 5,700.00
		Dues	30067	\$ 300.00	\$ 300.00
		Computer Software	40010	\$ 500.00	\$ 500.00
		Furniture and Fixtures	40011	\$ 1,000.00	\$ 1,000.00
		Equipment	40014	\$ 2,000.00	\$ 2,000.00
		Exam of Records	30123	\$ 200.00	\$ 200.00
		Totals		\$ 232,653.00	\$ 232,653.00

TO: DANNY YOST CLARK COUNTY AUDITOR

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending December 31, 2024.

I, therefore do hereby request you to give notice to the Clark County Council, and public in the manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

FUND NAME: ICJG Victim Assistance Program

	,	,
Budget #	Line-Item Description	Amount
8107-11107-008	Personal Services	\$3601.00
*		SIGNATURE OF PEPARTMENT HEAD
	-	DEPARTMENT
WITNESS: My har	nd and seal thisda	y of
1		Auditor of Clark County, Indiana

Conlen, Megan N						
Supervisor	1	5				
Deemer, Haley R	1	5				s .
TCO Supervisor	1	,				\$ .
Eger, Cassandra L	1	5				,
Assistant Supervisor ICO	1	5				,
Fritz, Susanne R	1	s .				\$ .
Supervisor Hayden, Stephanie A	1	\$.				\$ .
Telecommunications Operator	1	\$.				\$ -
Hebner, Dylan M	1	S .				٠ .
Telecommunications Operator	1	\$ . \$ .				5 .
Levesque, Mark G	1	š .				
Systems Administrator	1	5				5
Looney, Michael J	1	\$ .				š .
Telecommunications Operator Martin, Miranda D	1	5 .				\$ -
Dispatcher	1	\$ -				\$.
McDaniel, Jeremy	1	s .				\$ .
Assistant Supervisor TCO	1	\$.				\$ -
Meixell, Brad A	ì	5 .				\$.
Executive Director	1	š .				5 .
Miller, Jordin N	1	\$.				s .
Assistant Supervisor TCO Pavey, Garry F	1	5 .				\$ -
GIS-Addressing	1	\$ -				5 -
Reef, Adam J		\$ . \$ .				\$.
TCO Supervisor		, . , .				
Reynolds, Shannon M		· .				\$
Telecommunications Operator Rice, William M		s .				\$
Telecommunications Operator		\$.				\$.
Schulte, Kayla K		\$ .				\$ -
Telecommunications Operator	-	ξ.				s -
Selfried, Branden T		\$. \$.				\$ .
Telecommunications Operator	-	, . , .				\$ . \$ .
Shultz, Andrew	-	, .				5 .
Assistant Supervisor Highway Smith, Daniel K	1	s .				\$ .
Assistant Supervisor Highway	1 :	5 -				5 -
Wilson, Branda	1	5.				s -
Telecommunications Operator	1 9					s -
4954	ž s					\$ . \$ .
0003 Treasurer	2 5					\$ 7,000.00
Bekes, Kairlin N 1st Deputy Treasurer	1 5	2,200.00				5 7,000.00
Part Time \$16 per hour	1 5					\$ 2,000.00
Deputy Treasuer	1 5	5,000.00				5 2,000.00
4957	4 5	-,				\$ 5,000.00 \$ 5,000.00
0024 Planning & Zoning	4 5	THE RESERVE AND ADDRESS.	\$ 750.00 \$ 750.00		The second secon	\$ 5,000.00 \$ 99,190.53
Denison, Cathy L	1 5		, ,,,,,,,,		The state of the s	\$ 99,190.53
Executive Director Gettings, Stacy L	1 5	8,355.47				\$ 8,355.47
Planning & Zoning Coordinator	1 5		\$ 750.00			5 8,355.47
Ruction, Greg	1 5 1 5		5 750.00			5 40,840.22
Code Inforcement	1 5	46,350.00				5 40,840.22 5 46,350.00
Stanley, Jason E	1 5	3,644.84				5 46,350.00 \$ 46,350.00
Building Commissioner 4958	1 5	3,644.84				\$ 3,644.84
0005 Police Dept	1 5	150,000.00				5 3,644.84
Various	1 5 1 5	150,000.00			10 miles	\$ 150,000.00
Part-time Road Officers	1 5	150,000.00				\$ 150,000.00
B105	. ,	20,000.00				\$ 150,000.00 \$ 150,000.00
000S Police Dept		20,000.00				\$ 20,000.00
Various		20,000.00			The second secon	\$ 20,000.00
O!ficers Overtime	5	20,000.00				20,000.00
0008 Prosecutor	<u> </u>	A STATE OF THE PARTY OF THE PAR	\$ 3,600.00	a company		20,000.00
Croudep, Carmen F	! <b>S</b>		\$ 3,600.00	****	the state of the s	100,935.00
Victim Advocate	S S	50,985.00				100,935.00
Grady, Sharl L		46,350.00				
Administrative Assistant 1		46,350.00				
DOOR Protection	<u>\$</u>	90,068.00			\$	46,950.00
Goodin Armenus	\$	90,068.00		The second secon	The state of the s	
Second Deputy Prosecuting Attorney	5 5	90,068.00			5	
8109	\$	90,068.00 38,036.00			S S	
0032 Jall 1	\$	38,036.00		2,000.00		
Wilson 1 Administrative Assistant 1	\$	38,036.00 \$	450.00 S	2,000.00 2,000.00	S	with the country and the country and the same
R154	S	38,036.00 \$	450.00 \$	2,000.00	5	
0012 Jail 1		10,000.00			\$	
Various	s	10,000.00				
Officer's Overtime	5	10,000.00			\$	
8160 4	\$	162,103.60			Š	10,000.00
0302 All Courts (Greuit 1) 1 Campbell, Kyra S	S	53,003.60				162,103.60
Care Consideration	S	53,003.60			\$	\$3,003.60
0302 All Courts (Grouit 4)	s \$	53,003.60			\$	53,001.60
Rubadue, Iris E	5	57,100.00 6,100.00			\$ \$	53,003.60
Probation Officer	5	6,100.00			\$	57,100.00 6,100.00
Saffeil, Cynthia A	s	51,000.00		,	s	6,100.00
Care Coordinator 1 0302 All Courts (Magistrate Dept) 1	\$	51,000.00			ş	51,000.00
Manny Lauren M	5	52,000.00			S	\$1,000.00
Administrative Assistant 1	5	57,000.00			s	52,000.00
8204	s s	52,000.00	1 (00		\$	52,000.00
0071 Health Department 3	\$	83,975.00 \$ 83,975.00 \$	3,600.00		\$ \$	52,000.00 87,575.00
			-,500.00		\$	87,575.00

,963	1	Clark County Clerk's C	opy Fund				
		Supplies	20060	\$	5,000.00	\$	F 000 00
y .		Contract Services	30051	\$	5,000.00	\$	5,000.00
7		Equipment	40014	\$	5,000.00	\$	5,000.00
		Totals	10014	\$	15,000.00		5,000.00
				Ψ	15,000.00	\$	15,000.00
4967	369	Jail Treatment Service	Grt Prog				
		Food Items	20043	\$	1 000 00	•	
		Supplies	20043		1,000.00	\$	1,000.00
		Travel	30013	\$	4,000.00	\$	4,000.00
		Training	30017	\$ \$	2,000.00	\$	2,000.00
		Totals	30017		5,000.00	\$	5,000.00
				\$	12,000.00	\$	12,000.00
8104	5	OWI Police Grant					
*FICA/Medic	are/PERF o	Personal Services	11107	•			
not get pa grant/Budgi	id from this eted in #100	o Totals	11107	\$	20,000.00	\$	20,000.00
		· · · · · · · · · · · · · · · · · · ·		\$	20,000.00	\$	20,000.00
8105	5	Big City Big County Gra	nt				
*FICA/Medic	are/PERF d	Personal Services		•			
grant/Budge	d from this eted in #100	Totals	11107	\$	20,000.00	\$	20,000.00
		· otalo		\$	20,000.00	\$	20,000.00
8107	8	ICJG Victim Asst/Pros #2	3				
		Personal Services		•			
		FICA / Medicare	11107	\$	98,100.00	\$	97,335.00
		Group Insurance	11171	\$	7,505.00	\$	7,722.00
		PERF	11173	\$	15,487.00	\$	15,487.00
		Totals	11176	\$	12,459.00	\$	12,819.00
		i otais		\$	133,551.00	\$	133,363.00
8108	8	Domestic Violence #2					
	Ū	Personal Services	4440=				
		FICA / Medicare	11107	\$	65,068.00	\$	65,068.00
		Group Insurance	11171	\$	4,978.00	\$	4,978.00
		PERF	11173	\$	26,479.00	\$	26,479.00
		Totals	11176	\$	8,264.00	\$	8,264.00
		Totals		\$	104,789.00	\$	104,789.00
8109	32	16 588 Ston Grant Deller	D - 4				
		<b>16.588 Stop Grant Police</b> Personal Services					
		FICA / Medicare	11107	\$	38,486.00	\$	38,486.00
		Group Insurance	11171	\$	2,944.00	\$	2,944.00
		PERF	11173	\$	8,980.00	\$	8,980.00
		Totals	11176	\$	4,888.00	\$	4,888.00
		i Otalo		\$	55,298.00	\$	55,298.00
8115	41	School Lunch Grant					
		Food Items					
		Journal Inching	20043	\$	50,000.00	\$	50,000.00

### December 9,2024 Council Meeting

### **REQUISITION FOR ADDITIONAL APPROPRIATION**

TO: Danny Yost, Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following <u>additional</u> appropriation be made for the fiscal year ending December 31, <u>2024</u>.

I, therefore do hereby request you give notice to the Clark County Council, and public in manner required by law that <u>additional</u> appropriations for the fiscal year ending December 31, <u>2024</u> be made for the purpose and department following:

FUND NAME:

Riverboat - 1191

Budget #	Line Item Description	Amount
1191-11107-302 1191-11171-302 1191-11176-302	Personal Services FICA/Medicare Perf	\$46,602.78 \$3,565.11 \$61,302.57

NOV 2 0 2024

VICKI GARMICHAEL, JUDGE GLAPK GRICGER JOURT NO. 4 Signature of Department Head

Presiding Gudge Clark County Mals Department

WITNESS: My hand and seal this \_\_\_\_\_ day of \_\_\_\_\_\_, \_\_\_\_.

Auditor of Clark County, Indiana

# Amendment No. 1 To the Supplemental Information Form For Additional Request From the Clark County General Fund and all other Funds

Are there sufficient funds in the account you are requesting the appropriation from to sustain your request?

Yes.

Why is this appropriation deemed to be an emergency at this time? (Detail your Answer).

These payments are legally required under the federal Uniformed Services Employment and Reemployment Rights Act (USERRA).

Please include an itemized list of purchases, leases, and/or services that this appropriation will be used for. (Detail your answer).

Will the denial of this request prevent your office or department from executing its daily duties?

Yes

If the Additional Appropriation request includes a Salary Ordinance, please list the exact amount of the salary increase, the current salary, and from what fund the salary is being paid from.

N/A

NOTE:

- A. The elected officeholder or department head must appear before the County Council to Explain his/her request.
- B. The Supplement request forms (with amendments) must be signed by the Elected Office holder making the request.
- C. If any part of the supplemental forms (with Amendments) is not in compliance, the Noncompliance will constitute an automatic denial of the request.

Date completed and submitted:

Signature of Elected Officeholder

Year	USERRA Salary	Actual Salary	Calam. O J	C DEDE O			
2012	\$61,525.00	\$44.493.40	Salary Owed	County PERF Owed	Employee PERF Owed	County Share of Empl PERF Calc	County FICA
2013	\$62,767.85	\$ <del>44</del> ,495.40		\$1,405.18	\$511.05		
2014	Section 2015			\$6,119.87	\$1,883.04		
	\$64,559.15			\$7,230.62	\$1,936.77		
2015	\$65,749.85			\$7,363.98	\$1,972.50		
2016	\$67,086.50			\$7,513.69	\$2,012.60		
2017	\$68,949.20			\$7,722.31	\$2,068.48		
2018	\$70,292.15			\$7,872.72	\$1,054.38	\$1,054.38	
2019	\$71,663.45			\$8,026.31	\$1,074.95	\$1,074.95	
2020	\$73,130.30	\$59,685.15	\$6,125.01	\$686.00	\$91.88	\$91.88	\$468.56
2021	\$75,174.65	\$62,636.70	\$12,537.95	\$1,404.25	\$188.07	\$188.07	\$959.15
2022	\$76,226.75	\$64,735.50	\$11,491.25	\$1,287.02	\$172.37	\$172.37	\$879.08
2023	\$78,598.70	\$68,247.90	\$10,350.80	\$1,159.29	\$155.26	\$155.26	\$791.84
2024	\$84,339.05	\$75,013.06	\$6,097.77	\$682.95	\$91.47	\$91.47	\$466.48
Sub-totals			\$46,602.78	\$58,474.19	\$13,212.80	\$2,828.38	\$3,565.11
		Total Approp.	Salary Owed	County PERF Total			County FICA
		\$111,470.46	\$46,602.78	\$61,302.57			\$3,565.11
Total Approp.	\$111,470.46						
							-
	USERRA Salary	Partial Year USERRA	Actual Salary	Salary Paid			
2020	\$73,130.30	\$33,314.90	\$59,685.15	\$27,189.89			

# December 9,2024 Council Heeting

### REQUISITION FOR ADDITIONAL APPROPRIATION

TO: Danny Yost, Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following <u>additional</u> appropriation be made for the fiscal year ending December 31, <u>2024</u>.

I, therefore do hereby request you give notice to the Clark County Council, and public in manner required by law that <u>additional</u> appropriations for the fiscal year ending December 31, <u>2024</u> be made for the purpose and department following:

FUND NAME: Rainy Day - 1186

Budget #	Line Item Description	Amount
1186-11107-302 1186-11171-302 1186-11176-302	Personal Services FICA/Medicare Perf	\$46,602.78 \$3,565.11 \$61,302.57

Tree Leave Comment

NOV 2 0 2024

VICKI CARMICHAFI. JUDGE CLARK CIRCU. SUICCEO. 4 Signature of Department Head

Presiding Gudge April Co Cours
Department

WITNESS: My hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_

Auditor of Clark County, Indiana

# Amendment No. 1 To the Supplemental Information Form For Additional Request From the Clark County General Fund and all other Funds

Are there sufficient funds in the account you are requesting the appropriation from to sustain your request?

Yes.

Why is this appropriation deemed to be an emergency at this time? (Detail your Answer).

These payments are legally required under the federal Uniformed Services Employment and Reemployment Rights Act (USERRA).

Please include an itemized list of purchases, leases, and/or services that this appropriation will be used for. (Detail your answer).

Will the denial of this request prevent your office or department from executing its daily duties?

Yes

If the Additional Appropriation request includes a Salary Ordinance, please list the exact amount of the salary increase, the current salary, and from what fund the salary is being paid from.

N/A

### NOTE:

- A. The elected officeholder or department head must appear before the County Council to Explain his/her request.
- B. The Supplement request forms (with amendments) must be signed by the Elected Office holder making the request.
- C. If any part of the supplemental forms (with Amendments) is not in compliance, the Noncompliance will constitute an automatic denial of the request.

Date completed and submitted:

Signature of Elected Officeholder

Year	USERRA Salary	Actual Salary	Salary Owed	County PERF Owed	Employee PERF Owed	County Share of Empl PERF Calc	County FICA
2012 <sub>:</sub>	\$61,525.00	\$44,493.40		\$1,405.18	\$511.05		
2013	\$62,767.85			\$6,119.87	\$1,883.04		
2014	\$64,559.15			\$7,230.62	\$1,936.77		
2015	\$65,749.85			\$7,363.98	\$1,972.50		
2016	\$67,086.50			\$7,513.69	\$2,012.60		
2017	\$68,949.20			\$7,722.31	\$2,068.48		7
2018	\$70,292.15			\$7,872.72	\$1,054.38	\$1,054.38	
2019	\$71,663.45			\$8,026.31	\$1,074.95	\$1,074,95	
2020	\$73,130.30	\$59,685.15	\$6,125.01	\$686.00	\$91.88	\$91.88	\$468.56
2021	\$75,174.65	\$62,636.70	\$12,537.95	\$1,404.25	\$188.07	\$188.07	\$959.15
2022	\$76,226.75	\$64,735.50	\$11,491.25	\$1,287.02	\$172.37	\$172.37	\$879.08
2023	\$78,598.70	\$68,247.90	\$10,350.80	\$1,159.29	\$155.26	\$155.26	\$791.84
2024	\$84,339.05	\$75,013.06	\$6,097.77	\$682.95	\$91.47	\$91.47	\$466.48
							N. B. GERSTON P. P. S.
Sub-totals			\$46,602.78	\$58,474.19	\$13,212.80	\$2,828.38	\$3,565.11
		Total Approp.	Salary Owed	County PERF Total			County FICA
		\$111,470.46	\$46,602.78	\$61,302.57			\$3,565.11
Total Approp.	\$111,470.46						
	<b>USERRA Salary</b>	Partial Year USERRA	Actual Salary	Salary Paid			
2020	\$73,130.30	\$33,314.90	\$59,685.15	\$27,189.89			
			**************************************	,,			
2024	\$84,339.05	\$55,144.81	\$75,013.06	\$49,047.04			
			15 55				

• 00

### **REQUISITION FOR TRANSFER OF APPROPRIATIONS**

Danny Yost; Auditor Clark County, Indiana

WHEREAS, due to an extraordinary emergency it is necessary that the following transfer of Funds be made for the fiscal year ending December 31, 2024.

I, therefore do hereby request you to give to the Clark County Council in the manner required by law that Transfer of Funds for the fiscal year ending December 31, 2024 for the purpose and department following:

FROM:	Supplies	#8891-20060-302	\$ 2,488.60					
TO:	Training	#8891-30017-302	\$ 1,976.60					
	Travel	#8891-30013-302	\$ 512.00					
ED O. (	a .:	W0100 000 00 000	<b>.</b>					
FROM:	Supplies	#9130-20060-302	\$ 90.00					
TO:	Drug Screeni	ng #9130-30115-302	\$ 90.00					
DEPARTMENT HEAD								
		_Clark County Addi	ction Treatment and Support DEPARTMENT					
WITNESS: 1	My hand and se	al thisday of	·					

Auditor of Clark County, Indiana

TO: Danny Yost, Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending 2024.

I, therefore do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

Budget #	Line Item Description	Amount
#9142-30017-369	Training	\$5,000.00

Department Head

WITNESS: My hand and seal this \_\_\_\_ day of\_\_\_\_\_\_\_\_\_\_\_.

TO: Danny Yost, Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending 2024.

I, therefore do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

Budget #	Line Item Description	Amount
#9142-11176-369	PERF	\$250.00

Department Head

WITNESS: My hand and seal this \_\_\_ day of\_\_\_\_\_,

TO: DANNY YOST
CLARK COUNTY AUDITOR

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending December 31, 2024.

I, therefore do hereby request you to give notice to the Clark County Council, and public in the manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

FUND NAME: Pretrial

Budget # 9142	Line-Item Description 11107-369 (Personal Services)	Amount \$58
9142	11171-369 (FICA/ Medicare)	\$3,632.66
9142	11173-369 (Group Insurance)	\$2,000.00
9142	11176-369 (PERF)	\$2,000.00
	James	x Hayden
	SIGNATURE	OF DEPARTMENT HEAD
	V	Pretrial
		Department
WITNESS: My ha	and and seal thisday of _	
	-	Auditor of Clark County, India

TO: Danny Yost, Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following <u>additional</u> appropriation be made for the fiscal year ending December 31, <u>2024</u>.

I, therefore do hereby request you give notice to the Clark County Council, and public in manner required by law that <u>additional</u> appropriations for the fiscal year ending December 31, <u>2024</u> be made for the purpose and department following:

FUND NAME: 9117 – Circuit Court 2 Drug Court - PI

Budget #	Line Item Description	Amount
9117-20060-369	Supplies	\$2,873.78
9117-40011-369	Furniture	\$4,000.00

Signature of Department Head

CLARK BOARD OF JUDGES

Department

WITNESS: My hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_.

### Amendment No. 1 To the Supplemental Information Form For Additional Request From the Clark County General Fund and all other Funds

Are there sufficient funds in the account you are requesting the appropriation from to sustain your request?
Yes

Why is this appropriation deemed to be an emergency at this time? (Detail your Answer).

This is money carried over from an old Circuit Court 2 Drug Court Project Income fund.

Please include an itemized list of purchases, leases, and/or services that this appropriation will be used for. (Detail your answer).

Desks, bookshelves and supplies

Will the denial of this request prevent your office or department from executing its daily duties?

If the Additional Appropriation request includes a Salary Ordinance, please list the exact amount of the salary increase, the current salary, and from what fund the salary is being paid from.

N/A

#### NOTE:

- A. The elected officeholder or department head must appear before the County Council to Explain his/her request.
- B. The Supplement request forms (with amendments) must be signed by the Elected Office holder making the request.
- C. If any part of the supplemental forms (with Amendments) is not in compliance, the Noncompliance will constitute an automatic denial of the request.

Date completed and submitted:

Signature of Elected Officeholder

#### **REQUISITION FOR TRANSFER OF FUNDS** REQUIRES COUNCIL APPROVAL

Danny Yost; Auditor Clark County, Indiana

WHEREAS, due to an extraordinary emergency it is necessary that the following transfer of Funds be made for the fiscal year ending December 31, 2024..

I, therefore do hereby request you to give to the Clark County Council in the manner required by law that Transfer of Funds for the fiscal year ending December 31, 2024 for the purpose and department following:

FROM:	1000 20021 041	GAS	\$180.14
FROM:	1000 20035 041		\$120.09
FROM.:	1000 20041 041		\$1690.73
FROM:	1000 20042 041	KITCHEN	\$266.73
FROM:	1000 20060 041	SUPPLIES	\$372.87
FROM:	1000 20064 041	JANITORIAL SUPPLIES	\$643.77
FROM:	1000 30013 041	TRAVEL	\$1406.94
FROM:	1000 30014 041	TELEPHONE	\$690.78
FROM:	1000 30024 041	VEHICLE MAIN	\$1123.05
FROM:	1000 30031 041	SCHOOLS	\$5094.25
FROM:	1000 30038 041	VEHICLE INS	\$350.00
FROM:	1000 30051 041	CONTRACT SERVICES	\$5347.70
FROM:	1000 30054 041	EQUIP REPAIR	\$2000.00
FROM:	1000 30070 041	NURSING SERVICES	\$2000.00
FROM:	1000 30094 041	MEALS	\$5000.00
FROM:	1000 30099 041	PHYSICIANS	\$2400.00
FROM:	1000 30107 041	FREIGHT	\$204.49
FROM:	1000 40014 041	EQUIPMENT	\$1551.77
		TOTAL	\$30,443.31
TO:	1000 11105 041	HOURLY SERVICES	\$30,443.31
			R SNAWDER OF DEPARTMENT HE
		2201.1110101	

EAD

	Clark County Juvenile Detention
	DEPARTMENT
WITNESS:	My hand and seal this 19TH Day OF NOVEMBER, 2024

TO: Danny Yost, Auditor CLARK COUNTY, INDIANA

**FUND NAME: 4915 PROJECT INCOME** 

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending 2024.

I, therefore do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

Budget #	<b>Line Item Description</b>	Amount
4915 11105 041	PERSONAL SERVICES H	IOURLY \$40,000
Retro to the Oct	ober 30, 2024 payroll.	
4915 40010 041	COMPUTER SOFTWARI	E \$14,500
	<u> </u>	er Snauder
	DIRECT	OR
WIT	TNESS: My hand and seal thi	is day of,
	Auditor	of Clark County, Ind

## Amendment No. 1 To the Supplemental Information Form For Additional Appropriation Request From the Clark County General Fund and all other Funds

Are there sufficient funds in the account you are requesting the appropriations from to sustain your request? YES

Why is this appropriation deemed to be an emergency at this time? (Detail your Answer) The detention center is out of part time money and our data base is currently crashing.

Please include an itemized list of purchases, leases, and/or services that this appropriation will be used for. (Detail your answer) Hourly payroll and installing the Quest data base.

Will the denial of this request prevent your office or department from executing its daily duties? YES

If the Additional Appropriation request includes a Salary Ordinance, please list the exact amount of the salary increase, the current salary, and from what fund the salary is being paid from. Attached!

NOTE:

- A. The elected officeholder or department head must appear before the County Council to Explain his/her request.
- B. The Supplement request forms (with amendments) musts be signed by the Elected Office holder making the request.
- C. If any part of the supplemental forms (with Amendments) is not in compliance, the Noncompliance will constitute an automatic denial of the request.

Date completed and submitted:

11/20/2024

Signature of DIRECTOR

### **GKT Consulting Inc**

7581 Beech Hill Road, Pulaski, TN 38478 260-849-0965



#### **Estimate**

Name / Address
Clark County Juvenile Detention Center 609 Meigs Avenue Jeffersonville, IN 47130

Date	Estimate #
7/30/2024	1415

Description	Total
Install and Configure Quest for Detention Staff On-Site Training and Support 5 days 6 Concurrent Licenses for Quest at \$750 annually per license (payable to Gottlieb & Wertz)	5,000.00 5,000.00 4,500.00
Total	\$14,500.00

The above prices, specifications, and conditions are satisfactory and hereby accepted. You are authorized to do the work as specified.

Jennefer Snauder		
Customer Signature	Date	

FUND	4915	
Location	41	

### STATEMENT OF SALARIES AND WAGES PROPOSED TO BE PAID OFFICERS AND EMPLOYEES CALENDAR YEAR 2024

	DDG 1507 11100115	CALE	NDAK YEAK	_2024							
FUND NAME	PROJECT INCOME			-		CLARK CC	DUNTY, INDIANA	A .			
LOCATION NAME	LE DETENTION	-		Effective Date		2024 PAYROLL	_				
	own the calaries proposed to b	o noid to	- officers and				- 1	1			
agency during the calendar	ows the salaries proposed to by year 2023 in accordance esta	be paid to ablished b	by the Clark C	employees fol County Council	r the above I.	named offic	e, department, bo	oard, or			
	FULL TIME	SALARI	IED OFFICER	RS AND EMPI	LOYEES						
			LIDDENT UC	URLY RATE	2024				T		
TITLE OF POSITION	NAME		OKKENI HC	OKLI KAIE	2024		T			T	1
PART TIME HOURLY	SARAH WHOBREY FERNANDEZ		40.00	<u> </u>	-						<del>                                     </del>
PART TIME CORR OFFICER	TAYLOR KELLY		19.00 18.25					-			-
PART TIME CORR OFFICER	TRE WIMBUSH		18.00		<b> </b>						-
PART TIME CORR OFFICER	DESMOND BROWN										
PART TIME CORR OFFICER	TOMMIE COOK		17.50								-
PART TIME CORR OFFICER	NICK CAMPBELL		17.00								-
PART TIME CORR OFFICER	VICTORIA CLARKE		19.50								<del> </del>
PART TIME CORR OFFICER			17.00								-
PART TIME CORR OFFICER	JENNIFER SWANSON		19.00								<del>                                     </del>
PART TIME CORR OFFICER	DNISHA BARTEE MHADRJA HAMILTON		17.00								-
PART TIME CORR OFFICER	JOHNATHAN GOSSETT		17.25								+-
PART TIME CORR OFFICER			17.00								-
PART TIME CORR OFFICER	MASON HARRIS		17.00								+
PART TIME CORR OFFICER	MARK JOHNSON		17.00								1
	JASMINE STOCKTON		17.00								-
PART TIME CORR OFFICER	SHEILA JOHNSON		17.00								
PART TIME CORR OFFICER	TAD MARCHIONE		17.00								┼
	Total for Freed										1
CONTRAINING OF MARCO APPR	Total for Fund	L			0.00		L		JL	0.00	
SCM TRAINERS GET \$1500 ADDI	ED TO THEIR SALARY PER YEAR. Red			o. ATED EMPLO	VEEC						
	PARTIII	VIE AND			TEES						٦
TITLE OF POSITION	NAME	Rate of	Current R	T	Rate of Pay	Proposed	1	Appro	ved Rate by	Council Total \$	1
TITLE OF POSITION	NAME	Pav Per		Total \$ Current	Per Hour		Total \$ Proposed	Per Hour		Proposed	-
									-	-	-
											-
									ļ		-
1	Total for Fund			0.00			0.00				
			\$	Submitted By:	-	JENNIF	ER SNAWDER		-		
November 20, 2024	-	1	g G		A						
		WHY	fer c	THAQUE	Jak)	D	IRECTOR		-		
	V	(	J		Clark Coun	ty, Indiana					
		CERTIFI	ICATE OF CO	UNTY AUDITO	R						
I hereby certify that on t	he day of	, 20	0 , the Cou	inty Council ad	dopted an o	rdinance wh	nich included the	fixing of sala	aries and wad	ies	
	orm in the amounts as approve	ed.								g committee	
Date:											
	-					Cou	unty Auditor	*****	-		

TO: Danny Yost, Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending 2024.

I, therefore do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

**FUND NAME: 1191 RIVERBOAT** 

Budget #	Line Item Description	Amount	•
	PERSONAL SERVICES Hober 30, 2024 payroll.	OURLY \$40,000	
1191 40010 041	COMPUTER SOFTWARE	\$14,500	

DIRECTOR

WITNESS: My hand and seal this \_\_\_ day of\_\_\_\_\_,

### Amendment No. 1 To the Supplemental Information Form For Additional Appropriation Request From the Clark County General Fund and all other Funds

Are there sufficient funds in the account you are requesting the appropriations from to sustain your request? YES

Why is this appropriation deemed to be an emergency at this time? (Detail your Answer) The detention center is out of part time money and our data base is currently crashing.

Please include an itemized list of purchases, leases, and/or services that this appropriation will be used for. (Detail your answer) Hourly payroll and installing the Quest data base.

Will the denial of this request prevent your office or department from executing its daily duties? YES

If the Additional Appropriation request includes a Salary Ordinance, please list the exact amount of the salary increase, the current salary, and from what fund the salary is being paid from. Attached!

NOTE:

- A. The elected officeholder or department head must appear before the County Council to Explain his/her request.
- B. The Supplement request forms (with amendments) musts be signed by the Elected Office holder making the request.
- C. If any part of the supplemental forms (with Amendments) is not in compliance, the Noncompliance will constitute an automatic denial of the request.

Date completed and submitted:

11/22/2024

Signature of DIRECTOR

- Jennyer c

FUND	1191	
Location	41	

### STATEMENT OF SALARIES AND WAGES PROPOSED TO BE PAID OFFICERS AND EMPLOYEES CALENDAR YEAR 2024

		CALE	NDAR YEA	R <u>2024</u>							
FUND NAME	RIVERBOAT					CLARK COL	JNTY, INDIAN	Α			
LOCATION NAME	LE DETENTION	-		Effective Da		/2024 PAYROLL					
The following statement sh	nows the salaries proposed to	he naid to	officers an	d ampleyees fe							
agency during the calenda	r year 2023 in accordance esta	ablished t	by the Clark	County Counc	il.	e named office,	department, t	ooard, or			
	FULL TIME	SALARI	ED OFFICE	RS AND EMP	LOYEES						
		С	URRENT H	OURLY RATE	2024						
TITLE OF POSITION	NAME								1	T	T
PART TIME HOURLY	SARAH WHOBREY FERNANDEZ		19.00								十
PART TIME CORR OFFICER	TAYLOR KELLY		18.25						-		+
PART TIME CORR OFFICER	TRE WIMBUSH		18.00						<b>—</b>		+
PART TIME CORR OFFICER	DESMOND BROWN		17.50						1		+
PART TIME CORR OFFICER	TOMMIE COOK		17.00							+	+
PART TIME CORR OFFICER	NICK CAMPBELL		19.50						<b> </b>		+-
PART TIME CORR OFFICER	VICTORIA CLARKE		17.00							+	+
PART TIME CORR OFFICER	JENNIFER SWANSON		19.00						-	-	+
PART TIME CORR OFFICER	DNISHA BARTEE								<u> </u>		+
PART TIME CORR OFFICER	MHADRJA HAMILTON		17.00							-	+
PART TIME CORR OFFICER	JOHNATHAN GOSSETT		17.25		-				-	-	+
PART TIME CORR OFFICER	MASON HARRIS		17.00						<del> </del>	-	+-
PART TIME CORR OFFICER			17.00	-		-					+
PART TIME CORR OFFICER	MARK JOHNSON		17.00						-		+
PART TIME CORR OFFICER	JASMINE STOCKTON		17.00						-		+
PART TIME CORR OFFICER	SHEILA JOHNSON		17.00	-							_
THE CORR OFFICER	TAD MARCHIONE		17.00	·					-		$\perp$
				-	-				ļ		_
SCM TRAINERS CET 64500 ADDE	Total for Fund				0,00			Table Simbook See		0.00	
OCM TRAINERS GET \$1500 ADDE	D TO THEIR SALARY PER YEAR. Red										
	PART III	ME AND I	HOURLY RA	ATED EMPLO	YEES						_
TITLE OF POSITION	n n	Rate of	Current F			Proposed Rate		Approved Rate by Council		Council	
TITLE OF POSITION	NAME	Pav Per		Total \$ Current	Rate of Pay Per Hour	Т	otal \$ Proposed	Rate of Pay Per Hour		Total \$ Proposed	1
											1
											September
	Total for Fund			0.00			0.00				
											9
	Maria Comment			Submitted By:		JENNIFER	SNAWDER				
November 20, 2024	flowne	Ler.	On	auntas	1				ţ		
	0.	$\mathcal{O}^{-}$		Title:		DIRE	CTOR				
					Clark County	y, Indiana			ř.		
		CERTIFIC	ATE OF CO	UNTY AUDITO	R						
I hereby certify that on th											
of the employees on this for	m in the amounts as approve	, 20_ d.	, the Cou	nty Council ad	opted an or	dinance which	included the	fixing of salar	ries and wag	es	
ate:											
						County	Auditor				

TO: Danny Yost, Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending 2024.

I, therefore do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

**FUND NAME: 1186 RAINY DAY** 

Budget #	Line Item Description	Amount
	PERSONAL SERVICES Fober 30, 2024 payroll.	IOURLY \$40,000
1186 40010 041	COMPUTER SOFTWARI	E \$14,500

Jennyer Snawder

WITNESS: My hand and seal this \_\_\_ day of\_\_\_\_\_,\_\_\_

### Amendment No. 1 To the Supplemental Information Form For Additional Appropriation Request From the Clark County General Fund and all other Funds

Are there sufficient funds in the account you are requesting the appropriations from to sustain your request? YES

Why is this appropriation deemed to be an emergency at this time? (Detail your Answer) The detention center is out of part time money and our data base is currently crashing.

Please include an itemized list of purchases, leases, and/or services that this appropriation will be used for. (Detail your answer) Hourly payroll and installing the Quest data base.

Will the denial of this request prevent your office or department from executing its daily duties? YES

If the Additional Appropriation request includes a Salary Ordinance, please list the exact amount of the salary increase, the current salary, and from what fund the salary is being paid from. Attached!

NOTE:

- A. The elected officeholder or department head must appear before the County Council to Explain his/her request.
- B. The Supplement request forms (with amendments) musts be signed by the Elected Office holder making the request.
- C. If any part of the supplemental forms (with Amendments) is not in compliance, the Noncompliance will constitute an automatic denial of the request.

Date completed and submitted:

11/22/2024

Signature of DIRECTOR

- Jennyer Snauder

FUND	1186

### STATEMENT OF SALARIES AND WAGES PROPOSED TO BE PAID OFFICERS AND EMPLOYEES CALENDAR YEAR 2024

	7 1101 002	CALE	NDAR YEA	R <u>2024</u>	IPLOYEES					
FUND NAME	RAINY DAY					CLARK C	OUNTY, INDIAN	NA.		
FUND NAME				_						
041 JUVENII LOCATION NAME	LE DETENTION	_		RETRO 10/07		0/2024 PAYROLL	-			
The following statement sha	ows the salaries proposed to	n he naid t	o officers an	d						
agency during the calendar	year 2023 in accordance es	stablished	by the Clark	County Counc	il.	e nameo omo	ce, department,	board, or		
	FULL TIM	IE SALAR	IED OFFICE	RS AND EMP	LOYEES					
			URRENT H	OURLY RATE	2024					
TITLE OF POSITION	NAME							T		T
PART TIME HOURLY	SARAH WHOBREY FERNANDE	z	19.00							
PART TIME CORR OFFICER	TAYLOR KELLY		18.25						-	
PART TIME CORR OFFICER	TRE WIMBUSH		18.00							<del> </del>
PART TIME CORR OFFICER	DESMOND BROWN		17.50							
PART TIME CORR OFFICER	TOMMIE COOK		17.00						<del> </del>	<u> </u>
PART TIME CORR OFFICER	NICK CAMPBELL		19,50							
PART TIME CORR OFFICER	VICTORIA CLARKE		17.00					T		+
PART TIME CORR OFFICER	JENNIFER SWANSON		19.00							-
PART TIME CORR OFFICER	DNISHA BARTEE		17.00				-		1	
PART TIME CORR OFFICER	MHADRJA HAMILTON		17.25							
PART TIME CORR OFFICER	JOHNATHAN GOSSETT		17,00							
PART TIME CORR OFFICER	MASON HARRIS		17.00							
PART TIME CORR OFFICER	MARK JOHNSON		17.00							
PART TIME CORR OFFICER	JASMINE STOCKTON		17.00							
PART TIME CORR OFFICER	SHEILA JOHNSON		17.00					<del> </del>		
PART TIME CORR OFFICER	TAD MARCHIONE		17.00							-
	Total for Fund				0.00					
SCM TRAINERS GET \$1500 ADDED	D TO THEIR SALARY PER YEAR, R	ed Cross train	er additional 150	00.						0.00
				ATED EMPLO	YEES					
										NAME OF TAXABLE PARTY O
TITLE OF POSITION	NAME	Rate of	Current F	Total \$ Current	Rate of Pay	Proposed	Rate Total \$ Proposed		ed Rate by	Council Total \$
		Pav Per			Per Hour		Total \$ Floposed	Per Hour		Proposed
	Total for Fund									
	. s			0.00	-	190	0.00			
	Jen	Ou la		dishmitted Du						
November 20, 2024	( )	STATE.		PHILLEY		JENNIFE	ER SNAWDER			
	W	Same		Title:						
				5 400			RECTOR			
					Clark Count	y, Indiana				
		0=====		. Water and the second second	8					
I Frank		CERTIFIC	ATE OF CO	UNTY AUDITO	₹					
I hereby certify that on the of the employees on this form	m in the amounts as approve	, 20_	, the Cou	nty Council ad	opted an or	dinance whi	ch included the	fixing of salar	ies and wag	es
, , , , , , , , , , , , , , , , , , , ,	are amounts as approve	eu.							•	
ate:										
				-		Cour	nty Auditor			

TO: Danny Yost; Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending December 31, 2024.

I, therefore, do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

#### FUND NAME Public Defender Supplemental Fund

Budget #	Line-Item Description	<u>Amount</u>
4906-11107-040 4906-11171-040 4906-11176-040	Personal Services FICA/Medicare PERF	\$23,383.00 \$1,788.80 \$2,969.64

Signature of Department Head Public Defender Department

WITNESS: My hand and seal this	day of	,
	Auditor of Clark County	Indiana

## Amendment No. 1 To the Supplemental Information Form For Additional Appropriation Request From the Clark County General Fund and all other Funds

Are there sufficient funds in the account you are requesting the appropriations from to sustain your request?

Yes

Why is this appropriation deemed to be an emergency at this time? (Detail your Answer)

This appropriation is deemed to be an emergency at this time due to the budget having been approved prior to the passage of the 2024 salary ordinance. Ultimately, the salary ordinance included substantial raises which were not accounted for in the previously approved budget and therefore have resulted in this budget shortfall.

Please include an itemized list of purchases, leases, and/or services that this appropriation will be used for. (Detail your answer)

- Payroll for all in-house attorneys and support staff
- FICA, Medicare, and PERF benefits

Will the denial of this request prevent your office or department from executing its daily duties?

Yes

If the Additional Appropriation request includes a Salary Ordinance, please list the exact amount of the salary increases, the current salary, and from what fund the salary is being paid from.

#### NOTE:

- A. The elected officeholder or department head must appear before the County Council to Explain his/her request.
- B. The Supplement request forms (with amendments) must be signed by the Elected Office holder making the request.
- C. If any part of the supplemental forms (with Amendments) is not in compliance, the Noncompliance will constitute an automatic denial of the request.

Date completed and submitted:

November 22, 2024

Signature of Elected Officeholder

TO: Danny Yost; Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending December 31, 2024.

I, therefore, do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

#### FUND NAME Public Defender Supplemental Fund

Budget #	Line-Item I	<u>Description</u>	<u>Amount</u>
4906-30051-040	Contract Se	ervices	\$9,500.00
		Alida We	Sa
		Signature of Department Public Defender Departm	
WITNESS: My hand and seal t	his	_day of	
		Auditor of Clark Count	y, Indiana

TO: Danny Yost; Auditor

CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending December 31, 2024.

I, therefore, do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

#### FUND NAME Public Defender County General

Budget #	Line-Item I	Description	Amount
1000-30051-040	Contract Services		\$9,500.00
		,	
		Signature of Department	Sa
		Signature of Department Public Defender Departm	Head nent
WITNESS: My hand and seal th	nis	_day of	·
		A I'm COLLEG	
		Auditor of Clark Count	y, Indiana

## Amendment No. 1 To the Supplemental Information Form For Additional Appropriation Request From the Clark County General Fund and all other Funds

Are there sufficient funds in the account you are requesting the appropriations from to sustain your request?

Yes

Why is this appropriation deemed to be an emergency at this time? (Detail your Answer

This appropriation is deemed to be an emergency at this time due to the Public Defender's office having contractual obligations for services rendered which it will be unable to meet without an additional appropriation prior to the end of the calendar year.

Please include an itemized list of purchases, leases, and/or services that this appropriation will be used for. (Detail your answer)

- Contract pay and insurance
- Appeal claims
- Private investigators
- Water cooler rental

Will the denial of this request prevent your office or department from executing its daily duties?

Yes

If the Additional Appropriation request includes a Salary Ordinance, please list the exact amount of the salary increases, the current salary, and from what fund the salary is being paid from.

#### NOTE:

- A. The elected officeholder or department head must appear before the County Council to Explain his/her request.
- B. The Supplement request forms (with amendments) musts be signed by the Elected Office holder making the request.
- C. If any part of the supplemental forms (with Amendments) is not in compliance, the Noncompliance will constitute an automatic denial of the request.

Date completed and submitted:

9/12/2024

Signature of Elected Officeholder

TO: Danny Yost; Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending December 31, 2024.

I, therefore, do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2024 be made for the purpose and department following:

#### FUND NAME Public Defender County General

Budget #	Line-Item Description	<u>Amount</u>
1000-11107-040 1000-11171-040 1000-11176-040	Personal Services FICA/Medicare PERF	\$63,100.14 \$4,827.16 \$8,013.72

Signature of Department Head Public Defender Department

WITNESS: My hand and seal this	day of,
	Auditor of Clark County, Indiana

TO: Auditor CLARK COUNTY, INDIANA

WHEREAS, due to an extraordinary emergency it is necessary that the following additional appropriation be made for the fiscal year ending 2024

I, therefore do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal year ending December 31, 2014 seemed for the purpose and department following:

FUND NAME:	# 4954 -	TREASURE'S A	low Reverting
Budget # 4954-30051-003	Line Item D  TAX SAle  Services  TAX SAle	4 LEGAL FOR 2024	Amount \$ 41,852.
	1 :	Signature of Dep Reasure N Department	
WITNESS: My ha	and and seal this	8 day of N	ovember, 2024

## Amendment No. 1 To the Supplemental Information Form For Additional Appropriation Request From the Clark County General Fund and all other Funds

Are there sufficient funds in the account you are requesting the appropriations from to sustain your request? YES

Why is this appropriation deemed to be an emergency at this time? (Detail your Answer) Needed to Pay Tax Sale charges for 2024 Tax sale Appropriation was never required in the past.

Please include an itemized list of purchases, leases, and/or services that this appropriation will be used for. (Detail your answer) SRT Tax sarvices

Bucharas & Bruggerschmid, P.C.

Will the denial of this request prevent your office or department from executing its daily duties? 'Yes

If the Additional Appropriation request includes a Salary Ordinance, please list the exact amount of the salary increase, the current salary, and from what fund the salary is being paid from.

#### NOTE:

- A. The elected officeholder or department head must appear before the County Council to Explain his/her request.
- B. The Supplement request forms (with amendments) musts be signed by the Elected Office holder making the request.
- C. If any part of the supplemental forms (with Amendments) is not in compliance, the Noncompliance will constitute an automatic denial of the request.

Date completed and submitted:

Signature of Elected Officeholder

STATE OF INDIANA )
) SS:
COUNTY OF CLARK )

IN THE MATTER OF THR CLARK COUNTY RECORDER'S PERPETUATION FUND ESTABLISHED UNDER I.C. 36-2-7-10(F)

#### **SWORN STATEMENT OF STEVE GILL, CLARK COUNTY RECORDER**

Steve Gill, the duly elected Clark County Recorder, submits his own sworn statement to the Clark County Council pursuant I.C. 36-2-7-10.2(b) in order that the Clark County Recorder may pay all or portion of the expenses of the of the Clark County Recorder's Office for the calendar year 2025 from the Recorder's Perpetuation Fund established under I.C. 36-2-7-10(f). Under penalties of perjury and under oath, Steve Gill, Clark County Recorder, states the following:

- A: The current revenue to the fund is sufficient to fulfill the statutory purpose of the fund:
- B: The technology of the County Recorder's Office is presently updated and at a level to sufficiently meet the statutory purpose of the fund of the County Recorder's Office:
- C: The fund has sufficient reserves, consistent with the Recorder's plan, to capitalize the next technology or other records management upgrade necessary to fulfill the statutory purpose of the fund in the County Recorder's Office:
- D: The County Recorder specifically request that the fund be used to pay the expenses of the County Recorder's Office for the calendar year 2025 as follows:

E: Personal Services in the amount of \$241,210.00

F: Office Expenses in the amount of \$73,740.00

Total Fund: \$314,950.00

Dated: 11-1-2024

Signed: Steel Self

Steve Gill, Clark County Recorder

I, Steve Gill, affirm. Under the penalties of perjury, that the foregoing representations are true.

Steve Gill, Clark County Recorder

STATE OF INDIANA )

) SS:

COUNTY OF CLARK)

Before me. A Notary Public, in and for said County (Clark) and State (Indiana), personally appeared Steve Gill and acknowledged the execution of the above and foregoing document to be voluntary act and deed under oath.

Witness my hand and notarial seal the 18 day of November 2024

My Commission Expires: Hugust

County Of Residence:

SABRINA CORBIN
Notary Public, State of Indiana
Clark County
Commission Number NP0743347
My Commission Expires
August 29, 2030

Notary Public

# CLARK COUNTY COUNCIL ORDINANCE NO. \_\_\_\_\_ ORDINANCE APPROVING RECORDER'S REQUEST TO USE THE COUNTY RECORDER'S RECORDS PERPETUATION FUND TO SUPPORT ALL OPERATING EXPENCES FOR 2025

WHEREAS, I.C. 36-2-1-10.2 permits an Indiana Recorder to pay all or a portion of the expenses of the County Recorder's Office from the County Recorder's Records Perpetuation fund; and

WHEREAS, the Clark County Recorder has submitted a sworn statement the current revenue to the fund is sufficient to fulfill the statutory purpose of the fund; and

WHEREAS, the Clark County Recorder has submitted a sworn statement that the fund has a sufficient reserve consistent with the Recorder's plan to capitalize the next technology or other records management upgrade necessary to fulfill the statutory purpose of the fund and the Clark County Recorder has specifically requested that the fund be used to pay the expenses of the Clark County Recorder for the 2025 calendar year.

NOW THEREFORE, BE IT RESOLVED AND ORDAINED AS FOLLOWS:

The Clark County Council now having received the Clark County Recorder's sworn statement, hereby adopts this Ordinance approving the Clark County Record's request to utilize the County Recorder's Records Perpetuation Fund to pay the expenses of the Clark County Recorder's Office for the 2025 calendar year in the amount as follows:

Personal Services \$241,210.00

Office Operating Expenses \$73,740.00

Total Fund \$314,950.00

Pass and adopted by the County Council of Clark County, Indiana this	day of
, 2024	

COUNTY COUNCIL OF CLARK COUNTY, INDIANA:

TO:	Danny Yost, Auditor CLARK COUNTY, INDIANA			
Whereas, due to an extraordinary emergency it is necessary that the following Additional appropriation be made for the fiscal year ending December 31, 2024.				
I, therefore do hereby request you to give notice to the Clark County Council, and public in manner required by law that additional appropriations for the fiscal Year ending December 31, 2024 be made for the purpose and department following:				
FUND	NAME: <u>Election Board</u>			
	Budget #	Line Item Description	<u>Amount</u>	
	1000.30051.000.0025	Contact Services	\$18,000.00	
		A I		
	Ryan Lynch			
		Signature of Department Head		
		Department	· · · · · · · · · · · · · · · · · · ·	
WITN	ESS: My hand and seal this 21 <sup>t</sup>	h day of November, 2024		

Volume 440, Page 11 March 2024

#### **COUNTY DEPARTMENTAL BANK ACCOUNTS**

There are several departments throughout the county that may have bank accounts. The county treasurer should be aware of the number of accounts opened and which departments are authorized (by council) to have their own bank account. Having a bank account allows a department to collect fees throughout the month and make their daily deposits to the bank instead of the treasurer. Additional departmental duties include but not limited to the following:

- Daily deposits are required per IC 5-13-6-1.
- Maintain a ledger of receipts, disbursements, and balances.
- The department will need to reconcile the ledger to the bank account every month.
- Report of Collection filled out and accompanied by a check for the same amount to be deposited into county treasury, which are due to the county by the 10th day of the following month.

Additionally, no other checks should be written from this account to bypass the normal claim process. A balance must not be retained in this bank account, all funds should make their way to the county treasury.

Any department that has a separate bank account and turns all fees collected over to the treasurer monthly would not fill out a supplemental annual financial report (AFR), as all of their collections are currently represented in the county's financial statement. At no time should these departments use their bank accounts to bypass the claims process, only one check should be cut a month to the county treasurer.

However, there are a few departments that do maintain bank accounts per statute and have the authority to disburse these funds. The following is a list of such departments:

- Sheriff
  - Commissary
  - o Inmate Trust
  - o Drug Buy Money
- Clerk
  - o Child Support (ISETS)
  - Trust money
- Convention and Tourism Commission

These departments should be maintaining separate ledgers and financial records (claims, supporting invoices, receipts, deposits, etc..) along with reconciling to the bank monthly. At the beginning of the year, they would then submit a supplemental AFR to the county auditor for inclusion in the county AFR.

At no time should there be any grant money or donations held separately by departments, those funds should be turned over to the treasurer for deposit and the auditor to create the appropriate grant fund. Disbursements from those grant funds would follow the normal claims process.

#### COUNTY ELECTED OFFICIAL TRAINING FUND

This statutory fund is created in IC 36-2-7-19 and is assigned the fund number 1217 within the chart of accounts. The revenue comes from a fee collected in the Recorders office and the fund is used to help provide travel, lodging, and related training expenses for the Auditors, Treasurers, Clerks, Recorders, and Surveyors. If there are sufficient funds available, County Council can use the fund to pay for their training either by SOBA or Association of Indiana Counties (AIC).

Each office has required training hours, these classes are compiled by AIC and approved by SBOA that meet the statutory requirements. If there is enough in the fund to meet these requirements, each officer can designate someone else to receive training that is paid for by this fund, which is required to be appropriated.

#### **REQUISITION FOR TRANSFER OF FUNDS**

Danny Yost; Auditor Clark County, Indiana

WHEREAS, due to an extraordinary emergency it is necessary that the following transfer of Funds be made for the fiscal year ending December 31, 2024.

I, therefore do hereby request you to give to the Clark County Council in the manner required by law that Transfer of Funds for the fiscal year ending December 31, 2024 for the purpose and department following:

FROM: 1000-300-51-000-23

\$1,200

TO:

1000-200-60-000-23

\$1,200

Transferring funds from contractual services to supplies. This will make it possible to purchase supplies through the end of 2024.

SIGNATURE OF DEPARTMENT HEAD

	Purdue Extension		
		DEPARTMENT	_
WITNESS: My hand and seal this	day of		_•
	Audite	or of Clark County Indiana	 a