



BOARD OF COMMISSIONERS REVISED MEETING AGENDA

August 10, 2020, 5:30 PM

Zoom Virtual Meeting Room

Meeting ID: 399-700-0062 / Password: LCBOC

<https://zoom.us/j/3997000062?pwd=SUdLYVFFcmozWnFxbm0vcHRjWkVIZz09>

"The mission of Livingston County is to be an effective and efficient steward in delivering services within the constraints of sound fiscal policy. Our priority is to provide mandated services which may be enhanced and supplemented to improve the quality of life for all who work, reside and recreate in Livingston County."

Pages

1. CALL MEETING TO ORDER
2. MOMENT OF SILENT REFLECTION
3. PLEDGE OF ALLEGIANCE TO THE FLAG
4. ROLL CALL
5. CORRESPONDENCE
6. CALL TO THE PUBLIC
7. APPROVAL OF MINUTES
 - a. Minutes of Meeting Dated: July 27, 2020
 - b. Minutes of Meeting Dated: August 5, 2020
8. TABLED ITEMS FROM PREVIOUS MEETINGS
9. APPROVAL OF AGENDA
10. REPORTS
 - *a. County Administrator Update
Nathan Burd
 - *b. Meals on Wheels Update
11. APPROVAL OF CONSENT AGENDA ITEMS
Resolutions 2020-08-193 through 2020-08-200

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12. RESOLUTIONS FOR CONSIDERATION

13. CALL TO THE PUBLIC

14. ADJOURNMENT

LIVINGSTON COUNTY BOARD OF COMMISSIONERS

MEETING MINUTES

July 27, 2020, 5:30 p.m.

304 E. Grand River Avenue, Board Chambers, Howell, MI

Zoom Virtual Meeting ID: 399-700-0062 / Password: LCBOC

<https://zoom.us/j/3997000062?pwd=SUdLYVFFcmozWnFxbm0vcHRjWkVIZz09>

Members Present: Kate Lawrence, William Green, Wes Nakagiri, Douglas Helzerman, Robert Bezotte, and Jay Gross

Members Absent: Carol Griffith and Gary Childs

1. CALL MEETING TO ORDER

The meeting was called to order by Vice Chairwoman Kate Lawrence at 5:32 p.m.

Vice Chairwoman Lawrence also welcomed new County Administrator, Nathan Burd, to the meeting and thanked Cindy Catanach, Dianne McCormick, and Hilery DeHate for all their hard work.

2. MOMENT OF SILENT REFLECTION

3. PLEDGE OF ALLEGIANCE TO THE FLAG

All rose for the Pledge of Allegiance to the Flag of the United States of America.

4. ROLL CALL

Roll call by the Clerk indicated the presence of a quorum.

District 5 Commissioner seat is vacant.

5. CORRESPONDENCE

None.

6. CALL TO THE PUBLIC

Kate DeRosier, Hartland, spoke regarding last week's Board meeting.

7. APPROVAL OF MINUTES

a. Minutes of Meeting Dated: July 13, 2020

b. Minutes of Meeting Dated: July 22, 2020

Motion to approve the minutes as presented.

It was moved by R. Bezotte

Seconded by D. Helzerman

Roll Call Vote: Yes (6): R. Bezotte, J. Gross, K. Lawrence, W. Green, W. Nakagiri, and D. Helzerman; No (0): None; Absent (2): C. Griffith and G. Childs

MOTION Carried (6-0-2)

8. TABLED ITEMS FROM PREVIOUS MEETINGS

None.

9. APPROVAL OF AGENDA

Motion to approve the agenda.

It was moved by W. Nakagiri

Seconded by D. Helzerman

Roll Call Vote: Yes (6): W. Nakagiri, D. Helzerman, R. Bezotte, J. Gross, K. Lawrence, and W. Green; No (0): None; Absent (2): C. Griffith and G. Childs

MOTION Carried (6-0-2)

10. REPORTS

Commissioner Gross welcomed Nathan Burd, County Administrator, to the meeting and thanked Cindy Catanach, Dianne McCormick, and Hilery DeHate for their hard work.

Commissioner Bezotte echoed Commissioner Gross' sentiments.

11. APPROVAL OF CONSENT AGENDA ITEMS

Resolutions 2020-07-184 through 2020-07-192

Motion to approve the resolutions on the Consent Agenda.

It was moved by W. Green

Seconded by D. Helzerman

Roll Call Vote: Yes (6): W. Green, W. Nakagiri, D. Helzerman, R. Bezotte, J. Gross, and K. Lawrence; No (0): None; Absent (2): C. Griffith and G. Childs

MOTION Carried (6-0-2)

11.a 2020-07-184

Resolution Authorizing the Livingston County Juvenile Court to Apply for and Enter into a Contract with the Michigan Department of Health and Human Services for the Fiscal Year 2021 Child and Parent Legal Representation Grant Program – Juvenile Court

11.b 2020-07-185

Resolution Authorizing the Livingston County Trial Courts – Juvenile Division to Apply for and Enter into a Contract with the Michigan Department of Health and Human Services, Michigan Committee on Juvenile Justice Fiscal Year 2021 Racial and Ethnic Disparities (RED) Data Collection Grant Program – Juvenile Court

11.c 2020-07-186

Resolution Authorizing the Fiscal Year 2021 Memorandum of Understanding on Cash Matching funding for Behavioral Health Managed Care Services - Wraparound - Juvenile Court

11.d 2020-07-187

Resolution Authorizing Juvenile Drug Treatment Court to enter into a Temporary Contract for Attorney Services with William Livingston – Circuit and District Courts – Specialty Courts and Programs

11.e 2020-07-188

Resolution to Approve the FY 2019-2020 Hazardous Materials Emergency Preparedness Grant Program Award Agreement - Emergency Management

11.f 2020-07-189

Resolution Authorizing Livingston County 911 to Conduct an Emergency Repair to the Deerfield Tower VHF Paging System – Central Dispatch

11.g 2020-07-190

Resolution Authorizing a Contract Agreement with Keefe Group for Inmate Commissary and Inmate Banking - Jail

11.h 2020-07-191

Resolution Authorizing the Sheriff's Office and the County of Livingston to Apply for and Enter Into Contract with the State of Michigan, Office of Highway Safety Planning for Fiscal Year 2021 Traffic Enforcement Grant - Sheriff

11.i 2020-07-192

Resolution Authorizing and Accepting a Revised Livingston County Survey and Remonumentation Plan

12. RESOLUTIONS FOR CONSIDERATION

None.

13. CALL TO THE PUBLIC

Karen Pierce, Hamburg, thanked Ms. DeRosier for her earlier comments.

Doug Helzerman offered a prayer for our country.

14. ADJOURNMENT

Motion to adjourn the meeting at 5:46 p.m.

It was moved by W. Nakagiri
Seconded by D. Helzerman

Roll Call Vote: Yes (6): W. Nakagiri, D. Helzerman, R. Bezotte, J. Gross, K. Lawrence, and W. Green; No (0): None; Absent (2): C. Griffith and G. Childs

MOTION Carried (6-0-2)

Elizabeth Hundley, Livingston County Clerk

LIVINGSTON COUNTY BOARD OF COMMISSIONERS

MEETING MINUTES

August 5, 2020

IMMEDIATELY FOLLOWING THE FINANCE COMMITTEE

Zoom Virtual Meeting Room

Meeting ID: 399-700-0062 / Password: LCBOC

<https://zoom.us/j/3997000062?pwd=SUdLYVFFcmozWnFxbm0vcHRjWkVIZz09>

Members Present	Carol Griffith, Kate Lawrence, Wes Nakagiri, Douglas Helzerman, Robert Bezotte, Jay Gross, and Gary Childs
Members Absent	William Green

1. CALL MEETING TO ORDER

The meeting was called to order by Chairwoman Carol Griffith at 8:55 a.m.

2. PLEDGE OF ALLEGIANCE TO THE FLAG

All rose for the Pledge of Allegiance to the Flag of the United States of America.

3. ROLL CALL

Indicated the presence of a quorum.

District 5 Commissioner seat is vacant.

4. CALL TO THE PUBLIC

None.

5. APPROVAL OF AGENDA

Motion to approve the Agenda as presented.

Moved By G. Childs

Seconded By D. Helzerman

Yes (7): C. Griffith, K. Lawrence, W. Nakagiri, D. Helzerman, R. Bezotte, J. Gross, and G. Childs

No (0): None: Absent (1): W. Green

Motion Carried (7-0-1)

6. FINANCE COMMITTEE RECOMMENDATION FOR APPROVAL OF CLAIMS

August 5, 2020

Motion to approve the Claims.

Moved By K. Lawrence

Seconded By G. Childs

Yes (7): C. Griffith, K. Lawrence, W. Nakagiri, D. Helzerman, R. Bezotte, J. Gross, and G. Childs

No (0): None: Absent (1): W. Green

Motion Carried (7-0-1)

7. FINANCE COMMITTEE RECOMMENDATION FOR APPROVAL OF PAYABLES

July 17 through July 30, 2020

Motion to approve the Payables.

Moved By K. Lawrence

Seconded By J. Gross

Yes (7): C. Griffith, K. Lawrence, W. Nakagiri, D. Helzerman, R. Bezotte, J. Gross, and G. Childs

No (0): None: Absent (1): W. Green

Motion Carried (7-0-1)

8. CALL TO THE PUBLIC

None.

9. ADJOURNMENT

Motion to adjourn the meeting at 9:00 a.m.

Moved By G. Childs

Seconded By D. Helzerman

Yes (7): C. Griffith, K. Lawrence, W. Nakagiri, D. Helzerman, R. Bezotte, J. Gross, and G. Childs

No (0): None: Absent (1): W. Green

Motion Carried (7-0-1)

Elizabeth Hundley, Livingston County Clerk

RESOLUTION

NO: 2020-08-193

LIVINGSTON COUNTY

DATE: August 10, 2020

Resolution Authorizing Submission of the 2020/2021 Child Care Fund Budget to the State of Michigan – Juvenile Court

WHEREAS, the Finance Committee of the Livingston County Board of Commissioners has reviewed and recommended approval of the submission of the 2020/2021 Child Care Fund Budget to the State of Michigan; and

WHEREAS, the proposed budget is in the total amount of \$3,037,094 less anticipated revenue of \$145,000 for a proposed net expenditure of \$2,892,094 to be cost shared with the State of Michigan; and

WHEREAS, the \$3,037,094 amount is divided into two categories: \$2,137,094 supporting In-Home Care and the Court's Out-Of-Home Care (Child Care Fund) and \$900,000 supporting MDHHS Out-Of-Home Care (Child Care Fund - State Pays First).

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby approve the 2020/2021 Child Care Fund Budget as outlined.

BE IT FURTHER RESOLVED that the Chair of the Livingston County Board of Commissioners is hereby authorized to sign the 2020/2021 Child Care Fund Budget for submission to the State of Michigan for acceptance.

BE IT FURTHER RESOLVED that the Chair of the Livingston County Board of Commissioners is hereby authorized to sign all forms, assurances, contracts, agreements, and future amendments for monetary and contract language adjustments related to the above upon review and/or preparation of Civil Counsel.

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners hereby authorize any budget amendment to effectuate the above.

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**MOVED:
SECONDED:
CARRIED:**



LIVINGSTON COUNTY, MICHIGAN
LIVINGSTON COUNTY TRIAL COURTS
JUVENILE & PROBATE DIVISIONS

204 S. Highlander Way Suite 3 Howell, MI 48843

Phone 517-540-7739 Cell 734-260-0906

Email: dshaw@livgov.com

Memorandum

To: Livingston County Board of Commissioners

From: Deborah Shaw, Juvenile & Probate Court Administrator
Jennifer Tate, Director, Livingston County Dept. of Health and Human Services

Date: August 10, 2020

Re: Resolution Authorizing the Submission of the 2020/2021 Child Care Fund Annual Budget

The attached resolution authorizes submission of the 2020/2021 Child Care Fund (CCF) Budget to the State of Michigan

The proposed CCF budget requests a combined gross expenditure of \$3,037,094 which includes the In-Home Care expenditures of \$1,661,150 plus Court Out-Of-Home expenditures of \$475,944 (sum of blue cells below – Child Care Fund), less anticipated revenue of \$145,000, and MDHHS Out-Of-Home expenditure of \$900,000 (Child Care Fund – State Pays First), with a net expenditure of \$2,892,094.

In prior years the Court/County paid all costs up front for both the In-Home and Out-Of-Home Care components of the Child Care Fund, and was subsequently reimbursed 50% by the State. Recent “State Pays First” legislation now requires the State to “pay first” for Out-Of-Home costs incurred for children in the State’s care and control; the County/Court “pays first” for Out-Of-Home costs incurred for youth supervised by the Court and all of the In-Home Care. Financial reports are exchanged each month and reconciled at the end of the fiscal year.

With the recent implementation of “State Pays First,” the Child Care Fund Annual Budget paperwork no longer includes the estimated amount of the Court/County’s obligation of \$900,000 for DHHS supervised Out-Of-Home placements. The following table is included in this memo to demonstrate the total fiscal picture of the County’s obligation.

	MDHHS	Court	Combined
Out of Home Care	\$900,000	\$475,944	\$1,375,944
In-Home Care	\$205,000	\$1,456,150	\$1,661,150
Subtotal	\$1,105,000	\$1,932,094	\$3,037,094
Revenue	0	(\$145,000)	(\$145,000)
Net Expenditure	\$1,105,000	\$1,787,094	\$2,892,094

Thank you for your consideration and continued support of the Livingston County Courts.

County Child Care Budget Summary (DHS-2091)
Michigan Department of Health and Human Services (MDHHS)
Children's Services Agency
Livingston County for October 1, 2020 through September 30, 2021

Organization	Court Contact Person	Telephone Number	Email Address
Livingston County	Deborah J. Shaw - CCF Judges Delegate	(517) 540-7739	dshaw@livgov.com
Fiscal Year	MDHHS Contact Person	Telephone Number	Email Address
October 1, 2020 through September 30, 2021	Jennifer Tate - CCF Organization Management	(517) 548-0204	tatej6@michigan.gov

Cost Sharing Ratios	County 50% / State 50%	Anticipated Expenditures		
		MDHHS	Court	Combined
A. Out of Home Care - Court or Tribal Supervised		\$0.00	\$475,944.00	\$475,944.00
B. In-Home Care		\$205,000.00	\$1,456,150.00	\$1,661,150.00
C. County/Court-Operated Facilities		\$0.00	\$0.00	\$0.00
D. Subtotals (A+B+C)		\$205,000.00	\$1,932,094.00	\$2,137,094.00
E. Revenue		\$0.00	\$145,000.00	\$145,000.00
F. Net Expenditure		\$205,000.00	\$1,787,094.00	\$1,992,094.00

Cost Sharing Ratios	County 50% / State 50%	Anticipated Expenditures		
		MDHHS	Court	Combined
A. Out of Home Care - Neglect Abuse		\$0.00	\$0.00	\$0.00
Please Note: The <i>Neglect/Abuse Out-of-Home Care</i> amount reflects ONLY the county court's share of these expenditures. Effective October 2019 the State of Michigan pays 100% of Neglect/Abuse Out-of-Home placements and the county then reimburses the state 50%.				

Cost Sharing Ratios	County 0% / State 100%	Court	Combined
Foster Care During Release Appeal Period		\$0.00	\$0.00

Cost Sharing Ratios	County 0% / State 100%	MDHHS	Court	Combined
Basic Grant	\$15,000.00 Maximum	\$0.00	\$0.00	\$0.00

Total Expenditure	\$1,992,094.00
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BUDGET DEVELOPMENT CERTIFICATION	
THE UNDERSIGNED HAVE PARTICIPATED IN DEVELOPING THE PROGRAM BUDGET PRESENTED ABOVE. We certify that the budget submitted above represents an anticipated gross expenditure for the fiscal year: October 1, 2020 through September 30, 2021; and any requests for reimbursement shall adhere to all state law, administrative rules and child care fund handbook authority.	
Presiding Judge	Date
County Director of MDHHS Signature	Date
Chairperson, Board of Commissioner's Signature	Date
And/or County Executive Signature	Date
Michigan Department of Health & Human Services (MDHHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to an MDHHS office in your area.	AUTHORITY: Act 87, Publication of of 1978, as amended. COMPLETION: Required. PENALTY: State reimbursement will be withheld from local government.

RESOLUTION

NO: 2020-08-194

LIVINGSTON COUNTY

DATE: August 10, 2020

Resolution Authorizing an Increase in Total Authorized Vehicles in the Airport Fleet - Car Pool

WHEREAS, the Airport currently has three (3) authorized vehicles in its fleet, including two service trucks used for grounds and runway maintenance and one Courtesy Vehicle used to provide local transportation for visiting pilots during stopovers; and

WHEREAS, as a result of increased runway traffic the Airport is seeking authorization to add a fourth vehicle to its fleet to be used as an additional Courtesy Vehicle for visiting pilots; and

WHEREAS, both Courtesy Vehicles will be “step-downs” transferred from other departments therefore additional costs will be limited to auto insurance, fuel, and maintenance, and

WHEREAS, additional step-down vehicles will be sought for the Courtesy Vehicles’ eventual replacement and they will not become part of the County’s Leased Vehicles program through Enterprise Fleet Management; and

WHEREAS, the Airport Auto Leasing budget has sufficient funding to cover the additional costs for the remainder of the 2020 budget year due to lower than anticipated maintenance costs and therefore a budget amendment is not necessary.

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby approve an increase in total authorized vehicles for the Airport from the current three (3) to four (4) after the additional Courtesy Vehicle is added to the fleet. This vehicle will not become part of the County’s Leased Vehicles program through Enterprise Fleet Management.

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MOVED:

SECONDED:

CARRIED:



Memorandum

To: Livingston County Board of Commissioners
From: Greg Kellogg, Transportation Director
Date: 07/28/2020
Re: Resolution Authorizing an Increase in Total Authorized Vehicles in the Airport Fleet - Car Pool

The Airport is requesting authorization to increase the total number of authorized vehicles in its fleet from three (3) to four (4).

The Airport currently has two service trucks, used for maintaining the Airport grounds and runways, and one Courtesy Vehicle, which is use to provide local transportation for visiting pilots during stopovers. They typically use the Courtesy Vehicle to visit local dining establishments and other businesses.

As a result of increased runway traffic the Airport is seeking authorization to add a fourth vehicle to its fleet to be used as an additional Courtesy Vehicle for visiting pilots. Both Courtesy Vehicles will be “step-downs” transferred from other departments so the additional costs will be limited to auto insurance, fuel, and maintenance.

The Airport’s first Courtesy Vehicle, a 2006 Crown Victoria purchased from the Sherriff’s Department in 2016 for \$5,000, was replaced in July 2020 with a 2014 Dodge Caravan purchased from the Juvenile Court upon lease turn-in, also for \$5,000. If this resolution is approved the Crown Victoria would simply be added back to the Airport fleet as the additional Courtesy Car. The opportunity cost of not auctioning the Crown Vic is estimated at \$2,000 based on similar historical sales.

The budget impact of this fleet increase should be similar to the FY 2019 costs for the 2006 Crown Victoria, which were \$758 for annual insurance and \$660 for repairs and preventive maintenance. Fuel costs were negligible because the visiting pilots who use the car typically replace any fuel that they use.

When it is time to replace the Courtesy Vehicles additional step-downs will be sought. They will not become part of the County’s Leased Vehicle program through Enterprise Fleet Management.

The Airport Auto Leasing budget has sufficient funding to cover the additional costs for the remainder of the 2020 budget year due to lower than anticipated maintenance costs and therefore a budget amendment is not necessary. Funds will be included in the Airport's FY 2021 Auto Leasing budget to cover the additional costs in 2021.

If you have any questions, please contact me at extension 7843.

RESOLUTION

NO: 2020-08-195

LIVINGSTON COUNTY

DATE: August 10, 2020

Resolution to Adopt a Policy and Procedure for Approval of Non-Commercial Livingston County and County Municipal Entity Public Services Outreach & Education or Public Services Announcement Postings in or on LETS Transportation Vehicles - LETS

WHEREAS, County departments and other County Municipal Entities have expressed an interest in posting non-commercial informational material related to Public Services Outreach and Education and other Public Service Announcements on the interior and exterior of LETS Transportation Vehicles; and

WHEREAS, the LETS Director is supportive of permitting such a limited class of postings on or in LETS Transportation vehicles as the content is wholly consistent with the public service mission of LETS and may be beneficial to LETS passengers and the community at large; and

WHEREAS, there will be no additional cost to the Department or County associated with such limited postings other than staff time and possible cost to design and apply the graphics which will be borne by the department or entity coordinating the posting; and

WHEREAS, it has been determined that the implementation of a policy defining, limiting and regulating such postings will enhance consistency and accuracy by establishing guidelines and specific procedures for design, placement, and approval of limited postings and is prudent from a risk-management perspective; and

WHEREAS, this Policy has been prepared by County Civil Counsel in conjunction with the LETS Director.

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby authorize and adopt the attached Policy and Procedure for Approval of Non-Commercial Livingston County and County Municipal Entity Public Services Outreach & Education or Public Services Announcement Postings in or on LETS Transportation Vehicles.

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**MOVED:
SECONDED:
CARRIED:**

LIVINGSTON COUNTY
Livingston Essential Transportation Service
(LETS)

Policy And Procedure For Approval Of Non-Commercial Livingston County And County Municipal Entity Public Services Outreach & Education Or Public Services Announcement Postings In Or On LETS' Transportation Vehicles

RESOLUTION #2020-

LIVINGSTON COUNTY, MICHIGAN

APPROVED:

RESOLUTION #2020-

APPROVED:

RESOLUTION #2020-

APPROVED:

PURPOSE

The purpose of this policy is to establish a policy as to the limited types of postings which may be permitted in or on LETS' transportation vehicles and the corresponding procedure by which such limited postings may be submitted and approved. LETS will approve only such non-commercial Livingston County or County-Entity municipal public service postings on its transportation vehicles which complies with this Policy, the law, and LETS' grant requirements.

The primary mission of LETS' is to provide safe and efficient scheduled curb-to-curb public transit service for any person to any destination countywide and regional medical service to surrounding counties. Consistent with this purpose, LETS strives to maintain secure, safe, comfortable and convenient transportation vehicles ("Transportation Vehicles") necessary for effective and reliable public transportation, and to retain existing riders and attract new users.

However, LETS and the Board of Commissioners recognize that non-commercial Livingston County or County-Entity municipal postings on LETS' Transportation Vehicles may provide an additional cost-effective avenue for outreach, education and provision of important and useful program and County public service information to residents or other users of LETS' transit services. This may include, but not be limited to, education and services provided by or in concert with County Veterans' Services, the Health Department, Community Mental Health, and the Census.

This Policy is consistent with the mission of LETS in that it permits limited and viewpoint neutral Livingston County or County-Entity municipal public outreach, education and public service postings and announcements but prohibits commercial, political or other types of advertisements which may not be conducive to LETS' mission.

POLICY

- A. PERMITTED POSTINGS -- The following postings may be approved in or on LETS' Transportation Vehicles:

- a. Postings of a County Office/Department or County-Based Municipal Entity (a County Based Municipal Entity municipal entity which is not an Office or Department of the County but is either created by County action or is an entity to which the County is, in whole or in part, the legal funding or budgetary source) which:
 - i. advances specific Livingston County or County-Based Municipal Entity government purposes and engender goodwill with the public; and,
 - ii. provides outreach or education directed to the public, or a segment of the public relating to County or County-Based Municipal Entity services or programs including, but not limited to:
 1. programs or services for prevention or treatment of illnesses or mental illnesses;
 2. programs or services promoting safety or personal well-being;
 3. programs or services providing education or training to County residents;
 4. programs or services for provision of children and families;
 5. programs or services to the assist senior citizens;
 6. programs or services to assist veterans or their families;
 7. programs or services assisting low income citizens;
 8. employment opportunities with LETS, the County or County-Based Municipal Entities, and
 9. programs or services assisting people with illnesses or disabilities.

LETS' Transportation Vehicles are a non-public forum and, as such, LETS will accept only postings within the categories of acceptable above and in this viewpoint neutral Policy and which satisfies all other requirements and restrictions provided herein.

- B. PROHIBITED CLASSES—Postings or advertising which does not comport with Paragraph A are not eligible for posting in or on LETS' Transportation Vehicles. This includes, but is not limited to the following classes of postings/advertising: a. for profit commercial and promotional postings/advertising; b. postings/advertising by any non-County Office/Department or non-County-Based Municipal Entity; c. political advertisements promoting or opposing a political party, or promoting or opposing the election of any candidate or group of candidates for federal, state, judicial or local government offices; d. public issue advertisements expressing or advocating an opinion, position or viewpoint on matters of public debate about economic, political, religious or social issues; e. posting or advertising that is directly adverse to the mission, commercial or administrative interests of LETS or which is otherwise in the deemed harmful or disruptive to the mission of the transit system or the County.

PROCEDURES:

- A. All proposed postings in or on Transport Vehicles must be submitted to the LETS' Director, or designee, for initial compliance review. If the LETS Director determines that a proposed posting does not comply with this Policy the Director will communicate this to the applicable County Elected Official, Department Head or the appropriate representative of the County-Based Municipal Entity. The applicable County Elected Official, Department Head or the appropriate representative of the County-Based Municipal Entity may at propose one or more revisions to the posting, which, if undertaken, would bring the posting into conformity with this Policy.

- B. Any posting once posted may be removed at the discretion of the LETS Director in the event the posting subsequently determines that the posting does not comply with this Policy and/or upon expiration of the approval duration. . The LETS Director may consult with the other appropriate County employees, including Corporation Counsel, at any time during the review process.
- C. The LETS' Director shall have and exercise discretion regarding all decisions regarding and administration of the terms and conditions of approval including, but not limited to: size of posting, style of posting, graphics, permitted location of posting, and/or duration of posting approval.
- D. If a posting is rejected, removed or an approval rescinded, and an agreement acceptable to the LETS Director cannot be reached as to possible revisions, the applicable County Elected Official, Department Head or the appropriate representative of the County-Based Municipal Entity may appeal the decision of the LETS Director to the County Administrator. The County Administrator may likewise consult with the other appropriate County employees, including Corporation Counsel, in considering such an appeal. The decision of the County Administrator shall be final.

LEGAL RESERVATION

It is the express intention of LETS and the Board of Commissioners in accepting this Policy that LETS' Transportation Vehicles have traditionally been, and shall continue to be designated as a non-public forum. LETS' acceptance of limited Livingston County or County Municipal Entity public services postings shall not provide or create a general or open public forum for expressive activities. Rather, the County's fundamental purpose and intent is to accept limited County public postings is as an avenue for outreach, education and provision of important and useful County programs and public service information to County residents or other users of LETS transit services. In furtherance of that discreet and limited objective, LETS will maintain its posting or advertising space on Transportation Vehicles as a non-public forum.

AUTHORIZATION

1. The Livingston County Board of Commissioners authorizes the LETS Policy And Procedure For Approval Of Non-Commercial Livingston County And County Municipal Entity Municipal Public Services Outreach & Education Or Public Services Announcement Postings In LETS' Transport Vehicles.
2. County Administration and the LETS Director are responsible for administration of this Policy.

RESOLUTION

NO: 2020-08-196

LIVINGSTON COUNTY

DATE: August 10, 2020

Resolution Authorizing the County Clerk to Purchase a Backup Election Equipment Workstation – County Clerk

WHEREAS, On January 6, 2017, the Department of Homeland Security designated U.S. election systems as part of the nation's critical infrastructure; and

WHEREAS, the County Clerk Elections Division is located within the Historic Courthouse; and

WHEREAS, during the past year the employees within the Historic Courthouse have been required to evacuate the building during normal working hours for various reasons beyond our control; and

WHEREAS, any computer system, including our current election equipment system, can experience unexpected failures; and

WHEREAS, the County Clerk has determined it is in the County's best interest to purchase a backup workstation that will be housed in a secondary location that will allow the County Clerk to move out of the Historic Courthouse and continue conducting an election if necessary or, to replace the current workstation in the event of a computer failure.

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby authorize the Livingston County Clerk to purchase the necessary backup Hart InterCivic Verity Workstation and necessary equipment as listed in the attached Quote Number 00006696 for a total of \$8,935.

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners authorize a Budget Amendment to the General Fund Elections Division for 2020 (10126200) in the amount of \$8,935 to effectuate this purchase.

Department	2020 Amended Budget	Proposed Amendment	2020 Proposed Amended Budget
10126200 GF ELECTIONS	\$ 341,623	\$ 8,935	\$ 350,558
10196800 GF CONTINGENCIES	\$ 464,294	\$ (8,935)	\$ 455,359

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MOVED:
SECONDED:
CARRIED:



ELIZABETH HUNDLEY LIVINGSTON COUNTY CLERK

County Clerk
200 E. Grand River Ave.
Howell, MI 48843
Phone: (517) 546-0500
countyclerk@livgov.com

Circuit Court Clerk
204 S. Highlander Way, Suite 4
Howell, MI 48843
Phone: (517) 546-9816
wclerks@livgov.com

TO: Livingston County Board of Commissioners

FROM: Elizabeth Hundley

RE: Resolution Authorizing the County Clerk to Purchase a Backup Election Equipment Workstation

DATE: July 28, 2020

The Department of Homeland Security designated election systems as part of the nation's critical infrastructure on January 6, 2017. Administering elections, including receiving election day results, is one of the County Clerk's most important responsibilities.

As the county's chief election official, I am requesting approval to purchase a backup workstation to be used in the event of an emergency on election day or the event we encounter a failure with a component of our existing workstation. It is my intent to house this backup workstation in a county building that election division staff can move to if we are evacuated from the Historic Courthouse on election day.

I am attaching two quotes from Hart InterCivic, our election equipment vendor for your review. Quote Number 6696 is for a backup workstation and necessary accessories for a cost of \$8,935. This is the most basic level of backup which requires us to move the software from our existing equipment and insert it into the backup workstation if use is necessary.

In contrast, Quote Number 6612 is the price to replicate both the hardware and software of our existing equipment for an initial purchase price of \$244,795. In addition, this solution would incur annual service and maintenance fees of \$3,330 per year in years 6 through 10 of the equipment.

It is my opinion that the purchase of a backup workstation will meet the needs of our office and is a responsible use of taxpayer dollars.

Please do not hesitate to reach out to me if you have questions or wish to discuss this matter. I can be reached at (517) 546-0500.

Thank you for your consideration.



Quote Number

00006696

Account Name

Livingston County, MI

Grand Total

\$8,935.00

Item	Description	Unit Price	Quantity	Total Price
Verity Workstation	Workstation for Verity software w/ 5-year warranty; backups for Data/Build/Count and Relay to be used in emergency only	\$4,000.00	2	\$8,000.00
Okidata B432dn Printer	Laser printer w/ starter cartridge for report printing	\$325.00	1	\$325.00
vDrive	Flash memory card/audio card for use with Verity devices	\$45.00	10	\$450.00
Verity Key	Electronic security token	\$80.00	2	\$160.00

Subtotal

\$8,935.00

Grand Total

\$8,935.00

Bill To 200 E Grand River Ave.
Howell, MI 48843

Ship To 200 E Grand River Ave.
Howell, MI 48843

Customer Contact

Contact Name Joe Bridgman

Email jbridgman@livgov.com

Phone (517) 546-8177

General Information

Expiration Date 8/28/2020

Instructions Please fax with signature to or scan and email to
kclakeley@hartic.com to order.

Payment Terms Net 30

Terms and Conditions

Pricing subject to inventory availability at time of quote execution and acceptance.

Taxes will be calculated in conjunction with the Customer based on the final approved price list.

Hart Approval

Prepared By Karen Clakeley

Title Director, Strategic Accounts

Signature

Customer Approval

Name: _____

Title: _____

Customer Approval: _____

Date: _____



Quote Number

00006612

Account Name

Livingston County, MI

Grand Total

\$244,795.00

Item	Description	Unit Price	Quantity	Total Price
Verity Data, Build, and Count	Full Election Management System software	\$218,920.00	1	\$218,920.00
Verity Relay	Verity Relay software	\$17,180.00	1	\$17,180.00
Verity Workstation	Workstation for Verity software w/ 5-year warranty	\$4,000.00	2	\$8,000.00
Okidata B432dn Printer	Laser printer w/ starter cartridge for report printing	\$325.00	2	\$650.00
vDrive	Flash memory card/audio card for use with Verity devices	\$45.00	1	\$45.00

Subtotal

\$244,795.00

Grand Total

\$244,795.00

Annual Service and Maintenance (Years 6-10)

Item	Description	Unit Price	Quantity	Total Price
Service and Maintenance - Verity Data, Build, and Count	Annual Service and Maintenance fee for Verity Data, Build, and Count in years 6-10	\$2,000.00	1	\$2,000.00
Service and Maintenance - Verity Relay	Annual Service and Maintenance fee for Verity Relay in years 6-10	\$1,330.00	1	\$1,330.00

Proposed Annual Service & Maintenance

\$3,330.00

Total Years 6-10

\$16,650.00

Bill To 200 E Grand River Ave.
Howell, MI 48843

Ship To 200 E Grand River Ave.
Howell, MI 48843

Customer Contact

Contact Name Joe Bridgman Email jbridgman@livgov.com
Phone (517) 546-8177

General Information

Expiration Date 8/28/2020 Instructions Please fax with signature to or scan and email to
Payment Terms Net 30 kclakeley@hartic.com to order.

Terms and Conditions

Pricing subject to inventory availability at time of quote execution and acceptance.
Taxes will be calculated in conjunction with the Customer based on the final approved price list.

Hart Approval

Prepared By Karen Clakeley Title Director, Strategic Accounts
Signature

Customer Approval



Quote Number

00006612

Account Name

Livingston County, MI

Grand Total

\$244,795.00

Name: _____

Title: _____

Customer Approval: _____

Date: _____

RESOLUTION

NO: 2020-08-197

LIVINGSTON COUNTY

DATE: August 10, 2020

Resolution Authorizing the Livingston County Clerk to Enter Agreements to Provide Election Services to Local Jurisdictions - County Clerk

WHEREAS, Public Act No. 95 of 2020 was signed into law on June 23, 2020; and

WHEREAS, it allows city or township clerks to enter into an agreement with their county clerk to establish an absent voter counting board to count the absentee voter ballots for that city or township clerk; and

WHEREAS, an agreement has been entered with both Iosco and Unadilla Townships to allow the county clerk to count their absentee voter ballots for the August 4, 2020 Primary Election; and,

WHEREAS, the Livingston County Clerk may desire to enter into agreements with local jurisdictions for future elections; and

WHEREAS, the election services provided by the County Clerk's Elections Division means absentee ballot counting, which includes, but is not limited to, processing, opening, tabulating, and reporting absentee ballots and related results; and

WHEREAS, the County will cover the cost of its own appointees to the absent voter counting board, and the contracting city or township will cover the costs of its appointee, or otherwise reimburse the County for those costs if the County Clerk makes the appointments for the city or township.

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby authorize the Livingston County Clerk to enter into an agreement to provide election services to city and township clerks within Livingston County when it is in the best interest of the electors to do so.

BE IT FURTHER RESOLVED that the Chairperson of the Livingston County Board of Commissioners is hereby authorized to sign all contracts and agreements related to the above upon review and/or preparation of Civil Counsel.

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MOVED:
SECONDED:
CARRIED:



ELIZABETH HUNDLEY LIVINGSTON COUNTY CLERK

County Clerk
200 E. Grand River Ave.
Howell, MI 48843
Phone: (517) 546-0500
countyclerk@livgov.com

Circuit Court Clerk
204 S. Highlander Way, Suite 4
Howell, MI 48843
Phone: (517) 546-9816
wclerks@livgov.com

TO: Livingston County Board of Commissioners

FROM: Elizabeth Hundley

RE: Resolution Authorizing the Livingston County Clerk to Enter Agreements to Provide Election Services to Local Jurisdictions

DATE: July 28, 2020

Recent changes to Michigan's Election Law allow county clerks to enter into agreements with city and township clerks to provide election services including the counting of absentee voter ballots.

Recently the Board approved agreements allowing the Elections Division to provide services to Iosco and Unadilla Townships for the August 4, 2020 Primary Election. This resolution seeks to authorize the County Clerk to enter into agreements to provide election services and the Board chairperson to sign the appropriate agreements for future elections.

There are various factors that will determine when a county counting board should be utilized. Factors include, but are not limited to, the type of election involved, the number of absentee ballots expected to be issued, the availability of election equipment to dedicate to a counting board, and space needed to convene a counting board. Having the ability to process absentee ballots at the county level will result in benefits including cost savings to our voters.

Please do not hesitate to reach out to me if you have questions or wish to discuss this matter. I can be reached at (517) 546-0500.

Thank you for your consideration.

RESOLUTION

NO: 2020-08-198

LIVINGSTON COUNTY

DATE: August 10, 2020

Resolution to Accept Michigan Department of Health and Human Services Funding and Create Grant Funded Positions to Support Livingston County Health Department's COVID-19 Response - Health Department

WHEREAS, Michigan is experiencing (along with the rest of the world) a widespread outbreak of COVID-19 infections, which includes Livingston County; and

WHEREAS, Michigan Department of Health and Human Services (MDHHS) has received federal funding to provide local health departments with capacity for testing, tracing, case investigations, infection prevention, and enforcement to control future spread of the disease; and

WHEREAS, Livingston County Health Department is being awarded \$702,400 beginning October 1, 2020 – September 30, 2021 by MDHHS to increase activities in COVID-19 support and response; and

WHEREAS, in order to ensure that LCHD continues to provide essential day to day public health services, as well as the additional essential services required to respond to the COVID-19 pandemic, we are requesting approval to create grant funded term positions;

Position	Grade	Org	Obj.	FTE - Total	Qty. – Up to
Public Health Nurse	Grade 9	22160100	704000	1.00	1
Public Health Nurse	Grade 9	22160100	706000	0.73	1
Public Health Nurse	Grade 9	22160100	706001	0.50	5
Epidemiologist	Grade 10	22160100	706000	0.73	1
Epidemiologist	Grade 10	22160100	706001	0.50	1
Health Promotion Specialist	Grade 9	22160100	704000	1.00	1
CD Clerk	Grade 4	22160100	706001	2.5	10
Program Clerk II	Grade 3	22160100	706001	1.45	2

WHEREAS, funds will be available through this award to purchase additional supplies and hire essential staff not to exceed \$702,400; and

WHEREAS, this award will be included in the 2021 Comprehensive Agreement.

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby authorizes acceptance of funding in the amount of \$702,400 from the State of Michigan, as a pass-through agency for federal funding, to conduct testing, tracing, case investigations, infection prevention, and enforcement for the COVID-19 pandemic in Livingston County, through September 30, 2021.

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners hereby approves the creation of the below listed term positions, that will fully be funded by a grant issued from the State of Michigan Department of Health and Humans Services for COVID-19 Response and Support, and once the funding from this grant is no longer available the positions will be eliminated.

Position #	Description	Status	Group	Grade	FTE
60100158	COMMUNICABLE DISEASE CLERK	P	NU	4	2.50
60100156	EPIDEMIOLOGIST	P	NU	10	0.73
60100161	EPIDEMIOLOGIST	P	NU	10	0.50
60100157	HEALTH PROMOTION SPECIALIST	P	NU	8	1.00
60100159	PROGRAM CLERK II	P	NU	3	0.73
60100160	PROGRAM CLERK II	P	NU	3	0.73
60100153	PUBLIC HEALTH NURSE	P	NU	9	1.00
60100154	PUBLIC HEALTH NURSE	P	NU	9	0.50
60100155	PUBLIC HEALTH NURSE	P	NU	9	0.73

BE IT FURTHER RESOLVED that the Board of Commissioners authorize any budget amendments to hire the necessary employees and purchase supplies needed to effectuate the above changes for a total amendment not to exceed \$702,400 for October 1, 2020 through September 30, 2021.

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MOVED:
 SECONDED:
 CARRIED:



LIVINGSTON COUNTY HEALTH DEPARTMENT

2300 East Grand River Avenue, Suite 102
Howell, Michigan 48843-7578

www.lchd.org

PERSONAL/PREVENTIVE HEALTH SERVICES

P: (517) 546-9850

F: (517) 546-6995

ENVIRONMENTAL HEALTH SERVICES

P: (517) 546-9858

F: (517) 546-9853

July 29, 2020

To: Board of Commissioners

From: Dianne McCormick

Re: Request to Accept Funding from Michigan Department of Health and Human Services (MDHHS) and Create Grant Funded Positions to Support LCHD's COVID-19 Response

Dear Commissioners,

LCHD has received notice of award from MDHHS for funding in the amount of \$702,400 beginning October 1, 2020- September 30, 2021 to respond to the COVID-19 pandemic. The Resolution approves the acceptance of the funding and allows for the creation of grant funded positions and will also cover costs for supplies and expenses associated with our response to the COVID-19 outbreak. MDHHS has indicated that continuation of this funding beyond September 30, 2021 is highly likely. As with positions funded by grants, should the funding be reduced or eliminated, so will the positions.

This funding will provide LCHD the ability to meet current and future increased surge capacity for COVID-19 case investigations and contact tracing needs; offsite targeted community COVID-19 testing and seasonal influenza clinics; potential future COVID-19 vaccination clinics; and increased community educational efforts. It will also allow backfill capacity to ensure that LCHD continues to provide essential day to day public health services.

Please do not hesitate to reach out to me if you have any questions (517) 552-6865 or dmccormick@livgov.com.



CONTACT INFORMATION

Requester: Dianne McCormick Title of Requester: Health Officer
 Dept. Phone Number/Extension: 6865 Date Requested: 7/29/2020

POSITION INFORMATION

Position Title: Public Health Nurse (5) Supervisor: Elaine Brown

1. Is the purpose of this request to fill a position as a result of a vacancy? Yes ☐ No ☒

If so, name of person last holding this position: _____

2. Is the purpose of this request to reclassify a current position? Yes ☐ No ☒

3. Is the purpose of this request to change the scheduled hours of an existing position? Yes ☐ No ☒ From: _____ To: _____

If so, name of current incumbent: _____

4. Is the purpose of this request to transfer a current position? Yes ☐ No ☒

If so, Current Department: _____ Proposed Department: _____

Position Type: Regular ☐ Term/Grant ☒ Temp. ☐ Unpaid ☐ Special ☐

Position Status: Full Time (30+) ☐ Part-Time (21-29) ☐ Part-Time (20 or Less) ☒ Number of hours per week: 4

Justification of request / change of position (REQUIRED): This request is to add up to five (5) part time grant funded Public Health Nurse positions. These positions will be funded by COVID-19 funds. These positions will be pooled up to 20 hours per week and filled only as long as the funding is available.

FUNDING INFORMATION

Base Annual Salary: 27,843.64/28,740.34/29.440yr This position is funded in whole or in part by a grant: Yes ☒ No ☐ % Funded: 100

Allocation (Required): Current: Org. 22160100 % 100 Proposed (If changing): Org. _____ % _____

Position will be funded by: General Fund ☐ Enterprise Fund ☐ Special Revenue Fund ☒ Internal Service Fund ☐

REQUIRED APPROVALS

Supervisor (if applicable) _____ Date _____ Department Head Dianne McCormick Date 7-29-20

HR OFFICE ONLY

Job Class: 5008 Job Title: Public Health Nurse Grade/Step: 9 H / 1
 FTE: 0.50 Employee Group: NU HR Reviewed: Amy Hill Date: 07.29.2020

BUDGET OFFICE ONLY

Position Control # 60100154 Org. 22160100

Funds Available: Yes ☒ No ☐ Object Code: 704000 ☐ 706000 ☐ 706001 ☒

Comments: requires Board approval. Term/Grant funded Pooled position not to exceed .50 FTE, max 5 employees

Budget Reviewed: Wetzel Date: 7/29/2020

Resolution #: _____ Board Authorized on Date: _____



CONTACT INFORMATION

Requester: Dianne McCormick

Title of Requester: Health Officer

Dept. Phone Number/Extension: 6865

Date Requested: 7/29/2020

POSITION INFORMATION

Position Title: Public Health Nurse

Supervisor: Elaine Brown

1. Is the purpose of this request to fill a position as a result of a vacancy?

Yes ☐ No ☒

If so, name of person last holding this position: _____

2. Is the purpose of this request to reclassify a current position?

Yes ☐ No ☒

3. Is the purpose of this request to change the scheduled hours of an existing position?

Yes ☐ No ☒ From: _____ To: _____

If so, name of current incumbent: _____

4. Is the purpose of this request to transfer a current position?

Yes ☐ No ☒

If so, Current Department: _____

Proposed Department: _____

Position Type: Regular ☐ Term/Grant ☒ Temp. ☐ Unpaid ☐ Special ☐

Position Status: Full Time (30+) ☐ Part-Time (21-29) ☒ Part-Time (20 or Less) ☐ Number of hours per week: 29

Justification of request / change of position (REQUIRED): This request is to add a part time grant funded Public Health Nurse position. This position will be funded by COVID-19 funds. This position will be filled only as long as the funding is available.

FUNDING INFORMATION

Base Annual Salary: 27 8438hr J41 888 5488yr This position is funded in whole or in part by a grant: Yes ☒ No ☐ % Funded: 100

Allocation (Required): Current: Org. 22160100 % 100 Proposed (If changing): Org. _____ % _____

Position will be funded by: General Fund ☐ Enterprise Fund ☐ Special Revenue Fund ☒ Internal Service Fund ☐

REQUIRED APPROVALS

Supervisor (if applicable) _____

Date _____

Department Head Dianne McCormick

Date 7-29-20

HR OFFICE ONLY

Job Class: 5008 Job Title: Public Health Nurse Grade/Step: 9 H / 1

FTE: 0.73 Employee Group: NU HR Reviewed: Amy Hill Date: 07.29.2020

BUDGET OFFICE ONLY

Position Control # 60100155 Org. 22160100

Funds Available: Yes ☒ No ☐ Object Code: 704000 ☐ 706000 ☒ 706001 ☐

Comments: requires Board approval. Term/Grant funded

Budget Reviewed: H. Tate Date: 7/29/2020

Resolution #: _____ Board Authorized on Date: _____



CONTACT INFORMATION

Requester: Dianne McCormickTitle of Requester: Health OfficerDept. Phone Number/Extension: 6865Date Requested: 7/29/2020

POSITION INFORMATION

Position Title: Public Health NurseSupervisor: Elaine Brown

1. Is the purpose of this request to fill a position as a result of a vacancy?

Yes ☐ No ☒

If so, name of person last holding this position: _____

2. Is the purpose of this request to reclassify a current position?

Yes ☐ No ☒

3. Is the purpose of this request to change the scheduled hours of an existing position?

Yes ☐ No ☒ From: _____ To: _____

If so, name of current incumbent: _____

4. Is the purpose of this request to transfer a current position?

Yes ☐ No ☒

If so, Current Department: _____

Proposed Department: _____

Position Type: Regular ☐ Term/Grant ☒ Temp. ☐ Unpaid ☐ Special ☐Position Status: Full Time (30+) ☒ Part-Time (21-29) ☐ Part-Time (20 or Less) ☐ Number of hours per week: 40

Justification of request / change of position (REQUIRED): This request is to add a full time grant funded Public Health Nurse position. This position will be funded by COVID-19 funds. This position will be filled only as long as the funding is available.

FUNDING INFORMATION

Base Annual Salary: 57,499yr./27 6436hr This position is funded in whole or in part by a grant: Yes ☒ No ☐ % Funded: 100Allocation (Required): Current: Org. 22160100 % 100 Proposed (If changing): Org. _____ % _____Position will be funded by: General Fund ☐ Enterprise Fund ☐ Special Revenue Fund ☒ Internal Service Fund ☐

REQUIRED APPROVALS

Supervisor (if applicable) _____

Date _____

Department Head Dianne McCormickDate 7-29-20

HR OFFICE ONLY

Job Class: 5008 Job Title: Public Health Nurse Grade/Step: 9 H / 1FTE: 1.0 Employee Group: NU HR Reviewed: Amy Hill Date: 07.29.2020

BUDGET OFFICE ONLY

Position Control # 60100153 Org. 22160100Funds Available: Yes ☒ No ☐ Object Code: 704000 ☒ 706000 ☐ 706001 ☐Comments: requires Board approval. Term/Grant fundedBudget Reviewed: Hate Date: 7/29/2020

Resolution #: _____ Board Authorized on Date: _____

Livingston County, Michigan

POSITION REQUEST/CHANGE FORM



CONTACT INFORMATION

Requester: Dianne McCormick

Title of Requester: Health Officer

Dept. Phone Number/Extension: 6865

Date Requested: 7/29/2020

POSITION INFORMATION

Position Title: Epidemiologist

Supervisor: Dianne McCormick

1. Is the purpose of this request to fill a position as a result of a vacancy? Yes ☐ No ☒

If so, name of person last holding this position: _____

2. Is the purpose of this request to reclassify a current position? Yes ☐ No ☒

3. Is the purpose of this request to change the scheduled hours of an existing position? Yes ☐ No ☒ From: _____ To: _____

If so, name of current incumbent: _____

4. Is the purpose of this request to transfer a current position? Yes ☐ No ☒

If so, Current Department: _____

Proposed Department: _____

Position Type: Regular ☐ Term/Grant ☒ Temp. ☐ Unpaid ☐ Special ☐

Position Status: Full Time (30+) ☐ Part-Time (21-29) ☒ Part-Time (20 or Less) ☐ Number of hours per week: 29

Justification of request / change of position (REQUIRED): This request is to a part time grant funded Epidemiologist position. This position will be funded by COVID-19 funds. This position will be filled only as long as the funding is available.

FUNDING INFORMATION

Base Annual Salary: 20 7187hr./44,812 7630yr This position is funded in whole or in part by a grant: Yes ☒ No ☐ % Funded: 100

Allocation (Required): Current: Org. 22160100 % 100 Proposed (If changing): Org. _____ % _____

Position will be funded by: General Fund ☐ Enterprise Fund ☐ Special Revenue Fund ☒ Internal Service Fund ☐

REQUIRED APPROVALS

Supervisor (If applicable) _____

Date _____

Department Head Dianne McCormick

Date 7-29-20

HR OFFICE ONLY

Job Class: 7098 Job Title: Epidemiologist Grade/Step: 10 H / 1

FTE: 0.73 Employee Group: NU HR Reviewed: Amy Hill Date: 07.29.2020

BUDGET OFFICE ONLY

Position Control # 60100156 Org. 22160100

Funds Available: Yes ☒ No ☐ Object Code: 704000 ☐ 706000 ☒ 706001 ☐

Comments: requires Board approval. TERM/Grant funded

Budget Reviewed: H. H. H. H. H. Date: 7/29/2020

Resolution #: _____

Board Authorized on Date: _____



CONTACT INFORMATION

Requester: Dianne McCormickTitle of Requester: Health OfficerDept. Phone Number/Extension: 6865Date Requested: 7/29/2020

POSITION INFORMATION

Position Title: Communicable Disease Clerk (10)Supervisor: Elaine Brown

1. Is the purpose of this request to fill a position as a result of a vacancy?

Yes ☐ No ☒

If so, name of person last holding this position: _____

2. Is the purpose of this request to reclassify a current position?

Yes ☐ No ☒3. Is the purpose of this request to change the scheduled hours of an existing position? Yes ☐ No ☒ From: _____ To: _____

If so, name of current incumbent: _____

4. Is the purpose of this request to transfer a current position?

Yes ☐ No ☒

If so, Current Department: _____

Proposed Department: _____

Position Type: Regular ☐ Term/Grant ☒ Temp. ☐ Unpaid ☐ Special ☐Position Status: Full Time (30+) ☐ Part-Time (21-29) ☐ Part-Time (20 or Less) ☒ Number of hours per week: 10

Justification of request / change of position (REQUIRED): This request is to add up to ten (10) part time grant funded Communicable Disease Clerk positions. These positions will be funded by COVID-19 funds. These positions will be pooled up to 100 hours per week and filled only as long as the funding is available.

FUNDING INFORMATION

Base Annual Salary: 17,9721hr/9,345.492yr This position is funded in whole or in part by a grant: Yes ☒ No ☐ % Funded: 100Allocation (Required): Current: Org. 22160100 % 100 Proposed (If changing): Org. _____ % _____Position will be funded by: General Fund ☐ Enterprise Fund ☐ Special Revenue Fund ☒ Internal Service Fund ☐

REQUIRED APPROVALS

Supervisor (if applicable) _____

Date _____

Department Head Dianne McCormickDate 7/29/20

HR OFFICE ONLY

Job Class: 1025 Job Title: Communicable Disease Clerk Grade/Step: 4 / 1FTE: 0.25 Employee Group: NU HR Reviewed: Amy Hill Date: 07.29.2020

BUDGET OFFICE ONLY

Position Control #: 60100158 Org. 22160100Funds Available: Yes ☒ No ☐ Object Code: 704000 ☐ 706000 ☐ 706001 ☒Comments: requires Board approval. Term/Grant funded pooled position not to exceed 2.5 FTE, 12 emp max.Budget Reviewed: [Signature] Date: 7/29/2020

Resolution #: _____

Board Authorized on Date: _____



CONTACT INFORMATION

Requester: Dianne McCormickTitle of Requester: Health OfficerDept. Phone Number/Extension: 6865Date Requested: 7/29/2020

POSITION INFORMATION

Position Title: Health Promotion SpecialistSupervisor: Natasha Radke

1. Is the purpose of this request to fill a position as a result of a vacancy?

Yes ☐ No ☒

If so, name of person last holding this position: _____

2. Is the purpose of this request to reclassify a current position?

Yes ☐ No ☒

3. Is the purpose of this request to change the scheduled hours of an existing position?

Yes ☐ No ☒

From: _____ To: _____

If so, name of current incumbent: _____

4. Is the purpose of this request to transfer a current position?

Yes ☐ No ☒

If so, Current Department: _____

Proposed Department: _____

Position Type: Regular ☐Term/Grant ☒Temp. ☐Unpaid ☐Special ☐Position Status: Full Time (30+) ☒Part-Time (21-29) ☐Part-Time (20 or Less) ☐Number of hours per week: 40Justification of request / change of position (REQUIRED): This request is to add a full time grantfunded Health Promotion Specialist position. This position will be funded by COVID-19 funds. This position will be filled only as long as the funding is available.

FUNDING INFORMATION

Base Annual Salary: 52,272yr./25,1307hr.This position is funded in whole or in part by a grant: Yes ☒ No ☐% Funded: 100Allocation (Required): Current: Org. 22160100 % 100

Proposed (If changing): Org. _____ % _____

Position will be funded by: General Fund ☐Enterprise Fund ☐Special Revenue Fund ☒Internal Service Fund ☐

REQUIRED APPROVALS

Supervisor (if applicable) _____

Date _____

Department Head Dianne McCormickDate 7-29-2020

HR OFFICE ONLY

Job Class: 7035Job Title: Health Promotion SpecialistGrade/Step: 8 H / 1FTE: 1.0Employee Group: NUHR Reviewed: Amy HillDate: 07.29.2020

BUDGET OFFICE ONLY

Position Control # 60100157Org. 22160100Funds Available: Yes ☒ No ☐Object Code: 704000 ☒706000 ☐706001 ☐Comments: requires Board approval. Term/Grant fundedBudget Reviewed: H. AttateDate: 7/29/2020

Resolution #: _____

Board Authorized on Date: _____



CONTACT INFORMATION

Requester: Dianne McCormickTitle of Requester: Health OfficerDept. Phone Number/Extension: 6865Date Requested: 7/29/2020

POSITION INFORMATION

Position Title: Program Clerk II (2)Supervisor: Elaine Brown

1. Is the purpose of this request to fill a position as a result of a vacancy?

Yes ☐ No ☒

If so, name of person last holding this position: _____

2. Is the purpose of this request to reclassify a current position?

Yes ☐ No ☒3. Is the purpose of this request to change the scheduled hours of an existing position? Yes ☐ No ☒ From: _____ To: _____

If so, name of current incumbent: _____

4. Is the purpose of this request to transfer a current position?

Yes ☐ No ☒

If so, Current Department: _____

Proposed Department: _____

Position Type: Regular ☐ Term/Grant ☒ Temp. ☐ Unpaid ☐ Special ☐Position Status: Full Time (30+) ☐ Part-Time (21-29) ☒ Part-Time (20 or Less) ☐ Number of hours per week: 29

Justification of request / change of position (REQUIRED): This request is to add up to two (2) part time grant funded Program Clerk II positions. These positions will be funded by COVID-19 funds. These positions will be filled only as long as the funding is available.

FUNDING INFORMATION

Base Annual Salary: 16 7182hr./25,211 0456yr _____ This position is funded in whole or in part by a grant: Yes ☒ No ☐ % Funded: 100Allocation (Required): Current: Org. 22160100 % 100 Proposed (If changing): Org. _____ % _____Position will be funded by: General Fund ☐ Enterprise Fund ☐ Special Revenue Fund ☒ Internal Service Fund ☐

REQUIRED APPROVALS

Supervisor (if applicable) _____

Date _____

Department Head Dianne McCormickDate 7/29/2020

HR OFFICE ONLY

Job Class: 1027 Job Title: Program Clerk II Health Grade/Step: 3 / 1FTE: 0.73 Employee Group: NU HR Reviewed: Amy Hill Date: 07.29.2020

BUDGET OFFICE ONLY

Position Control #: 60100160 Org. 22160100Funds Available: Yes ☒ No ☐ Object Code: 704000 ☐ 706000 ☒ 706001 ☐Comments: requires Board approval. Term/Grant fundedBudget Reviewed: [Signature]Date: 7/29/2020

Resolution #: _____

Board Authorized on Date: _____



CONTACT INFORMATION

Requester: Dianne McCormickTitle of Requester: Health OfficerDept. Phone Number/Extension: 6865Date Requested: 7/29/2020

POSITION INFORMATION

Position Title: Program Clerk II (2)Supervisor: Elaine Brown

1. Is the purpose of this request to fill a position as a result of a vacancy?

Yes ☐ No ☒

If so, name of person last holding this position: _____

2. Is the purpose of this request to reclassify a current position?

Yes ☐ No ☒

3. Is the purpose of this request to change the scheduled hours of an existing position?

Yes ☐ No ☒

From: _____ To: _____

If so, name of current incumbent: _____

4. Is the purpose of this request to transfer a current position?

Yes ☐ No ☒

If so, Current Department: _____

Proposed Department: _____

Position Type:

Regular ☐Term/Grant ☒Temp. ☐Unpaid ☐Special ☐Position Status: Full Time (30+) ☐Part-Time (21-29) ☒Part-Time (20 or Less) ☐Number of hours per week: 29

Justification of request / change of position (REQUIRED): This request is to add up to two (2) part time grant funded Program Clerk II positions. These positions will be funded by COVID-19 funds. These positions will be filled only as long as the funding is available.

FUNDING INFORMATION

Base Annual Salary: 18 7162hr./25,211 0456yrThis position is funded in whole or in part by a grant: Yes ☒ No ☐% Funded: 100Allocation (Required): Current: Org. 22160100 % 100

Proposed (If changing): Org. _____ % _____

Position will be funded by: General Fund ☐Enterprise Fund ☐Special Revenue Fund ☒Internal Service Fund ☐

REQUIRED APPROVALS

Supervisor (if applicable) _____

Date _____

Department Head Dianne McCormickDate 7/29/2020

HR OFFICE ONLY

Job Class: 1027Job Title: Program Clerk II HealthGrade/Step: 3 / 1FTE: 0.73Employee Group: NUHR Reviewed: Amy HillDate: 07.29.2020

BUDGET OFFICE ONLY

Position Control # 60100159Org. 22160100Funds Available: Yes ☒ No ☐Object Code: 704000 ☐706000 ☒706001 ☐Comments: requires Board approval. Term/Grant fundedBudget Reviewed: H. AttalaDate: 7/29/2020

Resolution #: _____

Board Authorized on Date: _____

RESOLUTION

NO: 2020-08-199

LIVINGSTON COUNTY

DATE: August 10, 2020

Resolution to Authorize Agreement for Delivery of Comprehensive Health Services for the Period of October 1, 2020 through September 30, 2021 – Health Department

WHEREAS, the Livingston County Health Department has determined a need for provision of the delivery of comprehensive health services; and

WHEREAS, these services are basic, required and allowable health services under Act 368 Public Acts of 1978, and individual categorical contractual services; and

WHEREAS, the Michigan Department of Health and Human Services provides a contractual relationship to partially reimburse Livingston County for the following health services,

COVID Response (Federal)	\$702,400
COVID-19 Response (State)	\$38,000
Food - Essential Local Public Health Services	\$137,749
Hearing- Essential Local Public Health Services	\$40,187
Vision - Essential Local Public Health Services	\$40,187
General Communicable Disease	\$268,305
MDEQ Private and Type III Water Supply	\$159,189
MDEQ On-site Wastewater Treatment	\$155,818
Bioterrorism Cities Readiness Initiatives	\$34,967
Bioterrorism Emergency Preparedness	\$101,911
Children's Special Health Care Services (CSHCS)	\$82,640
HIV Prevention	\$20,000
Immunization Field Rep	\$5,000
Immunization IAP	\$80,878
Maternal & Child Health	\$39,490
TB Control	\$897
Vaccine Quality Assurance	\$15,901
Vector-Borne Surveillance & Prevention	\$9,000
Women, Infants & Children	\$324,867
Women, Infants & Children Breastfeeding	\$26,230
TOTAL	\$2,283,616

WHEREAS, the Michigan Department of Health and Human Services may propose future amendments for the purpose of revising the funding or terms of the Agreement.

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby authorize an Agreement with the Michigan Department of Health and Human Services for the delivery of comprehensive health services in Livingston County during the period of October 1, 2020 through September 30, 2021, upon review by Civil Counsel.

BE IT FURTHER RESOLVED that \$2,108,016 be allocated to the Health Fund Account 221 to support the provisions of the Comprehensive Health Services Agreement authorized herein.

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners hereby authorize The Health Officer to electronically sign this agreement, and any future amendments for monetary and contract language adjustments of the above-referenced Agreement upon review and approval by Civil Counsel.

BE IT FURTHER RESOLVED that any deletions or additions of programs shall require Board approval.

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MOVED:
SECONDED:
CARRIED:



LIVINGSTON COUNTY HEALTH DEPARTMENT

2300 East Grand River Avenue, Suite 102
Howell, Michigan 48843-7578

www.lchd.org

PERSONAL/PREVENTIVE HEALTH SERVICES

P: (517) 546-9850
F: (517) 546-6995

ENVIRONMENTAL HEALTH SERVICES

P: (517) 546-9858
F: (517) 546-9853

Memorandum

To: Livingston County Board of Commissioners
From: Dianne McCormick
Date: 7/27/2020
Re: RESOLUTION TO AUTHORIZE AGREEMENT FOR THE DELIVERY OF COMPREHENSIVE HEALTH SERVICES FOR THE PERIOD OF OCTOBER 1, 2020 THROUGH SEPTEMBER 30, 2021

The attached resolution establishes continuation of the agreement with the Michigan Department of Health and Human Services for the delivery of mandated comprehensive health services. The MDHHS provides funding to partially reimburse the county for services covered in the agreement. There has been no significant changes in program requirements. The changes seen in funding from our 2020 resolution include a small decrease of \$11,437 in the Emergency Preparedness programs, and an increase in our federal COVID-19 response funding.

	2,020	2021
COVID-19 Response (Federal)	601,186	702,400
COVID-19 Response (State)	38,000	38,000
Food - Essential Local Public Health Services	137,749	137,749
Hearing- Essential Local Public Health Services	40,187	40,187
Vision - Essential Local Public Health Services	40,187	40,187
General Communicable Disease	268,305	268,305
MDEQ Private and Type III Water Supply	159,189	159,189
MDEQ On-site Wastewater Treatment	155,818	155,818
Bioterrorism Cities Readiness Initiatives	41,759	34,967
Bioterrorism Emergency Preparedness	106,556	101,911
Children's Special Health Care Services (CSHCS)	82,640	82,640
HIV Prevention	20,000	20,000
Immunization Field Rep	5,000	5,000
Immunization IAP	80,878	80,878
Maternal & Child Health	39,490	39,490
TB Control	897	897
Vaccine Quality Assurance	15,901	15,901
Vector-Borne Surveillance & Prevention	9,000	9,000
Women, Infants & Children	324,867	324,867
Women, Infants & Children Breastfeeding	26,230	26,230
TOTAL	2,193,839	2,283,616

Please do not hesitate to contact me should you have any questions.

Dianne McCormick (517) 552-6865

RESOLUTION

NO: 2020-08-200

LIVINGSTON COUNTY

DATE: August 10, 2020

Resolution Authorizing an Agreement with MAC Services Corporation/ CoPro+ for Procurement Support – Fiscal Services

WHEREAS, Livingston County has a partnership with MAC Services Corporation CoPro+ (Plus) to provide support to County departments for the purchase/procurement of goods and services and has assisted in identifying potential areas of savings to the County; and

WHEREAS, CoPro+ is comprised of a team of professionals experienced in public procurement with experts in numerous areas who provide support in process flow mapping, review and recommendations of policy changes and procurement support to help drive operational efficiencies and yield better contract prices that will result in government savings; and

WHEREAS, CoPro+ has increased the level of service it has been providing Livingston County since early this year. The partnership has transitioned to where CoPro+ has taken a lead on the development of procurement strategy, product & project specifications, drafting request for proposals & other formal and informal bid documents as deemed appropriate for each procurement need, market research, conducting negotiations, evaluating vendor performance, drafting modifications for contract amendments, and preparing FOIA responses.

WHEREAS, funds are available in the approved 2020 Fiscal Services Budget.

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners hereby authorizes entering into a Memorandum of Understanding (MOU) with MAC Services Corporation, referred to as CoPro+ to provide purchasing/procurement support to County Departments and assist in negotiating better contract prices that yield savings for a period of one year with the option to renew for four (4) additional one-year periods at an annual cost of \$48,000.

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners hereby authorizes any necessary budget amendments to effectuate the above.

BE IT FURTHER RESOLVED that the Chair of the Livingston County Board of Commissioners is authorized to sign all forms, assurances, contracts/agreements, renewals and future amendments for monetary and contract language adjustments related to the above as prepared by Civil Counsel.

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MOVED:
SECONDED:
CARRIED:



MEMORANDUM OF UNDERSTANDING
BETWEEN

LIVINGSTON COUNTY
AND
M.A.C. SERVICE CORPORATION (CoPro+)

This MEMORANDUM OF UNDERSTANDING (MOU) is hereby made and entered into by and between Livingston County, hereinafter referred to as Sponsor Organization, and MAC Service Corporation, hereinafter referred to as CoPro+.

PURPOSE: To provide support to Livingston County departments regarding the purchase/procurement of goods and services. This procurement support will include, but is not limited to, providing the following support: process flow mapping, review and recommendations of procurement policy changes, execute end-to-end procurement support (see below), help drive operational efficiencies and garner better contract prices that yield government savings.

TERM: The term of the MOU will commence on August 1, 2020 and will expire July 31, 2021. Livingston County will have the option to extend the MOU on an annual basis.

Option year 1 will begin August 1, 2021 to July 31, 2022
Option year 2 will begin August 1, 2022 to July 31, 2023
Option year 3 will begin August 1, 2023 to July 31, 2024
Option year 4 will begin August 1, 2024 to July 31, 2025

If either party desires to terminate the MOU for cause, a 90-day notice will be provided for an exit strategy to be developed and coordinated by both parties.

RESPONSIBILITIES OUTLINED BY PROCUREMENT PHASE:

1. NEED IDENTIFICATION AND SOLICITATION PREPARATION

CoPro+ – Responsible for the following:

- A. Assist Livingston County in identifying categories of supplies and services to bid
- B. Provide procurement planning assistance
- C. Define the requirements for supplies
- D. Develop Statement of Work for service
- E. Choose the appropriate procurement instrument
- F. Develop the procurement strategy
- G. Develop Terms and Conditions of the contract
- H. Prepare evaluation criteria
- I. Develop solicitation document
- J. Provide support to Sponsor Organization with posting the solicitation for bid

Livingston County – Responsible for the following:

- A. Provide input and advice on categories of supplies and services to bid
- B. Identify point of contact from Livingston County to interface with CoPro+ personnel
- C. Review and approve solicitation within 5 business days
- D. Post solicitation to public bid website, sponsoring entity website and/or MITN (Michigan Intergovernmental Trade Network), or comparable public website
- E. Facilitate conversations and ensure support between department heads and other countywide elected officials regarding purchasing/procurement opportunities

2. CONTRACTING PHASE (PREAWARD & AWARD PHASE)

CoPro+ – Responsible for the following:

- A. Respond to inquiries from potential bidders (Q&A)
- B. Adhere to the county's purchasing policies and regulations, and in the absence of clear policy, adhere to the ABA Model Procurement Code for state and local governments
- C. Evaluate proposals
- D. Determine responsive and responsible bidders
- E. Conduct negotiations upon approval from respective department

- F. Provide award recommendations
- G. Debrief unsuccessful bidders
- H. Prepare letters for signature to successful and unsuccessful bidders
- I. Facilitate bidders conference, when necessary
- J. Prepare recommendations when procurement decisions are challenged

Livingston County – Responsible for the following:

- A. Review, approve and sign letters to successful and unsuccessful bidders
- B. Provide final decision-making authority on challenged procurements
- C. Write, review, approve and sign contract for award to recommended vendor(s)

3. CONTRACT MANAGEMENT (POST CONTRACT AWARD)

CoPro+ – Responsible for the following:

- A. Facilitate “kickoff” meetings with successful awardees
- B. Resolve disputes that arise between ordering activity and vendor
- C. Draft for signature any amendments or modifications to the contract
- D. Conduct quarterly review of contract performance based on contract established prices and services levels
- E. Provide contract administration training to departments

Livingston County – Responsible for the following:

- A. Review, approve and sign any amendments or modifications to the contract

4. POST CONTRACT PHASE (CLOSE-OUT, AUDIT AND RATE VENDOR PERFORMANCE)

CoPro+ – Responsible for the following:

- A. Draft final amendment which serves as the closeout of the contract
- B. Initiate audit to determine if terms and conditions of contract were met
- C. Review satisfaction of vendor(s) performance
- D. Work with sponsor entity to properly stage contract closeout

Livingston County – Responsible for the following:

- A. Review, approve and sign contract closeout documentation



ADDITIONAL SERVICES INCLUDED IN THIS AGREEMENT:

CoPro+ – Responsible for the following:

- a. Provide county with 30 hours of staff time/week with a minimum of 4 hours per month on site at county facilities
- b. Attend internal county meetings, as requested
- c. Produce reports to county administration:
 - i. Procurement progress report
 - ii. Savings report
- d. Maintain procurement calendar
- e. Work closely with county staff to perform strategic sourcing activities
- f. Review contracts, pricing, purchase orders, and service levels
- g. Work with public entity partners to ensure timely request or delivery of products or services from external vendors
- h. Ensure that county processes, policies and guidelines are followed
- i. Provide consulting/mentoring to business partners on all phases of the procurement process
- j. Deliver FOIA documentation to county, as needed
- k. Supply documentation for county administration, as needed

Livingston County – Responsible for the following:

- a. Provide workspace for assigned staff
- b. Review and approve all procurement documents prior to release
- c. Answer all FOIA responses
- d. Provide final award decisions on all procurements
- e. Review, approve and sign letters to successful and unsuccessful bidders
- f. Approve all contracts and contract modifications

PAYMENT TERMS & CONDITIONS: The fee for the services outlined below and provided will be \$4,000.00 per month. CoPro+ shall invoice Livingston County on the 1st of each month and said invoice shall be paid by Livingston County within fourteen (14) days from the date of their receipt for the month being invoiced.

In addition to the fees provided for above, CoPro+ shall be reimbursed for any extraordinary out-of-pocket expenses. All ordinary expenses will be taken care of by MAC Service Corporation. Extraordinary expenses are as follows:

(i) Extraordinary Expenses

“Extraordinary expenses” shall include **out-of-state** travel, lodging and meals, large printing and/or material production costs such as those incurred in connection with mass mailings, and any other out-of-pocket expense that is not specifically defined above as an ordinary expense hereunder. CoPro+ shall not incur any extraordinary expenses without the prior approval/authorization of the county.

1. Indemnification: CoPro+ shall indemnify, save, and hold harmless Livingston County (each an “Indemnified Party” and collectively, the “Indemnified Parties”), and their respective employees and agents, against any and all claims, damages, liability and court awards including costs, expenses, and attorney fees and related costs, incurred as a result of any negligent act or omission by CoPro+, or its employees, agents, subcontractors, or assignees pursuant to the terms of this Agreement.

5. Limitation of Liability: No party to this Agreement or their respective affiliates, directors, officers, employees, agents or subcontractors, shall be liable to the other party for any indirect, incidental, special, consequential punitive or exemplary damages or liability (including reasonable attorneys’ fees) that result from or are related to this Agreement or any s or any of their respective exhibits or attachments, whether in contract or tort or under any other theory of liability, even if the other party has been informed of the possibility of such damages or liability. The aggregate liability of any party related to or arising out of this Agreement, whether in contract, tort or under any other theory of liability, shall not exceed the amounts received by CoPro+ from Livingston County in the 12 months preceding the event giving rise to such damages. The limitations of liability under this section shall not apply to any obligations and liabilities arising from death, personal injury, damage to tangible property or intellectual property infringement.

6. Termination: Either party may terminate this Agreement upon 90 days written notice to the other party.

7. Miscellaneous: This Agreement shall not become effective and binding until fully executed by both CoPro+ and the Sponsor Organization.



Sponsor Organization’s acceptance of CoPro+ shall constitute acceptance under the terms and conditions set forth herein.

This Agreement shall be governed by and construed in accordance with the laws of the State of Michigan.

This Agreement sets forth the entire agreement between the Parties in connection with the subject matter hereof and supersedes all prior discussions regarding the relationship and agreement between the Sponsor Organization and CoPro+ whether written or oral, between the Parties with respect to the matters addressed herein. No covenants, representations, or warranties have been made by either party to the other except as specifically set forth herein.

The section headings set forth throughout this agreement are for convenience only, and are not intended to affect the meaning of the provisions of this Agreement.

THE PARTIES HERETO have executed this instrument:

LIVINGSTON COUNTY:	MAC SERVICE CORPORATION:
DATE:	DATE: