Harrison County Commission Meeting
Wednesday, May 22, 2024
11:00 A.M.

The Harrison County Commission Meeting is held on the 3rd floor of the Harrison County General Services Building (229 South 3rd St.), if you are unable to attend in person, you may join and listen via Zoom Conference Call by the following steps. Public participation will only be allowed during public comment period and/or scheduled appointments.

Join Zoom Meeting

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https://us02web.zoom.us/j/7628160712

Dial: 1-646-568-7788

Meeting ID: 762 816 0712

Passcode: 26301

Appointments:

11:00 A.M. --- Call to Order --- Invocation --- Pledge of Allegiance

11:05 A.M. --- Proclamation --- Harrison County Community Educational Outreach Service Week --- Carolyn Romine

11:10 A.M. --- Special Funding Request --- Clarksburg- Harrison Regional Housing Authority--- $1,000 --- Annual Back to School Event --- Donna DeMarco

11:15 A.M. --- Special Funding Request --- Harrison County Beekeepers Inc --- $1,500 --- Honey Fest in September at the Bridge --- Deaonna Crowe

11:20 A.M. --- Special Funding Request --- FOP Mountaineer Lodge #78 --- $3,000 --- WV State FOP 51st Biennial Conference in June

NEW BUSINESS – Action Items for Consideration or Approval:

1. **Public Comment Period**
2. **Consent Agenda**
3. **Payroll Change Notices:**
   - **A.** Zyla Lanham--- Prosecuting Attorney --- New Hire --- Part time, Temporary Intern --- Effective 05-20-2024
   - **B.** Carl Swiger--- Courthouse Security --- New Hire --- Part Time, On Call --- Effective 05-22-2024
   - **C.** Joshua Gorrell --- Maintenance --- Re-hired --- Temporary Summer Help --- Effective 06-03-2024
   - **D.** Christian Burnside --- Maintenance --- Re-hired --- Temporary Summer Help --- Effective 05-28-2024
   - **E.** Harrison County Parks and Recreation Summer Playground Program Hire/Re-hires --- Effective 05-22-2024 --- **See Exhibit A**
4. **Minutes and/ or Amended Minutes of Previous Meetings**
   - **A.** Regular Meeting Minutes --- 04-24-2024
   - **B.** Regular Meeting Minutes --- 05-01-2024

5. **Requisitions --- Purchase Orders --- Invoices**
    - **A.** ARPA Funds --- Greater Harrison County PSD --- $156,130
    - **B.** ARPA Funds --- Sun Valley PSD --- $126,243.53
    - **C.** Vendor List of Payments
6. **Exonerations --- Corrective Tickets --- Joint Property Applications:**
    - **A.** Exhibit A --- Exonerations
7. **Consideration of Approval of a Project Fund Requisition for the payment of cost associated with the project to be financed from proceeds of the Series 2019 Bonds issued for the Charles Pointe Economic Opportunity Development District, Series 2021 A & B (Development District No. 3 White Oaks Project No. 2) & Series 2008 A (Charles Pointe Project No. 2- North Land Bay Improvements: (NONE)**
8. **Review—Discuss—Consider** Enlarged Hepzibah ARPA Project #2
    - ARPA funds allotted to EHPSD --- $500,000
    - Project #1 (Water System Improvements) utilized $170,825
    - Remaining funds $329,175 to be used on Project #2 Wastewater Treatment Plan Upgrades
9. **Review—Discuss—Consider** Sun Valley ARPA Project
    - ARPA funds allotted to Sun Valley PSD --- $615,000
    - Phase IIIA Wastewater Collection System Project
    - Total Project Cost will be $2,115,00
10. **Review—Discuss—Consider** Harrison County Animal Control electrical relocation right of way for Mon Power
11. **Review—Discuss-- Consider** Letter to Alcohol Beverage Control Administration—Almost Heaven Desserts—James Simon
12. **Review—Discuss—Consider** Request to Travel --- Chris Cutright --- 911 --- Orange County Convention Center, Orlando, Florida --- APCO Conference and Expo --- July 31, 2024 through August 8, 2024
13. **Review—Discuss—Consider** Request to Travel --- Megan Rowand --- 911 --- First Choice Services, Charleston, West Virginia --- "Crisis Intervention Team (CIT) – Communications Specialist – Train the Trainer" Class --- July 10, 2024 through July 14, 2024
14. **Review—Discuss—Consider** GSA Update --- (Potential Executive Session Pursuant to 6-9A-4(b)(9) to Consider Matters Involving or Affecting the Purchase, Sale or Lease of Property, Advance Construction Planning, the investment of Public Funds or Other Matters involving Commercial Competition, which if Made Public, Might Adversely Affect the Financial or Other Interest of the County)
15. **Review—Discuss—Consider** Harrison- Clarksburg Health Department Proposed Environmental Fees
16. **Review—Discuss – Consider** Declaring a Property located at 1953 Owings Road as Emergency nuisance within the framework of the International Property Maintenance Code Ordinance so that emergency measures/abatement may be commenced
17. **Review—Discuss—Consider** Retaining Fitzsimmons Law Firm to represent the County Commission in Opioid Litigation in relation to prescription benefit managers (Potential Executive Session per WV Code 6-9A-4 Attorney- Client Privilege- Opioid Litigation)

18. **Administrator's Report**
19. **Commissioner Comments – Questions**

CONSENT AGENDA – (NOTE: Items May Require Discussion, Review, and/or Action)

A. **Weekly Fiduciary Report from the County Clerk**
    1. 05-01-2024 through 05-07-2024
    2. 05-08-2024 through 05-14-2024
B. **Monthly Fiduciary Commission Settlements: (NONE)**
C. **Monthly Minutes/ Financial Information from Various Boards, Committees, and Public Service**
    1. Letter from State of West Virginia Department of Homeland Security stating the county's inmate billing rate will be changing
    2. Fort New Salem Foundation Newsletter
    3. Greater Harrison County PSD Meeting Agenda for May 16, 2024
    4. Greater Harrison County PSD Income Statement for Month of April
    5. Greater Harrison County PSD Meeting Minutes for April 18, 2024
    6. Sun Valley PSD Approved Operating Budget for the Fiscal Year 2024-2025

TABLED ITEMS - - Items May Require Discussion and/ or Approval

1. Thrasher being Engineer of record for the Rail Trail and the Agreement (03-22-2023)
2. Funding request --- Clarksburg History Museum (03-27-2024)
3. Estate Hearing --- Petition to remove Executor --- Mary Lou Grimes (04-10-2024)
4. Estate Hearing --- Petition to remove administrator --- Carol Sue Keavney (04-10-2024)
    - The County Clerk's Office will be sending the tabled Estate Hearings a letter stating that the estate was tabled and they need to contact us to schedule further proceedings.

HARRISON COUNTY COMMISSION
SPECIAL FUNDING REQUEST

Thank you for the opportunity to suport your project. Please complete this application and return it to the Harison County Commission, 301 West Main Street, Clarksburg, WV 26301 by fax or email: Facsimile: 304-624-8673; Email: countyadministrator@harrisoncountywv.gov ; Question: 304-624-8500
Funding is derived from the State of West Virginia/Video Lottery Funding.

Date of Request: 5/8/24

Organization Name: Clarksburg - Harrison Regional Housing Authority

Name and Title of Requester: Donna DeMarco - Resident Services/Family Self-Sufficiency Coordinator

Mailing Address of Organization and Responsible Person:

If approved, this is where the check will be sent

Telephone: 304-624-3322 ext 17 Fax: 304-623-5604 E-mail: ddemarco@citynet.net

FEIN# 208286366001 Is your organization an IRS 501(c) 3 not-for-profit? Y N
If yes, attach IRS Status Letter
If no, please explain:

TOTAL Cost of Project/Activity: $ 4,500.00

Dollar Amount REQUESTED - Grant: $ 1,000.00 Loan: $

Was project funded previously by HCC? (Y) N If so, when 2023 ; how much: $ 1,000.00

Have you previously received funds from the Harrison County Commisson: Y N
If Yes, how much? If funded multi years - list by fiscal year?
When: August 2024 ; how much: $
When: ; how much: $
When: ; how much: $

Purpose of request (one sentence): Donation

If for a fair/festival/event, give dates and location: Date: August 2024 Location:

Describe the proposed activities with dollar amounts to be funded by this request:
Annual Back To School Event with a cookout for the Low-Income Children and their families, games, backbags, School Supplies for the upcoming School year.

Are your financial statements audited by an outside accounting firm? (Y) N
If Yes, by whom:

Do you plan to recognize the Harrison County Commission 's contribution? (Y) N
If Yes, how?

HARRISON COUNTY COMMISSION **SPECIAL FUNDING REQUEST**

Clarksburg-Harrison Regional Housing Authority (CHRHA)
(Name of Applicant) agrees that in the event of any embezzlement, theft or misappropriation of funds or property of any kind or nature or in the event of any alleged embezzlement theft or misappropriation of funds or property of any kind or nature from (Name of Applicant) CHRHA, the recipient of funding from the Harrison County Commission hereunder, that (Name of Applicant) CHRHA shall immediately report said incident(s) to the proper police agency having jurisdiction over such matters and, further, shall immediately report said incident(s) along with a writing describing said incident(s) have been reported to the police agency having jurisdiction, to the Harrison County Commission. Further, that (Name of Applicant) CHRHA agrees to fully cooperate with the police and the Prosecuting Attorney's Office toward the successful prosecution of such activity.

Please attach to this Request the following:

1. IRS Letter of Tax Exemption, if you have one
2. Current List of Board of Directors with addresses
3. List other contributors with dollar amounts to your project/event
4. Balance sheet and income statement for immediate prior year, or reason why no available
5. Any additional information about your organization

FINAL REPORT REQUIRED: If approved, you agree to submit within 15 days of the event or end of project the "Final Report for Special Funding Request", on page 3 of this application OR a detailed statement of revenues and expenditures.

On behalf of the Applicant, I certify that all required information in this request is attached and correct, that we agree to the above terms, and that a Final Report (on attached Final Report or by Internal Financial Report detailing substantially same information) will be submitted within 15 days of the end of the project/event.

Signature and Title of Applicant Donna DeMarco **Date** 5/3/2024
Resident Services / FSS Coordinator

For Official Use:

This funding request is: APPROVED NOT APPROVED TABLED

Amount Approved: $ _____ Paid Date: _____

With the following notations:

_____

_____

_____

Action taken at Harrison County Commission meeting on: _____

Clarksburg-Harrison Regional Housing Authority
433 Baltimore Avenue, Clarksburg, WV 26301
Phone: 304-623-3322 fax: 304-623-5604

May 8, 2024 **Contribution Letter**

To Whom It May Concern:

Hello, my name is Donna De Marco and I am the Resident Services/Family Self-Sufficiency Coordinator for the Clarksburg-Harrison Regional Housing Authority.

One of the programs that I work with is an After School Homework Help Program for children at Laurel Lanes, a low-income housing complex and surrounding communities. With no help from federal funding, the Clarksburg-Harrison Regional Housing Authority provides children K through 12th grade with assistance with their homework. There are approximately 125 children that live in the Laurel Lanes community along with an average of about 75 children from the surrounding communities who attend the activities. We have over 50 children enrolled in this year's After School Homework Help Program with an average of 15 to 25 daily. Each year we like to give the children and their families the opportunity to share in fun, games and a cookout that they may not otherwise be able to enjoy. **What a great start for the upcoming school year with new backpacks filled with school supplies and grooming products.**

Our "Back to School Party" is an event for the children and families of the Laurel Lanes community and surrounding communities. I have started to work on this year event that will be held the week before school starts in August 2024.

Hopefully your organization would be able to assist us in this event with a monetary donation.

Please call me at 304-623-3322 ext. 17 with any questions you may have or you may email me at ddemarco@citynet.net.

Sincerely,

Donna D. De Marco
Resident Services/Family Self-Sufficiency Coordinator

Clarksburg-Harrison Regional Housing Authority
Board of Commissioners
As Of
July 2020

Marcel C. Malfregeot-Chairperson — Appointed on 07/18/2016 — Term expires on 07/18/2023
519 Stanley Avenue
Clarksburg, WV 26301
Phone: 623-4204 (Home)

William J. Rota — Appointed on 07/20/2006 — Term expires on 06/18/2025
418 College Street — Reappointed on 07/29/15
Clarksburg, WV 26301 — Reappointed on 06/18/2020
Phone: 623-4681 (Home)
203-4164 (Cell)

Resident Commissioner
Delores Jackson — Appointed on 07/18/2016 — Term expires on 07/18/2021
810 Locust Avenue, Apt. 4
Clarksburg, WV 26301
Phone: 844-5140

Sam Caputo — Appointed on 07/20/2006 — Term expires on 07/19/2022
2745 Good Hope Pike
Clarksburg, WV 26301
Phone: 304-623-5247 (Home)
304-622-4259 (Work)
304-844-0101 (Cell)
A-1 Exterminating

Roger Diaz — Appointed on 7/1/2020 — Term expires on 6/30/2025
1708 N. 16th Street
Clarksburg, WV 26301
Phone: 304-669-1708

WEST VIRGINIA CONSUMERS SALES AND SERVICE TAX AND USE TAX

EXEMPTION CERTIFICATE

CANNOT BE USED TO PURCHASE GASOLINE OR SPECIAL FUEL

WV/CST-280
(Rev. 905)

All sales of tangible personal property or taxable services are presumed to be subject to tax unless a properly completed Exemption Certificate or a Direct Pay Permit number is provided. Read instructions on reverse side before completing this certificate.

NAME OF VENDOR	DATE	CHECK APPLICABLE BOX: ☐ SINGLE PURCHASE CERTIFICATE ☒ BLANKET CERTIFICATE	
STREET ADDRESS	CITY	STATE	ZIP CODE

TO BE COMPLETED BY PURCHASER: I, the undersigned, hereby certify that I am making an exempt purchase and hold a valid Business Registration Certificate

Enter Tax Identification Number 2 0 8 2 8 6 3 6 6 0 0 1

My principle business activity is PUBLIC HOUSING

I claim an exemption for the following reason (Check applicable box or boxes):

PURCHASE FOR RESALE

☐ Purchase of tangible personal property or taxable services for resale or for use in performing taxable services where such property becomes a component part of the property upon which the services are performed and will be actually transferred to the purchaser. WV Code § 11-15-9(a)(9

PURCHASE BY AN EXEMPT COMMERCIAL AGRICULTURAL PRODUCER

☐ A Purchase of tangible personal property or taxable services for use or consumption in the commercial production of an agricultural product. But not purchases for the construction of, or permanent improvement to real property or purchases of gasoline or fuel. WV Code § 11-15-9(a)(8.

☐ B Purchase of propane for use in poultry houses for heating purposes. WV Code § 11-15-9(a)(18)

TAX EXEMPT ORGANIZATIONS

☒ A GOVERNMENT - Purchases by governmental agencies and institutions of (1) the United States; (2) this State (including its local governments) and (3) any other State (and its local governments) which provides this same exemption to this State. Such purchases by government employees are not exempt unless they are on government business and are billed to and paid for directly by the government. Private persons doing business with government may not claim this exemption. WV Code § 11-15-9(a)(3)

☐ B CERTAIN NONPROFIT ORGANIZATIONS - Purchases by a corporation or organization which has a current registration certificate and which is exempt from federal income taxes under section § 501(c)(3) or (c)(4) of the Internal Revenue Code. These organizations must meet all of the requirements set forth in WV Code § 11-15-9(a)(6). For information concerning these requirements refer to publication TSD-320. WV Code § 11-15-9(a)(6)

☐ C. SCHOOLS - Purchases by a school with its principal campus in this State which is approved by the State of West Virginia to award degrees and which is exempt from federal and state income taxes under section § 501(c)(3) of the Internal Revenue Code. WV Code § 11-15-9(a)(15)

☐ D. CHURCHES - Purchases of services, equipment, supplies, food for meals and materials directly used or consumed by churches which make no charge whatsoever for the services they render. The purchase must be paid for directly out of the church treasury. WV Code § 11-15-9(a)(5)

PURCHASES OF CERTAIN SPECIFIC SERVICES AND TANGIBLE PERSONAL PROPERTY

☐ A. Purchases of electronic data processing services and related software but not data processing equipment, materials and supplies WV Code § 11-15-9(a)(21)

☐ B Purchases of services by one corporation, partnership or limited liability company from another corporation, partnership or limited liability company but only when the entities are members of the same controlled group or related taxpayers as defined in Section 267 of the Internal Revenue Code WV Code § 11-15-9(a)(23)

☐ C Purchases of computer hardware and software directly incorporated into manufactured products; certain leases; electronic data processing service; computer hardware and software directly used in communication; educational software; internet advertising; high technology business services directly used in fulfillment of a government contract. WV Code § 11-15-9n

☐ D Purchases of motion picture films, coin-operated video arcade machines and other video arcade games for any use upon which there will be a charge subject to sales tax. WV Code § 11-15-9(a)(32)

☐ E Purchases by a licensed carrier of persons or property, or by a government entity, of aircraft repair, remodeling and maintenance services for an aircraft, engine or other component part of an aircraft, or purchases of tangible personal property that is permanently affixed as a component part of an aircraft as part of the repair, remodeling or maintenance of aircraft, aircraft engines or aircraft component parts, and purchases by a licensed carrier of persons or property, or by a government entity, of machinery, tools or equipment, directly used or consumed exclusively in the repair, remodeling or maintenance of aircraft, aircraft engines or aircraft component parts. WV Code § 11-15-9(a)(33)

REVERSE SIDE OF EXEMPTION CERTIFICATE MUST BE COMPLETED TO BE CONSIDERED VALID

SCHOOL SUPPLIES NEEDED ATTACHMENT # 1a

200 BACKPACKS

400 POCKET PAPER PORFOLIO FOLDERS

200 (24) COUNT CRAYOLA CRAYONS

200 GLUE STICKS

200 1-SUBJECT WILD-RULE SPIRAL NOTEBOOKS

100 1- SUBJECT COLLEGE-RULE SPIRAL NOTEBOOKS

200 3-HOLE PUNCH LOOSELEAF WIDE-RULES PAPER

100 3- HOLE PUNCH LOOSELEAF COLLEGE-RULES PAPER

200 RULERS

200 HI-LITERS

200 COLARED PENCILS

200 LARGE PINK ERASERS

600 # 2 PENCILS

200 PENS

200 PENCIL SHARPENERS

200 5" BLUNT SCISSORS

200 PACKAGES OF INDEX CARDS

200 PRINTED SCHOOL SCHEDULES

250 TOOTH BRUSHES

250 TOOTHPASTE

200 COMBS

200 POCKET TISSUE PACKETS

200 POCKET-SIZE HAND SANITIZERS

200 DENTAL FLOSS

FOOD AND PAPER PRODUCTS NEEDED FOR THE BACK TO SCHOOL PARTY
Attachment #1b

250 HAMBURGER PATTIES
250 HOT DOGS
250 (21) DOZEN HAMBURGER BUNS
250 (21) DOZEN HOT DOG BUNS
5 GALLONS HOT DOG CHILI
300 INDIVIDUAL-SIZE POTATO CHIPS
2 GALLONS ORANGE DRINK
2 SLEVES OF CUPS
120 CANS OF SODA POP
40 (2 LD) SODA POP
250 PLATES
250 FORKS, KNIFES, SPOONS
300 NAPKINS
12 TABLE CLOTHS
250 CUP CAKES
2 BAGS OF ONIONS
12 BAGS OF ICE
100 BOTTLED WATER
5 GALLONS BAKE BEANS
MUSTERD/KETCHUP/MAYO/PICKLES
CHEESE
WATERMELON
CANDY
48 LITTLE HUGGIES
5 GALLONS OF BAKED BEANS
5 GALLONS OF COLE SLAW
DECORATIONS
HAIR COLAR SPRAY
FACE PAINT

VENDOR DONATIONS AS OF 10/30/2023	
UNICARE HEALTH PLAN OF WEST VIRGINIA	
PERSONAL HYGIENE PACKS	100
PEPSI-COLA GROUP	
POP	5 CASES OF POP= 120 CANS
DE MARCO'S MACHAINE SHOP	
ONIONS	10 LB
TOMATOES	2 ½ BUSHELS
GREEN PEPPERS	2 ½ BUSHELS
HOT PEPPERS	1 BUSHELS
YELLOW SUMMER SQUASH	2 BUSHELS
CUCUMBERS	2 BUSHELS
SWEET YELLOW CORN	2 BUSHELS
CABBAGE	2 BUSHELS
SACRED HEART CHILDREN'S CENTER	
CHECK DONATION	$ 5,000.00
HARRISON COUNTY COMMISSION	
CHECK DONATION	$ 1,000.00
CITY OF CLARKSBURG	
CHECK DONATION	$ 400.00

PURCHASES as of 10/30/2023	
WALMART BOOKBAGS	$ 2,007.01
SAM'S CLUB	$ 1,427.43
WALMART	$ 206.93
PRICE CUTTERS	$ 187.16
FAMILY DOLLAR	$ 38.68
DOLLAR GENERAL	$ 58.72
QUANTUM PARTY RENTALS	$ 1,480.00
TOTALS	$ $ 5,405.93
LESS CASH DONATIONS	(- $ 6,400.00)
TOTAL COST TO HOUSING AUTHORITY	$ 0.00
BALANCE 2023	$ 994.07

HARRISON COUNTY COMMISSION
SPECIAL FUNDING REQUEST

Thank you for the opportunity to suport your project. Please complete this application and return it to the Harison County Commission, 301 West Main Street, Clarksburg, WV 26301 by fax or email: Facsimile: 304-624-8673; Email: countyadministrator@harrisoncountywv.gov *; Question: 304-624-8500*
Funding is derived from the State of West Virginia/Video Lottery Funding.

Date of Request: 4/30/2024

Organization Name: Harrison County Beekeepers Inc

Name and Title of Requester: Deaonna Crowe Vice President

Mailing Address of Organization and Responsible Person:
113 Frederick St Clarksbug Wv 26301
If approved, this is where the check will be sent

Telephone: 3046693514 Fax: _____ E-mail: cantbfound@aol.com

FEIN# 93-4262711 Is your organization an IRS 501(c) 3 not-for-profit? X N
If yes, attach IRS Status Letter
If no, please explain: _____

TOTAL Cost of Project/Activity: $ 10000.00

Dollar Amount REQUESTED - Grant: $ 1500.00 Loan: $ _____

Was project funded previously by HCC? Y X If so, when _____ ; how much: $ _____

Have you previously received funds from the Harrison County Commisson: Y X
If Yes, how much? If funded multi years - list by fiscal year?
When: _____ ; how much: $ _____
When: _____ ; how much: $ _____
When: _____ ; how much: $ _____

Purpose of request (one sentence): Honey Festival in Sept.

If for a fair/festival/event, give dates and location: Date: Sept 14 Location: The Bridge in Bridgeport

Describe the proposed activities with dollar amounts to be funded by this request:
We are having a BBQ contest with prises. teaching about bees, vendors selling only honey products.

A one day event with this to be held ever year.

Are your financial statements audited by an outside accounting firm? Y N
If Yes, by whom: new organzation not needed this year

Do you plan to recognize the Harrison County Commission 's contribution? X N
If Yes, how?

(Name of Applicant) Deaonna Crowe agrees that in the event of any embezzlement, theft or misappropriation of funds or property of any kind or nature or in the event of any alleged embezzlement theft or misappropriation of funds or property of any kind or nature from (Name of Applicant) Deaonna Crowe, the recipient of funding from the Harrison County Commission hereunder, that (Name of Applicant) Deaonna Crowe shall immediately report said incident(s) to the proper police agency having jurisdiction over such matters and, further, shall immediately report said incident(s) along with a writing describing said incident(s) have been reported to the police agency having jurisdiction, to the Harrison County Commission. Further, that (Name of Applicant) Deaonna Crowe agrees to fully cooperate with the police and the Prosecuting Attorney's Office toward the successful prosecution of such activity.

Please attach to this Request the following:

1. IRS Letter of Tax Exemption, if you have one
2. Current List of Board of Directors with addresses
3. List other contributors with dollar amounts to your project/event
4. Balance sheet and income statement for immediate prior year, or reason why no available
5. Any additional information about your organization

FINAL REPORT REQUIRED: If approved, you agree to submit within 15 days of the event or end of project the "Final Report for Special Funding Request", on page 3 of this application OR a detailed statement of revenues and expenditures.

On behalf of the Applicant, I certify that all required information in this request is attached and correct, that we agree to the above terms, and that a Final Report (on attached Final Report or by Internal Financial Report detailing substantially same information) will be submitted within 15 days of the end of the project/event.

Signature and Title of Applicant Deaonna Crowe vp **Date** 04/30/2024

For Official Use:

This funding request is: APPROVED NOT APPROVED TABLED

Amount Approved: $_____ Paid Date: _____

With the following notations:

_____

_____

_____

Action taken at Harrison County Commission meeting on: _____

Name of Organization/Applicant _____

FINAL REPORT OF THE SPECIAL FUNDING REQUEST

AMOUNT RECEIVED FROM THE HARRISON COUNTY COMMISSION: $ _____

ITEMIZED EXPENSES FOR THE AMOUNT RECEIVED FROM THE HCC (ATTACH EXTRA SHEETS IF NECESSARY OR DETAILED STATEMENT OF REVENUED AND EXPENSES RELATED THERETO):

_____	$ _____
_____	$ _____
_____	$ _____
_____	$ _____
_____	$ _____
TOTAL	$ _____

NAME OF PROJECT/EVENT: _____

TOTAL PROJECT/EVENT INCOME AND EXPENSES: (ATTACH EXTRA SHEETS IF NECESSARY OR A DETAILED STATEMENT OF REVENUES AND EXPENSES RELATED THERETO):

INCOME SOURCE:	_____	$ _____
	_____	$ _____
	_____	$ _____
	TOTAL	$ _____
EXPENSE ITEM:	_____	$ _____
	_____	$ _____
	_____	$ _____
	TOTAL	$ _____

LIST ALL CONTRIBUTORS TO THIS PROJECT/EVENT: (ATTACH EXTRA SHEETS IS NECESSARY)

_____	$ _____
_____	$ _____
_____	$ _____
_____	$ _____
TOTAL	$ _____

I CERTIFY THAT THE ABOVE INFORAMTION IS CORRECT

_____ _____

Applicant Date

County Commission of Harrison County, West Virginia

REVISED ORDER

Harrison County Community Improvement Fund -- Number 026

Harrison County General Fund -- Number 001

Policy and Procedure Regarding Contributions to Other Entities

Whereas, the Harrison County Commission has previously authorize a special fund, namely the Harrison County Community Improvement Fund (Number 026); and

Whereas, the Harrison County Commission maintains a General Fund (Number 001) as authorized and required by statute and/or regulations; and

Whereas, the Community Improvement Fund will be utilized for contributions for fairs, festivals and/or other special funding requests approved by the Harrison County Commission as originally set forth in the establishment of the Fund; and

Whereas, the General County Fund may be utilized *for* any lawful expenditure which may Include contributions to fairs and festivals and/or special funding requests, and

Whereas, the Harrison County Commission, by this Order, set forth the same for any contribution to any entity, as set forth herein.

Now, therefore, it is the Order of the Harrison County Commission that any contribution to any entity shall comply with the following policy and procedure unless otherwise expressly indicated. A contribution may be considered **for** funding only upon proper documentation being presented to the Office of the Harrison County Commission, which shall include, but not be limited to:

a) "Harrison County Commission Special Funding Request Form", the most recent copy attached and Included for reference;

b) All requested documentation as out lined In the "Special Funding Request Form,

c) If previously funded, the "Final Report of the Special Funding Request Form", the most recent copy attached and included for reference.

Now, therefore be it further resolved, funding requests from fairs and festivals, Including but not limited to the following, will be considered throughout the year. Such allocation will be $1,500 for a one day event and $3,000 for any event of more than one day.

1. Apple Butter Festival - City of Salem
2. Fort New Salem Holiday - Christmas Activity
3. Frontier Days - City of Shinnston ,
4. Glen Elk Village Wine Musical & Art? Festival

5. Jesus Fest ·
6. Johnstown CEOS Community Fair
7. Lost Creek Community Festival
8. North Central WV Scottish Festival
9. Pine Bluff Fall Festival
10. St. Spyridon Greek Food Festival
11. Town of West Milford Old Mill Festival
12. Wallace VFD Fair & Festival
13. *WV* Black Heritage Festival
14. *WV* Italian Heritage Festival

Now, therefore be it further resolved, funding requests from any other entity or agency must be submitted to the Office of the Harrison County Commission on or before March 1st to be considered for funding in the budget for the next fiscal year, which would begin July 1st and end June 30th. For the fiscal year beginning July 1 and ending June 30, the submission deadline for a special funding request will be May 1 of each year.

Now, therefore be it further resolved, the Harrison County Commission does hereby direct the administrative staff with the Office of the County Commission to take the necessary steps to communicate and provide this Order to the entities and agencies that have received funding during the past four fiscal years.

Order is hereby approved and entered this 20th day of July, 2022.

Susan J Thomas, President

Attest:

John Spires, Clerk of Harrison County

Board of Directors

Larry Forinash President

113 Frederick St
Clarksburg WV
304-669-5410

Deaonna Crowe Vice President

8030 Amarillo Ave
Stonewood WV 26301
304-669-3514

Jennifer Forinash Secretary

113 Frederick St
Clarksburg WV 26301
304-669-5415

Caroline Sosa Treasurer

119 Morgan St
Clarksburg WV 26301
304-844-6969

Contributors

Waste Management
1488 Dawson Drive
Bridgeport WV 26330
Erika
866-909-4458
They have devoted 35 acres of land for us to have an apiary and hold classes.
Plus, they are planting a pollinator garden and fruit trees at sight.
They have committed to financial help with the fall Honey Fest, just waiting for a response.

Quality Machine Inc
63 Quality Lane
Bridgeport WV 26330
304-842-6229
Christian Marsh

They have an offer to sponsor and waiting for a response from Mr. Marsh

City of Bridgeport
515 W Main St
Bridgeport WV 26330
304-842-8200

They have offered The Bridge for free for Fall Fest.

Balance Sheet And Income Statement

We are newly formed and this is all we have at this time

HARRISON COUNTY BEEKEEPERS
BALANCE SHEET
March 1, 2024

ASSETS

CURRENT ASSETS

Cash:	$200.00
Accounts Receivable:	$0.00
Inventory:	$0.00
Prepaid Expenses:	$3,290.95
Notes Receivable:	$0.00
Other Current Assets:	$0.00
TOTAL CURRENT ASSETS:	**$3,490.95**

FIXED ASSETS

Long-Term Investments:	$0.00
Land:	$0.00
Building:	$0.00
Accumulated Building Depreciation:	($0.00)
Machinery and Equipment:	$0.00
Accumulated Machinery and Equipment Depreciation:	($0.00)
Furniture and Fixtures:	$0.00
Accumulated Furniture and Fixtures Depreciation:	($0.00)
Other Fixed Assets:	$0.00
NET FIXED ASSETS:	**$0.00**

OTHER ASSETS

Goodwill:	$0.00

TOTAL ASSETS: **$3,490.95**

LIABILITIES & EQUITY

CURRENT LIABILITIES

(IRS USE ONLY) 575E 11-06-2023 HARR O 9999999999 SS-4

IMPORTANT REMINDERS:

* Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.

* Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.

* Refer to this EIN on your tax-related correspondence and documents.

* Provide future officers of your organization with a copy of this notice.

Your name control associated with this EIN is HARR. You will need to provide this information along with your EIN, if you file your returns electronically.

Safeguard your EIN by referring to Publication 4557, Safeguarding Taxpayer Data: A Guide for Your Business.

You can get any of the forms or publications mentioned in this letter by visiting our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter.

Thank you for your cooperation.

Keep this part for your records. CP 575 E (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 E

9999999999

Your Telephone Number ( ) -

Best Time to Call

DATE OF THIS NOTICE: 11-06-2023
EMPLOYER IDENTIFICATION NUMBER: 93-4262711
FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

HARRISON COUNTY BEEKEEPERS INC
113 FREDERICK ST
CLARKSBURG, WV 26301

State of West Virginia

Certificate

I, Mac Warner, Secretary of State of the State of West Virginia, hereby certify that

HARRISON COUNTY BEEKEEPERS INC

Control number: 9B6VA

has filed its application for "Certificate of Incorporation" in my office according to the provisions of the West Virginia Code. I hereby declare the organization to be registered as a corporation from its effective date of October 24, 2023, until a certificate of dissolution has been filed with Secretary of State.

Therefore, I hereby issue this

CERTIFICATE OF INCORPORATION

Given under my hand and the Great Seal of the State of West Virginia on this day of October 24, 2023

Mac Warner

Secretary of State

568538

WEST VIRGINIA
ARTICLES OF INCORPORATION
WITH NON-PROFIT IRS ATTACHMENT
Form CD-1NP
Rev. 11/2017

West Virginia Secretary of State
Business & Licensing Division
Tel: (304)558-8000
Fax: (304)558-8381
Website: www.wvsos.gov

FILE ONE ORIGINAL
(Two if you want a filed stamped copy returned to you.)

FILING FEE: $25 (non-profit)
*** Fee Waived for Veteran-owned corporation**

Control # _____

***** The undersigned, acting as incorporator(s) according to the West Virginia Code §31E-2-202, adopt the following *** following Articles of Incorporation for a West Virginia Non-Profit Domestic Corporation, which shall be perpetual.**

1. The **name** of the **West Virginia corporation** shall be: HARRISON COUNTY BEEKEEPERS INC
   [**The name MUST contain one of the required corporate name endings* per §31D-4-401 of the West Virginia Code (*see attached instructions for the list of required name endings)].** This name is your official name and must be **used in its entirety** when in use **unless** a Trade Name (DBA) is registered with the Office of the Secretary of State, according to Chapter 47-8 of the West Virginia Code.]

■ **CHECK BOX to indicate you've included one of the REQUIRED CORPORATE NAME ENDINGS (*See instructions for name endings*).**

2. The **address** of the **principal office** of the corporation will be:
   Street: 113 Frederick St
   City: Clarksburg State: WV Zip Code: 26301
   Located in the **County** of (required): County: Harrison
   The **mailing address** of the above location, if different, will be:
   Street:
   City: State: Zip Code:

3. The **physical address** (not a PO Box) of the **principal place of business** in West Virginia, if any:
   Street: 113 Frederick St
   City: Clarksburg State: WV Zip Code: 26301
   Located in the **County** of: County: Harrison
   The **mailing address** of the above location, if different, will be:
   Street:
   City: State: Zip Code:

4. The name and address of the **person (agent) to whom notice of process** may be sent, if any, will be:
   Name: Inc Authority RA
   Street: 232 Capitol St., Ste 100
   City: Charleston State: WV Zip Code: 25301

604950

5. **E-mail address** where business correspondence may be received: lforinash1@gmail.com

6. **Website address** of the business, if any (*ex: yourdomainname.com*): _____

7. Do you **own or operate more than one business in West Virginia**? ☐ **Yes** * *Answer a. and b. below.* ☐ **No** ■ **Decline to answer**

   If "Yes"... a. How many businesses? _____ b. Located in how many West Virginia counties? _____

8. The corporation is organized as (*check the box below*):

   ■ **NON-PROFIT, NON-STOCK** (If you plan to apply for 501(c)(3) status with the IRS, you will need to include specific language that is required by the IRS to be included in your Articles of Incorporation. That language is included as an attachment to this application - *see last page of this application.*)

9. a. The **purpose for which this corporation is formed** is as follows:
   (Describe the type(s) of business activity which will be conducted, for example, "agricultural production of grain and poultry", "construction of residential and commercial buildings", "manufacturing of food products", "commercial painting", "retail grocery and sale of beer and wine." Purpose may conclude with words "...including the transaction of any or all lawful business for which corporations may be incorporated in West Virginia.")

   We are a group of local Beekeepers that work to ensure a thriving and sustainable beekeeping industry within the region of North Central WV. We advocate for beekeepers' interests, and promote the states Master Beekeeping program.

   b. Is the business a **Scrap Metal Dealer**?

   ☐ **Yes** [If "Yes," you must complete the **Scrap Metal Dealer Registration Form** (Form SMD-1) and proceed to Section 10.]

   ■ **No** [Proceed to Section 10.]

10. FOR **NON-PROFIT ONLY** (Check the statement that applies to your entity.):

    ■ Corporation will have **NO MEMBERS.**

    ☐ Corporation will have **MEMBERS** (See *NOTE below.)

    ***NOTE: If the corporation has one or more classes of members, the designation of a class or classes is to be set forth in the articles of incorporation and the manner of election or appointment and the qualifications and rights of the members of each class is to be set forth in the articles of incorporation or bylaws. If this applies to your entity then you will need to attach a separate sheet listing the above required information, unless it will fit in the space provided below.**

11. The **name(s) and address(es) of the incorporator(s)** is (You must list at least ONE incorporator.):

	Name	Address	City	State	Zip Code
a)	Eliana Garcia	1450 Vassar St.	Reno	NV	89502
b)					

12. Is the organization a "**veteran-owned**" organization?

Effective **JULY 1, 2015**, to meet the requirements for a "**veteran-owned**" organization, the entity filing the registration must meet the following criteria per West Virginia Code §59-1-2a:

1. A "**veteran**" must be honorably discharged or under honorable conditions, and
2. A "**veteran-owned business**" means a business that meets one of the following criteria:
   - o Is at least fifty-one percent (51%) unconditionally owned by one or more veterans; or
   - o In the case of a publicly owned business, at least fifty-one percent (51%) of the stock is unconditionally owned by one or more veterans.

☐ **Yes** (If "Yes," attach **Form DD214**) ➡ ☐ **CHECK BOX** indicating you have attached Veteran Affairs Form DD214

☐ **No**

You may obtain a copy of your Veterans Affairs Form DD214 by contacting:

National Personnel Records Center
Military Personnel Records
1 Archives Drive
St. Louis, MO 63138
Toll free: 1-86-NARA-NARA or 1-866-272-6272
Phone: 314-801-0800
www.archives.gov/veterans/military-service-records

Per WV Code 59-1-2(j) effective July 1 2015, the **registration fee is** waived for entities that meet the requirements as a "**veteran-owned**" organization. See attached instructions to determine if the organization qualifies for this waiver. In addition, a "**veteran-owned**" entity will have **four (4) consecutive years of Annual Report fees waived** AFTER the organization's initial formation [see WV Code 59-1-2a(m)].

13. The number of acres of land it holds or expects to hold in West Virginia is: _____

14. **Contact and Signature Information*** (See below ***Important Legal Notice Regarding Signature***):

a. Contact person to reach in case there is a problem with filing: Processing Department Phone: +1 (800) 638-2320

b. Print name of person who is signing articles of incorporation: Eliana Garcia

c. **Signature of Incorporator:** EG **Date:** 10/23/2023

Important Legal Notice Regarding Signature: Per **West Virginia Code** §31E-1-129. **Penalty for signing false document.** Any person who signs a document he or she knows is false in any material respect and knows that the document is to be delivered to the secretary of state for filing is guilty of a misdemeanor and, upon conviction thereof, shall be fined not more than one thousand dollars or confined in the county or regional jail not more than one year, or both.

Important Note: This form is a public document. Please **do NOT provide any personal identifiable information on this form** such as social security number, bank account numbers, credit card numbers, tax identification or driver's license numbers.

Reset Form Print Form

Board of Directors

Larry Forinash President

113 Frederick St
Clarksburg WV
304-669-5410

Deaonna Crowe Vice President

8030 Amarillo Ave
Stonewood WV 26301
304-669-3514

Jennifer Forinash Secretary

113 Frederick St
Clarksburg WV 26301
304-669-5415

Caroline Sosa Treasurer

119 Morgan St
Clarksburg WV 26301
304-844-6969

Contributors

Waste Management
1488 Dawson Drive
Bridgeport WV 26330
Erika
866-909-4458
They have devoted 35 acres of land for us to have an apiary and hold classes.
Plus, they are planting a pollinator garden and fruit trees at sight.
They have committed to financial help with the fall Honey Fest, just waiting for a response.

Quality Machine Inc
63 Quality Lane
Bridgeport WV 26330
304-842-6229

Christian Marsh

They have an offer to sponsor and waiting for a response from Mr. Marsh

City of Bridgeport
515 W Main St
Bridgeport WV 26330
304-842-8200

They have offered The Bridge for free for Fall Fest.

Balance Sheet And Income Statement

We are newly formed and this is all we have at this time

HARRISON COUNTY COMMISSION
SPECIAL FUNDING REQUEST

Thank you for the opportunity to suport your project. Please complete this application and return it to the Harison County Commission, 301 West Main Street, Clarksburg, WV 26301 by fax or email: Facsimile: 304-624-8673; Email: countyadministrator@harrisoncountywv.gov ; Question: 304-624-8500
Funding is derived from the State of West Virginia/Video Lottery Funding.

Date of Request: May 13, 2024

Organization Name: FOP Mountaineer Lodge #78

Name and Title of Requester: Robert G. Matheny

Mailing Address of Organization and Responsible Person:
Robert G. Matheny PO Box 1338 Clarksburg, WV 26302
If approved, this is where the check will be sent

Telephone: 304-629-8640 Fax: _____ E-mail: _____

FEIN# 55-0651514 Is your organization an IRS 501(c) 3 not-for-profit? Y (N)
If yes, attach IRS Status Letter
If no, please explain: We are listed as 501(c) on the tax returns

TOTAL Cost of Project/Activity: $ 60,000.00

Dollar Amount REQUESTED - Grant: $ 3,000.00 Loan: $ _____

Was project funded previously by HCC? Y (N) If so, when _____; how much: $ _____

Have you previously received funds from the Harrison County Commisson: Y (N)
If Yes, how much? If funded multi years - list by fiscal year?
When: _____; how much: $ _____
When: _____; how much: $ _____
When: _____; how much: $ _____

Purpose of request (one sentence): WV State FOP 51st Biennial Conference

If for a fair/festival/event, give dates and location: Date: 6/9/24 to 6/12/24 Location: Bridgeport Conference Center

Describe the proposed activities with dollar amounts to be funded by this request:
Please See Attached Letter

Are your financial statements audited by an outside accounting firm? (Y) N
If Yes, by whom: Arnett, Carbis, Toothman LLP

Do you plan to recognize the Harrison County Commission 's contribution? (Y) N
If Yes, how?

HARRISON COUNTY COMMISSION **SPECIAL FUNDING REQUEST**

(Name of Applicant) FOP #78 agrees that in the event of any embezzlement, theft or misappropriation of funds or property of any kind or nature or in the event of any alleged embezzlement theft or misappropriation of funds or property of any kind or nature from (Name of Applicant) FOP #78, the recipient of funding from the Harrison County Commission hereunder, that (Name of Applicant) FOP #78 shall immediately report said incident(s) to the proper police agency having jurisdiction over such matters and, further, shall immediately report said incident(s) along with a writing describing said incident(s) have been reported to the police agency having jurisdiction, to the Harrison County Commission. Further, that (Name of Applicant) FOP #78 agrees to fully cooperate with the police and the Prosecuting Attorney's Office toward the successful prosecution of such activity.

Please attach to this Request the following:

1. IRS Letter of Tax Exemption, if you have one
2. Current List of Board of Directors with addresses
3. List other contributors with dollar amounts to your project/event
4. Balance sheet and income statement for immediate prior year, or reason why no available
5. Any additional information about your organization

FINAL REPORT REQUIRED: If approved, you agree to submit within 15 days of the event or end of project the "Final Report for Special Funding Request", on page 3 of this application OR a detailed statement of revenues and expenditures.

On behalf of the Applicant, I certify that all required information in this request is attached and correct, that we agree to the above terms, and that a Final Report (on attached Final Report or by Internal Financial Report detailing substantially same information) will be submitted within 15 days of the end of the project/event.

Signature and Title of Applicant Ralph E. Matthews, Conf. Chairman **Date** 05/13/2024

For Official Use:

This funding request is: APPROVED NOT APPROVED TABLED

Amount Approved: $_____ Paid Date: _____

With the following notations:

_____

_____

_____

Action taken at Harrison County Commission meeting on: _____



Dear Friends of FOP Lodge #78:

Your local FOP lodge is pleased to have been selected as host of the 51st Biennial State Conference. This year's Conference will be held June 9, 2024 thru June 12, 2024 at the Bridgeport Conference Center.

We hope to provide the very best hospitality to the approximately 150 FOP members/ Law Enforcement Officers from throughout West Virginia who will spend 4 fun filled days in our community. The lodge is planning several events throughout the Conference that will include a 3 day business meeting and elections of our state officers. Other events will include a food truck dinner and cornhole tournament event on Monday and a banquet on Tuesday evening.

Without your financial support, this event would not be as successful as the standard always set forth by your local FOP Lodge.

Levels of contributions:

$10,000.00 or more is a Five-Cornered Star Sponsorship. The Five-Cornered Star reminds us of the allegiance we owe to our flag and is a symbol of the authority with which we are entrusted.

$5,000.00 or more is a Points of Gold sponsorship. Points of Gold indicates the position under which we are now serving.

$3,000.00 or more is a Fort Pitt Sponsorship. Fort Pitt is the location that the first efforts were set forth by the FOP

$2,000.00 or more is a Eye of Vigilance Sponsorship. The eye of vigilance represents the ever watchful eye of Law Enforcement.

$1,000.00 or more is a Hands Clasped Sponsorship. The hand claspe denotes friendship among our profession.

Contributions less than $1,000.00 will be noted and is greatly appreciated.

You can mail your contributions to:
Harrison County Sheriff's Office
Attention: Heather Burnside/FOP
229 South 3rd Street
Clarksburg, WV 26301

Make checks payable to: Lodge 78 FOP
Please respond by June 1, 2024

The conference committee appreciates your continued support of Law Enforcement and the FOP.

Conference Committee

Form **W-9**
(Rev. March 2024)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Go to *www.irs.gov/FormW9* for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See *Specific Instructions* on page 3.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)
FOP mountaineer Lodge #78

2 Business name/disregarded entity name, if different from above.

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor ☑ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate

☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . .

Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.

☐ Other (see instructions)

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any)

Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)

(Applies to accounts maintained outside the United States.)

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions . . . . . ☐

5 Address (number, street, and apt. or suite no.). See instructions.
PO Box 1338

Requester's name and address (optional)

6 City, state, and ZIP code
Clarksburg WV 26301

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number
[ ][ ][ ] - [ ][ ] - [ ][ ][ ][ ]

or

Employer identification number
55 - 0651514

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here | **Signature of U.S. person** | **Date**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

efile Public Visual Render | ObjectId: 202302899349303090 - Submission: 2023-10-16 | TIN: 55-0651514

Form 990 Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2022

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

A For the 2022 calendar year, or tax year beginning 01-01-2022 , and ending 12-31-2022

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
FRATERNAL ORDER OF POLICE MOUNTAINEER LODGE #78

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
PO BOX 2386

City or town, state or province, country, and ZIP or foreign postal code
CLARKSBURG, WV 26301

D Employer identification number
55-0651514

E Telephone number
(304) 623-4244

G Gross receipts $ 1,165,077

F Name and address of principal officer:
ORVAL R BARNHART
PO BOX 2386
CLARKSBURG, WV 26302

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.

H(c) Group exemption number ▶ 1199

I Tax-exempt status: ☐ 501(c)(3) ☑ 501(c) (8) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ N/A

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1935

M State of legal domicile: WV

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
PRIMARY PURPOSE IS COMMUNITY OUTREACH & HELPING WITH THE GOALS & OBJECTIVES OF LAW ENFORCEMENT.

2 Check this box ▶ ☐

3	Number of voting members of the governing body (Part VI, line 1a)	3	8
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	8
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	41
6	Total number of volunteers (estimate if necessary)	6	8
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	24,938
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	50,209

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	8,400	4,935
9	Program service revenue (Part VIII, line 2g)	0	0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	117	94
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	169,067	214,328
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	177,584	219,357

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,920	9,233
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	4,794	7,782
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	150,483	201,314
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	162,197	218,329
19	Revenue less expenses. Subtract line 18 from line 12	15,387	1,028

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	229,517	231,301
21	Total liabilities (Part X, line 26)	1,802	2,558
22	Net assets or fund balances. Subtract line 21 from line 20	227,715	228,743

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5-20-24		| | |-| | |-| | | | |

NAME	ADDRESS
Zyla Lanham	

PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Pros. Attorneys	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☐ RATE		
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____	Ø	$10 hour
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☐ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ (DATE) UNTIL _____ (DATE)
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) part-time, temporary intern

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE 5-9-24
HUMAN RESOURCES MANAGER	DATE 5-16-24

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Amsterdam

PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5/22/2024		| | | - | | - | | | |

NAME	ADDRESS
Carl Swiger	

PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Security	On Call

THE CHANGE(S):

All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☑ SHIFT	On Call	
☐ RATE		
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ● HIRED
- ☐ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ (DATE) UNTIL _____ (DATE)
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) Part-Time Courthouse Security

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE Kate J. Mabry, Sheriff	DATE 5-15-2024
HUMAN RESOURCES MANAGER	DATE 5-16-2024

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HARRISON COUNTY
SHERIFF AND TREASURER

ROBERT G. MATHENY

301 WEST MAIN STREET
CLARKSBURG, WEST VIRGINIA 26301
PHONE (304) 624-8550 FAX (304) 624-8734

May 15, 2024

Harrison County Commission
229 South 3rd Street
Clarksburg, WV 26301

Dear Commissioners:

I am requesting the advice and consent of the Commission to appoint Carl Swiger to fill the part-time position of Courthouse Security. Mr. Swiger has met all requirements of this position.

Thank you in advance for your consideration.

Sincerely,

Robert G. Matheny
Sheriff

PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
06/03/2024	6623	| | | -| | -| | | | |

NAME	ADDRESS
JOSHUA GORRELL	

PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		424	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☐ RATE		
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

☐ HIRED	☐ PROBATIONARY PERIOD COMPLETED
☑ RE-HIRED	☐ LENGTH OF SERVICE INCREASE
☐ PROMOTION	☐ RE-EVALUATION OF EXISTING JOB
☐ DEMOTION	☐ RESIGNATION
☐ TRANSFER	☐ RETIREMENT
☐ MERIT INCREASE	☐ LAYOFF
☐ WAGE SCALE CHANGE	☐ DISCHARGE

☐ LEAVE OF ABSENCE FROM _____ (DATE) UNTIL _____ (DATE)

TYPE OF LEAVE _____

☐ OTHER (Explain) TEMPORARY SUMMER HELP

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE 05/16/2024
HUMAN RESOURCES MANAGER	DATE

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PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
05/28/2024	6617	
NAME CHRISTIAN BURNSIDE		ADDRESS
PHONE	CITY/STATE/ZIP	DEPARTMENT 424 / SHIFT

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☐ RATE		
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☑ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ (DATE) UNTIL _____ (DATE)
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) TEMPORARY SUMMER HELP

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE Doug Hines	DATE 05/16/2024
HUMAN RESOURCES MANAGER	DATE

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Exhibit A

Harrison County Parks & Recreation

Summer Playground Program Employees

2024 Start Date: May 22, 2024

Name	Position	Rate	Location
Davis, Tara	Head Park Leader	$13.00	
Folmsbee, Miranda	Head Park Leader	$13.00	
Hoskinson, Angela	Head Park Leader	$13.00	
Johnson, Lara	Head Park Leader	$13.00	
Louk Madison	Head Park Leader	$13.00	
Rogers, Katie	Head Park Leader	$13.00	
Vazquez, Noel	Head Park Leader	$13.00	
Fenstermacher, Nicholas	Substitute Park Leader	$13.00	
Ashby, Chloe	Park Leader	$11.00	
Courtney, Keora	Park Leader	$11.00	
Crock, Araya	Park Leader	$11.00	
Davis, Jonathan	Park Leader	$11.00	
Davis, Makenzie	Park Leader	$11.00	
Fisher, Patrick	Park Leader	$11.00	
Freeland, Shelby	Park Leader	$11.00	
Henline, Oliver	Park Leader	$11.00	
Hunt, Elizabeth	Park Leader	$11.00	
Lathan, Laiah	Park Leader	$11.00	
Louk, Abigail	Park Leader	$11.00	
McCormick, Isabell	Park Leader	$11.00	
Rudder, Reagan	Park Leader	$11.00	
Swiger, Katie	Park Leader	$11.00	
Travelstead, Briar	Park Leader	$11.00	
Vilain, Corinne	Park Leader	$11.00	
Thompson, Makayla	Park Leader	$11.00	

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO	
5-21-24			
NAME		ADDRESS	
Davis, Tara			
PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$13.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE 5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO	
5-22-24			
NAME		ADDRESS	
Folmsbee, Miranda			
PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$13.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE C.L. Hoff	DATE 5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO	
5-22-24			
NAME		ADDRESS	
Hoskinson, Angela			
PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$13.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE 5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO	
5-22-24			
NAME		**ADDRESS**	
Jessica Lucas			
PHONE	**CITY/STATE/ZIP**	**DEPARTMENT**	**SHIFT**
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$13.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO	
5-22-24			
NAME		ADDRESS	
Lovk, Melissa			
PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$13.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☐ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
[signature]	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO	
5-22-24			
NAME		ADDRESS	
Rogers, Katie			
PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		#13.50
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
[signature]	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5-22-24		

NAME	ADDRESS
Vazquez, Noel	

PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$13.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
[signature]	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5-22-24		

NAME	ADDRESS
Fenstermaker, Nicholas	

PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$13.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☒ OTHER Rehire		Seasonal
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
[signature]	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5-22-24		

NAME	ADDRESS
Ashby, Chloe	

PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
[signature]	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO	
5-22-24			
NAME		ADDRESS	
Courtney, Keora			
PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☒ HIRED
- ☐ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE 5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO	
5-22-24			
NAME		ADDRESS	
Crouch, Aaliyah			
PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$ 11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☒ HIRED
- ☐ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
[signature]	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO	
5-22-24			
NAME		ADDRESS	
Davis, Jonathan			
PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☑ RATE		$11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☑ HIRED
- ☐ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE [signature]	DATE 5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5-22-24		
NAME	**ADDRESS**	
Davis, Makenzie		
PHONE	**CITY/STATE/ZIP**	**DEPARTMENT** / **SHIFT**
		Parks /

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$ 11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5-22-24		

NAME	ADDRESS
Fisher, Patrick	

PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$ 11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
[signature]	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5-22-24		
NAME		**ADDRESS**
Freeland, Shelby		
PHONE	**CITY/STATE/ZIP**	**DEPARTMENT** / **SHIFT**
		Parks

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☑ RATE		$11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☑ HIRED
- ☐ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE 5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO	
5-22-24			
NAME		ADDRESS	
Henline, Oliver			
PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☒ HIRED
- ☐ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE 5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO	
5-22-24			
NAME		ADDRESS	
Hunt, Elizabeth			
PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☑ RATE		$11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☒ HIRED
- ☐ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
Chad Neyt	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO	
5-22-24			
NAME		ADDRESS	
Lathen, Leah			
PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
[signature]	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5-22-24		
NAME		**ADDRESS**
Lovk, Abigail		
PHONE	**CITY/STATE/ZIP**	**DEPARTMENT** / **SHIFT**
		Parks

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$ 11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☒ HIRED
- ☐ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
[signature]	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5-22-24		

NAME	ADDRESS
McCormick, Isabell	

PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
[signature]	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5-22-24		

NAME	ADDRESS
Rudder, Re[illegible]	

PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☑ RATE		11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☑ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE [signature]	DATE 5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5-22-24		

NAME	ADDRESS
Swiger, Katie	

PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☑ RATE		$ 11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☒ HIRED
- ☐ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR/SIGNATURE	DATE
[signature]	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5-22-24		
NAME		**ADDRESS**
Travelstead, Brian		
PHONE	**CITY/STATE/ZIP**	**DEPARTMENT** / **SHIFT**
		Parks

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☒ HIRED
- ☐ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE 5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO	
5-22-24			
NAME		ADDRESS	
Vikin. Corinne			
PHONE	CITY/STATE/ZIP	DEPARTMENT	SHIFT
		Parks	

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$ 11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
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- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

_____

_____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
Chad Neff	5-17-24
HUMAN RESOURCES MANAGER	DATE

HARRISON COUNTY PARKS & RECREATION
PAYROLL CHANGE NOTICE

DATE OF CHANGE	EMPLOYEE #	SOCIAL SECURITY NO
5-22-24		
NAME	**ADDRESS**	
Thompson, Makayla		
PHONE	**CITY/STATE/ZIP**	**DEPARTMENT** / **SHIFT**
		Parks

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
☐ DEPARTMENT		
☐ JOB		
☐ SHIFT		
☒ RATE		$11.00
☐ ADDRESS/PHONE		
☐ BENEFIT PLAN		
☐ OTHER _____		
☐ OTHER _____		

THE REASON FOR THE CHANGE(S):

- ☐ HIRED
- ☒ RE-HIRED
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ MERIT INCREASE
- ☐ WAGE SCALE CHANGE
- ☐ LEAVE OF ABSENCE FROM _____ UNTIL _____
- ☐ PROBATIONARY PERIOD COMPLETED
- ☐ LENGTH OF SERVICE INCREASE
- ☐ RE-EVALUATION OF EXISTING JOB
- ☐ RESIGNATION
- ☐ RETIREMENT
- ☐ LAYOFF
- ☐ DISCHARGE

TYPE OF LEAVE _____

☐ OTHER (Explain) _____

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
[signature]	5-17-24
HUMAN RESOURCES MANAGER	DATE

At the regular meeting of the County Commission of Harrison County held on Wednesday April 24, 2024, Commissioners Susan Thomas, David Hinkle and Patsy Trecost II were present. Also present were John Spires, County Clerk and Laura Pysz-Laulis, County Administrator. Commissioner Thomas opened the meeting and Commissioner Trecost said a Prayer and led those present in the Pledge of Allegiance to the flag.

9:00 A.M. --- Proclamation for Nate Critchfield: Commissioner Thomas read and presented the proclamation to Nate Critchfield. The Harrison County Commission hereby declares April 24, 2024 as "Nate Critchfield Day".

9:05 A.M. --- Special Funding Request --- 14th Annual Derek Hotsinpiller 5K --- $3,000 ---
Hannah Francis: Hannah Francis commended the Commission for their continual support for the event. Ms. Francis gave an overview of the event and advised that this was the fourteenth race. Trecost moved to approve $3,000.00 in funding. Commission concurred.

1. Public Comment Period: Joseph Romano, Assessor, advised that he has been going to some Civics classes to educate students.

9:10 A.M. --- Special Funding Request --- Town of West Milford, Float the Fork --- $3,000 ---
Jeff Barnhart: Jeff Barnhart explained float the fork event. Trecost moved to approve $3,000.00 in funding for float the fork. Commission concurred. Hinkle moved to approve $3,000.00 from the Commission and $3,000.00 from Parks and Recreation. Commissioner Hinkle voted in favor. Commissioner Thomas and Commissioner Trecost voted against. Motion failed.

9:15 A.M. --- Special Funding Request --- Greater Clarksburg 10K Race --- $1,500 ---
Lisa Cook in person or Carl Hatfield via Zoom: Lisa Cook explained the event. Trecost moved to approve funding in the amount of $1,500.00. Commission concurred.

2. Consent Agenda: Trecost moved to approve. Commission concurred.
3. Payroll Change Notices: Trecost moved to approve A through F. Commission concurred.
    A. Jeremy Burton --- Law Enforcement --- Promotion to Sergeant--- Effective 04-25-2024
    B. Josh Cumberledge --- Law Enforcement --- Resignation --- Effective 04-19-2024
    C. Paul Ramussen --- 911 --- Resignation --- Effective 04-24-2024
    D. Christian Baker --- Prosecuting Attorney --- Part Time Summer Intern --- Effective 05-03-2024
    E. Adrian Delgado --- Prosecuting Attorney --- Part Time Summer Intern --- Effective 05-17-2024
    F. Perry Thompson --- Community Corrections --- Part Time (As Needed) Community Service/ Transport --- Effective 04-24-2024
4. Minutes and/ or Amended Minutes of Previous Meetings: Hinkle moved to approve as presented. Commission concurred.

A. Regular Meeting Minutes --- 04-10-2024

15. Review—Discuss—Consider Distribution of Fire Department Fund from the State of West Virginia: Trecost moved to split the funds equally between all sixteen fire services. Commissioner Thomas and Commissioner Trecost voted in favor. Commissioner Hinkle voted against. Motion passed.

5. Requisitions --- Purchase Orders --- Invoices: Trecost moved to approve A through C. Commissioner Thomas and Commissioner Trecost voted in favor. Commissioner Hinkle voted against. Motion carried. Commissioner Hinkle moved to make item B a separate vote. Commissioner Hinkle voted in favor. Commissioner Thomas and Commissioner Trecost voted against. Motion failed.

A. Greater Harrison County PSD --- ARPA Funds (Requisition included in Payables)
B. Fire Department Distributions
C. Vendor List of Payments

6. Exonerations --- Corrective Tickets --- Joint Property Applications: (NONE)

7. Consideration of Approval of a Project Fund Requisition for the payment of cost associated with the project to be financed from proceeds of the Series 2019 Bonds issued for the Charles Pointe Economic Opportunity Development District, Series 2021 A & B (Development District No. 3 White Oaks Project No. 2) & Series 2008 A (Charles Pointe Project No. 2- North Land Bay Improvements: (NONE)

8. Review—Discuss—Consider Request to Travel --- Wayne Worth --- Community Corrections, Day Report Center --- Charleston, WV --- NASW WV Social Work Conference --- April 17-18, 2024: Trecost moved to approve travel. Commission concurred.

9. Review—Discuss—Consider Request to Travel --- Trevor Vance --- 911 --- Gaylord Palms Resort, Orlando, FL --- NENA Conference and Expo (Scholarship Recipient) --- June 26, 2024 thru July 7, 2024: Trecost moved to approve travel. Commission concurred.

10. Review—Discuss-- Consider Request to Attend Meeting --- 911 --- Morgantown, WV--- GIS Foundation Works Shop --- June 3-4, 2024: Trecost moved to approve A and B. Commission concurred.

A. Paul Bump
B. Steve Martin

Commissioner Hinkle left the meeting.

11. Review—Discuss—Consider GSA Update --- (Potential Executive Session Pursuant to 6-9A-4(b)(9) to Consider Matters Involving or Affecting the Purchase, Sale or Lease of Property, Advance Construction Planning, the investment of Public Funds or Other Matters involving Commercial Competition, which if Made Public, Might Adversely Affect the Financial or Other Interest of the County): Trey Simmerman, County Attorney, advised that himself and the County Administrator have been looking at the issues and does not want to discuss it in an open meeting context because of the nature of where the Commission is in the confrontational that are happening with the builder of the GSA. Trecost asked for legal and staff to come back to the Commission with an update and plan.

12. Review—Discuss—Consider Regional Director Reappointment of the West Virginia First Foundation: Trecost moved to approve John Dower as regional representative per County Administrator's recommendation. Commission concurred.

13. Review—Discuss – Consider a Resolution Applying to Senator Shelley Moore Capito's Office for Congressionally Directed Spending Funds for the Harrison County Agriculture and Youth

Complex: Gina Jones, Director of Grants, explained the resolution applying for funding. Trecost moved to approve and affix signatures. Commission concurred.

14. Review—Discuss—Consider a Resolution Applying to Senator Shelley Moore Capito's Office for Congressionally Directed Spending Funds for a New Harrison County Animal Control Facility Administrator's Report: Trecost moved to approve and affix signatures. Commission concurred.
15. Commissioner Comments – Questions: Commissioner Trecost spoke of funding process and use of levy funds.

Trecost moved to adjourn. Commission concurred.

With no further business to come before the Commission, meeting adjourned.

_____ _____

Susan Thomas, President Date

At the regular meeting of the County Commission of Harrison County held on Wednesday May 1, 2024, Commissioners Susan Thomas and Patsy Trecost II were present. Commissioner David Hinkle was absent. Also present were Laura Pysz-Laulis, County Administrator, John Spires, County Clerk and Trey Simmerman, County Attorney. Commissioner Thomas opened the meeting and Commissioner Trecost said a prayer and led those present in the Pledge of Allegiance to the flag.

1. Public Comment Period: (NONE)

2. Consent Agenda: Trecost moved to approve. Commission concurred.

3. Payroll Change Notices: (NONE)

4. Minutes and/ or Amended Minutes of Previous Meetings (NONE)

5. Requisitions --- Purchase Orders --- Invoices: Trecost moved to approve 5A. Commission concurred.
   A. Vendor list of Payments

6. Exonerations --- Corrective Tickets --- Joint Property Applications: Trecost moved to approve 6A. Commission concurred.
   A. Exhibit A --- Exonerations

7. Consideration of Approval of a Project Fund Requisition for the payment of cost associated with the project to be financed from proceeds of the Series 2019 Bonds issued for the Charles Pointe Economic Opportunity Development District, Series 2021 A & B (Development District No. 3 White Oaks Project No. 2) & Series 2008 A (Charles Pointe Project No. 2- North Land Bay Improvements: Trecost moved to approve 7A and B. Commission concurred.
   A. Series 2019 A&B --- $6,198.75
   B. Series 2008 A --- $3,245.03

8. Review—Discuss—Consider Submission of Final Performance Report for CDBG-CV grant: Michelle Tonkin spoke on approval from the Commission. Trecost moved to approve submission of final performance report for CDBG-CV grant and affix signature. Commission concurred.

9. Review—Discuss—Consider Execution of Letter of Intent with Mobile Infrastructure related to acquisition of Clarksburg Surface Lot – 327 Washington Ave (Potential Executive Session Pursuant to 6-9A-4(b)(9) to Consider Matters Involving or Affecting the Purchase, Sale or Lease of Property, Advance Construction Planning, the investment of Public Funds or Other Matters involving Commercial Competition, which if Made Public, Might Adversely Affect the Financial or Other Interest of the County): Trecost moved to accept Letter of Intent as presented and to affix signature as stated by the county attorney. Commission concurred.

11:05 A.M. --- Special Funding Request --- Marion County Beekeepers Association to Host Beekeepers Conference --- $500 --- Chuck Cieuawski: Diana Crow with the Harrison County Beekeepers Association spoke. Chuck Cieuawski with the Marion County Beekeepers Association spoke and requested funding. Trecost moved to approve $500.00 for the Marion County Beekeepers Association to Host Beekeepers Conference. Commission concurred.

11:10 A.M. --- Special Funding Request --- Inclusive Playground Project, in honor of Ivan Gonzalez --- Cheri Gonzalez: Cheri Gonzalez spoke in favor of the playground. Trecost moved to approve $5000.00 for Friends of Bridgeport foundation in honor of Ivan Gonzalez. Commission concurred.

10. Review—Discuss—Consider GSA Update --- (Potential Executive Session Pursuant to 6-9A-4(b)(9) to Consider Matters Involving or Affecting the Purchase, Sale or Lease of Property, Advance Construction Planning, the investment of Public Funds or Other Matters involving Commercial Competition, which if Made Public, Might Adversely Affect the Financial or Other Interest of the County): Trecost moved to enter Executive Session. Commission concurred. Trecost moved to enter Regular Session. Commission concurred. No action taken.

11. Review—Discuss—Consider Request to Travel --- 911 --- WV Northern Community College in Wheeling, WV --- June 18, 2024 --- APCO Disaster Operation Class: Trecost moved to approve A through G. Commission concurred.
    A. Julia Pierce
    B. Mike Coffey
    C. Becca Martin
    D. Natasha McDaniel
    E. Jason Sheff
    F. Mica Giaquinto

G. Braiden Klema

12. Review—Discuss – Consider Request to Travel --- 911 --- WV Northern Community College in New Martinsville, WV --- June 17, 2024 --- APCO Crisis Negotiations Class: Trecost moved to approve A through G. Commission concurred.
    A. Jesua DePropero
    B. Justin Norman
    C. Jade Hitt
    D. Consuela Jones
    E. Bryce Delgado
    F. Corey Hagan
    G. Megan Fox

13. Review—Discuss—Consider Sherriff's Request to Transfer Funds: Trecost moved to approve A through C. Commission concurred.
    A. 701- Process
    B. 703- Staging
    C. 730- Security

14. Administrator's Report: Laura Pysz-Laulis spoke of past board meeting.

15. Commissioner Comments – Questions

Commissioner Trecost moved to adjourn. Commission concurred.

With no further business to come before the Commission, meeting adjourned.

_____ _____

Susan Thomas, President Date

Pay Requistion #8
GREATER HARRISON COUNTY PSD
Route 20 - Quiet Dell Sanitary Sewer Extension

	A. Cost of Project	Total	Previous	Current	Remaining
1.	Total Estimated Construction Costs				
	a. Quiet Dell Collection System	$ 9,561,250.00		$ -	$ 9,561,250.00
	b. Wastewater Treatment Plant	$ 8,470,000.00			$ 8,470,000.00
	c. Contingency	$ 2,658,750.00	$ -	$ -	$ 2,658,750.00
2.	Technical Services				
	a.Study and Report Phase	$ 60,000.00	$ 60,000.00	$ -	$ -
	b. Preliminary Design	$ 800,000.00	$ 360,000.00	$ 130,000.00	$ 310,000.00
	c. Final Design	$ 420,000.00			$ 420,000.00
	d. Bidding and Negotiation	$ 70,000.00			$ 70,000.00
	e. Resident Project Representative	$ 750,000.00			$ 750,000.00
	f. Construction (Engineering During Construction)	$ 500,000.00			$ 500,000.00
	g. Post Construction	$ 30,000.00			$ 30,000.00
	h. Special Services				$ -
	i. Preperation of Application/ Facility Plan Approval	$ 15,000.00	$ 5,000.00	$ 10,000.00	$ -
	ii. Environmental Coordination	$ 25,000.00	$ 17,000.00	$ 2,000.00	$ 6,000.00
	iii. Engineering and Topographic Surveys	$ 50,000.00	$ 32,000.00	$ 2,500.00	$ 15,500.00
	iv. Survey Lands and Rights-of-Way	$ 100,000.00	$ 29,000.00	$ 3,500.00	$ 67,500.00
	v. Aerial Mapping	$ 30,000.00	$ 20,000.00		$ 10,000.00
	vi. Geotechnical Engineering	$ 50,000.00	$ 50,000.00		$ -
	vii. Asset Management Plan	$ 35,000.00			$ 35,000.00
	viii. O&M Manual	$ 75,000.00			$ 75,000.00
3.	Lands and ROWS				$ -
	a. Lands and Rights-of-Way Acquisitions	$ 500,000.00	$ 3,200.00	$ -	$ 496,800.00
	b. Rights-of-Way Meeting Assistance	$ 70,000.00	$ 1,400.00	$ -	$ 68,600.00
	c. Rights-of-Way Acquistion	$ 100,000.00	$ 32,250.00	$ 5,250.00	$ 62,500.00
	d. Fee Takes	$ 100,000.00	$ 8,300.00	$ -	$ 91,700.00
4.	Legal Fees				$ -
	a. Legal (Right-of-Way Attorney)	$ 125,000.00			$ 125,000.00
	b. Legal (Land Acquistion Attorney)	$ 10,000.00			$ 10,000.00
	c. Legal (Project Attorney)	$ 50,000.00			$ 50,000.00
5.	Administration Fees				$ -
	a. Accounting	$ 40,000.00			$ 40,000.00
	b. Administration	$ 120,000.00	$ 4,211.00	$ 2,880.00	$ 112,909.00
6.	Financing				$ -
	a. Bond Counsel	$ 50,000.00			$ 50,000.00
7.	Permits				$ -
	a. WVDOH	$ 60,000.00			$ 60,000.00
	b. NPDES Storm Water	$ 2,000.00			$ 2,000.00
8.	Miscellaneous				$ -
	a. Project Contingency	$ 98,100.00			$ 98,100.00
9.	Total Project Cost (line 8 plus line 10)	$ 25,025,100.00	$ 622,361.00	$ 156,130.00	$ 24,246,609.00
	B. Sources of Funds				
10	Harrison County Commission ARPA Funds	$ 7,825,100.00	$ 622,361.00	$ 156,130.00	$ 7,046,609.00
10	WDA EEG Funds	$ 8,000,000.00	$ -	$ -	$ 8,000,000.00
10	CWSRF Principal Forgivness	$ 1,000,000.00	$ -	$ -	$ 1,000,000.00
10	WVIJDC Grant	$ 1,000,000.00		$ -	$ 1,000,000.00
10	WVIJDC Loan 1% 40 Year	$ 7,200,000.00	$ -	$ -	$ 7,200,000.00

X

Signature of Authorized Representative
5/16/2024
Date

Signature of Consulting Engineer
5/16/2024
Date

Date of Meeting	May 20, 2024	Invoice - Quote									
Department Name	Vendor Name	Description Note	General County Fund	E-911	Vital Services Levy Fund	Community Corrections	Community Improvement Fund	ARPA Fund	QUOTES	Other as Needed
Commission	Toshiba	Copier Rental	$170.12							
Commission	City Net	Monthly Recurring Charge	$11,388.36							
Commission	WV Regional Jail & Correctional	April Inmate Housing	$163,778.54							
Commission	State Electric	Supplies	$19.29							
Commission	US Bank	Greater Harrison	$38.31							
Commission	Advantage Occupational Medicine	Employee Screen	$85.00							
Commission	YMCA	Employee Wellness	$32.00							
Commission	Texas Checks	Background checks	$53.50							
Commission	Mon Power	Service	$41.42							
Commission	US Bank	Training	$275.00							
Commission	State Auditors	2023 Audit	$25,980.00							
Commission	Mon Power	Service	$8,546.77							
Commission	Michelle Minutelli	Travel Reimbursement	$62.92							
Commission	Benny's Boot Hill	Safety Toe Shoes	$161.91							
Commission	US Cellular	Tablets & Modems	$2,920.01							
Commission	Frontier	Service	$22.24							
Commission	Visual Edge	Copier Rental	$344.89							
Commission	A-1 Extermainating	Pest Control (4 Invoices)	$563.25							
Commission	Hart Office Solution	Copier Rental	$219.14							
Commission	Shinnston VFD	Reimbursement of Invoice	$30,000.00							
Commission	Glen Elk Iron	Employee Wellness	$96.00							
Commission	Mon Power	Service	$22,240.82							
Commission	Pace Shredding	Shredding Service	$344.00							
Commission	Amazon.com	Supplies	$432.98							
Commission	Harrison Co. Bank	Airport Property Payment	$34,395.48							
Commission	MVB Bank	609 W. Main St.	$6,222.12							
Commission	Target	Calculator	$25.49						$25.49	
Commission	Anmoore EMS	EMS Salary Enhancement	$22,198.50							
Commission	Bridgeport Fire Dept.	EMS Salary Enhancement	$24,053.63							
Commission	Harrison Co. EMS	EMS Salary Enhancement	$70,530.91							
Commission	Nutter Fort	EMS Salary Enhancement	$360.22							
Commission	City of Salem	EMS Salary Enhancement	$8,438.13							
Commission	Clarksburg Water Board	Service	$103.59							
Commission	Town of Nutter Fort	Water & Waste Collection	$424.99							
Animal Control	Enterprise Sanitation	Waste Collection			$224.65					
Animal Control	Frontier	Phone Service			$170.94					
Animal Control	U S Cellular	Cellular Service			$243.16					
Planning	Pinnacle Consultants	Asbestos Testing	$30.00							
Planning	Pinnacle Consultants	Asbestos Testing	$40.00							
Planning	Pinnacle Consultants	Asbestos Testing	$60.00							
Planning	Amazon.com	Toner	$59.88						$59.88	
Planning	Pinnacle Consultants	Asbestos Testing	$30.00							
Planning	Enviroclean	Demolition of Properties	$27,247.00							
Planning	Harrison Co. Circuit Clerk	Filing Fees	$200.00							
IT Department	Jotform	License Renewal	$6,316.80						$6,316.80	
Assessor	Frontier	Statewide Computer	$57.44							
Assessor	Amazon.com	Printer Fuser Unit	$149.74							
Assessor	National Band & Tag	Dog Tags	$3,465.00							

Date of Meeting	May 20, 2024	Invoice - Quote								
Department Name	Vendor Name	Description Note	General County Fund	E-911	Vital Services Levy Fund	Community Corrections	Community Improvement Fund	ARPA Fund	QUOTES	Other as Needed
Assessor	Stationers	Address Change Cards	$405.87							
Assessor	MPB	Levy Rate Sheets	$2,385.00							
County Clerk	ES&S Election	Primary Election Layout	$11,747.00							
County Clerk	ES&S Election	Election Supplies	$3,928.00							
County Clerk	The Water Shop	Water Service	$86.00							
County Clerk	Hart Office Solutions	Copier Rental	$180.42							
County Clerk	Election	Ballot & Emer. Ballot Comm.	$750.00							
County Clerk	Election	Mileage	TBA							
County Clerk	Election	Custodians	TBA							
County Clerk	Election	Polling Places	TBA							
County Clerk	Election	Election Workers	TBA							
Prosecuting Attorney	James Armstrong	Travel Reimbursement	$56.28							
Prosecuting Attorney	Truist Bank	Supplies	$817.34							
Prosecuting Attorney	Truist Bank	Various Charges	$2,232.53							
Magistrate	West Virginia Paging	Pagers								$162.00
Courts	The Water Shop	Water Service	$76.00							
Courts	The Water Shop	Water Service	$101.00							
Courts	Brenda Hinkle	Mental Health Services	$315.60							
Courts	The Water Shop	Water Service	$12.00							
Park & Rec	Entireprise Sanitation	Waste Collection			$492.58					
Park & Rec	Philips Excavating	Ditching Spelter Ballfield			$3,638.20					
Park & Rec	Amtower Auto Parts	Brake Rotor			$106.00					
Park & Rec	Amtower Auto Parts	Automobile Parts			$59.27					
Park & Rec	Mon Power	Spelter Park			$20.93					
Park & Rec	Summit Park PSD	Water Service			$71.88					
Park & Rec	DELL EMC	Computer			$2,846.97					
Park & Rec	JD'S General Contracting	Good Hope Park			$14,950.00					
Park & Rec	Waste Management	Waste Collection			$235.74					
Park & Rec	Pace Shredding	Shredding Service			$39.00					
Park & Rec	Mon Power	Service			$32.66					
Park & Rec	Unifirst	Rug Rental			$29.08					
Park & Rec	M&M Septic Pumping	Porta John Rentals			$381.60					
Park & Rec	U S Bank	Various Charges			$3,148.95					
Park & Rec	Kathy McNemar	Reimbursement			$600.00					
Park & Rec	U S Bank	Picnic Tables			$2,992.65				$2,992.65	
Park & Rec	First Citizens Bank	Copier Rental			$172.00					
Park & Rec	Unifirst	Rug Rental			$29.08					
Park & Rec	U S Bank	Trash Receptales			$5,703.60				$5,703.60	
Park & Rec	Charter Communications	Internet Service			$194.98					
Park & Rec	Marsh Lumber	Supplies			$63.75					
Park & Rec	Lowes	Supplies			$318.58					
Garage	Hotsy	Repairs	$35.00							
Garage	Cardinal Sales	Compressor Repairs	$802.34							
Garage	Chenoweth Ford	Automobile Parts	$1,675.69							
Garage	Appalachian Tire	Tires/ Restock	$2,349.92							
Garage	Sandy's	Maintenace Parts	$5.29							

Date of Meeting	May 20, 2024	Invoice - Quote								
Department Name	Vendor Name	Description Note	General County Fund	E-911	Vital Services Levy Fund	Community Corrections	Community Improvement Fund	ARPA Fund	QUOTES	Other as Needed
Garage	Chenoweth Ford	Automobile Parts	$186.70							
Garage	Advance Auto Parts	Automobile Parts	$875.62							
Garage	Collision Plus	Automobile Repairs	$6,957.71							
Garage	Fisher Auto Parts	Cleaning Wipes	$16.69							
Garage	Benny's Boot Hill	Safety Toe Shoes	$611.73							
Maintenance	Lowes	Supplies	$364.16							
Maintenance	Sandy's	Supplies	$62.08							
Maintenance	Unifirst	Carpet Runner Rentals	$129.71							
Maintenance	State Electric	Supplies	$449.52							
Maintenance	Stationers	Restock Supplies	$891.48						$891.48	
Maintenance	Liberty Distributors	Restock Supplies	$974.85						$974.85	
Maintenance	R.D. Wilson	Restock Supplies	$323.96						$323.96	
Maintenance	James & Law	Restock Supplies	$279.00						$279.00	
Maintenance	Lowes	Supplies	$237.01							
Maintenance	The Water Shop	Water Service	$63.00							
Maintenance	Unifirst	Carpet Runner Rentals	$129.71							
Home Incarceration	US Cellular	Cellular Service				$505.41				
Home Incarceration	Canon Financial	Copier Rental				$214.05				
Community Corrections	WV DMV	DUI Program				$1,750.00				
Community Corrections	Uline	Supplies				$92.97				
Community Corrections	OpAns	Lab Confirmations				$9,100.00				
Community Corrections	Best Notes	Monthly Subscription				$503.00				
Community Corrections	Wayne Worth	Travel Reimbursement				$196.30				
Community Corrections	Alcohol Monitoring	Monitoring Fees				$1,583.80				
Community Corrections	Buddi US	Monitoring Fees				$4,339.60				
Community Corrections	James & Law	Office Supplies				$135.00				
Community Corrections	Micro Distributing	Lab Confirmations				$39,813.35				
Community Corrections	The Change Company	Materials				$174.25				
Community Corrections	Trac Solutions	Monitoring Fees				$4,277.00				
Community Corrections	Unisafe	Supplies				$367.92				
Community Corrections	US Bank	Various Charges				$757.08				
Law Enforcement	Auto Trim	Graphic Kit - K9	$550.00							
Law Enforcement	Skasiks Cleaners	Dry Cleaning	$467.80							
Law Enforcement	Blue Talon Consulting	Insttuctor Course	$295.00							
Law Enforcement	TLG Printing	Business Cards	$20.00							
Law Enforcement	PL Medical Co	Dosimetry Service	$12.00							
Law Enforcement	The Water Shop	Water Service	$24.00							
Law Enforcement	Truist Bank	Supplies	$763.04							
Law Enforcement	Truist Bank	Various Charges	$8,141.55							
Law Enforcement	Fubar Enterprises	Lightbar & Antenna	$345.47							
Law Enforcement	Truist Bank	Supplies	$236.49							
Law Enforcement	Truist Bank	Various Charges	$3,156.33							
Law Enforcement	Truist Bank	Various Charges	$1,538.19							
Process	Skasiks Cleaners	Dry Cleaning	$110.65							
Process	Truist	Various Charges	$500.00							
Security	Robin's Perfect Fit	Uniform Alterations	$42.00							

Date of Meeting	May 20, 2024	Invoice - Quote								
Department Name	Vendor Name	Description Note	General County Fund	E-911	Vital Services Levy Fund	Community Corrections	Community Improvement Fund	ARPA Fund	QUOTES	Other as Needed
Security	Auto Trim	Door Lettering	$270.00							
Sheriff & Treasure	Hart Office	Toner	$3,289.00							
Sheriff & Treasure	Special Tees	Shirts	$100.00							
Sheriff & Treasure	Casto & Harris	Tax Books	$1,912.20							
Michelle Tonkin	Fleetcor	Monthly Fuel	$21,157.19							
Michelle Tonkin	Sun Valley PSD	ARPA Funds						$126,243.53		
Michelle Tonkin	Greater Harrison PSD	ARPA Funds						$156,130.00		
911 Center	Mon Power	Service		$40.32						
911 Center	Harrison Rural	Service		$3,003.53						
911 Center	Charles Pointe	Monthly Dues		$834.40						
911 Center	Frontier	Service		$5,025.68						
911 Center	Pace Shredding	Shredding Service		$39.00						
911 Center	H.C. Bureau of Emer. Services	Reimbursement		$1,000.00						
911 Center	Frontier	Backup Circuit PK Tower		$766.00						
911 Center	Bearcom	Dispatch Radios		$762.50						
911 Center	Sandy's	Supplies		$35.98						
911 Center	Lowes	Supplies			$30.36					
911 Center	Lowes	Supplies			$20.88					
911 Center	Lowes	Supplies			$21.98					
911 Center	The Water Shop	Water Service			$37.50					
911 Center	Frontier	Internet		$220.50						
911 Center	Fastspring Lockbox	Subscription Renewal		$984.00						
911 Center	UniFirst	Carpet Runner Rental			$62.25					
911 Center	Amtower Auto Supply	Stoplight Switch			$36.28					
911 Center	Papercut Software	Software		$807.00					$807.00	
911 Center	Mountain State ESC	CPR Classes		$90.00						
911 Center	RD Wilson	Supplies			$45.82					
911 Center	Emcor	Service			$282.85					
Tax Office	Truist Bank	Printing	$300.00							
									$18,374.71	
			$555,990.51	$13,608.91	$37,304.17	$63,809.73	$0.00	$282,373.53		$162.00
					Grand Total :	$953,248.85				

COMMISSIONER'S SIGNATURE

DATE

Date of Meeting	May 20, 2024	Invoice - Quote								
Department Name	Vendor Name	Description Note	General County Fund	E-911	Vital Services Levy Fund	Community Corrections	Community Improvement Fund	ARPA Fund	QUOTES	Other as Needed

COMMISSIONER'S SIGNATURE _____ DATE _____

COMMISSIONER'S SIGNATURE _____ DATE _____

Exhibit A Exonerations	Amount
RE-494 Madia Chris & Alisha	893.85
RE-495 Madia Chris & Alisha	132.97
RE- 496 Phillips Nelson & Nathan	326.15
RE- 497 Dunn Wayne P & M Kay Revocable Living Trust	417.16
TOTAL:	$1,770.13

EXONERATIONS

RE496

STATE OF WEST VIRGINIA **COUNTY OF HARRISON**

Real Estate

At a regular term of the County Commission of Harrison County, West Virginia, held at the Courthouse of said County, Commissioners

David Hinkle **Susan J. Thomas** **Patsy Trecost II**

On the 15th day of May, 2024 issued the following order, which was made and entered, to-wit:

Upon application of DMCNEMAR for **PHILLIPS NELSON & NATHAN** whose address is, 5360 ASH ST CLARKSBURG, WV 26301, who proved to the satisfaction of the Commission that said property owner is aggrieved by an erroneous assessment of **28020** on **1 LOT #240 LAUREL VALLEY SD** , Class **3/4** in **UNION-OUTSIDE**, Harrison County, West Virginia, which should have been assessed at **28020**, Class **2** in and for the year **2023**, resulting in a difference in assessed value of **0**. The Commission therefore, orders that the said applicant be and is hereby exonerated from the said erroneous assessment and from the payment of the taxes so assessed, in and for the year **2023**, if the same has not been paid, and if it has been paid, that the Sheriff refund the same to them.

The commission certifies the following facts upon which it grants said relief:

The above mentioned property is Class 2 taxpayer resides in camper on property. Exonerate a value of 14010 at a Class 3 rate of levy to correct the overcharge.

District: **20 - UNION-OUTSIDE**
Account No. **6538204**
Ticket No. **73944**
Tax Year **2023**

Amount Exonerated: $ 326.15

PRESENT: Prosecuting Attorney
(or)
PRESENT: Tax Commissioner

APPROVED: President, County Commission

ORDER ENTERED TO STATE AUDITOR

ATTEST: County Clerk

ASSESSOR

EXONERATIONS

RE 494

STATE OF WEST VIRGINIA **COUNTY OF HARRISON**

Real Estate

At a regular term of the County Commission of Harrison County, West Virginia, held at the Courthouse of said County, Commissioners

David Hinkle **Susan J. Thomas** **Patsy Trecost II**

On the 15th day of May, 2024 issued the following order, which was made and entered, to-wit:

Upon application of DMCNEMAR for **MADIA CHRIS & ALISHA** whose address is, 1719 PRIDE AVE CLARKSBURG, WV 26301, who proved to the satisfaction of the Commission that said property owner is aggrieved by an erroneous assessment of **58080** on **1 LOT PT 46 WESTERN 1/2 N VIEW** , Class **3/4** in **COAL-CLARKSBURG**, Harrison County, West Virginia, which should have been assessed at **58080**, Class **2** in and for the year **2023**, resulting in a difference in assessed value of **0**. The Commission therefore, orders that the said applicant be and is hereby exonerated from the said erroneous assessment and from the payment of the taxes so assessed, in and for the year **2023**, if the same has not been paid, and if it has been paid, that the Sheriff refund the same to them.

The commission certifies the following facts upon which it grants said relief:

The above mentioned property is owner occupied, therefore Class 2 applies. Exonerate a value of 29040 at a Class 4 rate of levy to correct the overcharge.

District: **08 - COAL-CLARKSBURG**
Account No. **6075150 TIF #4**
Ticket No. **26989**
Tax Year **2023**

Amount Exonerated: $ 893.85

PRESENT: Prosecuting Attorney
(or)
PRESENT: Tax Commissioner

APPROVED: President, County Commission

ATTEST: County Clerk

ORDER ENTERED TO STATE AUDITOR

ASSESSOR
Joseph R Lemasters

EXONERATIONS

RE495

STATE OF WEST VIRGINIA **COUNTY OF HARRISON**

Real Estate

At a regular term of the County Commission of Harrison County, West Virginia, held at the Courthouse of said County, Commissioners

David Hinkle **Susan J. Thomas** **Patsy Trecost II**

On the 15th day of May, 2024 issued the following order, which was made and entered, to-wit:

Upon application of DMCNEMAR for **MADIA CHRIS & ALISHA** whose address is, 1719 PRIDE AVE CLARKSBURG, WV 26301, who proved to the satisfaction of the Commission that said property owner is aggrieved by an erroneous assessment of **8640** on **1 LOT PT 46 UPLAND GROVE** , Class **3/4** in **COAL-CLARKSBURG**, Harrison County, West Virginia, which should have been assessed at **8640**, Class **2** in and for the year **2023**, resulting in a difference in assessed value of **0**. The Commission therefore, orders that the said applicant be and is hereby exonerated from the said erroneous assessment and from the payment of the taxes so assessed, in and for the year **2023**, if the same has not been paid, and if it has been paid, that the Sheriff refund the same to them.

The commission certifies the following facts upon which it grants said relief:

The above mentioned property adjoins homesite on parcel 204, therefore Class 2 applies. Exonerate a value of 4320 at a Class 4 rate of levy to correct the overcharge.

District: **08 - COAL-CLARKSBURG**
Account No. **06079389 TIF #4**
Ticket No. **26990**
Tax Year **2023**

Amount Exonerated: $ 132.97

PRESENT: Prosecuting Attorney
(or)

PRESENT: Tax Commissioner

APPROVED: President, County Commission

ORDER ENTERED TO STATE AUDITOR

ATTEST: County Clerk

ASSESSOR Joseph A Romano

RE 497

EXONERATIONS

STATE OF WEST VIRGINIA **COUNTY OF HARRISON**

Real Estate

At a regular term of the County Commission of Harrison County, West Virginia, held at the Courthouse of said County, Commissioners

David Hinkle **Susan J. Thomas** **Patsy Trecost II**

On the 22nd day of May, 2024 issued the following order, which was made and entered, to-wit:

Upon application of DMCNEMAR for **DUNN WAYNE P & M KAY REVOCABLE LIVING TRUST** whose address is, 968 CHESTERVILLE RD MINERAL WELLS, WV 26150, who proved to the satisfaction of the Commission that said property owner is aggrieved by an erroneous assessment of **22820** on **37.12 AC KINCHELOE**, Class **3/4** in **UNION-OUTSIDE**, Harrison County, West Virginia, which should have been assessed at **5120**, Class **3/4** in and for the year **2022**, resulting in a difference in assessed value of **17700**. The Commission therefore, orders that the said applicant be and is hereby exonerated from the said erroneous assessment and from the payment of the taxes so assessed, in and for the year **2022**, if the same has not been paid, and if it has been paid, that the Sheriff refund the same to them.

The commission certifies the following facts upon which it grants said relief:

The above mentioned land was erroneously double assessed. Taxpayer applied for manage timber, was approved & erroneously left on CA14. Exonerate a value of 17,700 at a Class 3 rate of levy to correct the overcharge.

District: **20 - UNION-OUTSIDE**
Account No. **6430070**
Ticket No. **69102**
Tax Year **2022**

Amount Exonerated: $ 417.16

PRESENT: Prosecuting Attorney
(or)
PRESENT: Tax Commissioner

APPROVED: President, County Commission

ORDER ENTERED TO STATE AUDITOR

ATTEST: County Clerk

ASSESSOR

9. Project Summary: (In your response, please consider including the following: a brief description of the project including specific use of ARPA funds, location, community need, timelines, and all deliverables. Also, include collaboration with other agencies on this project (if applicable). Please attach additional pages if necessary. If there are multiple projects, please provide separate narratives and budget information on each one.)
Replace, repair existing aged, outdated equipment, appurtenances used to maintain the daily operations and requirements of two wastewater treatment plants. Per State of WV D.E.P. Project to included the following: New ultraviolet disinfection units. New Sludge pumps, valves, piping. New drive motors, gear boxes for rotors over oxidation ditches. New drive motors, gear boxes, sprockets for clarifiers. New Ultrasonic flow monitoring systems. New electric conduit and wire to all new motors installed in project with LED lighting.

10. Total Project Cost: $329,175.00

11. Project Start date (estimated): May 01,2024

12. Project End Date (estimated): December 31,2024

13: Name and Contact information of Project Engineer and Project Administrator if different from authorized contact above.

The Thrasher Group, Inc.

600 White Oaks Blvd. I Bridgeport, WV 26330

SUN VALLEY PUBLIC SERVICE DISTRICT

IJDC No. 2022S-2148

Resolution #1

RESOLUTION OF THE SUN VALLEY PUBLIC SERVICE DISTRICT APPROVING INVOICES RELATING TO ACQUISITION AND CONSTRUCTION AND OTHER SERVICES FOR THE PROPOSED IIIA SEWER PROJECT AND AUTHORIZING PAYMENT THEREOF,

WHEREAS, the Sun Valley Public Service District has reviewed the invoices attached hereto for the the construction of the IIIA Sewer Project funded by WV Infrastructure and Jobs Deveopment Council ("IJDC") grants & Harrison County ARPA, and find as follows:

a) That none of the items for which payment is proposed to be made has been requested from another funding source

b) That each item for which the payment is proposed to be paid is or was necessary in connection with the Project and constitutes a Cost of the project.

c) That each of such costs has been otherwise properly incurred.

d) That the payment for each of the items proposed is due and owing.

NOW, THEREFOR, BE IT RESOLVED the Sun Valley PSD by as follows: There is hereby authorized and directed the payment of the attached invoices as follows:

Vendor	Total	IJDC Grant	ARPA
JD Utilities	$ 3,820.00	$ -	$ 3,820.00
Bennett & Dobbins	$ 7,500.00		$ 7,500.00
Thrasher Group	$ 94,500.00	$ -	$ 94,500.00
Sun Valley PSD	$ 20,423.53	$ -	$ 20,423.53
Total	$ 126,243.53	$ -	$ 126,243.53

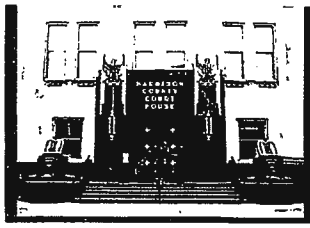
ADOPTED BY the Sun Valley Public Service District this 14th day of May 2024

By: _____

Its: Chairman

_____

Board Member



Harrison County Commission
ARPA Form

Fill out the form below completely. All receipts should be attached to the form and emailed to grants@harrisoncountywv.gov.

Date	5/14/2024
Project Expenditure Category Group	5-Infrastructure
Project Expenditure Category	5.2-Clean Water: Centralized wastewater collection and conveyance
Project Owner	Sun Valley Public Service District
Project Name	Phase IIIA Wastewater Collection System Project
Project Description	The PSD is replacing Lift Station #2 and upgrade Lift Station #1. The PSD is also replacing and upsizing the existing force main.
Projected/Actual Construction Date	September 2024
Projected/Actual Operation Date	February 2025
Location Type	Lat/Long (WGS84 or NAD83 Geographic Coordinate System)
Location Details (Lat/Long)	39.2873638°N, -80.387875°W
PWSID Number	N/A
NPDES Number	WV0104663
MHI of Service Area	40,375
MHI Type (County, City, Magisterial)	Magisterial

☒ Invoices Attached

☒ Resolution Attached

Monongahela Power Company™
DISTRIBUTION LINE EASEMENT - OVERHEAD (Corporation)
FORM X-4212.2 (REV. 06-13) Page 1 of 2

WBS Element/Internal Order WR 62558532, SAP 17697455
Title Saltwell Reconductor

FOR VALUABLE CONSIDERATION RECEIVED, the receipt of which is hereby acknowledged, County Commission of Harrison County, a corporation, whose address is 301 W Main Street, Clarksburg, WV 26301 a Municipal and/or County Corporation or Association corporation, (hereinafter called "Grantor") hereby grants and conveys unto Monongahela Power Company, an Ohio corporation, its successors and assigns, (hereinafter called "Grantee") a perpetual easement over, upon, in and through lands of the Grantor located in Harrison District/Township, Clay-Outside County, State of West Virginia, at the address the property designated as Assessor's Parcel 17-5-208-122-1 (hereinafter referred to as "premises"), containing 3.23 acres, more or less, acquired by the Grantor by, and described in, the certain deed(s) recorded in Volume 1089 at Page 854, and Volume _____ at Page _____ of the Deed Records of said County, together with the continuing right of reasonable access thereto or any portion thereof over said lands as required for the construction, operation, maintenance, alteration, reconstruction and removal, from time to time, of electric distribution lines and communication facilities and additions thereto, including all poles, anchors, guy wires and other supporting structures, and all wires, transformers, conduit and other equipment used in connection therewith (all hereinafter collectively called "facilities"). The facilities and centerline of the easement are shown on Exhibit A, attached hereto and made a part hereof. The easement shall be _____ feet in width, with _____ feet on each side of the centerline.

The Grantee shall at all times have the right to clear, control, cut, trim and remove trees, limbs, vegetation and brush from the premises without liability for damages or which in its opinion may interfere with the exercise of its rights hereunder or endanger said facilities. The Grantor reserves the right to use said lands for purposes which are not inconsistent with, and do not endanger or interfere with, the exercise by the Grantee of its rights hereunder, except that the Grantor, its successors and assigns, shall not, and shall not permit others to, alter the surface elevation of said easement from the elevation existing upon completion of construction of facilities hereunder, nor plant any trees or erect or place any buildings or structures on said easement or adjacent to said easement if their location may constitute a hazard to said facilities.

The Grantee shall pay for or repair all damages sustained by the Grantor resulting from construction, maintenance, alteration, reconstruction or removal of said facilities by the Grantee and not caused or contributed to by Grantor, its successors, assigns, agents, and invitees.

The Grantor, for itself, its successors and assigns, covenants that it is the true and lawful owner of said lands and has full right and power to grant and convey said easement as herein provided. The undersigned declares that the total consideration paid for the property transferred hereby is, to the best of its knowledge and belief, $1.00.

IN WITNESS WHEREOF, the Grantor has caused this instrument to be executed this _____ day of _____ (MONTH/YEAR).

ATTEST:

_____ (GRANTOR)

_____ (SECRETARY)

By _____ (VICE PRESIDENT)

STATE OF _____
COUNTY OF _____ } SS:

I, _____, a Notary Public in and for said County, hereby certify that _____, its _____ of _____, who signed the foregoing instrument, has this day before me acknowledged the same to be the free act and deed of said corporation.

Given under my hand this _____ day of _____ (MONTH/YEAR).
My Commission Expires _____

_____ (NOTARY PUBLIC)

This instrument was prepared by Gary A. Jack, Attorney at Law, Fairmont, West Virginia.

TITLE SOURCE

Grantor acquired by:

Deed From Humane Society of Harrison County

bk 1089 pg 854

Will Of _____

_____

Inherited From _____

_____

All _____ Part _____

_____

Remarks _____

_____

_____

_____

_____

_____

DISTRIBUTION LINE EASEMENT

Name County Commission of Harrison County

Title _____

_____

_____

District _____

County _____

Date _____

WBS Element/Internal Order _____

Remarks Saltwell Reconductor

WR 62558532, SAP 17697455

_____

_____

_____

_____

COUNTY CLERKS
Please Use This Space


Harrison County Animal Control
TMP 17-5-208-122.01
EXHIBIT "A"
Proposed Installation
"NOT TO SCALE"
Legend
EXISTING 1 PHASE PRIMARY TO BE REMOVED
EXISTING 1 PHASE PRIMARY TO REMAIN
Harrison County
PROPOSED
U2854
ANCHOR
PROPOSED POLE
PROPOSED POLE
131
PROPOSED POLE
Harrison County Animal Control
1017405
ANCHOR
ANCHOR
PROPOSED POLE
U2853
2B0042
PROPOSED POLE
ANCHOR
N
200 ft

ZONING FORM

WEST VIRGINIA RESIDENT BREWER

(Original copy must be submitted to the WVABCA Beer Division)

Note: If an establishment's location is not situated within a municipality, this office will need a letter from the County Commission stating that the establishment location is zoned properly. All applicants must complete the front portion (page 1) of this form.

To: Municipal Clerk or Recorder

Applicant is intending to apply for a West Virginia Resident Brewer with the West Virginia Alcohol Beverage Control Administration. This license will allow, if obtained, the applicant to operate a manufacturing facility of nonintoxicating beer and/or nonintoxicating craft beer with the legal limit to be and to not exceed 12% by volume .

Entity Name: ALMOST HEAVEN DESSERTS

DBA (Doing Business As): AHD BREWERY

Address of Establishment: 137 WONDER BAR ROAD

(Street/Route) (City) (State) (Zip Code) 26301

Applicant's Name (s): SIMON JAMES

(Last) (First) (Middle)

(Last) (First) (Middle)

General Description of Premises: ROOM IS ISOLATED FROM BAKERY

This Notice has been filed with the Clerk or Recorder of the City/Town of HARRISON COUNTY **on this** 4 **day of** MAY **,20** 24 **.**

Applicant's Signature (s): James Simon Date: 5.6.24

Date:

(Municipality to fill out reverse side of form)

(FOR USE BY MUNICIPAL AUTHORITIES ONLY)

1. Is the proposed location for a West Virginia Resident Brewery (manufacturing facility) described consistent with the zoning ordinances or your municipality as either a permitted use or a conditional use of such premises?

   Yes _____ No _____

1. (a) If the answer to the first question is "no," does your municipality provide within its business zones suitable alternative locations for a West Virginia Resident Brewery (manufacturing facility)?

   Yes _____ No _____

2. Is the proposed location for the a West Virginia Resident Brewery (manufacturing facility) herein described situated in an area designated for the use of community development block grant funds in the municipality?

   Yes _____ No _____

2. (a) If yes, is the planned use of the premises at the location herein described consistent with any plan adopted by the governing body of the municipality for revitalization of the area wherein the premises are situated?

   Yes _____ No _____

3. Additional comments to the Alcohol Beverage Control Administration:

_____

_____

_____

_____

_____

_____

Approved by (Authorized Official Signature and Title):

_____

City/Town

Date: _____

Return Original To: WVABCA

Beer Division

900 Pennsylvania Avenue, 4th Floor

Charleston, WV 25302

(FOR USE BY MUNICIPAL AUTHORITIES ONLY)

1. Is the proposed location for a West Virginia Resident Brewery (manufacturing facility) described consistent with the zoning ordinances or your municipality as either a permitted use or a conditional use of such premises?

   Yes _____ No _____

1. (a) If the answer to the first question is "no," does your municipality provide within its business zones suitable alternative locations for a West Virginia Resident Brewery (manufacturing facility)?

   Yes _____ No _____

2. Is the proposed location for the a West Virginia Resident Brewery (manufacturing facility) herein described situated in an area designated for the use of community development block grant funds in the municipality?

   Yes _____ No _____

2. (a) If yes, is the planned use of the premises at the location herein described consistent with any plan adopted by the governing body of the municipality for revitalization of the area wherein the premises are situated?

   Yes _____ No _____

3. Additional comments to the Alcohol Beverage Control Administration:

_____

_____

_____

_____

_____

_____

Approved by (Authorized Official Signature and Title):

_____

City/Town

Date: _____

Return Original To: WVABCA

Beer Division

900 Pennsylvania Avenue, 4th Floor

Charleston, WV 25302

May 22, 2024

WVABCA
Licensing Department
900 Pennsylvania Avenue, 4th Floor
Charleston, West Virginia 25302

Dear Commissioner,

This letter is to advise you that the Harrison County Commission has no objections to an ABCA License being issued to Almost Heaven Desserts, at 137 Wonder Bar Road, Clarksburg, West Virginia 26301. This was discussed and approved at the May 22, 2024 Harrison County Commission Meeting. Please let us know if any further information is needed.

Sincerely,

_____

Susan J. Thomas, President
Harrison County Commission

Harrison County Commission

Request to Attend Meeting

Name	Chris Cutright
Department	9-1-1
Destination	Orange County Convention Ctr, Orlando, FL
Travel Dates	07/31/2024 - 08/08/2024
Reason	APCO Confernce and Expo

Total Estimated Cost			$ 3,126.00
Transportation			$ $615.00
Air		$ 615.00	
Private Vehicle:			
Mileage _____	X .655	$ 0.00	
Rental Car		$	
Lodging			$ 1,536.00
Registration			$ 375.00
Meals (Estimated)			$ 480.00
Incidentals			$ 120.00

Employee Signature: _____ Date: May 16, 2024

Approving Authority: _____ Date: _____
(County Commission or Constitutional Official)

County Commission Action ( ) Approve ( ) Disapprove
Authorized travel within the approved budget by and for other constitutional offices does not require County Commission approval

Date: _____

A8 Form Revised: May 1, 2014

Harrison County Commission

Request to Attend Meeting

Name	Megan Rowand
Department	9-1-1
Destination	First Choice Services, Charleston, WV
Travel Dates	July 10-12, 2024
Reason	Class: "Crisis Intervention Team (CIT) - Communications Specialist - Train the Trainer"

Total Estimated Cost $ 526.00

Transportation			$ $0.00
Air		$	
Private Vehicle:			
Mileage	X .655	$ 0.00	
Rental Car		$	
Lodging			$ 300.00
Registration			$ 0.00
Meals (Estimated)			$ 226.00
Incidentals			$

Employee Signature: Megan D. Rowand Date: 5/13/24

Approving Authority: _____ Date: _____
(County Commission or Constitutional Official)

County Commission Action ( ) Approve ( ) Disapprove
Authorized travel within the approved budget by and for other constitutional offices does not require County Commission approval Date: _____

A8 Form Revised: May 1, 2014

HARRISON-CLARKSBURG HEALTH DEPARTMENT
ENVIRONMENTAL FEES FOR PERMITS

General.

1.1. Scope -- This rule establishes the fees for permits issued by the Harrison-Clarksburg Board of Health.

1.2. Authority. -- W. Va. Code §16-2-11(a)(9), §16-2-11(b)(3).

1.3. Filing Date. –

1.4. Effective Date. --

Application and Enforcement.

2.1. Application - This rule applies to the Board of Health which charges a fee for the issuance of permits that are covered by this rule.

2.2. Enforcement - The enforcement of this rule is vested with the Harrison-Clarksburg Health Officer or his or her designee.

Definitions.

3.1. Bed and Breakfast - An establishment providing lodging facilities in the form of sleeping accommodations and at a minimum, a breakfast for a fee.

3.2. Body Piercing Studio - means any room or space where body piercing is practiced or where the business of body piercing or any part thereof is conducted.

3.3. Campground - A tract of land maintained and offered to the public for payment for the location or placement of two or more camping units as defined in the bureau's "General Sanitation" rule, 64CSR18.

3.4. Care Facility – Facilities included, but not limited to, public or private halfway houses, adult day care facilities, residential care facilities (such as juvenile group homes and work release centers), and non-disaster emergency shelters (such as homeless shelters and family violence protection centers). The term does not include health care facilities licensed by the Office of Health Facility Licensure and Certification in the Office of the Inspector General.

3.5. Child Care Center - A facility where care is provided for seven or more children in a 24-hour period. The term does not include facilities excluded in the bureau's "Child Care Centers" rule, 64CSR21.

3.6. Developed Site - A location for placement and hookup of a manufactured home.

3.7. Fixed Expiration Date - An annual date at which time all permits of the same type expire. The fixed expiration date for each of the permits covered by this rule is derived from the state code or the rule which authorizes the issuance of the particular permit.

3.8. Food Service Establishment - Any fixed or mobile restaurant; coffee shop; cafeteria; short-order cafe; soda fountain; tavern; bar; cocktail lounge; delicatessen; nightclub; roadside stand; industrial feeding establishment; private, public, or non-profit organization or institution routinely serving food; catering kitchen; commissary or similar place in which food or drink is prepared for sale or service on the premises or elsewhere; and any other eating or drinking establishment or operation where food is served or provided for the public with or without charge.

3.9. Hotel/Motel - Any temporary or permanent buildings or structures which are maintained, offered, or used as sleeping quarters for pay.

3.10. Individual Sewage Disposal System - A system for the collection, treatment and disposal of sewage which serves a single dwelling or establishment.

3.11. Industrial Campground – A campground for the location or placement of two or more camping units as defined in 64CSR18, and to be occupied by workers employed for an industrial purpose and intended for long term stays of over 60 days.

3.12. Innovative Alternative Type Sewage System - A method of sewage disposal for a single-family dwelling or establishment for which design standards have been prepared and listed in the West Virginia Bureau for Public Health rule, "Sewage Treatment and Collection System Design Standards," 64CSR47, as an innovative or alternative system.

3.13. Labor Camp - A labor camp includes any lumber, mining, agricultural, construction, or other industrial camp where 10 or more persons are employed and housed in temporary quarters, such as cars, motor homes, camper vehicles, wagons, tents, cabins, buildings, or other similar enclosures.

3.14. Mass Gathering - Any group of 250 or more persons assembled together for a meeting, festival, social gathering, concert or other similar purpose. The term shall not include assembly in any permanent buildings or permanent structures designed, equipped and intended for use by large numbers of people. The term shall not include assembly in any outdoor venue ordinarily used and equipped for such events. For the purposes of this rule, "equipped" means supplied with adequate sanitary facilities for the intended use.

3.15. Mobile Food Establishment (includes Reciprocity Permit) - A food establishment that is mobile by means of mechanical, electrical, manual, or otherwise propelled vehicle operating on land or water that complies with 64CSR17 Food Establishment Rule - FDA Food Code Mobile Food Establishment Matrix recommendations based on the menu of food items provided.

3.16. Manufactured Home Community - Any site, area, tract, or parcel of land upon which four or more manufactured homes, used or occupied for dwelling purposes, are parked, either free of charge or for a monetary consideration.

3.17. Organized Camp - Any area, place, parcel, or tract of land on which facilities are established or maintained to provide an outdoor group living experience for children or adults, or where one or more permanent or semi-permanent structures are established or maintained as living or sleeping quarters for children or adults, and operated for educational, social, recreational, religious instruction or activity, physical education or health, or vacation purposes either gratuitously or for compensation, provided, that

this definition shall not be construed to include a hunting, fishing, or other camp privately owned and used exclusively for the personal pleasure of the owner.

3.18. Potentially Hazardous Food or Drink (time/temperature control for safety food) - Any food that consists in whole or in part of milk or milk products, eggs, meat, poultry, fish, shellfish, edible crustacea, or other ingredients, in a form capable of supporting rapid and progressive growth of infectious or toxigenic micro-organisms.

3.19. Recreational Water Facility - A body of water, under the control of a person, which has been modified, improved, constructed or installed for the purpose of public swimming or bathing. It includes, but is not limited to, bathing beaches; swimming, wading, and diving pools; water slides, spray pools, lazy rivers, and wave pools; spas, hot tubs, therapeutic pools, hydrotherapy pools and whirlpools. A recreational water facility does not include a private residential swimming pool defined in subsection 2.10 of the bureau's "Recreational Water Facilities" rule, 64CSR16.

3.20. Retail Food Store - Any place, structure, premise, vehicle, or any part thereof in which food is sold retail, offered for retail sale, or served not to be consumed on the premises. For the purpose of this rule, the term "retail food store" does not include establishments which handle only pre-packed non-potentially-hazardous foods; roadside markets that offer only fresh fruits or fresh vegetables; or the delicatessen operation of a retail food store.

3.21. Sewage Tank Cleaner - Any person engaged in the collection, removal, transportation or disposal of sewage.

3.22. School - a public or private organization that provides instruction for the teaching of children. The term includes early childhood/ primary education centers, middle school/junior high education centers, adolescent/high school education centers and vocational education centers. The term does not include child care centers as defined in the bureau's "Child Care Centers" rule, 64CSR21.

3.23. Subdivision - A tract of land which has been divided into two or more lots, tracts, parcels, plats, sites, areas, units, interests, or other division for the purpose of dwelling or establishment development and including the division of land by deed, metes and bounds description, lease, map, plat, or other instrument, or by act of construction.

3.24. Tattoo studio - means any room or space where tattooing is practiced or where the business of tattooing or any part thereof is conducted

3.25. Temporary Food Service Establishment - A food service establishment that operates at a fixed location for a period of time of not more than 14 consecutive days in conjunction with a single event or celebration and required by W. Va. Code §16-6-3, to have a permit.

3.26. Vending Machine - A machine designed for the dispensing of potentially hazardous food or drink to the public by a self-service method.

3.27. Water Well - Any excavation or penetration in the ground, whether drilled, bored, cored, driven, or jetted for a water supply, for the exploration for water, or for removal of water to dewater construction sites.

3.28. Water Well (Heat Exchange) - Any well constructed to use the heat exchange properties of either groundwater or of geologic material penetrated by the well.

Option to Charge for Permits; Procedure and Implementation of Permit Fee Schedule.

4.1. The Harrison-Clarksburg Board of Health shall charge a fee for the issuance of permits covered by this rule.

4.2. The Harrison-Clarksburg Board of Health shall follow the following procedures prior to implementation of a Permit Fee Schedule:

4.2.1 Present proposed fee schedule to the board of health for initial review and approval.

4.2.2 After the local board of health's approval of a proposed schedule of fees, the board shall place notice in the State Register and on the organization's web page setting forth a notice of proposed action, including the text of the new local health department rule or the amendment and the date, time, and place for receipt of public comment [§16-2-11(b)(3)(C)], provide the notice to the board's appointing authority with a request for publication on the authority's website and in its public offices, place a one-time Class II Legal Advertisement in the local newspaper and allow for a 30-day comment period.

4.2.3 Upon completion of the 30-day comment period, the board of health shall meet and review any public comments received prior to final approval of the fee schedule.

4.2.4 Once all public comments have been considered, the board shall vote on final approval of the proposed permit fee schedule and implementation date.

4.2.5 The Board of Health shall notify the appointing authority and request approval of the proposed fee schedule and provide the following information:

(a) A copy of the proposed fee schedule;
(b) A copy of the posted notice of the proposed fees and a description of the public notice process;
(c) A copy of comments received on the proposed fees; and
(d) A response to the comments.

4.2.6 With approval from the appointing authority, the board of health shall implement the Fees for Permit Schedule.

4.2.7 A copy of the final approved Fees for Permit Schedule shall be filed with the county and city clerk.

Permits and Fees.

5.1 The list of permits and corresponding fees are listed in Table 1 attached below.

Table 1

Permit		Permit Fee Guideline	Expiration Date (Annually)
Bed and Breakfast		$72.00	6/30
Campground			6/30
	Fee per site	$7.00	
	Minimum fee	$70.00	
Care Facility		$72.00	6/30
Child Care Center			12/31
	Number of Children		
	Family Day Care Facility (7-12)	$72.00	
	Day Care Center (13-25)	$150.00	
	Day Care Center (26 and over)	$222.00	
Food Service Establishment			6/30
	Seating Capacity		
	0 – 20	$150.00	
	21 – 50	$300.00	
	51 – 80	$450.00	
	81 and over	$600.00	
*	If the facility has a liquor license from the West Virginia Alcoholic Beverage Control Administration – an additional $150 fee shall be added to each seating capacity amount.	$150.00	
Hotel/Motel			6/30
	Number of Rooms		
	0 – 20	$150.00	
	21 – 50	$300.00	
	51 – 80	$450.00	
	81 and over	$600.00	
Individual Sewage Disposal Systems and Innovative Alternative Type Sewage Systems			1 year from date of issue
	Type of System		
	Conventional Single-Family Dwelling	$222.00	
	All other types of system	$450.00	
Industrial Campground		$120.00	6/30

Permit		Permit Fee Guideline	Expiration Date (Annually)
Labor Camp		$150.00	6/30
Mass Gathering			End of Event
	$72.00 per event	$72.00	
Mobile Food Establishment		$150.00	6/30
Manufactured Home Community			12/31
	Number of Lots		
	Up to 10 units	$150.00	
	11 to 20 units	$180.00	
	21 to 30 units	$270.00	
	More than 30 units	$330.00	
Organized Camp		$108.00	6/30
Recreational Water Facility		$150.00	12/31
Retail Food Store			6/30
	Fee per checkout	$72.00	
Schools (Facility)			6/30
	Fee per site	$72.00	
Subdivision			N/A
	Number of Lots		
	Fee per lot	$14.00	
	Minimum Fee	$140.00	
Temporary Food Service Establishment (maximum 14 days per event)			Noted on permit
	Fee per unit	$72.00	
In-State Vendor Temporary Food Service Establishment (non-potentially hazardous food only)			1 year from date of issue
	Fee per unit	$72.00	
Vending Machine			6/30
	Fee per machine per site	$72.00	
	Maximum Fee per site	$432.00	
Water Well		$150.00	1 year from

Permit		Permit Fee Guideline	Expiration Date (Annually)
The following permit fees are set by WV Legislative Code or Rule and cannot be changed			
Body Piercing [WV Rule 64CSR80]		$200.00	6/30
Tattoo Studio [WV Code §16-38-6(e)]		$200.00	6/30
Sewage Tank Cleaner [WV Rule 64CSR9]		$16.00	1 year from date of issue
Statewide Mobile Food Permit/Reciprocity...In process with current Legislative Session [WV Code §16-2-18]		TBD	6/30
Water Well (Heat Exchange) [WV Rule 64CSR19]			1 year from date of issue
	1 to 50 ton heat pump system	$150.00	
	Over 50 ton system	$300.00	
Prorating of Fixed Expiration Date Permit Fees			
	# of Months from Fixed Expiration Date	% Annual Fee to be Paid	
	< 3 months	25%. of annual fee	
	3 months to < 6 months	50%. of annual fee	
	6 months to < 9 months	75%. of annual fee	
	9 months to < 12 months	100%. of annual fee	
*	The fee charged for an annual permit with a fixed expiration date.		
**	Proration of fees does not apply to fees set by WV Code or Rule		
Late Fee for Expired Permits			
*	A late fee of 25 percent for all expired permits listed and will be applied to the permit fee schedule. Payment must be received within 10 days of the expiration date to avoid the late fee assessment.		
**	Late fee does not apply to fees set by WV Code or Rule		




Apr 26, 2023 2:05:43 PM
[redacted]
Harrison County
West Virginia


May 21, 2024 12:55:43
Harrison Cou


May 21, 2024 12:56:55 PM
Harrison County
West Virginia

NOTICE OF VIOLATION

Location 1953 OWINGS ROAD SHINNSTON

Owner or Lesee: NICOLINE TASSONE ET AL

In Care of: RIKY PIZZI

Address: 740 JACKSON STREET FAIRMONT 265541114

Address: _____

Phone: _____

108.1.3 Structure unfit for human occupancy

COMMENTS: An unsafe structure is one that is found to be dangerous to the life, health, property or safety of the public or the occupants of the structure by not providing minimum safeguards to protect or warn occupants in the event of fire, or because such structure contains unsafe equipment or is so damaged, decayed, dilapidated, structurally unsafe or of such faulty construction or unstable foundation, that partial or complete collapse is possible.

A structure is unfit for human occupancy whenever the code official finds such structure is unsafe, unlawful or because of the degree to which the structure is in disrepair or lacks maintenance, is insanitary, vermin or rat infested, contains filth and contamination, or lack ventilation, illumination, sanitary or heating facilities or other essential equipment required by this code, or because the location of the structure constitutes a hazard to the occupants of the structure or to the public.

CORRECTIVE ACTIONS: **STRUCTURE UNFIT FOR HUMAN OCCUPANCY**

Note: Any Notice of Violations issued pursuant to the 2018 Property Maintenance Code is subject to appeal. Contact the Code Enforcement Office for procedure, 304-624-8690
The Harrison County Commission has the right to file a lien in accordance with section 106.3

Time: _____

Date: APRIL 20, 2023

Copy Received by: _____

Code Enforcement Officer: Robert Leonard

Property Condition Checklist

Inspected Area:	**Site**	**Inspection Date:** 4/22/2023		
Property Address:	1953 Dwing Avenue	**Inspected By:** [illegible]		
City, County:	Shiunston, WV	**Year Home Built:** 1900		
Property Information:	**Qualification Observations**	**Yes**	**No**	**N/A**
Eligibility Criteria	Single Family Dwelling(one to four unit home)	✓		
	Property Vacant and/or abandoned	✓		
	Property a nuisance due to abandonment or adverse conditions	✓		
	Property exists in a predominatly rural area	✓		
Inspected Item	**Observable Deficiency**			
Health and Safety	Air Quality-Sewer Odor Detected		✓	
	Air Quality- Propane, Natural Gas, Methane Gas Detected		✓	
	Electrical Hazzard- exposed wires open panel service entrance		✓	
	Electrical Hazzardwater leaks on and/or near electrical equipment		✓	
	Excessive materials abandoned vehicle toxic substance tires		✓	
	Hazzards-sharp edges tripping		✓	
	Infestation Insects		✓	
	Infestation rats, mice or vermin		✓	
	Hazzards other		✓	
	Mold Visible Inside		✓	

Harrison County Tax Parcel Viewer



Date: 5/9/2024

Joseph R. Romano
Harrison County Assessor

All tax maps created under the provisions of reappraisal legislation are the property of the Assessor of Harrison County, West Virginia and the reproduction, copying, modification, distribution or sale of such tax maps or any copies thereof without the written permission of the Harrison County Assessor is prohibited by law.

0 0.01 0.03 0.06 0.09 0.12 mi

United States of America

State of West Virginia **County of Harrison, ss:**

Clerk's Fiduciary Report

Estate from Wednesday, May 1, 2024, through Tuesday, May 7, 2024

The County Commission of Harrison County this day proceeded to examine the report of the Clerk of the Commission of the Fiduciary and Probate matters had before his during the vacation of the Commission, and it appearing to the Commission that all of the proceedings had therefore ordered that the said report and matters thereto contained be and the same is hereby ratified and confirmed. Said report is in words and figures as follows, to-wit:

On, Wednesday, May 1, 2024, the following matters were disposed of in the presence of the Clerk:

More than 31 days since the date of death or the surviving spouse or heir, upon a motion, **SONIA KEY** was appointed and qualified as ADMINISTRATRIX of the estate of **CHARMAINE GERMAINE PATEN**, deceased. No bond was required.

The last will and testament of **RICHARD NEIL ALLMAN**, deceased, was proved by the affidavit of the attesting witnesses and the same was admitted to probate and record.

JANA RUTH ALLMAN, who was named in the last will and testament of **RICHARD NEIL ALLMAN**, deceased, as ANCILLARY ADMINISTRATOR thereof, qualified as such. No bond was required.

The last will and testament of **ROBERT JAMES WALLING**, deceased, was proved by the affidavit of the attesting witnesses and the same was admitted to probate and record.

PAMELA K WALLING, who was named in the last will and testament of **ROBERT JAMES WALLING**, deceased, as EXECUTRIX thereof, qualified as such. No bond was required.

On, Thursday, May 2, 2024, the following matters were disposed of in the presence of the Clerk:

The said estate of **JANICE L BRUNETT**, deceased was referred to **JAMES A VARNER**, a FIDUCIARY COMMISSIONER for the Harrison County, for settlement thereof.

More than 31 days since the date of death or the surviving spouse or heir, upon a motion, **GEORGE D HARPER** was appointed and qualified as ADMINISTRATOR of the estate of **CHESTER BURR HARPER**, deceased. Bond was 500,000.00.

A duly exemplified copy of the last will and testament of **BARBARA FRENCH FULSHER**, deceased, late a resident of MULTNOMAH, OREGON, was admitted to record.

A duly copy of the last will and testament of **CAROL LEE ARNETT**, deceased, late a resident of ALLEGHENY, PENNSYLVANIA, was admitted to record.

A duly exemplified copy of the last will and testament of **SHIRLEY A BECK**, deceased, late a resident of ALLEGHENY, PENNSYLVANIA, was admitted to record.

A duly exemplified copy of the last will and testament of **CECIL ELBERT DAVIS**, deceased, late a resident of PIMA, ARIZONA, was admitted to record.

A duly exemplified copy of the last will and testament of **KATHRYN L STEELE**, deceased, late a resident of CUMBERLAND, PENNSYLVANIA, was admitted to record.

On, Friday, May 3, 2024, the following matters were disposed of in the presence of the Clerk:

The last will and testament of **DORIS M DEVONO**, deceased, was proved by the affidavit of the attesting witnesses and the same was admitted to probate and record.

JOSEPH DEVONO JR hereby waived his/her right as EXECUTOR of the estate of **DORIS M DEVONO**, deceased.
WILLIAM KEVIN DEVONO hereby waived his/her right as CO EXECUTOR of the estate of **DORIS M DEVONO**, deceased.
JOSEPH DEVONO III hereby waived his/her right as CO EXECUTOR of the estate of **DORIS M DEVONO**, deceased.
RONI R BUNNELL, who was named in the last will and testament of **DORIS M DEVONO**, deceased, as EXECUTRIX thereof, qualified as such. No bond was required.

The last will and testament of **ROBERT RAY HARDMAN**, deceased, was proved by the affidavit of the attesting witnesses and the same was admitted to probate and record.

JEFFREY ALAN PERINE, who was named in the last will and testament of **ROBERT RAY HARDMAN**, deceased, as EXECUTOR thereof, qualified as such. No bond was required.

A duly exemplified copy of the last will and testament of **CAROL S PARSONS**, deceased, late a resident of CULPEPER, VIRGINIA, was admitted to record.

United States of America

State of West Virginia **County of Harrison, ss:**

Clerk's Fiduciary Report

Estate from Wednesday, May 8, 2024, through Tuesday, May 14, 2024

The County Commission of Harrison County this day proceeded to examine the report of the Clerk of the Commission of the Fiduciary and Probate matters had before his during the vacation of the Commission, and it appearing to the Commission that all of the proceedings had therefore ordered that the said report and matters thereto contained be and the same is hereby ratified and confirmed. Said report is in words and figures as follows, to-wit:

On, Thursday, May 9, 2024, the following matters were disposed of in the presence of the Clerk:

A duly copy of the last will and testament of **MARY SUE WHITE**, deceased, late a resident of WOOD, WEST VIRGINIA, was admitted to record.

On, Friday, May 10, 2024, the following matters were disposed of in the presence of the Clerk:

A duly certified copy of the last will and testament of **ROCHELLE L SHIPLEY**, deceased, late a resident of HANCOCK, WEST VIRGINIA, was admitted to record.

On, Monday, May 13, 2024, the following matters were disposed of in the presence of the Clerk:

The last will and testament of **ALBERTA KAY LAMM**, deceased, was proved by the affidavit of the attesting witnesses and the same was admitted to probate and record.

KIMBERLY DEE LAMM CASTOR, who was named in the last will and testament of **ALBERTA KAY LAMM**, deceased, as EXECUTRIX thereof, qualified as such. No bond was required.

State of West Virginia
Department of Homeland Security
Division of Administrative Services
1124 Smith Street
Charleston, WV 25301
(304) 558-2350

MARK A. SORSAIA
CABINET SECRETARY

JOSEPH C. THORNTON
DIRECTOR

May 6, 2024

Harrison County Commission
301 West Main Street
Clarksburg, WV 26301

Dear Commission,

This letter is to alert you that it is *likely* your county's inmate billing rate will be changing over to the next rate, which is the Overage Per Diem Rate of $65.38, during this month of May 2024.

During the 2023 Regular Session of the Legislature, HB3552 was passed and subsequently approved by the Governor on March 29, 2023. This bill amended West Virginia Code §15A-3-16, relating to jail per diem costs. In subsection (k), it states the base rate per day, per inmate rate shall be set at $54.48. It also states a county will be billed based on a pro rata number of inmate days. That pro rata number of inmate days will be calculated by ***multiplying each county's population as contained in the 2020 United States Census by .52***.

Each county is responsible for the following regarding annual per diem jail costs:

- **80% of the current per diem rate for the first 80% of its pro rata share of total billed inmate days.** *This rate is determined to be $43.58.*
- **100% of the current per diem rate for its inmate days that are greater than 80% and up to 100% of its pro rata share of total billed inmate days.**
  This would be the base per diem rate of $54.48.
- **120% of the current per diem rate for its inmate days that exceed 100% of its pro rata share of total billed inmate days.** *This rate is determined to be $65.38.*

Based on the data from the US 2020 Census, 100% of your county's pro rata days is ... **34,279** days

As of 4/30/2024, your county has been billed (including days of debits and credits) ... **31,973** days

If you have any questions, please contact Angela Nitardy, Accounts Receivable Manager, at 304-352-0218 or by email at Angela.D.Nitardy@wv.gov.

Very respectfully,

Joseph C. Thornton

FORT NEW SALEM FOUNDATION, INC.

Passionately Preserving Our Appalachian Legacy

May 2024 — 2nd Quarter

EXPANSION UPDATE

We have three key components for our expansion and renovation of our campus. The first two are the ongoing work for the Reynolds House and Bennett Cabin. The Reynolds House, which ultimately will become our gift shop and visitor center, is a beautiful two story structure. It is receiving:

- **Chinking and daubing,**
- **Installation of new window sashes, and**
- **Installation of restored windows.**

The Bennett Cabin, which will house our wood shop, is currently receiving:

- **Chinking and Daubing,**
- **A new brick sidewalk, and**
- **A front porch.**

The third component is our fund raising to SAVE the GreenTree Tavern, which has been closed to the public for 8 years. Check out our gofundme page for more information on how you can help save this structure before it is too late.

Greentree Tavern Info

PRESERVE APPALACHIA

gofundme

SPRING ARTS KICK OFF

Join us on Saturday, May 18 from 10-5 for the 11th annual John Randolph Spring Arts Kick Off. This is our opening event of the GOLDEN ANNIVERSARY season at the fort. We have a great event planned including food, entertainment and demonstrations including:

- Various instrumental musicians,
- Clarksburg Madrigals at 1 PM,
- fireplace cooking demonstrations,
- Apple butter making,
- Tinsmith
- Blacksmith
- Potter
- Paper marbling
- Tomahawk throwing demonstration
- Flint stone fire starting demonstration
- Spinning
- Colonial herbs

This event is named in honor of the late Professor John Randolph, our founder. In honor of the 50th anniversary there will be a special rededication of a Salem College plaque at 12 noon including a proclamation by Salem Mayor Robert James "Bobby" Samples declaring may 18th Fort New Salem Day.

OUR 2024 SCHEDULE

MAY	John Randolph Spring Arts Kick Off	Saturday May 18
JUNE	Weekend of Workshops	Saturday & Sunday June 22 & 23
JULY	Myths of the Mountains	Saturday July 13, 27
AUGUST	Dulcimer Festival	Friday, Saturday & Saturday August 9,10,11
OCTOBER	Apple Butter Booth Apple Butter Day @ FORT Fall Fort Day	Thursday, Friday & Saturday October 3,4,5 Saturday October 5 Saturday, October 19
NOVEMBER	Spirit of Christmas in the Mountains	Saturday & Sunday November 30 & December 1
DECEMBER	Spirit of Christmas in the Mountains	Saturday & Sunday December 7 & 8



Green Tree Tavern - Back in the day!

GREATER HARRISON COUNTY P.S.D.

"Meeting held in Town of West Milford Council Chambers"

Agenda
May 16, 2024
9:00 am

Appointments
9:00 am – Call to order

ACTION ITEMS

1. Approve/Edit Previous Minutes
2. Public Comment Period
3. Edward Jones – Jason Glaser
   - 3.1 Review of account – Review, discuss and act
4. P&B Services, LLC
   - 4.1 Package Plant Report
5. Bennett and Dobbins, PLLC
   - 5.1 Drawdowns – Review, discuss and act.
   - 5.2 Parity Forms
6. Ruth Ann Messenger – Treasurer – Review, discuss and act
   - 6.1 Sewer Check Register and debit card transactions
   - 6.2 Water Check Register
7. The Thrasher Group, Inc.
   - 7.1 Sewer
     - 7.1.a. Phase II – Review, discuss and act
       - Project Update
     - 7.1.b. Quiet Dell – Review, discuss and act
       - Project Design Update
     - 7.1.c. Woodstock Heights Sanitary Sewer Extension Project- Review, discuss and act
       - Bid Recommendation
       - Project Update
     - 7.1.d. River Crossings – Review, discuss and act
       - Project Update
     - 7.1.e. 10-year Plan – Review, discuss and act
       - General Discussion
   - 7.2 Water
     - 7.2.a. Overall Water Project – Review, discuss and act
       - Project Update
     - 7.2.b. 10-year Plan – Review, discuss and act
       - General Discussion
8. Bill Hoover – General Manager
   - 8.1 Water
     - 8.1.a. Water Loss Report

8.1.b. Water Leak Report
8.1.c. General Updates
8.2 Sewer
8.2.a. General Updates
8.3 Good of the District
8.3.a. General Update
8.3.b. Karen Petitto – adjustment request
8.3.c. Francis "Skip" Sabatelli – written request for adjustment
9. Sam Harold – Mountain State Law
9.1 Available for general consult
10. Executive Session

Adjournment of meeting

"THIS IS AN EQUAL OPPORTUNITY PROGRAM. DISCRIMINATION IS PROHIBITED BY FEDERAL LAW." TO FILE A COMPLAINT OF DISCRIMINATION, WRITE USDA, DIRECTOR OFFICE OF CIVIL RIGHTS, 1400 INDEPENDENCE AVE., S.W., WASHINGTON, DC 20250-9410 OR CALL (800)795-3272(VOICE) OR (202)720-6382 (TDD).

GHCPSD - WATER DIVISION
INCOME STATEMENT
FOR THE PERIOD
04/01/2024 - 04/30/2024

	ACTUAL	BUDGET	VARIANCE	% OF TOTAL
INCOME				
DOMESTIC SERVICE/LATE CHGS	193,237.60	209,330.00	(16,092.40)	96.93%
FACILITIES CHARGE	-	-	-	0.00%
INTEREST INCOME	580.35	50.83	529.52	0.29%
MISCELLANEOUS/RECONNECT FEES	4,543.66	486.00	4,057.66	2.28%
QUIET DELL LEASE	-	500.00	(500.00)	0.00%
TAP FEES	1,000.00	350.00	650.00	0.50%
UNUSUAL CHARGE	-	-	-	0.00%
TOTAL INCOME	199,361.61	210,716.83	(11,355.22)	
EXPENSES				
ACCT, BILLING, & COLLECTING	6,318.18	6,531.92	(213.74)	3.59%
BRIDGEPORT SANITARY BOARD	-	-	-	0.00%
TOWN OF WORTHINGTON	-	-	-	0.00%
CHEMICALS	275.00	197.42	77.58	0.16%
CLARKSBURG SANITARY BOARD	-	-	-	0.00%
DEBT SERVICE	24,610.85	24,596.00	14.85	14.00%
DIRECTORS FEES	812.52	542.50	270.02	0.46%
EMP. BEN./GROUP INSURANCE/PENSION COSTS	7,501.14	6,811.67	689.47	4.27%
LAB SERVICE	865.60	892.67	(27.07)	0.49%
LABOR	31,949.68	30,720.83	1,228.85	18.17%
MAINTENANCE	7,167.25	11,802.08	(4,634.83)	4.08%
MISCELLANEOUS EXPENSE	-	-	-	0.00%
OFFICE SUPPLIES & EXPENSE	10.20	85.83	(75.63)	0.01%
OUTSIDE SERVICES/CONTRACT LABOR	4,319.45	6,772.25	(2,452.80)	2.46%
POWER PURCHASED	3,915.52	3,819.58	95.94	2.23%
PROPERTY/LIABILITY & INJURIES INSURANCE	-	2,600.75	(2,600.75)	0.00%
REGULATORY COMMISSION	-	978.50	(978.50)	0.00%
RENEWAL & REPLACEMENT	540.00	5,268.33	(4,728.33)	0.31%
RENT EXPENSE	2,500.00	2,575.00	(75.00)	1.42%
TAXES	2,677.32	2,391.67	285.65	1.52%
TRANSPORTATION	1,161.80	3,467.67	(2,305.87)	0.66%
UTILITIES	487.92	849.75	(361.83)	0.28%
WATER PURCHASED	80,681.41	89,855.50	(9,174.09)	45.90%
TOTAL EXPENSES	175,793.84	200,759.92	(24,966.08)	
NET SURPLUS (DEFICIT)	23,567.77	9,956.92	13,610.85	

GHCPSD - SEWER DIVISION
INCOME STATEMENT
FOR THE PERIOD
04/01/2024 - 04/30/2024

	ACTUAL	BUDGET	VARIANCE	% OF TOTAL
INCOME				
DOMESTIC SERVICE/LATE CHGS	220,669.26	234,937.67	(14,268.41)	92.38%
FACILITIES CHARGE	2,500.00	2,500.00	-	1.05%
INTEREST INCOME	1,678.73	71.67	1,607.06	0.70%
MISCELLANEOUS/RECONNECT FEES	-	-	-	0.00%
QUIET DELL LEASE	-	-	-	0.00%
TAP FEES	500.00	125.00	375.00	0.21%
UNUSUAL CHARGE	13,520.99	16,300.50	(2,779.51)	5.66%
TOTAL INCOME	238,868.98	253,934.83	(15,065.85)	
EXPENSES				
ACCT, BILLING, & COLLECTING	3,269.80	1,844.17	1,425.63	1.47%
BRIDGEPORT SANITARY BOARD	11,016.23	8,565.00	2,451.23	4.94%
TOWN OF WORTHINGTON	3,489.03	12,500.00	(9,010.97)	1.56%
CHEMICALS	-	1,067.50	(1,067.50)	0.00%
CLARKSBURG SANITARY BOARD	2,578.16	1,785.83	792.33	1.16%
DEBT SERVICE	112,379.86	112,125.67	254.19	50.39%
DIRECTORS FEES	737.48	520.00	217.48	0.33%
EMP. BEN./GROUP INSURANCE/PENSION COSTS	5,581.22	5,424.92	156.30	2.50%
LAB SERVICE	276.50	663.33	(386.83)	0.12%
LABOR	19,716.98	20,931.50	(1,214.52)	8.84%
MAINTENANCE	25,248.71	16,534.17	8,714.54	11.32%
MISCELLANEOUS EXPENSE	0.60	-	0.60	0.00%
OFFICE SUPPLIES & EXPENSE	2,322.34	1,514.17	808.17	1.04%
OUTSIDE SERVICES/CONTRACT LABOR	14,652.48	15,580.83	(928.35)	6.57%
POWER PURCHASED	17,796.86	14,535.08	3,261.78	7.98%
PROPERTY/LIABILITY & INJURIES INSURANCE	-	2,032.58	(2,032.58)	0.00%
REGULATORY COMMISSION	-	1,222.50	(1,222.50)	0.00%
RENEWAL & REPLACEMENT	-	16,656.67	(16,656.67)	0.00%
RENT EXPENSE	-	-	-	0.00%
TAXES	1,092.54	1,105.00	(12.46)	0.49%
TRANSPORTATION	506.27	2,993.58	(2,487.31)	0.23%
UTILITIES	2,342.82	1,366.67	976.15	1.05%
WATER PURCHASED	-	-	-	0.00%
TOTAL EXPENSES	223,007.88	238,969.17	(15,961.29)	
NET SURPLUS (DEFICIT)	15,861.10	14,965.67	895.43	

GHCPSD - COMBINED
INCOME STATEMENT
FOR THE PERIOD
04/01/2024 - 04/30/2024

	ACTUAL	BUDGET	VARIANCE	% OF TOTAL
INCOME				
DOMESTIC SERVICE/LATE CHGS	413,906.86	444,267.67	(30,360.81)	94.45%
FACILITIES CHARGE	2,500.00	2,500.00	-	0.57%
INTEREST INCOME	2,259.08	122.50	2,136.58	0.52%
MISCELLANEOUS/RECONNECT FEES	4,543.66	486.00	4,057.66	1.04%
QUIET DELL LEASE	-	500.00	(500.00)	0.00%
TAP FEES	1,500.00	475.00	1,025.00	0.34%
UNUSUAL CHARGE	13,520.99	16,300.50	(2,779.51)	3.09%
TOTAL INCOME	438,230.59	464,651.67	(26,421.08)	
EXPENSES				
ACCT, BILLING, & COLLECTING	9,587.98	8,376.08	1,211.90	2.40%
BRIDGEPORT SANITARY BOARD	11,016.23	8,565.00	2,451.23	2.76%
TOWN OF WORTHINGTON	3,489.03	12,500.00	(9,010.97)	0.87%
CHEMICALS	275.00	1,264.92	(989.92)	0.07%
CLARKSBURG SANITARY BOARD	2,578.16	1,785.83	792.33	0.65%
DEBT SERVICE	136,990.71	136,721.67	269.04	34.35%
DIRECTORS FEES	1,550.00	1,062.50	487.50	0.39%
EMP. BEN./GROUP INSURANCE/PENSION COSTS	13,082.36	12,236.58	845.78	3.28%
LAB SERVICE	1,142.10	1,556.00	(413.90)	0.29%
LABOR	51,666.66	51,652.33	14.33	12.96%
MAINTENANCE	32,415.96	28,336.25	4,079.71	8.13%
MISCELLANEOUS EXPENSE	0.60	-	0.60	0.00%
OFFICE SUPPLIES & EXPENSE	2,332.54	1,600.00	732.54	0.58%
OUTSIDE SERVICES/CONTRACT LABOR	18,971.93	22,353.08	(3,381.15)	4.76%
POWER PURCHASED	21,712.38	18,354.67	3,357.71	5.44%
PROPERTY/LIABILITY & INJURIES INSURANCE	-	4,633.33	(4,633.33)	0.00%
REGULATORY COMMISSION	-	2,201.00	(2,201.00)	0.00%
RENEWAL & REPLACEMENT	540.00	21,925.00	(21,385.00)	0.14%
RENT EXPENSE	2,500.00	2,575.00	(75.00)	0.63%
TAXES	3,769.86	3,496.67	273.19	0.95%
TRANSPORTATION	1,668.07	6,461.25	(4,793.18)	0.42%
UTILITIES	2,830.74	2,216.42	614.32	0.71%
WATER PURCHASED	80,681.41	89,855.50	(9,174.09)	20.23%
TOTAL EXPENSES	398,801.72	439,729.08	(40,927.36)	
NET SURPLUS (DEFICIT)	39,428.87	24,922.58	14,506.29	

GHCPSD - WATER DIVISION
INCOME STATEMENT
FOR THE PERIOD
07/01/2023 - 04/30/2024

	ACTUAL	BUDGET	VARIANCE	% OF TOTAL
INCOME				
DOMESTIC SERVICE/LATE CHGS	2,045,837.83	2,093,300.00	(47,462.17)	96.99%
FACILITIES CHARGE	-	-	-	0.00%
INTEREST INCOME	9,071.90	508.33	8,563.57	0.43%
MISCELLANEOUS/RECONNECT FEES	40,853.76	4,860.00	35,993.76	1.94%
QUIET DELL LEASE	6,000.00	5,000.00	1,000.00	0.28%
TAP FEES	7,500.00	3,500.00	4,000.00	0.36%
UNUSUAL CHARGE	-	-	-	0.00%
TOTAL INCOME	2,109,263.49	2,107,168.33	2,095.16	100.00%
EXPENSES				
ACCT, BILLING, & COLLECTING	60,637.50	65,319.17	(4,681.67)	3.10%
BRIDGEPORT SANITARY BOARD	-	-	-	0.00%
TOWN OF WORTHINGTON	-	-	-	0.00%
CHEMICALS	745.00	1,974.17	(1,229.17)	0.04%
CLARKSBURG SANITARY BOARD	-	-	-	0.00%
DEBT SERVICE	246,108.50	245,960.00	148.50	12.58%
DIRECTORS FEES	5,015.27	5,425.00	(409.73)	0.26%
EMP. BEN./GROUP INSURANCE/PENSION COSTS	72,859.51	68,116.67	4,742.84	3.73%
LAB SERVICE	9,711.89	8,926.67	785.22	0.50%
LABOR	327,321.08	307,208.33	20,112.75	16.74%
MAINTENANCE	132,967.99	118,020.83	14,947.16	6.80%
MISCELLANEOUS EXPENSE	6.01	-	6.01	0.00%
OFFICE SUPPLIES & EXPENSE	1,124.08	858.33	265.75	0.06%
OUTSIDE SERVICES/CONTRACT LABOR	51,306.29	67,722.50	(16,416.21)	2.62%
POWER PURCHASED	36,210.28	38,195.83	(1,985.55)	1.85%
PROPERTY/LIABILITY & INJURIES INSURANCE	20,193.69	26,007.50	(5,813.81)	1.03%
REGULATORY COMMISSION	6,976.93	9,785.00	(2,808.07)	0.36%
RENEWAL & REPLACEMENT	45,765.26	52,683.33	(6,918.07)	2.34%
RENT EXPENSE	25,000.00	25,750.00	(750.00)	1.28%
TAXES	28,011.24	23,916.67	4,094.57	1.43%
TRANSPORTATION	27,372.44	34,676.67	(7,304.23)	1.40%
UTILITIES	8,258.44	8,497.50	(239.06)	0.42%
WATER PURCHASED	850,052.32	898,555.00	(48,502.68)	43.47%
TOTAL EXPENSES	1,955,643.72	2,007,599.17	(51,955.45)	100.00%
NET SURPLUS (DEFICIT)	153,619.77	99,569.17	54,050.60	

GHCPSD - SEWER DIVISION
INCOME STATEMENT
FOR THE PERIOD
07/01/2023 -04/30/2024

	ACTUAL	BUDGET	VARIANCE	% OF TOTAL
INCOME				
DOMESTIC SERVICE/LATE CHGS	2,323,978.12	2,349,376.67	(25,398.55)	94.28%
FACILITIES CHARGE	25,000.00	25,000.00	-	1.01%
INTEREST INCOME	23,911.14	716.67	23,194.47	0.97%
MISCELLANEOUS/RECONNECT FEES	480.00	-	480.00	0.02%
QUIET DELL LEASE	-	-	-	0.00%
TAP FEES	2,550.00	1,250.00	1,300.00	0.10%
UNUSUAL CHARGE	89,172.91	163,005.00	(73,832.09)	3.62%
TOTAL INCOME	2,465,092.17	2,539,348.33	(74,256.16)	100.00%
EXPENSES				
ACCT, BILLING, & COLLECTING	18,391.08	18,441.67	(50.59)	0.77%
BRIDGEPORT SANITARY BOARD	84,504.57	85,650.00	(1,145.43)	3.52%
TOWN OF WORTHINGTON	31,859.23	125,000.00	(93,140.77)	1.33%
CHEMICALS	14,323.25	10,675.00	3,648.25	0.60%
CLARKSBURG SANITARY BOARD	25,679.00	17,858.33	7,820.67	1.07%
DEBT SERVICE	1,123,798.60	1,121,256.67	2,541.93	46.85%
DIRECTORS FEES	4,534.73	5,200.00	(665.27)	0.19%
EMP. BEN./GROUP INSURANCE/PENSION COSTS	59,028.75	54,249.17	4,779.58	2.46%
LAB SERVICE	9,677.30	6,633.33	3,043.97	0.40%
LABOR	238,700.81	209,315.00	29,385.81	9.95%
MAINTENANCE	194,531.37	165,341.67	29,189.70	8.11%
MISCELLANEOUS EXPENSE	0.60	-	0.60	0.00%
OFFICE SUPPLIES & EXPENSE	18,552.55	15,141.67	3,410.88	0.77%
OUTSIDE SERVICES/CONTRACT LABOR	156,558.49	155,808.33	750.16	6.53%
POWER PURCHASED	153,007.77	145,350.83	7,656.94	6.38%
PROPERTY/LIABILITY & INJURIES INSURANCE	24,781.70	20,325.83	4,455.87	1.03%
REGULATORY COMMISSION	7,133.69	12,225.00	(5,091.31)	0.30%
RENEWAL & REPLACEMENT	175,047.79	166,566.67	8,481.12	7.30%
RENT EXPENSE	-	-	-	0.00%
TAXES	12,982.44	11,050.00	1,932.44	0.54%
TRANSPORTATION	24,031.50	29,935.83	(5,904.33)	1.00%
UTILITIES	21,752.36	13,666.67	8,085.69	0.91%
WATER PURCHASED	-	-	-	0.00%
TOTAL EXPENSES	2,398,877.58	2,389,691.67	9,185.91	100.00%
NET SURPLUS (DEFICIT)	66,214.59	149,656.67	(83,442.08)	

GHCPSD - COMBINED
INCOME STATEMENT
FOR THE PERIOD
07/01/2023 -04/30/2024

	ACTUAL	BUDGET	VARIANCE	% OF TOTAL
INCOME				
DOMESTIC SERVICE/LATE CHGS	4,369,815.95	4,442,676.67	(72,860.72)	95.53%
FACILITIES CHARGE	25,000.00	25,000.00	-	0.55%
INTEREST INCOME	32,983.04	1,225.00	31,758.04	0.72%
MISCELLANEOUS/RECONNECT FEES	41,333.76	4,860.00	36,473.76	0.90%
QUIET DELL LEASE	6,000.00	5,000.00	1,000.00	0.13%
TAP FEES	10,050.00	4,750.00	5,300.00	0.22%
UNUSUAL CHARGE	89,172.91	163,005.00	(73,832.09)	1.95%
TOTAL INCOME	4,574,355.66	4,646,516.67	(72,161.01)	100.00%
EXPENSES				
ACCT, BILLING, & COLLECTING	79,028.58	83,760.83	(4,732.25)	1.81%
BRIDGEPORT SANITARY BOARD	84,504.57	85,650.00	(1,145.43)	1.94%
TOWN OF WORTHINGTON	31,859.23	125,000.00	(93,140.77)	0.73%
CHEMICALS	15,068.25	12,649.17	2,419.08	0.35%
CLARKSBURG SANITARY BOARD	25,679.00	17,858.33	7,820.67	0.59%
DEBT SERVICE	1,369,907.10	1,367,216.67	2,690.43	31.46%
DIRECTORS FEES	9,550.00	10,625.00	(1,075.00)	0.22%
EMP. BEN./GROUP INSURANCE/PENSION COSTS	131,888.26	122,365.83	9,522.43	3.03%
LAB SERVICE	19,389.19	15,560.00	3,829.19	0.45%
LABOR	566,021.89	516,523.33	49,498.56	13.00%
MAINTENANCE	327,499.36	283,362.50	44,136.86	7.52%
MISCELLANEOUS EXPENSE	6.61	-	6.61	0.00%
OFFICE SUPPLIES & EXPENSE	19,676.63	16,000.00	3,676.63	0.45%
OUTSIDE SERVICES/CONTRACT LABOR	207,864.78	223,530.83	(15,666.05)	4.77%
POWER PURCHASED	189,218.05	183,546.67	5,671.38	4.35%
PROPERTY/LIABILITY & INJURIES INSURANCE	44,975.39	46,333.33	(1,357.94)	1.03%
REGULATORY COMMISSION	14,110.62	22,010.00	(7,899.38)	0.32%
RENEWAL & REPLACEMENT	220,813.05	219,250.00	1,563.05	5.07%
RENT EXPENSE	25,000.00	25,750.00	(750.00)	0.57%
TAXES	40,993.68	34,966.67	6,027.01	0.94%
TRANSPORTATION	51,403.94	64,612.50	(13,208.56)	1.18%
UTILITIES	30,010.80	22,164.17	7,846.63	0.69%
WATER PURCHASED	850,052.32	898,555.00	(48,502.68)	19.52%
TOTAL EXPENSES	4,354,521.30	4,397,290.83	(42,769.53)	100.00%
NET SURPLUS (DEFICIT)	219,834.36	249,225.83	(29,391.47)	

GREATER HARRISON COUNTY PSD - WATER
Statement of Cash Flows
April 2024

OPERATING ACTIVITIES		
Net Income (Loss)	$	23,567.77
Adjustments to reconcile Net Income		
to net cash provided by operations:		
Accounts Receivable	$	(679.59)
Accounts Payable	$	(35.95)
Customer Deposits	$	973.14
Due (From) To Sewer Fund	$	(57,787.60)
Net cash provided by Operating Activities	$	(33,962.23)
INVESTING ACTIVITIES		
Fixed Assets Projects	$	-
Interest Income	$	-
Net cash provided by Investing Activities	$	-
FINANCING ACTIVITIES		
5.5 Agreement	$	-
Grants	$	-
Net cash provided by Financing Activities	$	-
Net cash increase (decrease)for period	$	(33,962.23)
Cash at beginning of period	$	1,380,792.31
Cash at end of period	**$**	**1,346,830.08**
Unrestricted Cash	$	673,012.06
Restricted Cash		
Depreciation Reserve	$	137,647.72
Bond Commission Sweep	$	26,503.00
Construction	$	45.00
ARPA	$	100.00
SB 234	$	75,000.00
Customer Deposits	$	41,274.86
CD-Customer Deposits	$	60,011.48
CD-Depreciation Reserve	$	258,233.91
CD-SB 234	$	75,002.05
Total Restricted Cash	$	673,818.02
Total Unrestricted & Restricted Cash	**$**	**1,346,830.08**
	$	-

GREATER HARRISON COUNTY PSD - SEWER
Statement of Cash Flows
April 2024

OPERATING ACTIVITIES		
Net Income (Loss)	$	15,861.10
Adjustments to reconcile Net Income		
to net cash provided by operations:		
Accounts Payable	$	10,701.44
Customer Deposits	$	3,364.31
Payroll Liabilities	$	(5,180.36)
Due (From) To Water Fund	$	57,787.60
Net cash provided by Operating Activities	$	82,534.09
INVESTING ACTIVITIES		
Interest Income	$	-
Fixed Assets	$	(232,412.00)
Net cash provided by Investing Activities	$	(232,412.00)
FINANCING ACTIVITIES		
	$	-
Loan Payment	$	(848.89)
Draw on Bond & Grants	$	232,412.00
Net cash provided by Financing Activities	$	231,563.11
Net cash increase (decrease) for period	$	81,685.20
Cash at beginning of period	$	2,507,785.18
Cash at end of period	**$**	**2,589,470.38**
Unrestricted Cash	$	940,964.55
Restricted Cash		
Construction Account	$	1,884.19
Depreciation Reserve	$	595,762.38
Rural Development Reserve	$	290.48
Bond Commission Sweep	$	74,251.87
ARPA	$	100.00
SB 234	$	75,000.00
Customer Deposits	$	77,746.28
CD-Customer Deposits	$	100,002.74
CD-Depreciation Reserve	$	622,845.27
CD-Rural Development Reserve	$	25,620.57
CD-SB 234	$	75,002.05
Total Restricted Cash	$	1,648,505.83
Total Unrestricted & Restricted Cash	**$**	**2,589,470.38**
	$	-

Greater Harrison County
Public Service District

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26451

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At the regular meeting of Greater Harrison County PSD held on Thursday April 18, 2024, Member Thomas Michael, Member Gary Auvil, Treasurer Ruth Ann Messenger and Secretary Raymond Leonard were present. Also present were Bill Hoover, General Manager, Zack Dobbins of Bennett and Dobbins, Kylea Radcliff of Thrasher Engineering and Sam Harold of Mountain State Law.

1. Minutes and/or Amended Minutes of Previous Meetings: Leonard moved to approve minutes. Board concurred.
2. Public Comment Period: No one present
3. Patrick Lesmann – P&B Services provided by Bill Hoover
   General update –Pump replaced at Bel Meadows, minor issues with sand filters due to rain.
4. Zack Dobbins – Bennett and Dobbins
   4.1 Drawdown for Phase 2 Rt. 73 resolution #43 reissued. Leonard moved to approve as presented. Board concurred.
   Drawdown for Quiet Dell draw #7 for right-of-ways. Leonard moved to approve as presented. Board concurred.
   4.2 Budgets for approval 7/1/24-6/30/25 water and sewer presented with detail. Leonard moved to approve as presented. Board concurred.
5. Finance Report provided by Zack Dobbins
   Leonard moved to approve financial transactions. Board concurred.
6. Michael motioned to go into Executive Session. Board concurred.
   Michael motioned to return to regular Session. Board concurred.
   Michael moved for board authorize for the release approximately ½ of monies holding on Rover Contract in order to pay for work performed and documentation for which has been provided. Board concurred.
7. Thrasher Group, Inc.
   7.1 Sewer
   7.1.a Phase II
   - Some equipment funds reserved are still available. Trying to get closure letters from DOH to close out bonds.

   7.1.b Quiet Dell
   - Over 55% of right-of ways have been signed. Approximately 80% complete on the plans for new treatment plant. Still on schedule to advertise for bids late summer. Working closely with right-of-way agent.

   7.1.c Woodstock Heights Sanitary Sewer Extension Project
   - Pre-bid conducted last week with 14 in attendance. Bids will be opened on May 1st.

   7.1.d 10-year plan Sewer
   - Will review around mid-year. Permit renewal will be due by end of May for 5-year discharge permits.

   7.1.e River Crossings
   - Nothing new to present. Waiting on drilling schedule.

   7.2 Water
   7.2.a Overall Water Project
   - Health Department permit package is going out today. County lines will be crossed, working on DOH as well.

   7.2.b Buffalo Lake Road Water Line Extension
   - Nothing new at this time.

7.2.c 10-year Plan Water

- Nothing new presented.

8. Bill Hoover – General Manager
   8.1 Water
      8.1.a Overall down 4%. Lost Creek Mount Clare at 46% which is down 5% with 1 main and 3 service line leaks. Valley of Good Hope at 26% will 2 service line leaks. Quiet Dell in the negative due to issues with Clarksburg, we were not charged for all water going through Booster Station for 4 days. Coon's Run was at 27% with zero leaks found.
      8.1.b Water Leak Report – With the Lead & Copper line inventory we are hopeful to find some leaks. Eric has found 1 leak out of 51 meters checked.
   8.2 Sewer
      8.2.a General Update – 18" ductile iron pipe at plant has been fixed; another needs repaired which Snyder Environmental will look at this line in May.
      Enterprise letters have been sent out requesting deposits and tap fees.
      Francis "Skip" Sabatelli will be sending letter to board requesting reimbursement for plumbing costs incurred.
   8.3 Good of the District
      8.3.a. Have yet to receive employee handbook, request to have by fiscal year end.
9. Sam Harold – Mountain State Law
   9.1 Nothing presented for regular meeting

Michael moved to adjourn meeting. Board concurred.

Chairman_____
James Scudere

Treasurer_____
Ruth Ann Messenger

Secretary_____
Mark Leonard

Member_____
Thomas Michael

Member_____
Gary Auvil

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SUN VALLEY PUBLIC SERVICE DISTRICT
POST OFFICE BOX 95
18 SABLE CIRCLE
REYNOLDSVILLE, WV 26422-0095
304-623-9609

Richard Dale, Chairman
Connor Thompson, Treasurer

Sandra Patterson, Secretary
Kevin Short, General Manager

May 14, 2024

We, the members of the Sun Valley Public Service District's Board of Directors, approved the water and sewer operating budgets for the fiscal year 2024 - 2025.

Richard Dale, Chairman

Sandra Patterson, Secretary

Connor Thompson, Treasurer

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Sun Valley Public Service District - Water Fund
Budget
Fiscal Years 2024-2025

	Budget 2024-2025
OPERATING REVENUES	
WATER SALES (108,797 avg /mth)	1,305,564
PURCHASED WATER EXPENSES (25,058 avg/mth)	300,696
GROSS REVENUES	1,004,868
EMPLOYEE EXPENSES	
Payroll Operations	268,455
Pension & Benefits (Retirement & Medical)	92,484
Payroll Taxes & Workers Compensation	26,777
Total Payroll & Related Expenses	387,716
REVENUE AFTER PAYROLL & RELATED EXPENSES	617,152
OPERATING EXPENSES	
Maintenance	58,369
Outside Services	42,058
General Office	32,004
Insurance	29,758
Transportation & Fuel	20,011
Supplies	11,399
Power Purchased	25,689
Miscellaneous & Hepzibah Help	1,529
Miscellaneous - Allowance for Bad Debt	5,281
Bond & Loan Payments (Truck & Meters)	402,945
Operating Expenses	629,043
OPERATING INCOME/LOSS (-)	(11,891)
NON OPERATING REVENUES & EXPENSES	
Interest Revenue	115
Interest Expense	0
Miscellaneous Revenue & Hepzibah	36,624
OPERATING INCOME/LOSS (-)	24,848
2.5% OF OPERATING REVENUES TO SAVINGS FOR BONDS	32,639
SENATE BILL 234	89,437
DEPRECIATION	397,280
NET PROFIT/LOSS(-)	(494,508)

Sun Valley Public Service District - Sewer Fund
Budget
Fiscal Years 2024-2025

	Budget 2024-2025
OPERATING REVENUES	
WASTE WATER REVENUES (51,670 avg/mth)	620,040
TREATMENT EXPENSES (19,255 avg/mth)	231,060
GROSS REVENUES	388,980
EMPLOYEE EXPENSES	
Payroll Operations	115,052
Pension & Benefits (Retirement & Medical)	39,636
Payroll Taxes & Workers Compensation	11,476
Total Payroll & Related Expenses	166,164
REVENUE AFTER PAYROLL & RELATED EXPENSES	222,816
OPERATING EXPENSES	
Operating Supplies	8,711
Maintenance	2,863
Outside Services	39,580
Insurance	12,754
Transportation & Fuel	8,313
General Office	14,185
Power	15,380
Miscellaneous - Allowance for Bad Debt	6,661
Miscellaneous - Repay Water Loan	0
Miscellaneous - Hepzibah & Lake Floyd Maintenance Help	1,664
Bond Payments	186,542
Operating Expenses	296,653
OPERATING INCOME/LOSS (-)	(73,837)
NON OPERATING REVENUES & EXPENSES	
Interest Revenue	7
Interest Expense	0
Miscellaneous Revenue - Hepzibah & Lake Floyd	46,296
OPERATING INCOME/LOSS(-)	(27,534)
2.5% OF OPERATING REVENUES TO SAVINGS FOR BONDS	15,501
SENATE BILL 234	44,852
DEPRECIATION	318,470
NET PROFIT/LOSS(-)	(406,357)