

Special Meeting
Harrison County Commission Meeting
Wednesday, July 9, 2025
9:00 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

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

Dial: 1-646-568-7788

Meeting ID: 762 816 0712

Passcode: 26301

Appointments:

9:00 A.M. --- Call to Order --- Invocation --- Pledge of Allegiance

9:05 A.M. --- Special Funding Request from Bridgeport FFA Alumni & Supporters Chapter requesting \$3,000 for Bleacher Rental Fee for the 1st Annual BHS FFA Cattle Battle

NEW BUSINESS – Action Items for Consideration or Approval:

- 1. Public Comment Period**
- 2. Payroll Change Notices:**
 - A. Eugene Huntermark – New Hire – Janitorial/Maintenance – Effective July 14, 2025
 - B. Scott Selmon – New Hire – Janitorial/Maintenance – Effective July 10, 2025
 - C. Christina Murphy – Transfer from Planning to Community Corrections – Effective July 10, 2025
- 3. Requisitions --- Purchase Orders --- Invoices**
 - A. Vendor List of Payments
- 4. Review—Discuss—Consider Budget Revisions FY2024-2025**
 - A. General County
 - B. Vital Services
 - C. Coal Severance
- 5. Review—Discuss—Consider Budget Revisions FY2025-2026**
 - A. Coal Severance
- 6. Review—Discuss—Consider Budget Revisions from the Sheriff**
700-Law Enforcement

Transfer From: 001-700-103-04	Transfer To: 001-700-108-08	Amount: \$8,410.46
Transfer From: 001-700-103-00	Transfer To: 001-700-108-06	Amount: \$14,208.85

- 7. Review—Discuss—Consider Awarding Bid for Dump Truck**

8. Administrator's Report

9. Commissioner Comments – Questions

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

1. Funding Request --- Clarksburg History Museum (03-27-2024)
2. Funding Request --- Mountaineer Food Bank (04-17-2025)
3. **Review—Discuss—Consider** Travel Requests for 911 Employee Chris Cutright to go to the APCO International Conference & Exposition in Baltimore, MD from July 25th – 31st, 2025

HARRISON COUNTY COMMISSION SPECIAL FUNDING REQUEST

Thank you for the opportunity to support your project. Please complete this application and return it to the Harrison 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: 14 May 2025

Organization Name: Bridgeport FFA Alumni and Supporters Chapter

Name and Title of Requester: Jared McCray, Chapter President

Mailing Address of Organization and Responsible Person:
515 Johnson Ave. Bridgeport, Wva Mr. Arnold, FFA Advisor and Jared McCray, Chapter President.

If approved, this is where the check will be sent

Telephone: 304.838.5650 Fax: _____ E-mail: justin.arnold@k12.wv.us

FEIN# <u>33-3952921</u>	Is your organization an IRS 501(c) 3 not-for-profit?	<input checked="" type="radio"/> Y	<input type="radio"/> N
If yes, attach IRS Status Letter			
If no, please explain: <u>We are nationally through the FFA chapter and have applied for the status for our local Bridgeport chapter.</u>			

TOTAL Cost of Project/Activity: \$ \$20,000-\$25,000.00

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 Commission:		Y <input type="radio"/> N <input checked="" type="radio"/>
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): Funds are for a two (2) day event, raising money for BHS FFA members.

If for a fair/festival/event, give dates and location: Date: July 18th & 19th 2025 Location: 769 Jerry Dove Drive

Describe the proposed activities with dollar amounts to be funded by this request: The Cattle Battle is set to host 1500-2000 patrons each night, being billed as the 1st Annual BHS FFA Cattle Battle. Seating was originally bring your own. We are now renting bleachers for the event that start at \$2,800 for a set that seats 1400 people. Harrison County monies would offset the bleacher rental fee, ensuring a better donation to the deserving BHS FFA students. Additionally, we are using local food trucks, business sponsors for riders and arena costs and are anticipating this event becoming an annual event benefiting all businesses, vendors and farm community members

Are your financial statements audited by an outside accounting firm?	Y <input type="radio"/> N <input checked="" type="radio"/>
If Yes, by whom: _____	

Do you plan to recognize the Harrison County Commission's contribution?	Y <input checked="" type="radio"/> N <input type="radio"/>
If Yes, how? <u>Various ways sponsors will be acknowledged will include: banners, signage, tv/radio coverage, public announcements, and possibly on t-shirts.</u>	

BHS FFA Alumni & Supporters Chapter

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 REVENUE 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 INFORMATION IS CORRECT

WHAT THE ABOVE INFORMATION IS C

Date _____

PAYROLL CHANGE NOTICE

DATE OF CHANGE 07/14/2025	EMPLOYEE #	SOCIAL SECURITY NO	
NAME Eugene Huntermark		ADDRESS	
PHONE	CITY/STATE/ZIP	DEPARTMENT 424	SHIFT

THE CHANGE(S):

<input checked="" type="checkbox"/> All Applicable Boxes	FROM	TO
<input type="checkbox"/> DEPARTMENT		
<input type="checkbox"/> JOB		
<input type="checkbox"/> SHIFT		
<input checked="" type="checkbox"/> RATE	4-1	
<input type="checkbox"/> ADDRESS/PHONE		
<input type="checkbox"/> BENEFIT PLAN		
<input type="checkbox"/> OTHER _____		
<input type="checkbox"/> OTHER _____		

THE REASON FOR THE CHANGE(S):

<input checked="" type="checkbox"/> HIRED	<input type="checkbox"/> PROBATIONARY PERIOD COMPLETED
<input type="checkbox"/> RE-HIRED	<input type="checkbox"/> LENGTH OF SERVICE INCREASE
<input type="checkbox"/> PROMOTION	<input type="checkbox"/> RE-EVALUATION OF EXISTING JOB
<input type="checkbox"/> DEMOTION	<input type="checkbox"/> RESIGNATION
<input type="checkbox"/> TRANSFER	<input type="checkbox"/> RETIREMENT
<input type="checkbox"/> MERIT INCREASE	<input type="checkbox"/> LAYOFF
<input type="checkbox"/> WAGE SCALE CHANGE	<input type="checkbox"/> DISCHARGE
<input type="checkbox"/> LEAVE OF ABSENCE FROM _____ (DATE) UNTIL _____ (DATE)	
TYPE OF LEAVE _____	
<input type="checkbox"/> OTHER (Explain) <u>New hire - maintenance ./janitorial</u>	

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE <i>Wayne</i>	DATE 07/01/2025
HUMAN RESOURCES MANAGER	DATE

PAYROLL CHANGE NOTICE

DATE OF CHANGE 07/10/2025	EMPLOYEE #	SOCIAL SECURITY NO 	
NAME Scott Selmon		ADDRESS	
PHONE 304-203-5374	CITY/STATE/ZIP	DEPARTMENT 424	SHIFT

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
<input type="checkbox"/> DEPARTMENT		
<input type="checkbox"/> JOB		
<input type="checkbox"/> SHIFT		
<input type="checkbox"/> RATE	4-1	
<input type="checkbox"/> ADDRESS/PHONE		
<input type="checkbox"/> BENEFIT PLAN		
<input type="checkbox"/> OTHER _____		
<input type="checkbox"/> OTHER _____		

THE REASON FOR THE CHANGE(S):

<input checked="" type="checkbox"/> HIRED	<input type="checkbox"/> PROBATIONARY PERIOD COMPLETED
<input type="checkbox"/> RE-HIRED	<input type="checkbox"/> LENGTH OF SERVICE INCREASE
<input type="checkbox"/> PROMOTION	<input type="checkbox"/> RE-EVALUATION OF EXISTING JOB
<input type="checkbox"/> DEMOTION	<input type="checkbox"/> RESIGNATION
<input type="checkbox"/> TRANSFER	<input type="checkbox"/> RETIREMENT
<input type="checkbox"/> MERIT INCREASE	<input type="checkbox"/> LAYOFF
<input type="checkbox"/> WAGE SCALE CHANGE	<input type="checkbox"/> DISCHARGE
<input type="checkbox"/> LEAVE OF ABSENCE FROM _____ DATE _____ UNTIL _____ DATE _____	
TYPE OF LEAVE _____	
<input type="checkbox"/> OTHER (Explain) <u>New hire maintenance / janitorial</u>	

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE <u>[Signature]</u>	DATE <u>07/01/2025</u>
HUMAN RESOURCES MANAGER	DATE



PAYROLL CHANGE NOTICE

DATE OF CHANGE 7/10/2025	EMPLOYEE #	SOCIAL SECURITY NO	
NAME CHRISTINA MURPHY		ADDRESS	
PHONE	CITY/STATE/ZIP	DEPARTMENT COM. CORR	SHIFT

THE CHANGE(S):

<input checked="" type="checkbox"/> All Applicable Boxes	FROM	TO
<input checked="" type="checkbox"/> DEPARTMENT	439	731
<input type="checkbox"/> JOB		
<input type="checkbox"/> SHIFT		
<input checked="" type="checkbox"/> RATE		C-5
<input type="checkbox"/> ADDRESS/PHONE		
<input type="checkbox"/> BENEFIT PLAN		
<input type="checkbox"/> OTHER _____		
<input checked="" type="checkbox"/> OTHER _____	Hourly	Salary

THE REASON FOR THE CHANGE(S):

<input type="checkbox"/> HIRED	<input type="checkbox"/> PROBATIONARY PERIOD COMPLETED
<input type="checkbox"/> RE-HIRED	<input type="checkbox"/> LENGTH OF SERVICE INCREASE
<input type="checkbox"/> PROMOTION	<input type="checkbox"/> RE-EVALUATION OF EXISTING JOB
<input type="checkbox"/> DEMOTION	<input type="checkbox"/> RESIGNATION
<input checked="" type="checkbox"/> TRANSFER	<input type="checkbox"/> RETIREMENT
<input type="checkbox"/> MERIT INCREASE	<input type="checkbox"/> LAYOFF
<input type="checkbox"/> WAGE SCALE CHANGE	<input type="checkbox"/> DISCHARGE
<input type="checkbox"/> LEAVE OF ABSENCE FROM _____ (DATE) UNTIL _____ (DATE)	
TYPE OF LEAVE _____	
<input type="checkbox"/> OTHER (Explain) _____	

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE 7/1/25
HUMAN RESOURCES MANAGER	DATE 7/2/2025



Date of Meeting	7/9/2025	Invoice							
Department	Vendor	Description	General County	E-911	Vital Services	Community	Community	ARPA	Other as
Name	Name	Note	001	007	027	Corrections	Improvement Fund 026	Fund	Needed
911 Center	Mon Power	Grafton Tower Electric							526.66
911 Center	Frontier	911 / Taylor County Phone Bill		\$823.32					
911 Center	City of Bridgeport	911 Center - Water, Sewer, Sprinkler Fee, Fire Fee and Utility Tax		\$289.98					
911 Center	Chris Cutright	Per Diem Request - (4) Days Breakfast, (4) Days Lunch, (4) Days Dinner		\$324.00					
Ambulance Authority	Anmoore EMS	June 2025 Allotment - 173 Runs @ \$29.8735			\$5,168.12				

Ambulance Authority	Bridgeport Fire Dept EMS	Multiple Invoices - June 2025 Allotments for: BEMS 51 - 119 runs @ \$29.8735, & BEMS 52 - 95 runs @ \$29.8735			\$6,392.94				
Ambulance Authority	Harrison County EMS	Multiple June 2025 Allotments for EMS Runs @ \$29.8735 per run: EMS 61 - 284 runs, EMS 62 - 87 runs, EMS 63 - 167 runs, EMS 67 - 143 runs			\$20,343.87				
Ambulance Authority	Nutter Fort VFD	June 2025 Allotment - 110 Runs @ \$29.8735			\$3,286.09				
Ambulance Authority	City of Salem	June 2025 Allotment - 26 Runs @ \$29.8735			\$776.69				

Animal Control	Marion County Humane Society	Rescue Incentive Fee - Paid from Best Friends Grant - 1 Rescue			\$200.00				
Animal Control	Frontier	Animal Control Phone Bill			\$181.44				
Animal Control	A-1 Exterminating	General Pest Control			\$50.00				
Animal Control	Lowes	AC for Animal Control			\$1,031.61				
Animal Control	US Bank	Amazon.com - Toner for Animal Control Printer			\$116.36				
Animal Control	The Water Shop	Water for Animal Control			\$36.22				
ARPA									
Assessor	Frontier	Assessor- Statewide Computer - Phone / Internet Bill	\$72.64						
Assessor	National Band & Tag	(10,500) Large Dog Paw Print							\$3,885.00

Assessor	The Water Shop	(12) Spring Water @ \$6, & (5) Bottle Deposits @ \$7	\$107.00						
Commission	McKinley Architecture & Engineering	GSB Building Evaluation	\$7,839.64						
Commission	Waste Management	Courthouse Garbage Utility Bill	\$1,877.14						
Commission	Waste Management	609 W. Main St - Sheriff's Office Garbage Utility Bill	\$250.30						
Commission	Frontier	Courthouse Phone Service Bill	\$404.27						
Commission	Frontier	Courthouse Phone / Internet Bill	\$355.47						

Commission	Vertical Transport Consulting, LLC	(5) Annual Elevator Inspections, (2) Witnessing & Documenting of Annual Elevator PRV Test, (2) Witnessing & Documenting of Annual No Load Elevator Safety Test, (1) Operation Fee	\$1,196.35						
Commission	Canon Financial	Copier Rentals	\$1,229.12						
Commission	Magna 5	Watchguard Support	\$410.35						
Commission	Enviroclean LLC	June 2025 Janitorial Services for Courthouse	\$12,109.50						
Commission	Lexis Nexis	18 WV Code Court Rules 2025	\$2,883.83						
Commission	Thomas Reuters	Online Subscription Software for Prosecuting Attorney	\$610.26						
Commission	West Virginia Division of Labor	Elevator Inspections	\$360.00						

Commission	Clarksburg Water Board	GSB Water Utility Bill	\$463.28						
Commission	Clarksburg Water Board	Sheriff's Office Water Utility Bill	\$108.24						
Commission	Clarksburg Water Board	306 Washington Ave, Clarksburg, WV Water Utility Bill	\$332.46						
Commission	Clarksburg Water Board	306 Washington Ave, Clarksburg, WV Water Utility Bill	\$376.25						
Commission	Clarksburg Water Board	Courthouse Water Utility Bill	\$532.74						
Commission	Clarksburg Water Board	Extension Office Water Utility Bill	\$118.98						

Commission	Steptoe & Johnson	TIF Litigation May 1 - 22, 2025 (50% to be paid by Harrison County 50% to be paid by Mon County)	\$6,753.34						
OEM	Canon Financial	Copier Rentals			\$245.82				
Parks & Rec.	Enlarged Hepzibah PSD	Water & Sewer for Spelter Ball Field			\$173.06				
Parks & Rec.	Mon Power	Quiet Dell School Electric Utility Bill			\$159.91				
Parks & Rec.	Mon Power	Quiet Dell School Barracks			\$15.59				
Parks & Rec.	Clarksburg Water Board	Parks & Rec Complex Water Utility Bill			\$379.94				
Parks & Rec.	Summit Park PSD	Water and Sewer for Summit Park Ball Field			\$84.51				
Sheriff & Treasurer	Special Tees	Shirts	\$718.00						

			\$38,391.16	\$1,437.30	\$38,642.17	\$0.00	\$0.00	\$0.00	\$3,885.00
					Grand Total:	\$82,355.63			

Yellow= Sent to Bookkeeping on

COMMISSIONER'S SIGNATURE

**HARRISON COUNTY
SHERIFF AND TREASURER**

ROBERT G. MATHENY

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



June 30, 2025

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

Dear Commissioners:

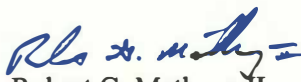
Please make the following line item revisions to the current 2024-2025 budget for the following Division:

700-Law Enforcement

Transfer \$8,410.46 from 700-103-04 to 700-108-00

Transfer \$14,208.85 from 700-103-00 to 700-108-06

Sincerely,


Robert G. Matheny II
Sheriff