**FLOYD COUNTY COUNCIL**

**AGENDA**

**July 13, 2021**

**6:00 P.M.**

**PINEVIEW GOVERNMENT CENTER**

**COMMISSIONERS MEETING ROOM #104**

**This scheduled meeting is also taking place *in-person* *and also streamed live at*** <http://live.floydin.com/>

**If you plan to attend in-person, the following guidelines must be followed:**

* ***If you feel sick, please stay at home***
* ***Face coverings or masks are recommended***
* ***Social Distancing of 6 Feet***

**Call meeting to order**

**Call to the *Pledge of Allegiance***

**Roll Call**

**Invocation**

**Acceptance of the Agenda**

**Approval of the Minutes** *6-8-2021 Council Minutes*

*6-22-2021 Council Minutes*

**PUBLIC**

**NEW BUSINESS**

1. **FLOYD COUNTY PROSECUTOR – CHRIS LANE (NB#1)**

*Discussion on an unpaid Claim*

1. **FLOYD COUNTY CIRCUIT COURT – JUDGE J. TERRANCE CODY (NB#2)**
   1. *REQUEST FOR ADDITIONAL APPROPRIATIONS*

*Fund: County General-Circuit Court*

*Fund Balance $ 6,032,873.26*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **1000** | **232** | **1000** | **03** | **Asst Crt Rep, Blf & Clerk** | **$ 25,959.65** | **$** |
| **1000** | **232** | **1000** | **07** | **Admin Asst.** | **$ 664.09** | **$** |

* 1. *REQUEST FOR TRANSFER*

*Fund: County General-Circuit Court*

*Line Balance $ 3,017.24*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **Inc/ Dec** | **DESCRIPTION** | **AMOUNT** | **P** |
| **1000** | **232** | **1000-04** | **D** | **PT File Clerk** | **$ 3,017.24** |  |
| **1000** | **232** | **1000-07** | **I** | **Admin Asst** | **$ 3,017.24** |  |

1. **ATTORNEY RICK FOX - (NB#3)**

*Interlocal/Resolution for Bridge 51*

1. **FLOYD COUNTY MERIT OFFICER – ANDREW BENSON (NB#4)**

*Floyd County Merit Officer’s Contract*

1. **FLOYD COUNTY CORRECTIONS – STAN HEIL(NB#5)**

*Floyd County Corrections Officer’s Contract*

1. **FLOYD COUNTY SHERIFF – STAN HEIL (NB#6)**
   1. *REQUEST FOR REIMBURSEMENT APPROPRIATIONS*

*Fund: Hospital Fund*

*Fund Balance: $30,901.19*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **9119** | **005** | **4000** | **05** | **Sheriff Vehicles** | **$ 27,977.00** | **$** |
| **9119** | **005** | **4000** | **05** | **Sheriff Vehicles** | **$ 2,924.19** | **$** |

1. **VETERANS COURT – THERESA GAHAFER (NB#7)**
   1. *REQUEST FOR NEW LINE ITEM*

*9101-000-3000-06 Support Services*

* 1. *REQUEST FOR ADDITIONAL APPROPRIATIONS*

*Fund: Veterans Court Gov Grant*

*Grant Amount: $8,475.00 and $22,571.00= $31,046.00*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **9101** | **000** | **1000** | **01** | **Reentry Coordinator Salary** | **$ 7,821.00** | **$** |
| **9101** | **000** | **2000** | **05** | **Chemical Tests** | **$ 4,500.00** | **$** |
| **9101** | **000** | **2000** | **25** | **Incentives** | **$ 2,500.00** | **$** |
| **9101** | **000** | **3000** | **03** | **Prosecutor** | **$ 3,750.00** | **$** |
| **9101** | **000** | **3000** | **04** | **Public Defender** | **$ 7,500.00** | **$** |
| **9101** | **000** | **3000** | **06** | **Support Services** | **$ 3,975.00** | **$** |
| **9101** | **000** | **4000** | **01** | **Equipment** | **$ 1,000.00** | **$** |
|  |  |  |  | **Total** | **$ 31,046.00** | **$** |

* 1. *REQUEST FOR TRANSFER*

*Fund: Veterans Court Gov Grant*

*Line Balance $ 477.36*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **Inc/ Dec** | **DESCRIPTION** | **AMOUNT** | **P** |
| **9101** | **000** | **1000-02** | **D** | **Admin Asst** | **$ 477.36** |  |
| **9101** | **000** | **1000-01** | **I** | **Reentry Salary** | **$ 477.36** |  |

* 1. *REQUEST FOR TRANSFER*

*Fund: Veterans Court Gov Grant*

*Line Balance $ 11,312.59*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **Inc/ Dec** | **DESCRIPTION** | **AMOUNT** | **P** |
| **9101** | **000** | **1000-05** | **D** | **FICA** | **$ 5,923.00** |  |
| **9101** | **000** | **1000-01** | **I** | **Reentry Salary** | **$ 5,923.00** |  |

* 1. *REQUEST FOR TRANSFER*

*Fund: Veterans Court Gov Grant*

*Line Balance $ 5,389.59*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **Inc/ Dec** | **DESCRIPTION** | **AMOUNT** | **P** |
| **9101** | **000** | **1000-05** | **D** | **FICA** | **$ 1,250.00** |  |
| **9101** | **000** | **1000-03** | **I** | **PERF** | **$ 1,250.00** |  |

* 1. *REQUEST FOR NEW LINE ITEMS*

*9175-000-3000-04 Support Services*

*9175-000-3000-05 Telephone*

* 1. *REQUEST FOR ADDITIONAL APPROPRIATIONS*

*Fund: Family Recovery Prob Solving*

*Grant Amount: $8,400.00 and $63,156.50 =$71,556.50*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **9175** | **000** | **1000** | **01** | **Coordinator Salary** | **$ 18,625.00** | **$** |
| **9175** | **000** | **1000** | **02** | **Case Manager Salary** | **$ 20,000.00** | **$** |
| **9175** | **000** | **1000** | **03** | **PERF** | **$ 6,566.50** | **$** |
| **9175** | **000** | **1000** | **04** | **Unemployment/**  **WC** | **$ 2,260.00** | **$** |
| **9175** | **000** | **1000** | **05** | **FICA** | **$ 2,955.00** | **$** |
| **9175** | **000** | **1000** | **06** | **Longevity** | **$ 500.00** | **$** |
| **9175** | **000** | **1000** | **07** | **Insurance** | **$ 7,500.00** | **$** |
| **9175** | **000** | **2000** | **01** | **Office Supplies** | **$ 375.00** | **$** |
| **9175** | **000** | **2000** | **02** | **Printing** | **$ 375.00** | **$** |
| **9175** | **000** | **2000** | **03** | **Incentives** | **$ 2,500.00** | **$** |
| **9175** | **000** | **3000** | **02** | **Chemical Tests** | **$ 4,500.00** | **$** |
| **9175** | **000** | **3000** | **03** | **Training** | **$ 1,000.00** | **$** |
| **9175** | **000** | **3000** | **04** | **Support Services** | **$ 3,900.00** | **$** |
| **9175** | **000** | **3000** | **05** | **Telephone** | **$ 500.00** | **$** |
|  |  |  |  | **Total** | **$ 71,556.50** | **$** |

* 1. *REQUEST FOR TRANSFER*

*Fund: Family Recovery Prob Solving*

*Line Balance $ 9,997.33*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **Inc/ Dec** | **DESCRIPTION** | **AMOUNT** | **P** |
| **9175** | **000** | **1000-07** | **D** | **Insurance** | **$ 2,500.00** |  |
| **9175** | **000** | **1000-05** | **I** | **FICA** | **$ 2,500.00** |  |

1. **DIRECTOR OF OPERATIONS AND PLANNING – DON LOPP (NB#8)**
   1. *REQUEST FOR ADDITIONAL APPROPRIATIONS*

*Fund: Highlander Pt-Edwardsville TIF*

*Fund Balance: $137,533.64*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **9121** | **000** | **3000** | **01** | **Professional Services** | **$ 10,000.00** | **$** |

* 1. *REQUEST FOR ADDITIONAL APPROPRIATIONS*

*Fund: Cumulative Bridge*

*Fund Balance: $866,566.11*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **1135** | **000** | **4000** | **70** | **Bridge 51 ROW** | **$ 125,000.00** | **$** |

* 1. *REQUEST FOR ADDITIONAL APPROPRIATIONS*

*Fund: Local Road & Street*

*Fund Balance: $797,714.07*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **1169** | **000** | **4000** | **03** | **Paving** | **$ 225,000.00** | **$** |

* 1. *REQUEST FOR NEW LINE ITEMS*

*8903-000-1000-01 Health Dept Bonus Pay*

*8903-000-1000-02 Benefit Deductions*

*8903-000-4000-01 Lost Rev Replacement-Election Machines*

* 1. *REQUEST FOR ADDITIONAL APPROPRIATIONS*

*Fund: American Rescue Plan*

*Fund Balance: $7,625,989.00*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **8903** | **000** | **1000** | **01** | **Health Dept Bonus Pay** | **$ 250,000.00** | **$** |
| **8903** | **000** | **4000** | **01** | **Lost Rev Replacement-Election Machines** | **$ 500,000.00** | **$** |

* 1. *REQUEST FOR ADDITIONAL APPROPRIATIONS*

*Fund: MVH Restricted*

*Fund Balance: $725,224.54*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **1173** | **000** | **3000** | **02** | **Paving** | **$ 250,000.00** | **$** |

1. **COMMUNITY CORRECTIONS (NB#9)**
   1. *REQUEST FOR TRANSFER*

*Fund: Community Corrections Adult*

*Line balance: $73,993.87*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **Inc/ Dec** | **DESCRIPTION** | **AMOUNT** | **P** |
| **1121** | **001** | **1000-12** | **D** | **Insurance** | **$ 7,000.00** |  |
| **1121** | **001** | **3000-09** | **I** | **Contractual Services-HD Vendor** | **$ 7,000.00** |  |

* 1. *REQUEST FOR ADDITIONAL APPROPRIATIONS*

*Fund: Community Corrections Adult*

*Fund Balance: $725,224.54*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **1121** | **001** | **3000** | **11** | **Intensive Out Patient** | **$ 25,000.00** | **$** |
| **1121** | **001** | **3000** | **16** | **Drug Testing** | **$ 700.00** | **$** |
| **1121** | **001** | **2000** | **08** | **Incentive** | **$ 969.40** | **$** |
| **1121** | **001** | **1000** | **22** | **Cognitive Behavior Coordinator** | **$ 14,970.00** | **$** |
| **1121** | **001** | **1000** | **19** | **IOP Administrator/ Adm Asst** | **$ 15,000.00** | **$** |
|  |  |  |  | **Total** | **$ 56,639.40** | **$** |

* 1. *REQUEST FOR ADDITIONAL APPROPRIATIONS*

*Fund: Professional Service Doc Grant*

*Fund Balance: $3,725.64*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **9134** | **000** | **1000** | **01** | **Interventionist** | **$ 37,800.00** | **$** |
| **9134** | **000** | **1000** | **10** | **FICA** | **$ 2,892.00** | **$** |
| **9134** | **000** | **1000** | **11** | **PERF** | **$ 5,367.60** | **$** |
| **9134** | **000** | **1000** | **12** | **Insurance** | **$ 15,500.00** | **$** |
| **9134** | **000** | **1000** | **13** | **Unemployment** | **$ 246.00** | **$** |
| **9134** | **000** | **1000** | **15** | **Workers Comp** | **$ 500.00** | **$** |
| **9134** | **000** | **1000** | **16** | **Longevity** | **$ 800.00** | **$** |
|  |  |  |  | **Total** | **$ 63,105.60** | **$** |

* 1. *REQUEST FOR ADDITIONAL APPROPRIATIONS*

*Fund: Project Income*

*Fund Balance: $545,666.29*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **9102** | **001** | **1000** | **04** | **Asst Director** | **$ 996.00** | **$** |
| **9102** | **001** | **1000** | **27** | **Re-entry Coord** | **$ 362.00** | **$** |
| **9102** | **001** | **1000** | **28** | **IOP Admin-Admin Asst** | **$ 300.00** | **$** |
| **9102** | **001** | **3000** | **13** | **Misc Services** | **$ 200.00** | **$** |
| **9102** | **001** | **3000** | **17** | **Drug Testing Services** | **$ 3,650.00** | **$** |
|  |  |  |  | **Total** | **$ 5,508.00** | **$** |

1. **FLOYD COUNTY TREASURER– STEVE BURKS (NB#10)**
   1. *REQUEST FOR ADDITIONAL APPROPRIATIONS*

*Fund: Treasurer Non-Reverting Fund*

*Fund Balance: $ 5,496.79*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **9107** | **000** | **2000** | **01** | **Office Supplies** | **$ 250.00** | **$** |

1. **FLOYD COUNTY AUDITOR– JACQUELINE WENNING(NB#11)**
   1. *REQUEST FOR TRANSFER*

*Fund: Auditor Ineligible Fund*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **Inc/ Dec** | **DESCRIPTION** | **AMOUNT** | **P** |
| **1216** | **000** | **3000-01** | **D** | **Ineligible Homestead** *(Bal $2,000.68)* | **$ 2,000.68** |  |
| **1216** | **000** | **3000-02** | **D** | **Destruction of Records**  *(Bal $1,000.00)* | **$ 1,000.00** |  |
| **1216** | **000** | **3000-04** | **D** | **Training**  *(Bal $3,938.00)* | **$ 3,938.00** |  |
| **1216** | **000** | **3000-08** | **D** | **Professional Fees**  *(Bal $4,623.78)* | **$ 4,623.78** |  |
| **1216** | **000** | **3000-12** | **D** | **Seminars-Mileage**  *($2,000.00)* | **$ 2,000.00** |  |
| **1216** | **000** | **4000-01** | **D** | **Office Equipment**  *($30,000.00)* | **$ 27,886.71** |  |
| **1216** | **000** | **3000-09** | **I** | **Financial Software Support** | **$ 41,449.17** |  |

* 1. *Discussion on Tax Sale Attorney Invoice*
  2. *2021 Salary Ordinance Revision*

1. **COUNTY COUNCIL PRESIDENT – BRAD STRIEGEL (NB#12)**
   1. *Rural Insurance Agency Invoice for 4H Fairgrounds*

*REQUEST FOR ADDITIONAL APPROPRIATIONS*

*Fund: Riverboat*

*Fund Balance: $ 64,600.08,*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FUND** | **DEPT** | **ACCOUNT** | **LINE** | **DESCRIPTION** | **AMOUNT REQUESTED** | **AMOUNT APPROVED** |
| **7303** | **000** | **3000** | **64** | **Community Projects** | **$ 11,726.00** | **$** |

* 1. *Discussion on adding Council Agendas, Minutes, Resolutions and Ordinances to website*
  2. *Ordinance 2021-02*

*An Ordinance of the Floyd County Council Amending Ordinance 2018-7 to make a Technical Correction*

**PUBLIC**

**ADA NOTICE:** Floyd County, will upon request, provide appropriate aides and services leading to effective communications for qualified persons with disabilities so that they can participate equally in Floyd County public meetings.

For special accommodations for a meeting contact the Commissioners Administrative Assistant Suzanna Worrall at 812-948-5466 or [sworrall@floydcounty.in.gov](mailto:sworrall@floydcounty.in.gov) at least two (2) business days prior to the scheduled meeting or event to request an accommodation.