



Union County Board of County Commissioners
15 Northeast 1st Street, Lake Butler, FL 32054 • Phone: 386-496-4241 • Fax: 386-496-4810

AGENDA
REGULAR BUSINESS MEETING
AUGUST 04, 2025
4:30 P.M.

NOTE: If any person decides to appeal any decision made with respect to any matter considered at this meeting or hearing, he or she will need a record for the proceedings and may need to ensure that a verbatim record is made

1. Meeting Called to Order.....Chairman Dobbs
2. Invocation and Pledge.....Commissioner McNeal
3. Adoption of the Agenda
4. Public Comments
5. Approval of Finance Report.....Chairman Dobbs
6. Purchase Order Agreement for Opioid Allocation & Statewide Response Agreement.....Jimmy Williams
7. Consideration of the SHIP Annual Report and Local Housing Incentives Certification.....Jimmy Williams
8. Report from County Coordinator, Jimmy Williams.....Jimmy Williams
9. Report from Kellie Hendricks Rhoades, Clerk of Courts and Comptroller.....Clerk Rhoades
10. Report from Russell A. Wade III, County Attorney..... Attorney Wade
11. Report from County Commissioners
Donna Jackson, District 1
Channing Dobbs, District 2
Melissa McNeal, District 3
Mac Johns, District 4
Willie Croft, District 5
12. Adjournment

BOARD MEMBERS:

DONNA JACKSON, District 1 • CHANNING DOBBS, District 2 • MELISSA McNEAL District 3 • MAC JOHNS, District 4 • WILLIE CROFT, District 5

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

E-911 COMMUNICATIONS ACCOUNT (911)

Bank Code: C DLP BANK

Check Number/ Invoice Number	Check Date	Vendor Number Invoice Date	Name	GL Account	Check Amount	Check Type
0000000758 12022-FL	8/4/2025	00-0001015 6/20/2025	AK ASSOCIATES - KRAUS ASSOCIATES, INC. 182,160.23	521-34-4	\$ 182,160.23	Auto
0000000759 2025/07-23	8/4/2025	00-0010008 7/23/2025	KAREN SMITH 306.36	521-40-3	\$ 306.36	Auto
FLGIT72225 CKFLGIT7222501	7/22/2025	01-0021096 7/22/2025	UC GRANTS & RESERVES 3,498.83	104-00-0	\$ 3,498.83	Manual
PR25-07 PR 2025-07-17	8/4/2025	01-0021001 7/17/2025	UC BOCC GENERAL FUND 756.00	521-11-3	\$ 16,588.71	Manual
PR 2025-07-17		7/17/2025	5,795.05	521-12-2		
PR 2025-07-17		7/17/2025	529.50	521-14-2		
PR 2025-07-17		7/17/2025	523.59	521-21-2		
PR 2025-07-17		7/17/2025	1,018.57	521-22-2		
PR 2025-07-17		7/17/2025	-0.02	521-12-2		
PR25-07-31		7/31/2025	756.00	521-11-3		
PR25-07-31		7/31/2025	5,084.17	521-12-2		
PR25-07-31		7/31/2025	706.52	521-14-2		
PR25-07-31		7/31/2025	500.83	521-21-2		
PR25-07-31		7/31/2025	918.50	521-22-2		

Report Total: \$ 202,554.13

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

EMERGENCY MANAGEMENT (EMG)

Bank Code: C DLP BANK

Check Number/ Invoice Number	Check Date	Vendor Number Invoice Date	Name	GL Account	Check Amount	Check Type
0000201852 7409660 072725	8/4/2025	0003003 7/27/2025	CRYSTAL SPRINGS WATER CO. 132.41	52500-51-1	\$ 132.41	Auto
0000201853 INESI7048	8/4/2025	0005012 7/11/2025	ESI ACQUISITION, INC. 2,503.20	52500-34-3	\$ 2,503.20	Auto
0000201854 307479	8/4/2025	0019017 7/23/2025	SHEFFIELD PEST CONTROL 40.00	52500-46-3	\$ 40.00	Auto
0000201855 11133378576224207	8/4/2025	0020023 7/21/2025	TD CARD SERVICES 189.99	52500-51-3	\$ 189.99	Auto
FLGIT72225 CKFLGIT7222501	7/22/2025	0021096 7/22/2025	UC GRANTS & RESREVES 3,854.06	10400-00-0	\$ 3,854.06	Manual
PR25-07 PR 2025-07-17	8/4/2025	0021001 7/17/2025	UC BOCC GENERAL FUND 2,268.00	52500-11-2	\$ 9,934.65	Manual
PR 2025-07-17		7/17/2025	1,716.38	52500-12-2		PR 2025-07-17
PR 2025-07-17		7/17/2025	296.09	52500-21-2		PR 2025-07-17
PR 2025-07-17		7/17/2025	506.02	52500-22-2		PR 2025-07-17
PR 2025-07-17		7/17/2025	0.02	52500-12-2		PR 2025-07-17
PR25-07-31		7/31/2025	2,268.00	52500-11-2		PR25-07-31
PR25-07-31		7/31/2025	2,057.81	52500-12-2		PR25-07-31
PR25-07-31		7/31/2025	330.94	52500-21-2		PR25-07-31
PR25-07-31		7/31/2025	491.39	52500-22-2		PR25-07-31

Report Total: \$ 16,654.31

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

EMERGENCY MEDICAL SERVICES (EMS)

Bank Code: C

Check Number/ Invoice Number	Check Date	Vendor Number Invoice Date	Name	GL Account	Check Amount	Check Type
0000203257	8/4/2025	00-0001010	WINDSTREAM		\$ 455.82	Auto
38392507		7/14/2025	303.17	52600-41-01	MONTHLY PHONE BILL #060397363	
49832507		7/14/2025	152.65	52200-41-02	MONTHLY PHONE BILL # 063259632	
0000203258	8/4/2025	00-0001042	AIRGAS USA, LLC		\$ 124.31	Auto
9163312424		7/24/2025	124.31	52600-48-01	MEDICAL SUPPLIES	
0000203259	8/4/2025	00-0002028	BIO-CYCLE, LLC		\$ 106.00	Auto
415161		7/14/2025	106.00	52600-48-01	MEDICAL WASTE	
0000203260	8/4/2025	00-0008014	HENRY SCHEIN, INC		\$ 4,710.11	Auto
43955467		7/11/2025	3,678.22	52600-48-01	MEDICAL SUPPLIES	
43955469		7/11/2025	12.38	52600-48-01	MEDICAL SUPPLIES	
43955483		7/11/2025	208.03	52600-48-01	MEDICAL SUPPLIES	
43955485		7/11/2025	60.80	52600-48-01	MEDICAL SUPPLIES	
43955486		7/11/2025	163.20	52600-48-01	MEDICAL SUPPLIES	
43955491		7/11/2025	352.50	52600-48-01	MEDICAL SUPPLIES	
43989706		7/11/2025	81.60	52600-48-01	MEDICAL SUPPLIES	
44250883		7/17/2025	79.80	52600-48-01	MEDICAL SUPPLIES	
44250897		7/18/2025	43.48	52600-48-01	MEDICAL SUPPLIES	
44250898		7/18/2025	30.10	52600-48-01	MEDICAL SUPPLIES	
0000203261	8/4/2025	00-0008029	HOLLY ELECTRIC, INC.		\$ 500.00	Auto
135821		7/21/2025	500.00	52200-46-02	STATION 6 SEMI-ANNUAL MAINT PLAN	
0000203262	8/4/2025	00-0014014	NETIT4U INC		\$ 369.67	Auto
UCEMS25-01C		8/1/2025	369.67	52600-34-01	EQUIPMENT COMPUTER LEASE AUG 25	
0000203263	8/4/2025	00-0018072	STARKE FAMILY MEDICAL CENTER, INC.		\$ 70.00	Auto
52278C16275		7/1/2025	35.00	52600-52-01	NEW HIRE DRUG SCREEN- HUGHES, L & MOC	
52278C16275		7/1/2025	35.00	52600-52-01	NEW HIRE DRUG SCREEN- HUGHES, L & MOC	
0000203264	8/4/2025	00-0021006	VERIZON WIRELESS		\$ 256.88	Auto
6118985105		7/20/2025	256.88	52600-41-01	MOBILE PHONE ACCT#222335615-0001	
0000203265	8/4/2025	00-0021006	VERIZON WIRELESS		\$ 21.06	Auto
6118985106		7/20/2025	21.06	52600-41-01	WIRELESS LAPTOP & EQUIPMENT	
FLGIT72225	7/22/2025	01-0020035	UC GRANTS & RESERVES		\$ 267,745.60	Manual
CKFLGIT7222501		7/22/2025	267,745.60	10400-00-00	MONIES HELD IN POOLED INVESTMENT	
PR25-07	8/4/2025	01-0020001	UC BOCC GENERAL FUND		\$ 114,394.80	Manual
PR 2025-07-17		7/17/2025	4,048.34	52600-13-01	PR 2025-07-17	
PR 2025-07-17		7/17/2025	25,288.60	52600-12-01	PR 2025-07-17	
PR 2025-07-17		7/17/2025	14,960.23	52600-14-01	PR 2025-07-17	
PR 2025-07-17		7/17/2025	3,351.43	52600-21-01	PR 2025-07-17	
PR 2025-07-17		7/17/2025	14,577.96	52600-22-01	PR 2025-07-17	
PR 2025-07-17		7/17/2025	-0.01	52600-12-01	PR 2025-07-17	
PR25-07-31		7/31/2025	3,385.43	52600-13-01	PR25-07-31	
PR25-07-31		7/31/2025	21,417.76	52600-12-01	PR25-07-31	
PR25-07-31		7/31/2025	13,069.97	52600-14-01	PR25-07-31	
PR25-07-31		7/31/2025	2,897.29	52600-21-01	PR25-07-31	
PR25-07-31		7/31/2025	11,397.80	52600-22-01	PR25-07-31	
Report Total:					\$ 388,754.25	

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

GRANTS & SPECIAL ACCOUNTS (GRT)

Bank Code: C DLP BANK

Check Number/ Invoice Number	Check Date	Vendor Number Invoice Date	Name	GL Account	Check Amount	Check Type	Comment
0000001445 INV-0679	8/4/2025	01-0004005 7/16/2025	DERYL WILLIAMS MASONRY, INC 55,000.00	537-63-10-00	\$ 55,000.00	Auto	STIE WORK, COMPACTION TESTING, SLAB, P
0000001446 0256687	8/4/2025	01-0010001 7/15/2025	JONES EDMUNDS 7,800.00	515-31-14-00	\$ 7,800.00	Auto	VULNERABILITY ASSESSMENT GRANT
0000001447 105358	8/4/2025	01-0016009 7/16/2025	PPM CONSULTANTS, INC. 25,641.04	513-31-08-00	\$ 25,641.04	Auto	PROFESSIONAL SERVICES THRU 6/30/25
0000001448 062025-166 07-2025-171	8/4/2025	01-0023210 7/9/2025 7/16/2025	UNION LASTEEL METAL BUILDINGS, INC. 11,800.00 125,315.00	537-65-10-00 537-65-10-00	\$ 137,115.00	Auto	PHASE II OF AG/ED BLDG PHASE II OF AG/ED BLDG
LAW72225 CKLAW7222501	7/22/2025	02-LAW 7/22/2025	UC SPECIAL LAW ENFORCEMENT 620.93	207-01-00-21	\$ 620.93	Manual	MONIES HELD IN POOLED INVESTMENT
SHP72225 CKSHP7222501	7/22/2025	02-UC SHP 7/22/2025	LOCAL HOUSING 299.26	207-01-00-54	\$ 299.26	Manual	
SML72225 CKSML7222503	7/22/2025	02-UC SHP 7/22/2025	LOCAL HOUSING 13,331.42	207-01-00-90	\$ 13,331.42	Manual	MONIES HELD IN POOLED INVESTMENT
TTF72225 CKTTF7222501	7/22/2025	02-TTF 7/22/2025	UC TRANSPORTATION TRUST FUND 20,989.95	207-01-00-41	\$ 20,989.95	Manual	MONIES HELD IN POOLED INVESTMENT
Report Total:					\$ 260,797.60		

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

UNION COUNTY PUBLIC LIBRARY (LIB)

Bank Code: C DLP BANK

Check Number/ Invoice Number	Check Date	Vendor Number Invoice Date	Name	GL Account	Check Amount	Check Type
0000201592 2503	8/4/2025	0003005 7/24/2025	CITY OF LAKE BUTLER 41.80	571-43-3	\$ 41.80	Auto
0000201593 43395/25-10	8/4/2025	0006001 7/14/2025	FPL 710.13	571-43-3	\$ 710.13	Auto
0000201594 307398 307624	8/4/2025	0019002 7/24/2025 7/18/2025	SHEFFIELD PEST CONTROL 40.00 125.00	571-46-3 571-46-3	\$ 165.00	Auto
0000201595 3432/25-10	8/4/2025	0023012 7/14/2025	WINDSTREAM 165.79	571-41-3	\$ 165.79	Auto
FLGIT72225 CKFLGIT7222501	7/22/2025	0021096 7/22/2025	UC GRANT & RESERVES 1,677.33	104-00-0	\$ 1,677.33	Manual
PR25-07 PR 2025-07-17 PR 2025-07-17 PR 2025-07-17 PR 2025-07-17 PR 2025-07-17 PR 2025-07-17 PR 2025-07-17 PR25-07-31 PR25-07-31 PR25-07-31 PR25-07-31 PR25-07-31 PR25-07-31	8/4/2025	0021001 7/17/2025 7/17/2025 7/17/2025 7/17/2025 7/17/2025 7/17/2025 7/17/2025 7/31/2025 7/31/2025 7/31/2025 7/31/2025 7/31/2025 7/31/2025	UNION CO BD OF COMMISSIONERS***** 2,077.60 3,972.00 289.70 153.89 573.16 299.80 0.01 2,077.60 3,972.00 303.86 158.94 557.27 291.49	571-11-3 571-12-1 571-21-1 571-21-3 571-22-1 571-22-3 571-12-1 571-11-3 571-12-1 571-21-1 571-21-3 571-22-1 571-22-3	\$ 14,727.32	Manual
Report Total:					\$ 17,487.37	

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

LOCAL HOUSING ASSISTANCE TRUST FUND (SHP)

Bank Code: C CASH - DLP OPERATING ACCOUNT

Check Number/ Invoice Number	Check Date	Vendor Number Invoice Date	Name	GL Account	Check Amount	Check Type
0000000497	8/4/2025	0019001	SUWANNEE RIVER ECON. COUNCIL		\$ 34,987.50	Auto
E MACKEY		7/16/2025	34,987.50	554-05	REHAB EXPENSE	
0000000498	8/4/2025	0019001	SUWANNEE RIVER ECON. COUNCIL		\$ 34,841.00	Auto
J KINGSLAND		7/25/2025	34,841.00	554-05	REHAB EXPENSE JAMIE KINGSLAND	
Report Total:					\$ 69,828.50	

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

SMALL FUNDS (SML)

Bank Code: C DLP BANK

Check Number/	Check Date	Vendor Number	Name	Check Amount	Check Type
Invoice Number	Invoice Date	GL Account	Comment		
0000001198	8/4/2025	00-0004010	JIM DEVALERIO	\$ 12.58	Auto
6/23/25 MILAGE	6/23/2025	12.58	537-40-00-2	TRAVEL REMIB - EXP IN SHOP	
0000001199	8/4/2025	00-0019002	SHEFFIELD PEST CONTROL	\$ 40.00	Auto
307160	7/18/2025	40.00	572-46-04-3	PROVIDENCE COMM CTR	
0000001200	8/4/2025	00-0020008	TD CARD SERVICES	\$ 819.91	Auto
114-7859087-2931441	7/14/2025	14.67	537-51-00-2	LEGAL SIZE MAILING ENVELOPES	
MD - HILTON ATLANTA	7/16/2025	290.24	537-40-00-2	NAE4-H CONFERENCE 10/27-10/31/25 MD	
NAECON-072025-0737	7/15/2025	515.00	537-40-00-2	NAE4-H DP ANNUAL CONFERENCE REGISTRA	
0000001201	8/4/2025	00-0021007	UNION POWER EQUIPMENT, INC.	\$ 104.22	Auto
61686	7/15/2025	84.23	539-52-00-4	TRIMMER LINE SPOOL	
61730	7/23/2025	19.99	539-52-00-4	PULLEY	
0000001202	8/4/2025	00-0023009	WINDSTREAM	\$ 84.16	Auto
2676/25-10	7/14/2025	84.16	524-41-00-1	BLDG DEPT #2676 ACCT # 060675277	
0000001203	8/4/2025	00-0019009	SHATTO HEATING & AIR, INC.	\$ 6,350.00	Auto
122013	7/25/2025	6,350.00	572-46-04-3	NEW AC SPLIT SYSTEM FOR PROV COMM CE	
CLYELC725	7/22/2025	00-0003001	CLAY ELECTRIC COOPERATIVE	\$ 732.67	Manual
1095991/25-09 & 10	7/11/2025	138.39	572-43-05-3	OJ OTHER JUN & JUL 25	
5208137/25-10	7/11/2025	76.88	572-43-05-3	OJ PHILLIP BASEBALL FIELD	
7673312/25-10	7/11/2025	434.40	572-43-05-3	OJ PHILLIPS BALL FIELDS	
9235212/25-10	7/11/2025	83.00	572-43-05-3	OJ PHILLIPS 15233	
PR25-07	8/4/2025	00-0021001	UNION CO BD OF COMMISSIONERS	\$ 19,070.19	Manual
PR 2025-07-17	7/17/2025	1,079.20	524-11-00-1	PR 2025-07-17	
PR 2025-07-17	7/17/2025	1,442.40	524-12-00-1	PR 2025-07-17	
PR 2025-07-17	7/17/2025	27.05	524-14-00-1	PR 2025-07-17	
PR 2025-07-17	7/17/2025	489.60	537-11-00-2	PR 2025-07-17	
PR 2025-07-17	7/17/2025	2,469.80	537-12-00-2	PR 2025-07-17	
PR 2025-07-17	7/17/2025	1,347.72	539-12-00-4	PR 2025-07-17	
PR 2025-07-17	7/17/2025	1,288.71	572-12-00-3	PR 2025-07-17	
PR 2025-07-17	7/17/2025	23.87	572-14-00-3	PR 2025-07-17	
PR 2025-07-17	7/17/2025	189.36	524-21-00-1	PR 2025-07-17	
PR 2025-07-17	7/17/2025	224.49	537-21-00-2	PR 2025-07-17	
PR 2025-07-17	7/17/2025	100.26	539-21-00-4	PR 2025-07-17	
PR 2025-07-17	7/17/2025	96.88	572-21-00-3	PR 2025-07-17	
PR 2025-07-17	7/17/2025	273.74	524-22-00-1	PR 2025-07-17	
PR 2025-07-17	7/17/2025	314.32	537-22-00-2	PR 2025-07-17	
PR 2025-07-17	7/17/2025	194.61	539-22-00-4	PR 2025-07-17	
PR 2025-07-17	7/17/2025	189.42	572-22-00-3	PR 2025-07-17	
PR 2025-07-17	7/17/2025	0.03	524-12-00-1	PR 2025-07-17	
PR25-07-31	7/31/2025	1,079.20	524-11-00-1	PR25-07-31	
PR25-07-31	7/31/2025	1,442.40	524-12-00-1	PR25-07-31	
PR25-07-31	7/31/2025	489.60	537-11-00-2	PR25-07-31	
PR25-07-31	7/31/2025	1,984.80	537-12-00-2	PR25-07-31	
PR25-07-31	7/31/2025	1,335.20	539-12-00-4	PR25-07-31	
PR25-07-31	7/31/2025	112.66	539-14-00-4	PR25-07-31	
PR25-07-31	7/31/2025	1,272.80	572-12-00-3	PR25-07-31	
PR25-07-31	7/31/2025	41.76	572-14-00-3	PR25-07-31	
PR25-07-31	7/31/2025	192.90	524-21-00-1	PR25-07-31	

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

SMALL FUNDS (SML)

Bank Code: C DLP BANK

Check Number/	Check Date	Vendor Number	Name		Check Amount	Check Type
Invoice Number	Invoice Date			GL Account	Comment	
PR25-07-31	7/31/2025		189.30	537-21-00-2	PR25-07-31	
PR25-07-31	7/31/2025		110.76	539-21-00-4	PR25-07-31	
PR25-07-31	7/31/2025		100.56	572-21-00-3	PR25-07-31	
PR25-07-31	7/31/2025		270.04	524-22-00-1	PR25-07-31	
PR25-07-31	7/31/2025		309.17	537-22-00-2	PR25-07-31	
PR25-07-31	7/31/2025		203.13	539-22-00-4	PR25-07-31	
PR25-07-31	7/31/2025		184.43	572-22-00-3	PR25-07-31	
PR25-07-31	7/31/2025		0.02	524-12-00-1	PR25-07-31	
Report Total:					\$ 27,213.73	

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

TRANSPORTATION TRUST FUND (TTF)

Bank Code: C DLP BANK

Check Number/	Check Date	Vendor Number	Name	Check Amount	Check Type
Invoice Number	Invoice Date	GL Account	Comment		
0000203043	8/4/2025	00-0001010	AUTOMOTIVE PARTS & EQUIPMENT	\$ 605.25	Auto
1634348	7/14/2025		22.37 541-56-00	OIL, WD40, & DS PENETRANT	
164025	7/2/2025		150.98 541-46-8A	BEARING WHL KIT	
164026	7/2/2025		8.49 541-56-00	GREASE	
164027	7/2/2025		11.49 541-46-8A	SPNDL HDW KT-BLSTR PK	
164202	7/9/2025		13.49 541-52-00	SHOP TOWELS	
164203	7/9/2025		21.49 541-56-00	SYNTHETIC OIL	
164235	7/10/2025		10.99 541-52-00	UTILITY GLOVES	
164342	7/14/2025		53.45 541-46-6A	HYD HOSE FITTING & HYD HOSE	
164349	7/14/2025		1.60 541-56-00	OIL & CARLYLE	
164366	7/14/2025		20.99 541-46-00	BELT FOR A/C	
164391	7/15/2025		35.88 541-52-00	BRAKE CLEANER	
164415	7/16/2025		45.48 541-56-00	OIL & AIR FILTER	
164416	7/16/2025		25.88 541-56-00	SYNTHETIC OIL	
164447	7/17/2025		52.68 541-56-00	5W30 OIL	
164457	7/17/2025		70.00 541-56-00	RED GREASE	
164623	7/23/2025		23.00 541-52-00	REPLACE SPOUT	
164636	7/23/2025		36.99 541-52-00	CARLYLE	
0000203044	8/4/2025	00-0001072	AMERICAN TRAFFIC SAFETY MATERIALS, INC.	\$ 643.50	Auto
98856	7/10/2025		643.50 541-52-00	ENGINEER GRADE RED VINYL FOR ROAD SIG	
0000203045	8/4/2025	00-0001904	SIDNEY LEE WELDING SUPPLY INC	\$ 35.00	Auto
0010213416	6/30/2025		35.00 541-46-00	CYLINDER RENTAL	
0000203046	8/4/2025	00-0001956	SECUR-TEL SECURITY	\$ 58.50	Auto
22969	6/11/2025		58.50 541-62-00	MONITORING JULY, AUG, SEPT 2025	
0000203047	8/4/2025	00-0002002	BIELLING'S TIRE	\$ 3,120.00	Auto
0215643	7/18/2025		542.00 541-46-JD	TRACTOR TIRES	
0215647	7/18/2025		557.00 541-46-JD	TRACTOR TIRES	
0215688	7/22/2025		1,587.00 541-46-MT	TRACTOR TIRES	
0215689	7/22/2025		434.00 541-46-2C	TRUCK #3 TIRES	
0000203048	8/4/2025	00-0003031	CRYSTAL SPRINGS	\$ 175.87	Auto
14475087 070625	7/6/2025		175.87 541-52-00	PURIFIED WATER, COOLER RENTAL	
0000203049	8/4/2025	00-0003052	CAR QUEST AUTO PARTS	\$ 11.26	Auto
16002-793	7/3/2025		11.26 541-46-8A	SPINDLE NUT RETAINER EZ-LUBE	
0000203050	8/4/2025	00-0006002	FLORIDA POWER & LIGHT COMPANY	\$ 34.69	Auto
17831/25-10	7/17/2025		34.69 541-43-A2	TRAFFIC SIGNAL 100-A/121	
0000203051	8/4/2025	00-0007016	G.P. MATERIALS, INC.	\$ 397.50	Auto
7344	7/19/2025		397.50 541-53-P2	FDOT LIMEROCK (1ST LOAD)	
0000203052	8/4/2025	00-0008003	HO-BO TRACTOR COMPANY, INC.	\$ 832.54	Auto
P82716	7/7/2025		405.04 541-46-00	BLADES	
P82720	7/7/2025		267.00 541-46-00	BLADE BOLT KIT	
P82728	7/8/2025		117.80 541-46-5E	HEX HUBNUT & WHEEL BLT	
P83077	7/24/2025		42.70 541-46-JD	ADDITIVE FUEL	
0000203053	8/4/2025	00-0010004	JACKSON BUILDING SUPPLY	\$ 69.83	Auto
21325963	7/23/2025		69.83 541-53-P2	CONCRETE MIX X10	
0000203054	8/4/2025	00-0010038	FRED JACKSON	\$ 50.00	Auto
250529	7/10/2025		50.00 541-54-00	BOOT REIMBURSEMENT	
0000203055	8/4/2025	00-0012001	LAKE BUTLER FARM CENTER	\$ 60.67	Auto
1157141	7/8/2025		9.53 541-52-00	HARDWARE	

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

TRANSPORTATION TRUST FUND (TTF)

Bank Code: C DLP BANK

Check Number/	Check Date	Vendor Number	Name	GL Account	Check Amount	Check Type
Invoice Number	Invoice Date				Comment	
1157159	7/8/2025		5.58	541-46-5I	HARDWARE	
1157422	7/11/2025		27.99	541-52-00	BOX FAN	
1157772	7/15/2025		15.57	541-52-00	THRD SEAL, HOSE BIBB & ADPTR	
1158024	7/17/2025		2.00	541-52-00	HARDWARE	
0000203056	8/4/2025	00-0014007	NEXTRAN TRUCK CENTER		\$ 134.25	Auto
04P200910	7/14/2025		134.25	541-56-00	DEF;PRIM 2.5 GALLON X15	
0000203057	8/4/2025	00-0014020	NEW RIVER TECHNOLOGY, LLC		\$ 661.00	Auto
2730	7/7/2025		661.00	541-52-00	MONTHLY MANAGED SERVICES, FIREWALL	
0000203058	8/4/2025	00-0015004	THE OFFICE SHOP		\$ 86.95	Auto
POSR15698	6/30/2025		86.95	541-52-00	MAINTENANCE CONTRACT FOR COPIER	
0000203059	8/4/2025	00-0016027	PRECISION CHEMICALS		\$ 19.99	Auto
5878	7/23/2025		19.99	541-52-00	VIPER 1 GALLON	
0000203060	8/4/2025	00-0018002	RING INVESTMENTS, LLC		\$ 18,870.53	Auto
49020	4/14/2025		18,870.53	541-64-01	CATERPILLAR 120 YSTICK MOTOR GRADER	
0000203061	8/4/2025	00-0019061	SOUTHLAND WOOD & STEEL		\$ 507.88	Auto
2740	7/12/2025		507.88	541-52-00	CUSTOM SIGN, T-STAND & FIBERGLASS RIBS	
0000203062	8/4/2025	00-0021011	UNION POWER EQUIPMENT, INC.		\$ 393.79	Auto
61698	7/17/2025		41.94	541-52-00	BOLT WASHER ASSEMBLY	
61699	7/17/2025		58.50	541-56-00	CYCLE OIL	
61731	7/23/2025		218.60	541-56-00	ENGINE OIL & CHAIN OIL	
61737	7/24/2025		74.75	541-52-00	TRIMMER LINE SPOOL	
0000203063	8/4/2025	00-0023009	WILSON HEAT & AIR, INC.		\$ 811.00	Auto
I-33157-1	7/15/2025		811.00	541-46-00	SERVICE CALL, REPLACED BLOWER MOTOR	
0000203064	8/4/2025	00-CRYSTAL	CRYSTAL TRACTOR & EQUIPMENT		\$ 866.80	Auto
P33933	7/7/2025		694.64	541-46-5I	CUTTER BLADE & BLADE BOLT KIT	
P34276	7/14/2025		172.16	541-46-5J	COMER LINING RI D2D & RING	
0000203065	8/4/2025	00-FUS	FUSIONSITE FLORIDA LLC		\$ 690.00	Auto
I135145	7/18/2025		690.00	541-52-00	COLLECTION SITE PORTABLE TOILETS	
0000203066	8/4/2025	00-O'	O'REILLY AUTOMOTIVE STORES, INC		\$ 24.95	Auto
6724-134077	7/15/2025		24.95	541-46-00	TENSIONRPLY	
PR25-07	8/4/2025	01-0021001	UNION CO BOCC		\$ 44,854.49	Manual
PR 2025-07-17	7/17/2025		2,265.60	541-11-00	PR 2025-07-17	
PR 2025-07-17	7/17/2025		15,211.84	541-12-00	PR 2025-07-17	
PR 2025-07-17	7/17/2025		381.84	541-14-00	PR 2025-07-17	
PR 2025-07-17	7/17/2025		1,320.36	541-21-00	PR 2025-07-17	
PR 2025-07-17	7/17/2025		2,371.12	541-22-00	PR 2025-07-17	
PR 2025-07-17	7/17/2025		-0.05	541-12-00	PR 2025-07-17	
PR25-07-31	7/31/2025		2,265.60	541-11-00	PR25-07-31	
PR25-07-31	7/31/2025		16,263.20	541-12-00	PR25-07-31	
PR25-07-31	7/31/2025		761.27	541-14-00	PR25-07-31	
PR25-07-31	7/31/2025		1,475.68	541-21-00	PR25-07-31	
PR25-07-31	7/31/2025		2,538.03	541-22-00	PR25-07-31	
Report Total:					\$ 74,016.24	

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

UNION CO BOARD OF COUNTY COMMISSIONERS (UGF)

Bank Code: C DLP BANK

Check Number/	Check Date	Vendor Number	Name	Check Amount	Check Type
Invoice Number	Invoice Date	GL Account	Comment		
0000205258	8/4/2025	00-0002005	BRADFORD CO TELEGRAPH, INC.	\$ 232.00	Auto
SE25-01 DAVIS	7/9/2025	232.00	513-49-05	LEGAL AD HEARING SE25-01 DAVIS 7/21	
0000205259	8/4/2025	00-0003024	CRYSTAL SPRINGS WATER CO.	\$ 31.97	Auto
1642363070425	7/4/2025	31.97	513-52-00	BOTTLED WATER FOR KING MEM BLDG	
0000205260	8/4/2025	00-0003046	CONSTANGY, BROOKS & SMITH, LLP	\$ 167.50	Auto
57543067	6/25/2025	167.50	513-32-00	PREPARE AUDIT REPOSE LETTER	
0000205261	8/4/2025	00-0003070	VICKIE L. BARRON	\$ 98.96	Auto
JULY 2025	7/29/2025	98.96	712-51-00	PHONE REIMBURSEMENT	
0000205262	8/4/2025	00-0004049	BRUCE D. DUKES	\$ 80,882.75	Auto
AUG 25 APPROPRIATI	8/1/2025	97,165.75	513-99-02	AUG 25 APPROPRIATION	
PA 9/30/24	9/30/2024	-32,566.00	513-99-02	PA 9/30/24	
0000205263	8/4/2025	00-0005001	LISA B. JOHNSON	\$ 20,575.60	Auto
AUG 25 APPROPRIATI	8/1/2025	20,409.41	513-99-01	AUG 25 APPROPRIATION	
AUG 25 APPROPRIATI	8/1/2025	166.19	513-98-00	AUG 25 APPROPRIATION	
0000205264	8/4/2025	00-0006050	BARBARA L. FISCHER	\$ 473.00	Auto
AUG 25 APPROPRIATI	8/1/2025	473.00	553-34-00	AUG 25 APPROPRIATION	
0000205265	8/4/2025	00-0006052	FCPA	\$ 600.00	Auto
71825-1	7/18/2025	600.00	527-55-02	FORENSIC EVALS FOR JUNE 2025	
0000205266	8/4/2025	00-0006082	FLORIDA RURAL ECONOMIC DEVELOPMENT ASSOCIATION	\$ 900.00	Auto
M9JDJK7FKF	7/2/2025	450.00	513-55-00	FREDA RURAL SUMMIT REG - JW & MC	
M9JDJK7FKF	7/2/2025	450.00	513-55-01	FREDA RURAL SUMMIT REG - JW & MC	
0000205267	8/4/2025	00-0013065	MELISSA MCNEAL	\$ 36.00	Auto
FAC ANNUAL CONF 25	6/30/2025	36.00	511-40-00	TRAVEL & MEALS - FAC ANNUAL CONF 2025	
0000205268	8/4/2025	00-0013072	MATTHEWS ELECTRIC, LLC	\$ 543.14	Auto
358	7/21/2025	543.14	712-52-00	NEW DUPLEX FOR WATER COOLER, CONVER	
0000205269	8/4/2025	00-0014002	NORTH CENTRAL FLORIDA REGIONAL	\$ 875.00	Auto
9660	6/30/2025	875.00	515-34-00	COMPREHENSIVE PLANNING SERVICES	
0000205270	8/4/2025	00-0014050	NEW RIVER TECHNOLOGY	\$ 906.59	Auto
INV-2712	7/7/2025	405.40	513-31-00	EMAIL SERVICES & 365 EXCHANGE	
INV-2724	7/7/2025	501.19	513-31-00	IT SERVICES - BOCC	
0000205271	8/4/2025	00-0015003	THE OFFICE SHOP OF STARKE, LLC	\$ 35.00	Auto
POSR15690(S05)	6/30/2025	35.00	513-34-00	COPIER SERVICES	
0000205272	8/4/2025	00-0015009	DEBORAH K. OSBORNE	\$ 39,201.55	Auto
AUG 25 APPROPRIATI	8/1/2025	39,201.55	513-99-03	AUG 25 APPROPRIATION	
0000205273	8/4/2025	00-0016001	KELLIE HENDRICKS RHOADES	\$ 97,165.75	Auto
AUG 25 APPROPRIATI	8/1/2025	97,165.75	513-99-00	AUG 25 APPROPRIATION	
0000205274	8/4/2025	00-0019004	SPIRES IGA, INC.	\$ 114.19	Auto
SPIRES071125	7/11/2025	114.19	513-51-01	EMPLOYEE APP FOOD	
0000205275	8/4/2025	00-0019132	SECUR-TEL, INC.	\$ 520.00	Auto
23035	7/7/2025	520.00	712-52-00	HD CAMERA	
0000205276	8/4/2025	00-0020057	TD CARD SERVICES	\$ 1,491.25	Auto
114-0556479-6760203	7/8/2025	389.77	513-51-01	EMPLOYEE APP - AMAZON	
114-6380227-6096248	7/10/2025	39.99	513-64-00	HEADSET FOR NEW PHONES - DC	
1146380224609248	7/10/2025	89.99	513-64-00	HEADSET NEW PHONES - CM - AMAZON	
465190610314948	7/9/2025	118.00	513-51-01	EMPLOYEE APP - WALMART	
HILTON CONV CENT C	6/27/2025	432.00	513-40-00	LODGING FAC CONF JW & MM	
HILTON CONV CENT C	6/27/2025	322.50	511-40-00	LODGING FAC CONF JW & MM	
INV00813299	7/11/2025	99.00	513-51-02	JAZZHR	

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

UNION CO BOARD OF COUNTY COMMISSIONERS (UGF)

Bank Code: C DLP BANK

Check Number/	Check Date	Vendor Number	Name	Check Amount	Check Type
Invoice Number	Invoice Date	GL Account	Comment		
0000205277	8/4/2025	00-0020088	THERIAQUE & SPAIN	\$ 600.00	Auto
19502	6/26/2025	330.00	513-32-00	LEGAL SERVICES - COUNTY AUDIT	
19581	7/16/2025	270.00	514-31-00	LEGAL SERVICES - DELBERT SMITH RV PARK	
0000205278	8/4/2025	00-0020101	TERRY'S FLORALS, LLC	\$ 64.95	Auto
2716	6/30/2025	64.95	513-49-02	PEACE LILY/MAC JOHNS	
0000205279	8/4/2025	00-0021035	UNION POWER EQUIPMENT, INC.	\$ 1,939.05	Auto
61402	5/23/2025	74.75	513-46-00	TRIMMER LINE SPOOL	
61648	7/9/2025	389.59	513-46-00	GASKET, SWITCH, BELT, RINGSET PISTON	
61652	7/9/2025	87.99	513-46-00	BELT MTD954043259	
61726	7/22/2025	1,311.97	513-64-00	4 NEW WEED EATERS	
61736	7/24/2025	74.75	513-46-00	TRIMMER LINE SPOOL	
0000205280	8/4/2025	00-0023026	W W GAY MECHANICAL CONTRACTOR	\$ 700.00	Auto
983017669	7/11/2025	700.00	712-46-00	LABOR - CH RESTROOM AC DRAIN LINE	
0000205281	8/4/2025	00-0023046	WINDSTREAM	\$ 2,561.97	Auto
1026/25-10	7/14/2025	1,744.38	513-41-00	CENTRIX & BCC	
2621/25-10	7/14/2025	356.33	605-41-00	JUDGES OFFICE 2621 ACCT # 060396241	
3711/25-10	7/14/2025	461.26	713-41-00	CLERKS OFFICE	
0000205282	8/4/2025	00-0023051	RUSSELL A. WADE III, P.A.	\$ 2,226.00	Auto
25 JUNE 1-30	6/30/2025	2,226.00	514-31-00	PROFESSIONAL CHARGES 25 JUNE 1-30	
0000205283	8/4/2025	00-0023065	JAMES WILLIAMS	\$ 382.00	Auto
FAC ANNUAL CONF 25	6/30/2025	382.00	513-40-00	TRAVEL & MEALS - FAC ANNUAL CONF 2025	
0000205284	8/4/2025	02-0007040	GILCHRIST CO. BOARD OF CO. COM	\$ 249.99	Auto
4TH QTR FY25	9/30/2025	249.99	601-34-03	PER SE COORDINATOR MILEAGE REIMB	
0000205285	8/4/2025	02-0023001	UNION COUNTY SHERIFF'S OFFICE	\$ 395,487.00	Auto
AUG 25 APPROPRIATI	8/1/2025	281,849.00	521-99-00	AUG 25 APPROPRIATION	
LESA FUNDING BA 7/2	7/31/2025	16,472.25	521-99-01	LESA FUNDING BA 7/25	
LESA FUNDING JULY 2	7/31/2025	97,165.75	521-99-01	LESA FUNDING JULY 25	
911 FEMA	8/4/2025	01-0021053	UNION COUNTY E-911	\$ 5,121.00	Manual
HURRICAN IDAILA	5/31/2025	5,121.00	131-99-00	FEMA REIMB IDAILA	
EMG FEMA	8/4/2025	01-0021040	UNION CO EMERGENCY MANAGEMENT	\$ 4,771.82	Manual
HURRICANE IDAILA EI	5/31/2025	4,771.82	131-99-00	HURRICANE IDAILA	
EMS FEMA	8/4/2025	01-0005003	EMERGENCY MEDICAL SERVICES	\$ 12,596.97	Manual
HURRICANE IDAILA	5/31/2025	12,596.97	131-99-00	HURRICANE IDAILA	
FLGIT72225	7/22/2025	01-0021096	UC GRANT & RESERVES	\$ 642,386.06	Manual
CKFLGIT7222501	7/22/2025	642,386.06	104-00-00	MONIES HELD IN POOLED INVESTMENT	
INS25-07	8/4/2025	01-0021003	UC INSURANCE FUND	\$ 82,164.31	Manual
2025-06 PREM	5/31/2025	21,526.05	521-23-00	2025-06 PREM	
2025-06 PREM	5/31/2025	73.29	521-23-01	2025-06 PREM	
PR 2025-07-03	7/3/2025	55,925.04	202-07-00	PR 2025-07-03	
PR 2025-07-17	7/17/2025	4,655.51	202-07-00	PR 2025-07-17	
PR 25-04-25 -2	4/24/2025	-15.58	202-07-00	TO CORRECT ENCODING ERROR FROM WOR	
NW25-07-31	7/29/2025	00-0014059	NATIONWIDE RETIREMENT SOLUTION	\$ 357.00	Manual
PR25-07-31	7/31/2025	357.00	202-24-00	PR25-07-31	
SDU25-7-31	7/29/2025	02-0019003	SDU-STATE DISBURSEMENT UNIT	\$ 403.31	Manual
PR25-07-31	7/31/2025	5.00	513-49-02	PR25-07-31	
PR25-07-31	7/31/2025	398.31	202-17-00	PR25-07-31	
SML FEMA	8/4/2025	01-0021101	UNION COUNTY SMALL FUNDS	\$ 466.87	Manual
HURRICANE IDAILA CI	5/31/2025	390.47	131-99-00	HURRICANE IDAILA	

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

UNION CO BOARD OF COUNTY COMMISSIONERS (UGF)

Bank Code: C DLP BANK

Check Number/	Check Date	Vendor Number	Name		Check Amount	Check Type
Invoice Number	Invoice Date		GL Account	Comment		
<i>HURRICANE IDAILA P</i>	<i>5/31/2025</i>		<i>76.40</i>	<i>131-99-00</i>	<i>HURRICANE IDAILA</i>	
TREA25-7-3	7/29/2025	02-0005010	EFT - UNITED STATES TREASURY		\$ 28,985.48	Manual
<i>PR25-07-31</i>	<i>7/31/2025</i>		<i>15,701.10</i>	<i>202-04-00</i>	<i>PR25-07-31</i>	
<i>PR25-07-31</i>	<i>7/31/2025</i>		<i>3,672.08</i>	<i>202-05-00</i>	<i>PR25-07-31</i>	
<i>PR25-07-31</i>	<i>7/31/2025</i>		<i>9,612.30</i>	<i>202-06-00</i>	<i>PR25-07-31</i>	
TTF FEMA	8/4/2025	01-0021017	UC TRANSPORTATION TRUST FUND		\$ 5,931.14	Manual
<i>HURRICANE IDAILA</i>	<i>5/31/2025</i>		<i>5,931.14</i>	<i>131-99-00</i>	<i>HURRICANE IDAILA</i>	
USW FEMA	8/4/2025	01-0021031	UNION CO SOLID WASTE		\$ 1,442.40	Manual
<i>HURRICANE IDAILA</i>	<i>5/31/2025</i>		<i>1,442.40</i>	<i>131-99-00</i>	<i>HURRICANE IDAILA</i>	
Report Total:					<u>\$ 1,417,404.57</u>	

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

UNION COUNTY SOLID WASTE DEPARTMENT (USW)

Bank Code: C DLP BANK

Check Number/	Check Date	Vendor Number	Name	GL Account	Check Amount	Check Type
Invoice Number	Invoice Date				Comment	
0000001170	8/4/2025	00-0001001	AT&T		\$ 807.63	Auto
7481-06-17-25	6/17/2025		403.84	534-41-C3-1	PHONE @ CC3 7481	
7481-07-17-25	7/17/2025		403.79	534-41-C3-1	PHONE @ CC3 7481	
0000001171	8/4/2025	00-0001010	AUTOMOTIVE PARTS & EQUIPMENT		\$ 105.39	Auto
164575	7/22/2025		48.41	534-52-00-1	TRPSTRP & GLOVES	
164767	7/28/2025		56.98	534-52-00-1	MICROFIBER TOWEL & SOCKET	
0000001172	8/4/2025	00-0001058	JONES EDMUNDS		\$ 2,863.27	Auto
0256642	7/23/2025		2,863.27	534-66-00-1	LANDFILL MONITORING	
0000001173	8/4/2025	00-0002002	BIELLING'S TIRE		\$ 1,489.00	Auto
0215726	7/25/2025		1,489.00	534-46-00-1	ROLL OFF TIRES	
0000001174	8/4/2025	00-0010016	JONES WELDING & INDUSTRIAL SUPPLIES, INC.		\$ 389.60	Auto
JG25356	7/1/2025		156.60	534-46-00-1	GRAIN DRIVER KEYSTONE, SHEET METAL	
JG26008	7/16/2025		233.00	534-52-00-1	OXYGEN, ACETYLENE, ARGON & GLOVES	
0000001175	8/4/2025	00-0012001	LAKE BUTLER FARM CENTER		\$ 101.02	Auto
1156623	7/1/2025		3.99	534-52-00-1	KEY COPY	
1157195	7/25/2025		6.06	534-52-00-1	HARDWARE	
1158608	7/24/2025		90.97	534-52-00-1	BRASS SHUTOFF, WATER HOSE & TRASHCAN	
0000001176	8/4/2025	00-0013008	MACCLENNY VETERINARY CLINIC		\$ 70.00	Auto
345430	7/9/2025		40.00	562-58-00-2	RABIES	
345771	7/21/2025		30.00	562-58-00-2	RABIES	
0000001177	8/4/2025	00-0013021	MIRACLE AUTOMOTIVE & TRUCK		\$ 6,253.14	Auto
25-17874	6/19/2025		1,135.41	534-46-00-1	ROLL OFF #2 REPAIRS	
1001166	2/18/2025		218.76	534-46-00-1	ROLL OFF #2 MAINTENANCE	
1004100	2/21/2025		461.32	534-46-00-1	ROLL OFF # 2 MAINTENANCE	
IM007430	7/15/2025		4,437.65	534-46-00-1	ROLL OFF #1 REPAIRS	
0000001178	8/4/2025	00-0014011	NEXTRAN TRUCK CENTER		\$ 6,839.52	Auto
04P201710.02	7/25/2025		846.36	534-46-00-1	REAR FENDER MOUNT, LIGHT BOX & FENDEF	
04P201830	7/25/2025		134.25	534-52-00-1	DEF; PRIM 2.5 GALLON X15	
04W33789	6/10/2025		664.60	534-46-00-1	ROLL OFF #3 MAINTENANCE	
04W33875	6/23/2025		5,194.31	534-46-00-1	ROLL OFF #2 REPAIRS	
0000001179	8/4/2025	00-0014024	NEW RIVER TECHNOLOGY		\$ 1,125.00	Auto
2730	7/7/2025		1,125.00	534-52-00-1	NEW MONITORS, BATTERY BACKUP, HARD DF	
0000001180	8/4/2025	00-0015007	OIL RECOVERY, INC		\$ 225.00	Auto
59442	7/1/2025		75.00	534-52-00-1	CC1 OIL DISPOSAL	
59443	7/1/2025		75.00	534-52-00-1	CC4 OIL DISPOSAL	
59444	7/1/2025		75.00	534-52-00-1	CC3 OIL DISPOSAL	
0000001181	8/4/2025	00-0019042	STAPLES ADVANTAGE		\$ 417.64	Auto
6036744663	7/11/2025		133.74	534-52-00-1	LIQUID GAIN	
60377005932	7/15/2025		283.90	534-52-00-1	ODOBAN 5 GAL	
0000001182	8/4/2025	00-0019044	SECUR-TEL SECURITY SYSTEMS		\$ 58.50	Auto
22993	6/11/2025		58.50	534-52-00-1	MONTHLY SVC JULY, AUG, SEPT 2025	
0000001183	8/4/2025	00-0023006	WINDSTREAM		\$ 476.88	Auto
1556-06-27	6/27/2025		41.51	534-41-C5-1	PHONE @ CC5 1556	
2180/25-10	7/14/2025		383.14	534-41-A1-1	SHOP 2180 ACCT # 060397505	
4267/25-10	7/14/2025		17.41	534-41-C4-1	CC#4 4267 ACCT # 060397513	
4268/25-10	7/14/2025		17.41	534-41-C2-1	CC@3 4268 ACCT # 060397514	
4269/25-10	7/14/2025		17.41	534-41-C1-1	CC #1 4269 ACCT # 060397515	
FLGIT72225	7/22/2025	01-0021096	UC GRANTS & RESERVES		\$ 95,456.42	Manual

Payment History Report
Sorted By Check Number
Activity From: 7/22/2025 to 8/4/2025

UNION COUNTY SOLID WASTE DEPARTMENT (USW)

Bank Code: C DLP BANK

Check Number/	Check Date	Vendor Number	Name	Check Amount	Check Type
Invoice Number	Invoice Date		GL Account	Comment	
CKFLGIT7222501	7/22/2025		95,456.42	104-00-00-1	MONIES HELD IN POOLED INVESTMENT
PR25-07	8/4/2025	01-0021001	UC BOARD OF COMMISSIONERS*****	\$ 45,502.81	Manual
PR 2025-07-17	7/17/2025		1,813.13	534-11-00-1	PR 2025-07-17
PR 2025-07-17	7/17/2025		13,852.94	534-12-00-1	PR 2025-07-17
PR 2025-07-17	7/17/2025		1,670.50	534-13-00-1	PR 2025-07-17
PR 2025-07-17	7/17/2025		999.40	534-14-00-1	PR 2025-07-17
PR 2025-07-17	7/17/2025		50.63	562-14-00-2	PR 2025-07-17
PR 2025-07-17	7/17/2025		444.47	562-11-00-3	PR 2025-07-17
PR 2025-07-17	7/17/2025		1,364.87	534-21-00-1	PR 2025-07-17
PR 2025-07-17	7/17/2025		3.79	562-21-00-2	PR 2025-07-17
PR 2025-07-17	7/17/2025		32.84	562-21-00-3	PR 2025-07-17
PR 2025-07-17	7/17/2025		2,379.50	534-22-00-1	PR 2025-07-17
PR 2025-07-17	7/17/2025		7.11	562-22-00-2	PR 2025-07-17
PR 2025-07-17	7/17/2025		62.36	562-22-00-3	PR 2025-07-17
PR 2025-07-17	7/17/2025		-0.04	534-12-00-1	PR 2025-07-17
PR25-07-31	7/31/2025		1,813.13	534-11-00-1	PR25-07-31
PR25-07-31	7/31/2025		13,597.70	534-12-00-1	PR25-07-31
PR25-07-31	7/31/2025		2,327.00	534-13-00-1	PR25-07-31
PR25-07-31	7/31/2025		810.09	534-14-00-1	PR25-07-31
PR25-07-31	7/31/2025		46.88	562-14-00-2	PR25-07-31
PR25-07-31	7/31/2025		444.47	562-11-00-3	PR25-07-31
PR25-07-31	7/31/2025		1,418.88	534-21-00-1	PR25-07-31
PR25-07-31	7/31/2025		3.60	562-21-00-2	PR25-07-31
PR25-07-31	7/31/2025		34.00	562-21-00-3	PR25-07-31
PR25-07-31	7/31/2025		2,256.62	534-22-00-1	PR25-07-31
PR25-07-31	7/31/2025		6.58	562-22-00-2	PR25-07-31
PR25-07-31	7/31/2025		62.36	562-22-00-3	PR25-07-31
Report Total:				\$ 162,180.82	

PURCHASE ORDER AGREEMENT

This Agreement is entered into between Lutheran Services Florida, Inc., d/b/a LSF Health Systems (a Florida non-profit corporation), hereinafter referred to as the "LSF" and/or the "Managing Entity" and **Union County Board of County Commissioners** herein after referred to as the "Contractor." The Contractor and LSF may be referred to herein individually as a "party" or collectively as "the parties." LSF and the Contractor agrees as follows:

Effective and Ending Dates. The terms of this Agreement shall be effective July 1, 2025, and shall continue through June 30, 2026.

This document provides direction and guidance for administration, implementation, and management of the **Florida Opioid Allocation and Statewide Response Agreement (Opioid Settlement) – Non-Qualified County (NQC) Funds** in the following County(ies): Union.

Services to be Provided. This scope of work is for the Contractor to provide a **community paramedicine program in Union County. The program targets individuals with opioid use disorder and connects them to resources in the community. This includes identification, evaluation, and assistance in identifying rehabilitation facilities/resources, as well as transportation to those facilities.**

Section 1. Financial Consideration

1.1. Award Amount

Union County Board of County Commissioners has been awarded an amount not to exceed LSF approved Exhibit C and D - Projected Operating and Capital Budget, per county, if multiple counties are listed, for costs associated with administration of the services at its agency. Funding will be provided through OCA MSONQ - ME Opioid TF Non-Qualified Counties. This award is subject to availability of funds from the Department of Children and Families (DCF).

1.2. Budget

1.2.1 The Contractor shall submit a detailed, line-item budget to LSF identifying for each line the allowable items for the program, the projected or budgeted amount for each line item and narrative supporting the reasonableness and necessity of any unusual items.

1.2.1.1 Submissions must be separated by the counties listed in this Agreement, if multiple counties are listed.

1.2.2 All budgets and revisions thereto are subject to approval by LSF.

1.2.3 The Contractor may revise a budget by submitting same to the assigned Network Manager via electronic mail for approval.

1.2.4 Approved budgets shall be maintained in the official agreement file.

1.2.5 Modifications to the approved budget may not be effective retroactively.

1.3. Payment

This award shall be paid using a fixed rate methodology, subject to the availability of funds. The Contractor shall comply with the terms of such methodology, including quarterly fiscal reconciliation reports data reporting, as outlined below.

1.3.1 The total monthly payment amount shall be an equal proportion of the approved budget amount according to the agreement period and shall be included as a line item in the Contractor's Invoice with the following documentation provided as support.

1.3.1.1 The Contractor shall submit the **Exhibit O - Expenditure Reconciliation Report** using the form designated by LSF Health Systems, available on the website: <https://www.lsfhealthsystems.org/resources/#contractdocument>, which will outline expenses incurred by the Contractor. This report shall be submitted on or before the 8th of the month following the end of each quarter. The Managing Entity reserves the right to request monthly **Exhibit O - Expenditure Reconciliation reports**, depending on the Contractor's rate of spending, to perform an invoice reconciliation at any point within the fiscal year.

a. Submissions must be separated by the counties listed in this Agreement, if multiple counties are listed.

1.3.1.2 All funds paid under the fixed rate methodology must be accounted for through this reconciliation process and any funding not accounted for is subject to repayment to LSF Health Systems.

1.3.1.3 LSF Health Systems reserves the right to request substantiating documentation to support the line items submitted by the Contractor in the **Exhibit O - Expenditure Reconciliation Report**.

1.3.1.4 All reports as required in Section 2.3 Required Reporting.

1.3.2 Reimbursement shall be made for actual, allowable expenditures within the limits of the latest version of the approved budget at the time that the invoice is processed.

1.3.3 The Contractor agrees that it will account for all payments from LSF according to generally accepted standard accounting principles.

Section 2. Program Administration

2.1. The Opioid Settlement program will be administered according to approved DCF Children and Families Operating Procedure (CFOP) for the Opioid Settlement and any other approved DCF document reflecting the program requirements, or latest version thereof, which can be found at following link using the applicable fiscal year: <https://www.myflfamilies.com/services/substance-abuse-and-mental-health/samh-providers/managing-entities>.

2.2. Program requirements are as follows:

2.2.1 As reflected on the approved Schedule B of the Florida Opioid Allocation and Statewide Response Agreement, or latest version thereof.

2.2.2 As reflected on the approved DCF CFOP for the Opioid Settlement and any other approved DCF document reflecting the program requirements, or latest version thereof, which can be found at following link using the applicable fiscal year: <https://www.myflfamilies.com/services/substance-abuse-and-mental-health/samh-providers/managing-entities>.

2.2.3 Service Tasks

2.2.3.1 The Contractor shall perform all tasks reflected on the **LSF approved Exhibit G – Submission of Information**.

- a. Submissions must be separated by the counties listed in this Agreement, if multiple counties are listed.

2.3. Required Reporting

2.3.1 **Expenditure Reconciliation Report:** This report shall be submitted on or before the 8th of the month following the end of each quarter. However, the Managing Entity reserves the right to request monthly Expenditure Reconciliation Reports, depending on the Contractor's rate of spending, to perform an invoice reconciliation at any point within the fiscal year.

2.3.1.1 Submissions must be separated by the counties listed in this Agreement, if multiple counties are listed.

2.3.2 The Contractor shall submit service data to LSF as required by LSF and DCF and shall submit the data electronically by the 8th of each month for the previous month's services, as specified by LSF and DCF and in accordance with the DCF Data System Guidelines.

2.3.2.1 Submissions must be separated by the counties listed in this Agreement, if multiple counties are listed.

2.3.3 Ad Hoc and additional reporting, at any frequency, may be required as determined necessary by LSF Health Systems or the Department of Children and Families.

2.3.3.1 Submissions must be separated by the counties listed in this Agreement, if multiple counties are listed.

2.3.4 Receipt of Opioid Settlement funds is an express acknowledgement of the obligation to report data on services funded by the Settlement. Recipients shall provide data to the Department of Children and Families (Department) through the Opioid Data Management System (ODMS) as prescribed by the Department. Opioid Settlement funding is contingent upon satisfactory data reporting.

2.3.4.1 Submissions must be separated by the counties listed in this Agreement, if multiple counties are listed.

Section 3. Documentation

3.1. Cost

3.1.1 Professional Services Rendered: Invoices for professional services must include a general statement of the services provided, the time period covered by the invoice, the hourly rate, the number of hours worked, and the total payment required. Evidence of payment of the invoice must also be included.

3.1.2 Postage and Reproduction Expenses: Outside Contractor's purchases must include invoices with evidence of payments made or receipts with itemization. In-house postage and reproduction must be supported by usage logs or similar reports.

Travel: Travel reimbursements shall be made in accordance with the Department's CFOP 40-1, § 287.058(1)(b), Fla. Stat. and §112.061, Fla. Stat. Receipts for direct expenses (e.g., airfare, car rental, parking, tolls) shall be provided in support of such expenses. For mileage reimbursements, submissions shall include date(s) of travel, amount of mileage (support of mileage may include either map routes or odometer readings), purpose of travel, origin, and destination.

3.1.3 General Expenses not otherwise specified: Receipts or invoices with evidence of payment should be provided.

3.2. Services Rendered

3.2.1. The submission of service data in relation to the final invoice for payment shall be submitted to the Managing Entity no more than forty-five (45) days after the agreement ends or is terminated. If the Contractor fails to do so, all rights to payment are forfeited and the Managing Entity shall not honor any requests submitted after the aforesaid time period. Any payment due under the terms of this agreement may be withheld until performance of services and all reports due from the Contractor, and necessary adjustments thereto, have been approved by the Managing Entity.

3.2.2. Appropriate documentation shall be maintained in accordance with the applicable parameters established by statute, regulation, and code. Audit documentation shall be in accordance with 65E-14.021, F.A.C. The Contractor shall make such information available to LSF upon request and during monitoring of the program administration.

3.2.2.1. Staff timecards and a log of the date, time, number of participants, and the staff member conducting the class shall be the substantiating documentation for services and invoice back-up data.

3.2.3. The Contractor shall notify the Managing Entity's Network Manager, in writing, at least ten (10) calendar days prior to any changes in services and/or locations where services are being provided. Changes must continue to meet the service needs of consumers without excessive time and travel requirements.

Section 4. Miscellaneous

4.1. Employment Screening

4.1.1. For non-Emergency Medical Services (EMS): The Contractor shall ensure that all staff utilized by the Contractor and its subcontractors, and funded through this agreement as reflected in Sections

1.1 and 1.2, are of good moral character and meet the Level 2 Employment screening standards specified in § 394.4572, 397.4073, 408.809, 435.04, 110.1127 and §39.001(2), Fla. Stat., as a condition of initial and continued employment that shall include, but not be limited to:

- i. Employment history check,
- ii. Fingerprinting for all criminal record checks,
- iii. Statewide criminal and juvenile delinquency records checks through the Florida Department of Law Enforcement (FDLE),
- iv. Federal criminal records check from the Federal Bureau of Investigations via the FDLE, and
- v. Security background investigation, which may include local criminal records checks through local law enforcement agencies.
- vi. Attestation by each employee, subject to penalty, to meeting the requirements for qualifying for employment pursuant to chapter 435 and agreeing to inform the employer immediately if arrested for any of the disqualifying offenses while employed by the employer.

The Contractor shall sign the Florida Department of Children and Families Employment Screening Affidavit each State fiscal year (no two such affidavits shall be signed more than 13 months apart) for the term of the Agreement stating that all required staff have been screened or the Contractor is awaiting the results of the screening.

Additional guidance regarding background screening is incorporated herein by reference and may be located at: www.dcf.state.fl.us/programs/backgroundscreening/.

4.1.2. For Emergency Medical Services (EMS): The Contractor shall ensure that all staff utilized by the Contractor and its subcontractors are of good moral character and meet the DCF approved Employment screening standards, as a condition of initial and continued employment that shall include, but not be limited to:

- i. Attestation by each employee, subject to penalty, to meeting the requirements for qualifying for employment pursuant to chapter 435 and agreeing to inform the employer immediately if arrested for any of the disqualifying offenses while employed by the employer.

4.1.i.1. The Contractor shall present documentation showing successful background screening, upon request.

4.2. Representations

- 4.2.1. The Contractor shall furnish all services, labor, equipment, and materials necessary and as may be required in the performance of this Agreement and all work performed pursuant to this Agreement shall be done in a professional manner.
- 4.2.2. The Contractor hereby represents to LSF, with full knowledge that LSF is relying upon these representations when entering into this Agreement that the Contractor has the professional expertise, experience, and manpower, as well as holds the necessary certifications and licenses required to perform the services to be provided by the Contractor pursuant to the terms of this Agreement.
- 4.2.3. Prior to commencing to provide any services pursuant to this Agreement, Contractor shall provide copies of any and all business or professional licenses and certifications held by Contractor to LSF related to the performance of the services required by this Agreement, and they shall be incorporated and made a specific part of this Agreement, whether or not attached hereto. Upon renewal of such licenses or certifications during the term of this Agreement, Contractor shall provide evidence of such renewal or re-issuance to LSF.

4.3. Terms and Conditions

- 4.3.1. Any changes to dates and fees must be submitted and approved by LSF. If circumstances arise that will require additional services and time, the Contractor will notify LSF and obtain written agreement prior to undertaking such activities. The Contractor shall perform all services, tasks and provide deliverables, including the quarterly reconciliation, and reports, as specified in this agreement.

4.4. Health Insurance Portability and Accountability Act

- 4.4.1. The Contractor shall, where applicable, comply with the Health Insurance Portability and Accountability Act (42 U.S.C. 1320d.) as well as all regulations promulgated thereunder (45 CFR Parts 160, 162, and 164). In compliance with 45 CFR § 164.504(e), the Contractor shall comply with the provisions of Attachment IV to this agreement, governing the safeguarding, use and disclosure of Protected Health Information created, received, maintained, or transmitted by the Contractor or its subcontractors incidental to the Contractor's performance of this agreement.

4.4.2. Business Associates

- 4.4.2.1. Portability and Accountability Act of 1996, and Standards for the Privacy and Security of Individually Identifiable Health Information, found at 45 C.F.R. Parts 160, 162 and 164, 42 C.F.R. and as amended by the Health Information Technology for Economic and Clinical Health Act, (collectively, "HIPAA"), LSF is required to protect certain individually identifiable health or other information ("Protected Health Information" or "PHI" including, but not limited to, PHI in an electronic form). Should LSF request that the Contractor share or disclose Client PHI with any of the other LSF designated business associates, LSF shall provide the Contractor with written direction indicating the name of the entity, confirmation that such entity is a business associate with a written business associate agreement with LSF and the specific information and/or data LSF desires the Contractor to disclose to or share with such other business associate and the Parties agree to execute any such additional agreements as necessary to complete such activities. For

purposes of this Agreement, "Client" shall mean: any individual that is eligible to receive behavioral health services in accordance with DCF eligibility policies in the Service Area.

4.5. Insurance

- 4.5.1. As applicable, the Contractor shall maintain continuous adequate liability insurance coverage during the existence of this Agreement and any renewal(s) and extension(s) thereof. With the exception of a State agency or subdivision as defined by subsection 768.28(2), F.S., by execution of this Agreement, the Contractor accepts full responsibility for identifying and determining the type(s) and extent of liability insurance necessary to provide reasonable financial protections for the Contractor and the persons served to be served under this Agreement. The Managing Entity and its Network Service Contractors at all tiers are not covered by the State of Florida Risk Management Trust Fund for liability created by s. 284.30, F.S.
- 4.5.2. The Contractor acknowledges that, as an independent contractor, the Contractor, and its subcontractors, at all tiers are not covered by the State of Florida Risk Management Trust Fund for liability created by s. 284.30, F.S.
- 4.5.3. Upon the execution of this Agreement, the Contractor shall furnish the Managing Entity written verification supporting both the determination and existence of such insurance coverage and shall furnish verification of renewal or replacement thereof prior to the expiration or cancellation. The Managing Entity reserves the right to require additional insurance as specified in this Agreement.
- 4.5.4. The Contractor shall notify the Managing Entity within 30 calendar days if there is a modification to the terms of insurance including but not limited to, cancellation or modification to policy limits.
- 4.5.5. The Contractor shall obtain and provide proof to the Managing Entity and the Department of Comprehensive General Liability Insurance (broad form coverage), specifically including premises, fire, and legal liability to cover the Contractor and all its employees. The limits of the Contractor's coverage shall be no less than \$300,000 per occurrence with a minimal annual aggregate of no less than \$1,000,000.
- 4.5.6. If in the course of the performance of its duties under this Agreement any officer, employee, or agent of the Contractor operates a motor vehicle, the Managing Entity shall cause the Contractor, at all tiers, to obtain and provide proof to the ME and the Department of comprehensive automobile liability insurance coverage with limits no less than \$300,000 per occurrence with a minimal annual aggregate of no less than \$1,000,000.
- 4.5.7. If in the course of the performance of the duties of any Contractor, at all tiers, any officer, employee, or agent of the Contractor, provides any professional services or provides or administers any prescription drug or medication or controlled substance, the ME shall cause the Contractor, at all tiers, to obtain and provide proof to the ME and the Department of professional liability insurance coverage, including medical malpractice liability and errors and omissions coverage, to cover all employees and shall not exclude claims resulting from physical and sexual abuse. The limits of the coverage shall be no less than \$300,000 per occurrence with a minimal annual aggregate of no less than \$1,000,000.
- 4.5.8. The Managing Entity and the Department of Children and Families shall be exempt from, and in no way liable for, any sums of money that may represent a deductible or self-insured retention under any such insurance. The payment of any deductible on any policy shall be the sole responsibility of the Contractor purchasing the insurance.

- 4.5.9. All insurance policies, at all tiers, shall be provided by insurers licensed or eligible to do and that are doing business in the State of Florida. Each insurer must have a minimum rating of "A" by A. M. Best or an equivalent rating by a similar insurance rating firm and shall name the Managing Entity and the Department as an additional insured under the policy or policies. The Contractor shall use its best good faith efforts to cause the insurers issuing all such general, automobile, and professional liability insurance to use a policy form with additional insured provisions naming both DCF and the ME as additional insured or a form of additional insured endorsement acceptable to ME in the reasonable exercise of its judgment. The ME reserves the right to require additional insurance. The limits of coverage under each policy maintained by the Contractor do not limit the Contractor's liability and obligations under this agreement. Upon the ME's request, the Contractor shall furnish the ME with written verification supporting the existence of such insurance coverage.
- 4.5.10. All such insurance proposed by the Contractor shall be submitted to and confirmed by the assigned Primary Point of Contact no later than execution initially and thereafter, updates shall be provided annually which reflect no lapse in insurance coverage.

4.6. Indemnification

- 4.6.1. The Contractor shall be fully liable for the actions of its agents, employees, partners, or subcontractors and shall fully indemnify, defend and hold harmless LSF, State of Florida and its officers, agents, and employees, from suits, actions, damages, and costs of every name and description, including attorney's fees, arising from or relating to any alleged act or omission by the Contractor, its agents, employees, partners, or subcontractors, provided, however, that the Contractor shall not indemnify for that portion of any loss or damages caused by the negligence act or omission of LSF.
- 4.6.2. The Contractor shall fully indemnify, defend and hold harmless LSF, the State, from any suits, actions, damages, and costs of every name and description, including attorney's fees, arising from or relating to violation of infringement of a trademark, copyright, patent, trade secret or intellectual property rights, provided, however, that the foregoing obligation shall not apply to LSF's misuse or modification of Contractor's products or LSF's operation or use of Contractor's products in a manner not contemplated by the agreement or the purchase order. If any product is the subject of an infringement suit or in the Contractor's opinion is likely to become the subject of such a suit, the Contractor may at its sole expense procure for LSF the right to continue using the product or modify it to become non-infringing. If the Contractor is not reasonably able to modify or otherwise secure LSF the use, LSF shall not be liable for any royalties. The Contractor's indemnification for violation or infringement of a trademark, copyright, patent, trade secret or intellectual property rights shall encompass all such items used or accessed by the Contractor, its officers, agents or subcontractors in the performance of this agreement or delivered to LSF for the use of LSF, its employees, agents, or contractors.
- 4.6.3. The Contractor shall protect, defend, and indemnify, including attorney's fees and costs, LSF for any and all claims and litigation (including litigation initiated by LSF) arising from or relating to Contractor's claim that a document contains proprietary or trade secret information that is exempt from disclosure or the scope of the Contractor's redaction.
- 4.6.4. LSF shall not be liable for any costs, expense, or compromise incurred or made by the Contractor in any legal action. The Contractor's inability to evaluate liability or its evaluation of liability shall not excuse its duty to defend and indemnify after receipt of notice. Only an adjudication or judgment after the highest appeal is exhausted finding LSF negligent shall excuse the Contractor

of performance under this provision, in which case LSF shall have no obligation to reimburse the Contractor for costs of its defense. If the Contractor is an agency or subdivision of the State, its obligation of indemnify, defend, and hold harmless LSF shall be to the extent permitted by section 768.28, F.S. or other applicable law, and without waiving the limits of sovereign immunity.

4.7. Governing Law and Compliance

4.7.1. Governing Law

4.7.1.1. The validity, enforceability, and interpretation of this Agreement shall be determined and governed by the laws of the State of Florida, as well as applicable federal laws. The Parties agree that jurisdiction for any dispute, action, claim or alternative dispute resolution proceeding regarding this Agreement shall reside in Duval County, Florida.

4.7.2. Florida Regulatory Governance

4.7.2.1. This Agreement, the attachments, and the performance thereof, are subject to the requirements and regulations promulgated by and specific verbiage required by DCF.

4.7.3. Corporate Compliance

4.7.3.1. During the term of this Agreement, each Party shall: (i) ensure that it is duly organized, validly existing and in good standing under the laws of Florida; (ii) maintain all requisite federal, state and local authority, permits and licenses necessary or appropriate to operate and to carry out its obligations under this Agreement; (iii) monitor its performance of administrative functions on an ongoing basis to ensure compliance with applicable DCF performance standards and guidelines; and (iv) notwithstanding any term or provision in this Agreement to the contrary, remain ultimately responsible for assuring that it is operating in accordance with all applicable federal, state and local laws, rules, regulations and ordinances.

4.7.4. General Provisions

4.7.4.1. Notwithstanding anything in this Agreement to the contrary, the Parties acknowledge and agree that each Party is subject to the Florida Public Records Act under the Florida Contract and under Chapter 119, Florida Statutes. Nonetheless, in the event that a Party becomes legally compelled to disclose any of the Confidential Proprietary Information (the "Compelled Party"), the Compelled Party will provide the other Party with prompt notice thereof so that the other Party may seek a protective order or other appropriate remedy. In the event that such protective order or other remedy is not obtained by the other Party, the Compelled Party will furnish or cause to be furnished only that minimum portion of the Confidential Proprietary Information which the Compelled Party is legally required to furnish.

4.7.4.2. Severability

The illegality, unenforceability, or ineffectiveness of any provision of this Agreement shall not affect the legality, enforceability, or effectiveness of any other provision of this Agreement. If any provision of this Agreement, or the application thereof shall, for any reason and to any extent, be deemed invalid or unenforceable, neither the remainder of this Agreement, nor the application of the provision to other persons,

entities, or circumstances, nor any other instrument referred to in this Agreement shall be affected thereby, but instead shall be enforced to the maximum extent permitted by law.

4.9.5 Authority to Bind

By signature below, each signatory represents and warrants that such person is duly authorized to enter into this Agreement on the respective Party's behalf and is duly authorized to bind such Party to the terms applicable to each.

4.9.6 Typewritten or Handwritten Provisions

Typewritten or handwritten provisions that are inserted in this Agreement or attached to this Agreement as addenda or riders shall not be valid unless such provisions are initialed by both signatories to this Agreement.

4.9.7 Counterparts: Facsimile Execution and Captions

This Agreement may be executed and delivered: (a) in any number of counterparts, each of which will be deemed an original, but all of which together will constitute one and the same instrument; and/or (b) by facsimile, in which case the instruments so executed and delivered shall be binding and effective for all purposes; and/or (c) by email communication to the parties identified in this agreement. The captions in this Agreement are for reference purposes only and shall not affect the meaning of terms and provisions herein.

4.9.8 Entire Agreement

This Agreement, including any documents incorporated by reference hereto, contains all the terms and conditions agreed upon by the parties regarding the subject matter of this Agreement. Any prior agreements, promises, negotiations or representations of or between the Parties, either oral or written, relating to the subject matter of this Agreement, which are not expressly set forth in this Agreement are null and void and of no further force or effect.

4.9.9 Cancellation of Agreement

This Agreement may be terminated by either party at any time, regardless of reason, with thirty (30) days written notice. No termination shall prejudice the Contractor's rights to payments for services properly completed prior to the effective date of termination. LSF reserves the right to unilaterally cancel this Agreement immediately upon discovery of fraud or misuse of public funds.

The parties' authorized representatives have executed this sixteen-page Agreement to be effective this 1st day of July 2025.

Union County Board of County Commissioners

Lutheran Services Florida, Inc. d/b/a LSF Health Systems

Signature Date

Signature Date

Printed Name Title

Dr. Christine Cauffield CEO

Printed Name Title

The parties agree that any future amendment(s) replacing this page will not affect the above execution.

Federal Tax ID # (or SSN): 59-6000882

Contractor FY Ending Date: 9/30

ATTACHMENT IV

This Attachment contains the terms and conditions governing the Network Service Provider's access to and use of Protected Health Information and provides the permissible uses and disclosures of protected health information by the Provider, also called "Business Associate."

Section 1. Definitions

1.1 Catch-all definitions:

The following terms used in this Attachment shall have the same meaning as those terms in the HIPAA Rules: Breach, Data Aggregation, Designated Record Set, Disclosure, Health Care Operations, Individual, Minimum Necessary, Notice of Privacy Practices, Protected Health Information, Required by Law, Security Incident, Subcontractor, Unsecured Protected Health Information, and Use.

1.2 Specific definitions:

- 1.2.1 "Business Associate" shall generally have the same meaning as the term "business associate" at 45 CFR 160.103, and for purposes of this Attachment shall specifically refer to the Network Service Provider.
- 1.2.2 "Covered Entity" shall generally have the same meaning as the term "covered entity" at 45 CFR 160.103, and for purposes of this Attachment shall refer to the Managing Entity and/or the Department.
- 1.2.3. "HIPAA Rules" shall mean the Privacy, Security, Breach Notification, and Enforcement Rules at 45 CFR Part 160 and Part 164.
- 1.2.4. "Subcontractor" shall generally have the same meaning as the term "subcontractor" at 45 CFR 160.103 and is defined as an individual to whom a business associate delegates a function, activity or service, other than in the capacity of a member of the workforce of such business associate.

Section 2. Obligations and Activities of Business Associate

2.1 Business Associate agrees to:

- 2.1.1 Not use or disclose protected health information other than as permitted or required by this Attachment or as required by law;
- 2.1.2 Use appropriate administrative safeguards as set forth at 45 CRF164.308, physical safeguards as set forth at 45 CRF164.310, and technical safeguards as set forth at 45 CFR 164.312; including, policies and procedures regarding the protection of PHI and/or ePHI set forth at 45 CRF 164.316 and the provisions of training on such policies and procedures to applicable employees, independent contractors and volunteers, that reasonably and appropriately protect the confidentiality, integrity, and availability of the PHI and/or ePHI that the Network Service Provider creates, receives, maintains or transmits on behalf of the Managing Entity and/or the Department;
- 2.1.3 Acknowledge that (a) the foregoing safeguards, policies and procedures requirements shall apply to the Business Associate in the same manner that such requirements apply to the Managing Entity and/or the Department, and (b) the Business Associates and their Subcontractors are directly liable under the

- civil and criminal enforcement provisions set forth at Section 13404 of the HITECH Act and 45 CFR 164.500 and 164.502(E) of the Privacy Rule (42 U.S.C. 1320d-5 and 1320d-6), as amended, for failure to comply with the safeguards, policies and procedures requirements and any guidance issued by the Secretary of Health and Human Services with respect to such requirements;
- 2.1.4 Report to covered entity any use or disclosure of protected health information not provided for by this Attachment of which it becomes aware, including breaches of unsecured protected health information as required at 45 CFR 164.410, and any security incident of which it becomes aware;
 - 2.1.5 Notify the Managing Entity's Network Manager as soon as possible, but no later than five (5) business days following the determination of any breach or potential breach of personal and confidential departmental data;
 - 2.1.6 Notify the Managing Entity's Network Manager within (24) hours of notification by the US Department of Health and Human Services of any investigations, compliance reviews or inquiries by the US Department of Health and Human Services concerning violations of HIPAA (Privacy, Security Breach).
 - 2.1.7 Provide any additional information requested by the Managing Entity and/or the Department for purposes of investigating and responding to a breach;
 - 2.1.8 Provide at Business Associate's own cost notice to affected parties no later than 45 days following the determination of any potential breach of personal or confidential departmental data as provided in §817.5681, Fla. Stat.;
 - 2.1.9 Implement at Business Associate's own cost measures deemed appropriate by the Managing Entity and/or the Department to avoid or mitigate potential injury to any person due to a breach or potential breach of personal and confidential departmental data;
 - 2.1.10 Take immediate steps to limit or avoid the recurrence of any security breach and take any other action pertaining to such unauthorized access or disclosure required by applicable federal and state laws and regulations regardless of any actions taken by the Managing Entity or the Department ;
 - 2.1.11 In accordance with 45 CFR 164.502(e)(1)(ii) and 164.308(b)(2), if applicable, ensure that any subcontractors that create, receive, maintain or transmit protected health information on behalf of the Business Associate agree to the same restrictions, conditions, and requirements that apply to the Business Associate with respect to such information. Business Associates must attain satisfactory assurance in the form of a written contract or other written agreement with their business associates or subcontractors that meets the applicable requirements of 45 CFR 164.504(e)(2) that the Business Associate or Subcontractor will appropriately safeguard the information. For prior contracts or other arrangements, the provider shall provide written certification that its implementation complies with the terms of 45 CFR 164.532(d);
 - 2.1.12 Make available protected health information in a designated record set to covered entity as necessary to satisfy covered entity's obligations under 45 CFR 164.524;
 - 2.1.13 Make any amendment(s) to protected health information in a designated record set as directed or agreed to by the covered entity pursuant to 45 CFR 164.526, or take other measures as necessary to satisfy covered entity's obligations under 45 CFR 164.526;
 - 2.1.14 Maintain and make available the information required to provide an accounting of disclosures to the covered entity as necessary to satisfy covered entity's obligations under 45 CFR 164.528;

- 2.1.15 To the extent the Business Associate is to carry out one or more of covered entity's obligation(s) under Subpart E of 45 CFR Part 164, comply with the requirements of Subpart E that apply to the covered entity in the performance of such obligation(s); and
- 2.1.16 Make its internal practices, books, and records available to the Secretary of the U.S. Department of Health and Human Services for purposes of determining compliance with the HIPAA Rules.

Section 3. Permitted Uses and Disclosures by Business Associate

- 3.1 The Business Associate may only use or disclose protected health information covered under this Attachment as listed below:
 - 3.1.1 The Business Associate may use and disclose the Managing Entity's or Department's PHI and/or ePHI received or created by Business Associate (or its agents and subcontractors) in performing its obligations pursuant to this Attachment.
 - 3.1.2 The Business Associate may use the Managing Entity's or Department's PHI and/or ePHI received or created by Business Associate (or its agents and subcontractors) for archival purposes.
 - 3.1.3 The Business Associate may use PHI and/or ePHI created or received in its capacity as a Business Associate of the Managing Entity for the proper management and administration of the Business Associate, if such use is necessary (a) for the proper management and administration of Business Associate or (b) to carry out the legal responsibilities of Business Associate.
 - 3.1.4 The Business Associate may disclose PHI and/or ePHI created or received in its capacity as a Business Associate of the Managing Entity for the proper management and administration of the Business Associate if (a) the disclosure is required by law or (b) the Business Associate (1) obtains reasonable assurances from the person to whom the PHI and/or ePHI is disclosed that it will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the person and (2) the person agrees to notify the Business Associate of any instances of which it becomes aware in which the confidentiality and security of the PHI and/or ePHI has been breached.
 - 3.1.5 The Business Associate may aggregate the PHI and/or ePHI created or received pursuant this Attachment with the PHI and/or ePHI of other covered entities that Business Associate has in its possession through its capacity as a Business Associate of such covered entities for the purpose of providing the Managing Entity and/or the Department of Children and Families with data analyses relating to the health care operations of the Managing Entity or the Department (as defined in 45 C.F.R. §164.501).
 - 3.1.6 The Business Associate may de-identify any and all PHI and/or ePHI received or created pursuant to this Attachment, provided that the de-identification process conforms to the requirements of 45 CFR 164.514(b).
 - 3.1.7 Follow guidance in the HIPAA Rule regarding marketing, fundraising and research located at Sections 45 CFR 164.501, 45 CFR 164.508 and 45 CFR 164.514.

Section 4. Provisions for Covered Entity to Inform Business Associate of Privacy Practices and Restrictions

- 4.1 Covered entity shall notify Business Associate of any limitation in the notice of privacy practices of covered entity under 45 CFR 164.520, to the extent that such limitation may affect Business Associate's use or disclosure of protected health information.
- 4.2 Covered entity shall notify Business Associate of any changes in, or revocation of, the permission by an individual to use or disclose his or her protected health information, to the extent that such changes may affect Business Associate's use or disclosure of protected health information.
- 4.3 Covered entity shall notify Business Associate of any restriction on the use or disclosure of protected health information that covered entity has agreed to or is required to abide by under 45 CFR 164.522, to the extent that such restriction may affect Business Associate's use or disclosure of protected health information.

Section 5. Termination

5.1 Termination for Cause

- 5.1.1 Upon the Managing Entity's knowledge of a material breach by the Business Associate, the Managing Entity shall either:
 - 5.1.1.1 Provide an opportunity for the Business Associate to cure the breach or end the violation and terminate the Agreement or discontinue access to PHI if the Business Associate does not cure the breach or end the violation within the time specified by the Managing Entity;
 - 5.1.1.2 Immediately terminate this Agreement or discontinue access to PHI if the Business Associate has breached a material term of this Attachment and does not end the violation; or
 - 5.1.1.3 If neither termination nor cure is feasible, the Managing Entity shall report the violation to the Department of Children and Families and the Secretary of the Department of Health and Human Services.

5.2 Obligations of Business Associate Upon Termination

- 5.2.1 Upon termination of this Attachment for any reason, Business Associate, with respect to protected health information received from covered entity, or created, maintained, or received by Business Associate on behalf of covered entity, shall:
 - 5.2.1.1 Retain only that protected health information which is necessary for Business Associate to continue its proper management and administration or to carry out its legal responsibilities;
 - 5.2.1.2 Return to covered entity, or other entity as specified by the Managing Entity or, if permission is granted by the Managing Entity, destroy the remaining protected health information that the Business Associate still maintains in any form;
 - 5.2.1.3 Continue to use appropriate safeguards and comply with Subpart C of 45 CFR Part 164 with respect to electronic protected health information to prevent use or disclosure of the protected health information, other

than as provided for in this Section, for as long as Business Associate retains the protected health information;

- 5.2.1.4 Not use or disclose the protected health information retained by Business Associate other than for the purposes for which such protected health information was retained and subject to the same conditions set out at paragraphs 3.1.3 and 3.1.4 above under "Permitted Uses and Disclosures By Business Associate" which applied prior to termination; and
- 5.2.1.5 Return to covered entity, or other entity as specified by the Managing Entity or, if permission is granted by the Managing Entity, destroy the protected health information retained by Business Associate when it is no longer needed by Business Associate for its proper management and administration or to carry out its legal responsibilities.
- 5.2.1.6 The obligations of Business Associate under this Section shall survive the termination of this Attachment.

Section 6. Miscellaneous

- 6.1 A regulatory reference in this Attachment to a section in the HIPAA Rules means the section as in effect or as amended.
- 6.2 The Parties agree to take such action as is necessary to amend this Attachment from time to time as is necessary for compliance with the requirements of the HIPAA Rules and any other applicable law.
- 6.3 Any ambiguity in this Attachment shall be interpreted to permit compliance with the HIPAA Rules.



Suwannee River Economic Council, Inc.

***Post Office Box 70
Live Oak, Florida 32064***

Administrative Office - Phone (386) 362-4115

Fax (386) 362-4078

E-Mail: mattpearson@suwanneec.net

Website: www.srecinc.org

July 18, 2025

Mr. Jimmy Williams
Union County Coordinator
15 NE 1st Street
Lake Butler FL 32054

Dear Mr. Williams:

Enclosed please find the Union County SHIP Annual Report for close out fiscal year 2022/2023 and interim year 2023/2024 to be added to the Consent Agenda for the Board of County Commission meeting on Monday, August 4th.

Enclosed with the Annual Report is the Certification form to be executed by the appropriate County Officials. There are two (2) originals enclosed. Please return one original to us and retain the other for your records.

Should you have any questions, please give me a call.

Sincerely,

Matt Pearson
Executive Director

MP/sb's

Enclosures



BRADFORD-COLUMBIA-DIXIE-GILCHRIST-HAMILTON-LAFAYETTE-LEVY-MADISON-PUTNAM-SUWANNEE-TAYLOR-UNION

"This institution is an equal opportunity provider and employer."

Union County

SHIP Annual Report

Close-out Year 2022/2023

Interim Year 2023/2024

Form 1

SHIP Distribution Summary

Homeownership

Code	Strategy	Expended Amount	Units	Encumbered Amount	Units	Unencumbered Amount	Units
1	PURCHASE ASSISTANCE W/REHAB	\$75,000.00	3				
2	PURCHASE ASSISTANCE W/O REHAB	\$25,000.00	1				
3	OWNER OCCUPIED REHAB	\$222,452.67	7				
6	EMERGENCY REPAIR	\$6,400.00	1				

Homeownership Totals: \$328,852.67 12

Rentals

Code	Strategy	Expended Amount	Units	Encumbered Amount	Units	Unencumbered Amount	Units
------	----------	-----------------	-------	-------------------	-------	---------------------	-------

Rental Totals:

Subtotals: \$328,852.67 12

Additional Use of Funds

Use	Expended	Percentage
Administrative	\$35,000.00	10.00 %
Homeownership Counseling		
Admin From Program Income		.00 %
Admin From Disaster Funds		-
Admin From HHRP		NaN %

Totals: \$363,852.67 12 \$0.00 \$0.00

Total Revenue (Actual and/or Anticipated) for Local SHIP Trust Fund

Source of Funds	Amount
State Annual Distribution	\$350,000.00
Program Income (Interest)	\$264.27
Program Income (Payments)	\$13,588.40
Recaptured Funds	\$0.00
Disaster Funds	
HHRP Funds	
Carryover funds from previous year	\$0.00
Total:	\$363,852.67

* Carry Forward to Next Year: \$0.00

NOTE: This carry forward amount will only be accurate when all revenue amounts and all expended, encumbered and unencumbered amounts have been added to Form 1

Form 2

Rental Unit Information

Description	Eff.	1 Bed	2 Bed	3 Bed	4 Bed
ELI	364	428	621	808	931
VL	562	602	722	835	931
LOW	898	963	1,156	1,335	1,490
MOD	1,350	1,446	1,734	2,004	2,235
Up to 140%	1,575	1,687	2,023	2,338	2,607

Recap of Funding Sources for Units Produced ("Leveraging")

Source of Funds Produced through June 30th for Units	Amount of Funds Expended to Date	% of Total Value
SHIP Funds Expended	\$328,852.67	35.76%
Public Moneys Expended	\$0.00	.00%
Private Funds Expended	\$584,613.00	63.56%
Owner Contribution	\$6,264.12	.68%
Total Value of All Units	\$919,729.79	100.00%

SHIP Program Compliance Summary - Home Ownership/Construction/Rehab

Compliance Category	SHIP Funds	Trust Funds	% of Trust Fund	FL Statute Minimum %
Homeownership	\$328,852.67	\$350,000.00	93.96%	65%
Construction / Rehabilitation	\$328,852.67	\$350,000.00	93.96%	75%

Program Compliance - Income Set-Asides

Income Category	SHIP Funds	Total Available Funds % *	Totals of Percentages
Extremely Low	\$87,329.77	24.00%	EL+VL: 43.92%
Very Low	\$72,468.70	19.92%	
Low	\$69,054.20	18.98%	EL+VL+L: 62.90%
Moderate	\$100,000.00	27.48%	
Over 120%-140%	\$0.00	.00%	
Totals:	\$328,852.67	90.38%	

Project Funding for Expended Funds Only

Income Category	Total Funds Mortgages, Loans & DPL's	Mortgages, Loans & DPL Unit #s	Total Funds SHIP Grants	SHIP Grant Unit #s	Total SHIP Funds Expended	Total # Units
Extremely Low	\$87,329.77	3	\$0.00	0	\$87,329.77	3
Very Low	\$66,068.70	2	\$6,400.00	1	\$72,468.70	3
Low	\$69,054.20	2	\$0.00	0	\$69,054.20	2
Moderate	\$100,000.00	4	\$0.00	0	\$100,000.00	4
Over 120%-140%	\$0.00	0	\$0.00	0	\$0.00	0
Totals:	\$322,452.67	11	\$6,400.00	1	\$328,852.67	12

Form 3

Number of Households/Units Produced

Strategy	List Unincorporated and Each Municipality	ELI	VLI	Low	Mod	Over 140%	Total
OWNER OCCUPIED REHAB	Unincorporated	3	2	2			7
PURCHASE ASSISTANCE W REHAB	LAKE BUTLER				1		1
PURCHASE ASSISTANCE W REHAB	Unincorporated				2		2
PURCHASE ASSISTANCE W / O REHAB	Unincorporated				1		1
EMERGENCY REPAIR	Unincorporated		1				1
Totals:		3	3	2	4		12

Characteristics/Age (Head of Household)

Description	List Unincorporated and Each Municipality	0 - 25	26 - 40	41 - 61	62+	Total
OWNER OCCUPIED REHAB	Unincorporated			2	5	7
PURCHASE ASSISTANCE W REHAB	LAKE BUTLER			1		1
PURCHASE ASSISTANCE W REHAB	Unincorporated		1	1		2
PURCHASE ASSISTANCE W / O REHAB	Unincorporated		1			1
EMERGENCY REPAIR	Unincorporated				1	1
Totals:			2	4	6	12

Family Size

Description	List Unincorporated and Each Municipality	1 Person	2-4 People	5+ People	Total
OWNER OCCUPIED REHAB	Unincorporated	3	4		7
PURCHASE ASSISTANCE W REHAB	LAKE BUTLER	1			1
PURCHASE ASSISTANCE W REHAB	Unincorporated	2			2
PURCHASE ASSISTANCE W / O REHAB	Unincorporated		1		1
EMERGENCY REPAIR	Unincorporated	1			1
Totals:		7	5		12

Race (Head of Household)

Description	List Unincorporated and Each Municipality	White	Black	Hispanic	Asian	Amer-Indian	Other	Total
OWNER OCCUPIED REHAB	Unincorporated	4	1	2				7
PURCHASE ASSISTANCE W REHAB	LAKE BUTLER	1						1
PURCHASE ASSISTANCE W REHAB	Unincorporated	2						2
PURCHASE ASSISTANCE W / O REHAB	Unincorporated	1						1
EMERGENCY REPAIR	Unincorporated		1					1
Totals:		8	2	2				12

Demographics (Any Member of Household)

Description	List Unincorporated and Each Municipality	Farm Worker	Home-less	Elderly	Total
OWNER OCCUPIED REHAB	Unincorporated			5	5
PURCHASE ASSISTANCE W REHAB	LAKE BUTLER				0
PURCHASE ASSISTANCE W REHAB	Unincorporated				0
PURCHASE ASSISTANCE W / O REHAB	Unincorporated				0
EMERGENCY REPAIR	Unincorporated			1	1
Totals:				6	6

Special Target Groups for Funds Expended (i.e. teachers, nurses, law enforcement, fire fighters, etc.) Set Aside

Description	Special Target Group	Expended Funds	Total # of Expended Units
-------------	----------------------	----------------	---------------------------

Strategy	Average Cost
EMERGENCY REPAIR	\$6,400.00
OWNER OCCUPIED REHAB	\$27,806.58
PURCHASE ASSISTANCE W REHAB	\$25,000.00
PURCHASE ASSISTANCE W/O REHAB	\$25,000.00

Expended Funds

Total Unit Count: 12

Total Expended Amount: \$328,852.67

Strategy	Full Name	Address	City	Zip Code	Expended Funds	FY if Unit Already Counted
OWNER OCCUPIED REHAB	DONALD BRYANT	13090 NE 230 PLACE	RAIFORD	32083	\$34,439.25	
OWNER OCCUPIED REHAB	FIDERICIO CHAVARRIO	5670 SW 57 DR	LAKE BUTLER	32054	\$20,000.00	
OWNER OCCUPIED REHAB	JAMEY GERARDI	6816 SW 71ST WAY	LAKE BUTLER	32054	\$8,648.26	2021-2022
OWNER OCCUPIED REHAB	LUIS NAVARRO	13092 S CR 229	RAIFORD	32083	\$24,242.26	
OWNER OCCUPIED REHAB	JANICE HEDMAN	7652 SE CR 245	LAKE BUTLER	32054	\$34,414.25	
OWNER OCCUPIED REHAB	PAUL THOMAS	8576 SW 44TH AVE	LAKE BUTLER	32054	\$34,639.95	
PURCHASE ASSISTANCE W REHAB	VICKIE BARRON	360 NE 8 AVE	LAKE BUTLER	32054	\$25,000.00	
PURCHASE ASSISTANCE W REHAB	DANNY MOODY	6194 SW 53RD ST	LAKE BUTLER	32054	\$25,000.00	
PURCHASE ASSISTANCE W REHAB	NICHOLAS SILCOX	16255 SE 76TH PATH	LAKE BUTLER	32054	\$25,000.00	
PURCHASE ASSISTANCE W/O REHAB	HEATH SPICER	SW 53RD ST	LAKE BUTLER	32054	\$25,000.00	
OWNER OCCUPIED REHAB	CASSA HERNDON	10031 W SR 100	LAKE BUTLER	32054	\$34,037.85	
OWNER OCCUPIED REHAB	BEATRICE MALLORY	22184 NE 149TH ST	RAIFORD	32083	\$32,030.85	
EMERGENCY REPAIR	KATIE WEEKS	885 SW 2ND ST	LAKE BUTLER	32054	\$6,400.00	

Administration by Entity

Name	Business Type	Strategy Covered	Responsibility	Amount
Suwannee River Economic Council, Inc.	Private Non-Profit	All	All responsibilities of SHIP Administrator	\$22,400.00
Local Government	County Government	All	Oversight of SREC, Inc.	\$12,600.00

Program Income

Program Income Funds	
Loan Repayment:	
Refinance:	
Foreclosure:	
Sale of Property:	\$13,588.40
Interest Earned:	\$264.27
Total:	\$13,852.67

Number of Affordable Housing Applications

Number of Affordable Housing Applications	
Submitted	49
Approved	19
Denied	26

Explanation of Recaptured funds

Description	Amount
N/A	
Total:	\$0.00

Rental Developments

Development Name	Owner	Address	City	Zip Code	SHIP Amount	SHIP Units	Compliance Monitored By

Single Family Area Purchase Price

The average area purchase price of single family units:

169,275.00

Or

Not Applicable

Form 5

Special Needs Breakdown

Code(s)	Strategies	Expended Amount	Units	Encumbered Amount	Units	% of Allocation
3	OWNER OCCUPIED REHAB	\$113,321.46	4			
	Total:	\$113,321.46	4			32.38%

Special Needs Category Breakdown by Strategy

Strategies	Special Needs Category	Expended Amount	Units	Encumbered Amount	Units
(3) OWNER OCCUPIED REHAB	Receiving Social Security Disability Insurance	\$93,321.46	3		
(3) OWNER OCCUPIED REHAB	Receiving Supplemental Security Income	\$20,000.00	1		

Provide a description of efforts to reduce homelessness:

County residents:

1. Needing emergency shelter housing will be referred to GRACE Marketplace.
2. Seeking information for affordable rental housing and are not in immediate danger of eviction and/or homelessness will be referred to floridahousingsearch.org.
3. Will be provided additional assistance through the Emergency Repair and Owner Occupied Rehab strategies which provide for the correction of health, safety, and building code violations in order for the resident to maintain the existing home and prevent homelessness.

Interim Year Data

Interim Year Data

Revenue	
State Annual Distribution	\$350,000.00
SHIP Disaster Funds	
HHRP Allocation	
Program Income	\$238.93
Total Revenue:	
	\$350,238.93

Expenditures/Encumbrances	
Program Funds Expended	\$221,255.79
Program Funds Encumbered	\$93,983.14
Total Administration Funds Expended	\$35,000.00
Total Administration Funds Encumbered	\$0.00
Homeownership Counseling	\$0.00
Total Expenditures/Encumbrances:	
	\$350,238.93

Set-Asides		Percentage
65% Homeownership Requirement	\$315,238.93	90.07%
75% Construction / Rehabilitation	\$315,238.93	90.07%
30% Very Low Income Requirement	\$197,420.39	56.37%
60% Very Low + Low Income Requirements	\$315,238.93	90.01%
20% Special Needs Requirement	\$164,803.53	47.05%

State Housing Initiatives Partnership (SHIP) Program
Annual Report and Local Housing Incentives
Certification

On Behalf of UNION COUNTY, I hereby certify that:

1. The Annual Report information submitted electronically to Florida Housing Finance Corporation is true and accurate for the closeout year 2022/2023 and interim year 2023/2024.
2. The local housing incentives or local housing incentive plan have been implemented or are in the process of being implemented. Including, at a minimum:
 - a. Permits as defined in s.163.3164 (15) and (16) for affordable housing projects are expedited to a greater degree than other projects; and
 - b. There is an ongoing process for review of local policies, ordinances, regulations, and plan provisions that increase the cost of housing prior to their adoption.
3. The cumulative cost per newly constructed housing per housing unit, from these actions is estimated to be \$0.
4. The cumulative cost per rehabilitated housing per housing unit, from these actions is estimated to be \$0.

Staff Member responsible for submitting annual report to FHFC: STEPHANIE BARRINGTON, SHIP DIRECTOR

Witness Signature

Date

CHANNING DOBBS,

Date

Chairman, Board of County Commissioners

Witness Printed Name

Witness Signature

Date

Witness Printed Name

or

ATTEST (County Seal)

Signature

Date

420.9075 (10) Each county or eligible municipality shall submit to the corporation by September 15 of each year a report of its affordable housing programs and accomplishments through June 30 immediately preceding submittal of the report. The report shall be certified as accurate and complete by the **local government's chief elected official or his or her designee**. Transmittal of the annual report by a county's or eligible municipality's chief elected official, or his or her designee, certifies that the local housing incentive strategies, or, if applicable, the local housing incentive plan, have been implemented or are in the process of being implemented pursuant to the adopted schedule for implementation.

State Housing Initiatives Partnership (SHIP) Program
Annual Report and Local Housing Incentives
Certification

On Behalf of UNION COUNTY, I hereby certify that:

1. The Annual Report information submitted electronically to Florida Housing Finance Corporation is true and accurate for the closeout year 2022/2023 and interim year 2023/2024.
2. The local housing incentives or local housing incentive plan have been implemented or are in the process of being implemented. Including, at a minimum:
 - a. Permits as defined in s.163.3164 (15) and (16) for affordable housing projects are expedited to a greater degree than other projects; and
 - b. There is an ongoing process for review of local policies, ordinances, regulations, and plan provisions that increase the cost of housing prior to their adoption.
3. The cumulative cost per newly constructed housing per housing unit, from these actions is estimated to be \$0.
4. The cumulative cost per rehabilitated housing per housing unit, from these actions is estimated to be \$0.

Staff Member responsible for submitting annual report to FHFC: STEPHANIE BARRINGTON, SHIP DIRECTOR

Witness Signature

Date

CHANNING DOBBS,
Chairman, Board of County Commissioners

Date

Witness Printed Name

Witness Signature

Date

Witness Printed Name

or

ATTEST (County Seal)

Signature

Date

420.9075 (10) Each county or eligible municipality shall submit to the corporation by September 15 of each year a report of its affordable housing programs and accomplishments through June 30 immediately preceding submittal of the report. The report shall be certified as accurate and complete by the local government's chief elected official or his or her designee. Transmittal of the annual report by a county's or eligible municipality's chief elected official, or his or her designee, certifies that the local housing incentive strategies, or, if applicable, the local housing incentive plan, have been implemented or are in the process of being implemented pursuant to the adopted schedule for implementation.