NUECES COUNTY EMERGENCY SERVICES DISTRICT #2



FIRE COMMISSIONERS BOARD MEETING

(Tuesday) September 18, 2018 337 Yorktown Corpus Christi, Texas 361.937.2645 6:00 PM



The Fire Board will meet at the above time and location to Discuss, Consider and Take Action on the following:

- I. Call Meeting to Order

 CONFIRM ATTENDANCE OF MEMBERS PRESENT AND CONFIRM A QUORUM
- II. Pledge of Allegiance
- III. Public Comment

 THE BOARD MAY TAKE NO ACTION ON ITEMS NOT POSTED ON THE AGENDA. HOWEVER
 THE BOARD MAY SET THE ITEM FOR A SUBSEQUENT AGENDA. THE CHAIR MAY SET TIME
 LIMITS ON PRESENTATIONS
- IV. Approval of Previous Meeting Minutes

 August 24, 2018
- V. Letter of Engagement to Contract Jake Sanchez for 2017/2018 Audit
- VI. EMS Billing
- VII. Approve increasing tractable assets for auditing purposes to \$5,000
- VIII. Approval of Treasurer Report/Payment of Bills
- IX. Chief/Maintenance Report
 - a. Staffing Update
 - b. EMS Operations
- X. Executive Session

PUBLIC NOTICE IS GIVEN THAT THE BOARD OF FIRE COMISSIONERS MAY ELECT TO GO INTO AN EXECUTIVE SESSION ANYTIME DURING THE MEETING TO DISCUSS MATTERS LISTED ON THE AGENDA, WHEN AUTHORIZED BY THE PROVISIONS OF THE OPEN MEETINGS ACT, CHAPTER 551 OF THE TEXAS GOVERNMENT CODE, IN THE EVENT THE BOARD ELECTS TO GO INTO EXECUTIVE SESSION REGARDING AN AGENDA ITEM, THE SECTION OR SECTIONS OF THE OPEN MEETINGS ACT AUTHORIZING THE EXECUTIVE SESSION WILL BE PUBLICLY ANNOUNCED BY THE PRESIDING OFFICER. IN ACCORDANCE WITH THE AUTHORITY OF THE GOVERNMENT CODE, VERNON'S TEXAS CODES, SECTIONS 551.071, 551.072, 551.073, 551.074, 551.0745, 551.076, 551.086, THE BOARD OF FIRE COMMISSIONERS WILL HOLD AN EXECUTIVE SESSION TO CONSULT WITH ATTORNEY (S) INCLUDING MATTERS RELATED TO LITIGATION, DELIBERATE REGARDING REAL PROPERTY, PROSPECTIVE GIFT (S), PERSONEL MATTERS, INCLUDING TERMINATION, ADVISORY BODIES, SECURITY DEVICES, AND/OR ECONOMIC DEVELOPMENT NEGOTIATIONS AND OTHER MATTERS THAT MAY BE DISCUSSED IN AN EXECUTIVE SESSION. THE BOARD OF FIRE COMMISSIONERS, UPON COMPLETION OF THE EXECUTIVE SESSION, MAY IN AN OPEN SESSION TAKE SUCH ACTION AS APPROPRIATE IN ITEMS DISCUSSED IN AN EXECUTIVE SESSION

- XI. Commissioners Update/Report/Recommendations
- XII. Adjourn
 In Memory of if Requested

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Nueces County Emergency Services District #2

337 Yorktown

Corpus Christi, TX 78418 Fire Commissioners Minutes

August 24, 2018



Agenda Item #1

Call Meeting to Order:

Meeting called to order at 18:05 with, Miguel Rodriguez, David Jackson, and Gary Graham in attendance.

Jim Rector and Wes Beseda were absent.

Agenda Item #2

Pledge of Allegiance:

Agenda Item #3

Public Comment:

Chief Scott awarded Brandon Sekula, Jacob Espinoza, Christopher Burkhardt and George Kunkle lifesaving awards.

Chief Scott named CC Rimz basketball team as honorary members.

Agenda Item #4

Approval of Previous Meeting Minutes:

G. Graham made motion to accept minutes of July 17 & 27, August 1, 7 & 14, 2018 minutes as amended.

D. Jackson seconded motion.

Motion passed.

Agenda Item #5

Public Hearing - Adopt 2018 Tax Rate:

D. Jackson made motion that the property tax rate be increased by the adoption of a tax rate of 0.030000, which is effectively a 0.67% increase in the tax rate.

G. Graham seconded motion.

Motion passed.

Nueces County Emergency Service District #2 adopted a tax rate that will raise more taxes for maintenance and operations that last year's tax rate. The tax rate will effectively be raided by 7.51% and will raise taxes for maintenance and operations on a \$100,000 home by approximately \$1.77.

Agenda Item #6

Adopt 2018/2019 Budget

- D. Jackson made motion to adopt budget.
- G. Graham seconded motion.

Motion passed.

Agenda Item #7

Approve purchase of Polaris ATV:

- G. Graham made motion to approve purchase from Robstown Hardware in the amount of \$16,960 (\$16,475 after rebate).
 - D. Jackson seconded motion.

Motion passed.

Agenda Item #8

Approval of Treasurer Report/Payment of Bills:

- D. Jackson made motion to approve treasurer report and payment of bills.
- G. Graham seconded motion.

Motion passed.

Agenda Item #9

Chief/Maintenance Report:

Agenda Item #10

Executive Session:

None

Agenda Item #11

Commissioners Update/Report/Recommendations:

None

Agenda Item #12

Adjourn:

- D. Jackson made motion to adjourn.
- G. Graham seconded motion.

Motion passed at 19:42



JUAQUIN "JAKE" SANCHEZ

Certified Public Accountant

www.JJSNPS.BIZ

Audit Engagement Letter

September 6, 2018

Jennifer Welp, President Nueces County Emergency Services District #2 337 Yorktown Blvd Corpus Christi, TX 78418

I am pleased to confirm my understanding of the services I am to provide Nueces County Emergency Services District #2 for the year ended August 31, 2018. I will audit the financial statements of the governmental activities, including the related notes to the financial statements, which collectively comprise the basic financial statements of Nueces County Emergency Services District #2 as of and for the year ended August 31, 2018. Accounting standards generally accepted in the United States of America provide for certain required supplementary information (RSI), such as management's discussion and analysis (MD&A), to supplement Nueces County Emergency Services District #2's basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical content. As part of my engagement, I will apply certain limited procedures to Nueces County Emergency Services District #2's RSI in accordance with auditing standards generally accepted in the United States of America. These limited procedures will consist of inquiries of management regarding the methods of preparing the information and comparing the information for consistency with management's responses to my inquiries, the basic financial statements, and other knowledge I obtain during my audit of the basic financial statements. I will not express an opinion or provide any assurance on the information because the limited procedures do not provide me with sufficient evidence to express an opinion or provide any assurance. The following RSI is required by generally accepted accounting principles and will be subjected to certain limited procedures, but will not be audited:

Management's Discussion and Analysis.

2) Budgetary Comparison.

2820 Building, Suite 198, Box 134 2820 South Padre Island Drive Corpus Christi, Texas 78415

Phone: (361) 851-8722 Fax: (361) 851-8782 Toll Free: 1-866-525-3272

AGREEMENT FOR SPECIALIZED PROFESSIONAL AMBULANCE BILLING SERVICES

This Agreement is entered into this	day of	, 2018
by and I etween Emergicon, LLC, a Texas		and Nueces County ESD #2, a
Texas n unicipal corporation ("Client").		

RECIT \LS

VHEREAS, Client provides emergency and/or non-emergency ambulance services for which it is eligible for payment or reimbursement by patients, insurance carriers, governmental agencies, employers and others;

WHEREAS, Emergicon is engaged in the business of providing third-party billing and accounts receivable management specialized professional services for ambulance and emergency medical service organizations;

WHEREAS, Client desires to utilize Emergicon for billing and claims management services for its organization; and

WHEREAS, Emergicon is willing to provide such specialized professional services upon the terms and conditions provided in this Agreement;

THEREFORE, in consideration of the mutual promises contained in this Agreement, and other g od and valuable consideration, the sufficiency of which is acknowledged, the parties, intending to be legally bound, agree as follows:

- Appointment. Client hereby engages Emergicon to exclusively perform the Special zed Professional Services set described in Paragraph 2 of this Agreement and Emergicon accepts such exclusive appointment and agrees to provide Specialized Professional Services in accordance with the terms of this Agreement. Client agrees that it will not enter into any contract, agreement, arrangement or understanding with any other person or entity, the purpose of which is to provide for the same or substantially similar specialized professional services during the term of the Agreement, unless the parties agree otherwise as set forth in writing in an Addendum to this Agreement. For purposes of the appointment, the recitals set forth above are incorporated by reference and made a part of this Agreement as if set forth in their entirety.
- 2. Specialized Professional <u>Services</u>. Emergicon agrees to perform the following duties (collectively referred to as the "Services") on behalf of Client:
- a. Provide Client with instructions for the submission of Required Documentation to Emergicon. For purposes of this Agreement, "Required Documentation" shall consist of prehospital patient care reports (PCRs) (also referred to as "trip sheets" or "run reports"), physician certification statements (PCSs) (required for non-emergency transports), patient authori: ation signatures (sometimes referred to as "assignment of benefits form" or "signature form"), Advance Beneficiary Notices of Non-coverage (ABNs) and other documentation necessary for Emergicon to perform the Specialized Professional Services under this Agreement. All Required Documentation must be signed in accordance with applicable laws, regulations and payer guidelines.

- b. Review the Required Documentation, based on the information supplied by Client, for completeness and eligibility for submission to request reimbursement and to verify compliance under applicable laws, regulations or payer rules, based upon Emergicon's understanding of said laws, regulations or payer rules applicable to the date the ambulance services were rendered. If any Required Documentation is missing, Emergicon will request necessary documentation from Client.
- c. Promptly prepare and submit claims deemed complete and eligible for reimbursement by Emergicon in conformance with this Agreement for electronic or paper submission to the appropriate party or payer based on the information supplied by Client. In the event that Emergicon deems the Required Documentation to be incomplete or inconsistent, Emergicon will notify Client that additional information may be required to process the claim, and Emergicon will return any or all of the Required Documentation to Client that Emergicon determines may be incomplete or inaccurate and will not be responsible to submit any claims with insufficient documentation. Emergicon will make a decision regarding the appropriate coding and payer fo submission of the claim based on the information supplied by Client. Client understands and ack owledges that not all accounts will satisfy the eligibility requirements of all payers, and that it night not be possible to obtain reimbursement in all cases. Emergicon makes no representation or warranty that all claims are payable or will be paid, and Client agrees to abide by Emergicon's decisions with regard to proper coding and payer based on the information provided to Emergicon by Client.
- d. Promptly post payments made on Client's behalf by patients, insurers and others.
- e. Unless otherwise directed by Client, make reasonable efforts for the collection of co-payments, deductibles or other patient balances, to include the preparation of invoices and a maximum of three contact attempts to patients, supplemental insurers or other financially responsible parties at industry-appropriate intervals
- f. Perform follow-up for a commercially reasonable period of time following the initial billing date on all open accounts. After this follow-up period, Emergicon will either return the accounts to Client or forward the accounts to a collection agency of Client's choosing. Client and/or its designated collection agency shall bear all costs and liabilities of collections activities and collection agency charges.
- g. Provide monthly reports to Client, which include, at a minimum, cash received, accounts receivable and balance summary. Emergican shall furnish those reports to Client.
- h. Notify Client of any overpayments and/or credit balances of which Emergicon becomes aware that must be refunded by Client. Client bears sole responsibility for the refund of any overpayments or credit balances to Medicare, Medicaid, patients, or other payers or insurers, and agrees to make such refunds when and within the time frames required by law. Emergicon may, at its option, assist Client in processing such refunds, but all refunds are to be made solely with Client's funds, and Emergicon has no responsibility to make such refunds unless

and until Client transfers such funds to Emergicon for this purpose. Emergicon shall not advance funds or behalf of Client for this purpose. Client acknowledges that federal law requires that any overpay tents made by Medicare or any other federal health care program be refunded within 60 days of the identification of any such overpayments.

- i. If Client desires that its patients be able to pay their accounts utilizing credit cards, establish a credit card merchant account and related capabilities to permit Client's patients to pay v.a any major credit card. Emergicon shall in its sole discretion determine which credit cards it will accept.
- j. Assist Client in preparing, filing and updating the information on its Medicare, Medicaid or other insurer provider enrollment forms, as well as responding to required revalidations of Client's provider enrollment status. Client bears the sole responsibility to ensure that its Medicare, Medicaid or other insurer provider enrollment forms are submitted and updated in accordance with federal and state law, regulations and policies. Client bears the exclusive responsibility for the submission of such form and any fees that may be associated with the submission of such forms. However, the responsibility for actual submission and all fees associated with the forms shall be borne exclusively by Client and paid prior to submission of these forms by Emergicon. In the event that Client's status as a Medicare or Medicaid provider has lapsed prior to the effective date of this Agreement, Emergicon shall re-enroll Client for an additional fee as described in paragraph 10(d).

Specifically Excluded Duties of Emergicon. Notwithstanding any provisions of this Agreement to the contrary, Emergicon shall *not* be responsible to:

- a. Initiate or pursue litigation for the collection of past due accounts.
- b. Invoice for Client's non-ambulance medical transportation services, including but not limited to mobile integrated health programs, paratransit services, wheelchair van, invalid coach services, litter vans and stretcher cars, unless specific arrangements are made otherwise.
- c. Negotiate any checks made payable to Client, though Emergicon may receive funds as an agent of Client for transmittal to Client where permitted by Client;
 - d. Accept reassignment of any benefits payable to Client;
- e. Provide legal advice or legal services to Client, any of Client's patients or payers, or anyone acting on Client's behalf;
- f. Obtain any prior authorizations on behalf of Client, or obtain a Physician Certification Statement or other Certificate of Medical Necessity on behalf of Client.
- Responsibilities of Client. Client agrees to do the following, at its sole cost and expense.
 - a. Provide Emergicon with all Required Documentation, as set forth in

Paragraph 2(a), above, as well as the following data: Patient Name and Address, Date of Birth, Date of Service, Patient Medical Condition, Reason for Transport, Services Rendered (including assessments, interventions and other care), Origin and Destination with accompanying Zip Code, Transport Destination with accompanying Zip Code, Odometer Reading/Loaded Mileage (to the nearest tenth of a mile), and all relevant insurer or payer information, including identity of payer, group or plan numbers, patient's Insurance/Medicare/Medicaid Number, and all other relevant information and ensure that this data and the information contained on the Required Documentation is complete and accurate. Emergicon reserves the right to modify any Required Documentation or data at any time in accordance with new or revised payer requirements, and will provide . copy of any such revisions to Client in writing. Client acknowledges that Emergicon must rely upon the accuracy and completeness of the forms, signatures and other documentation provided to it by Client to allow Emergicon to perform the Specialized Professional Services specifie in this Agreement. Emergicon is not in a position to verify the accuracy or completeness of the Required Documentation provided by Client. By forwarding any such documentation to Emergic on, Client expressly represents and warrants that any such documentation is complete and accurate, and that Emergicon may rely upon the completeness and accuracy of any such documentation in performing its Services under this Agreement. Client bears sole responsibility for the claim submissions made by Emergicon on its behalf based upon the aforementioned documentation submitted to Emergicon by Client, and, notwithstanding any other term or provision of this Agreement, Client will defend, indemnify and hold harmless, to the extent allowed by law, Emergicon for any billing or claim submission decisions made by Emergicon based on documentation submitted to Emergicon by Client if such documentation is later determined to be incomplete or inaccurate.

- b. Maintain its qualifications to provide ambulance services, including any required local, state and/or federal licenses, permits, certificates or enrollments (collectively, "Licenses"), and to remain in good standing with Medicare, Medicaid and all other state and federal health care programs. Client shall provide copies of all current Licenses, including renewals, to Emergicon. Client shall be responsible to maintain a National Provider Identifier (NPI) number and to update the information associated with its NPI. Client expressly represents and warrants that it will not forward accounts for processing by Emergicon if the account is ineligible for payment or reimbursement, or if Client is ineligible for payment by any payers or insurers as a result of its licensure status, exclusion or other sanction with such payer or insurer, or other legal impediment, and that it will promptly notify Emergicon of any suspension or revocation of any required license, permit, certification or enrollment, or exclusion from any state or feder I health care program or any change in ownership or management of Client.
- c. Provide Emergicon with a copy of all required Licenses, permits, certificates and enrollments as referenced in Paragraph 4(b), and forward updates of these documents to Emergicon as they are renewed.
- d. Provide Emergicon with odometer readings or other documentation of mileage accepted by the payer on all calls reflecting loaded mileage (from the point of patient pickup to the destination) recorded in tenths of a mile as required by Medicare guidelines.
- e. In accordance with appropriate payer guidelines, obtain the signature of the patient or other authorized representative of the patient or otherwise meet the ambulance signature

requiren ents set forth at 42 C.F.R. § 424.36 on each call and forward to Emergicon as part of the Required Documentation.

- f. In the event that Client operates a subscription or membership program, client represents and warrants that its program is actuarially sound in accordance with the guidance of the Office of Inspector General (OIG) and operated in accordance with any applicable state laws, regulations or guidelines. Emergicon will bill in accordance with the terms of such program, provided that Client furnishes those terms to Emergicon in writing. Client is responsible to inform Emergicon of its patients who are members or subscribers of Client's membership or subscription program. Notwithstanding any other provision of this Agreement, Client agrees to defend, indemnify and hold harmless, to the extent allowed by law, Emergicon in the event that Client's subscription or membership program is not actuarially sound as set forth in applicable OIG guidance or is not permissible under State law, regulation or policy.
- g. If Client is a party to any ALS-BLS "joint billing" or "bundle billing" agreement, Client shall be responsible to provide Emergicon with a copy of such agreement. Client also agrees to submit a PCR from the other party to the joint billing agreement along with the Require! Documentation.
- h. Obtain a completed and valid PCS form on all trips where required by law and pro ide copies of all PCS forms to Emergicon as part of the Required Documentation.
- Provide Emergicon with a copy of all Client rate schedules, contracts or agreements which pertain to Client's billing or charges for services.
- j. Notify Emergicon of any or all changes in billing charges for service or changes in any of Client's billing policies or contracts not later than thirty (30) days prior to the effective date of said changes.
- k. Report all payments made directly to Client within twenty-four (24) hours of Client's receipt of same.
- l. Cooperate reasonably with Emergicon so as to enable Emergicon to meet its obligations under this Agreement. In the event that Client's approval is required in order for Emergicon to fulfill any obligations it may have under this Agreement, Client shall not unreasonably withhold, condition or delay its approval.
- m. In writing, notify Emergicon of any customized needs (reporting, schedul ag, etc.). Client understands that the processing of customized needs may entail additional charges to Client by Emergicon.
- n. Designate a contact person, authorized to transact business on behalf of Client, who can promptly respond to any questions raised by Emergicon, or who can execute required forms and other documents necessary to the provision of Services by Emergicon under this Agreement.
 - o. Agree to permit Emergicon to provide training to Client personnel in the

event that Emergicon deems such training to be necessary and/or desirable at a cost to be mutually agreed upon by the parties and paid by Client.

- p. Provide electronic transfer of PCR data in an acceptable NEMSIS format to Emergicon, Client agrees to bear all cost of the development and implementation of the electronic softwar: "bridge" as agreed upon by and in conjunction with Emergicon information technology personn l, representatives or contractors.
- q. To the extent allowed by law, Client will defend and hold harmless Emergican and each of its officers, directors, employees, attorneys, and agents, to the extent allowed by applicable law, from and against any and all costs, claims, losses, damages, liabilities, expenses, judgments, penalties, fines and causes of action which arise or result from:
 - Any breach or violation of covenant, obligation or agreement of Client set forth in this agreement and any breach or inaccuracy of any of the representations or warranties made by Client in this agreement or in performing its responsibilities under this agreement.
 - ii. Both parties agree that defense of breach or violation of the agreement by Client under this Section 4.q. does not constitute the Client's incurrence of a debt in violation of Article XI Section 7 A. of the Texas Constitution and defined by the Supreme Court in Tex. & New Orleans R.R. Co. v. Galveston County, 169 S.W.2d 713, 715 (Tex. 1943).

5. Record Ownership and Access.

- a. Client understands that all documentation provided to Emergicon by Client, whether in paper and/or electronic form, is for the sole and express purpose of permitting Emergi on to provide Specialized Professional Services under this Agreement. It is Client's respons bility to maintain all of its documents and business records, including copies of any documents or records provided to Emergicon ("Client-Provided Records"). Emergicon does not act as C ient's records custodian.
- b. As a convenience to Client, Emergicon will, during the term of this Agreement, produce patient care reports in response to routine attorney requests (with appropriate patient authorization) for such documentation, if those records are in Emergicon's possession at the time it receives such attorney request. For subpoenas, as well as any requests beyond those deemed by Emergicon to be routine attorney requests, Emergicon shall forward such requests to Client for disposition.
- c. During the term of this Agreement, Emergicon shall, upon Client's written request, provide to Client, in electronic format and within 14 days of receipt of such written request, copies of any Client-Provided Records furnished to Emergicon by Client, and to any Claim Adjudication Documents generated by and received from insurers or payers in response to claims submitted by Emergicon on Client's behalf. "Claim Adjudication Documents" shall consist of the documents generated secondary to claim submission in the normal course of claim process ag by payers and insurers, including Explanation of Benefits (EOB) documents,

Remittance Advice (RA) documents, Medicare Summary Notice (MSN) documents, denials and other documents of a similar type or nature.

- d. Any documents, data, records or information compiled in the course of Emergicon's provision of Specialized Professional Services under this Agreement, other than those Client-Provided Records and Claim Adjudication Records defined in Paragraphs 5(a) and (c) above, shall be the sole and exclusive property of Emergicon and shall be considered the business and/or proprietary records of Emergicon. Emergicon shall have no obligation to furnish any such business or proprietary records of Emergicon to Client, and Client shall have a right of access only to the Client-Provided Records and Claim Adjudication Documents as defined in Paragraphs 5(a) and (c), above.
- e. If Client or a third party requests any documents or records to which Client or the third party has a right of access under Paragraphs 5(a) and (c) of this Agreement, and such documents cannot be provided to Client in electronic form, Emergican may charge Client the percopy amount for medical records permitted under applicable law at the time of Client's request.
- f. Should this Agreement be terminated for any reason, all documents and records to which Client has a right of access under Paragraphs 5(a) and (c) of this Agreement shall be mair tained in electronic format at a site convenient to Emergicon for a reasonable amount of time for follow-up of all open claims, but in any event not to exceed ninety (90) days following the effective date of termination of this Agreement. Electronic or paper copies, as per Paragraph 5(e) hereof, of the records to which Client has a right of access under Paragraphs 5(a) and (c) will be made available to Client, at Client's sole cost and expense, in a format acceptable to Emergicon at the Client's written request provided that Client makes such request within thirty (30) days following termination of the Agreement, and provided that Client has no outstanding invoices due to Emergicon at the time of the request. Emergicon shall have absolutely no responsibility whatsoever after termination of this Agreement to provide any monthly reports or other such Emergicon-generated reports to Client.
- g. Upon termination of this Agreement, Client is responsible to notify all payers, patients, and other correspondents of its new address, phone and/or fax numbers for billing or payment purposes. Notwithstanding any other provisions of this Agreement to the contrary, Emergicon will not be responsible for mail, deliveries, faxes, messages or other communications sent in client's name to Emergicon after the effective termination date of this Agreement, and Emergicon shall have no duty to accept, maintain, copy, deliver or forward any such communications to Client following termination of this Agreement.
- h. Costs for copies of documents required and/or requested by Client beyond the requirement of the normal daily claim handling requirements will be invoiced to Client by Emergicon at a per copy price to be established by Emergicon from time to time.
- 6. <u>Client Accounting and Auditing Requirements.</u> If Client requires Emergicon's assistance in Client's accounting or other internal audits, Emergicon will charge client for said audit support services at its customary rates, to be established by Emergicon from time to time. Upon written request of Client for same, Emergicon shall furnish said rates to Client in writing prior to undertaking any work pursuant to this Paragraph.

Term and Termination.

- a. This Agreement is for an initial term of one year, and will automatically renew for successive like terms unless terminated hereunder.
- b. This Agreement may be terminated with or without cause, by either party, upon written notice to the other party with thirty (30) days' notice.
- c. This Agreement may be terminated by Emergicon immediately upon written notice to Client for any of the following reasons:
 - i. If Client makes an assignment for the benefit of creditors, files a voluntary or involuntary petition in bankruptcy, is adjudicated insolvent or bankrupt, petitions or applies to any tribunal for the appointment of any receiver of any trustee over its assets or properties, commences any proceeding under any reorganization, arrangement, readjustment of debt or similar law or statute of any jurisdiction, whether now or hereafter in effect, or if there is commenced against the other party any such proceeding which remains un-dismissed, un-stayed, or the other party by any act or any omission to act indicated its consent to, approval of or acquiescence in any such proceeding or the appointment of any receiver or of any trustee, or suffers any such receivership or trusteeship to continue undischarged, un-stayed, or un-vacated for a period of thirty (30) days.
 - If Client loses its license, permit or certification necessary to do business, or is excluded from any state or federal health care program.
 - iii. If Client fails to perform any of its responsibilities as set forth in this Agreement, fails to pay Emergicon for its specialized professional services within thirty (30) days of the date such payment becomes due, takes any actions which Emergicon, in its sole discretion, determines to be unethical, illegal, immoral or non-compliant, or fails to cooperate with Emergicon in any way that prevents, impedes, obstructs or delays Emergicon in the performance of the Specialized Professional Services set forth in this Agreement.
- d. Upon termination for any reason, Emergicon shall perform follow-up on any open accounts submitted by Emergicon on Client's behalf for a period not to exceed ninety (90) days from the date of termination. Emergicon shall have no responsibility to perform such follow-up in the event Client takes any actions which prevent Emergicon from engaging in such follow-up, or in the event that Client has any unpaid balances due to Emergicon on the date of termina ion of this Agreement.
- e. Upon termination for any reason, Client shall be responsible to pay the fees set forth in Paragraph 10 below, for all revenues collected by Emergicon on Client's behalf during

the 90-day follow-up period set forth in Paragraph 7(d) above. After notice of termination is given, all Emergicon invoices are due and payable by Client within five (5) days of same. In the event that Client does not remit payment on any such invoice within five (5) days of the invoice, Emergicon shall have no responsibility to perform any further follow-up on open accounts, notwithstanding the provisions of Paragraph 7(d) above.

8. External and Internal Audits.

- a. Client shall immediately notify Emergicon if there has been any prepayment audit or review, post payment audit or review, or any investigation or other formal inquiry into the billing fractices of Client and/or Emergicon, or claims submitted by Emergicon on behalf of Client, where such audit or investigation is or appears to have been initiated by any governmental agency, insurer, payer, carrier, Medicare Administrative Contractor, Recovery Audit Contract, Zone Program Integrity Contractor, Medicaid Fraud Control Unit, other Medicare or Medicaid contractor or or other agency or entity authorized to carry out any such audit or investigation. This obligation shall survive termination of this Agreement for any reason.
- b. The Client bears sole responsibility for obtaining and paying for any legal or consulting assistance necessary in defending itself in any such audit or investigation. Emergicon shall assist Client in producing any records, reports or documents in its possession which pertain to the audit or investigation and may charge Client a reasonable fee for copying, preparation, assembly or retrieval of such documents or reports. Emergicon shall have no obligation to perform any duties under this Paragraph 8(b) following termination of this Agreement for any reason.
- c. Client is solely responsible for repaying any overpayments or recoupments sought or imposed by any insurer, carrier, payer or governmental agency or contractor, including interest, civil monetary penalties, fines or other such assessments.
- d. Client understands and acknowledges that Emergicon, as part of its complicate program, may on occasion, and at its sole discretion, perform or contract for the performance of periodic, random, internal audits of its coding, billing and other business practices. These voluntary, internal compliance audits may reveal the existence of Client overpayments, and Client a grees that any such overpayments identified by Emergicon in its internal auditing process will be refunded by Client as described in more detail in Paragraph 2(h) of this Agreement.

Disposition of Funds.

- a. All funds Emergicon receives from third party payers, patients or other sources for ambulance services provided by Client shall be made in the name of Client and forwarded monthly to Client or deposited into a Client account as directed by Client.
- b. If Client desires that its patients be able to pay their accounts utilizing credit cards, then Emergicon shall accept credit card payments on behalf of Client's patients in a manner that is secure and agreed upon by the parties, and only to the extent possible and feasible, without making Emergicon a collection agency and responsible for compliance with the federal Fair Debt Collection Practices Act and other state or federal debt collection laws.

 Emergicon shall not accept a reassignment of any benefits where prohibited by law.

Compensation.

- a. In exchange for the Specialized Professional Services described in this Agreement, Client shall pay Emergicon a fee of one thousand dollars (\$1,000.00) per year for billing services. Credit card payments accepted by Emergicon will be charged an additional two percent (2.0%). Please refer to Addendum A where applicable for additional.
- b. If Client instructs Emergicon to collect on an account(s) initially billed by another Contractor, Emergicon shall be compensated and paid for the collection efforts on said account in accordance with the following schedule: Twenty-two Percent (22%) of the total amount collected on the account.
- c. If Client allows Emergicon to continue to pursue accounts with balances beyond '20 days from the date of transport, Emergicon shall be compensated and paid for the collection efforts on said account in accordance with the following schedule: Eighteen Percent (18%) (if the total amount collected on the account.
- d. The fees payable by Client to Emergicon shall be calculated and invoiced to Client on a periodic basis established by Emergicon in accordance with the receipts report generat d by Emergicon.
- e. Emergicon shall submit invoices to Client on a periodic basis established by Emergicon. Invoices are to be paid by Client within thirty (30) days of the invoice date. Emergicon reserves the right to add simple interest at an annual rate of 18%, compounded monthly, on all where Emergicon has not received payment within thirty (30) days of the date of its invoice.
- f. In the event that Client is obligated to refund any overpayment or credit balance as set forth in Paragraph 2(h), fees paid to Emergicon by Client for such refunded overpayment or credit balance shall not be credited or refunded to Client.
- g. Beginning on the first of each new calendar year, the then current fee shall be increased by the Employment Cost Index or, Total Compensation, Not Seasonally Adjusted, Private Industry for Professional, Scientific and Technical Services published by the Bureau of Labor Statistics of the US Nueces County ESD #2 of Labor for the twelve months ending the preceding year.
- h. Client agrees to reimburse Emergicon for any and all sales tax liabilities that may ari e as a result of this Agreement.
- Client agree to reimburse \$35 for any checks returned for insufficient funds as a result of this Agreement.

11. Indemnification and Insurance.

- a. In addition to any specific indemnification provisions set forth in this Agreement, to the extent allowed by law, Client shall hold harmless, indemnify and defend Emergicon and/or its employees, officers, directors and agents from and against any and all costs, claims, losses, damages, liabilities, expenses, judgments, penalties, fines, and causes of action to the extent caused by any act or omission on the part of Client or its agents, servants, volunteers, contractors or employees. This provision shall include all costs and disbursements, including without limitation court costs and reasonable attorneys' fees.
- b. In addition to any specific indemnification provisions set forth in this Agreement, Emergicon shall hold harmless, indemnify and defend Client and/or its employees, officers, directors and agents from and against any and all costs, claims, losses, damages, liabilities, expenses, judgments, penalties, fines and causes of action to the extent caused by any willful or grossly negligent misconduct of any Emergicon agent, servant, contractor or employee and which relate to the Specialized Professional Services performed by Emergicon under this Agreement.
- c. Emergicon shall maintain errors and omissions insurance coverage in an amount not less than \$1,000,000. Emergicon shall provide proof of such coverage to Client upon reasonable written request for same.
- d. Notwithstanding any other provision of this Agreement, Emergicon shall not be liable for any damages, including but not limited to loss in profits, or for any special, incidental, indirect, consequential or other similar damages suffered in whole, or in part, in connection with this Agreement. Any liability of Emergicon shall not exceed any amounts paid to Emergicon by Client under this Agreement for any disputed billing performed by Emergicon on behalf (f Client.
- e. Where any provision of this Agreement obligates Client to defend, indemn fy and/or hold harmless Emergicon, such agreement shall include any claims, losses, assessments or damages of any kind, and shall apply equally to Emergicon and to its employees, owners agents, contractors, attorneys, consultants, accountants and servants.
- 12. <u>Confidentiality.</u> Neither Emergicon nor Client shall, during the term of this Agreement or for any extension hereof, for any reason, disclose to any third parties any proprietary information regarding the other party unless required to do so by law, regulation or subpoena. For purposes of this Agreement, "proprietary information" shall include, but not be limited to, pricing or rate information, information pertaining to contracts with payers, insurers, facilities, ambulance providers, health care systems, or other such parties, audit requests, audit results, billing processes, client lists or other such information.
- 13. <u>HIPAA Business Associate Assurances.</u> Emergicon agrees to appropriately safeguard protected health information ("PHI") that is created, received, maintained, or transmitted on behalf of Client in compliance with the applicable provisions of Public Law 104-191 of August 21, 1996, known as the Health Insurance Portability and Accountability Act of 1996, Subtitle F Adminimative Simplification, Sections 261, et seq., as amended ("HIPAA"), and with Public Law 111-5 C February 17, 2009, known as the American Recovery and Reinvestment Act of 2009,

Title XII, Subtitle D – Privacy, Sections 13400, et seq., the Health Information Technology and Clinical Health Act, as amended (the "HITECH Act").

General Provisions

- i. Meaning of Terms. The terms used in this Agreement shall have the same meaning as those terms defined in HIPAA.
- ii. <u>Regulatory References</u>. Any reference in this Agreement to a regulatory section means the section currently in effect or as amended.
- iii. <u>Interpretation</u>. Any ambiguity in this Agreement shall be interpreted to permit compliance with HIPAA.

b. Obligations of Emergicon

Emergicon agrees that it will:

- i. Not use or further disclose PHI other than as permitted or required by this agreement or as required by law;
- ii. Use appropriate safeguards and comply, where applicable, with the HIPAA Security Rule with respect to electronic protected health information ("e-PHI") and implement appropriate physical, technical and administrative safeguards to prevent use or disclosure of PHI other than as provided for by this Agreement;
- iii. Report to Client any use or disclosure of PHI not provided for by this Agreement of which it becomes aware, including any security incident (as defined in the HIPAA Security Rule) and any breaches of unsecured PHI as required by 45 CFR §164.410. Breaches of unsecured PHI shall be reported to Client without unreasonable delay but in no case later than 60 days after discovery of the breach;
- iv. In accordance with 45 CFR 164.502(e)(1)(ii) and 164.308(b)(2), ensure that any subcontractors that create, receive, maintain, or transmit PHI on behalf of Emergi on agree to the same restrictions, conditions, and requirements that apply to Emergicon with respect to such information;
- v. Make PHI in a designated record set available to Client and to an individual who has a right of access in a manner that satisfies Client's obligations to provide access to PHI a accordance with 45 CFR §164.524 within 30 days of a request;
- vi. Make any amendment(s) to PHI in a designated record set as directed by Client, or take other measures necessary to satisfy Client's obligations under 45 CFR §164.526;
- vii. Maintain and make available information required to provide an accounting of disclosures to Client or an individual who has a right to an accounting within 60 days and as necessary to satisfy Client's obligations under 45 CFR §164.528;

- viii. To the extent that Emergicon is to carry out any of Client's obligations under the HIPAA Privacy Rule, Emergicon shall comply with the requirements of the Privacy I ule that apply to Client when it carries out that obligation;
- ix. Make its internal practices, books, and records relating to the use and disclosure of PHI received from, or created or received by Emergicon on behalf of Client, available to the Secretary of the Nueces County ESD #2 of Health and Human Services for purposes of determining Emergicon and Client's compliance with HIPAA and the HITECH Act;
- x. Restrict the use or disclosure of PHI if Client notifies Emergicon of any restriction on the use or disclosure of PHI that Client has agreed to or is required to abide by under 45 CFR §164.522; and
- et seq.), Emergicon agrees to assist Client in complying with its Red Flags Rule obligations by:
 (a) implementing policies and procedures to detect relevant Red Flags (as defined under 16 C.F.R. §681.2); (b) taking all steps necessary to comply with the policies and procedures of Client's Identity Theft Prevention Program; (c) ensuring that any agent or third party who performs services on its behalf in connection with covered accounts of Client agrees to implement reasonable policies and procedures designed to detect, prevent, and mitigate the risk of identity theft; and (d) alerting Client o any Red Flag incident (as defined by the Red Flag Rules) of which it becomes aware, the steps it has taken to mitigate any potential harm that may have occurred, and provide a report to Client o any threat of identity theft as a result of the incident.

Permitted Uses and Disclosures by Emergicon

The specific uses and disclosures of PHI that Emergicon may make on behalf of Client include:

- The preparation of invoices to patients, carriers, insurers and others responsible for payment or reimbursement of the Services provided by Client to its patients, as set forth in this Agreement;
- Preparation of reminder notices and documents pertaining to collections of overdue accounts;
- iii. The submission of supporting documentation to carriers, insurers and other payers to substantiate the healthcare services provided by Client to its patients or to appeal denials of payment for the same; and
- iv. Other uses or disclosures of PHI as permitted by HIPAA necessary to perform the Services that Emergicon has been agreed to perform on behalf of Client, as set forth in this / greement.

d. Termination

- a. Notwithstanding the termination provisions set forth in Paragraph 7 of this Agreement, Client may terminate this Agreement if Client determines that Emergicon has violated a material term of the HIPAA Business Associate Assurances set forth in this Paragraph 13.
- b. If either party knows of a pattern of activity or practice of the other party that constitutes a material breach or violation of the other party's obligations under this Agreement, that party shall take reasonable steps to cure the breach or end the violation, as applicable, and, if such steps are unsuccessful, terminate this Agreement, according to the provisions set forth in Paragraph 7 of this Agreement, if feasible.
- c. Upon termination of this Agreement for any reason and upon the written request of Client and pursuant to the other terms and conditions set forth in this Agreement, Emergi on shall return to Client or destroy all PHI received from Client, or created, maintained, or received by Emergicon on behalf of Client that Emergicon still maintains in any form. If return or destriction is infeasible, the protections of this Agreement will extend to such PHI.

14. Compliance.

- Emergicon will conduct its activities and operations in compliance with all state and federal statutes, rules and regulations applicable to billing activities.
- b. Client shall conduct its activities, operations and documentation in compliance with all applicable state and federal statutes, rules and regulations. Client expressly represents and warrants that it is under no legal impediment to billing or receiving reimbursement for its services, and that all of Client's personnel are appropriately licensed and/or certified to furnish the services provided by Client. Client agrees to defend, indemnify and hold harmless, to the extent allowed by law, Emergicon from any and all claims, damages and losses in the event that Client sends accounts to Emergicon which are ineligible for billing and/or reimbursement for any reason.
- c. Each party is responsible for monitoring and ensuring its own compliance with all applicable state and federal laws and regulations pertaining to billing and reimbursement for its s rvices. However, either party which becomes aware of a violation of any such state or federal laws or regulations or of a questionable claim or claim practice agrees to notify the other party within fifteen (15) days so the other party may appropriately address the matter.
- d. The parties represent that they are not the subject of any actions or investigations pertaining to its participation in or standing with any state or federal health care program, are not subject to exclusion from any state and/or federal health care program, and that no persons providing services for which reimbursement is sought were at the time such services were rendered excluded from any state or Federal health care program.
- e. The parties recognize that this Agreement is at all times subject to applicable state, local, and federal laws and shall be construed accordingly. The parties further recognize that this Agreement may become subject to or be affected by amendments in such laws and regulations or to new legislation or regulations. Any provisions of law that invalidate, or are otherwise inconsistent with, the material terms and conditions of this Agreement, or that would

cause on 3 or both of the parties hereto to be in violation of law, shall be deemed to have superseded the term; of this Agreement and, in such event, the parties agree to utilize their best efforts to modify ne terms and conditions of this Agreement to be consistent with the requirements of such law(s) in order to effectuate the purposes and intent of this Agreement. In the event that any such laws or regulations affecting this Agreement are enacted, amended or promulgated, either party may propose to the other a written amendment to this Agreement to be consistent with the provisions of such laws or regulations. In the event that the parties do not agree on such written amendments within thirty (30) days of receipt of the proposed written amendments, then either party may terminate this Agreement without further notice, unless this Agreement would expire earlier by its terms.

- f. Non-Engagement of Individuals on the OIG Exclusion List. The parties further warrant that each will take all reasonable steps as set forth by the Office of Inspector General, United States Nueces County ESD #2 of Health and Human Service, to ensure that it does not employ or otherwise engage individuals who have been excluded from participation in federal health care programs. The parties agree to periodically check the OIG exclusion website to ensure that em, loyees, volunteers and all others providing services for each respective organization are not excluded. The website is: http://exclusions.oig.hhs.gov.
- 5. <u>Independent Contractor Relationship.</u> Emergicon and Client stand in an independent contractor relationship to one another and shall not be considered as joint ventures or partners and nothing herein shall be construed to authorize either party to act as general agent for the othe. There is no liability on the part of Emergicon to any entity for any debts, liabilities or obligations incurred by or on behalf of the Client.
- 16. Prevention of Performance. If a party's obligation to perform any duty hereunder is rendered impossible of performance due to any cause beyond such party's control, including, without limitation, an act of God, war, civil disturbance, fire or casualty, labor dispute, hardware or software failures beyond the party's control, or governmental rule, such party, for so long as such condition exists, shall be excused from such performance, provided it promptly provides the other party with written notice of its inability to perform stating the reasons for such inability and provided that the party takes all appropriate steps as soon as reasonably practicable upon the termination of such condition to recommence performance.
- 17. <u>Assignment.</u> This Agreement may be assigned by Emergicon to any successors or assigns of Emergicon. This Agreement may not be assigned by Client without the express written consent of Emergicon. This Agreement shall be binding upon all successors and assigns.

18. <u>Notices.</u> Notices required to be given under this Agreement shall be made to the parties at the following addresses and shall be presumed to have been received by the other party (i) three days after mailing by the party when notices are sent by First Class mail, postage prepaid; (ii) upon transmission (if sent via facsimile with a confirmed transmission report); or (iii) upon receipt (if sent by and delivery or courier service).

Emergicon:

Client:

Emergicon, LLC. PO Box 180446

Nueces County ESD #2 337 Yorktown Blvd

Dallas, TX 75218

Corpus Christi, Texas 78418

Fax: (469) 602-5542

- 19. <u>Non-Competition and Non-Solicitation Clause.</u> Without prior, written authorization from Emergicon, Client shall not:
- a. During the term of this Agreement, or for two (2) years following its expiration or termination for any reason, employ, retain as an independent contractor, or otherwise in any way hire any personnel currently employed or employed at any time during the term of this Agreement by Emergicon. Client expressly agrees that in the event of a breach of this provision, Emergicon shall be entitled to a placement fee of two times the annual salary paid by Emergicon to such employee at the time such employee left employment of Emergicon.
- b. During the term of this Agreement, or for a period of two (2) years following its expiration or termination for any reason, engage in the provision of billing services for any other a bulance service, medical transportation organization, fire Nueces County ESD #2, or emerge cy medical services organization. Nothing in this Paragraph shall be interpreted to prohibi Client from performing its own in-house billing and/or accounts receivable management following the expiration or proper termination of this Agreement.
- 20. Governing Law and Forum Selection Clause. This Agreement shall be deemed to have been made and entered into in Texas and shall be interpreted in accordance with the laws thereof, without regard to conflicts of laws principles. The parties expressly agree that the exclusive forum for resolving any legal disputes under this Agreement shall be the state or federal courts serving Corpus Christi, Texas. Client expressly agrees to personal jurisdiction and venue in any such court.

IN WITNESS WHEREOF, the parties have executed this Agreement to commence on the date first above written. Client represents that the individual who has executed this Agreement on behalf of the Client is authorized by Client and by law to do so.

EMERGICON, LLC.		CLIENT	
Ву:		Ву:	
Signature	Date	Signature	Date
Print N. me		Print Name	
Title		Title	

Nueces County Emergency Services District #2 Balance Sheet

Accrual Basis

As of August 31, 2018

	Aug 31, 18
ASSETS	
Current Assets	
Checking/Savings	
American Bank-Operating	115,319.77
American Bank-Money Market	213,547.18
CD-	142,000.00
Total Checking/Savings	470,866.95
Other Current Assets	
Allowance for Uncollectible	-1,959.16
Prepaid Appraisal Fees	2,944.99
Prepaid Insurance	20,199.97
Taxes Receivable	33,497.81
Total Other Current Assets	54,683.61
Total Current Assets	525,550.56
Fixed Assets	
Accumulated Depreciation	-1,232,963.33
Building	560,554.00
Equipment	1,896,324.30
Land	21,741.52
Total Fixed Assets	1,245,656.49
TOTAL ASSETS	1,771,207.05

Nueces County Emergency Services District #2 Balance Sheet

Accrual Basis

As of August 31, 2018

	Aug 31, 18
LIABILITIES & EQUITY Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	2,673.02
Total Accounts Payable	2,673.02
Credit Cards	
Card Service Visa-Scott	1,470.13
Card Service Visa Hominick	534.82
O'Reilly Auto Parts	-258.77
Tractor Supply	648.88
Total Credit Cards	2,395.06
Other Current Liabilities	Walter Settena 1 (2000)
Accrued Interest	12,099.47
AFLAC Insurance Payable	220.44
SUTA Tax Payable	277.99
TCDRS-Payable	5,250.80
Total Other Current Liabilities	17,848.70
Total Current Liabilities	22,916.78
Long Term Liabilities	
N/P-Gov Capital	135,000.00
N/P-Oshkosh Capital	385,281.11
N\P-Wells Fargo (Bldg.)	-0.01
Total Long Term Liabilities	520,281.10
Total Liabilities	543,197.88
Equity	
Investment in Gen.Fixed Asset	147,277.00
Unreserved Fund Balance	835,354.03
Net Income	245,378.14
Total Equity	1,228,009.17
TOTAL LIABILITIES & EQUITY	1,771,207.05

Nueces County Emergency Services District #2 Profit & Loss Budget Performance August 2018

Total Communication & Software	Xerox Firehouse Software	Communication Equipment	City of CC Radio System	Cell Phones	Communication & Software Active 911	Total Advertising & Promotion	Advertising & Promotion Advertising Fire Prevention Service Awards	Total Administrative	Administrative Bank Charges & Postage Office Supplies Water Cooler	Total Accounting & Professional F	Expense Accounting & Professional Fees Accounting/Auditor Legal Fees NCAD-Appraisal District Fees NCAD-Tax Collection Fees	Total Income	Ordinary Income/Expense Income Income-NCAD-Property Taxes Income-Interest Income-Miscellaneous	
1,930.90	0.00	78.652	971.15	699.88	0.00	1,302.23	900.00 0.00 402.23	433.88	92.14 247.34 94.40	3,184.43	900.00 0.00 981.00 1,303.43	25,353.90	8,811.44 302.46 16,240.00	Aug 18
1,460.00	0.00	0.00	1,080.00	380.00	0.00	2,850.00	2,850.00	550.00	150.00 300.00 100.00	3,780.00	450.00 0.00 830.00 2,500.00	1,000.00	1,000.00 0.00 0.00	Budget
470.90	0.00	79.87	-108.85	319.88	0.00	-1,547.77	-1,950.00 402.23	-116.12	-57.86 -52.66 -5.60	-595.57	450.00 0.00 151.00 -1,196.57	24,353.90	7,811.44 302.46 16,240.00	\$ Over Budget
16.551.84	2,500.00	4,4/1.43	4,506.79	4,715.12	352.50	2,621.08	1,242.00 0.00 1,379.08	5,345.47	929.18 3,227.14 1,189.15	55,584.72	11,100.00 1,703.00 11,648.01 31,133.71	1,185,436.82	1,012,258.49 582.05 172,596.28	Sep '17 - Aug 18
13.091.00	1,900.00	0.00	4,320.00	4,560.00	411.00	6,500.00	5,700.00 0.00 800.00	6,600.00	1,800.00 3,600.00 1,200.00	50,860.00	10,900.00 0.00 9,960.00 30,000.00	1,008,000.00	1,008,000.00 0.00 0.00	YTD Budget
3,460.84	600.00	2,5/7.43	186.79	155.12	-58.50	-3,878.92	-4,458.00 0.00 579.08	-1,254.53	-870.82 -372.86 -10.85	4,724.72	200.00 1,703.00 1,688.01 1,133.71	177,436.82	4,258.49 582.05 172,596.28	\$ Over Budget
13,091.00	1,900.00	0.00	4,320.00	4,560.00	411.00	6,500.00	5,700.00 0.00 800.00	6,600.00	1,800.00 3,600.00 1,200.00	50,860.00	10,900.00 0.00 9,960.00 30,000.00	1,008,000.00	1,008,000.00 0.00 0.00	Annual Budget

Nueces County Emergency Services District #2 Profit & Loss Budget Performance August 2018

Total Maintenance - Vehicles	Maintenance - Vehicles Fuel & Oil Maintenance-Vehicle Scheduled Maintenance-Vehicle Unschedul	Total Maintenance - Equipment	Medical Supply Replacement Minor Equip. Purchases SCBA Maintenance Uniforms	Maintenance - Equipment Equipment Testing Maior Equipment Purchases	Total Maintenance - Building	Maintenance - Building Building Ice Machine Pest Control Station Maintenance	Licenses	Total Interest Expense	Interest Expense Building & Truck Interest Expense - Other	Total Insurance	Insurance-Malpractice Insurance-Vehicle Insurance-Workers Comp.	Insurance Insurance-Bidg & Flood Insurance-Employee Health	
5,596.75	988.28 1,694.45 2,914.02	10,813.45	47.98 6,960.99 300.00 1,305.98	0.00 2.198.50	1,230.47	175.00 85.00 970.47	0.00	1,287.65	1,287.65	5,574.38	0.00 -1,898.67 2,200.59	1,401.09 3,871.37	Aug 18
1,750.00	750.00 0.00 1,000.00	2,011.00	0.00 1,200.00 100.00 711.00	0.00	1,175.00	175.00 0.00 1,000.00		300.00	300.00	8,525.00	900.00	1,325.00 5,500.00	Budget
3,846.75	238.28 1,694.45 1,914.02	8,802.45	47.98 5,760.99 200.00 594.98	0.00 2.198.50	55.47	0.00 85.00 -29.53		987.65	987.65	-2,950.62	-2,798.67 1,400.59	76.09 -1,628.63	\$ Over Budget
46,878.49	11,332.99 4,879.53 30,665.97	59,205.77	4,966.55 33,663.67 2,088.61 12,744.32	400.00 5.342.62	17,069.16	2,100.00 340.00 14,629.16	0.00	14,682.82	14,682.82 0.00	98,905.77	0.00 10,363.24 20,997.24	16,649.04 50,896.25	Sep '17 - Aug 18
33,000.00	9,000.00 12,000.00 12,000.00	32,836.00	0.00 14,400.00 1,200.00 9,236.00	4,000.00 4,000.00	14,440.00	2,100.00 340.00 12,000.00	0.00	6,600.00	6,600.00	126,500.00	0.00 10,800.00 33,800.00	15,900.00 66,000.00	YTD Budget
13,878.49	2,332.99 -7,120.47 18,665.97	26,369.77	4,966.55 19,263.67 888.61 3,508.32	-3,600.00 1.342.62	2,629.16	0.00 0.00 2,629.16	0.00	8,082.82	8,082.82 0.00	-27,594.23	0.00 436.76 -12,802.76	749.04 -15,103.75	\$ Over Budget
33,000.00	9,000.00 12,000.00 12,000.00	32,836.00	0.00 14,400.00 1,200.00 9,236.00	4,000.00 4,000.00	14,440.00	2,100.00 340.00 12,000.00	0.00	6,600.00	6,600.00	126,500.00	0.00 10,800.00 33,800.00	15,900.00 66,000.00	Annual Budget

Nueces County Emergency Services District #2 Profit & Loss Budget Performance August 2018

	Aug 18	Budget	\$ Over Budget	Sep '17 - Aug 18	YTD Budget	\$ Over Budget	Annual Budget
Training, Certifications & Dues						<u> </u>	
County ID Cards	0.00	0.00	0.00	0.00	770.00	-770.00	//0.00
Fire Chief Assoc Qtr Meetings	0.00	175.00	-175.00	0.00	700.00	-700.00	700.00
Membership Dues	492.15	130.00	362.15	2,572.87	4,300.00	-1,727.13	4,300.00
SFFMA-Certifications	0.00	0.00	0.00	0.00	400.00	-400.00	400.00
Training-Schools	164.00	700.00	-536.00	8,274.97	7,000.00	1,274.97	7,000.00
Travel Expenses	48.79	600.00	-551.21	4,100.59	7,200.00	-3,099.41	7,200.00
TX Commission on Fire Pro.Cert.	111.49	300.00	-188.51	1,066.42	3,600.00	-2,533.58	3,600.00
Total Training, Certifications & Du	816.43	1,905.00	-1,088.57	16,014.85	23,970.00	-7,955.15	23,970.00
Utilities	835.71	700.00	135.71	7.724.68	7,850.00	-125.32	7,850.00
Internet Services	307.63	120 00	187 63	1 861 02	1.440.00	421.02	1,440.00
Telephone	382.22	310.00	72.22	4,170.72	3,720.00	450.72	3,720.00
Water	338.99	165.00	173.99	2,008.24	1,980.00	28.24	1,980.00
Total Utilities	1,864.55	1,295.00	569.55	15,764.66	14,990.00	774.66	14,990.00
Wages & Employee Expense Payroll Tax Expense	3,029.42	3,318.00	-288.58	41,696.72	43,129.00	-1,432.28	43,129.00
Payroll Wages & Salaries	38,539.61	41,471.00	-2,931.39	509,424.03	539,115.00	-29,690.97	539,115.00
Physicals/Shots/Drug Test	940.95	0.00	940.95	1,995.95	510.00	1,485.95 -6 682 65	510.00 45.000.00
							22 754 0
Total Wages & Employee Expense	45,263.21	48,539.00	-3,275.79	591,434.05	627,754.00	-36,319.95	627,754.00
Total Expense	79,298.33	74,140.00	5,158.33	940,058.68	957,141.00	-17,082.32	957,141.00
Net Ordinary Income	-53,944.43	-73,140.00	19,195.57	245,378.14	50,859.00	194,519.14	50,859.00
Net Income	-53,944.43	-73,140.00	19,195.57	245,378.14	50,859.00	194,519.14	50,859.00

Type	Date	Num	Name	Memo	Debit	Credit	Balance
American Bank-Operating	ating				1 212 77		313,270.55
Deposit	00/07/2010		7	Deposit	1,010.11	77 20	314 832 3
Check	08/02/2018	6005	Everett Scott	Reimburse for I CFP Fee		3 108 50	312 633 82
Check	08/02/2018	6066	Daco Fire Equipment	Invoice # 17806 & 17807		2,198.50	312,033.02
Check	8107/70/80	7909	Rescue Gear	Invoice # 14296		478 68	343,058,00
Check	08/02/2018	6068	DRC Bookkeeping & Payroll	Invoice # 5790 July	23	4/8.68	312,056.00
Deposit	08/02/2018			Deposit	67.49		372,123.49
Deposit	08/02/2018			Deposit	14,556.63		320,002.12
Deposit	08/02/2018			Deposit	1,107.16		327,789.28
Deposit	08/03/2018			Deposit	585.64		328,374.92
Deposit	08/06/2018			Deposit	96.169	20 22	329,000.00
Check	08/07/2018	6069	Gary Graham	Reimburse for Domino's Pizza		50.00	329,011.05
Check	08/07/2018	6070	Texas Shoreline News	Invoice #108-Legal Notices		811.00	326,411.03
Check	08/07/2018	6071	Toyota Industrial Equipment	Invoice # 740016292/747026378		1,011.00	320,000.03
Check	08/07/2018	6072	Charles Walker	Inspections & Minor Rep Air Paks		100.00	326,363,03
Check	08/07/2018	6073	NAFECO	Invoice # 938890		237.02	320,203.03
Check	08/07/2018	6074	Nova Healthcare, PA	Invoice # 1054709		47.98	325,445.15
Check	0107/10/00	6700	Coast medical supply	111VOICE # 07 13		835.22	324 561 93
Check	08/07/2018	6077	Cullings Water	Acct # 442-00104521-4		94.40	324,467.53
Check	08/07/2018	6078	Mission Restaurant Supply	Invoice # 2176189/Acct # 158731		175.00	324,292.53
Check	08/07/2018	6079	City of Corpus Christi	Acct # 203613143		169.00	324,123.53
Check	08/07/2018	6080	AT&T	Acct # 361 937-2645 314 6		382.22	323,741.31
Check	08/07/2018	6081	AT&T U-Verse	Acct #137361972		116.03	323,625.28
Check	08/07/2018	6082	AT&T Mobility	Acct # 287286074500	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	314./5	323,310.33
Deposit	08/07/2018			Deposit	3,347.00		327,683,66
Deposit	08/07/2018			Deposit	1,020.13	3 000 00	323 783 66
Check	08/08/2018	6083	Bluffs Landing Marina	1 Year Boat Slip Rental		135,000.00	188 783 66
Cneck	08/08/2018	6084	Brunswick Comercial	Invoice # 5955/80	887 80	100,000.00	189 671 55
Deposit	08/08/2018			Deposit	575.05		190.246.60
Check	08/10/2018	10490	Everett D. Scott	Coposi		2.211.27	188,035.33
Check	08/10/2018	10500	Nicholas Beseda			93.31	187,942.02
Check	08/10/2018	10510	John P Hominick			1,626.25	186,315.77
Check	08/10/2018	1052D	Juan O Leal			450.48	185,865.29
Check	08/10/2018	1053D	Adam T. Codosh			542.40	185,322.89
Check	08/10/2018	1054D	Brandon Sekula			754.26	184,568.63
Check	08/10/2018	1055D	Matthew M King			490.89	184,077.74
Check	08/10/2018	1056D	lan G. Wheeldon			1,343.55	182,/34.19
Check	08/10/2018	1057D	Cheyene C. Gray			1,185.07	181,549.12
Check	08/10/2018	1058D	Ryan R. Ramirez			779.66	179,300.33
Check	08/10/2018	10000	Saran C. Simonsen			1 902 44	177 218 83
Check	08/10/2019		Chades Harris			247.13	176.971.70
Check	08/10/2018	1000	Charles Harris			1.028.70	175.943.00
Check	08/10/2018	Draft	Jacob Espilloza			4.356.18	171,586.82
Check	08/10/2018	Dian	Christophor Burkhardt			1,359,10	170,227,72
Check	08/10/2018	Draft	CHISOPHEI DUNIAIOL			366.54	169,861.18
Deposit	08/10/2018	Ciair	11	Deposit	259.94		170,121.12
Check	08/13/2018	6085	Nippon Life Benefits			98.76	170,022.36
Cher	08/13/2018	6086	SFFMA	/ Int #14901/Pumping Apparat		348.49	169,673.87
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1,000,021.00	0.00	101,000.00					Total Edulottiett
1 896 324 30	0.00	151 060 00					Total Equipment
1,744,364.30 1,879,364.30 1,896,324.30		135,000.00 16,960.00	New Rescue Boat XTV 1000 Single Dies STD	Brunswick Comercial Diamond B. Tractors & Equipment	6084 6107	08/08/2018 08/27/2018	Equipment Check Check
560,554.00 560,554.00							Building Total Building
-1,232,963.33 -1,232,963.33						eciation Depreciation	Accumulated Depreciation Total Accumulated Depreciation
33,497.81 33,497.81						ible	Taxes Receivable Total Taxes Receivable
20,199.97	5,050.01	0.00				nce	Total Prepaid Insurance
25,249.98 20,199.97	5,050.01		Rec Prepaid Insurance Exp		840	08/10/2018	Prepaid Insurance General Journal
2,944.99	981.00	2,944.00				isal Fees	Total Prepaid Appraisal Fees
981.99 0.99 2,944.99	981.00	2,944.00	Record Prepaid Appraisal Dist Fees Acct # 10-310-360	Nueces County Appraisal District	838 6111	Fees 08/10/2018 08/31/2018	Prepaid Appraisal Fees General Journal Check
-1,959.16 -1,959.16						ollectible Uncollectible	Allowance for Uncollectible Total Allowance for Uncollectible
142,000.00	0.00	142,000.00	ď				Total CD-
0.00 142,000.00		142,000.00	Open CD			08/14/2018	CD- Transfer
213,547.18	142,003.50	302.46				k-Money Market	Total American Bank-Money Market
355,248.22 213,248.22 213,244.72 213,547.18	142,000.00 3.50	302.46	Open CD Service Charge Interest			08/14/2018 08/31/2018 08/31/2018 08/31/2018	American Bank-Money Market Transfer 08/14/20 Check 08/31/20 Deposit 08/31/20
115,319.77	226,473.34	28,522.56				k-Operating	Total American Bank-Operating
115,465.64 115,309.98 115,319.77	236.00 155.66	9.79	Acct # 287286074500 Invoice 29187 Deposit	AT&T Mobility Fire Supply Inc	6116 6117	08/31/2018 08/31/2018 08/31/2018	Check Check Deposit
119,568,98 119,404,98 118,917.96 115,973.96 115,871.63 115,701.64	78.25 164.00 487.02 2,944.00 102.33 169.99		Invoice # 1681578 Invoice 5829 August Invoice # 093018 Invoice # 1548368/1548013 Acct # 203613143	Nippon Life Benefits Texas Facilities Commission DRC Bookkeeping & Payroll Nueces County Appraisal District Gulf Coast Paper Company City of Corpus Christi	6110 6110 6111 6111	08/31/2018 08/31/2018 08/31/2018 08/31/2018 08/31/2018 08/31/2018	Check Check Check Check Check Check
Balance	Credit	Debit	Memo	Name	Num	Date	Туре

Sa-	Credit Card Cha 08/23/2018 Credit Card Cha 08/24/2018 Credit Card Cha 08/28/2018 Credit Card Cha 08/29/2018 Credit Card Cha 08/29/2018	o8/01/2018 08/01/2018 08/07/2018 08/07/2018 08/07/2018 08/08/2018 08/08/2018 08/09/2018 08/13/2018 08/15/2018 08/15/2018 08/15/2018 08/15/2018 08/15/2018	Land Total Land Accounts Payable Bill 08/17/2018 18 18 18 18 18 18 18 18 18 18 18 18 1
	Trophyland Box Brothers CE Solutions National Medal of Honor Wal-Mart Wal-Mart Wal-Mart Gulf Coast Graphics Texas Department of State Health S Wal-Mart	Wal-Mart Nova Healthcare, PA CDW Government LLC Texas Commission on Fire Protection Murphy USA Murphy USA Wal-Mart Altex Texas Commission on Fire Protection Gulf Coast Graphics Gulf Coast Graphics Trophyland Laguna Reef Rest Card Services 0019	51148 Famous Uniforms 1681 Texas Facilities Commission 18-13 Heat Safety Equipment 94443 NAFECO 944439 NAFECO 18131 Daco Fire Equipment Charles Walker
	J P Hominick	Acct # 0019	Acct # 16080 August 2018
1,421.70		1,421.70	0.00
2,139.48	41.64 100.00 195.75 51.74 32.92 6.24 8.23 55.50 64.00 51.63	9.44 123.05 259.87 56.49 41.50 100.00 79.00 77.88 87.17 284.50 146.00 76.95 60.45	71.98 314.00 393.04 552.00 552.00 690.00 100.00
-1,470.13	-904.12 -1,004.12 -1,199.87 -1,251.61 -1,284.53 -1,290.77 -1,299.00 -1,354.50 -1,418.50	-752.35 -761.79 -884.84 -1,144.71 -1,201.20 -1,242.70 -1,342.70 -1,499.58 -1,586.75 -1,871.25 -2,017.25 -2,094.20 -2,154.65 -732.95	21,741.52 21,741.52 0.00 -71.98 -385.98 -779.02 -1,331.02 -1,883.02 -2,573.02 -2,673.02 -2,673.02

-303.66 -137.22 -220.44							
	83.22 83.22	166.44	Rec Payroll Summary 8/10/18 Acc# LCG83 Rec payroll summary 8/24/18	AFLAC	842 6098 844	yable 08/10/2018 08/22/2018 08/24/2018	AFLAC Insurance Payable General Journal 08/ Check 08/ General Journal 08/
-12,099.47	1,287.65	0.00					Total Accrued Interest
-12,099.47	1,287.65		Accrue Interest Exp Boat & Truck		839	08/10/2018	Accrued Interest General Journal
-648.88	648.88	0.00					Total Tractor Supply
-448.91 -648.88	448.91 199.97			Tractor Supply Tractor Supply		08/08/2018 08/27/2018	Tractor Supply Credit Card Cha Credit Card Cha
258.77	360.88	0.00				ts	Total O'Reilly Auto Parts
	140.00			O'Reilly Auto Parts		08/29/2018	Credit Card Cha
405.75 258.77	105.50			O'Reilly Auto Parts		08/19/2018	Credit Card Cha Credit Card Cha
556.22 511.25	63.43 44.97			O'Reilly Auto Parts		08/09/2018	O'Reilly Auto Parts Credit Card Cha
619.65	,	2,000.00				a Hominick	Total Card Service Visa Hominick
-534.82	1 809 38	30 880 6		waypoint Marine		08/23/2018	Credit Card Cha
-534.82	29.24	2,088.06	Acct # 0423	Card Services 0423	6105	08/22/2018	Check
200,000	11.40			Cornus Christi Lock Doc		08/10/2018	Credit Card Cha
-2,502.24	81.10			West Marine		08/10/2018	Credit Card Cha
3 583	130.00			Stiffy Eihertex & Supply Inc		08/09/2018	Credit Card Cha
-2,501 14	130.00			Ace Hardware		08/09/2018	Credit Card Cha
2,303.40	51.96			Northern Tool		08/08/2018	Credit Card Cha
2,000	86.79			Park Tree		08/06/2018	Credit Card Cha
2,224./1	304.98			The Fire Store		08/06/2018	Credit Card Cha
-1,919.73	44.98			CDVV Government LLC		08/06/2010	Credit Card Cha
-1,874./5	281.31			Mountit		08/06/2018	Credit Card Cha
-1,593.44	69.27			Cabela's		08/05/2018	Credit Card Cha
-1,524.17	60.61			Amazon.com		08/05/2018	Credit Card Cha
-1,463.56	650.06					minick	Card Service Visa Hominick
040	Ciedit	Debit	Memo	Name	Num	Date	Туре

Туре	Date	Num	Z	Name Memo	Debit	Credit	Balance
Payroll Taxes Payable Check General Journal	e 08/10/2018 08/10/2018	Draft 842	EFTPS	Rec Payroll Summary 8/10/18	4,356.18	4,356.18	0.00 4,356.18 0.00 -366.54
General Journal Check Check	08/10/2018 08/10/2018 08/24/2018	843 Draft Draft	EFTPS EFTPS	Rec Payroll Adj Burkhardt 8/10/18	366.54 4,465.53	4,465.53	4,465.53 0.00
Total Payroll Taxes Payable	vable	1			9,188.25	9,188.25	0.00
SUTA Tax Payable General Journal	08/10/2018	842		Rec Payroll Summary 8/10/18 Rec payroll summary 8/24/18		40.40 53.45	-184.14 -224.54 -277.99
Total SUTA Tax Payable	ble				0.00	93.85	-277.99
TCDRS-Payable General Journal General Journal	08/10/2018	842		Rec Payroll Summary 8/10/18 Rec Payroll Adj Burkhardt 8/10/18	5,565.02	2,431.33 253.58	-5,588.58 -8,019.91 -8,273.49 -2,708.47
General Journal	08/24/2018	844	CDNO	Rec payroll summary 8/24/18		2,542.33	-5,250.80
Total TCDRS-Payable					5,565.02	5,227.24	-5,250.80
N/P-Gov Capital Total N/P-Gov Capital							-135,000.00 -135,000.00
N/P-Oshkosh Capital Total N/P-Oshkosh Capital	pital						-385,281.11 -385,281.11
NIP-Wells Fargo (Bldg.) Total NIP-Wells Fargo (Bldg.)	lg.) (Bldg.)						0.01
Investment in Gen.Fixed Asset Total Investment in Gen.Fixed Asset	xed Asset en.Fixed Asset						-147,277.00 -147,277.00
Unreserved Fund Balance Total Unreserved Fund Balance	lance d Balance						-835,354.03 -835,354.03

Total NCAU-Appr	Total NOAD Asset	NCAD-Appraisal District Fees General Journal 08/10/2011	Legal Fees Total Legal Fees	Total Accounting/Auditor	Accounting & Professional Fees Accounting/Auditor Check 08/02/201 Check 08/31/201	Total Income-Miscellaneous	Income-Miscellaneous Deposit Deposit	Total Income-Interest	Income-Interest Deposit	Total Income-NCAD-Property Taxes	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Deposit	Income-NCAD-Property Taxes	Туре
Total NCAD-Appraisal District rees	District Food	District Fees 08/10/2018		/Auditor	itor 08/02/2018 08/31/2018	laneous	ous 08/02/2018 08/13/2018	#	08/31/2018	-Property Taxes	08/31/2018	00/30/2010	0102/62/90	08/28/2018	08/27/2018	08/24/2018	08/23/2018	08/22/2018	08/21/2018	08/21/2018	08/20/2018	08/15/2018	08/14/2018	08/13/2018	08/10/2018	08/09/2018	08/08/2018	08/07/2018	08/06/2018	08/03/2018	08/02/2018	perty Taxes	Date
		838			6068 6110		194025 0741																										Num
					DRC Bookkeeping & Payroll DRC Bookkeeping & Payroll		County of Nueces				NCAD-County Lax Onice	NCAD-County Lax Office	NCAD-Coulty Lax Office	NCAD-County Lax Office	NCAD-County Tax Office	NOAD County Tay Office	Name																
		Record Prepaid Appraisal Dist Fees			Invoice # 5790 July Invoice 5829 August		Sale of old rescue boat Calls answered in OCL		Interest		Copean	Deposit	Memo																				
	981.00	981.00		900.00	450.00 450.00	0.00		0.00		0.00																							Debit
	0.00			0.00		16,240.00	14,500.00	302,46	302.46	0,0	0 011 44	9.79	86.09	164.41	123.81	299.09	4.02	86.29	92.37	106.80	82.54	251.92	268 56	114 32	370.89	250.04	575.05	1,026.13	691.96	585.54	1,107.16	1,616.77	Credit
	11,648.01	11,648.01	1,703.00	1 703 00	10,200.00 10,650.00 11,100.00	-1/2,596.28	-156,356.28 -170,856.28 -172,596.28	-582.05	-582.05	279 59	-1 012 258 49	-1,012,258.49	-1,012,248.70	-1,012,162.61	-1,011,998.20	-1,011,874.39	-1,011,575.30	-1,011,571.28	-1,011,484.99	-1,011,392.62	-1,011,285.82	-1.011,203.28	-1.010.951.36	-1.010,682.80	-1 010 568 48	-1 010 197 59	-1 009 937 65	1,000,474.7	1 008 474 71	1,000,730.02	1,006,170.96	-1,005,063.82	balance

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Total Advadising & Dramatica	Total Service Awards	Service Awards Credit Card Cha Credit Card Cha Credit Card Cha	Total Advertising	Advertising & Promotion Advertising Check Check 08	Total Administrative	Total Water Cooler	Water Cooler Check	Total Office Supplies	Office Supplies Check Credit Card Cha Check Credit Card Cha	Total Bank Charges & Postage	Administrative Bank Charges & Postage Check Credit Card Cha 08/23 Check 08/31 Check 08/31	Total Accounting & Professional Fees	Total NCAD-Tax Collection Fees	NCAD-Tax Collection Fees Check 08/22/2	Туре
		08/16/2018 08/23/2018		ion 08/07/2018 08/29/2018			08/07/2018		08/02/2018 08/13/2018 08/24/2018 08/24/2018 08/24/2018 08/24/2018 08/24/2018 08/31/2018	& Postage	ostage 08/02/2018 08/23/2018 08/31/2018 08/31/2018	fessional Fees	llection Fees	on Fees 08/22/2018	Date
				6070 6120			6077		6068		6068			6096	Num
		Trophyland Trophyland National Medal of Honor		Texas Shoreline News Texas Shoreline News			Culligan Water		DRC Bookkeeping & Payroll Altex Wal-Mart Wal-Mart Wal-Mart Wal-Mart DRC Bookkeeping & Payroll Wal-Mart		DRC Bookkeeping & Payroll Box Brothers DRC Bookkeeping & Payroll		CONTRACTOR OF STATE OF SAME SAME STATE OF SAME SAME SAME SAME SAME SAME SAME STATE OF SAME SAME SAME SAME SAME SAME SAME SAME	Nueces County Tax Assessor-Collec	Name
				Invoice #108-Legal Notices Invoice #119-Legal Notices			Acct # 442-00104521-4		Copies Board Packets Cable Linksys File folders Photo Frames Copy Paper/ Photo Frame Copies Board Packets Dividers/Binders		Invoice # 5790 July Invoice 5829 August Service Charge			July	Memo
1,302.23	402.23	76.95 129.53 195.75	900.00	600.00 300.00	433,88	94,40	94.40	247.34	9.18 77.88 51.74 32.92 6.24 8.23 9.52 51.63	92.14	19.50 41.64 27.50 3.50	3,184.43	1,303.43	1,303.43	Debit
0.00	0.00		0.00		0.00	0.00		0.00	ſ	0.00		0.00	0.00		Credit
2,621.08	1,379.08	1,053.80 1,183.33 1,379.08	1,242.00	1,318.85 342.00 942.00 1,242.00	5,345.47	1,189.15	1,094.75 1,189.15	3,227.14	2,979.80 2,988.98 3,066.86 3,118.60 3,157.76 3,157.76 3,165.99 3,175.51 3,227.14	929.18	4,911.59 837.04 856.54 898.18 925.68 929.18	55,584.72	31,133.71	29,830.28 31,133.71	Balance

Nueces County Emergency Services District #2 Monthly General Ledger

As of August 31, 2018

Accidal basis						
Type Date	Num	Name	Memo	Debit	Credit	14 620 94
Communication & Software Active 911						352.50 352.50
nones	6082 6093	AT&T Mobility Verizon Wireless	Acct # 287286074500 Air Cards	314.75 149.13 236.00		4,015.24 4,329.99 4,479.12 4,715.12
Check 08/31/2018	6116	AT&I Mobility	MOUTH COLCONOLLONS	699.88	0.00	4,715.12
CC Radio Sy			Procing # sconnon031/Customer #	971.15		3,535.64 4,506.79
Check 08/22/2018	6102	City of Corpus Christi-Central Casin	HIVOICE # OCCUPATION OF THE PROPERTY OF THE PR	971.15	0.00	4,506.79
Total City of CC Radio System				Apple of the Control of the		4,217.56
Communication Equipment Credit Card Cha 08/07/2018		CDW Government LLC		259.87		4,477.43
Total Communication Equipment				259.87	0.00	2 500 00
Xerox Firehouse Software Total Xerox Firehouse Software						2,500.00
Total Communication & Software				1,930.90	0.00	03 331 39
Insurance Insurance-Bldg & Flood	5		Rec Prepaid Insurance Exp	1,401.09		15,247.95 16,649.04
Total Insurance-Bldg & Flood				1,401.09	0.00	16,649.04
nce-Employe	6085 6103	Nippon Life Benefits United Concordia Humana	Invoice # 134810429 September 2018	98.76 558.72 3,135.64 78.25		47,123,64 47,1682,36 50,818.00 50,896.25
Total Insurance-Employee Health	913	Middon the benenia		3,871.37	0.00	50,896.25
Insurance-Vehicle Deposit 08/07/2018		VFIS of Texas	Refund for removing old boat	1,448.33	3,347.00	12,261.91 8,914.91 10,363.24
Total Insurance-Vehicle	840			1,448.33	3,347.00	10,363.24
Insurance-Workers Comp.			Doo Droppid Incurance Exp	2,200.59		18,796.65 20,997.24
General Journal 08/10/2018	840		Rec Flebaid insulation Con	2,200.59	0.00	20,997.24
Total Insurance-Workers Comp.				8,921.38	3,347.00	98,905.77
I otal Insurance						

Total Medical Supply Replacement	Medical Supply Replacement Check 08/07/201	Total Major Equipment Purchases	Check	Major Equipment Purchases	Maintenance - Equipment Equipment Testing	Total Maintenance - Building	Total Station Maintenance	Crieck	Check	Credit Card Cha	Station Maintenance Credit Card Cha 0 Credit Card Cha 0	Total Pest Control	Check	Pest Control	Total Building Ice Machine	Maintenance - Building Building Ice Machine Check 0	Total Interest Expense	Total Building & Truck	General Journal	Interest Expense	Type
v Replacement	placement 08/07/2018	ent Purchases	08/02/2018	ourchases	nent	ilding	nance	00/31/2010	08/22/2018	08/08/2018	08/01/2018 08/05/2018		08/22/2018		achine	ne 08/07/2018		ck	08/10/2018		Date
	6075		6066					0 14	6100				6097			6078			839		Num
	Coast Medical Supply		Daco Fire Equipment					Gui Coast Faper Company	Compumatic Time Recorders, Inc	Ace Hardware	Wal-Mart Amazon.com		Bug Busters Pest Control			Mission Restaurant Supply					Name
	Invoice # 8715		Amkus Tool Set/Tip Gator Grip						Time Clock Maintenance Invoice # 1548368/1548013		Rectangular Transfer 60 Gallon Fu		Service 8/16/18			Ice Machine		120	-MULTIPLE-		Memo
47.98	47.98	2,198.50	2,190.50	2 198 50		1,230.47		970 47	102.33	7.68	9,44 650.06 51.96	03.00	85.00	05.00	175.00	175.00	1,287.65	20.782,1	1,287.65		Debit
0.00		0.00				0.00		0.00							0.00		0.00	0.00			Credit
4,966.55	4,966.55	4 918 57	5 342.62	3,144.12 5,342.62	400.00	48 392 32	17 069 16	14,629.16	14,629.16	14,377.83	13,668.13 14,318.19 14,370.15	13,658.69	340.00	255.00 340.00	2,100.00	1,925.00 2,100.00	14,002.02	14 682 82	14 682 82	13,395.17	Balance

Total Final & Oil	Maintenance - Vehicles Fuel & Oil Credit Card Cha (Credit Card Cha	Total Maintenance - Equipment	Total Uniforms	Uniforms Check Bill Check Bill Bill	Total SCBA Maintenance	SCBA Maintenance Check Check Bill	Total Minor Equip. Purchases	Minor Equip. Purchases Check 08/0 Credit Card Cha 08/0 Check 08/0 Check 08/0 Credit Card Cha 08/1 Check 08/1 Bill 08/2 Credit Card Cha 08/2 Credit Card Cha 08/3 Check 08/3	Type
00/13/2010	es 08/08/2018 08/08/2018	quipment		08/13/2018 08/17/2018 08/22/2018 08/30/2018 08/30/2018	nance	08/07/2018 08/22/2018 08/31/2018	Purchases	hases 08/05/2018 08/05/2018 08/06/2018 08/06/2018 08/06/2018 08/06/2018 08/06/2018 08/07/2018 08/08/2018 08/09/2018 08/09/2018 08/09/2018 08/13/2018 08/13/2018 08/13/2018 08/31/2018	Date
0	50 88 88			6091 51148 6101 944434 944439		6072 6099		6067 6073 6083 6089 1681 18-13 6109 6117	Num
Logi bidii 190-Hansboraton	Murphy USA Murphy USA			Famous Uniforms Famous Uniforms AIA Corporation NAFECO NAFECO		Charles Walker Charles Walker Charles Walker		Rescue Gear Cabela's Mountit CDW Government LLC Factory Outlet Store The Fire Store NAFECO Bluffs Landing Marina Tractor Supply Wal-Mart Stiffy Fibertex & Supply Inc. West Marine Stiffy Fibertex & Supply Inc. Tractor Supply Heat Safety Equipment Tractor Supply Heat Safety Equipment Texas Facilities Commission Fire Supply Inc	Name
	July			Acct #1035\ Sales Receipt #74111/ Receipt #75663 Invoice # XSA2302706 Haiz Airpower EMS Station Boot Haiz Airpower EMS Station Boot		June 2018 July 2018 August 2018		Barnacle Black Dura Safe E Lock Boat 91 For Truck 901 Antenna for 901 Brush 91 Mount Ball/Socket Arm Tactical Helmet with rails Fire Gloves 1 Year Boat Slip Rental Connectors/Fuel Pump/ Fuel Hoses Cabinet Kill Switch/KeyFloat 1-10ft Ram Rod Generator/Bed Worklights/Single Row LED Light Bar Heanet Assy/Bank/Bracket Bed & Cabinet Elkhart urethane handle	Memo
988.28	41.50 100.00 846.78	10,813.45	1,305.98	79.98 71.98 50.02 552.00 552.00	300.00	100.00	6,960.99	97.14 60.61 69.27 281.31 44.98 304.98 237.02 3,900.00 448.91 79.00 130.00 81.10 0.00 314.00 199.97 393.04 164.00 155.66	Debit
0.00		0.00	0.00		0.00		0.00		Credit
11,332.99	10,344.71 10,386.21 10,486.21 11,332.99	41 281 74	12,/44.32	11,518.32 11,590.30 11,640.32 12,192.32 12,744.32	11,438,34	1,888.61 1,988.61 2,088.61	1 788 61	26,702.68 26,799.82 26,860.43 26,929.70 27,211.01 27,255.99 27,560.97 27,797.99 31,697.99 32,146.90 32,225.90 32,355.90 32,437.00	Balance

Total Travel Expenses	Travel Expenses Deposit Check	Total Training-Schools	Training-Schools Credit Card Cha Credit Card Cha	Total Membership Dues	Training, Certifications & Dues Membership Dues Credit Card Cha 08/07/20 Check 08/13/20 Credit Card Cha 08/14/20	Total Maintenance - Vehicles	Total Maintenance-Vehicle Unscheduled	Maintenance-Vehicle Unscheduled Credit Card Cha 08/06/2018 Check 08/07/2018 Check 08/07/2018	Total Maintenance-Vehicle Scheduled	Credit Card Cha	Credit Card Cha Credit Card Cha Credit Card Cha	Maintenance-Vehicle Scheduled Credit Card Cha 08/09/2018 Credit Card Cha 08/10/2018 Check 08/13/2018	Туре
Ses	08/02/2018 08/07/2018	ools	08/23/2018 08/29/2018	Dues	08/07/2018 08/13/2018 08/14/2018	ehicles	Vehicle Unscher	cle Unschedule 08/06/2018 08/07/2018 08/07/2018 08/07/2018	Vehicle Schedul	08/23/2018 08/27/2018 08/28/2018 08/28/2018 08/29/2018 08/31/2018	08/15/2018 08/15/2018 08/19/2018	cle Scheduled 08/09/2018 08/10/2018 08/13/2018	Date
	1620 6069				6086		duled	6071 6076 6095	ed	18131		6090	Num
Layulla Neel Neel	J. P. Hominick Gary Graham Lagung Reef Rest		CE Solutions Texas Department of State Health S		Texas Commission on Fire Protection SFFMA Texas Commission on Fire Protection			Parts Tree Toyota Industrial Equipment Siddons -Martin Emergency Group Casas Tire Co., Inc.		Waypoint Marine O'Reilly Auto Parts Gulf Coast Graphics O'Reilly Auto Parts Daco Fire Equipment	Gulf Coast Graphics Gulf Coast Graphics O'Reilly Auto Parts	O'Reilly Auto Parts Corpus Christi Lock Doc State Industrial Products	Name
	Reimburse for CC used in error Reimburse for Domino's Pizza		J P Hominick		Account #14901/Pumping Apparat			Rescue Saw/Starter/Fuel Cap Gas Invoice # 740016292/747026378 08 Pierce Contender PU Invoice # 51111		Lettering Oil Filter/Elect Pump	Lettering Lettering Blue Def	Boat 91/Cleaning supplies Station Keys for Boat 91 Truck Wash	Memo
116.28	55.83 60.45	164.00	100.00	492.15	56.49 348.49 87.17	5,596.75	2,914.02	86.79 1,811.00 835.22 181.01	1,694.45	105.50 55.50 146.98 690.00	146.00 44.97 29.24	63.43 11.40 116.93 284.50	Debit
67.49	67.49	0.00		0.00		0.00	0.00		0.00				Credit
4,100.59	3,984.31 4,040.14 4,100.59	4 051 80	8,210.97 8,274.97 8,274.97	8,110.97	2,080.72 2,137.21 2,485.70 2,572.87	46,878.49 15 198.42	30,665.97	27,838.74 29,649.74 30,484.96 30,665.97	4,879.53 27 751 95	3,987.05 4,042.55 4,189.53 4,879.53	3,807.34 3,852.31 3,881.55	3,248.51 3,259.91 3,376.84 3,661.34	Balance 3.185.08

Total Dawrell Tay Evange	Wages & Employee Expense Payroll Tax Expense General Journal 08/10/ General Journal 08/10/ General Journal 08/24/	Total Utilities	Total Water	Water Check Check	Total Telephone	Telephone Check	Total Internet Services	Internet Services Deposit Check Check	Total Electric	Utilities Electric Check	Total Training, Certifications & Dues	Total TX Commission on Fire Pro.Cert	TX Commission on Fire Pro.Cert. Check 08/02/2018 Check 08/13/2018	Туре
	Expense nse 08/10/2018 08/10/2018 08/24/2018			08/07/2018 08/31/2018		08/07/2018	rices	08/02/2018 08/07/2018 08/13/2018		08/13/2018	cations & Dues	ion on Fire Pro.Co	on Fire Pro.Cert. 08/02/2018 08/13/2018	Date
	842 843 844			6079 6115		6080		6768 6081 6094		6092		ä	6065	Num
				City of Corpus Christi City of Corpus Christi		AT&T		AT&T U-Verse AT&T U-Verse Grande Communications		Nueces Electric Cooperative			Everett Scott	Name
	Rec Payroll Summary 8/10/18 Rec Payroll Adj Burkhardt 8/10/18 Rec payroll summary 8/24/18			Acct # 203613143 Acct # 203613143		Acct # 361 937-2645 314 6		Refund credit of Final Bill Acct #137361972 Acct # 8801-0911511-01		Acct # 1607074717			Reimburse for TCFP Fee Reimbursement for TCFP	Memo
3,029.42	1,448.22 131.16 1,450.04	1,921.18	338.99	169.00 169.99	382.22	382.22	364.26	116.03 248.23	835.71	835.71	883.92	111.49	55.00 56.49	Debit
0.00		50.00	0.00		0.00		56.63	56.63	0.00		67.49	0.00		Credit
41,696.72	38,667.30 40,115.52 40,246.68 41,696.72	546 170.84	2,008.24	1,838.25 2,008.24	4,1/0./2	4,170.72	1,861.02	1,496.76 1,612.79 1,861.02	7,724.68 1.553.39	6,888.97 7,724.68	16,014.85	1,066.42	1,009.93	Balance

36,844.72 36,978.28 38,317.35 38,317.35 591,434.05	100 007 04						
36,84 36,97 38,31 38,31		70,200.21				yee Expense	Total Wages & Employee Expense
36,84 36,97 38,31	0.00	45 263 21				ement Plan	Total TCDRS-Retirement Plan
36,84 36,97 38,31	0.00	2,753.23					1 0000000000000000000000000000000000000
30,004.16		1,280.60 133.56 1,339.07	Rec Payroll Summary 8/10/18 Rec Payroll Adj Burkhardt 8/10/18 Rec payroll summary 8/24/18		842 843	nt Plan 08/10/2018 08/10/2018 08/10/2018	TCDRS-Retirement Plan General Journal 08/1 General Journal 08/1 General Journal 08/2
1,995.95	0.00	940.95				ots/Drug Test	Total Physicals/Shots/Drug Test
1,178.05		123.05 817.90	E Scott Physical Invoice # 1054709	Nova Healthcare, PA Nova Healthcare, PA	6074	08/01/2018 08/07/2018	Physicals/Shots/Drug Test Credit Card Cha 08/01/2 Check 08/07/2
509,424.03	0.00	38,539.61				s & Salaries	Total Payroll Wages & Salaries
509,424.03		4,355.42	Rec payroll summary 8/24/18	Rickey E. McLester	1076D 844	08/24/2018	Check General Journal
505,068.61		267.81 268.51		Stephen S. Hayes	1075D	08/24/2018	Check
504,532.29		1,439.20		Christopher Burknardt	10740	08/24/2018	Check
503,093.09		1,562.04		Sarah C. Simonsen	1072D	08/24/2018	Check
499,510.81		1,980.34		Ryan R. Ramirez	10710	08/24/2018	Check
497,530.47		734.38		Matthew M King	1069D	08/24/2018	Check
496,796.09		234 11		Brandon Sekula	1068D	08/24/2018	Check
496 561 98		9.01		Adam T. Codosh	1067D	08/24/2018	Check
495,177.20		1,626.25		John P Hominick	1066D	08/24/2018	Check
493,550.95		254.85		Nicholas Beseda	1065D	08/24/2018	Check
493,296.10		2,211.27	Nec rayion nay commune or re-	7	843	08/10/2018	General Journal
491,084.83		355.40	Boo Bouroll Adi Burkhardt 8/10/18	Christopher Burkhardt	1063D	08/10/2018	Check
490,729.43		1 350 10	Rec Payroll Summary 8/10/18	CONTRACTOR OF THE PROPERTY OF	842	08/10/2018	General Journal
489,370,33		1,020,70		jacob Espinoza	1062D	08/10/2018	Check
485 188.02		247.13		Charles Harris	1061D	08/10/2018	Check
484 159 32		1,902.44		Christopher Burkhardt	1060D	08/10/2018	Check
483 91		779.66		Sarah C. Simonsen	1059D	08/10/2018	Check
487 009 75		1,648.19		Ryan R. Ramirez	1058D	08/10/2018	Check
470,001.00		1,185.07		Chevene C Grav	1057D	08/10/2018	Check
470,581 90		1,343.55	-	lan G. Wheeldon	1056D	08/10/2018	Check
4//,053.28		490.89		Matthew M King	10550	08/10/2018	Check
476,562.39		754.26		Adam I. Codosh	10530	08/10/2018	Check
475,808.13		542.40		Juan O Leal	1052D	08/10/2018	Check
475,265.73		450 48		John P Hominick	1051D	08/10/2018	Check
474,815.25		1 636 35		Nicholas Beseda	1050D	08/10/2018	Check
473,095.69 473,189.00		2,211.27		Everett D. Scott	1049D	Salaries 08/10/2018	Payroll Wages & Salaries Check 08/10
470 RR4 42			Memo	Name	Num	Date	Туре

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Nueces County Emergency Services District #2



337 Yorktown Corpus Christi, TX 78418 361-937-2645 DScott@FBFD.org

Chief's Report

September 18, 2018

Flour Bluff Emergency Calls 8/21/18 1533 3201 Azores resident 8/28/18 1646 Divison trash fire 9/6/18 1101 2919 Waldron trailer fire

Padre Island Emergency Calls 8/22/18 1544 13850 Primaver drowning doa 8/2418 233820301 PR 22 traffic accident rescue one doa

Calls outside the city limits 8/22/18 1144 1787 FM 43 grass 8/25/18 1649 2036 hwy 286 grass 8/25/18 2334 286-43 grass 8/29/18 1636 43 and 51 grass fire 9/3/18 1711 149 Zahn water rescue 9/3/18 1928 13300 SPID water rescue 9/4/18 13309 SPID water rescue

Call out of District in the city 9/2/18 1440 8800 SPID grass fire

Staffing need to fill 1 position

Fleet update

Unit 901 no maintenances required this month Unit 902 no maintenances required this month Sq 91 no maintenances required this month Engine 92 no maintenances required this month Brush 92 no maintenances required this month Eng 91 no maintenances required this month Brush 91 no maintenances required this month Boat 92 no maintenances required this month Boat 91 no maintenances required this month