AGENDA
CITY COUNCIL
APRIL 19, 2016

NOTICE:

APRIL 19, 2016

5:30-6:00 P.M.	INSURANCE COMMITTEE MEETING
6:00-6:15 P.M.	FINANCE COMMITTEE MEETING
6:15-6:30 P.M.	PUBLIC WORKS COMMITTEE MEETING
6:30-6:35 P.M.	POLICE COMMITTEE MEETING
6:35-6:45 P.M.	FIRE & WATER COMMITTEE MEETING
6:45-7:00 P.M.	ECONOMIC DEVELOPMENT COMMITTEE MEETING

TOWNSHIP MEETING
APRIL 19, 2016

1. PRAYER-
2. PLEDGE OF ALLEGIANCE
3. ROLL CALL
4. TOWNBOARD MINUTES- APRIL 5, 2016
5. ANNUAL TOWN BOARD MINUTES-APRIL 12, 2016
6. PRESENTATION OF COMMUNICATIONS:
7. FINANCE: RON SIMPSON, CHAIRMAN
   - A. BILL LIST- APRIL 19, 2016
   - B. ANNUAL TOWN REPORT FOR FISCAL YEAR MARCH 1, 2015 THROUGH FEBRUARY 29, 2016

CITY COUNCIL MEETING
APRIL 19, 2016

1. ROLL CALL
2. CITY COUNCIL MINUTES- APRIL 5, 2016
3. PRESENTATION OF COMMUNICATION
   - 1.
4. REMARKS BY MAYOR
5. REPORT OF STANDING COMMITTEES:

DOWNTOWN: NIKKI PETRILLO, CHAIRMAN (CITY HALL & BUILDINGS)

A.

PLANNING/ZONING, ANNEXATIONS, ENGINEERING AND INSPECTIONS: DAN MCDOWELL, CHAIRMAN

- **A. BUILDING & ZONING MONTHLY REPORT MARCH 2016**
- **B. BOARD OF APPEALS AGENDA MAY 4, 2016**
- **C. HARC-APRIL 26, 2016**
- **D. CURB CUT 3124 RODGER**

LEGAL AND LEGISLATIVE: BOB PICKERELL, CHAIRMAN (CABLE TV, ORDINANCE)

- **A.**

PUBLIC WORKS: DON THOMPSON, CHAIRMAN: (STREET AND ALLEY-SANITATION-INSPECTION-TRAFFIC & LIGHTS)

- **A. ORDINANCE REMOVING AND REPEALING ORDINANCE 8139, AND ITS DESIGNATION OF A HANDICAP PARKING SPACE AT 2729 WILLOW AVENUE**
- **B. MEMO-STEVE OSBORN, JUNEAU-2015 MFT GENERAL MAINTENANCE-MAINTENANCE EXPENDITURE STATEMENT FOR 2015-PROGRAM CLOSE OUT**

POLICE COMMITTEE: TIM ELLIOTT, CHAIRMAN

- **A. ORDINANCE TO TRANSFER TWO SURPLUS MOTOR VEHICLES FROM THE POLICE DEPARTMENT**

FIRE: WALMER SCHMIDTKE, CHAIRMAN

- **A. MONTHLY REPORT MARCH 2016**
- **B. RESOLUTION TO PURCHASE AN AMBULANCE FOR THE GRANITE CITY FIRE DEPARTMENT**

WASTEWATER TREATMENT: BILL DAVIS, CHAIRMAN

- **A.**

INSURANCE AND SAFETY: GERALD WILLIAMS, CHAIRMAN

- **A. PENDING LITIGATION**

ECONOMIC DEVELOPMENT AND NEGOTIATIONS: PAUL JACKSTADT, CHAIRMAN

- **A. RESOLUTION AUTHORIZING THE OFFICE OF THE TREASURER TO RELEASE DEMOLITION LIEN AGAINST 2459 BENTON STREET, GRANITE CITY, IL 62040**

B. RESOLUTION AUTHORIZING THE OFFICE OF THE TREASURER TO COMPROMISE LIENS AGAINST 2560 DELMAR AVE
C. ORDINANCE APPROVING THE TRANSFER OF VOLUME CAP IN CONNECTION WITH PRIVATE ACTIVITY BOND ISSUES, AND RELATED MATTERS

FINANCE: RON SIMPSON, CHAIRMAN

A. ORDINANCE TO AUTHORIZE AND RATIFY DISTRIBUTIONS TO THE POLICE AND FIRE PENSION FUNDS, FROM THE GENERAL FUND OF THE CITY OF GRANITE CITY
B. TREASURERS REPORT
C. PAYROLL-APRIL 15, 2016

Report of Officers
Unfinished Business
New Business

ADJOURNMENT

CITY COUNCIL
MINUTES
APRIL 5, 2016

Mayor Ed Hagnauer called the regular meeting to order of the city council at 7:04 p.m.

ATTENDANCE ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell, Elliott, Clerk Whitaker and Mayor Hagnauer were present.

MOTION By Simpson, second by Petrillo to approve the City Council Minutes from March 15, 2016. ALL VOTED YES. Motion carried.

MOTION By Williams, second by Pickerell to approve the Rotary Club and GC Business Foundry Color Run for Saturday May 7th, at 8a.m. ALL VOTED YES. Motion carried.

MOTION By McDowell, second by Simpson to approve the Resolution for demolition or repair of a dangerous or unsafe building located at 2036 Washington Ave.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By McDowell, second by Elliott to approve a Ordinance to amend Ordinance 8325 authorizing conviction information requests in processing certain Business License Applications.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

FINAL PASSAGE: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By McDowell, second by Elliott to suspend the rules and place on final passage a Resolution to approve four Professional Inspection Services Agreements.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By McDowell, second by Petrillo to place on file the Planning & Zoning Committee Minutes from March 15, 2016. ALL VOTED YES. Motion carried.

MOTION By Pickerell, second by Davis to suspend the rules and place on final passage a Ordinance to increase the number of Authorized Class A Liquor Licenses in the City of Granite City.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

FINAL PASSAGE: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Pickerell, second by Williams to place on file the Legal & Legislative Committee Minutes from March 15, 2016. ALL VOTED YES. Motion carried.

MOTION By Thompson, second by Jackstadt to approve the proposal from Juneau Associates, Inc. to perform the inspections and prepare and submit reports required by IDOT for a lump sum of $2400.00.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Thompson, second by Pickerell to approve the 2014 MFT General Maintenance –Maintenance Expenditure Statement & Revised 2014 Maintenance Estimate in the amount of $807,203.68.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Schmidtke, second by Davis to place on file the Fire & Water Committee Meeting Minutes from March 15, 2016. ALL VOTED YES. Motion carried.

MOTION By Davis, second by Thompson to approve the award of the Wastewater Treatment Plant Aeration Tank Improvement Project Alternate A2 to Haier Plumbing & Heating, Inc., in the amount of $961,000.00.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Davis, second by Thompson to place on file the WWTP Committee Meeting Minutes from March 15, 2016. ALL VOTED YES. Motion carried.

MOTION By Williams, second by McDowell to give attorney settlement authority for Case # 633 as discussed in the Insurance Committee Meeting.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Williams, second by Pickerell to place on file the Insurance Committee Minutes from February 16, 2016 and the closed session minutes will stay closed for 6 months. ALL VOTED YES. Motion carried.

MOTION By Williams, second by Jackstadt to place on file the Insurance Committee Minutes from March 15, 2016 and the closed session minutes will stay closed for 6 months. ALL VOTED YES. Motion carried.

MOTION By Jackstadt, second by Simpson to suspend the rules and place on final passage an Ordinance approving the Tax Increment Redevelopment Plan and Redevelopment Project For The America's Central Port Redevelopment Project Area.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

FINAL PASSAGE: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Jackstadt, second by Elliott to suspend the rules and place on final passage an Ordinance designating the America's Central Port Redevelopment Project Area.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

FINAL PASSAGE: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Jackstadt, second by Elliott to suspend the rules and place on final passage an Ordinance adopting Tax Increment Financing for America's Central Port Redevelopment Project Area.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

FINAL PASSAGE: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Jackstadt, second by Davis to approve a Resolution to oppose appeal to the Property Tax Appeal Board of the State of Illinois, concerning 2901 Missouri Avenue.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by Jackstadt to suspend the rules and place on final passage an Ordinance to amend the Annual Budget and appropriation Ordinance # 8499, to meet vehicle and equipment maintenance expense in the fire department.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

FINAL PASSAGE: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by Elliott to approve a Resolution to include compensation paid under Internal Revenue Code Section 125 Plan as IMRF earnings.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by Petrillo to approve a Resolution to include Taxable Allowances as IMRF Earnings.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by McDowell to approve the Payroll for the period ending March 30, 2016 in the amount of $601,166.90.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by Thompson to place on file the Finance Committee Meeting Minutes from March 15, 2016. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by McDowell to amend the Agenda to include passage of the Bill List for March 2016 in the amount of $1,836.484.37.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by McDowell to approve the Bill List for March 2016 in the amount of $1,836.484.37.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION by Thompson, second by Schmidtke to adjourn the City Council Meeting at 7:22 p.m. Motion carried.

MEETING ADJOURNED

ATTEST
JUDY WHITAKER
CITY CLERK

City of Granite City

Inspection Department 2000 Edison, Ground Floor Granite City, IL 62040 Phone:(618) 452-6218 Fax:(618) 452-6246

APR 05 2016

MONTHLY REPORT TO CITY COUNCIL
BUILDING & ZONING DEPARTMENT

MARCH 2016 REPORT

The Building & Zoning Department no longer issues free permits for charities; tax exempt organizations or governing bodies. The number of permits sold will not necessarily reflect the number of inspections required.

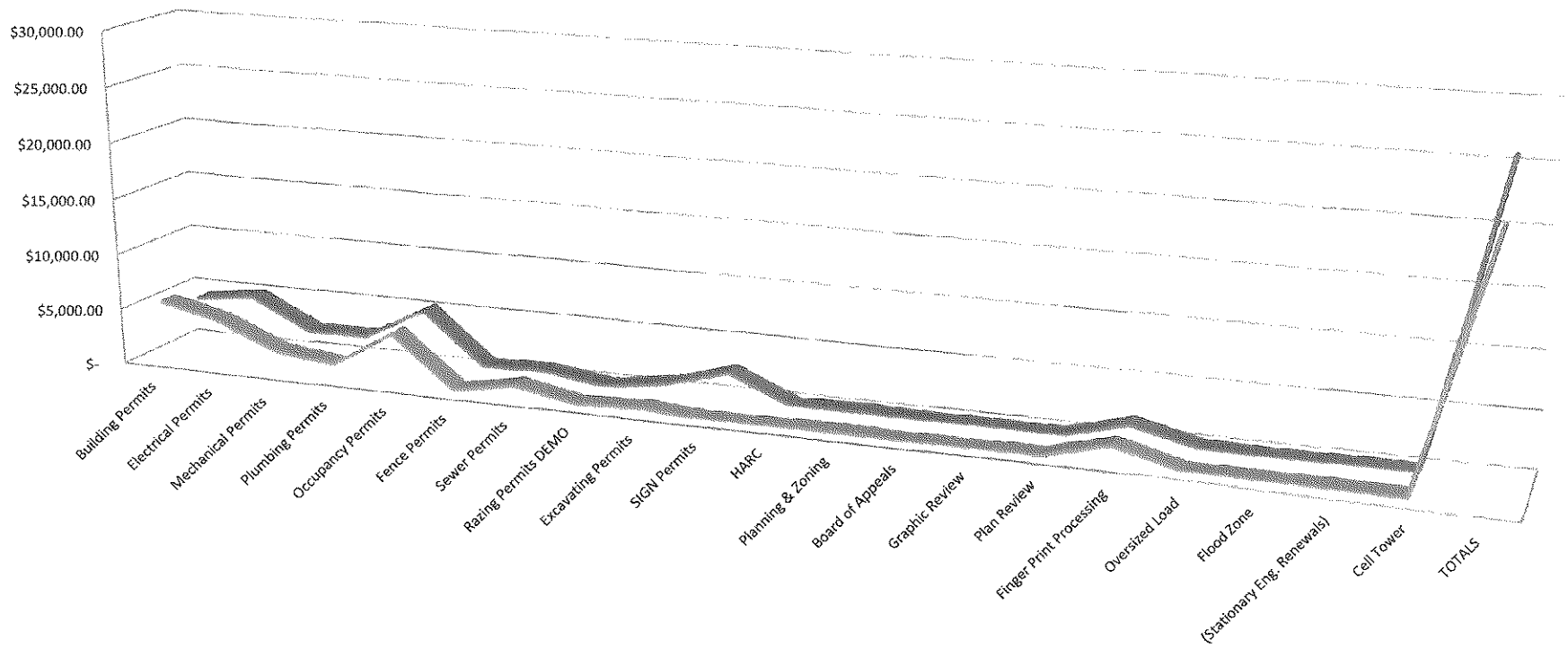
MARCH 2016			Permits
Building Permits	173	$	4,252.00
Electrical Permits	124	$	4,950.00
Mechanical Permits	76	$	2,270.00
Plumbing Permits	73	$	2,328.00
Occupancy Permits	154	$	5,250.00
Fence Permits	19	$	720.00
Sewer Permits	9	$	850.00
Razing Permits DEMO	1	$	40.00
Excavating Permits	13	$	895.00
SIGN Permits	1	$	2,433.00
HARC	0	$	-
Planning & Zoning	2	$	217.16
Board of Appeals	0	$	-
Graphic Review	0	$	-
Plan Review	0	$	-
Finger Print Processing	25	$	1,497.50
Oversized Load	4	$	120.00
Flood Zone	0	$	-
(Stationary Eng. Renewals)	2	$	20.00
Cell Tower	0	$	-
TOTALS	676	$	25,842.66

APPROX. CONSTRUCTION VALUE BASED ON BUILDING PERMITS ISSUED THIS MONTH $ 301,059.03

We Charge a fee for owner occupied, new home sales and temporary utility permits. The number of permits will not reflect the number of trips needed to ensure compliance.

Submitted - APRIL 05, 2016
Sheila Nordstrom, Secretary
Building & Zoning Dept.

March 2015 & 2016



	Building Permits	Electrical Permits	Mechanical Permits	Plumbing Permits	Occupancy Permits	Fence Permits	Sewer Permits	Razing Permits DEMO	Excavating Permits	SIGN Permits	HARC	Planning & Zoning	Board of Appeals	Graphic Review	Plan Review	Finger Print Processing	Oversized Load	Flood Zone	(Stationary Eng. Renewals)	Cell Tower	TOTALS
2015	$5,454.00	$4,285.00	$2,005.00	$1,368.00	$4,700.00	$240.00	$1,200.00	$120.00	$420.00	$-	$-	$179.20	$-	$-	$100.00	$1,585.00	$30.00	$-	$20.00	$-	$21,706.20
2016	$4,252.00	$4,950.00	$2,270.00	$2,328.00	$5,250.00	$720.00	$850.00	$40.00	$895.00	$2,433.00	$-	$217.16	$-	$-	$-	$1,497.50	$120.00	$-	$20.00	$-	$25,842.66

City of Granite City

Inspection Department 2000 Edison, Ground Floor Granite City, IL 62040 Phone:(618) 452-6218 Fax:(618) 452-6246

RECEIVED
JUDY WHITAKER
APR 14 2016
CITY CLERK
GRANITE CITY ILLINOIS

AGENDA
Board of Appeals
May 4th, 2016

A regularly scheduled meeting of the Board of Appeals will be held on Wednesday, May 4th, 2016 , at 7:00 PM, in the Second Floor Council Chambers, City Hall Building, 2000 Edison Avenue, Granite City, Illinois.

1). Call to Order
2). Comments by the Chairman
3). Swear In
4). Roll Call
5). Approval of Minutes/Agenda

6). **PETITIONER (1):** **Corey Powell**
2941 Iowa
Parcel # 22-2-20-17-06-103-011

Petition request a 3 ft 6" side setback variance to allow construction for a new 24 ft x 24 ft detached garage. District Zoned D-3.

8). New Business
9). Unfinished Business
10). Adjournment

Copies: Mayor and Council Members
City Clerk for Posting
Members of the Board of Appeals

RECEIVED
JUDY WHITAKER
APR 14 2016
CITY CLERK
GRANITE CITY ILLINOIS

City of Granite City

Inspection Department 2000 Edison, Ground Floor Granite City, IL 62040 Phone:(618) 452-6218 Fax:(618) 452-6246

Historical & Architectural Review Commission
Agenda
April 26, 2016

A meeting of the Historical & Architectural Review Commission will be held on Tuesday, April 26, 2016 at 5:30 PM, in the second floor Council Chambers, City Hall Building, 2000 Edison Avenue, Granite City, Illinois.

1). Call to Order

2). Roll Call

3). Approval of Minutes & this evening's Agenda

4). PETITIONER: (1) Joseph Colyer
2054 Edison
Parcel ID: 22-2-20-18-17-304-006.T00

Request approval to establish Granite City Business Foundry nonprofit networking group; business/offices spaces for lease, Community Center in a district zoned D-1 Arts and Entertainment sub-district

PETITIONER: (2) Anthony Aiello (Imperial Pub & Club)
1413 20th St
Parcel: 22-2-20-19-05-101-034

Request approval for a 5 ft x 8 ft Led backlighting wall mount sign

5). New Business

6). Unfinished Business

7). Adjournment

GRANITE CITY ILLINOIS

City of Granite City

Inspection Department 2000 Edison, Ground Floor Granite City, IL 62040 Phone:(618) 452-6218 Fax:(618) 452-6246

MEMORANDUM

RECEIVED
JUDY WHITAKER
APR 14 2016
CITY CLERK
GRANITE CITY ILLINOIS

TO: Mayor Hagnauer
City Council Members

FROM: Building & Zoning Department
DATE: April 13, 2016

RE: Curb Cut
LOCATION: 3124 Rodger

Mr Ben Forsyth located at the above address is requesting a curb cut for the purpose of installing a driveway and garage to the existing property. The curb cut will be 12 feet wide. See attached photographs.

The curb cut will not be intrusive to the neighboring properties. The only stipulation that is required, the apron from the street to the sidewalk is to be constructed of concrete capable of withstanding the designed load as per ordinance requirements.

Steve Willaredt

Steve Willaredt
Building & Zoning Administrator

ORDINANCE NO._____

AN ORDINANCE REMOVING AND REPEALING ORDINANCE 8139, AND ITS DESIGNATION OF A HANDICAP PARKING SPACE AT 2729 WILLOW AVENUE

WHEREAS, the City of Granite City is a home rule unit pursuant to Article VII, section 6, of the Illinois Constitution of 1970; and

WHEREAS, sections 10.34.190 through 10.34.200 of the Granite City Municipal Code provide for the establishment of vehicular parking spaces reserved for the use of physically handicapped persons or disabled veterans; and

WHEREAS, it has been determined that the designation of a handicapped parking space, located at **2729 Willow Avenue**, Granite City, Illinois, is no longer necessary.

Now, therefore, it is hereby ordained and decreed that Ordinance 8139 (adopted July 7, 2009) designating a vehicle parking space located at **2729 Willow Avenue** and reserving a space for the use of handicapped or disabled drivers, is hereby repealed. The Department of Public Works is further hereby directed to remove from **2729 Willow Avenue** any and all vehicle parking signs reserving any vehicular spaces for handicapped or disabled parking.

Any and all Ordinances and resolutions inconsistent with this Ordinance, including Ordinance 8139, are hereby repealed. This Ordinance shall take effect upon passage, and may be published in pamphlet form by the Office of the City Clerk.

APPROVED this ____ day of April, 2016.

_____

MAYOR Edward Hagnauer

ATTEST:_____

Judy Whitaker, CITY CLERK

59297.11

JUNEAU
ENGINEERING & LAND SURVEYING

2100 State Street
P.O. Box 1325
Granite City, IL 62040
618-877-1400 • F. 618-452-5541

100 N. Research Dr.
Edwardsville, IL 62025
618-659-0900 • F. 618-659-0941

330 N. Fourth Street, Suite 200
St. Louis, MO 63102
314-241-4444 • F. 314-909-1331

APR 14 2016

April 12, 2016
Job No. 150200

Memorandum

2015 MFT General Maintenance - Maintenance Expenditure Statement for 2015 Program Close Out

To: Mayor and City Council
cc:
From: Steve Osborn

Subject: 2015 MFT General Maintenance – Maintenance Expenditure Statement
Section 15-00000-00-GM

1) As requested, we have reviewed the maintenance expenditures submitted to us for the 2015 MFT program, and prepared a Maintenance Expenditure Statement for review and approval to close out the 2015 MFT program.

2) A total of $721,000 in MFT General Maintenance resolutions were authorized by the City Council and approved by IDOT for the 2015 Maintenance period.

3) The total maintenance expenditures for the 2015 MFT Program were $551,536.56, of which $551,536.56 is eligible to be transferred from the MFT account to the General Fund, if sufficient funds are available.

4) Please review for approval.

5) Upon approval by the City Council, we will provide five (5) copies to be signed by the Mayor and forwarded to IDOT for their review and approval.

Illinois Department of Transportation

Municipal Maintenance Expenditure Statement

Local Public Agency: City of Granite City

County: Madison

Section Number: 15-00000-00-GM

I hereby certify that the maintenance operations shown below were completed in accordance with the items of work listed on the Municipal Estimate of Maintenance Costs, Form BLR 14231 approved on 12/12/2014, and revised or supplemental Municipal Estimate of Maintenance Costs Form BLR 14231 approved on 8/17/2015, and that the expenditure of Motor Fuel Tax funds, for that work during the maintenance period of 1/1/2015 through 12/31/2015 is as shown and that receipted bills are on file and available for audit.

Maintenance Operation Costs

Maintenance Operations (As listed on approved BLR 14231)	Maintenance Group	Labor	Materials	Equipment Rental	Contract	Total Maintenance Operation Cost	Operation Engineering Inspection Fee
301A: Ice & Snow Control	I	-	24,331.92	-	-	24,331.92	
301B: Bituminous Patching	IIA	63,008.00	44,360.10	32,836.16	-	140,204.26	
301D: Street Cleaning	IIA	31,086.00	-	64,362.15	-	95,448.15	
301G: Blading Shoulders and Clean Ditches	IIA	-	-	-	-	-	
301J: Street Shape & Roll	IIA	-	-	-	-	-	
301P: Street, Sidewalk, Curb Repair	IIA	-	9,198.97	-	-	9,198.97	
1. Mowing & Weed Control	IIA	-	-	-	-	-	
2. 2015 Pavement Marking	IIA	-	2,499.12	-	-	2,499.12	
3. Traffic Signal Contract Maintenance	IIA	-	-	-	41,689.29	41,689.29	
4. 2015 ADA Ramps Contract Maintenance	III	-	-	-	20,090.00	20,090.00	
5. 2015 Slurry Seal Contract Maintenance	IV	-	-	-	113,702.42	113,702.42	
6. 2015 HMA Overlay	III	-	104,372.43	-	-	104,372.43	
						-	
						-	
						-	
						-	
						-	
						-	
						-	
						-	
						-	
					Total Maintenance Cost	551,536.56	

Maintenance Engineering Cost Summary

Preliminary Engineering Fee	22,265.82
Engineering Inspection Fee	-
Material Testing Costs	
Advertising Costs	
Bridge Inspections Costs	
Total Maintenance Engineering	22,265.82

	Maintenance	Maint. Engineering
Total Maintenance Program Costs	551,536.56	22,265.82
Contributions, Refunds, Paid with Other Funds		
Total Motor Fuel Tax Portion	551,536.56	22,265.82
Total Motor Fuel Tax Funds Authorized	684,293.02	39,775.74
Surplus/Deficit	132,756.46	17,509.92

Remarks:

Submitted:

Municipal Official Title Date

Approved:

Regional Engineer Date

BLR 14310 (Rev. 07/16/13)

Printed on 4/4/201611:00 AM

ORDINANCE NO. _____

AN ORDINANCE TO TRANSFER TWO SURPLUS MOTOR VEHICLES FROM THE POLICE DEPARTMENT

WHEREAS, the City of Granite City is a home rule unit pursuant to article 7, section 6, of the Illinois State Constitution of 1970; and

WHEREAS, 65 ILCS 5/11-76-4 allows municipalities by Ordinance to sell or transfer surplus personal property without advertising; and

WHEREAS, the Granite City Police Department currently owns two surplus motor vehicles, described on the attached as model years 2007 and 2005 Ford Crown Victoria 4-door vehicles, each with over 100,000 miles of wear and;

WHEREAS, the Granite City City Council hereby determines maintaining, insuring, storing, and keeping possession of said two surplus, retired police vehicles, is no longer necessary, useful, cost-effective, or for the best interest of, the City of Granite City; and

WHEREAS, the Granite City City Council hereby finds Granite City uses City resources to store, insure, and preserve two surplus motor vehicles, though both motor vehicles served beyond their ordinary useful life.

Now, therefore, be it Ordained by the City Council of the City of Granite City, Madison County, Illinois as follows.

1. The Granite City City Council hereby declares said two surplus motor vehicles to be surplus property, and that keeping those two vehicles is no longer necessary, useful, or for the best interest of the City of Granite City. Said two surplus vehicles are more fully described on the attached Exhibit A.

2. The Chief of Police and the Office of the Mayor are hereby authorized to tender possession of and title to said two surplus motor vehicles, to Chuck Heck's Auto Repair, as a source of spare parts to repair other City Police vehicles.

Passed this _____day of April, 2016.

APPROVED:_____
Mayor Edward Hagnauer

ATTEST:_____
City Clerk Judy Whitaker

82547.3

STATE OF ILLINOIS

CERTIFICATE OF TITLE OF A VEHICLE

VEHICLE IDENTIFICATION NO	YEAR	MAKE	MODEL	BODY STYLE	TITLE NO
	2005	FORD	CROWN PI	4 DOOR	

DATE ISSUED	ODOMETER	CCM	PURCHASED	PURCHASE DATE
03/08/05			NEW	02/18/05

MOBILE HOME SQ. FT.

TYPE OF TITLE: ORIGINAL

MAILING ADDRESS:

CITY OF GRANITE CITY
2330 MADISON AVE
GRANITE CITY IL 62040-0475

LEGEND(S):

OWNER(S) NAME AND ADDRESS:
CITY OF GRANITE CITY
2330 MADISON AVE
GRANITE CITY IL 62040-0475

ACTUAL MILEAGE

FIRST LIENHOLDER NAME AND ADDRESS:

SECOND LIENHOLDER NAME AND ADDRESS:

VOID

RELEASE OF LIEN

The holder of Lien on the vehicle described in this Certificate does hereby state that the lien is released and discharged.

Lienholder Name _____ By _____ Signature of Authorized Agent _____ Date _____

Lienholder Name _____ By _____ Signature of Authorized Agent _____

NEW LIEN ASSIGNMENT: The information below must be on an application for title and presented to the Secretary of State.

Secured Party: _____ Address: _____

Federal and State law requires that you state the mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

ASSIGNMENT OF TITLE

The undersigned hereby certifies that the vehicle described in this title has been transferred to the following printed name and address:

"I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statements is checked:

ODOMETER READING _____ NO TENTHS

☐ 1. The mileage stated is in excess of its mechanical limits.
☐ 2. The odometer reading is not the actual mileage."
WARNING-ODOMETER DISCREPANCY

"If this vehicle is one of more than 5 commercial vehicles owned by me, I certify also that the vehicle is not damaged in excess of 33 1/3% of its fair market value unless this document is accompanied by a salvage application."

Signature(s) of Seller(s) _____

Printed Name(s) of Seller(s) _____ DATE OF SALE _____

"I am aware of the above odometer certification made by seller."

Signature(s) of Buyer(s) _____ Printed Name _____

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that according to the records on file with my Office, the person or entity named hereon is the owner of the vehicle described hereon, which is subject to the above named liens and encumbrances, if any.

IN WITNESS WHEREOF, I HAVE AFFIXED MY SIGNATURE AND THE GREAT SEAL OF THE STATE OF ILLINOIS, AT SPRINGFIELD.

CONTROL NO. ID 36182216

Jesse White
JESSE WHITE, Secretary of State

DO NOT ACCEPT TITLE SHOWING ANY ERASURES, ALTERATIONS OR MUTILATIONS

STATE OF ILLINOIS

CERTIFICATE OF TITLE OF A VEHICLE

VEHICLE IDENTIFICATION NO.	YEAR	MAKE	MODEL	BODY STYLE	TITLE NO.
[redacted]	2007	FORD	CROWN VIC POLICE	4 DOOR	[redacted]

DATE ISSUED	ODOMETER	CCM	PURCHASED	PURCHASE DATE
02/16/07			NEW	01/18/07

MOBILE HOME SQ. FT.

TYPE OF TITLE: ORIGINAL

MAILING ADDRESS

FORD MOTOR CREDIT COMPANY
PO BOX 1739
DEARBORN MI 48121-1739

LEGEND(S)

ACTUAL MILEAGE

OWNER(S) NAME AND ADDRESS
CITY OF GRANITE CITY
2000 EDISON AVE
GRANITE CITY IL 62040

FIRST LIENHOLDER NAME AND ADDRESS
FORD MOTOR CREDIT COMPANY
PO BOX 1739
DEARBORN MI 48121-1739

SECOND LIENHOLDER NAME AND ADDRESS

VOID

RELEASE OF LIEN

The holder of a lien on the vehicle described in this Certificate does hereby state that the lien is released and discharged.

Ford Motor Credit Company — Firm Name — By: [signature] — Signature of Authorized Agent — Date: 4-2009

Firm Name — By: — Signature of Authorized Agent — Date

NEW LIEN ASSIGNMENT: The information below must be on an application for title and presented to the Secretary of State.
Secured Party: — Address:

▶ Federal and State law requires that you state the mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

ASSIGNMENT OF TITLE

The undersigned hereby certifies that the vehicle described in this title has been transferred to the following printed name and address:

"I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statements is checked."

▶ ODOMETER READING ____ NO TENTHS

☐ 1. "The mileage stated is in excess of its mechanical limits."
☐ 2. The odometer reading is not the actual mileage."
WARNING–ODOMETER DISCREPANCY

"If this vehicle is one of more than 5 passenger vehicles owned by me, I certify also that the vehicle is not damaged in excess of 33 1/3% of its fair market value unless this document is accompanied by a salvage application."

Signature(s) of Seller(s) ____

Printed Name(s) of Seller(s) ____ DATE OF SALE ____

"I am aware of the above odometer certification made by seller."

Signature(s) of Buyer(s) ____ Printed Name ____

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that according to the records on file with my Office the person or entity named hereon is the owner of the vehicle described hereon, which is subject to the above named liens and encumbrances, if any. IN WITNESS WHEREOF, I HAVE AFFIXED MY SIGNATURE AND THE GREAT SEAL OF THE STATE OF ILLINOIS, AT SPRINGFIELD.

G02389170
CONTROL NO.

Jesse White
JESSE WHITE, Secretary of State

DO NOT ACCEPT TITLE SHOWING ANY ERASURES, ALTERATIONS OR MUTILATIONS

Granite City Fire Department

Departmental Activity Report

Current Period: 03/01/2016 to 03/31/2016, Prior Period: 03/01/2016 to 03/31/2016
00:00 to 24:00
All Stations
All Shifts
All Units
Fire Alarm Responses, EMS Alarm Responses, Training Classes, Occupancy Inspections and Activities

Category	Current Period Count	Current Period Staff Hrs	Prior Period Count	Prior Period Staff Hrs
EMS Alarm Situations				
No Location Provided	1	00:28	1	00:28
	1	00:28	1	00:28
Fire Alarm Situations				
Chemical release, reaction, or toxic	2	02:48	2	02:48
Combustible/flammable spills & leaks	1	02:51	1	02:51
Dispatched and cancelled en route	11	22:19	11	22:19
Electrical wiring/equipment problem	3	45:56	3	45:56
Emergency medical service (EMS) Incident	3	18:06	3	18:06
False alarm and false call, Other	8	16:42	8	16:42
Fire, Other	1	09:00	1	09:00
Good intent call, Other	7	77:06	7	77:06
Hazardous condition, Other	1	00:33	1	00:33
Medical assist	104	121:33	104	121:33
Mobile property (vehicle) fire	1	01:15	1	01:15
Natural vegetation fire	2	01:24	2	01:24
Outside rubbish fire	4	03:01	4	03:01
Person in distress	1	00:27	1	00:27
Public service assistance	2	02:55	2	02:55
Rescue, emergency medical call (EMS),	4	06:24	4	06:24
Service call, Other	3	02:27	3	02:27
Severe Weather & Natural Disaster -	1	13:00	1	13:00
Smoke, odor problem	1	03:12	1	03:12
Special outside fire	2	06:42	2	06:42
Special type of incident, other	1	06:00	1	06:00
Structure Fire	5	46:42	5	46:42
System or detector malfunction	3	06:45	3	06:45
Unauthorized burning	1	00:14	1	00:14
Unintentional system/detector operation	12	16:12	12	16:12
Water problem	1	01:57	1	01:57
	185	435:37	185	435:37
Training				
FIRE EXTINGUSHER	2	02:00	2	02:00
AERIAL TRAINING	3	03:00	3	03:00

* Staff hours for Fire Alarm responses that have an associated EMS alarm record are considered shared hours. Shared hours are posted only with the EMS alarm responses to avoid duplication of staff hours in totals.

Granite City Fire Department

Departmental Activity Report

Current Period: 03/01/2016 to 03/31/2016, Prior Period: 03/01/2016 to 03/31/2016
00:00 to 24:00
All Stations
All Shifts
All Units
Fire Alarm Responses, EMS Alarm Responses, Training Classes, Occupancy Inspections and Activities

	Current Period		Prior Period	
Category	Count	Staff Hrs	Count	Staff Hrs
Training				
ALS ASSISTANCE	2	02:00	2	02:00
ALS ORIENTATION	4	04:00	4	04:00
APPARATUS POSITIONING	8	08:00	8	08:00
Drivers Training	2	02:20	2	02:20
Electrical Safety	5	05:00	5	05:00
EMS PROTOCOL &TEXT	11	05:30	11	05:30
Fire Academy	4	176:00	4	176:00
Fire Apparatus Engineer	41	119:00	41	119:00
Fire Control, General	3	02:15	3	02:15
FIRE GROUND CRITIQUE	11	11:00	11	11:00
Fundamentals of Fire Suppression	1	09:00	1	09:00
HOSE	7	14:00	7	14:00
LADDERS	14	08:00	14	08:00
MAINTENANCE	2	04:00	2	04:00
MAPS	2	01:00	2	01:00
Master Streams	7	07:00	7	07:00
Orientation of The EMT/Responder	2	02:00	2	02:00
PHYSICAL TRAINING	12	13:00	12	13:00
PUMP OPERATION	8	11:00	8	11:00
RADIO PRACTICES & TERMINOLOGY	4	09:00	4	09:00
SCBA Donning Methods	14	22:30	14	22:30
SCBA Inspection, Care, and Cleaning	13	16:15	13	16:15
SMALL TOOLS & EQUIP	4	04:00	4	04:00
SPLINTING	4	04:00	4	04:00
Strategic and Tactical Operations	9	18:00	9	18:00
STREETS	11	17:30	11	17:30
TOUR OF A FACILITY	33	33:00	33	33:00
Vehicle and Machinery Operations	16	29:00	16	29:00
	259	562:20	259	562:20

* Staff hours for Fire Alarm responses that have an associated EMS alarm record are considered shared hours. Shared hours are posted only with the EMS alarm responses to avoid duplication of staff hours in totals.

Granite City Fire Department

2300 Madison Ave., Granite City, IL. 62040

Administered Meds Count From: 03/01/2016 To: 03/31/2016

Mutual Aid Assignments Provided	2	**Mutual Aid Assignments Received**	0
Abbott Ambulance	2		

Total EMS Assignments Provided			382
4440-02	162	42.4 %	
4443-01	22	5.8 %	
4447-03	196	51.3 %	
4449-04	2	0.5 %	

No Patient At Scene Assignments			18

Call Volume Day of Week Analysis			382
Monday	43	11.3 %	
Tuesday	70	18.3 %	
Wednesday	74	19.4 %	
Thursday	56	14.7 %	
Friday	45	11.8 %	
Saturday	50	13.1 %	
Sunday	44	11.5 %	

Call Volume by Hour Analysis			382
0	15	3.9 %	
1	8	2.1 %	
2	10	2.6 %	
3	10	2.6 %	
4	11	2.9 %	
5	9	2.4 %	
6	8	2.1 %	
7	8	2.1 %	
8	21	5.5 %	
9	18	4.7 %	
10	15	3.9 %	
11	17	4.5 %	
12	14	3.7 %	
13	18	4.7 %	
14	24	6.3 %	
15	28	7.3 %	
16	19	5.0 %	
17	24	6.3 %	
18	14	3.7 %	
19	22	5.8 %	
20	20	5.2 %	
21	16	4.2 %	
22	14	3.7 %	
23	19	5.0 %	

Miles to Scene Analysis			0

Miles to Destination Analysis			289
.1 - 5	199	68.9 %	
05 - 10	10	3.5 %	
10 - 15	60	20.8 %	
15 - 20	15	5.2 %	
20 - 25	2	0.7 %	
25 - 30	3	1.0 %	

Miles to Base Analysis			0

Crew Shift Assignments Analysis			382
1	128	33.5 %	
2	128	33.5 %	
3	126	33.0 %	

Responded From Assignments Analysis			382
Hospital	16	4.2 %	
On Street in City	25	6.5 %	
On Street out of City	4	1.0 %	
Station 1	211	55.2 %	
Station 3	126	33.0 %	

District Assignments Analysis			367
Non-Resident	61	16.6 %	
Resident	306	83.4 %	

Location City Analysis			382
Granite City	378	99.0 %	
GraniteCity	1	0.3 %	
MADISON	1	0.3 %	
VENICE	2	0.5 %	

Location County Analysis			382
IL	1	0.3 %	
Madison	381	99.7 %	

Location Type Analysis			382
Home / Residence	237	62.0 %	
Farm / Ranch	3	0.8 %	
Office / Business / Ind	18	4.7 %	
Street / Highway	22	5.8 %	
Public Building / Area	29	7.6 %	
Residental Institution	15	3.9 %	
Other Specified Location	52	13.6 %	
Unspecified	1	0.3 %	
Education Facility	1	0.3 %	
Not Applicable	4	1.0 %	

EMS Assignments Response Type Analysis			382
911 Response (Scene)	385	100.8 %	

EMS Assignments Response Mode Analysis			382
Initial Lights and Sirens, Downgraded to No Lights or Sirens	6	1.6 %	
Lights and Sirens	327	85.6 %	
No Lights or Sirens	52	13.6 %	

EMS Assignments Transport Type Analysis			367
D.O.A.	5	1.4 %	
Patient Refused Care	70	19.1 %	
Treat/Release	1	0.3 %	
Treat/Transport	291	79.3 %	

Destination Analysis			367
*No Transport	75	20.4 %	
*Residence	3	0.8 %	
Anderson Hospital Maryville	7	1.9 %	
*Gateway Regional Medical Center	198	54.0 %	
St. John's Mercy Medical Center	1	0.3 %	
St. Luke's Hospital	2	0.5 %	
Christian Hospital Northeast	4	1.1 %	
Missouri Baptist Medical Center	1	0.3 %	
John Cochran VA- St. Louis	2	0.5 %	
St. Louis University Hospital - Main	22	6.0 %	
DePaul Health Center	2	0.5 %	
Barnes-Jewish West County Hospital	1	0.3 %	
SSM Cardinal Glennon Children's Hospital	16	4.4 %	
St. Louis Children's Hospital	9	2.5 %	
Barnes-Jewish Hospital - South	12	3.3 %	
St. Mary's Hospital	1	0.3 %	
*Granite Nursing & Rehab	8	2.2 %	
The Fountains	1	0.3 %	
Fountainview Memory Center	2	0.5 %	

Destination Analysis (Trauma)			65
*No Transport	10	15.4 %	
*Residence	1	1.5 %	
Anderson Hospital Maryville	2	3.1 %	
*Gateway Regional Medical Center	32	49.2 %	
St. Louis University Hospital - Main	10	15.4 %	
Barnes-Jewish West County Hospital	1	1.5 %	
SSM Cardinal Glennon Children's Hospital	2	3.1 %	
St. Louis Children's Hospital	3	4.6 %	
Barnes-Jewish Hospital - South	4	6.2 %	

Destination Determination Analysis			367
Closest Facility (None Below)	166	45.2 %	
Not Applicable	66	18.0 %	
Patient / Family Choice	85	23.2 %	
Patient physician choice	37	10.1 %	
Managed Care	4	1.1 %	
Law Enforcement Choice	2	0.5 %	
Other	7	1.9 %	

Insurance Providers Analysis			367
Advantra Coventry	3	0.8 %	
Advantra GHP	3	0.8 %	
Advantra GOLD ADVANTAGE	3	0.8 %	
Advantra Medicare HMO	1	0.3 %	
Aetna	1	0.3 %	
ANDERSON HOSPITAL V NUMBER	1	0.3 %	
Anthem Blue Cross	1	0.3 %	
Bcbs	4	1.1 %	
Bcbs fep	1	0.3 %	
Bcbs fep	1	0.3 %	
BCBS HIGHMARK	1	0.3 %	
BCBS IL	3	0.8 %	
BCBS ILLINOIS	1	0.3 %	
BCBS OF ILLINOIS	1	0.3 %	

BCBS XOF	1	0.3 %
BCHS	1	0.3 %
Blue Choice HMO	1	0.3 %
BSBS Tennessee	1	0.3 %
CMR	1	0.3 %
Conventry Life Plan of MO	1	0.3 %
Coventry Health Plan of Mo	2	0.5 %
CoVENTRY HLTH PLAN OF MO	1	0.3 %
Coventry One	1	0.3 %
ESSENCE HEALTHCARE	2	0.5 %
Essence medicare hmo	1	0.3 %
gallagher bassett	1	0.3 %
Harmony	2	0.5 %
Harmony health	2	0.5 %
HarMONY HEALTH PLAN	10	2.7 %
Harmony healthplan	1	0.3 %
Healthlink Open Access	1	0.3 %
HHARMONY HEALTH PLAN	1	0.3 %
Humana gold choice	4	1.1 %
Humana Gold Choice PO box 14601	1	0.3 %
ILLINOIS MEDICAID	2	0.5 %
Info faxed to office by SLUH	1	0.3 %
IPAC O/P ONLY	1	0.3 %
Medicaid Illnois	22	6.0 %
Medicare	1	0.3 %
Medicare Advantage	1	0.3 %
Medicare Advantage UHC	2	0.5 %
Medicare complete	10	2.7 %
Medicare HMO	2	0.5 %
Medicare Mutual Omaha PO 1602	93	25.3 %
Meridan Health Plan	1	0.3 %
Meridian	7	1.9 %
Meridian health	1	0.3 %
MerIDIAN HEALTH PLAN	1	0.3 %
Meridian Health Plan	29	7.9 %
MerIDIAN HEALTH PPLAN	1	0.3 %
Meridian healthplan	2	0.5 %
Meritain Health/HL	1	0.3 %
Molina	5	1.4 %
MoLINA HEALTH CARE	1	0.3 %
MoLINA HEALTHCARE	2	0.5 %
Molina Healthcare of IL	11	3.0 %
MVA state farm	1	0.3 %
N/A	7	1.9 %
No transport	9	2.5 %
None	1	0.3 %
null	1	0.3 %
Painters Dist Council 2	1	0.3 %
Pyramid life ins co	1	0.3 %
Riverbend	1	0.3 %
Ruan Transportation	1	0.3 %
Self Pay	63	17.2 %
State of IL EMPL HL	1	0.3 %
State of Illinois Employee	1	0.3 %
Tricare Prime	1	0.3 %
UHC AARP Medicare Com	1	0.3 %
UHC Choice	1	0.3 %
Un ited healthcare choice	1	0.3 %
United group programs inc	1	0.3 %
United Healthcare	1	0.3 %
United Healthcare Choice	2	0.5 %
United Healthcare Select	1	0.3 %
Unknown	5	1.4 %
VaMD CTR NONVA CARE 04 FJB	1	0.3 %
VETERANS AFFAIRS MEDICAL CENTER	1	0.3 %
Wellcare Medicare HMO	4	1.1 %

Dispatch Complaint Assignments Analysis 382

Abdominal Pain	13	3.4 %
Assault	2	0.5 %
Assist invalid	8	2.1 %
Back pain (non trauamatic)	4	1.0 %
Breathing problems	35	9.2 %
Cardiac/Respiratory arrest	5	1.3 %
Chest pain	30	7.9 %
Choking	2	0.5 %
Convulsions/Seizure	13	3.4 %
Diabetic problems	8	2.1 %
Eye problems/Injuries	1	0.3 %
Falls/Back injury (traumatic)	47	12.3 %
Heart Problems	5	1.3 %
Heat/Cold exposure	1	0.3 %
Hemorrhage/Laceration	2	0.5 %
Nature unknown	15	3.9 %
Overdose/Ingestion/Poisoning	15	3.9 %
Pregnancy/Childbirth/Miscarriage	2	0.5 %

Psych/Suicide	17	4.5 %
Sick case	34	8.9 %
Stroke(CVA)	6	1.6 %
Traffic accident	15	3.9 %
Transfer/Interfacility/Palliative Care	47	12.3 %
Traumatic injuries	14	3.7 %
Unconscious/Fainting	25	6.5 %
Unknown Problem Man Down	16	4.2 %

Total Number Of Patients 367

Patient Age Analysis

18-35	74	20.2 %
36-65	113	30.8 %
65+	147	40.1 %
Less Than 18	33	9.0 %

Patient Gender Analysis

Female	200	54.5 %
Male	167	45.5 %

Patient Ethnic Analysis

Asian	1	0.3 %
Black	45	12.3 %
Hispanic	6	1.6 %
Other	1	0.3 %
Unknown	4	1.1 %
White	310	84.5 %

Patient Pre Existing Conditions Analysis 750

None	2	0.3 %
"ADRENAL PROBLEM"	1	0.1 %
20 weeks pregnant	1	0.1 %
A-Fib	10	1.3 %
Abortion, Spontaneous	1	0.1 %
ADD	2	0.3 %
Addiction	1	0.1 %
ADHD	5	0.7 %
AFIB	2	0.3 %
Alcoholism	4	0.5 %
ALS	2	0.3 %
Alzheimers disease	1	0.1 %
Anemia	1	0.1 %
Anemia, pernicious	3	0.4 %
Anemia, sickle cell	1	0.1 %
Anemic	1	0.1 %
Anxiety	22	2.9 %
Arthritis, osteo	6	0.8 %
Arthritis, rheumatoid	4	0.5 %
Asthma	22	2.9 %
Back pain	7	0.9 %
Behavioral / Psych	6	0.8 %
Bi-polar	9	1.2 %
Bilateral patella degeneration	1	0.1 %
Bipolar	1	0.1 %
Blood pressure, hypertensive	2	0.3 %
Brain annuerysm	1	0.1 %
BRAIN TUMOR	2	0.3 %
BRONCHITIS	2	0.3 %
Bypass	2	0.3 %
CA Kidney	1	0.1 %
CA Lung	1	0.1 %
CABG	3	0.4 %
Cancer	8	1.1 %
Cardiac	49	6.5 %
Cardiac stent	1	0.1 %
Cardic	1	0.1 %
Cellulitis	1	0.1 %
Cellulitis	1	0.1 %
Cerebral Palsy	3	0.4 %
CHF	25	3.3 %
CHolesterol	1	0.1 %
Cirrohsis	1	0.1 %
Colitis	2	0.3 %
Colostomy	1	0.1 %
Conversion disorder	1	0.1 %
COPD	43	5.7 %
CVA	15	2.0 %
Dementia	17	2.3 %
Depression	14	1.9 %
Diabetes	10	1.3 %
Diabetes type 1	9	1.2 %
Diabetes type 2	30	4.0 %
Dialysis / Renal Failure	5	0.7 %
Diverticulitis	2	0.3 %

Drug abuse	11	1.5 %
Emphysema	5	0.7 %
Epilepsy	2	0.3 %
Esophageal Spasm	1	0.1 %
Gastroporsesis	1	0.1 %
GERD	4	0.5 %
Gout	1	0.1 %
Hepatitis C	6	0.8 %
Hepatopulmonary syndrome	1	0.1 %
Hernia	1	0.1 %
Hernia SURGERY	1	0.1 %
Heroin abuse	1	0.1 %
Heroin Addiction	2	0.3 %
Heroin Use	1	0.1 %
Herpes	2	0.3 %
High Cholesterol	6	0.8 %
Histerectomy	1	0.1 %
HTN	43	5.7 %
Hypercholesterolemia	1	0.1 %
Hypertension	78	10.4 %
Hypoglycemia	3	0.4 %
Hypotension	1	0.1 %
Hypothyroidism	2	0.3 %
IDDM	1	0.1 %
iron deficiency	1	0.1 %
Kidney disease	1	0.1 %
Kidney FAILURE	1	0.1 %
Knee Degeneration	1	0.1 %
Liver disease	3	0.4 %
MI	13	1.7 %
MI x1	1	0.1 %
Mitral valve prolapse	1	0.1 %
MS	5	0.7 %
Multiple sclorosis	1	0.1 %
Myositis	1	0.1 %
Narcolepsy	2	0.3 %
Neurofibromatosis	1	0.1 %
NON HODGKINS LYMPHOMA	1	0.1 %
NONE	43	5.7 %
Obesity	1	0.1 %
ODD	1	0.1 %
Pacemaker	13	1.7 %
Pancreatic Cancer	1	0.1 %
Pancreatitis	1	0.1 %
Parkinsons	1	0.1 %
Past Blood Clot in R leg	1	0.1 %
Pleurisy	1	0.1 %
Pm	1	0.1 %
Pneumonia	3	0.4 %
Portal vein thrombosis	1	0.1 %
Pregnancy	3	0.4 %
Psych	3	0.4 %
Psychiatric	1	0.1 %
Ptsd	1	0.1 %
Quintuple Bypass	1	0.1 %
R HIP REPLACEMENT	1	0.1 %
Recent Uterus Biopsy	1	0.1 %
Renal Cancer	1	0.1 %
Renal Failure	12	1.6 %
Rheumatoid Arthritis	1	0.1 %
Schizophrenia	10	1.3 %
Seizures	28	3.7 %
Sleep apnea	1	0.1 %
SPINA BIFIDA	1	0.1 %
SPINAL STENOSIS	1	0.1 %
Stroke	1	0.1 %
Substance abuse	1	0.1 %
Suicidal	1	0.1 %
Suicidal thoughts	1	0.1 %
Tendonitis	1	0.1 %
Throat CA	1	0.1 %
Thrush	1	0.1 %
Thryroid Disease	1	0.1 %
Thyroid	3	0.4 %
Thyroid CA	1	0.1 %
Thyroid cancer	1	0.1 %
TIA	4	0.5 %
Transient Ischemic Attack	1	0.1 %
Ulcer	1	0.1 %
Unknown	10	1.3 %
Unspecified Cardiac	1	0.1 %
UTI	6	0.8 %
Vertigo	1	0.1 %

Patient Primary Illness Assessment Analysis 292

Abdominal pain/problems	18	6.2 %
Airway Obstruction	1	0.3 %

Allergic Reaction	1	0.3 %
Altered level of consciousness	13	4.5 %
Behavioral/psychiatric disorder	15	5.1 %
Cardiac arrest	5	1.7 %
Cardiac rhythm disturbance	3	1.0 %
Chest pain/discomfort	25	8.6 %
Diabetic symptoms	7	2.4 %
Poisoning/drug ingestion	13	4.5 %
Pregnancy/OB delivery	2	0.7 %
Respiratory Arrest	3	1.0 %
Respiratory Distress	18	6.2 %
Seizure	11	3.8 %
Stroke/CVA	3	1.0 %
Syncope/fainting	11	3.8 %
Other	142	48.6 %
Unknown	1	0.3 %

Patient Primary Trauma Cause Assessment Analysis 61

Bites	1	1.6 %
Blunt/Thrown Object	4	6.6 %
Falls	31	50.8 %
Machinery Accident	1	1.6 %
Motor Vehicle Crash	5	8.2 %
Other	12	19.7 %
Pedestrian vs MV	2	3.3 %
Unknown	5	8.2 %

Procedures Administered Analysis 1735

Airway position - head-tilt chin-lift	3	0.2 %
Airway-CPAP	1	0.1 %
Assessment-Adult	326	18.8 %
Assessment-Pediatric	22	1.3 %
Bandage - sterile	6	0.3 %
Blood glucose analysis	360	20.7 %
Capnography (CO2 indicator)	9	0.5 %
Capnography (ETCO2 Monitor)	20	1.2 %
Cervical collar application	14	0.8 %
Cleansed wound	1	0.1 %
Clothing removed	1	0.1 %
Cold pack application	4	0.2 %
Contact Medical Control	1	0.1 %
CPR	5	0.3 %
Defibrillation-Placement for Monitoring/Analysis	1	0.1 %
ECG - 12 lead	95	5.5 %
ECG - 4 lead	170	9.8 %
Endotracheal intubation	4	0.2 %
Intraosseous insertion	3	0.2 %
Intravenous established	163	9.4 %
Intravenous maintained	17	1.0 %
Intravenous Unsuccessful I	42	2.4 %
Irrigation with normal saline	1	0.1 %
LUCAS Chest Compression Systeml	1	0.1 %
Moved by long spine board	5	0.3 %
Moved by manual lift/carry	33	1.9 %
Moved by stairchair	22	1.3 %
Nasopharyngeal airway insertion	4	0.2 %
Oropharyngeal airway insertion	1	0.1 %
Pain Measurement	8	0.5 %
Patient Loaded	22	1.3 %
Patient Off-Loaded	18	1.0 %
Position Pt - semi-fowlers	11	0.6 %
Position Pt - supine	1	0.1 %
Pulse Oximetry	93	5.4 %
Restraint - physical	2	0.1 %
Sling	1	0.1 %
Spinal immobilization	1	0.1 %
Splint - extremity	3	0.2 %
Splinting-Basic	2	0.1 %
Suction - endotracheal	1	0.1 %
Suction - upper airway	7	0.4 %
Temperature Measurement (Tympanic)	23	1.3 %
Transported on stretcher secured with belts	177	10.2 %
Transported secured in personal child seat	7	0.4 %
Transported secured in unit child seat	3	0.2 %
Transported w/belt on benchseat	3	0.2 %
Transported w/belt on captain chair	2	0.1 %
Transported w/belt on CPR seat	1	0.1 %
Vagal Maneuver-Valsalva or Other Vagal Maneuver (N	1	0.1 %
Vagal maneuvers	1	0.1 %
Ventilation assist - BVM	9	0.5 %
Wound Care-General	3	0.2 %

Medications Administered Analysis 247

Albuterol	15	6.1 %
Amiodarone	1	0.4 %
Aspirin	15	6.1 %
Atropine sulfate	1	0.4 %

Calcium chloride	1	0.4 %
Dexamethasone sodium phosphate (Decadron)	4	1.6 %
Dextrose 50%	6	2.4 %
Epinephrine HCL (1:10,000)	5	2.0 %
Glucagon	1	0.4 %
Intravenous electrolyte solutions Lactated Ringer	1	0.4 %
Intravenous electrolyte solutions Sodium chloride	44	17.8 %
Labetalol	1	0.4 %
Naloxone HCL	18	7.3 %
Nitroglycerin ointment	1	0.4 %
Nitroglycerin spray	20	8.1 %
Normal Saline Lock	8	3.2 %
Ondansetron (zofran)	8	3.2 %
Oxygen	96	38.9 %
Sodium bicarbonate	1	0.4 %

EMS Assignments Summary

EMS Assignments:		382
Mutual Aid Provided:	2	0.52 %
Mutual Aid Received:	0	0.00%
No Patient At Scene:	18	4.71 %

Patient Care Reports:		367
Illness Related:	292	79.56 %
Trauma Related:	61	16.62 %

RESOLUTION _____

A RESOLUTION TO PURCHASE AN AMBULANCE FOR THE GRANITE CITY FIRE DEPARTMENT

WHEREAS, the City of Granite City is a Home Rule unit pursuant to Article VII, Section 6, of the Illinois State Constitution of 1970; and

WHEREAS, the Granite City City Council hereby finds that the residents of Granite City will benefit from the purchase by the City of a model year 2016 Type I ambulance; and

WHEREAS, in a resolution adopted in March, 2016, the Granite City City Council authorized the solicitation of competitive bids, toward the purchase by the City of a custom built ambulance vehicle; and

Pursuant to that March, 2016 resolution, the City of Granite City published a request for bids and received five (5) bids, from vendors of ambulances; and

WHEREAS, the Granite City City Council hereby finds that the bid of American Response Vehicles, of Columbia, Missouri, in the amount of $161,426.00, for a 2016 Type I ambulance, to be the lowest responsible bid, said bid amount responsive to the specifications prepared by the Granite City Fire Department, said bid amount after trade in of a 2007 Frazer ambulance currently owned by the City.

NOW, THEREFORE, be it resolved by the City Council of the City of Granite City, Madison County, Illinois, to accept the bid of American Response Vehicles, of Columbia, Missouri, in the amount of $161,426.00. That bid amount of $161,426.00 is to be paid by the City, along with trading in a 2007 Frazer ambulance currently owned by the City. The Granite City City Council further authorizes the purchase of the following options with said ambulance, at the following prices, all per bid: External Condenser ($800.00), Arctic Wedge cover for Condenser ($9,500.00), and rear 3M reflective Chevrons ($750.00), for a total purchase price,

after trade-in, of $163.746.00. The Granite City City Council hereby authorizes the Offices of the Mayor, Comptroller, and Fire Chief, to execute all documents necessary to carry out the intent of this resolution, to close on the purchase of said 2016 Type I ambulance, within ninety (90) days of the date of this resolution.

The Granite City City Council hereby directs the Granite City Fire Chief to report back to the City Council concerning the closing on said ambulance purchase from American Response Vehicles. This resolution shall take effect upon passage.

ADOPTED this _____ day of April, 2016.

APPROVED: _____
Mayor Edward Hagnauer

ATTEST: _____
Judy Whitaker, City Clerk

86020

RESOLUTION NO._____
A RESOLUTION AUTHORIZING THE OFFICE OF THE TREASURER
TO RELEASE DEMOLITION LIEN AGAINST
2459 BENTON STREET, GRANITE CITY, IL 62040

WHEREAS, the City of Granite City is a home rule unit pursuant to Article 7, Section 6, of the Illinois State Constitution of 1970, and

WHEREAS, the City of Granite City filed a demolition lien on or about June 14, 2002, on the property commonly known as 2459 Benton Street, Granite City, Illinois; and

WHEREAS, the current owner of that vacant lot known as 2459 Benton Street, Granite City, Illinois, proposes to tender and transfer ownership of that lot to a neighbor adjoining the property of 2459 Benton Street, and said neighbor wishes to accept that tender, provided the demolition lien is released by the City; and

WHEREAS, the Granite City City Council finds it will be in the best interest of the City of Granite City to release the lien, in the originally-recorded amount of $1,615.93, provided the 2459 Benton Street property is merged and joined with an adjacent parcel to create a single, larger lot.

NOW, THEREFORE, be it resolved by the City Council of the City of Granite City, Madison County, Illinois as follows.

The Office of the Granite City Treasurer is hereby authorized to compromise and release the Demolition Lien recorded on or about June 14, 2002, on the property commonly known as 2459 Benton Street, Granite City, Illinois, 62040, subject to and contingent upon all of the following. Before releasing the demolition lien, in the stated amount of 1,615.93, the Office of the Treasurer shall first receive documentation and proof from the owner of the 2459 Benton Street property that a quit claim deed or other document has been filed with the Office of the Madison County Recorder, sufficient to transfer title to 2459 Benton Street into the name of an

adjacent and adjoining landowner. The Treasurer's authority to release said Demolition Lien recorded on or about June 14, 2002, is further contingent upon and subject to the owner of 2459 Benton Street first providing the Treasurer documentation that the lot commonly known as 2459 Benton Street has been merged with and joined into a single, larger parcel, with a neighboring parcel of land.

This resolution shall take effect upon passage. The Office of the Treasurer is directed to report back to the Granite City City Council, as to whether said demolition lien was released.

ADOPTED by the Granite City City Council this ____ day of April, 2016.

APPROVED:_____
MAYOR ED HAGNAUER

ATTEST:_____
CITY CLERK JUDY WHITAKER

86033

A RESOLUTION AUTHORIZING THE OFFICE OF THE TREASURER TO COMPROMISE LIENS AGAINST 2560 DELMAR AVENUE

WHEREAS, the City of Granite City is a Home Rule unit pursuant to Article VII, Section 6, of the Illinois State Constitution of 1970; and

WHEREAS, the City of Granite City filed grass cutting liens against the property commonly known as 2560 Delmar Avenue, totaling $1,300.00, for cutting of weeds and grass in 2013, 2014, and 2015; and

WHEREAS, the City of Granite City filed liens against 2560 Delmar Avenue, for unpaid sewer bills in 2014, in the amount of $278.51; and

WHEREAS, the Granite City City Council is advised the owner of 2560 Delmar Avenue, MSF Investments, proposes to compromise and settle said recorded liens totaling in principle amount $1,578.51, and then to tender the deed to the property to its mortgage holder, in lieu of foreclosure; and

WHEREAS, MSF Investments advises the City Council that foreclosure may supersede and defeat at least some liens of the City, recorded more recently than the mortgage; and

WHEREAS, the Granite City City Council hereby finds it will promote good management and efficient use of City resources, and be in the best interests of the residents of Granite City, to settle and compromise the liens on 2560 Delmar Avenue, while settling no other claims held by the City of Granite City relating to such property.

NOW, THEREFORE, be it resolved by the City Council of Granite City, Illinois, as follows:

1. The Office of the Treasurer is authorized to accept $1,000.00 as full and final payment of all outstanding liens currently filed as of the date of this resolution, by the City of Granite City against 2560 Delmar Avenue, subject to and contingent upon each of the following:

    A. Before releasing any of the liens under this resolution, the Office of the Treasurer must receive documentation MSF Investments tendered, and the mortgage holder accepted, a deed in lieu of foreclosure to the property

commonly known as 2560 Delmar Avenue; and

B. The mortgage holder informs the Office of the Treasurer that the mortgage holder will bring current the delinquent balance on the sewer bill, currently in the approximate amount of $750.29, and the mortgage holder shall keep the sewer bill paid current while the mortgage holder owns the property; and

C. The mortgage holder commits in writing to the Office of the Treasurer its intent to maintain the property and improvements at 2560 Delmar Avenue while it owns the property, including but not limited to timely and regular mowing of all grass and weeds on the subject property.

This authorization to compromise and settle liens shall expire unless accepted in full by both MSF Investments and the mortgage holder to the property, by July 19, 2016. After that date, this resolution shall be void and of no force or effect, all without further action by the Granite City City Council.

ADOPTED by the Granite City City Council this ___ day of April, 2016.

APPROVED:_____ ATTEST:_____

Mayor Edward Hagnauer City Clerk, Judy Whitaker

86037

ORDINANCE NO. _____

AN ORDINANCE APPROVING THE TRANSFER OF VOLUME CAP IN CONNECTION WITH PRIVATE ACTIVITY BOND ISSUES, AND RELATED MATTERS.

WHEREAS, THE CITY OF GRANITE CITY Illinois (the *"Municipality"*) is a municipality and a home rule unit of government under Section 6 of Article VII of the 1970 Constitution of the State of Illinois; and

WHEREAS, Section 146 of the Internal Revenue Code of 1986, as amended (the *"Code"*), provides that the Municipality has volume cap equal to $100 per resident of the Municipality in each calendar year, which volume cap may be allocated to certain tax-exempt private activity bonds; and

WHEREAS, the Illinois Private Activity Bond Allocation Act, 30 *Illinois Compiled Statutes 2008,* 345/1 *et seq.,* as supplemented and amended (the *"Act"*), provides that a home rule unit of government may transfer its allocation of volume cap to any other home rule unit of government, the State of Illinois or any agency thereof or any non-home rule unit of government; and

WHEREAS, it is now deemed necessary and desirable by the Municipality to transfer its entire volume cap allocation for calendar year 2016 to the Southwestern Illinois Development Authority (the *"Issuer"*) to be applied toward the issuance of private activity bonds by the Issuer (the *"Bonds"*) or for such other purpose permitted by this Ordinance;

NOW, THEREFORE, Be It Ordained by the City Council of the City of Granite City, Illinois, as follows:

SECTION 1. That, pursuant to Section 146 of the Code and the Act, the entire volume cap of the Municipality for calendar year 2016 is hereby transferred to the Issuer, which shall issue the Bonds using such transfer of volume cap, without any further action required on the part of the Municipality, and the adoption of this Ordinance shall be deemed to be an allocation of such volume cap to the issuance of the Bonds or such other bonds.

SECTION 2. That the Municipality and the Issuer shall maintain a written record of this Ordinance in their respective records during the term that the Bonds or any other such bonds to which such volume cap is allocated remain outstanding.

SECTION 3. That the Mayor, the City Clerk and all other proper officers, officials, agents and employees of the Municipality are hereby authorized, empowered and directed to do all such acts and things and to execute all such documents and certificates as may be necessary to further the purposes and intent of this Ordinance.

SECTION 4. That the provisions of this Ordinance are hereby declared to be separable, and if any section, phrase or provision of this Ordinance shall for any reason be declared to be

invalid, such declaration shall not affect the remainder of the sections, phrases and provisions of this Ordinance.

SECTION 5. That all ordinances, resolutions or orders, or parts thereof, in conflict herewith are, to the extent of such conflict, hereby superseded; and that this Ordinance shall be in full force and effect upon its adoption and approval.

Presented, passed, approved and recorded this ___ day of _____, 2016.

Approved:

_____
Ed Hagnauer, Mayor

[SEAL]

ATTEST:

_____
City«CityVillage» Clerk

Ayes: _____

_____

Nays: _____

Absent or Not Voting: _____

86017

(Letterhead of the City)

REPORT OF ALLOCATION GRANTED
BY HOME-RULE UNITS

(Date) [Due by May 1, 2016]

Office of the Governor
Governor's Office of Management and Budget
603 Stratton Building
Springfield, Illinois 62706

ATTENTION: Debt Management Unit

Re: **Issuer: City of Granite City**
Total 2016 Volume Cap Allocation: $2,918,300

Volume Cap allocations transferred by Issuer resolution prior to May 1, 2016: _____ $2,918,300

If reallocated to another issuer, state name of issuer: Southwestern Illinois Development Authority (SWIDA)

Copies of allocation resolutions or ordinances are attached. (Note: Memorandums of agreements with businesses need not be attached.)

Total Allocation Granted or Reallocated: $ $2,918,300

Sincerely,

_____
(Signature of authorized public official)
(Title)
(Telephone number)

86018

ORDINANCE NO. _____

AN ORDINANCE TO AUTHORIZE AND RATIFY DISTRIBUTIONS TO THE POLICE AND FIRE PENSION FUNDS, FROM THE GENERAL FUND OF THE CITY OF GRANITE CITY

WHEREAS, the City of Granite City is a home rule unit pursuant to Article VII, section 6 of the Illinois Constitution of 1970; and

WHEREAS, for many years, the City of Granite City has helped fund pension funds for its qualified retired fire and police employees, per 40 ILCS 5/4-101 and 40 ILCS 5/3-101 et seq.; and

WHEREAS, on December 15, 2015, the Granite City City Council adopted Ordinance 8530, levying a tax for the City of Granite City for the fiscal year ending April 30, 2016; and

WHEREAS, on July 21, 2015, the Granite City City Council adopted Budget and Appropriation Ordinance 8499; and

WHEREAS, said Ordinance called for funding the police pension fund said fiscal year in the amount of $1,268,000, and called for funding the fire pension fund the same fiscal year in the identical amount of $1,268,000; and

WHEREAS, the Granite City City Council hereby finds the sum of $816,676.34 was paid this fiscal year into the police pension fund, and the sum was paid into the fire pension fund during this same fiscal year; and

WHEREAS, the Granite City City Council hereby finds that before the conclusion of the fiscal year ending April 30, 2016, the residue amount called for in the levy and budget Ordinances identified above should be paid into those two respective pension funds, specifically $451,323.66 should be paid into the police pension fund, and an equal sum should be paid into the fire pension fund, for a total distribution to the two pension funds of $902,647.32, before April 30, 2016.

Now, therefore, be it Ordained by the City Council of the City of Granite City, Illinois, that the sum of $451,323.66 be distributed to the police pension fund, before April 30, 2016. Be it further

Ordained by the Granite City City Council that the sum of $451,323.66 be distributed to the fire pension fund, before April 30, 2016, for a combined total distribution to the two pension funds from the general fund of the City of Granite City, of $902,647.32.

Passed this _____ day of April, 2016.

APPROVED:_____
MAYOR Edward Hagnauer

ATTEST:_____
CITY CLERK, Judy Whitaker

74936.3

City of Granite City

Granite City, Illinois 62040

Ed Hagnauer
Mayor

Judy J. Whitaker
City Clerk

Gail Valle
Treasurer

RECEIVED
JUDY WHITAKER
APR 13 2016
CITY CLERK
GRANITE CITY ILLINOIS

TREASURER'S REPORT
MARCH 2016

		BEG BALANCE	REVENUE	DISBURSEMENTS	END BALANCE
GENERAL FUND					
10 -1-11100	CASH REGULAR	$ 4,575,461.32	$ 1,555,982.69	$ (2,005,391.97)	$ 4,126,052.04
GRANITE CITY CINEMA					
15 -1-11100	CASH	$ 1,379.72	$ 65,317.50	$ (56,903.75)	$ 9,793.47
DRUG TRAFFIC PREVEN					
25 -1-11100	CASH REGULAR	$ 58,695.39	$ 5,090.81		$ 63,786.20
	FEDERAL DRUG FD	$ 140,768.45	$ 6.12	$ (2,139.00)	$ 138,635.57
MOTOR FUEL TAX FUND					
30 -1-11100	CASH REGULAR	$ (103,120.79)	$ 65,576.12	$ (159,602.36)	$ (197,147.03)
HEALTH FUND					
40 -1-11100	CASH REGULAR	$ 1,060,131.91	$ 127,136.18	$ -	$ 1,187,268.09
BELLMORE VILLAGE	CASH	$ 5,537.31	$ 4,857.77	$ (3,911.67)	$ 6,483.41
DOWNTOWN-TIF					
65 -1-11100	CASH REGULAR	$ (277,631.26)	$ 26,932.73	$ (22,144.34)	$ (272,842.87)
65 -1-11120	Bond Fund	$ -	$ -	$ -	
65 -1-11130	UMB RESERVE	$ -	$ -	$ -	
65 -1-11135	UMB SPEC TAX ALL	$ 307,229.22	$ -	$ -	$ 307,229.22
65 -1-11140	UMB P&I	$ -	$ -	$ -	$ -
65 -1-11500	2012 BOND PROCEE	$ 6,752,525.33	$ -	$ -	$ 6,752,525.33
65 -1-11510	2012 BOND RESERV	$ 982,000.00	$ -	$ -	$ 982,000.00
65 -1-11550	2012 BOND EXPENS	$ 7,478.11	$ -	$ -	$ 7,478.11
65 -1-11556	2012 BOND P&I	$ 895,622.59	$ -	$ -	$ 8,595,622.59
	TOTAL	$ 8,667,223.99	$ 26,932.73	$ (22,144.34)	$ 8,672,012.38

RTE 3 TIF									
66 -1-11100	CASH REGULAR	$	96,737.50	$	548.79	$	-	$	97,286.29
66 -1-11110	UMB BANK-SPEC AL	$	-	$	-	$	-	$	-
66 -1-11115	UMB BANK - 2009C	$	8,497.25	$	-	$	-	$	8,497.25
66 -1-11116	UMB BANK - RESER	$	287,000.00	$	-	$	-	$	287,000.00
66 -1-11117	UMB BANK - P&I 2	$	458,305.47	$	-	$	-	$	458,305.47
66 -1-11118	UMB-SPECIAL ALLO	$	24.79	$	-	$	-	$	24.79
66 -1-11120	UMB BANK RESERVE	$	364,000.00	$	-	$	-	$	364,000.00
66 -1-11121	UMB BANK P&I	$	7.17	$	-	$	-	$	7.17
66 -1-11122	UMB BOND GENERAL	$	48,922.35	$	-	$	-	$	48,922.35
	TOTAL	$	1,263,494.53	$	548.79	$	-	$	1,264,043.32
NAMEOKI COMMONS TIF									
67 -1-11100	CASH REGULAR	$	(1,506.25)	$	10,296.67	$	(8,934.37)	$	(143.95)
TIF PORT DISTRICT									
68 -1-11100	CASH REGULAR	$	53,568.87	$	-	$	(4,269.55)	$	49,299.32
RTE 203 TIF FUND									
69 -1-11100	CASH REGULAR	$	391,626.57	$	323.81	$	-	$	391,950.38
69 -1-11105	CASH UMB	$	486,855.15	$	-	$	-	$	365,681.93
69 -1-11106	CASH UMB P&I	$	486,855.15	$	-	$	-	$	486,855.15
69 -1-11107	CASH UMB RESERV	$	300,000.00	$	-	$	-	$	300,000.00
	FUND 69 TOTAL	$	1,544,163.65	$	323.81	$	-	$	1,544,487.46
WWTP									
70 -1-11100	CASH REGULAR	$	1,817,285.33	$	758,919.06	$	(379,168.55)	$	2,174,318.44
70 -1-11125	CONSTRUCTION FUN	$	1,000,537.82	$	-			$	1,000,537.82
70 -1-11130	BOND RESERVE ACC	$	359,429.95	$	-			$	359,429.95
	FUND 70 TOTAL	$	3,177,253.10	$	758,919.06	$	(379,168.55)	$	3,534,286.21
SEWER SYSTEM FUND									
71 -1-11100	CASH REGULAR	$	2,188,637.60	$	456,089.77	$	(610,843.21)	$	2,033,884.16
CAPITAL IMPROVEMENT									
90 -1-11100	CASH REGULAR								

RESPECTFULLY SUBMITTED:

GAIL VALLE, CITY TREASURER

PAYROLL NO#: 01 - City of Granite City SORTED BY DEPARTMENT DATE: 4/01/2016 THRU 4/15/2016

DEPARTMENT TOTALS

DEPARTMENT: 10 -01 MAYOR

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS	0 CHECK(S)		9 CHECK(S)		0 CHECK(S)		0 CHECK(S)		9 CHECK(S)	
NET -		0.00		12025.34		0.00		0.00		12025.34
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		17017.77		0.00		0.00		17017.77
SALARY -	0.00	0.00	508.30	16867.77	0.00	0.00	0.00	0.00	508.30	16867.77
DECLINE -	0.00	0.00	0.00	150.00	0.00	0.00	0.00	0.00	0.00	150.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	200.00	0.00	0.00	0.00	0.00	0.00	200.00
HLTH SNG PR-	0.00	0.00	0.00	25.00	0.00	0.00	0.00	0.00	0.00	25.00
HLTH SNG AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	0.00	0.00	3.84	3.81	0.00	0.00	0.00	0.00	3.84	3.81
IPPFA 457 P-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
AFSCME 31 -	0.00	0.00	0.00	46.56	0.00	0.00	0.00	0.00	0.00	46.56
UNITED WAY -	0.00	0.00	0.00	80.47	0.00	0.00	0.00	0.00	0.00	80.47
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DIVERS 457%-	0.00	0.00	0.00	103.35	0.00	0.00	0.00	0.00	0.00	103.35
I.M.R.F -	0.00	0.00	1615.68	614.06	0.00	0.00	0.00	0.00	1615.68	614.06
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	16075.36	2038.11	0.00	0.00	0.00	0.00	16075.36	2038.11
STATE W/H -	0.00	0.00	16075.36	596.42	0.00	0.00	0.00	0.00	16075.36	596.42
FICA -	0.00	0.00	16792.77	1041.15	0.00	0.00	0.00	0.00	16792.77	1041.15
MEDICARE -	0.00	0.00	16792.77	243.50	0.00	0.00	0.00	0.00	16792.77	243.50
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 10 -02 CITY CLERK

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		4 CHECK(S)		0 CHECK(S)		0 CHECK(S)		4 CHECK(S)	
NET -		0.00		5172.27		0.00		0.00		5172.27
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		7933.72		0.00		0.00		7933.72
SALARY -	0.00	0.00	346.64	7783.72	0.00	0.00	0.00	0.00	346.64	7783.72
DECLINE -	0.00	0.00	0.00	150.00	0.00	0.00	0.00	0.00	0.00	150.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	100.00
HLTH FML AF-	0.00	0.00	0.00	50.00	0.00	0.00	0.00	0.00	0.00	50.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	0.00	0.00	5.12	5.08	0.00	0.00	0.00	0.00	5.12	5.08
IPPFA 457 P-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
AFSCME 31 -	0.00	0.00	0.00	93.12	0.00	0.00	0.00	0.00	0.00	93.12
UNITED WAY -	0.00	0.00	0.00	10.00	0.00	0.00	0.00	0.00	0.00	10.00
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHAPTER 13 -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARN FEE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	0.00	0.00	939.35	357.02	0.00	0.00	0.00	0.00	939.35	357.02
VOL ADD CON-	0.00	0.00	0.00	104.17	0.00	0.00	0.00	0.00	0.00	104.17
HSA FUND -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MELLON ADD -	0.00	0.00	0.00	164.58	0.00	0.00	0.00	0.00	0.00	164.58
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	7312.12	1001.56	0.00	0.00	0.00	0.00	7312.12	1001.56
STATE W/H -	0.00	0.00	7312.12	289.24	0.00	0.00	0.00	0.00	7312.12	289.24
FICA -	0.00	0.00	7669.14	475.48	0.00	0.00	0.00	0.00	7669.14	475.48
MEDICARE -	0.00	0.00	7669.14	111.20	0.00	0.00	0.00	0.00	7669.14	111.20
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 10 -03 LEGISLATIVE - ALDERM

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		10 CHECK(S)		0 CHECK(S)		0 CHECK(S)		10 CHECK(S)	
NET -		0.00		2095.24		0.00		0.00		2095.24
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		2633.30		0.00		0.00		2633.30
SALARY -	0.00	0.00	45.00	2633.30	0.00	0.00	0.00	0.00	45.00	2633.30
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
ST FARM INS	0.00	0.00	1.28	1.27	0.00	0.00	0.00	0.00	1.28	1.27
I.M.R.F -	0.00	0.00	155.90	59.25	0.00	0.00	0.00	0.00	155.90	59.25
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	2574.05	174.69	0.00	0.00	0.00	0.00	2574.05	174.69
STATE W/H -	0.00	0.00	2574.05	101.35	0.00	0.00	0.00	0.00	2574.05	101.35
FICA -	0.00	0.00	2633.30	163.30	0.00	0.00	0.00	0.00	2633.30	163.30
MEDICARE -	0.00	0.00	2633.30	38.20	0.00	0.00	0.00	0.00	2633.30	38.20
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 10 -04 TREASURER

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		4 CHECK(S)		0 CHECK(S)		0 CHECK(S)		4 CHECK(S)	
NET -		0.00		5107.77		0.00		0.00		5107.77
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		7827.03		0.00		0.00		7827.03
SALARY -	0.00	0.00	346.65	7677.03	0.00	0.00	0.00	0.00	346.65	7677.03
DECLINE -	0.00	0.00	0.00	150.00	0.00	0.00	0.00	0.00	0.00	150.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG AF-	0.00	0.00	0.00	25.00	0.00	0.00	0.00	0.00	0.00	25.00
HLTH FML AF-	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	100.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	80.78	0.00	0.00	0.00	0.00	0.00	80.78
LOAN PAYMEN-	0.00	0.00	0.00	17.48	0.00	0.00	0.00	0.00	0.00	17.48
ST FARM INS-	0.00	0.00	2.56	2.54	0.00	0.00	0.00	0.00	2.56	2.54
IPPFA 457 P-	0.00	0.00	0.00	220.20	0.00	0.00	0.00	0.00	0.00	220.20
AFSCME 31 -	0.00	0.00	0.00	93.12	0.00	0.00	0.00	0.00	0.00	93.12
UNITED WAY -	0.00	0.00	0.00	21.00	0.00	0.00	0.00	0.00	0.00	21.00
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	0.00	0.00	926.71	352.22	0.00	0.00	0.00	0.00	926.71	352.22
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	23.72	0.00	0.00	0.00	0.00	0.00	23.72
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	7254.61	919.18	0.00	0.00	0.00	0.00	7254.61	919.18
STATE W/H -	0.00	0.00	7254.61	265.25	0.00	0.00	0.00	0.00	7254.61	265.25
FICA -	0.00	0.00	7827.03	485.28	0.00	0.00	0.00	0.00	7827.03	485.28
MEDICARE -	0.00	0.00	7827.03	113.49	0.00	0.00	0.00	0.00	7827.03	113.49
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 10 -05 FINANCIAL ADMINISTRA

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		3 CHECK(S)		0 CHECK(S)		0 CHECK(S)		3 CHECK(S)	
NET -		0.00		3511.82		0.00		0.00		3511.82
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		4988.47		0.00		0.00		4988.47
SALARY -	0.00	0.00	216.62	4763.47	0.00	0.00	0.00	0.00	216.62	4763.47
WC ED -	0.00	0.00	0.00	225.00	0.00	0.00	0.00	0.00	0.00	225.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	100.00
HLTH SNG PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	0.00	0.00	1.28	1.27	0.00	0.00	0.00	0.00	1.28	1.27
AFSCME 31 -	0.00	0.00	0.00	46.56	0.00	0.00	0.00	0.00	0.00	46.56
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	0.00	0.00	590.64	224.48	0.00	0.00	0.00	0.00	590.64	224.48
MELLON ADD -	0.00	0.00	0.00	20.00	0.00	0.00	0.00	0.00	0.00	20.00
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	4643.99	537.74	0.00	0.00	0.00	0.00	4643.99	537.74
STATE W/H -	0.00	0.00	4643.99	174.15	0.00	0.00	0.00	0.00	4643.99	174.15
FICA -	0.00	0.00	4868.47	301.85	0.00	0.00	0.00	0.00	4868.47	301.85
MEDICARE -	0.00	0.00	4868.47	70.60	0.00	0.00	0.00	0.00	4868.47	70.60
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS

DEPARTMENT: 10 -06 IT DEPARTMENT

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		2 CHECK(S)		0 CHECK(S)		0 CHECK(S)		2 CHECK(S)	
NET -		0.00		3770.91		0.00		0.00		3770.91
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		5608.34		0.00		0.00		5608.34
SALARY -	0.00	0.00	173.32	5608.34	0.00	0.00	0.00	0.00	173.32	5608.34
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	50.00	0.00	0.00	0.00	0.00	0.00	50.00
HLTH SNG AF-	0.00	0.00	0.00	25.00	0.00	0.00	0.00	0.00	0.00	25.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UNITED WAY -	0.00	0.00	0.00	39.42	0.00	0.00	0.00	0.00	0.00	39.42
I.M.R.F -	0.00	0.00	664.02	252.38	0.00	0.00	0.00	0.00	664.02	252.38
MELLON ADD -	0.00	0.00	0.00	72.00	0.00	0.00	0.00	0.00	0.00	72.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	5233.96	782.66	0.00	0.00	0.00	0.00	5233.96	782.66
STATE W/H -	0.00	0.00	5233.96	196.27	0.00	0.00	0.00	0.00	5233.96	196.27
FICA -	0.00	0.00	5486.34	340.15	0.00	0.00	0.00	0.00	5486.34	340.15
MEDICARE -	0.00	0.00	5486.34	79.55	0.00	0.00	0.00	0.00	5486.34	79.55
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 10 -07 POLICE

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		74 CHECK(S)		0 CHECK(S)		0 CHECK(S)		74 CHECK(S)	
NET -		0.00		149903.84		0.00		0.00		149903.84
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		221180.66		0.00		0.00		221180.66
SALARY -	0.00	0.00	5992.05	192613.79	0.00	0.00	0.00	0.00	5992.05	192613.79
HOURLY PAY -	0.00	0.00	45.00	371.25	0.00	0.00	0.00	0.00	45.00	371.25
SHORT/CHG -	0.00	0.00	12.00	247.08	0.00	0.00	0.00	0.00	12.00	247.08
REIM OT -	0.00	0.00	36.50	1815.12	0.00	0.00	0.00	0.00	36.50	1815.12
OVERTIME PA-	0.00	0.00	28.00	1144.13	0.00	0.00	0.00	0.00	28.00	1144.13
COURT TIME -	0.00	0.00	4.00	254.77	0.00	0.00	0.00	0.00	4.00	254.77
C O R -	0.00	0.00	108.00	4320.00	0.00	0.00	0.00	0.00	108.00	4320.00
HOLIDAY -	0.00	0.00	370.00	18773.66	0.00	0.00	0.00	0.00	370.00	18773.66
RANK DIFF -	0.00	0.00	159.00	438.26	0.00	0.00	0.00	0.00	159.00	438.26
DISPATCH 2 -	0.00	0.00	325.00	325.00	0.00	0.00	0.00	0.00	325.00	325.00
SHIF/DIFF3 -	0.00	0.00	1256.00	816.40	0.00	0.00	0.00	0.00	1256.00	816.40
WC ED -	0.00	0.00	0.00	87.50	0.00	0.00	0.00	0.00	0.00	87.50
INJURED -	0.00	0.00	0.00	1729.22-	0.00	0.00	0.00	0.00	0.00	1729.22-
DECLINE -	0.00	0.00	0.00	600.00	0.00	0.00	0.00	0.00	0.00	600.00
LIEU OF -	0.00	0.00	52.00	1102.92	0.00	0.00	0.00	0.00	52.00	1102.92
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	150.00	0.00	0.00	0.00	0.00	0.00	150.00
HLTH SNG PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG AF-	0.00	0.00	0.00	75.00	0.00	0.00	0.00	0.00	0.00	75.00
HLTH FML AF-	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	100.00
PBPA CHIEF -	0.00	0.00	0.00	60.00	0.00	0.00	0.00	0.00	0.00	60.00
LOAN PAYMEN-	0.00	0.00	0.00	1047.65	0.00	0.00	0.00	0.00	0.00	1047.65
LOAN PAYMEN-	0.00	0.00	0.00	386.37	0.00	0.00	0.00	0.00	0.00	386.37
LOAN PAYMEN-	0.00	0.00	0.00	326.74	0.00	0.00	0.00	0.00	0.00	326.74
ST FARM INS-	0.00	0.00	60.16	59.69	0.00	0.00	0.00	0.00	60.16	59.69
IPPFA 457 P-	0.00	0.00	0.00	1926.00	0.00	0.00	0.00	0.00	0.00	1926.00
PBPA LABOR -	0.00	0.00	0.00	2565.00	0.00	0.00	0.00	0.00	0.00	2565.00
AFSCME 31 -	0.00	0.00	0.00	512.16	0.00	0.00	0.00	0.00	0.00	512.16
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BAS 125 PLA-	0.00	0.00	0.00	125.00	0.00	0.00	0.00	0.00	0.00	125.00
POLICE/FIRE-	0.00	0.00	0.00	138.74	0.00	0.00	0.00	0.00	0.00	138.74
CHILD SUPPT-	0.00	0.00	0.00	1838.01	0.00	0.00	0.00	0.00	0.00	1838.01
DIVERS 457%-	0.00	0.00	0.00	1286.16	0.00	0.00	0.00	0.00	0.00	1286.16
GARN FEE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRIN LOAN -	0.00	0.00	0.00	57.68	0.00	0.00	0.00	0.00	0.00	57.68
LOAN PYMT -	0.00	0.00	0.00	80.60	0.00	0.00	0.00	0.00	0.00	80.60
PRINCIPAL -	0.00	0.00	0.00	315.00	0.00	0.00	0.00	0.00	0.00	315.00
I.M.R.F -	0.00	0.00	3140.87	1193.72	0.00	0.00	0.00	0.00	3140.87	1193.72
POL PENSION-	0.00	0.00	0.00	16746.62	0.00	0.00	0.00	0.00	0.00	16746.62
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	199438.16	30050.35	0.00	0.00	0.00	0.00	199438.16	30050.35
STATE W/H -	0.00	0.00	199438.16	7409.90	0.00	0.00	0.00	0.00	199438.16	7409.90
FICA -	0.00	0.00	27048.72	1677.01	0.00	0.00	0.00	0.00	27048.72	1677.01

MEDICARE -	0.00	0.00	217200.49	3149.42	0.00	0.00	0.00	0.00	217200.49	3149.42
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 10 -08 FIRE & AMBULANCE

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		58 CHECK(S)		0 CHECK(S)		0 CHECK(S)		58 CHECK(S)	
NET -		0.00		135494.00		0.00		0.00		135494.00
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		205266.92		0.00		0.00		205266.92
SALARY -	0.00	0.00	5846.16	159248.71	0.00	0.00	0.00	0.00	5846.16	159248.71
CALL OUT -	0.00	0.00	98.00	4080.78	0.00	0.00	0.00	0.00	98.00	4080.78
HOLIDAY -	0.00	0.00	720.00	29482.84	0.00	0.00	0.00	0.00	720.00	29482.84
RANK DIFF -	0.00	0.00	1032.00	1925.77	0.00	0.00	0.00	0.00	1032.00	1925.77
EMA COOR -	0.00	0.00	0.00	500.00	0.00	0.00	0.00	0.00	0.00	500.00
DECLINE -	0.00	0.00	0.00	600.00	0.00	0.00	0.00	0.00	0.00	600.00
CEU HOURS -	0.00	0.00	237.00	9428.82	0.00	0.00	0.00	0.00	237.00	9428.82
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
UMB FUNDING	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPTUM FUNDI-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
H.S.A -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	2000.00	0.00	0.00	0.00	0.00	0.00	2000.00
HLTH SNG PR-	0.00	0.00	0.00	250.00	0.00	0.00	0.00	0.00	0.00	250.00
HLTH SNG AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	668.91	0.00	0.00	0.00	0.00	0.00	668.91
LOAN PAYMEN-	0.00	0.00	0.00	34.28	0.00	0.00	0.00	0.00	0.00	34.28
ST FARM INS-	0.00	0.00	46.08	45.72	0.00	0.00	0.00	0.00	46.08	45.72
IPPFA 457 P-	0.00	0.00	0.00	4011.22	0.00	0.00	0.00	0.00	0.00	4011.22
RELIEF & WE-	0.00	0.00	0.00	70.00	0.00	0.00	0.00	0.00	0.00	70.00
AFSCME 31 -	0.00	0.00	0.00	46.56	0.00	0.00	0.00	0.00	0.00	46.56
UNITED WAY -	0.00	0.00	0.00	397.16	0.00	0.00	0.00	0.00	0.00	397.16
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
POLICE/FIRE-	0.00	0.00	0.00	937.08	0.00	0.00	0.00	0.00	0.00	937.08
RELIEF&WEL2-	0.00	0.00	0.00	60.00	0.00	0.00	0.00	0.00	0.00	60.00
253 FIRE PA-	0.00	0.00	0.00	189.70	0.00	0.00	0.00	0.00	0.00	189.70
ADD FIRE PA-	0.00	0.00	0.00	40.50	0.00	0.00	0.00	0.00	0.00	40.50
CHILD SUPPT-	0.00	0.00	0.00	955.00	0.00	0.00	0.00	0.00	0.00	955.00
DIVERS 457%-	0.00	0.00	0.00	451.86	0.00	0.00	0.00	0.00	0.00	451.86
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARN FEE -	0.00	0.00	0.00	3.94	0.00	0.00	0.00	0.00	0.00	3.94
GARNISHMENT-	0.00	0.00	0.00	196.81	0.00	0.00	0.00	0.00	0.00	196.81
PRIN 457% -	0.00	0.00	0.00	111.35	0.00	0.00	0.00	0.00	0.00	111.35
PRIN LOAN -	0.00	0.00	0.00	279.13	0.00	0.00	0.00	0.00	0.00	279.13
LOAN PYMT -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRINCIPAL -	0.00	0.00	0.00	745.00	0.00	0.00	0.00	0.00	0.00	745.00
I.M.R.F -	0.00	0.00	235.79	89.62	0.00	0.00	0.00	0.00	235.79	89.62
FIRE PENSIO-	0.00	0.00	0.00	14915.94	0.00	0.00	0.00	0.00	0.00	14915.94
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	270.42	0.00	0.00	0.00	0.00	0.00	270.42
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UMB ADDITIO-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UMB ADD PRE-	0.00	0.00	0.00	21.00	0.00	0.00	0.00	0.00	0.00	21.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	197586.87	32793.97	0.00	0.00	0.00	0.00	197586.87	32793.97
STATE W/H -	0.00	0.00	197586.87	7308.97	0.00	0.00	0.00	0.00	197586.87	7308.97

FICA	-	0.00	0.00	1966.47	121.92	0.00	0.00	0.00	0.00	1966.47	121.92
MEDICARE	-	0.00	0.00	190129.10	2756.86	0.00	0.00	0.00	0.00	190129.10	2756.86
EIC CREDIT	-		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 10 -09 CIVIL DEFENSE

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)	
NET -		0.00		0.00		0.00		0.00		0.00
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		0.00		0.00		0.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STATE W/H -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FICA -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MEDICARE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 10 -11 SAFETY

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		2 CHECK(S)		0 CHECK(S)		0 CHECK(S)		2 CHECK(S)	
NET -		0.00		2752.34		0.00		0.00		2752.34
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		4160.99		0.00		0.00		4160.99
SALARY -	0.00	0.00	173.32	4160.99	0.00	0.00	0.00	0.00	173.32	4160.99
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	100.00
HLTH SNG PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	0.00	0.00	2.56	2.54	0.00	0.00	0.00	0.00	2.56	2.54
IPPFA 457 P-	0.00	0.00	0.00	90.00	0.00	0.00	0.00	0.00	0.00	90.00
AFSCME 31 -	0.00	0.00	0.00	46.56	0.00	0.00	0.00	0.00	0.00	46.56
UNITED WAY -	0.00	0.00	0.00	10.00	0.00	0.00	0.00	0.00	0.00	10.00
I.M.R.F -	0.00	0.00	492.66	187.25	0.00	0.00	0.00	0.00	492.66	187.25
HSA FUND -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MELLON ADD -	0.00	0.00	0.00	36.60	0.00	0.00	0.00	0.00	0.00	36.60
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	3747.14	487.31	0.00	0.00	0.00	0.00	3747.14	487.31
STATE W/H -	0.00	0.00	3747.14	140.52	0.00	0.00	0.00	0.00	3747.14	140.52
FICA -	0.00	0.00	4024.39	249.51	0.00	0.00	0.00	0.00	4024.39	249.51
MEDICARE -	0.00	0.00	4024.39	58.36	0.00	0.00	0.00	0.00	4024.39	58.36
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 10 -12 BUILDING & ZONING

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		13 CHECK(S)		0 CHECK(S)		0 CHECK(S)		13 CHECK(S)	
NET -		0.00		14407.45		0.00		0.00		14407.45
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		20887.46		0.00		0.00		20887.46
SALARY -	0.00	0.00	866.60	18270.96	0.00	0.00	0.00	0.00	866.60	18270.96
HOURLY PAY -	0.00	0.00	166.00	2291.50	0.00	0.00	0.00	0.00	166.00	2291.50
WC ED -	0.00	0.00	0.00	75.00	0.00	0.00	0.00	0.00	0.00	75.00
AUX COOR -	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	100.00
DECLINE -	0.00	0.00	0.00	150.00	0.00	0.00	0.00	0.00	0.00	150.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
H.S.A -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	150.00	0.00	0.00	0.00	0.00	0.00	150.00
HLTH FML AF-	0.00	0.00	0.00	150.00	0.00	0.00	0.00	0.00	0.00	150.00
LOAN PAYMEN-	0.00	0.00	0.00	33.29	0.00	0.00	0.00	0.00	0.00	33.29
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	0.00	0.00	8.96	8.89	0.00	0.00	0.00	0.00	8.96	8.89
IPPFA 457 P-	0.00	0.00	0.00	25.00	0.00	0.00	0.00	0.00	0.00	25.00
PBPA LABOR -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
AFSCME 31 -	0.00	0.00	0.00	279.36	0.00	0.00	0.00	0.00	0.00	279.36
UNITED WAY -	0.00	0.00	0.00	17.31	0.00	0.00	0.00	0.00	0.00	17.31
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARN FEE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRINCIPAL -	0.00	0.00	0.00	250.00	0.00	0.00	0.00	0.00	0.00	250.00
I.M.R.F -	0.00	0.00	2437.09	926.25	0.00	0.00	0.00	0.00	2437.09	926.25
POL PENSION-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	50.98	0.00	0.00	0.00	0.00	0.00	50.98
LOAN PAYMEN-	0.00	0.00	0.00	29.18	0.00	0.00	0.00	0.00	0.00	29.18
REIMBURSE -	0.00	0.00	0.00	25.00	0.00	0.00	0.00	0.00	0.00	25.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	19536.21	2222.53	0.00	0.00	0.00	0.00	19536.21	2222.53
STATE W/H -	0.00	0.00	19536.21	725.81	0.00	0.00	0.00	0.00	19536.21	725.81
FICA -	0.00	0.00	20737.46	1285.71	0.00	0.00	0.00	0.00	20737.46	1285.71
MEDICARE -	0.00	0.00	20737.46	300.70	0.00	0.00	0.00	0.00	20737.46	300.70
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 10 -13 PUBLIC WORKS

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		31 CHECK(S)		0 CHECK(S)		0 CHECK(S)		31 CHECK(S)	
NET -		0.00		49267.66		0.00		0.00		49267.66
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		75690.23		0.00		0.00		75690.23
SALARY -	0.00	0.00	2639.81	71122.17	0.00	0.00	0.00	0.00	2639.81	71122.17
OVERTIME PA-	0.00	0.00	18.00	693.08	0.00	0.00	0.00	0.00	18.00	693.08
CALL OUT -	0.00	0.00	78.00	3111.48	0.00	0.00	0.00	0.00	78.00	3111.48
RANK DIFF -	0.00	0.00	108.00	59.00	0.00	0.00	0.00	0.00	108.00	59.00
CDL LIC -	0.00	0.00	109.00	54.50	0.00	0.00	0.00	0.00	109.00	54.50
CLOTHING -	0.00	0.00	0.00	650.00	0.00	0.00	0.00	0.00	0.00	650.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
ST FARM INS	0.00	0.00	17.92	17.78	0.00	0.00	0.00	0.00	17.92	17.78
IPPFA 457 P-	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	100.00
TEAMSTERS52-	0.00	0.00	0.00	1016.00	0.00	0.00	0.00	0.00	0.00	1016.00
LABORER 397-	0.00	0.00	0.00	630.00	0.00	0.00	0.00	0.00	0.00	630.00
UNITED WAY -	0.00	0.00	0.00	28.39	0.00	0.00	0.00	0.00	0.00	28.39
CHILD SUPPT-	0.00	0.00	0.00	1012.20	0.00	0.00	0.00	0.00	0.00	1012.20
GARN FEE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRINCIPAL -	0.00	0.00	0.00	130.00	0.00	0.00	0.00	0.00	0.00	130.00
I.M.R.F -	0.00	0.00	8961.73	3406.05	0.00	0.00	0.00	0.00	8961.73	3406.05
VOL ADD CON-	0.00	0.00	0.00	734.08	0.00	0.00	0.00	0.00	0.00	734.08
2%-LABOR -	0.00	0.00	0.00	713.39	0.00	0.00	0.00	0.00	0.00	713.39
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	72054.18	10157.46	0.00	0.00	0.00	0.00	72054.18	10157.46
STATE W/H -	0.00	0.00	72054.18	2686.91	0.00	0.00	0.00	0.00	72054.18	2686.91
FICA -	0.00	0.00	75690.23	4692.79	0.00	0.00	0.00	0.00	75690.23	4692.79
MEDICARE -	0.00	0.00	75690.23	1097.52	0.00	0.00	0.00	0.00	75690.23	1097.52
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 10 -14 SANITATION/INSPECTIO

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)	
NET -		0.00		0.00		0.00		0.00		0.00
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		0.00		0.00		0.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STATE W/H -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FICA -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MEDICARE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 10 -23 SUMMER PART-TIME HEL

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)	
NET -		0.00		0.00		0.00		0.00		0.00
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		0.00		0.00		0.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STATE W/H -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FICA -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MEDICARE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 15 -01 CINEMA

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		15 CHECK(S)		0 CHECK(S)		0 CHECK(S)		15 CHECK(S)	
NET -		0.00		8713.77		0.00		0.00		8713.77
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		11946.01		0.00		0.00		11946.01
SALARY -	0.00	0.00	173.34	7838.95	0.00	0.00	0.00	0.00	173.34	7838.95
HOURLY PAY -	0.00	0.00	485.69	4107.06	0.00	0.00	0.00	0.00	485.69	4107.06
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG AF-	0.00	0.00	0.00	25.00	0.00	0.00	0.00	0.00	0.00	25.00
I.M.R.F -	0.00	0.00	928.14	352.75	0.00	0.00	0.00	0.00	928.14	352.75
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	11593.26	1521.55	0.00	0.00	0.00	0.00	11593.26	1521.55
STATE W/H -	0.00	0.00	11593.26	419.07	0.00	0.00	0.00	0.00	11593.26	419.07
FICA -	0.00	0.00	11946.01	740.65	0.00	0.00	0.00	0.00	11946.01	740.65
MEDICARE -	0.00	0.00	11946.01	173.22	0.00	0.00	0.00	0.00	11946.01	173.22
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 30 -36 MOTOR FUEL FUND PROJ

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)	
NET -		0.00		0.00		0.00		0.00		0.00
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		0.00		0.00		0.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STATE W/H -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FICA -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MEDICARE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 70 -55 PAYROLL

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		30 CHECK(S)		0 CHECK(S)		0 CHECK(S)		30 CHECK(S)	
NET -		0.00		54051.45		0.00		0.00		54051.45
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		83620.14		0.00		0.00		83620.14
SALARY -	0.00	0.00	2521.16	77701.44	0.00	0.00	0.00	0.00	2521.16	77701.44
OVERTIME PA-	0.00	0.00	95.95	4196.26	0.00	0.00	0.00	0.00	95.95	4196.26
CALL OUT -	0.00	0.00	4.00	187.38	0.00	0.00	0.00	0.00	4.00	187.38
RANK DIFF -	0.00	0.00	192.00	376.40	0.00	0.00	0.00	0.00	192.00	376.40
SHIF/DIFF2 -	0.00	0.00	265.50	106.20	0.00	0.00	0.00	0.00	265.50	106.20
SHIF/DIFF3 -	0.00	0.00	347.00	260.26	0.00	0.00	0.00	0.00	347.00	260.26
SUN PREM -	0.00	0.00	96.00	139.76	0.00	0.00	0.00	0.00	96.00	139.76
LIC CERT -	0.00	0.00	0.00	765.22	0.00	0.00	0.00	0.00	0.00	765.22
DECLINE -	0.00	0.00	0.00	150.00	0.00	0.00	0.00	0.00	0.00	150.00
NO PAY -	0.00	0.00	8.99	262.78-	0.00	0.00	0.00	0.00	8.99	262.78-
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
H.S.A -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	1050.00	0.00	0.00	0.00	0.00	0.00	1050.00
HLTH SNG PR-	0.00	0.00	0.00	175.00	0.00	0.00	0.00	0.00	0.00	175.00
HLTH SNG AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	191.87	0.00	0.00	0.00	0.00	0.00	191.87
LOAN PAYMEN-	0.00	0.00	0.00	79.92	0.00	0.00	0.00	0.00	0.00	79.92
LOAN PAYMEN-	0.00	0.00	0.00	38.85	0.00	0.00	0.00	0.00	0.00	38.85
ST FARM INS-	0.00	0.00	26.88	26.67	0.00	0.00	0.00	0.00	26.88	26.67
IPPFA 457 P-	0.00	0.00	0.00	375.00	0.00	0.00	0.00	0.00	0.00	375.00
ENG LOCAL39-	0.00	0.00	0.00	1937.75	0.00	0.00	0.00	0.00	0.00	1937.75
UNITED WAY -	0.00	0.00	0.00	76.85	0.00	0.00	0.00	0.00	0.00	76.85
CHILD SUPPT-	0.00	0.00	0.00	410.04	0.00	0.00	0.00	0.00	0.00	410.04
CHAPTER 13 -	0.00	0.00	0.00	397.50	0.00	0.00	0.00	0.00	0.00	397.50
GARN FEE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHAPTER 13 -	0.00	0.00	0.00	297.50	0.00	0.00	0.00	0.00	0.00	297.50
PRIN 457% -	0.00	0.00	0.00	168.85	0.00	0.00	0.00	0.00	0.00	168.85
LOAN PYMT -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRINCIPAL -	0.00	0.00	0.00	103.29	0.00	0.00	0.00	0.00	0.00	103.29
MISC -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	0.00	0.00	9900.63	3762.89	0.00	0.00	0.00	0.00	9900.63	3762.89
VOL ADD CON-	0.00	0.00	0.00	236.39	0.00	0.00	0.00	0.00	0.00	236.39
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	44.26	0.00	0.00	0.00	0.00	0.00	44.26
REIMBURSE -	0.00	0.00	0.00	45.00	0.00	0.00	0.00	0.00	0.00	45.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	77985.11	10974.27	0.00	0.00	0.00	0.00	77985.11	10974.27
STATE W/H -	0.00	0.00	77985.11	2873.55	0.00	0.00	0.00	0.00	77985.11	2873.55
FICA -	0.00	0.00	82395.14	5108.51	0.00	0.00	0.00	0.00	82395.14	5108.51
MEDICARE -	0.00	0.00	82395.14	1194.73	0.00	0.00	0.00	0.00	82395.14	1194.73
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S

DEPARTMENT: 71 -30 INDUSTRIAL PRETREATM

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		1 CHECK(S)		0 CHECK(S)		0 CHECK(S)		1 CHECK(S)	
NET -		0.00		1597.45		0.00		0.00		1597.45
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		2701.00		0.00		0.00		2701.00
SALARY -	0.00	0.00	86.66	2652.77	0.00	0.00	0.00	0.00	86.66	2652.77
LIC CERT -	0.00	0.00	0.00	48.23	0.00	0.00	0.00	0.00	0.00	48.23
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG PR-	0.00	0.00	0.00	25.00	0.00	0.00	0.00	0.00	0.00	25.00
ST FARM INS-	0.00	0.00	1.28	1.27	0.00	0.00	0.00	0.00	1.28	1.27
IPPFA 457 P-	0.00	0.00	0.00	200.00	0.00	0.00	0.00	0.00	0.00	200.00
ENG LOCAL39-	0.00	0.00	0.00	73.75	0.00	0.00	0.00	0.00	0.00	73.75
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	0.00	0.00	319.80	121.55	0.00	0.00	0.00	0.00	319.80	121.55
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	2354.45	388.98	0.00	0.00	0.00	0.00	2354.45	388.98
STATE W/H -	0.00	0.00	2354.45	88.29	0.00	0.00	0.00	0.00	2354.45	88.29
FICA -	0.00	0.00	2676.00	165.91	0.00	0.00	0.00	0.00	2676.00	165.91
MEDICARE -	0.00	0.00	2676.00	38.80	0.00	0.00	0.00	0.00	2676.00	38.80
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

R E P O R T T O T A L S

	1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		256 CHECK(S)		0 CHECK(S)		0 CHECK(S)		256 CHECK(S)	
NET -		0.00		447871.31		0.00		0.00		447871.31
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		671462.04		0.00		0.00		671462.04
SALARY -	0.00	0.00	19935.63	578943.41	0.00	0.00	0.00	0.00	19935.63	578943.41
HOURLY PAY -	0.00	0.00	696.69	6769.81	0.00	0.00	0.00	0.00	696.69	6769.81
SHORT/CHG -	0.00	0.00	12.00	247.08	0.00	0.00	0.00	0.00	12.00	247.08
REIM OT -	0.00	0.00	36.50	1815.12	0.00	0.00	0.00	0.00	36.50	1815.12
OVERTIME PA-	0.00	0.00	141.95	6033.47	0.00	0.00	0.00	0.00	141.95	6033.47
COURT TIME -	0.00	0.00	4.00	254.77	0.00	0.00	0.00	0.00	4.00	254.77
CALL OUT -	0.00	0.00	180.00	7379.64	0.00	0.00	0.00	0.00	180.00	7379.64
C O R -	0.00	0.00	108.00	4320.00	0.00	0.00	0.00	0.00	108.00	4320.00
HOLIDAY -	0.00	0.00	1090.00	48256.50	0.00	0.00	0.00	0.00	1090.00	48256.50
RANK DIFF -	0.00	0.00	1491.00	2799.43	0.00	0.00	0.00	0.00	1491.00	2799.43
SHIF/DIFF2 -	0.00	0.00	265.50	106.20	0.00	0.00	0.00	0.00	265.50	106.20
SHIF/DIFF3 -	0.00	0.00	347.00	260.26	0.00	0.00	0.00	0.00	347.00	260.26
CDL LIC -	0.00	0.00	109.00	54.50	0.00	0.00	0.00	0.00	109.00	54.50
DISPATCH 2 -	0.00	0.00	325.00	325.00	0.00	0.00	0.00	0.00	325.00	325.00
SUN PREM -	0.00	0.00	96.00	139.76	0.00	0.00	0.00	0.00	96.00	139.76
SHIF/DIFF3 -	0.00	0.00	1256.00	816.40	0.00	0.00	0.00	0.00	1256.00	816.40
LIC CERT -	0.00	0.00	0.00	813.45	0.00	0.00	0.00	0.00	0.00	813.45
WC ED -	0.00	0.00	0.00	387.50	0.00	0.00	0.00	0.00	0.00	387.50
INJURED -	0.00	0.00	0.00	1729.22-	0.00	0.00	0.00	0.00	0.00	1729.22-
EMA COOR -	0.00	0.00	0.00	500.00	0.00	0.00	0.00	0.00	0.00	500.00
AUX COOR -	0.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	100.00
DECLINE -	0.00	0.00	0.00	1950.00	0.00	0.00	0.00	0.00	0.00	1950.00
CLOTHING -	0.00	0.00	0.00	650.00	0.00	0.00	0.00	0.00	0.00	650.00
NO PAY -	0.00	0.00	8.99	262.78-	0.00	0.00	0.00	0.00	8.99	262.78-
LIEU OF -	0.00	0.00	52.00	1102.92	0.00	0.00	0.00	0.00	52.00	1102.92
CEU HOURS -	0.00	0.00	237.00	9428.82	0.00	0.00	0.00	0.00	237.00	9428.82
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
UMB FUNDING	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPTUM FUNDI-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
H.S.A -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	3900.00	0.00	0.00	0.00	0.00	0.00	3900.00
HLTH SNG PR-	0.00	0.00	0.00	475.00	0.00	0.00	0.00	0.00	0.00	475.00
HLTH SNG AF-	0.00	0.00	0.00	150.00	0.00	0.00	0.00	0.00	0.00	150.00
HLTH FML AF-	0.00	0.00	0.00	400.00	0.00	0.00	0.00	0.00	0.00	400.00
PBPA CHIEF -	0.00	0.00	0.00	60.00	0.00	0.00	0.00	0.00	0.00	60.00
LOAN PAYMEN-	0.00	0.00	0.00	1941.72	0.00	0.00	0.00	0.00	0.00	1941.72
LOAN PAYMEN-	0.00	0.00	0.00	581.35	0.00	0.00	0.00	0.00	0.00	581.35
LOAN PAYMEN-	0.00	0.00	0.00	383.07	0.00	0.00	0.00	0.00	0.00	383.07
ST FARM INS-	0.00	0.00	177.92	176.53	0.00	0.00	0.00	0.00	177.92	176.53
IPPFA 457 P-	0.00	0.00	0.00	6947.42	0.00	0.00	0.00	0.00	0.00	6947.42
RELIEF & WE-	0.00	0.00	0.00	70.00	0.00	0.00	0.00	0.00	0.00	70.00
ENG LOCAL39-	0.00	0.00	0.00	2011.50	0.00	0.00	0.00	0.00	0.00	2011.50
PBPA LABOR -	0.00	0.00	0.00	2565.00	0.00	0.00	0.00	0.00	0.00	2565.00
AFSCME 31 -	0.00	0.00	0.00	1164.00	0.00	0.00	0.00	0.00	0.00	1164.00
TEAMSTERS52-	0.00	0.00	0.00	1016.00	0.00	0.00	0.00	0.00	0.00	1016.00
LABORER 397-	0.00	0.00	0.00	630.00	0.00	0.00	0.00	0.00	0.00	630.00
UNITED WAY -	0.00	0.00	0.00	680.60	0.00	0.00	0.00	0.00	0.00	680.60
BAS 125 PLA-	0.00	0.00	0.00	125.00	0.00	0.00	0.00	0.00	0.00	125.00

POLICE/FIRE-	0.00	0.00	0.00	1075.82	0.00	0.00	0.00	0.00	0.00	1075.82
RELIEF&WEL2-	0.00	0.00	0.00	60.00	0.00	0.00	0.00	0.00	0.00	60.00
253 FIRE PA-	0.00	0.00	0.00	189.70	0.00	0.00	0.00	0.00	0.00	189.70
ADD FIRE PA-	0.00	0.00	0.00	40.50	0.00	0.00	0.00	0.00	0.00	40.50
CHILD SUPPT-	0.00	0.00	0.00	4215.25	0.00	0.00	0.00	0.00	0.00	4215.25
DIVERS 457%-	0.00	0.00	0.00	1841.37	0.00	0.00	0.00	0.00	0.00	1841.37
CHAPTER 13 -	0.00	0.00	0.00	397.50	0.00	0.00	0.00	0.00	0.00	397.50
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARN FEE -	0.00	0.00	0.00	3.94	0.00	0.00	0.00	0.00	0.00	3.94
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHAPTER 13 -	0.00	0.00	0.00	297.50	0.00	0.00	0.00	0.00	0.00	297.50
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	196.81	0.00	0.00	0.00	0.00	0.00	196.81
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRIN 457% -	0.00	0.00	0.00	280.20	0.00	0.00	0.00	0.00	0.00	280.20
PRIN LOAN -	0.00	0.00	0.00	336.81	0.00	0.00	0.00	0.00	0.00	336.81
LOAN PYMT -	0.00	0.00	0.00	80.60	0.00	0.00	0.00	0.00	0.00	80.60
PRINCIPAL -	0.00	0.00	0.00	1543.29	0.00	0.00	0.00	0.00	0.00	1543.29
MISC -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	0.00	0.00	31309.01	11899.49	0.00	0.00	0.00	0.00	31309.01	11899.49
POL PENSION-	0.00	0.00	0.00	16746.62	0.00	0.00	0.00	0.00	0.00	16746.62
FIRE PENSIO-	0.00	0.00	0.00	14915.94	0.00	0.00	0.00	0.00	0.00	14915.94
VOL ADD CON-	0.00	0.00	0.00	1074.64	0.00	0.00	0.00	0.00	0.00	1074.64
HSA FUND -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2%-LABOR -	0.00	0.00	0.00	713.39	0.00	0.00	0.00	0.00	0.00	713.39
MELLON ADD -	0.00	0.00	0.00	293.18	0.00	0.00	0.00	0.00	0.00	293.18
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	118.96	0.00	0.00	0.00	0.00	0.00	118.96
LOAN PAYMEN-	0.00	0.00	0.00	299.60	0.00	0.00	0.00	0.00	0.00	299.60
REIMBURSE -	0.00	0.00	0.00	70.00	0.00	0.00	0.00	0.00	0.00	70.00
UMB ADDITIO-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UMB ADD PRE-	0.00	0.00	0.00	21.00	0.00	0.00	0.00	0.00	0.00	21.00

TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	627389.47	94050.36	0.00	0.00	0.00	0.00	627389.47	94050.36
STATE W/H -	0.00	0.00	627389.47	23275.70	0.00	0.00	0.00	0.00	627389.47	23275.70
FICA -	0.00	0.00	271761.47	16849.22	0.00	0.00	0.00	0.00	271761.47	16849.22
MEDICARE -	0.00	0.00	650075.87	9426.15	0.00	0.00	0.00	0.00	650075.87	9426.15
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00