

ADJOURNED MEETING OF THE COUNTY BOARD OF COMMISSIONERS April 22, 2014 – BOARD AGENDA

- 9:00 1) **J. Mark Wedel, County Board Chairperson**
A) **Call to Order**
B) **Pledge of Allegiance**
C) **Board of Commissioners Meeting Procedure**
D) **Approval of Agenda**
- 9:05 E) **Health & Human Services (see separate HHS agenda)**
- 10:15 **Break**
- 10:30 F) **Citizens' Public Comment** – Comments from visitors must be informational in nature and not exceed (5) minutes per person. The County Board generally will not engage in a discussion or debate in those five minutes but will take the information and find answers if that is appropriate. As part of the County Board protocol, it is unacceptable for any speaker to slander or engage in character assassination at a public Board meeting.
- 2) **Consent Agenda** – All items on the Consent Agenda are considered to be routine and have been made available to the County Board at least two days prior to the meeting; the items will be enacted by one motion. There will be no separate discussion of these items unless a Board member or citizen so requests, in which event the item will be removed from this Agenda and considered under separate motion.
- A) **Correspondence File April 8, 2014 – April 21, 2014**
B) **Approve 4/8/14 County Board Minutes**
C) **Approve March Manual Warrants**
D) **Approve Commissioner Warrants**
E) **Approve Auditor Warrants – March Sales & Use Tax**
F) **Approve Resolution – MnDOT Agreement No. 01472-1, Amendment No. 1**
G) **Approve Resolution – The Red Door Resort & Motel On-Sale Wine License**
H) **Approve 3.2 Malt Liquor License – The Red Door Resort & Motel**
I) **Approve Resolution – McGregor Lions Club Form LG214**
J) **Approve 3.2 Malt Liquor License – Hidden Meadows**
K) **Approve 3.2 Malt Liquor Licenses**
L) **Acknowledge First Quarter Revenue & Expenditures Report**
M) **Acknowledge First Quarter Investment Report**
N) **Approve Policy Update, Section 5.1, Group Insurance and Affordable Care Act Policy**
O) **Approve Policy Update, Section 5.5, Family and Medical Leave Policy**
- 10:35 3) **Terry Neff, Environmental Services Director**
A) **Adopt Resolution – Aitkin County Subsurface Sewage Treatment System Ordinance**
- 10:55 4) **Roxy Traxler, Interim County Administrator**
A) **Approve Teamsters Licensed Essential Unit 2014-2016 Collective Bargaining Agreement**

- 11:00 5) Board Discussion**
Mark Wedel – EDA, CMCC
Laurie Westerlund – CHS, CMCC
Don Niemi – AEOA, ARDC, ECRL
Brian Napstad –
Anne Marcotte – FAC, Regional Leadership Team, ACA
- 11:45 Adjourn**

AITKIN COUNTY BOARD

April 8, 2014

The Aitkin County Board of Commissioners met this 8th day of April, 2014 at 9:01 a.m. with the following members present: Chairperson J. Mark Wedel, Commissioners Laurie Westerlund, Don Niemi, and Anne Marcotte. Commissioner Brian Napstad was absent. Interim County Administrator Roxy Traxler, and Administrative Assistant Sue Bingham were also present.

CALL TO ORDER

Motion by Commissioner Marcotte, seconded by Commissioner Westerlund and carried, all members voting yes to approve the April 8, 2014 amended agenda. Item 4C: Resolution - LG214 Mille Lacs Trails, was added.

**APPROVED
AGENDA**

Resident Gordon Prickett requested 15 minutes on the May 13th Board agenda for Aitkin County Lakes and Rivers Association (ACLARA).

PUBLIC COMMENT

Motion by Commissioner Niemi, seconded by Commissioner Marcotte and carried (4-0), all members voting yes to approve the Consent Agenda as follows: A) Correspondence File: March 25, 2014 – April 7, 2014; B) Approve County Board Minutes: March 25, 2014; C) Approve Request to Fill Extension Committee Vacancy; D) Approve Consumption & Display Permits – Hidden Meadows Campground on Blind Lake, Larson’s Barn, and Cajun Queen; E) Accept \$50 Donation to STS – Public Utilities Commission; F) Approve Resolution – 2014 Boat & Water Safety Agreement Grant; G) Award Bids/Quotes – Road & Bridge: 1. Resolution – Calcium Chloride, 2. Pavement Markings; H) Approve Commissioner Warrants: General Fund \$67,772.51, Road & Bridge \$21,345.46, Health & Human Services \$348.75, Trust \$5,370.95, Forest Development \$2,232.64, Long Lake Conservation Center \$7,711.00, Parks \$219.63 for a total of \$105,000.94; I) Approve Resolution – Form LG214 Aitkin Lions Club

CONSENT AGENDA

Under the consent agenda, motion by Commissioner Niemi, seconded by Commissioner Marcotte and carried (4-0), all members voting yes to reappoint Debra Chute to the Extension Committee as the District 4 representative. This is for a three year term ending December 31, 2016.

**EXTENSION
COMMITTEE**

Under the consent agenda, motion by Commissioner Niemi, seconded by Commissioner Marcotte and carried (4-0), all members voting yes to approve the following Consumption & Display (Set Up) Permits:

**CONSUMPTION &
DISPLAY (SET UP)
PERMITS**

- Danny J. Volk, d/b/a **Hidden Meadows Campground on Blind Lake** – Unorg 48-27 Township
- Larson, Leonard and Kathy, d/b/a **Larson’s Barn** – Workman Township
- Rae Ann Halverson, d/b/a **Cajun Queen** – Shamrock Township

Under the consent agenda, motion for a resolution by Commissioner Niemi, seconded by Commissioner Marcotte and carried (4-0), all members voting yes to approve resolution – 2014 Boat & Water Safety Agreement Grant:

**RESOLUTION
040814-024
2014 BOAT &
WATER SAFETY
AGREEMENT**

BE IT RESOLVED, that the Aitkin County Board of Commissioners approves the 2014 Boat and Water Safety Agreement on file in the Office of the County Auditor and authorize the Aitkin County Sheriff, County Board Chair and County Auditor to sign the agreement in

AITKIN COUNTY BOARD

April 8, 2014

the amount of \$18,200.00 for the term of January 1, 2014, through June 30, 2015.

GRANT

Under the consent agenda, motion for a resolution by Commissioner Niemi, seconded by Commissioner Marcotte and carried (4-0), all members voting yes to approve resolution – Calcium Chloride:

WHEREAS, EnviroTech Services, Inc.- 910 54th Avenue #230 Greeley, CO 80634, was the lowest responsible bidder in the amount of \$262,587.48 for application of Liquid Calcium Chloride.

RESOLUTION
040814-025
CALCIUM CHLORIDE

NOW THEREFORE, BE IT RESOLVED, that, EnviroTech Services, Inc. be awarded the 2014 season for application of Liquid Calcium Chloride.

Under the consent agenda, motion by Commissioner Niemi, seconded by Commissioner Marcotte and carried (4-0), all members voting yes to approve quote for 2014 Pavement Markings from AAA Striping Service Co. of St. Michael, MN for \$57,918.87.

PAVEMENT
MARKINGS

Under the consent agenda, motion for a resolution by Commissioner Niemi, seconded by Commissioner Marcotte and carried (4-0), all members voting yes to approve resolution – Form LG214 Aitkin Lions Club:

BE IT RESOLVED, the Aitkin County Board of Commissioners agrees to approve the following Premises Permit Application - Form LG214, of the Aitkin Lions Club, at Players Sports Bar & Grill – Hazelton Township. This establishment has an address of 26838 US Highway 169, Aitkin, MN 56431.

RESOLUTION
040814-026
FORM LG214
AITKIN LIONS CLUB

Beth Haasken, 4-H Program Coordinator and members of the Rippleside Helping Hands 4-H Club introduced themselves to the Board, showed them their 2014 AMC Community Youth Leadership Award, and thanked them for supporting the Aitkin County 4-H program.

RIPPLESIDE
HELPING HANDS
4-H CLUB

Dave Unmacht, Sr. Vice President Springsted, Inc. shared the list of potential candidates for the County Administrator position with the Board, and discussed the next steps of the hiring process. The Personnel Committee will select the first round candidates on Thursday, April 10th.

COUNTY
ADMINISTRATOR
HIRING PROCESS

Roxy Traxler, Interim County Administrator discussed motor pool vehicles with the Board. No action was taken.

MOTOR POOL
VEHICLES

Motion for a resolution by Commissioner Niemi, seconded by Commissioner Marcotte and carried (3-1-0) Westerlund abstained/Napstad absent, to approve resolution – Form LG214 Mille Lacs Trails:

BE IT RESOLVED, the Aitkin County Board of Commissioners agrees to approve the following Premises Permit Application - Form LG214 - of the **Mille Lacs Trails**:

RESOLUTION
040814-027
FORM LG214

- Fisher's Resort, which has an address of 32390 212th Lane, Isle, MN 56342 –

- Aitkin Airport
- MHB

Motion by Commissioner Westerlund, seconded by Commissioner Marcotte and carried (4-0), all members voting yes to adjourn the meeting at 12:12 p.m. until Tuesday, April 22, 2014 at 9:00 a.m.

ADJOURN

J. Mark Wedel, Chairperson
Aitkin County Board of Commissioners

Roxy Traxler, Interim County Administrator

DKB1
04/03/2014 4:18PM

Aitkin County

WARRANT REGISTER



march Manual Warrants

<u>Warr #</u>	<u>Vendor #</u>	<u>Vendor Name</u>	<u>Amount</u>	<u>Description</u>	<u>Account Number</u>	<u>Invoice #</u>	<u>PO #</u>
				<u>OBO#</u>	<u>On-Behalf- of- Name</u>	<u>From Date</u>	<u>To Date</u>
986	90465	Bremer Bank, N.A. PO BOX 260 AITKIN, MN 56431	430.32	13 MIN CARE TAX- TYPE 399	05-400-400-0402-6231		
		Warrant # 986 Total	430.32	Date 3/4/14			
987	8410	Bremer Bank 101 MINNESOTA AVENUE NORTH AITKIN, MN 56431	4,736.77	CLAIMS PAID	01-044-904-0000-6360		
		Warrant # 987 Total	4,736.77	Date 3/5/14		2/24/14	2/28/14
988	8410	Bremer Bank 101 MINNESOTA AVENUE NORTH AITKIN, MN 56431	5.00	09- 1-095600 CHGBACK FEE	01-042-000-0000-5524	EKLUND	
		Warrant # 988 Total	5.00	Date 3/7/14			
989	8410	Bremer Bank 101 MINNESOTA AVENUE NORTH AITKIN, MN 56431	53.90	CREDIT CARD FEE	19-522-000-0000-6217		
		Warrant # 989 Total	53.90	Date 3/10/14			
990	780	Bremer Bank MORTGAGE- DEED TAX AITKIN, MN 56431	9,221.41	FEB DEED TAX	09-000-000-0000-2025		
		Warrant # 990 Total	11,951.35	FEB MORTGAGE REG	09-000-000-0000-2026		
			21,172.76	Date 3/11/14			
991	8410	Bremer Bank 101 MINNESOTA AVENUE NORTH AITKIN, MN 56431	2,348.82	CLAIMS PAID	01-044-904-0000-6360		
		Warrant # 991 Total	2,348.82	Date 3/12/14		3/3/14	3/7/14
992	5462	Bremer Bank (Elan ACH) ELAN ACH AITKIN, MN 56431	25.00	AT&T data plan renewal	01-049-000-0000-6231		

Aitkin County

WARRANT REGISTER



Manual Warrants

<u>Warr #</u>	<u>Vendor #</u>	<u>Vendor Name</u>	<u>Amount</u>	<u>Description</u>	<u>Account Number</u>	<u>Invoice #</u>	<u>PO #</u>
				<u>OBO#</u>	<u>On- Behalf- of- Name</u>	<u>From Date</u>	<u>To Date</u>
			119.88	glucose test strips	01- 252- 000- 0000- 6262		
			16.90	sales tax credit Miller Chev	01- 252- 000- 0000- 6302		
			323.00	RMS server power supply	01- 252- 000- 0000- 6610		
			102.00	Sport Show Booth	01- 700- 909- 0000- 6801		
			60.00	Reg.- Primary Care Conf.	05- 430- 700- 4800- 6208		
			30.81	Triple P PurchaseSA#51522637	05- 430- 710- 3661- 6020		
			62.25	Triple P PurchaseSA#51522670	05- 430- 710- 3661- 6020		
			8.75	mail defective compasses	19- 521- 000- 0000- 6205		
			13.60	40 stamps	19- 521- 000- 0000- 6205		
			20.00	Herpetological soceity dues	19- 522- 000- 0000- 6240		
			35.32	critter food	19- 522- 000- 0000- 6416		
			32.47	Science Book	19- 522- 000- 0000- 6416	Amazon	
			54.51	3 paks rechargible batteries	19- 522- 000- 0000- 6416	Amazon	
			30.00	parking/AMC Conf.- Westerlund	01- 001- 000- 0000- 6330	Double tree	
						2/25/14	2/27/14
			30.00	parking/AMC- to be credited	01- 001- 000- 0000- 6330	Double tree	
						2/25/14	2/27/14
			32.28	Parking/AMC conf/Marcotte	01- 001- 000- 0000- 6330	Double Tree	
						2/25/14	2/27/14
			32.28	Parking/AMC conf./Napstad	01- 001- 000- 0000- 6330	Double tree	
						2/26/14	2/27/14
			340.88	Hotel/AMC Conf.- Westerlund	01- 001- 000- 0000- 6332	Double tree	
						2/25/14	2/27/14
			338.60	Hotel/AMC conf/Niemi	01- 001- 000- 0000- 6332	Double Tree	
						2/25/14	2/27/14
			338.60	Hotel/AMC conf/Marcotte	01- 001- 000- 0000- 6332	Double Tree	
						2/25/14	2/27/14
			338.60	Hotel/AMC conf./Napstad	01- 001- 000- 0000- 6332	Double tree	
						2/26/14	2/27/14
			69.96	Meals/AMC conf/Niemi	01- 001- 000- 0000- 6340	Double Tree	
						2/25/14	2/27/14
			56.91	cnty car gas/ARDC&AEOA	01- 001- 000- 0000- 6511	Niemi	
						2/21/14	2/21/14
			230.85	PSOP- Boots/Shoes	05- 430- 710- 3670- 6020	SA#51496638	
			2,709.65	Date 3/14/14			
	Warrant #	992	Total				

993 8410 Bremer Bank
101 MINNESOTA AVENUE NORTH
AITKIN, MN 56431

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04/03/2014

4:18PM

Aitkin County

WARRANT REGISTER



Manual Warrants

<u>Warr #</u>	<u>Vendor #</u>	<u>Vendor Name</u>	<u>Amount</u>	<u>Description</u>	<u>Account Number</u>	<u>Invoice #</u>	<u>PO #</u>
				<u>OBO#</u>	<u>On- Behalf- of- Name</u>	<u>From Date</u>	<u>To Date</u>
			4,016.33	CLAIMS PAID	01-044- 904- 0000- 6360		
		Warrant # 993 Total	4,016.33	Date 3/19/14		3/10/14	3/14/14
994	8410	Bremer Bank 101 MINNESOTA AVENUE NORTH AITKIN, MN 56431					
			5,722.09	Claims Paid	01-044- 904- 0000- 6360		
		Warrant # 994 Total	5,722.09	Date 3/26/14		3/17/14	3/21/14
995	5462	Bremer Bank (Elan ACH) ELAN ACH AITKIN, MN 56431					
			8.98	home wall charger- Droid	05- 400- 440- 0410- 6405		
			134.91	Initial Clothing SA#51593496	05- 430- 710- 3810- 6057		
			134.91	Initial Clothing SA#51593433	05- 430- 710- 3810- 6057		
			134.90	Initial Clothing SA#51593529	05- 430- 710- 3810- 6057		
			23.20	postage for 4 packages	19- 521- 000- 0000- 6205		
			253.50	rubber stamps for Geocaching	21- 520- 000- 0000- 6406		
			32.28	- credit for double parking chg.	01- 001- 000- 0000- 6330	3- 12 AMC	
			200.21	gloves, safety glasses	01- 253- 000- 0000- 6405	Ahlborn	
			111.19	glucose test strips	01- 252- 000- 0000- 6262	Amazon	
			86.04	lancets	01- 252- 000- 0000- 6262	Amazon	
			37.89	(3) Canon black ink cartridges	01- 390- 000- 0000- 6405	Amazon	
			76.97	(2) HP black toner cartridges	01- 390- 000- 0000- 6405	Amazon	
			185.58	2 chairs for conv.use	19- 521- 000- 0000- 6405	Amazon	
			225.00	PACE course- Burman	01- 043- 000- 0000- 6208	Bemidji	
						8/25/14	8/29/14
			78.81	MSSA/Meals	05- 430- 700- 4800- 6330	Brenda,Amanda	
						3/18/14	3/21/14
			35.05	critter food	19- 522- 000- 0000- 6416	bug company	
			53.94	coffee	01- 253- 000- 0000- 6405	County Market	
			14.53	- Niemi meal credit	01- 001- 000- 0000- 6340	Doubletree	
			75.00	Under one Roof- Reg.	05- 400- 400- 0402- 6208	Duluth	
						5/14/14	5/15/14
			75.00	Under one Roof- Reg.	05- 430- 700- 4800- 6208	Duluth	
						5/14/14	5/15/14
			60.00	Primary care conf.- Reg.Mona P	05- 430- 700- 4800- 6208	Grand rapids	

Aitkin County

WARRANT REGISTER



Manual Warrants

<u>Warr #</u>	<u>Vendor #</u>	<u>Vendor Name</u>	<u>Amount</u>	<u>Description</u>	<u>Account Number</u>	<u>Invoice #</u>	<u>PO #</u>
				<u>OBO#</u>	<u>On- Behalf- of- Name</u>	<u>From Date</u>	<u>To Date</u>
			29.36	engineering supplies	03-302-000-0000-6449	Humboldt	
			60.95	MSSA/Meals	05-430-700-4800-6330	Jon	
						3/18/14	3/21/14
			392.87	transport exps/E.Moss	01-252-000-0000-6330	Missouri	
						3/18/14	3/19/14
			284.98	Xerox Documate- Duplex scanner	05-400-440-0410-6405	Newegg	
			234.35	Ricoh color cartridges	01-122-000-0000-6405	Provantage	
			234.35	Ricoh color cartridges	01-391-000-0000-6405	Provantage	
			30.08	MSSA/Meals	05-430-700-4800-6330	Reina	
						3/18/14	3/21/14
			352.51	Family Assess Clothing	05-430-710-3640-6020	SA#51605066	
			31.96	coffee	01-253-000-0000-6405	Shopko	
			221.59	Hotel/Septic design class- Pete	01-122-000-0000-6332	St Joseph	
						3/18/14	3/21/14
			30.00	Parking/Land comm.conference	10-923-000-0000-6330	St Paul	
						3/4/14	3/6/14
			302.24	Hotel/Land comm.conference	10-923-000-0000-6332	St Paul	
						3/4/14	3/6/14
			435.00	Design/Inspect Reg.- Gansen	01-122-000-0000-6208	UofM	
						3/18/14	3/21/14
			61.76	groceries for jail	01-252-000-0000-6418	Walmart	
			90.35	shower curtain/bath towels	01-252-000-0000-6424	Walmart	
			76.05	inmate supplies	01-252-252-0000-6405	Walmart	
			11.16	pencils	01-252-252-0000-6405	Walmart	
		Warrant # 995	Total	4,823.83	Date 3/27/14		
44451	13038	Burrell Printing Co Inc. 901 Highway 685 Plugerville, TX 78660					
				94.18	1000 Game & Fish Lic. Envelope	01-040-021-0000-6405	248050
				94.18	Date 3/27/14		
		Warrant # 44451	Total				
44543	9026	MII Life/Select Account P.O. BOX 64193 SAINT PAUL, MN 55164-0193					
				339.71	MARCH PARTICIPANT FEES	01-044-904-0000-6231	988812
				339.71	Date 3/12/14		
		Warrant # 44543	Total				

Aitkin County

WARRANT REGISTER



Manual Warrants

<u>Warr #</u>	<u>Vendor #</u>	<u>Vendor Name</u>	<u>Amount</u>	<u>Description</u>	<u>Account Number</u>	<u>Invoice #</u>	<u>PO #</u>
				<u>OBO#</u>	<u>On- Behalf- of- Name</u>	<u>From Date</u>	<u>To Date</u>
44544	11941	MIH- HSA Atten: HSA Administration PO Box 64193 St Paul, MN 55164- 0193					
	Warrant #	44544	Total	1,173.00	Q 2- 4 DEB JENSEN	05- 430- 700- 4820- 6148	
				1,173.00	Date 3/14/14		
44545	13031	Holisak/John 30196 Dam Lake Street Aitkin, MN 56431					
	Warrant #	44545	Total	90.00	09- 0- 002900 overpay per 1	13- 943- 000- 0000- 2001	Holisak
				90.00	Date 3/19/14		
44546	13032	Halvorson/Charles 84 Elma St NE McGregor, MN 55760					
	Warrant #	44546	Total	10.00	59- 1- 032400 overpay per 1	13- 943- 000- 0000- 2001	Halvorson
				6.00	59- 1- 032302 overpay per 1	13- 943- 000- 0000- 2001	Halvorson
				16.00	Date 3/19/14		
44547	13033	Koran/Troy 206 N 4th St PO Box 234 McGrath, MN 56350					
	Warrant #	44547	Total	11.88	58- 1- 005601 overpay per 1	13- 943- 000- 0000- 2001	Koran
				11.88	Date 3/19/14		
44548	86198	Aitkin County Treasurer 209 2ND ST NW, ROOM 203 AITKIN, MN 56431					
	Warrant #	44548	Total	14.10	State Deed Tax	03- 307- 000- 0000- 6362	SP0161022
				14.10	Date 3/20/14		
44549	11597	Postmaster- Brainerd 422 LAUREL ST BRAINERD, MN 56401					
	Warrant #	44549	Total	506.28	postage for summer camp broch	19- 521- 000- 0000- 6205	3,250
				506.28	Date 3/20/14		
44552	12121	Ulland Brothers, Inc.					

DKB1
04/03/2014

4:18PM

Aitkin County

WARRANT REGISTER



Manual Warrants

<u>Warr #</u>	<u>Vendor #</u>	<u>Vendor Name</u>	<u>Amount</u>	<u>Description</u>	<u>Account Number</u>	<u>Invoice #</u>	<u>PO #</u>
				<u>OBO#</u>	<u>On- Behalf- of- Name</u>	<u>From Date</u>	<u>To Date</u>
		PO Box 340					
		Cloquet, MN 55720					
	Warrant #	44552	Total				
			80,451.92	Final contract payment	03-307-000-0000-6262	0160312	
			80,451.92	Date 3/27/14			
44553	6160	MII - Veba					
		ATTN: VEBA ADMINISTRATION					
		PO BOX 64193					
		ST. PAUL, MN 55164-0193					
	Warrant #	44553	Total				
			1,000.00	Max Savor 2014 VEBA contrib.	01-049-000-0000-6149		
			1,000.00	Date 3/28/14			
		Final Total...	129,716.54	83	Transactions		

Aitkin County



Warr # Vendor #

RECAP BY FUND

<u>FUND</u>	<u>AMOUNT</u>	<u>NAME</u>
1	22,957.86	General Fund
3	80,495.38	Road & Bridge
5	3,418.26	Health & Human Services
9	21,172.76	State
10	332.24	Trust
13	117.88	Taxes & Penalties
19	968.66	Long Lake Conservation Center
21	253.50	Parks
	129,716.54	TOTAL

Print List in Order By: 2 1 - Fund (Page Break by Fund) Page Break By: 1 1 - Page Break by Fund
2 - Department (Totals by Dept) 2 - Page Break by Dept
3 - Vendor Number
4 - Vendor Name

Explode Dist. Formulas N

Paid on Behalf Of Name
on Audit List?: N

Type of Audit List: D D - Detailed Audit List
S - Condensed Audit List

Save Report Options?: N

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

1 General Fund

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
1	DEPT			Commissioners		
86222	Aitkin Independent Age 01-001-000-0000-6230		81.51	2/11 synopsis	1479	Printing, Publishing & Adv
	01-001-000-0000-6230		68.64	2/25 synopsis	1479	Printing, Publishing & Adv
86222	Aitkin Independent Age		150.15	2 Transactions		
3590	Niemi/Donald 01-001-000-0000-6330		181.44	April Mileage	324@.56	Transportation & Travel & Parking
3590	Niemi/Donald		181.44	1 Transactions		
10895	Westerlund/Laurie Ann 01-001-000-0000-6330		235.20	March/April Mileage 03/27/2014 04/07/2014	420@.56	Transportation & Travel & Parking
10895	Westerlund/Laurie Ann		235.20	1 Transactions		
1	DEPT Total:		566.79	Commissioners	3 Vendors	4 Transactions
12	DEPT			Court Administration		
10185	Centurylink Communications Inc 01-012-000-0000-6250		37.89	LD PHONE-Q 2	320146217	Telephone
10185	Centurylink Communications Inc		37.89	1 Transactions		
11634	Gammello,Qualley & Pearson PLLC 01-012-000-0000-6232		15.00	Attorney fees 01JV091134	41299	Attorney Services
11634	Gammello,Qualley & Pearson PLLC		15.00	1 Transactions		
10208	Ketola/Marvin E. 01-012-000-0000-6232		331.25	Attorney fees	01-P4-99000194	Attorney Services
	01-012-000-0000-6232		56.56	Attorney costs	01-P4-99000194	Attorney Services
10208	Ketola/Marvin E.		387.81	2 Transactions		
2810	Larson/Shari S 01-012-000-0000-6232		1,225.00	ATTORNEY FEES 03/27/2014 03/31/2014	MARCH	Attorney Services
	01-012-000-0000-6232		62.72	COSTS 03/27/2014 03/31/2014	MARCH	Attorney Services
2810	Larson/Shari S		1,287.72	2 Transactions		

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
12	DEPT Total:		1,728.42	Court Administration	4 Vendors	6 Transactions
40	DEPT			Auditor		
86222	Aitkin Independent Age					
	01-040-000-0000-6230		7,580.44	DELQ TAX LIST-1ST WEEK	1014	Printing, Publishing & Adv
	01-040-000-0000-6230		7,168.59	DELQ TAX LIST-2ND WEEK	1014	Printing, Publishing & Adv
	01-040-000-0000-6230		960.96	ASSEMBLY ORD. X 2	1014	Printing, Publishing & Adv
	01-040-021-0000-6230		32.00	LICENSE CTR/SERV/DIR	1014	Printing, Publishing & Adv
86222	Aitkin Independent Age		15,741.99		4 Transactions	
208	American Solutions For Business					
	01-040-000-0000-6205		764.97	Postage for tax statements	INV01715102	Postage
208	American Solutions For Business		764.97		1 Transactions	
10185	Centurylink Communications Inc					
	01-040-000-0000-6250		6.64	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		6.64		1 Transactions	
88880	Datacomm Computers & Networks Inc					
	01-040-000-0000-6625		905.00	Computer for Donna	7332	Office Equipment
	01-040-000-0000-6625		905.00	Computer for Sally	7332	Office Equipment
88880	Datacomm Computers & Networks Inc		1,810.00		2 Transactions	
2214	Holder/Maryann					
	01-040-021-0000-6301		750.00	MAY RENT LICENSE CENTER		Rentals
2214	Holder/Maryann		750.00		1 Transactions	
86290	Mn Counties Information Systems					
	01-040-000-0000-6231		1,491.00-	Finance 2012 quarterly adjust.	770	Services, Labor, Contracts
	01-040-000-0000-6231		2,085.00	iSeries 2012 quarterly adjust.	770	Services, Labor, Contracts
	01-040-000-0000-6231		1,943.00	Finance 2014 Q1 Support	770	Services, Labor, Contracts
	01-040-000-0000-6231		64.00	Payroll 2014 Q1 Support	770	Services, Labor, Contracts
	01-040-000-0000-6231		3,155.00	iSeries 2014 Q1 Support	770	Services, Labor, Contracts
	01-040-000-0000-6231		60.00	IFS 2014 Q1&2 Golden Support	783	Services, Labor, Contracts
	01-040-000-0000-6231		223.37	Zend 2014 Support	783	Services, Labor, Contracts
86290	Mn Counties Information Systems		6,039.37		7 Transactions	
12287	Skattum/Brett					
	01-040-021-0000-6231		8.00	wash windows license center	575548	Services, Labor, Contracts

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
12287	Skattum/Brett		8.00	03/31/2014 03/31/2014	1 Transactions	
86235	The Office Shop Inc					
	01-040-021-0000-6405		69.99	6pk typewriter ribbon	271402-0	Office & Computer Supplies
	01-040-000-0000-6405		6.79	(1) typewriter correction ribb	957797-0	Office & Computer Supplies
	01-040-000-0000-6405		20.70	box of letter size folders	957797-0	Office & Computer Supplies
	01-040-000-0000-6405		1.00	(1) Correction Fluid	957797-0	Office & Computer Supplies
	01-040-000-0000-6405		1.58	2 box Cutters	957797-0	Office & Computer Supplies
86235	The Office Shop Inc		100.06		5 Transactions	
40	DEPT Total:		25,221.03	Auditor	8 Vendors	22 Transactions
42	DEPT			Treasurer		
208	American Solutions For Business					
	01-042-000-0000-6231		4,534.80	Print tax statements	INV01715102	Services, Labor, Contracts
	01-042-000-0000-6405		1,070.00	Tax Statements	INV01715102	Office & Computer Supplies
208	American Solutions For Business		5,604.80		2 Transactions	
10185	Centurylink Communications Inc					
	01-042-000-0000-6250		4.11	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		4.11		1 Transactions	
4173	Grams/Lori					
	01-042-000-0000-6405		9.79	Labels		Office & Computer Supplies
4173	Grams/Lori		9.79		1 Transactions	
4233	S & T Office Products Inc					
	01-042-000-0000-6405		28.85	Ribbon, BK/RD,BK	01QH9142	Office & Computer Supplies
4233	S & T Office Products Inc		28.85		1 Transactions	
86235	The Office Shop Inc					
	01-042-000-0000-6405		16.99	USB CABLE	271606-0	Office & Computer Supplies
86235	The Office Shop Inc		16.99		1 Transactions	
42	DEPT Total:		5,664.54	Treasurer	5 Vendors	6 Transactions
43	DEPT			Assessor		

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
86222	Aitkin Independent Age 01-043-000-0000-6405		32.00	1 year subscription	1693	Office, Film & Computer Supplies
86222	Aitkin Independent Age		32.00	1 Transactions		
208	American Solutions For Business 01-043-000-0000-6205		764.97	Postage for value statements	INV01715102	Postage
	01-043-000-0000-6230		4,534.80	Print valuation notices	INV01715102	Printing, Publishing & Adv
	01-043-000-0000-6230		920.48	Valuation statements	INV01715102	Printing, Publishing & Adv
208	American Solutions For Business		6,220.25	3 Transactions		
783	Canon Financial Services, Inc 01-043-000-0000-6231		12.83	Print Kit - 024	13676151	Services, Labor, Contracts
783	Canon Financial Services, Inc		12.83	1 Transactions		
10185	Centurylink Communications Inc 01-043-000-0000-6250		11.95	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		11.95	1 Transactions		
1570	Erickson Oil Products Inc 01-043-000-0000-6511		136.51	March fuel	011347	Gas And Oil
1570	Erickson Oil Products Inc		136.51	1 Transactions		
86235	The Office Shop Inc 01-043-000-0000-6405		12.80	Letter & junior pads	271477-0	Office, Film & Computer Supplies
	01-043-000-0000-6405		14.85	Stamp reinked	957500-0	Office, Film & Computer Supplies
86235	The Office Shop Inc		27.65	2 Transactions		
6097	Verizon Wireless 01-043-000-0000-6250		76.02	Monthly cell phone	68069088200001	Telephone
6097	Verizon Wireless		76.02	1 Transactions		
43	DEPT Total:		6,517.21	Assessor	7 Vendors	10 Transactions
44	DEPT			Central Services		
86198	Aitkin County Treasurer 01-044-000-0000-6829		1,008.00	2014 taxes, property purchase	14-0-039100	Right of Way Purchase/RE Taxes
86198	Aitkin County Treasurer		1,008.00	1 Transactions		
10185	Centurylink Communications Inc					

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
10185	Centurylink Communications Inc 01-044-000-0000-6250		2.48	MARCH LONG DISTANCE	320146217	Telephone
			2.48	1 Transactions		
88846	Dacotah Paper Company 01-044-000-0000-6405		2,077.60	80 cases paper	53531	Office & Computer Supplies
88846	Dacotah Paper Company		2,077.60	1 Transactions		
3951	Pro West & Associates, Inc 01-044-195-0000-6625		25.00	Tech Assistance-Website 03/01/2014 03/31/2014	14040701	Unallocated Tech. Expense 357.182 Subd
3951	Pro West & Associates, Inc		25.00	1 Transactions		
9261	RTVision, Inc. 01-044-000-0000-6231		300.00	time off req support/maintenan 06/01/2014 06/01/2015	11721	Services, Labor, Contracts
9261	RTVision, Inc.		300.00	1 Transactions		
5831	The Sand Creek Group,Ltd 01-044-000-0000-6208		800.00	De-Escalation Trng-4@200.00	92409	In Service Training/Education
	01-044-000-0000-6208		325.00	Travel-5hrs@65.00	92409	In Service Training/Education
5831	The Sand Creek Group,Ltd		1,125.00	2 Transactions		
44	DEPT Total:		4,538.08	Central Services	6 Vendors	7 Transactions
45	DEPT			Motor Pool		
6128	Tire Barn 01-045-000-0000-6302		32.44	oil change #4 Impala	27082	Car Maintenance
6128	Tire Barn		32.44	1 Transactions		
45	DEPT Total:		32.44	Motor Pool	1 Vendors	1 Transactions
49	DEPT			Information Technologies		
10185	Centurylink Communications Inc 01-049-000-0000-6250		2.34	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		2.34	1 Transactions		
88880	Datacomm Computers & Networks Inc 01-049-000-0000-6402		65.00	RBC5 Battery	7310	Computer Supplies & Software

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
88880	Datacomm Computers & Networks Inc		65.00		1 Transactions	
86290	Mn Counties Information Systems					
	01-049-000-0000-6231		5,285.00	Prop.Tax 2014 Q1 Support	770	Programming, Services, Contracts
	01-049-000-0000-6231		14,818.00	Prop.Tax 2014 Q1 Support	770	Programming, Services, Contracts
	01-049-000-0000-6231		936.00-	Prop.Tax 2012 quarterly adjust	770	Programming, Services, Contracts
	01-049-000-0000-6231		2,478.00-	Prop.Tax 2012 quarterly adjust	770	Programming, Services, Contracts
	01-049-000-0000-6231		8.00	Network 2014 Q1 Tech Support	770	Programming, Services, Contracts
	01-049-000-0000-6231		110.00-	Network 2012 quarterly adjust.	770	Programming, Services, Contracts
	01-049-000-0000-6231		223.37	Zend 2014 Support	783	Programming, Services, Contracts
	01-049-000-0000-6231		238.64	IFS 2014 Technical Support	783	Programming, Services, Contracts
86290	Mn Counties Information Systems		17,049.01		8 Transactions	
5774	Riverwood Healthcare Clinic					
	01-049-000-0000-6272		200.00	Physical-Savor	85378	Physical Examinations
5774	Riverwood Healthcare Clinic		200.00		1 Transactions	
4233	S & T Office Products Inc					
	01-049-000-0000-6405		19.07	CD Mailers	01QH9141	Office Supplies (Non Computer)
4233	S & T Office Products Inc		19.07		1 Transactions	
6097	Verizon Wireless					
	01-049-000-0000-6231		26.02	Renewal	38669511000002	Programming, Services, Contracts
6097	Verizon Wireless		26.02		1 Transactions	
49	DEPT Total:		17,361.44	Information Technologies	6 Vendors	13 Transactions
52	DEPT			Administration/Personnel Dept		
10185	Centurylink Communications Inc					
	01-052-000-0000-6250		20.21	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		20.21		1 Transactions	
2946	Madden Galanter Hansen,LLP					
	01-052-000-0000-6232		2,736.00	Labor relations svcs	22.8@120.00	Attorney Services
				03/01/2014 03/31/2014		
	01-052-000-0000-6232		268.80	mileage fees	480@.56	Attorney Services
				03/01/2014 03/31/2014		
	01-052-000-0000-6232		1.55	Costs for Labor relations svcs	Phone chgs	Attorney Services
				03/01/2014 03/31/2014		

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
2946	Madden Galanter Hansen,LLP		3,006.35		3 Transactions	
12048	McDowell Agency, Inc./The 01-052-000-0000-6234		25.00	BACKGROUND SCREENING	51607	Background Check Fee
12048	McDowell Agency, Inc./The		25.00		1 Transactions	
52	DEPT Total:		3,051.56	Administration/Personnel Dept	3 Vendors	5 Transactions
60	DEPT			Elections		
88880	Datacomm Computers & Networks Inc 01-060-000-0000-6405		905.00	Computer for Elections	7332	Office & Computer Supplies
88880	Datacomm Computers & Networks Inc		905.00		1 Transactions	
11051	Department of Human Services 01-060-000-0000-6405		94.69	Postage, mail voter cards	A300IC01133I	Office & Computer Supplies
11051	Department of Human Services		94.69		1 Transactions	
1601	Election Systems & Software Inc 01-060-000-0000-6231		17,080.44	Maint & support agreement	883233	Services, Labor, Contracts
1601	Election Systems & Software Inc		17,080.44		1 Transactions	
60	DEPT Total:		18,080.13	Elections	3 Vendors	3 Transactions
90	DEPT			Attorney		
783	Canon Financial Services, Inc 01-090-000-0000-6405		261.77	Contract charge	13712363	Office & Computer Supplies
783	Canon Financial Services, Inc		261.77		1 Transactions	
10185	Centurylink Communications Inc 01-090-000-0000-6250		22.13	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		22.13		1 Transactions	
9489	Redwood Toxicology Laboratory, Inc 01-090-000-0000-6213		24.00	UA Reimbursement	12289120143	Drug & Forfeiture Ms387.213
9489	Redwood Toxicology Laboratory, Inc		24.00		1 Transactions	
12624	Wanka/Nick 01-090-000-0000-6208		144.28	reimb.for live webcast fee	4/9/14	Training/Education

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Accr	Rpt	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
12624	Wanka/Nick			144.28		1 Transactions	
5173	West Payment Center 01-090-000-0000-6406			1,055.92	March Information Charges 03/01/2014 03/31/2014	829294215	Law Publ. & Subscriptions
5173	West Payment Center			1,055.92		1 Transactions	
90	DEPT Total:			1,508.10	Attorney	5 Vendors	5 Transactions
100	DEPT				Recorder		
10185	Centurylink Communications Inc 01-100-000-0000-6250			10.75	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc			10.75		1 Transactions	
10930	Tidholm Productions 01-100-000-0000-6230			132.00	1,500 #10 Envelopes	69864702	Printing, Publishing & Adv
10930	Tidholm Productions			132.00		1 Transactions	
100	DEPT Total:			142.75	Recorder	2 Vendors	2 Transactions
110	DEPT				Courthouse Maintenance		
8239	Ameripride Linen & Apparel Services 01-110-000-0000-6422			45.93	tissue, multi-towels, soap,mop	2200500839	Janitorial Supplies
8239	Ameripride Linen & Apparel Services			45.93		1 Transactions	
10185	Centurylink Communications Inc 01-110-000-0000-6250			4.64	MARCH LONG DISTANCE	320146217	Phone
10185	Centurylink Communications Inc			4.64		1 Transactions	
88628	Dalco 01-110-000-0000-6422			139.73	Towels, tissue	2712732	Janitorial Supplies
88628	Dalco			139.73		1 Transactions	
1570	Erickson Oil Products Inc 01-110-000-0000-6511			82.77	Fuel	20559	Gas And Oil
1570	Erickson Oil Products Inc			82.77		1 Transactions	
1754	Garrison Disposal Company, Inc						

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name	Account/Formula	Accr	Rpt	Amount	Warrant Description	Service Dates	Invoice #	Paid On Bhf #	Account/Formula Description	On Behalf of Name
1754	Garrison Disposal Company, Inc	01-110-000-0000-6255			527.05	Waste Removal		8179689		Garbage	
					527.05		1 Transactions				
2186	Hillyard Inc - Kansas City	01-110-000-0000-6422			260.01	LINERS & ICE MELT		601091377		Janitorial Supplies	
					260.01		1 Transactions				
4641	Holiday Credit Office	01-110-000-0000-6511			77.13	Gas - Maint		1400000135194		Gas And Oil	
					77.13		1 Transactions				
11889	Honeywell International Inc.	01-110-000-0000-6231			2,816.70	Quarterly Mech/Elec		5228612333		Services, Labor, Contracts	
						04/15/2014	07/14/2014				
					2,816.70		1 Transactions				
2340	Hyytinen Hardware Hank	01-110-000-0000-6590			3.48	Finance charge				Repair & Maintenance	
					19.47	hose brass Y shutoff, door sto		1165878		Repair & Maintenance	
					18.28	Drill Set, Tacks		1166042		Repair & Maintenance	
					11.98	18in grease hose,S-smooth		1166298		Repair & Maintenance	
					259.99	UPRIGHT VACUUM		1167165		Repair & Maintenance	
					8.19	blank switch, male adapters		1168910		Repair & Maintenance	
					24.99	steel waste can		1169217		Repair & Maintenance	
					1.49	male adapter		1169259		Repair & Maintenance	
					347.87		8 Transactions				
89765	Minnesota Elevator, Inc	01-110-000-0000-6231			156.13	April monthly service		308294		Services, Labor, Contracts	
					156.13		1 Transactions				
4010	Rasley Oil Company	01-110-000-0000-6511			31.36	Fuel, Unit 445		21493		Gas And Oil	
					31.36		1 Transactions				
4070	Riley Auto Supply	01-110-000-0000-6590			39.99	8 Piece screwdriver set		546417		Repair & Maintenance	
					5.99	Dielectric grease		546850		Repair & Maintenance	

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
4070	Riley Auto Supply		45.98		2 Transactions	
110	DEPT Total:		4,535.30	Courthouse Maintenance	12 Vendors	20 Transactions
120	DEPT			Service Officer		
10185	Centurylink Communications Inc 01-120-000-0000-6250		18.29	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		18.29		1 Transactions	
10097	Harms Monroe/Penny 01-120-000-0000-6330		136.16	Annual Training mileage 04/08/2014 04/10/2014		Transportation & Travel
	01-120-000-0000-6340		60.00	Annual Training- meals 04/08/2014 04/10/2014		Meals
10097	Harms Monroe/Penny		196.16		2 Transactions	
4641	Holiday Credit Office 01-120-000-0000-6511		377.95	March gas - Vet's van	1400000136034	Gas And Oil
4641	Holiday Credit Office		377.95		1 Transactions	
10567	Lake Country Auto Center Of Aitkin 01-120-000-0000-6302		35.32	Oil change - Vet's van	16983	Car Maintenance
10567	Lake Country Auto Center Of Aitkin		35.32		1 Transactions	
120	DEPT Total:		627.72	Service Officer	4 Vendors	5 Transactions
122	DEPT			Planning & Zoning		
86222	Aitkin Independent Age 01-122-000-0000-6230		60.06	BOA HRG NOTICE 4/2/14	1482	Printing, Publishing & Adv
	01-122-000-0000-6230		291.72	SSTS ORD.HRG NOTICE-4 TIMES	1482	Printing, Publishing & Adv
86222	Aitkin Independent Age		351.78		2 Transactions	
10185	Centurylink Communications Inc 01-122-000-0000-6250		8.82	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		8.82		1 Transactions	
88880	Datacomm Computers & Networks Inc 01-122-000-0000-6625		1,810.00	2 computer systems	7333	Office Equipment

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Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
88880	Datacomm Computers & Networks Inc		1,810.00		1 Transactions	
4641	Holiday Credit Office 01-122-000-0000-6511		23.00	MARCH GAS	1400000135321	Gas And Oil
4641	Holiday Credit Office		23.00		1 Transactions	
13055	Ranney/Dale 01-122-000-0000-6820		25.00	Partial refund	permit #40165	Refunds & Reimbursements
13055	Ranney/Dale		25.00		1 Transactions	
122	DEPT Total:		2,218.60	Planning & Zoning	5 Vendors	6 Transactions
123	DEPT			Coroner		
3987	Ramsey County Medical Examiner 01-123-000-0000-6260		1,400.00	FEES	ME 14-0509	Autopsies--Pathologist, Xrays, Etc
3987	Ramsey County Medical Examiner		1,400.00		1 Transactions	
4192	Regions Hospital 01-123-000-0000-6260		180.00	FEES	ME 14-0509	Autopsies--Pathologist, Xrays, Etc
4192	Regions Hospital		180.00		1 Transactions	
123	DEPT Total:		1,580.00	Coroner	2 Vendors	2 Transactions
200	DEPT			Enforcement		
10507	Aitkin County Fair 01-200-000-0000-6230		130.00	1/4 page Fair book ad		Printing, Publishing & Adv
10507	Aitkin County Fair		130.00		1 Transactions	
12445	Brandl Chevrolet, Buick, GM 01-200-000-0000-6302		212.63	#221 headlamp/trans.filter	207021	Car Maintenance
	01-200-000-0000-6302		229.69	Oil, Tires, Transmission #204	207094	Car Maintenance
	01-200-000-0000-6302		694.42	Transmission lines #221	207128	Car Maintenance
12445	Brandl Chevrolet, Buick, GM		1,136.74		3 Transactions	
10185	Centurylink Communications Inc 01-200-000-0000-6250		55.05	MARCH LONG DISTANCE	320146217	Telephone
	01-200-000-0000-6250		43.21	MARCH LONG DISTANCE	320146217	Telephone

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Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
10185	Centurylink Communications Inc		98.26		2 Transactions	
10405	Digital Ally, Inc. 01-200-000-0000-6405		20.00	belt clip for #225	1064816	Office Supplies
10405	Digital Ally, Inc.		20.00		1 Transactions	
4641	Holiday Credit Office 01-200-000-0000-6511		152.65	MARCH GAS	1400000288942	Gas And Oil
4641	Holiday Credit Office		152.65		1 Transactions	
5756	KEEPRS, Inc 01-200-000-0000-6410		85.25	Uniform shirt #223	242145	Clothing Allowance
5756	KEEPRS, Inc		85.25		1 Transactions	
2925	L & M Supply, Inc. 01-200-019-0000-6409		37.88	CANINE SUPPLIES	6391184	Supplies
2925	L & M Supply, Inc.		37.88		1 Transactions	
10567	Lake Country Auto Center Of Aitkin 01-200-000-0000-6302		18.00	Repair tire #212	16908	Car Maintenance
10567	Lake Country Auto Center Of Aitkin		18.00		1 Transactions	
3160	Mille Lacs Energy Coop-Albert Lea 01-200-000-0000-6254		89.48	Fleming Tower	271300302	Utilities
	01-200-000-0000-6254		221.00	Shelter/Tower	345401501	Utilities
	01-200-000-0000-6254		29.50	Seavey Tower	552100201	Utilities
3160	Mille Lacs Energy Coop-Albert Lea		339.98		3 Transactions	
3371	Minnesota Sheriffs' Association 01-200-003-0000-6241		260.00	Registration MSA - Drahota	052130	Registration Fee
3371	Minnesota Sheriffs' Association		260.00		1 Transactions	
6038	Mississippi Landing 01-200-000-0000-6511		32.23	Gas #209	612922	Gas And Oil
6038	Mississippi Landing		32.23		1 Transactions	
11108	Northeast Wisconsin Tech College 01-200-003-0000-6241		350.00	Reg - taser instructor #204	SFT0000093079	Registration Fee

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Accr	Rpt Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
11108	Northeast Wisconsin Tech College		350.00		1 Transactions	
13006	Ray Allen Manufacturing, LLC 01-200-019-0000-6409		9.98	K9 Patch	303001-2	Supplies
13006	Ray Allen Manufacturing, LLC		9.98		1 Transactions	
4233	S & T Office Products Inc 01-200-000-0000-6405		4.82	office supplies	01Q10221	Office Supplies
	01-200-000-0000-6405		12.52	Office supplies	01Q10501	Office Supplies
	01-200-000-0000-6405		5.36	office supplies	01Q10502	Office Supplies
4233	S & T Office Products Inc		22.70		3 Transactions	
4681	Streichers 01-200-000-0000-6410		87.99	vest carrier replacements #224	I1082914	Clothing Allowance
	01-200-000-0000-6610		172.99	vest outer carrier	I1084348	Equipment & Radios
4681	Streichers		260.98		2 Transactions	
86235	The Office Shop Inc 01-200-000-0000-6405		30.00	Paper reams	957966-0	Office Supplies
86235	The Office Shop Inc		30.00		1 Transactions	
6097	Verizon Wireless 01-200-000-0000-6250		260.26	CELL SQUAD CONNECTIONS	786663881	Telephone
6097	Verizon Wireless		260.26		1 Transactions	
200	DEPT Total:		3,244.91	Enforcement	17 Vendors	25 Transactions
206	DEPT			Forfeitures		
117	Aitkin County Sheriff 01-206-000-0000-6409		116.25	title forfeited vehicles	4/3/14	Forfeiture Supplies
117	Aitkin County Sheriff		116.25		1 Transactions	
206	DEPT Total:		116.25	Forfeitures	1 Vendors	1 Transactions
252	DEPT			Corrections		
116	Aitkin Feed & Farm Supply Inc 01-252-000-0000-6590		293.51	SOFTENER PELLETS	96252	Repair & Maintenance Supplies

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

<u>Vendor Name</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>
<u>No.</u> <u>Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>On Behalf of Name</u>
			<u>Paid On Bhf #</u>	
116 Aitkin Feed & Farm Supply Inc		293.51	1 Transactions	
12106 Antoine Electric				
01-252-000-0000-6590		26.86	KITCHEN APPLIANCE LAMPS	13493 Repair & Maintenance Supplies
12106 Antoine Electric		26.86	1 Transactions	
246 Brothers Fire Protection				
01-252-000-0000-6231		962.00	Replace sprinkle heads	92762 Services & Labor (Incl Contracts)
246 Brothers Fire Protection		962.00	1 Transactions	
10185 Centurylink Communications Inc				
01-252-000-0000-6250		58.14	MARCH LONG DISTANCE	320146217 Telephone
10185 Centurylink Communications Inc		58.14	1 Transactions	
5583 Crawford Supply Company				
01-252-252-0000-6408		106.92	commissary supplies	395570 Commissary Supplies
5583 Crawford Supply Company		106.92	1 Transactions	
88628 Dalco				
01-252-000-0000-6422		103.47	Paper Products	2729276 Janitorial Supplies
01-252-000-0000-6422		464.42	jail paper products	2734649 Janitorial Supplies
88628 Dalco		567.89	2 Transactions	
788 Department Of Public Safety-BCA				
01-252-000-0000-6231		390.00	CJDN Quarterly invoice	153414 Services & Labor (Incl Contracts)
788 Department Of Public Safety-BCA		390.00	1 Transactions	
1491 Dutch's Electric, Inc				
01-252-000-0000-6590		135.59	work on Sally Port Ballasts	21958 Repair & Maintenance Supplies
1491 Dutch's Electric, Inc		135.59	1 Transactions	
1570 Erickson Oil Products Inc				
01-252-000-0000-6330		53.24	Gas	9334 Prisoner Transportation & Travel
1570 Erickson Oil Products Inc		53.24	1 Transactions	
2186 Hillyard Inc - Kansas City				
01-252-000-0000-6422		259.24	JANITORIAL	601091403 Janitorial Supplies
2186 Hillyard Inc - Kansas City		259.24	1 Transactions	

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No. Account/Formula	Accr	Amount	Service Dates	On Behalf of Name
			Paid On Bhf #	
11889 Honeywell International Inc. 01-252-000-0000-6590		1,145.50	DAMPER MOTORS 526189	Repair & Maintenance Supplies
11889 Honeywell International Inc.		1,145.50	1 Transactions	
2340 Hyytinen Hardware Hank 01-252-000-0000-6590		15.99	Hose for wash machine 1168326	Repair & Maintenance Supplies
2340 Hyytinen Hardware Hank		15.99	1 Transactions	
5503 Keefe Supply Company 01-252-252-0000-6405		15.60	COMMISSARY SUPPLIES 395526	Prisoner Welfare
5503 Keefe Supply Company		15.60	1 Transactions	
5756 KEEPRS, Inc 01-252-000-0000-6410		93.98	Uniform pants #330 240870	Clothing Allowance
01-252-000-0000-6410		111.74	Uniform shirts - 328 241315-01	Clothing Allowance
01-252-000-0000-6410		55.87	Uniform shirts #328 241315-02	Clothing Allowance
01-252-000-0000-6410		73.50	Uniform Pants #328 242133	Clothing Allowance
5756 KEEPRS, Inc		335.09	4 Transactions	
13054 Kuehn/Kathryn A. 01-252-000-0000-5840		87.00	Reimburse duplicate court fees	Misc Receipts
13054 Kuehn/Kathryn A.		87.00	1 Transactions	
91187 Lake Country Power 01-252-000-0000-6254		107.24	Quadna tower 1501827050	Utilities & Heating
91187 Lake Country Power		107.24	1 Transactions	
89765 Minnesota Elevator, Inc 01-252-000-0000-6231		156.13	APRIL SERVICE BILLING 307667	Services & Labor (Incl Contracts)
89765 Minnesota Elevator, Inc		156.13	1 Transactions	
13053 Olson/Valerie 01-252-000-0000-5541		205.00	reimburse pay to stay fee	Pay To Stay Incounty Boarding Mn641.12
01-252-000-0000-6231		15.00	V.Olson pay to stay fee	Services & Labor (Incl Contracts)
13053 Olson/Valerie		220.00	2 Transactions	
3789 Pan-O-Gold Baking Company 01-252-000-0000-6418		153.86	Groceries 010024409314	Groceries
01-252-000-0000-6418		127.39	Groceries 010024410018	Groceries

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No. Account/Formula	Accr	Amount	Service Dates	On Behalf of Name
			Paid On Bhf #	
3789 Pan-O-Gold Baking Company		281.25	2 Transactions	
9499 Reliance Telephone Systems, Inc 01-252-252-0000-6406		1,000.00	phone cards D-12502	Phone Card Prisoner Welfare
9499 Reliance Telephone Systems, Inc		1,000.00	1 Transactions	
84172 Riverwood Healthcare Center 01-252-000-0000-6262		1,280.00	Nurse Visits ACS	Medical Expenses & Supplies - Inmates
84172 Riverwood Healthcare Center		1,280.00	1 Transactions	
5774 Riverwood Healthcare Clinic 01-252-000-0000-6272		165.00	Physical-Benz 85210	Physical Examinations
5774 Riverwood Healthcare Clinic		165.00	1 Transactions	
4233 S & T Office Products Inc 01-252-000-0000-6405		4.82	office supplies 01Q10221	Office & Computer Supplies
01-252-000-0000-6405		12.52	Office supplies 01Q10501	Office & Computer Supplies
01-252-000-0000-6405		5.36	office supplies 01Q10502	Office & Computer Supplies
4233 S & T Office Products Inc		22.70	3 Transactions	
12564 Shopko Hometown Pharmacy #735 01-252-000-0000-6262		20.39	INMATE MEDICATION 60349	Medical Expenses & Supplies - Inmates
12564 Shopko Hometown Pharmacy #735		20.39	1 Transactions	
4681 Streichers 01-252-000-0000-6410		21.41	Nameplates-Benz, Crowther 11084020	Clothing Allowance
4681 Streichers		21.41	1 Transactions	
4761 Sysco Minnesota Inc 01-252-000-0000-6418		2,242.62	Groceries 404031480	Groceries
01-252-000-0000-6418		2,484.19	Groceries 404101465	Groceries
4761 Sysco Minnesota Inc		4,726.81	2 Transactions	
11608 Thrifty White Pharmacy-Mcgregor 01-252-000-0000-6262		927.77	March 52914536063080	Medical Expenses & Supplies - Inmates
11608 Thrifty White Pharmacy-Mcgregor		927.77	1 Transactions	
6097 Verizon Wireless 01-252-000-0000-6250		26.02	CELL PHONE BILL-SCOLLARD 786663881	Telephone

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
6097	Verizon Wireless		26.02		1 Transactions	
252	DEPT Total:		13,407.29	Corrections	28 Vendors	37 Transactions
253	DEPT			Aitkin Co Community Corrections		
88879	Central Mn Community Corrections-DT 01-253-000-0000-6823		10,724.08	May Appropriation		County Allocation
88879	Central Mn Community Corrections-DT		10,724.08		1 Transactions	
10185	Centurylink Communications Inc 01-253-000-0000-6250		1.66	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		1.66		1 Transactions	
7525	Hometown Bldg Supply 01-253-000-0000-6405		7.46-	apply credit		Operating Supplies
	01-253-000-0000-6405		68.19	Lumber for STS	49177	Operating Supplies
	01-253-000-0000-6405		4.39-	remove sales tax-49177	49177	Operating Supplies
7525	Hometown Bldg Supply		56.34		3 Transactions	
2340	Hyytinen Hardware Hank 01-253-000-0000-6405		46.96	Ax wedge, maul, gloves	1166118	Operating Supplies
	01-253-000-0000-6405		29.85	Ratchet tie down, bolt	1166445	Operating Supplies
	01-253-000-0000-6405		4.02	Nuts, washers	1166485	Operating Supplies
	01-253-000-0000-6405		41.36	Ax/maul handles	1168144	Operating Supplies
	01-253-000-0000-6405		81.97	Boots	1168147	Operating Supplies
	01-253-000-0000-6405		54.48	Hookaroon	1168149	Operating Supplies
	01-253-000-0000-6405		32.26	Sanding sheets, broom	1168150	Operating Supplies
	01-253-000-0000-6405		20.99	Shop supplies	1168447	Operating Supplies
	01-253-000-0000-6302		15.98	Wiper blades	1169340	Car Maintenance
2340	Hyytinen Hardware Hank		327.87		9 Transactions	
10567	Lake Country Auto Center Of Aitkin 01-253-000-0000-6302		37.50	ALTER STS VAN DOOR	16948	Car Maintenance
10567	Lake Country Auto Center Of Aitkin		37.50		1 Transactions	
6072	North Homes - Treatment Foster Care 01-253-000-0000-6204		1,073.75	Secure March	13229	Juvenile Detention
6072	North Homes - Treatment Foster Care		1,073.75		1 Transactions	

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
10327	Northwestern MN Juvenile Ctr-Evaluation 01-253-000-0000-6204		995.00	secure detention 03/22/2014 03/26/2014	103-89-1	Juvenile Detention
10327	Northwestern MN Juvenile Ctr-Evaluation		995.00		1 Transactions	
253	DEPT Total:		13,216.20	Aitkin Co Community Corrections	7 Vendors	17 Transactions
255	DEPT			General Crime Victim Grant		
10185	Centurylink Communications Inc 01-255-000-0000-6250		2.45	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		2.45		1 Transactions	
255	DEPT Total:		2.45	General Crime Victim Grant	1 Vendors	1 Transactions
257	DEPT			Sobriety Court		
88879	Central Mn Community Corrections-DT 01-257-000-0000-6330		395.68	1st Quarter mileage		Transportation/Travel/Parking
88879	Central Mn Community Corrections-DT		395.68		1 Transactions	
13056	McKenzie/Jill 01-257-022-0000-6406		53.55	reimb.for candy for drawing	3/30/14	Sobriety Crt Expenses
13056	McKenzie/Jill		53.55		1 Transactions	
257	DEPT Total:		449.23	Sobriety Court	2 Vendors	2 Transactions
280	DEPT			Emergency Management		
361	Arrowhead EMS Association 01-280-003-0000-6241		75.00	Under one roof Reg./K.White	May 14-15	Registration Fee
361	Arrowhead EMS Association		75.00		1 Transactions	
280	DEPT Total:		75.00	Emergency Management	1 Vendors	1 Transactions
390	DEPT			Environmental Health (FBL)		
10185	Centurylink Communications Inc 01-390-000-0000-6250		6.26	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		6.26		1 Transactions	
4641	Holiday Credit Office					

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Accr	Rpt Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
	01-390-000-0000-6511		124.44	MARCH GAS	1400000135321	Gas And Oil
4641	Holiday Credit Office		124.44	1 Transactions		
10313	Lenovo (United States) Inc. 01-390-000-0000-6625		219.99	THINKPAD PRO DOCK-LEITLINGER	6222746290	Office Equipment & Other Equipment
10313	Lenovo (United States) Inc.		219.99	1 Transactions		
390	DEPT Total:		350.69	Environmental Health (FBL)	3 Vendors	3 Transactions
391	DEPT			Solid Waste		
5398	CDW Government, Inc 01-391-000-0000-6625		223.19	Viewsonic 24" monitor	KX76619	Office Equipment
5398	CDW Government, Inc		223.19	1 Transactions		
10185	Centurylink Communications Inc 01-391-000-0000-6250		3.96	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		3.96	1 Transactions		
88880	Datacomm Computers & Networks Inc 01-391-000-0000-6625		905.00	computer system	7333	Office Equipment
88880	Datacomm Computers & Networks Inc		905.00	1 Transactions		
1754	Garrison Disposal Company, Inc 01-391-060-0000-6360		4,326.98	March recycling charges		Recycling Contract
1754	Garrison Disposal Company, Inc		4,326.98	1 Transactions		
2763	J & H Transfer Station-Lakes Sanitary 01-391-060-0000-6360		498.15	March recycling		Recycling Contract
2763	J & H Transfer Station-Lakes Sanitary		498.15	1 Transactions		
6097	Verizon Wireless 01-391-000-0000-6250		48.44	Monthly cellular - Neff	28625229900001	Telephone
6097	Verizon Wireless		48.44	1 Transactions		
391	DEPT Total:		6,005.72	Solid Waste	6 Vendors	6 Transactions
392	DEPT			Water Wells		
405	A.W. Research Laboratories, Inc.					

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor	Name	Rpt	Warrant Description	Invoice #	Account/Formula Description	
No.	Account/Formula	Accr	Amount	Service Dates	On Behalf of Name	
				Paid On Bhf #		
	01-392-000-0000-6231		40.00	Water tests	10486	Services, Labor, Contracts
	01-392-000-0000-6231		40.00	Water tests	10487	Services, Labor, Contracts
	01-392-000-0000-6231		40.00	Water tests	10501	Services, Labor, Contracts
405	A.W. Research Laboratories, Inc.		120.00	3 Transactions		
1685	Fisher Scientific					
	01-392-000-0000-6405		83.85	Silver Sulfate 98%	5271006	Office & Film Supplies
1685	Fisher Scientific		83.85	1 Transactions		
392	DEPT Total:		203.85	Water Wells	2 Vendors	4 Transactions
601	DEPT			Extension		
10850	Carlson/David					
	01-601-000-0000-6350		35.00	Extension Committee Mtg	4/7/14	Per Diem
	01-601-000-0000-6360		22.40	Extension Committee mileage	40@.56	Extension Comm Expenses (Not Per Diem)
10850	Carlson/David		57.40	2 Transactions		
10185	Centurylink Communications Inc					
	01-601-000-0000-6250		0.49	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		0.49	1 Transactions		
9440	Dotzler/Sharon A					
	01-601-000-0000-6350		35.00	Extension Meeting	4/7/14	Per Diem
9440	Dotzler/Sharon A		35.00	1 Transactions		
91345	Elvecrog/Roberta C					
	01-601-000-0000-6350		35.00	Extension Meeting	4/7/14	Per Diem
91345	Elvecrog/Roberta C		35.00	1 Transactions		
12045	Janzen/Joy					
	01-601-000-0000-6360		10.08	Extension Committee Mileage	18@.56	Extension Comm Expenses (Not Per Diem)
	01-601-000-0000-6350		35.00	Extension Mwwting	4/7/14	Per Diem
12045	Janzen/Joy		45.08	2 Transactions		
10313	Lenovo (United States) Inc.					
	01-601-000-0000-6405		249.99	THINKPAD PRO DOCK-BETH	6222746295	Office Supplies
10313	Lenovo (United States) Inc.		249.99	1 Transactions		
90853	Mickelson/Bonnie H					

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 1 General Fund

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
	01-601-000-0000-6350		35.00	Extension Meeting	4/7/14	Per Diem
90853	Mickelson/Bonnie H		35.00	1 Transactions		
601	DEPT Total:		457.96	Extension	7 Vendors	9 Transactions
700	DEPT			Promotion,AEOA Tran,Airport,RC&D,To		
13049	ML CORPORATE VENTURES 01-700-909-0000-6800		10.00	display booth at sportsmans sh	4/25-26	Tourism Miscellaneous
13049	ML CORPORATE VENTURES		10.00	1 Transactions		
13052	TRMG LLP 01-700-909-0000-6800		100.00	display adv.in NW sportshow	NW414	Tourism Miscellaneous
13052	TRMG LLP		100.00	1 Transactions		
700	DEPT Total:		110.00	Promotion,AEOA Tran,Airport,RC&D,T	2 Vendors	2 Transactions
711	DEPT			Economic Development		
10185	Centurylink Communications Inc 01-711-000-0000-6250		2.26	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		2.26	1 Transactions		
4641	Holiday Credit Office 01-711-000-0000-6511		59.67	March gas	1400000135895	Gas And Oil
4641	Holiday Credit Office		59.67	1 Transactions		
86235	The Office Shop Inc 01-711-000-0000-6405		7.58	Office supplies	271497-0	Office & Computer Supplies
86235	The Office Shop Inc		7.58	1 Transactions		
711	DEPT Total:		69.51	Economic Development	3 Vendors	3 Transactions
1	Fund Total:		131,083.17	General Fund		228 Transactions

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 3 Road & Bridge

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
301	DEPT			R&B Administration		
86222	Aitkin Independent Age 03-301-000-0000-6241		77.22	CALCIUM CHLORIDE AD 030714	1480	Fees/Prof/Misc
86222	Aitkin Independent Age		77.22	1 Transactions		
10185	Centurylink Communications Inc 03-301-000-0000-6250		22.55	MARCH LONG DISTANCE	321146217	Telephone
10185	Centurylink Communications Inc		22.55	1 Transactions		
11411	Charter Business 03-301-000-0000-6250		140.25	PHONE - HIGHWAY OFFICE 041414		Telephone
11411	Charter Business		140.25	1 Transactions		
10855	Culligan 03-301-000-0000-6400		10.50	RENTAL 033114		Supplies And Materials
10855	Culligan		10.50	1 Transactions		
9373	ESRI 03-301-000-0000-6241		242.00	ARC PAD/LICENSE 041014	92798279	Fees/Prof/Misc
9373	ESRI		242.00	1 Transactions		
11406	Innovative Office Solutions 03-301-000-0000-6400		139.21	MATS 041014	523078	Supplies And Materials
11406	Innovative Office Solutions		139.21	1 Transactions		
3963	Quale/Michael J 03-301-000-0000-6241		134.50	LICENSE 040914		Fees/Prof/Misc
3963	Quale/Michael J		134.50	1 Transactions		
10431	Verizon Business 03-301-000-0000-6250		19.41	HIGHWAY OFFICE 033114	42279481814	Telephone
10431	Verizon Business		19.41	1 Transactions		
6097	Verizon Wireless 03-301-000-0000-6250		265.16	CELL PHONE USAGE 041014	97227820408	Telephone
6097	Verizon Wireless		265.16	1 Transactions		
301	DEPT Total:		1,050.80	R&B Administration	9 Vendors	9 Transactions

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Accr	Rpt Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
302	DEPT			R&B Engineering/Construction		
505	Ben Meadows Co Inc 03-302-000-0000-6449		297.56	WHEEL 041414	102264659	Rd/Br Engr. Supplies
505	Ben Meadows Co Inc		297.56	1 Transactions		
3703	Frontier Precision, Inc 03-302-000-0000-6449		25.58	PROTECTORS 040314	124591	Rd/Br Engr. Supplies
3703	Frontier Precision, Inc		25.58	1 Transactions		
2340	Hyytinen Hardware Hank 03-302-000-0000-6449		6.38	CAP 033114	1167604	Rd/Br Engr. Supplies
2340	Hyytinen Hardware Hank		6.38	1 Transactions		
302	DEPT Total:		329.52	R&B Engineering/Construction	3 Vendors	3 Transactions
303	DEPT			R&B Highway Maintenance		
195	Aitkin Tire Shop 03-303-000-0000-6590		160.00	TIRE CHANGES 031114	53109	Repair & Maintenance Supplies
	03-303-000-0000-6590		24.00	O RINGS 031114	53109	Repair & Maintenance Supplies
195	Aitkin Tire Shop		184.00	2 Transactions		
8411	American Welding & Gas, Inc. 03-303-000-0000-6523		102.04	ACETYLENE 041514	2695863	Misc Bldg & Shop Supplies
8411	American Welding & Gas, Inc.		102.04	1 Transactions		
8239	Ameripride Linen & Apparel Services 03-303-000-0000-6523		82.09	SHOP LAUNDRY 040814	2200495703	Misc Bldg & Shop Supplies
	03-303-000-0000-6523		48.68	SHOP LAUNDRY 040814	2200498316	Misc Bldg & Shop Supplies
8239	Ameripride Linen & Apparel Services		130.77	2 Transactions		
12106	Antoine Electric 03-303-000-0000-6298		107.93	BAY AREA 040614	13501	Shop Maintenance
12106	Antoine Electric		107.93	1 Transactions		
86467	Auto Value Aitkin 03-303-000-0000-6590		104.78	FILTERS 041014	40044022	Repair & Maintenance Supplies
86467	Auto Value Aitkin		104.78	1 Transactions		
12445	Brandl Chevrolet, Buick, GM					

Aitkin County

Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES



Vendor Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No. Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
03-303-000-0000-6590		BLADE 040414	4080	Repair & Maintenance Supplies
03-303-000-0000-6590		BLADE 040414	4080	Repair & Maintenance Supplies
12445 Brandl Chevrolet, Buick, GM				2 Transactions
8265 Centurylink				
03-303-000-0000-6250		PHONE HILL CITY 040914	301226554	Telephone
8265 Centurylink				1 Transactions
1200 Cummings Oil, Inc				
03-303-000-0000-6590		TRUCK NOZZLE 030614	31606	Repair & Maintenance Supplies
03-303-000-0000-6513		JACOBSON 032014	32737	Motor Fuel & Lubricants
03-303-000-0000-6513		PALISADE 032014	32737	Motor Fuel & Lubricants
1200 Cummings Oil, Inc				3 Transactions
1570 Erickson Oil Products Inc				
03-303-000-0000-6513		DISCOUNT 031314		Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 031314	368258	Motor Fuel & Lubricants
1570 Erickson Oil Products Inc				2 Transactions
7060 Federated Co-Ops Inc.				
03-303-000-0000-6297		2012 TANK LEASE 032714		Shop Fuel
03-303-000-0000-6297		2013 TANK LEASE 032714		Shop Fuel
03-303-000-0000-6297		JACOBSON 032714	12511	Shop Fuel
7060 Federated Co-Ops Inc.				3 Transactions
1754 Garrison Disposal Company, Inc				
03-303-000-0000-6254		MCGREGOR SHOP 030714	8180012	Utilities
03-303-000-0000-6254		GARBAGE PICK UP 030714	9975	Utilities
1754 Garrison Disposal Company, Inc				2 Transactions
1959 H & L Mesabi Inc				
03-303-000-0000-6523		BLADES 040814	90709	Misc Bldg & Shop Supplies
1959 H & L Mesabi Inc				1 Transactions
4641 Holiday Credit Office				
03-303-000-0000-6513		DISCOUNT 040114		Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 040114	153124079	Motor Fuel & Lubricants
4641 Holiday Credit Office				2 Transactions

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Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES



Vendor Name	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>
No. Account/Formula	Accr	Amount	Service Dates	On Behalf of Name
			Paid On Bhf #	
2340 Hyytinen Hardware Hank				
03-303-000-0000-6523		11.18	BUSHING 033114	1166282 Misc Bldg & Shop Supplies
03-303-000-0000-6523		35.88	ANTIFREEZE 033114	1166805 Misc Bldg & Shop Supplies
03-303-000-0000-6516		18.99	BOLTS 033114	1167347 Signs & Posts
03-303-000-0000-6590		5.00	COUPLER 033114	1167569 Repair & Maintenance Supplies
03-303-000-0000-6516		40.98	WIRE 033114	1167849 Signs & Posts
03-303-000-0000-6516		29.90	BOLTS 033114	1168210 Signs & Posts
03-303-000-0000-6516		17.98	BRUSH 033114	1168269 Signs & Posts
03-303-000-0000-6523		14.90	CLAMP 033114	1168271 Misc Bldg & Shop Supplies
03-303-000-0000-6523		13.59	BRUSH 033114	1168436 Misc Bldg & Shop Supplies
03-303-000-0000-6523		29.99	EARMUFF 033114	1168452 Misc Bldg & Shop Supplies
03-303-000-0000-6523		22.75	STAPLES 033114	1168906 Misc Bldg & Shop Supplies
03-303-000-0000-6516		35.99	PAINT 033114	1168993 Signs & Posts
03-303-000-0000-6516		3.98	BLADES 033114	1169119 Signs & Posts
03-303-000-0000-6516		17.47	SANDPAPER 033114	1169279 Signs & Posts
03-303-000-0000-6523		107.85	BULBS 033114	1169680 Misc Bldg & Shop Supplies
2340 Hyytinen Hardware Hank		406.43	15 Transactions	
7705 Isle Automotive Corp				
03-303-000-0000-6590		102.24	HY 030814	119043664 Repair & Maintenance Supplies
7705 Isle Automotive Corp		102.24	1 Transactions	
2763 J & H Transfer Station-Lakes Sanitary				
03-303-000-0000-6254		93.89	AITKIN 040114	76537 Utilities
03-303-000-0000-6254		57.65	PALISADE 040114	76538 Utilities
2763 J & H Transfer Station-Lakes Sanitary		151.54	2 Transactions	
8101 Kris Engineering Inc				
03-303-000-0000-6590		1,209.33	BEVEL 040814	23630 Repair & Maintenance Supplies
03-303-000-0000-6590		1,209.33	BEVEL 040814	23630 Repair & Maintenance Supplies
8101 Kris Engineering Inc		2,418.66	2 Transactions	
91187 Lake Country Power				
03-303-000-0000-6254		67.60	JACOBSON 040714	1400073000 Utilities
03-303-000-0000-6254		655.73	SWATARA 040714	140946401 Utilities
91187 Lake Country Power		723.33	2 Transactions	
2831 Little Falls Machine Inc				
03-303-000-0000-6590		93.97	BOLTS 040314	53947 Repair & Maintenance Supplies

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Vendor Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No. Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
03-303-000-0000-6590		BOLTS 040314	53947	Repair & Maintenance Supplies
03-303-000-0000-6590		CHAIN 040314	53947	Repair & Maintenance Supplies
03-303-000-0000-6590		WHEEL 040314	53947	Repair & Maintenance Supplies
2831 Little Falls Machine Inc				4 Transactions
2831 Little Falls Machine Inc				
2991 Malmo Market				
03-303-000-0000-6513		GASOLINE 040914	30647	Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 040914	34784	Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 040914	37189	Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 040914	38411	Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 040914	38602	Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 040914	38837	Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 040914	39403	Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 040914	39452	Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 040914	39853	Motor Fuel & Lubricants
2991 Malmo Market				9 Transactions
2991 Malmo Market				
10824 Maney International Inc				
03-303-000-0000-6590		GLASS 040214	661267	Repair & Maintenance Supplies
03-303-000-0000-6590		GLASS 040214	661267	Repair & Maintenance Supplies
03-303-000-0000-6590		KEY 040214	662121	Repair & Maintenance Supplies
03-303-000-0000-6590		FILTERS 040214	662121	Repair & Maintenance Supplies
10824 Maney International Inc				4 Transactions
10824 Maney International Inc				
3100 McGregor Oil				
03-303-000-0000-6513		GASOLINE 033114	50852	Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 033114	50853	Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 033114	50854	Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 033114	50855	Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 033114	50856	Motor Fuel & Lubricants
03-303-000-0000-6513		GASOLINE 033114	50857	Motor Fuel & Lubricants
3100 McGregor Oil				6 Transactions
3100 McGregor Oil				
5917 Mike's Bobcat Service				
03-303-000-0000-6825		PLOWING 033114		Maintenance Agreements
5917 Mike's Bobcat Service				1 Transactions
5917 Mike's Bobcat Service				
3160 Mille Lacs Energy Coop-Albert Lea				
03-303-000-0000-6254		ELECTRICITY - PALISADE 041414	185202601	Utilities

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Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

<u>Vendor Name</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>
<u>No.</u> <u>Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u> <u>On Behalf of Name</u>
03-303-000-0000-6254		55.05	ELECTRICITY 041414	192301001 Utilities
03-303-000-0000-6254		25.00	ELECTRICITY - GUN LAKE 041414	275602903 Utilities
03-303-000-0000-6254		284.01	ELECTRICITY - MCGREGOR 041414	295300301 Utilities
03-303-000-0000-6254		1,768.00	ELECTRICITY - AITKIN 041414	335200702 Utilities
03-303-000-0000-6254		56.88	ELECTRICITY 041414	396202201 Utilities
03-303-000-0000-6254		20.96	ELECTRICITY 041414	400600001 Utilities
03-303-000-0000-6254		58.30	ELECTRICITY 041414	545110401 Utilities
3160 Mille Lacs Energy Coop-Albert Lea		3,372.26	8 Transactions	
9692 Minnesota Energy Resources Corporation				
03-303-000-0000-6297		1,246.22	NATURAL GAS - AITKIN SH 040914	42552174 Shop Fuel
9692 Minnesota Energy Resources Corporation		1,246.22	1 Transactions	
8618 North American Salt Co				
03-303-000-0000-6518		7,009.77	DEICING SALT 040114	71152881 De-Icing Salt
8618 North American Salt Co		7,009.77	1 Transactions	
10701 Northern Safety Technology Inc				
03-303-000-0000-6590		563.30	RESPONDER 040414	35919 Repair & Maintenance Supplies
10701 Northern Safety Technology Inc		563.30	1 Transactions	
10720 Nuss Truck & Equipment				
03-303-000-0000-6590		66.89	SPRING 033114	3120711 Repair & Maintenance Supplies
10720 Nuss Truck & Equipment		66.89	1 Transactions	
8777 Overhead Door Co				
03-303-000-0000-6298		180.00	SERVICE 041114	25681 Shop Maintenance
8777 Overhead Door Co		180.00	1 Transactions	
3760 Palisade Cooperative Oil Assoc				
03-303-000-0000-6513		49.34	GASOLINE 033114	277982 Motor Fuel & Lubricants
03-303-000-0000-6513		81.60	GASOLINE 033114	278050 Motor Fuel & Lubricants
03-303-000-0000-6513		54.05	GASOLINE 033114	278439 Motor Fuel & Lubricants
03-303-000-0000-6513		50.25	GASOLINE 033114	278930 Motor Fuel & Lubricants
3760 Palisade Cooperative Oil Assoc		235.24	4 Transactions	
4711 Sunnys Citgo				
03-303-000-0000-6513		82.03	GASOLINE 041614	29575 Motor Fuel & Lubricants
03-303-000-0000-6513		91.97	GASOLINE 041614	29576 Motor Fuel & Lubricants

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Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

3 Road & Bridge

Vendor No.	Name	Account/Formula	Rpt Accr	Amount	Warrant Description	Service Dates	Invoice #	Paid On Bhf #	Account/Formula Description	On Behalf of Name
		03-303-000-0000-6513		58.16	GASOLINE 041614		29577		Motor Fuel & Lubricants	
		03-303-000-0000-6513		64.95	GASOLINE 041614		29578		Motor Fuel & Lubricants	
4711	Sunnys Citgo			297.11		4 Transactions				
90805	Temco									
		03-303-000-0000-6590		27.77	ROUND 040214		17050		Repair & Maintenance Supplies	
90805	Temco			27.77		1 Transactions				
5295	Ziegler Inc									
		03-303-000-0000-6590		603.78	PARTS 041414		190010563		Repair & Maintenance Supplies	
		03-303-000-0000-6590		960.11	LABOR 041414		190010563		Repair & Maintenance Supplies	
		03-303-000-0000-6590		78.77	LATCH 041414		190035925		Repair & Maintenance Supplies	
		03-303-000-0000-6590		3,765.50	PARTS 041414		190036120		Repair & Maintenance Supplies	
		03-303-000-0000-6590		353.08	FILTERS 041414		190036154		Repair & Maintenance Supplies	
5295	Ziegler Inc			5,761.24		5 Transactions				
303	DEPT Total:			32,564.61	R&B Highway Maintenance		33 Vendors		96 Transactions	
307	DEPT				R&B Capital Infrastructure					
87801	Aitkin Co Treasurer-Hwy Dept									
		03-307-000-0000-6362		136.00	2014 PROPERTY TAXES 041014				Right Of Way	
87801	Aitkin Co Treasurer-Hwy Dept			136.00		1 Transactions				
13048	Zila/Aaron									
		03-307-000-0000-6362		250.00	LAND RIGHT OF WAY 040814		PARCEL 7		Right Of Way	
13048	Zila/Aaron			250.00		1 Transactions				
307	DEPT Total:			386.00	R&B Capital Infrastructure		2 Vendors		2 Transactions	
3	Fund Total:			34,330.93	Road & Bridge				110 Transactions	

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4 Special Revenue(Unorg R&

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Vendor	Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
422	DEPT		Unorganized Fire		
	1025 City Of McGrath-Treasurer				
	04-422-000-0000-6801		2014 Fire protection 45-24		Appropriations
	1025 City Of McGrath-Treasurer			1 Transactions	
422	DEPT Total:		434.19	Unorganized Fire	1 Vendors 1 Transactions
4	Fund Total:		434.19	Special Revenue(Unorg R&B,Fir	1 Transactions

Aitkin County



Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
400	DEPT			Public Health Department		
10185	Centurylink Communications Inc					
	05-400-440-0410-6250		1.30	MARCH.LD-ACCOUNTING	320146217	Telephone
	05-400-440-0410-6250		3.22	MARCH LD-HHS	320146217	Telephone
	05-400-440-0410-6250		41.74	MARCH LD-PUBLIC HEALTH	320146217	Telephone
10185	Centurylink Communications Inc		46.26	3 Transactions		
11889	Honeywell International Inc.					
	05-400-440-0410-6405		138.93	ACTUATORS	526189	Supplies-Computer/Office/Meeting
11889	Honeywell International Inc.		138.93	1 Transactions		
400	DEPT Total:		185.19	Public Health Department	2 Vendors	4 Transactions
420	DEPT			Income Maintenance		
10185	Centurylink Communications Inc					
	05-420-600-4800-6250		3.40	MARCH.LD-ACCOUNTING	320146217	Telephone
	05-420-600-4800-6250		8.35	MARCH LD-HHS	320146217	Telephone
	05-420-600-4800-6250		97.84	MARCH LD-INCOME MAINTENANCE	320146217	Telephone
	05-420-640-4800-6250		41.74	MARCH LD-CHILD SUPPORT	320146217	Telephone
10185	Centurylink Communications Inc		151.33	4 Transactions		
11889	Honeywell International Inc.					
	05-420-600-4800-6405		361.20	ACTUATORS	526189	Supplies-Computer/Office/Meeting
11889	Honeywell International Inc.		361.20	1 Transactions		
420	DEPT Total:		512.53	Income Maintenance	2 Vendors	5 Transactions
430	DEPT			Social Services		
10185	Centurylink Communications Inc					
	05-430-700-4800-6250		4.01	MARCH.LD-ACCOUNTING	320146217	Telephone
	05-430-700-4800-6250		9.85	MARCH LD-HHS	320146217	Telephone
	05-430-700-4800-6250		220.35	MARCH LD-SOCIAL SERVICES	320146217	Telephone
10185	Centurylink Communications Inc		234.21	3 Transactions		
11889	Honeywell International Inc.					
	05-430-700-4800-6405		426.03	ACTUATORS	526189	Supplies-Computer/Office/Meeting
11889	Honeywell International Inc.		426.03	1 Transactions		

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5 Health & Human Services

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Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

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Vendor	Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
10313	Lenovo (United States) Inc. 05-430-700-4800-6625		THINKPAD PRO DOCK-BECCA		Office & Other Equipment
10313	Lenovo (United States) Inc.		1 Transactions		
430	DEPT Total:		Social Services	3 Vendors	5 Transactions
5	Fund Total:		Health & Human Services		14 Transactions

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Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

	<u>Vendor Name</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>	
	<u>No. Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
0	DEPT			Undesignated		
	4580 Mn Dept Of Finance					
	09-000-000-0000-2030		555.00	March marriage license fee		State Fees, Assessments & Surcharges
	4580 Mn Dept Of Finance		555.00	1 Transactions		
0	DEPT Total:		555.00	Undesignated	1 Vendors	1 Transactions
9	Fund Total:		555.00	State		1 Transactions

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Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
900	DEPT			Timber Permit Bonds		
11909	J & A Logging 10-900-000-0000-2300		415.80	Bond Refund Rec 1826	13367	Timber Permit Bonds
11909	J & A Logging		415.80	1 Transactions		
2694	Kromy/Ted 10-900-000-0000-2300		823.00	Bond Refund Rec 1798	12926	Timber Permit Bonds
	10-900-000-0000-2300		445.40	Bond Refund Rec 1788	12984	Timber Permit Bonds
	10-900-000-0000-2300		1,403.00	Bond Refund Rec 1687	13044	Timber Permit Bonds
2694	Kromy/Ted		2,671.40	3 Transactions		
3937	Potlatch Corp 10-900-000-0000-2300		287.10	Bond refund Rec 1808	13009	Timber Permit Bonds
	10-900-000-0000-2300		946.90	Bond refund Rec 1685	13366	Timber Permit Bonds
3937	Potlatch Corp		1,234.00	2 Transactions		
5938	Rieger Logging 10-900-000-0000-2300		1,737.32	Bond refund Rec 1766	13186	Timber Permit Bonds
5938	Rieger Logging		1,737.32	1 Transactions		
900	DEPT Total:		6,058.52	Timber Permit Bonds	4 Vendors	7 Transactions
921	DEPT			Co. Development		
10185	Centurylink Communications Inc 10-921-000-0000-6250		0.83	MARCH LD-GIS	320146217	Telephone
	10-921-000-0000-6250		1.36	MARCH LD-SURVEYOR	320146217	Telephone
10185	Centurylink Communications Inc		2.19	2 Transactions		
8612	Veenker/Thomas H 10-921-000-0000-6240		50.00	MACS DUES		Dues
	10-921-000-0000-6356		134.50	SURVEY LICENSE RENEWAL		License Fees
8612	Veenker/Thomas H		184.50	2 Transactions		
921	DEPT Total:		186.69	Co. Development	2 Vendors	4 Transactions
923	DEPT			Forfeited Tax Sales		
783	Canon Financial Services, Inc 10-923-000-0000-6231		390.94	Copier contract 022	13676150	Services, Labor, Contracts

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Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
783	Canon Financial Services, Inc		390.94		1 Transactions	
10185	Centurylink Communications Inc 10-923-000-0000-6250		3.77	MARCH LONG DISTANCE	320146217	Telephone
10185	Centurylink Communications Inc		3.77		1 Transactions	
11909	J & A Logging 10-923-000-0000-6820		267.16	Overpaid refund	13367	Refunds & Reimbursements
11909	J & A Logging		267.16		1 Transactions	
3937	Potlatch Corp 10-923-000-0000-6820		784.12	Overappraised refund	13009	Refunds & Reimbursements
3937	Potlatch Corp		784.12		1 Transactions	
11686	Precision Thinning 10-923-000-0000-6820		145.89	Overappraised refund	13524	Refunds & Reimbursements
	10-923-000-0000-6820		424.10	Overappraised refund	13536	Refunds & Reimbursements
11686	Precision Thinning		569.99		2 Transactions	
5938	Rieger Logging 10-923-000-0000-6820		4,863.85	Overappraised refund	13186	Refunds & Reimbursements
5938	Rieger Logging		4,863.85		1 Transactions	
4233	S & T Office Products Inc 10-923-000-0000-6405		20.46	Labels	01QH7248	Office Supplies
4233	S & T Office Products Inc		20.46		1 Transactions	
86235	The Office Shop Inc 10-923-000-0000-6405		20.59	PHOTO PAPER	271598	Office Supplies
	10-923-000-0000-6405		4.74	POSTER BOARD	271604	Office Supplies
86235	The Office Shop Inc		25.33		2 Transactions	
923	DEPT Total:		6,925.62	Forfeited Tax Sales	8 Vendors	10 Transactions
926	DEPT			Law Library		
5173	West Payment Center 10-926-000-0000-6408		1,055.92	March information charges	829294217	Law Books
5173	West Payment Center		1,055.92		1 Transactions	

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<u>Vendor Name</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>	
<u>No. Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
926 DEPT Total:		1,055.92	Law Library	1 Vendors	1 Transactions
10 Fund Total:		14,226.75	Trust		22 Transactions

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Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
924	DEPT			Forest Resource		
12526	Bixby/James 11-924-000-0000-6350 11-924-000-0000-6330		35.00 35.28	FAC per diem FAC Mileage	4/15/14 63@.56	Per Diem Transportation & Travel
12526	Bixby/James		70.28	2 Transactions		
2270	Hoppe/Russell Peter 11-924-000-0000-6330 11-924-000-0000-6330		35.00 33.60	FAC MEETING FAC MILEAGE	4/15/14 60@.56	Transportation & Travel Transportation & Travel
2270	Hoppe/Russell Peter		68.60	2 Transactions		
2340	Hyytinen Hardware Hank 11-924-000-0000-6406		9.72	Bolts for survey signs	1168135	Field Supplies
2340	Hyytinen Hardware Hank		9.72	1 Transactions		
10890	Insley/Kevin 11-924-000-0000-6350 11-924-000-0000-6330		35.00 22.40	FAC MEETING FAC MILEAGE	4/15/14 40@.56	Per Diem Transportation & Travel
10890	Insley/Kevin		57.40	2 Transactions		
5784	Lake/Robert 11-924-000-0000-6330 11-924-000-0000-6350		15.68 35.00	FAC MILEAGE FAC MEETING	28@.56 4/15/14	Transportation & Travel Per Diem
5784	Lake/Robert		50.68	2 Transactions		
9036	Neary/William F 11-924-000-0000-6350 11-924-000-0000-6330		35.00 35.84	FAC MEETING FAC MILEAGE	4/15/14 64@.56	Per Diem Transportation & Travel
9036	Neary/William F		70.84	2 Transactions		
13015	Palmer/Bob 11-924-000-0000-6330 11-924-000-0000-6350		57.12 35.00	FAC MILEAGE FAC MEETING	102@.56 4/15/14	Transportation & Travel Per Diem
13015	Palmer/Bob		92.12	2 Transactions		
13016	Pedersen/Steven 11-924-000-0000-6350 11-924-000-0000-6330		35.00 44.80	FAC MEETING FAC MILEAGE	4/15/14 80@.56	Per Diem Transportation & Travel

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No. Account/Formula	Accr	Amount	Service Dates	On Behalf of Name
			Paid On Bhf #	
13016 Pedersen/Steven		79.80	2 Transactions	
12111 Schmidt/William A.				
11-924-000-0000-6330		21.28	FAC MILEAGE	38@.56 Transportation & Travel
11-924-000-0000-6350		35.00	FAC MEETING	4/15/14 Per Diem
12111 Schmidt/William A.		56.28	2 Transactions	
10906 Shipp/Dale				
11-924-000-0000-6330		17.92	FAC MILEAGE	32@.56 Transportation & Travel
11-924-000-0000-6350		35.00	FAC MEETING	4/15/14 Per Diem
10906 Shipp/Dale		52.92	2 Transactions	
10017 Tveit/Galen				
11-924-000-0000-6330		17.92	FAC MILEAGE	32@.56 Transportation & Travel
11-924-000-0000-6350		35.00	FAC MEETING	4/15/14 Per Diem
10017 Tveit/Galen		52.92	2 Transactions	
924 DEPT Total:		661.56	Forest Resource	11 Vendors 21 Transactions
925 DEPT			Reforestation	
2340 Hyytinen Hardware Hank				
11-925-000-0000-6406		9.99	Locks - forestry	1168012 Field Supplies
11-925-000-0000-6406		155.76	Locks for lock boxes	1168864 Field Supplies
2340 Hyytinen Hardware Hank		165.75	2 Transactions	
9354 Kangas Enterprises, Inc				
11-925-000-0000-6590		1,254.00	Unplug Soo culvert by Lawler	280 Repair & Maintenance Supplies
9354 Kangas Enterprises, Inc		1,254.00	1 Transactions	
6128 Tire Barn				
11-925-000-0000-6590		67.50	Install trailer harness 536	27048 Repair & Maintenance Supplies
6128 Tire Barn		67.50	1 Transactions	
925 DEPT Total:		1,487.25	Reforestation	3 Vendors 4 Transactions
11 Fund Total:		2,148.81	Forest Development	25 Transactions

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
521	DEPT			LLCC Administration		
85003	Aitkin County DAC 19-521-000-0000-6231		390.00	March Cleaning Service		Services, Labor, Contracts
85003	Aitkin County DAC		390.00		1 Transactions	
246	Brothers Fire Protection 19-521-000-0000-6231		465.00	adjust gate valve tamper	92746	Services, Labor, Contracts
246	Brothers Fire Protection		465.00		1 Transactions	
5664	Carlson/Pam 19-521-000-0000-6230		10.00	reimb. for license application	sportshow	Printing, Publ & Adv Promotion
5664	Carlson/Pam		10.00		1 Transactions	
1211	Croatt Enterprises Inc 19-521-000-0000-6254		1,040.00	13 Cord Firewood	13@80.00	Utilities
1211	Croatt Enterprises Inc		1,040.00		1 Transactions	
12708	Crow Wing County Fair 19-521-000-0000-6230		200.00	2014 Exhibit Space		Printing, Publ & Adv Promotion
	19-521-000-0000-6230		100.00	security deposit on fair space		Printing, Publ & Adv Promotion
12708	Crow Wing County Fair		300.00		2 Transactions	
2763	J & H Transfer Station-Lakes Sanitary 19-521-000-0000-6255		92.38	GARBAGE SERVICE	76871	Garbage
2763	J & H Transfer Station-Lakes Sanitary		92.38		1 Transactions	
3160	Mille Lacs Energy Coop-Albert Lea 19-521-000-0000-6254		64.00	LLCC Electric	27-13-004-01	Utilities
	19-521-000-0000-6254		1,269.38	LLCC Electric	27-13-005-02	Utilities
	19-521-000-0000-6254		663.26	LLCC Electric	27-13-006-01	Utilities
	19-521-000-0000-6254		515.70	LLCC Electric	27-13-007-03	Utilities
	19-521-000-0000-6254		127.97	LLCC Electric	27-13-008-01	Utilities
	19-521-000-0000-6254		111.75	LLCC Electric	27-13-009-01	Utilities
3160	Mille Lacs Energy Coop-Albert Lea		2,752.06		6 Transactions	
10058	Outdoor News 19-521-000-0000-6230		160.00	DISPLAY ADS	5607	Printing, Publ & Adv Promotion
10058	Outdoor News		160.00		1 Transactions	

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No. Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
521 DEPT Total:		5,209.44 LLCC Administration	8 Vendors	14 Transactions
522 DEPT		LLCC Education		
86235 The Office Shop Inc				
19-522-000-0000-6416		8.07 MARKER BOARD CLEANER	957725	Education Supplies
19-522-000-0000-6416		59.89 LAMINATE	957725-1	Education Supplies
86235 The Office Shop Inc		67.96		2 Transactions
522 DEPT Total:		67.96 LLCC Education	1 Vendors	2 Transactions
523 DEPT		LLCC Food		
5998 Appert's Foodservice				
19-523-000-0000-6418		446.71 Groceries	2094900	Groceries-Students
19-523-000-0000-6420		49.93 Groceries	2094900	Food Service Supplies
5998 Appert's Foodservice		496.64		2 Transactions
1475 Duffney Refrigeration, Inc				
19-523-000-0000-6590		599.00 WALK IN COOLER SERVICE	32822	Repair & Maintenance Supplies
19-523-000-0000-6590		194.00 WALK IN COOLER SERVICE	32823	Repair & Maintenance Supplies
1475 Duffney Refrigeration, Inc		793.00		2 Transactions
5662 McGregor Dairy, Inc				
19-523-000-0000-6418		199.03 GROCERIES	22152	Groceries-Students
5662 McGregor Dairy, Inc		199.03		1 Transactions
4968 Upper Lakes Foods, Inc				
19-523-000-0000-6418		759.76 GROCERIES	310556	Groceries-Students
19-523-000-0000-6418		837.83 GROCERIES	314109	Groceries-Students
4968 Upper Lakes Foods, Inc		1,597.59		2 Transactions
523 DEPT Total:		3,086.26 LLCC Food	4 Vendors	7 Transactions
524 DEPT		LLCC Maintenance		
2340 Hyytinen Hardware Hank				
19-524-000-0000-6302		1.75 LETTERS FOR ATV	1168140	Vehicle Maintenance
2340 Hyytinen Hardware Hank		1.75		1 Transactions
4010 Rasley Oil Company				

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 19 Long Lake Conservation C

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Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor	Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
	19-524-000-0000-6511		FUEL	LONGLAKES	Gas And Oil
4010	Rasley Oil Company				
		13.71			
		13.71	1 Transactions		
4070	Riley Auto Supply				
	19-524-000-0000-6590		wood splitter hose & fitting	546054	Repair & Maintenance Supplies
4070	Riley Auto Supply				
		32.96			
		32.96	1 Transactions		
524	DEPT Total:	48.42	LLCC Maintenance	3 Vendors	3 Transactions
19	Fund Total:	8,412.08	Long Lake Conservation Center		26 Transactions

Aitkin County



Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor No.	Name Account/Formula	Rpt Accr	Amount	Warrant Description Service Dates	Invoice # Paid On Bhf #	Account/Formula Description On Behalf of Name
520	DEPT			Parks		
86222	Aitkin Independent Age 21-520-000-0000-6230		23.60	Lawn mowing bids-Age	1519	Printing, Publishing & Adv
	21-520-000-0000-6230		35.59	Lawn Mowing bids-Messenger	1519	Printing, Publishing & Adv
86222	Aitkin Independent Age		59.19	2 Transactions		
1570	Erickson Oil Products Inc 21-520-000-0000-6511		904.47	March gas	9423	Gas & Oil
1570	Erickson Oil Products Inc		904.47	1 Transactions		
1701	Forestry Suppliers Inc 21-520-000-0000-6406		192.82	Safety items for park crew	586351-00	Field Supplies
1701	Forestry Suppliers Inc		192.82	1 Transactions		
1754	Garrison Disposal Company, Inc 21-520-000-0000-6254		46.61	March garbage - shop	8179690	Utilities
1754	Garrison Disposal Company, Inc		46.61	1 Transactions		
4641	Holiday Credit Office 21-520-000-0000-6511		103.25	March gas	1400000134961	Gas & Oil
4641	Holiday Credit Office		103.25	1 Transactions		
7525	Hometown Bldg Supply 21-520-000-0000-6406		15.02	Boards for park signs	49771	Field Supplies
7525	Hometown Bldg Supply		15.02	1 Transactions		
2340	Hyytinen Hardware Hank 21-520-000-0000-6450		15.49	Multi tester	1166280	Small Tools
	21-520-000-0000-6450		4.99	Pliers	1166347	Small Tools
	21-520-000-0000-6590		33.45	Hardware for signs	1169709	Repair & Maintenance Supplies
2340	Hyytinen Hardware Hank		53.93	3 Transactions		
2448	Janzen/Carroll Mark 21-520-000-0000-6330		10.08	Park Commission Mileage 3/10	18@.56	Transportation & Travel
	21-520-000-0000-6350		35.00	Park Commission Meeting	3/10/2014	Per Diem
	21-520-000-0000-6350		35.00	Park Commission Meeting	4/14/2014	Per Diem
	21-520-000-0000-6330		31.36	Park Commission Mileage 4/14	56@.56	Transportation & Travel
2448	Janzen/Carroll Mark		111.44	4 Transactions		

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Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor	Name	Rpt	Warrant Description	Invoice #	Account/Formula Description	
No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name	
			Amount			
5759	Kitzrow/Donald					
	21-520-000-0000-6350		35.00	Park Commission Meeting	3/10/2014	Per Diem
	21-520-000-0000-6350		35.00	Park Commission Meeting	4/14/2014	Per Diem
	21-520-000-0000-6330		36.96	Park Commission 4/14/2014	66@.56	Transportation & Travel
	21-520-000-0000-6330		40.88	Park Commission 3/10/2014	73@.56	Transportation & Travel
5759	Kitzrow/Donald		147.84	4 Transactions		
2991	Malmo Market					
	21-520-000-0000-6511		315.51	March Gas	3160	Gas & Oil
2991	Malmo Market		315.51	1 Transactions		
3160	Mille Lacs Energy Coop-Albert Lea					
	21-520-000-0000-6254		38.25	Electricity Berglund Park	18-51-106-02	Utilities
3160	Mille Lacs Energy Coop-Albert Lea		38.25	1 Transactions		
9692	Minnesota Energy Resources Corporation					
	21-520-000-0000-6254		670.94	Shop - gas heat	4162495-8	Utilities
9692	Minnesota Energy Resources Corporation		670.94	1 Transactions		
4233	S & T Office Products Inc					
	21-520-000-0000-6406		83.37	Safety glasses, masks, gloves	01Q10700	Field Supplies
4233	S & T Office Products Inc		83.37	1 Transactions		
86235	The Office Shop Inc					
	21-520-000-0000-6406		9.98	Rubber gloves	957803-0	Field Supplies
86235	The Office Shop Inc		9.98	1 Transactions		
4927	Turnock/Franklin Allen					
	21-520-000-0000-6350		35.00	Park Commission Meeting	3/10/2014	Per Diem
	21-520-000-0000-6350		35.00	Park Commission Meeting	4/14/2014	Per Diem
	21-520-000-0000-6330		33.60	Park Commission 4/14/2014	60@.56	Transportation & Travel
	21-520-000-0000-6330		42.56	Park Commission 3/10/14	76@.56	Transportation & Travel
4927	Turnock/Franklin Allen		146.16	4 Transactions		
3518	Voyageur Press Of Mcgregor/The					
	21-520-000-0000-6230		24.77	Lawn Mowing bids	27646	Printing, Publishing & Adv
3518	Voyageur Press Of Mcgregor/The		24.77	1 Transactions		
12065	Warnest/Timothy					

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Audit List for Board COMMISSIONER'S VOUCHERS ENTRIES

Vendor	Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
	21-520-000-0000-6350		Park Commission Meeting	3/10/2014	Per Diem
	21-520-000-0000-6350		Park Commission Meeting	4/14/2014	Per Diem
	21-520-000-0000-6330		Park Commission 4/14/2014	63@.56	Transportation & Travel
	21-520-000-0000-6330		Park Commission 3/10/2014	90@.56	Transportation & Travel
12065	Warnest/Timothy		4 Transactions		
520	DEPT Total:		Parks	17 Vendors	32 Transactions
21	Fund Total:		Parks		32 Transactions
	Final Total:		274 Vendors	459 Transactions	

Aitkin County



Recap by Fund	<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>	
	1	131,083.17	General Fund	
	3	34,330.93	Road & Bridge	
	4	434.19	Special Revenue(Unorg R&B,Fire	
	5	1,577.95	Health & Human Services	
	9	555.00	State	
	10	14,226.75	Trust	
	11	2,148.81	Forest Development	
	19	8,412.08	Long Lake Conservation Center	
	21	3,079.23	Parks	
	All Funds	195,848.11	Total	Approved by,
			
			

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Audit List for Board AUDITOR'S VOUCHERS ENTRIES

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Print List in Order By: 2
1 - Fund (Page Break by Fund)
2 - Department (Totals by Dept)
3 - Vendor Number
4 - Vendor Name

Page Break By: 1
1 - Page Break by Fund
2 - Page Break by Dept

march Sales + Use Tax

Explode Dist. Formulas Y

Paid on Behalf Of Name
on Audit List?: N

Type of Audit List: D
D - Detailed Audit List
S - Condensed Audit List

Save Report Options?: N

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1 General Fund

Aitkin County

Audit List for Board AUDITOR'S VOUCHERS ENTRIES



Vendor No.	<u>Name</u> <u>Account/Formula</u>	<u>Rpt</u> <u>Accr</u>	<u>Amount</u>	<u>Warrant Description</u> <u>Service Dates</u>	<u>Invoice #</u> <u>Paid On Bhf #</u>	<u>Account/Formula Description</u> <u>On Behalf of Name</u>
40	DEPT 89991 Bremer Bank			Auditor		
1	01-040-000-0000-5517		0.58	Receipt Nbr 1058 03/07/2014		Fees For Services
2	01-040-000-0000-5517		0.19	Receipt Nbr 1059 03/24/2014		Fees For Services
3	01-040-000-0000-5517		0.19	Receipt Nbr 1061 03/27/2014		Fees For Services
4	01-040-000-0000-5840		0.04	Receipt Nbr 1057 03/03/2014		Misc Receipts
5	01-040-000-0000-5840		0.41	Receipt Nbr 1057 03/03/2014		Misc Receipts
6	01-040-021-0000-5840		2.54	Receipt Nbr 920 03/10/2014		Misc Receipts
7	01-040-021-0000-5840		0.96	Receipt Nbr 922 03/17/2014		Misc Receipts
52	01-040-000-0000-6405		1.00	March sales tax adjustment		Office & Computer Supplies
	89991 Bremer Bank		5.91	8 Transactions		
40	DEPT Total:		5.91	Auditor	1 Vendors	8 Transactions
42	DEPT 89991 Bremer Bank			Treasurer		
8	01-042-000-0000-5840		0.13	Receipt Nbr 3306 03/19/2014		Misc Receipts
9	01-042-000-0000-5840		12.87	Receipt Nbr 3309 03/21/2014		Misc Receipts
10	01-042-000-0000-5840		0.13	Receipt Nbr 3310 03/24/2014		Misc Receipts
11	01-042-000-0000-5840		0.13	Receipt Nbr 3311 03/24/2014		Misc Receipts
12	01-042-000-0000-5840		0.26	Receipt Nbr 3311 03/24/2014		Misc Receipts
13	01-042-000-0000-5840		0.13	Receipt Nbr 3315 03/27/2014		Misc Receipts
14	01-042-000-0000-5840		0.13	Receipt Nbr 3317 03/28/2014		Misc Receipts
	89991 Bremer Bank		13.78	7 Transactions		
42	DEPT Total:		13.78	Treasurer	1 Vendors	7 Transactions
43	DEPT 89991 Bremer Bank			Assessor		
15	01-043-000-0000-5840		0.06	Receipt Nbr 793 03/04/2014		Misc Receipts
16	01-043-000-0000-5840		0.74	Receipt Nbr 793 03/04/2014		Misc Receipts
17	01-043-000-0000-5840		0.48	Receipt Nbr 793 03/04/2014		Misc Receipts
	89991 Bremer Bank		1.28	3 Transactions		
43	DEPT Total:		1.28	Assessor	1 Vendors	3 Transactions
90	DEPT 89991 Bremer Bank			Attorney		

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1 General Fund

Aitkin County



Audit List for Board AUDITOR'S VOUCHERS ENTRIES

<u>Vendor Name</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>
<u>No.</u> <u>Account/Formula</u>	<u>Accr</u>	<u>Amount</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u> <u>On Behalf of Name</u>
18 01-090-000-0000-5840		1.29	Receipt Nbr 1385 03/06/2014	Misc Receipts
19 01-090-000-0000-5840		0.64	Receipt Nbr 1390 03/17/2014	Misc Receipts
20 01-090-000-0000-5840		0.64	Receipt Nbr 1394 03/24/2014	Misc Receipts
89991 Bremer Bank		2.57	3 Transactions	
90 DEPT Total:		2.57	Attorney	1 Vendors 3 Transactions
100 DEPT			Recorder	
89991 Bremer Bank				
42 01-100-000-0000-6311		72.49	March 2014 Sales Tax on copies	Sales Tax
43 01-100-000-0000-6312		0.49	Adjust March 2014 Tax- copies	Sales Tax Adjustment
89991 Bremer Bank		72.00	2 Transactions	
100 DEPT Total:		72.00	Recorder	1 Vendors 2 Transactions
252 DEPT			Corrections	
89991 Bremer Bank				
21 01-252-252-0000-5872		146.02	Receipt Nbr 2378 03/10/2014	Phone Card Prisoner Welfare(Taxable)
22 01-252-252-0000-5872		100.35	Receipt Nbr 2385 03/17/2014	Phone Card Prisoner Welfare(Taxable)
23 01-252-252-0000-5872		170.67	Receipt Nbr 2390 03/21/2014	Phone Card Prisoner Welfare(Taxable)
24 01-252-252-0000-5872		66.26	Receipt Nbr 2395 03/26/2014	Phone Card Prisoner Welfare(Taxable)
25 01-252-252-0000-5885		29.88	Receipt Nbr 2385 03/17/2014	Commissary Sales Taxable
26 01-252-252-0000-5885		12.85	Receipt Nbr 2390 03/21/2014	Commissary Sales Taxable
27 01-252-252-0000-5885		6.43	Receipt Nbr 2395 03/26/2014	Commissary Sales Taxable
89991 Bremer Bank		532.46	7 Transactions	
252 DEPT Total:		532.46	Corrections	1 Vendors 7 Transactions
1 Fund Total:		628.00	General Fund	30 Transactions

Aitkin County



Audit List for Board AUDITOR'S VOUCHERS ENTRIES

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3 Road & Bridge

	<u>Vendor Name</u>	<u>Rpt</u>	<u>Amount</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>
	<u>No. Account/Formula</u>	<u>Accr</u>		<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
0	DEPT			Undesignated		
	89991 Bremer Bank					
28	03-000-000-0000-5855		1.93	Receipt Nbr 1840 03/13/2014		Charges- Individuals
29	03-000-000-0000-5855		0.13	Receipt Nbr 762 03/17/2014		Charges- Individuals
30	03-000-000-0000-5855		0.39	Receipt Nbr 763 03/17/2014		Charges- Individuals
31	03-000-000-0000-5855		1.93	Receipt Nbr 764 03/28/2014		Charges- Individuals
	89991 Bremer Bank		4.38	4 Transactions		
0	DEPT Total:		4.38	Undesignated	1 Vendors	4 Transactions
303	DEPT			R&B Highway Maintenance		
	8410 Bremer Bank					
51	03-303-000-0000-6513		1,186.45	March Diesel Tax		Motor Fuel & Lubricants
	8410 Bremer Bank		1,186.45	1 Transactions		
303	DEPT Total:		1,186.45	R&B Highway Maintenance	1 Vendors	1 Transactions
3	Fund Total:		1,190.83	Road & Bridge		5 Transactions

Aitkin County

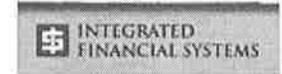


Audit List for Board AUDITOR'S VOUCHERS ENTRIES

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9 State

	<u>Vendor Name</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>
	<u>No. Account/Formula</u>	<u>Accr</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
0	DEPT		Undesignated		
	4580 Mn Dept Of Finance				
45	09-000-000-0000-2022		136.00 March Birth		Birth/Death Surcharges
46	09-000-000-0000-2022		480.00 March Death		Birth/Death Surcharges
47	09-000-000-0000-2024		102.00 March Childrens		St Share Of Birth Cert.- Children
48	09-000-000-0000-2031		10.50 March Torrens		Real Estate Assurance (Was 5874 And 627
49	09-000-000-0000-2036		3,696.00 March State General Fund		Recording Surcharges (Was 5871 & 6281)
50	09-000-000-0000-2036		340.00 March State Gen Tax Surcharge		Recording Surcharges (Was 5871 & 6281)
	4580 Mn Dept Of Finance		4,764.50	6 Transactions	
	3375 Mn Dept Of Health				
44	09-000-000-0000-2027		467.50 March State Well		State Well Cert Fees (Was 5097 & 6203)
	3375 Mn Dept Of Health		467.50	1 Transactions	
0	DEPT Total:		5,232.00 Undesignated	2 Vendors	7 Transactions
9	Fund Total:		5,232.00 State		7 Transactions

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Audit List for Board AUDITOR'S VOUCHERS ENTRIES

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19 Long Lake Conservation C

Vendor	Name	Rpt	Warrant Description	Invoice #	Account/Formula Description
No.	Account/Formula	Accr	Service Dates	Paid On Bhf #	On Behalf of Name
521	DEPT		LLCC Administration		
	89991 Bremer Bank				
32	19- 521- 000- 0000- 5885		64.94 Receipt Nbr 925 03/04/2014		Commissary Sales Taxable
33	19- 521- 000- 0000- 5885		15.55 Receipt Nbr 927 03/07/2014		Commissary Sales Taxable
34	19- 521- 000- 0000- 5885		57.08 Receipt Nbr 929 03/18/2014		Commissary Sales Taxable
35	19- 521- 000- 0000- 5885		1.66 Receipt Nbr 930 03/25/2014		Commissary Sales Taxable
	89991 Bremer Bank		139.23	4 Transactions	
521	DEPT Total:		139.23	LLCC Administration	1 Vendors 4 Transactions
19	Fund Total:		139.23	Long Lake Conservation Center	4 Transactions

Aitkin County



Audit List for Board AUDITOR'S VOUCHERS ENTRIES

DKB1
4/15/14 10:47AM
21 Parks

Vendor	<u>Name</u>	<u>Rpt</u>	<u>Warrant Description</u>	<u>Invoice #</u>	<u>Account/Formula Description</u>
<u>No.</u>	<u>Account/Formula</u>	<u>Accr</u>	<u>Service Dates</u>	<u>Paid On Bhf #</u>	<u>On Behalf of Name</u>
520	DEPT		Parks		
	89991 Bremer Bank				
36	21-520-000-0000-5510		Receipt Nbr 1842 03/17/2014		Co. Parks Campground Fees
37	21-520-000-0000-5510		Receipt Nbr 1842 03/17/2014		Co. Parks Campground Fees
38	21-520-000-0000-5510		Receipt Nbr 1843 03/17/2014		Co. Parks Campground Fees
39	21-520-000-0000-5510		Receipt Nbr 1844 03/17/2014		Co. Parks Campground Fees
40	21-520-000-0000-5510		Receipt Nbr 1847 03/24/2014		Co. Parks Campground Fees
41	21-520-000-0000-5510		Receipt Nbr 1849 03/31/2014		Co. Parks Campground Fees
	89991 Bremer Bank			6 Transactions	
520	DEPT Total:		38.39	Parks	1 Vendors 6 Transactions
21	Fund Total:		38.39	Parks	6 Transactions
	Final Total:		7,228.45	12 Vendors	52 Transactions

Aitkin County

Audit List for Board AUDITOR'S VOUCHERS ENTRIES



Recap by Fund

<u>Fund</u>	<u>AMOUNT</u>	<u>Name</u>
1	628.00	General Fund
3	1,190.83	Road & Bridge
9	5,232.00	State
19	139.23	Long Lake Conservation Center
21	38.39	Parks
All Funds	7,228.45	Total

Approved by,
.....
.....

Aitkin County Board of Commissioners
Request for County Board Action/Agenda Item Cover Sheet

2F Agenda Item #

To: Chairperson, Aitkin County Board of Commissioners Date: 4-11-14

Via: Roxy Traxler, Interim County Administrator

From: John Welle

Title of Item:

MnDOT Agreement No. 01472-1, Amendment No. 1

Requested Meeting Date: 4-22-14 Estimated Presentation Time: 10 minutes

Presenter: John Welle

Type of Action Requested (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> For info only, no action requested | <input type="checkbox"/> Approve under Consent Agenda |
| <input type="checkbox"/> For discussion with possible action | <input type="checkbox"/> Adopt Ordinance Revision |
| <input type="checkbox"/> Let/Award Bid or Quote (attach copy of basic bid/quote specs or summary of complex specs, each bid/quote received & bid/quote comparison) | |
| <input type="checkbox"/> Approve/adopt proposal by motion | <input checked="" type="checkbox"/> Approve/adopt proposal by resolution (attach draft resolution) |
| <input type="checkbox"/> Authorize filling vacant staff position | |
| <input type="checkbox"/> Request to schedule public hearing or sale | <input type="checkbox"/> Other (please list) _____ |
| <input type="checkbox"/> Request by member of the public to be heard | |
| <input type="checkbox"/> Item should be addressed in closed session under MN Statute _____ | |

Fiscal Impact (check all that apply)

- Is this item in the current approved budget? Yes No (attach explanation)
- What type of expenditure is this? Operating Capital Other (attach explanation)
- Revenue line account # that funds this item is: _____
- Expenditure line account # for this item is: _____

Staffing Impact (Any yes answer requires a review by Human Resources Manager before going to the board)

- Duties of a department employee(s) may be materially affected. Yes No
- Applicable job description(s) may require revision. Yes No
- Item may impact a bargaining unit agreement or county work policy. Yes No
- Item may change the department's authorized staffing level. Yes No

_____ HR Review

Supporting Attachment(s)

- Memorandum Summary of Item
- Copy of applicable county policy and/or ordinance (excerpts acceptable)
- Copy of applicable state/federal statute/regulation (excerpts acceptable)
- Copy of applicable contract and/or agreement
- Original bid spec or quote request (excluding complex construction projects)
- Bids/quotes received (excluding complex construction projects, provide comparison worksheet)
- Bid/quote comparison worksheet
- Draft County Board resolution
- Plat approval check-list and supporting documents
- Copy of previous minutes related to this issue
- Other supporting document(s) (please list) _____

<p>Provide (1) copy of supporting documentation <u>NO LATER THAN Wednesday at Noon</u> to make the Board's agenda for the following Tuesday. (If your packet contains colored copies, please provide (4) paper copies of supporting documentation as we do not have a color printer or copier.) Items WILL NOT be placed on the Board agenda unless complete documentation is provided for the Board packets.</p>

AITKIN COUNTY COMMISSIONER'S MEMO

TO: Aitkin County Commissioners
Roxy Traxler, Interim County Administrator

FROM: John Welle

DATE: April 11, 2014

Consent Agenda Item: MnDOT Agreement No. 01472-1, Amendment No. 1

Summary:

On July 10, 2012, County Board authorization was received to enter into MnDOT Agreement No. 01472 to facilitate MnDOT's placement of a conflict warning system at the intersection of US Hwy 169/TH 210 and CSAH 12 on the east side of Aitkin. That warning system was installed during 2013 and has been in operation since December, 2013. Although the system is owned and maintained by MnDOT, Aitkin County, as part of the agreement, supplies the electrical power through our source that is in place at this intersection for the intersection lighting. Our increased cost for the additional electricity used to power the warning system is approximately \$5 per month.

MnDOT is planning to install this same type of conflict warning system at the intersection of US Hwy 169 and CSAH 28 south of Aitkin during 2014 and would like to amend Agreement No. 01472 to include the system that will be installed at this intersection. The same terms of Agreement No 01472 will apply, with Aitkin County's sole responsibility being to supply the electrical power from our existing power source.

Authorization to amend the agreement is requested by the following resolution.

Draft Resolution:

WHEREAS, the intersection of U.S. Hwy 169 and Aitkin County State-Aid Highway 28 has been identified by the Minnesota Department of Transportation for installation of an Intersection Conflict Warning System, and

WHEREAS, the Minnesota Department of Transportation has proposed Agreement No. 01472-1, Amendment No. 1 to facilitate construction and operation of this system,

NOW, THEREFORE, BE IT RESOLVED that Aitkin County enter into Agreement No. 01472-1, Amendment No. 1 with the Minnesota Department of Transportation to provide electrical energy for the new Intersection Conflict Warning System at the intersection of U.S. Hwy 169 and Aitkin County State-Aid Highway 28.

BE IT FURTHER RESOLVED that the Aitkin County Engineer is hereby authorized to execute this Agreement and amendments to the Agreement.

Aitkin County Board of Commissioners
Request for County Board Action/Agenda Item Cover Sheet



To: Chairperson, Aitkin County Board of Commissioners Date: April 14, 2014

Via: Roxy Traxler, Interim County Administrator

From: Sally M. Huhta

Title of Item:

On Sale Wine License 2014

Requested Meeting Date: April 22, 2014 Estimated Presentation Time: n/a

Presenter: _____

Type of Action Requested (check all that apply)

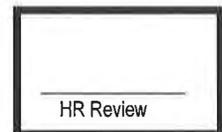
- For info only, no action requested
- For discussion with possible action
- Let/Award Bid or Quote (attach copy of basic bid/quote specs or summary of complex specs, each bid/quote received & bid/quote comparison)
- Approve/adopt proposal by motion
- Authorize filling vacant staff position
- Request to schedule public hearing or sale
- Request by member of the public to be heard
- Item should be addressed in closed session under MN Statute _____
- Approve under Consent Agenda
- Adopt Ordinance Revision
- Approve/adopt proposal by resolution (attach draft resolution)
- Other (please list) _____

Fiscal Impact (check all that apply)

- Is this item in the current approved budget? Yes _____ No _____ (attach explanation)
- What type of expenditure is this? Operating Capital Other (attach explanation)
- Revenue line account # that funds this item is: _____
- Expenditure line account # for this item is: _____

Staffing Impact (Any yes answer requires a review by Human Resources Manager before going to the board)

- Duties of a department employee(s) may be materially affected. Yes No
- Applicable job description(s) may require revision. Yes No
- Item may impact a bargaining unit agreement or county work policy. Yes No
- Item may change the department's authorized staffing level. Yes No



Supporting Attachment(s)

- Memorandum Summary of Item
- Copy of applicable county policy and/or ordinance (excerpts acceptable)
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- Copy of applicable contract and/or agreement
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- Bid/quote comparison worksheet
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Sue Bingham

From: Sally Huhta [sally.huhta@co.aitkin.mn.us]
Sent: Monday, April 14, 2014 2:45 PM
To: Roxy Traxler
Cc: 'Sue Bingham'
Subject: Red Door Resort - 3.2% Beer & On-Sale Wine
Attachments: Request for Board Action 2014.doc; Resolution-The Red Door.doc; Request for Board Action 2014.doc; Motion - Red Door Resort.doc

Please be advised that there are "NEW" owners for the Red Door Resort. Attached, please find Requests & Resolution for a Wine License and a Request & Motion for a 3.2% Beer License, for the agenda of April 22, 2014.

THX, Sally

*Sally M. Huhta
Aitkin County Deputy Auditor
209 2nd Street NW - Room 202
Aitkin, MN 56431*

*218-927-7354
Fax: 218-927-7324*

This transmission (the e-mail and all attachments) is confidential and intended solely for the use of the addressee(s). If you have received this transmission in error, please notify the sender by reply and delete this transmission immediately. Any unauthorized distribution, or copying of this transmission, or misuse or wrongful disclosure of information contained in it, is strictly prohibited. The information contained in this document is provided on an as-is basis and does not constitute a binding legal contract or receipt for services.

CERTIFIED COPY OF RESOLUTION OF COUNTY BOARD OF AITKIN COUNTY, MINNESOTA

ADOPTED April 22, 2014

By Commissioner: xx

042214-0xx

The Red Door Resort & Motel On-Sale Wine License

BE IT RESOLVED, The Aitkin County Board of Commissioners agrees to approve the following On-Sale Wine license for a period ending December 31, 2014:

Kulifaj Resorts Inc., d/b/a **The Red Door Resort & Motel** – Wealthwood Township
This establishment has an address of 38421 State Highway 18, Aitkin, MN 56431

Commissioner XX moved the adoption of the resolution and it was declared adopted upon the following vote

FIVE MEMBERS PRESENT

All Members Voting Yes

STATE OF MINNESOTA)
County of Aitkin) ss.
Office of County Auditor,)

I, Kirk Peysar, Auditor, of the County of Aitkin, do hereby certify that I have compared the foregoing with the original resolution filed in my office on the 22nd day of April A.D., 2014, and that the same is a true and correct copy of the whole thereof.

WITNESS MY HAND AND SEAL OF OFFICE at Aitkin, Minnesota, this 22nd day of April A.D., 2014

KIRK PEYSAR, County Auditor

BY _____, Deputy

Aitkin County Board of Commissioners
Request for County Board Action/Agenda Item Cover Sheet



To: Chairperson, Aitkin County Board of Commissioners Date: April 14, 2014

Via: Roxy Traxler, Interim County Administrator

From: Sally M. Huhta

Title of Item:
3.2% Beer License – Red Door Resort

Requested Meeting Date: April 22, 2014 Estimated Presentation Time: N/A

Presenter: _____

Type of Action Requested (check all that apply)

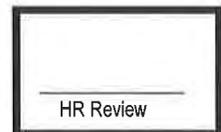
- For info only, no action requested
- For discussion with possible action
- Let/Award Bid or Quote (attach copy of basic bid/quote specs or summary of complex specs, each bid/quote received & bid/quote comparison)
- Approve/adopt proposal by motion
- Authorize filling vacant staff position
- Request to schedule public hearing or sale
- Request by member of the public to be heard
- Item should be addressed in closed session under MN Statute _____
- Approve under Consent Agenda
- Adopt Ordinance Revision
- Approve/adopt proposal by resolution (attach draft resolution)
- Other (please list) _____

Fiscal Impact (check all that apply)

- Is this item in the current approved budget? Yes _____ No _____ (attach explanation)
- What type of expenditure is this? Operating Capital Other (attach explanation)
- Revenue line account # that funds this item is: _____
- Expenditure line account # for this item is: _____

Staffing Impact (Any yes answer requires a review by Human Resources Manager before going to the board)

- Duties of a department employee(s) may be materially affected. Yes No
- Applicable job description(s) may require revision. Yes No
- Item may impact a bargaining unit agreement or county work policy. Yes No
- Item may change the department's authorized staffing level. Yes No



Supporting Attachment(s)

- Memorandum Summary of Item
- Copy of applicable county policy and/or ordinance (excerpts acceptable)
- Copy of applicable state/federal statute/regulation (excerpts acceptable)
- Copy of applicable contract and/or agreement
- Original bid spec or quote request (excluding complex construction projects)
- Bids/quotes received (excluding complex construction projects, provide comparison worksheet)
- Bid/quote comparison worksheet
- Draft County Board resolution
- Plat approval check-list and supporting documents
- Copy of previous minutes related to this issue
- Other supporting document(s) (please list) Proposed Motion

Provide (1) copy of supporting documentation NO LATER THAN Wednesday at Noon to make the Board's agenda for the following Tuesday. (If your packet contains colored copies, please provide (4) paper copies of supporting documentation as we do not have a color printer or copier.) Items WILL NOT be placed on the Board agenda unless complete documentation is provided for the Board packets.

For: County Board of April 22, 2014

Motion by Commissioner X, seconded by Commissioner X and carried, all members voting yes to approve the following **3.2 Malt Liquor License** for a period **ending April 30, 2015**.

OFF Sale:

ON Sale

ON & OFF Sale:

Kulifaj Resorts Inc., d/b/a The **Red Door Resort & Motel** – Wealthwood Township
This establishment has an address of 38421 State Highway 18, Aitkin, MN 56431

Aitkin County Board of Commissioners
Request for County Board Action/Agenda Item Cover Sheet



To: Chairperson, Aitkin County Board of Commissioners Date: April 14, 2014

Via: Roxy Traxler, Interim County Administrator

From: Sally M. Huhta

Title of Item:
LG214 – Minnesota National Golf Course

Requested Meeting Date: April 22, 2014 Estimated Presentation Time: n/a

Presenter: _____

Type of Action Requested (check all that apply)

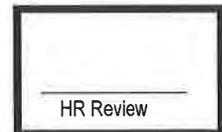
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- Request by member of the public to be heard
- Item should be addressed in closed session under MN Statute _____
- Approve under Consent Agenda
- Adopt Ordinance Revision
- Approve/adopt proposal by resolution (attach draft resolution)
- Other (please list) _____

Fiscal Impact (check all that apply)

- Is this item in the current approved budget? Yes _____ No _____ (attach explanation)
- What type of expenditure is this? Operating Capital Other (attach explanation)
- Revenue line account # that funds this item is: _____
- Expenditure line account # for this item is: _____

Staffing Impact (Any yes answer requires a review by Human Resources Manager before going to the board)

- Duties of a department employee(s) may be materially affected. Yes No
- Applicable job description(s) may require revision. Yes No
- Item may impact a bargaining unit agreement or county work policy. Yes No
- Item may change the department's authorized staffing level. Yes No



Supporting Attachment(s)

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CERTIFIED COPY OF RESOLUTION OF COUNTY BOARD OF AITKIN COUNTY, MINNESOTA

ADOPTED April 22, 2014

By Commissioner: xx

042214-0xx

McGregor Lions Club Form LG214

BE IT RESOLVED, the Aitkin County Board of Commissioners agrees to approve the following Premises Permit Application - Form LG214, of the McGregor Lions Club, at Minnesota National Golf Course – Workman Township. This establishment has an address of 23247 480th Street, McGregor, MN 55760

Commissioner XX moved the adoption of the resolution and it was declared adopted upon the following vote

FIVE MEMBERS PRESENT

All Members Voting Yes

STATE OF MINNESOTA)
County of Aitkin) ss.
Office of County Auditor,)

I, Kirk Peysar, Auditor, of the County of Aitkin, do hereby certify that I have compared the foregoing with the original resolution filed in my office on the 22nd day of April A.D., 2014, and that the same is a true and correct copy of the whole thereof.

WITNESS MY HAND AND SEAL OF OFFICE at Aitkin, Minnesota, this 22nd day of April A.D., 2014

KIRK PEYSAR, County Auditor

BY _____, Deputy

Aitkin County Board of Commissioners
Request for County Board Action/Agenda Item Cover Sheet



To: Chairperson, Aitkin County Board of Commissioners Date: April 15, 2014

Via: Roxy Traxler, Interim County Administrator

From: Sally M. Huhta

Title of Item: 3.2 Beer License – Unorg 48-27 Township approval of Application

Requested Meeting Date: April 22, 2014 Estimated Presentation Time: N/A

Presenter: _____

Type of Action Requested (check all that apply)

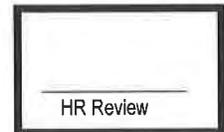
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- Approve/adopt proposal by motion
- Authorize filling vacant staff position
- Request to schedule public hearing or sale
- Request by member of the public to be heard
- Item should be addressed in closed session under MN Statute _____
- Approve under Consent Agenda
- Adopt Ordinance Revision
- Approve/adopt proposal by resolution (attach draft resolution)
- Other (please list) _____

Fiscal Impact (check all that apply)

- Is this item in the current approved budget? Yes _____ No _____ (attach explanation)
- What type of expenditure is this? Operating Capital Other (attach explanation)
- Revenue line account # that funds this item is: _____
- Expenditure line account # for this item is: _____

Staffing Impact (Any yes answer requires a review by Human Resources Manager before going to the board)

- Duties of a department employee(s) may be materially affected. Yes No
- Applicable job description(s) may require revision. Yes No
- Item may impact a bargaining unit agreement or county work policy. Yes No
- Item may change the department's authorized staffing level. Yes No



Supporting Attachment(s)

- Memorandum Summary of Item
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**KIRK PEYSAR
AITKIN COUNTY AUDITOR
209 SECOND STREET NW-ROOM 202
AITKIN, MINNESOTA 56431
218-927-7354
FAX: 218-927-7324**

Date: April 22, 2014

Name of Applicant: Danny JW Volk

Doing Business As: Hidden Meadows

STATE OF MINNESOTA, }
COUNTY OF AITKIN

TOWN OF UNORG 48-27

It is hereby certified that the Town Board of Unorg 48-27 in said
County and State, by ~~resolution~~ ^{Motion} on the 22nd day of April, Year 2014
did consent to the issuance of the license applied for in the within application.

Dated April 22, Year 2014 THE TOWN BOARD OF THE TOWN OF
Unorg 48-27

Town Clerk
Attest _____

KIRK PEYSAR

By _____ Chairperson

For: County Board of April 22, 2014

Motion by Commissioner X, seconded by Commissioner X and carried, all members voting yes to consent to the issuance of the following 3.2 Malt Liquor License applied for in the within application for a period ending April 30, 2015.

ON Sale:

Danny J. Volk, d/b/a **Hidden Meadows** – Unorg 48-27 Township

Aitkin County Board of Commissioners
Request for County Board Action/Agenda Item Cover Sheet



To: Chairperson, Aitkin County Board of Commissioners Date: April 16, 2014

Via: Roxy Traxler, Interim County Administrator

From: Sally M. Huhta

Title of Item:
3.2 Beer Licenses

Requested Meeting Date: April 22, 2014 Estimated Presentation Time: N/A

Presenter: _____

Type of Action Requested (check all that apply)

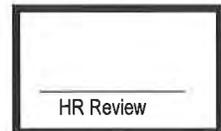
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- Request to schedule public hearing or sale Other (please list) _____
- Request by member of the public to be heard
- Item should be addressed in closed session under MN Statute _____

Fiscal Impact (check all that apply)

- Is this item in the current approved budget? Yes _____ No _____ (attach explanation)
- What type of expenditure is this? Operating Capital Other (attach explanation)
- Revenue line account # that funds this item is: _____
- Expenditure line account # for this item is: _____

Staffing Impact (Any yes answer requires a review by Human Resources Manager before going to the board)

- Duties of a department employee(s) may be materially affected. Yes No
- Applicable job description(s) may require revision. Yes No
- Item may impact a bargaining unit agreement or county work policy. Yes No
- Item may change the department's authorized staffing level. Yes No



Supporting Attachment(s)

- Memorandum Summary of Item
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For: County Board of April 22, 2014

Motion by Commissioner X, seconded by Commissioner X and carried, all members voting yes to approve the following **3.2 Malt Liquor License** for a period **ending April 30, 2015**.

OFF Sale:

Almar Holdings LLC, d/b/a **(The) Junction** – Hazelton Township

ON Sale:

Danny J. Volk, d/b/a **Hidden Meadows** – Unorg 48-27 Township

Jacobson Community Volunteer Fire Dept, d/b/a **Jacobson Volunteer Fire Dept** – Ball Bluff Township

Minnewawa Sportsmen's Club Inc., d/b/a **Minnewawa Sportsmen's Club** – Shamrock Township

ON & OFF Sale:

Dean H. Hanson, d/b/a **Agate Bay Resort** – Lakeside Township

Rae Ann Halverson, d/b/a **Cajun Queen** – Shamrock Township

Aitkin County Board of Commissioners
Request for County Board Action/Agenda Item Cover Sheet



To: Chairperson, Aitkin County Board of Commissioners Date: 4-14-14

Via: Roxy Traxler, Interim County Administrator

From: Sue Bingham, Administrative Assistant

Title of Item:

First Quarter Revenue & Expenditures Report

Requested Meeting Date: 4-22-14 Estimated Presentation Time: n/a

Presenter: _____

Type of Action Requested (check all that apply)

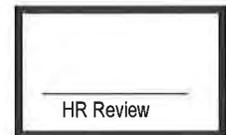
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- For discussion with possible action Adopt Ordinance Revision
- Let/Award Bid or Quote (attach copy of basic bid/quote specs or summary of complex specs, each bid/quote received & bid/quote comparison)
- Approve/adopt proposal by motion Approve/adopt proposal by resolution (attach draft resolution)
- Authorize filling vacant staff position
- Request to schedule public hearing or sale Other (please list) _____
- Request by member of the public to be heard
- Item should be addressed in closed session under MN Statute _____

Fiscal Impact (check all that apply)

- Is this item in the current approved budget? Yes _____ No _____ (attach explanation)
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- Revenue line account # that funds this item is: _____
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Staffing Impact (Any yes answer requires a review by Human Resources Manager before going to the board)

- Duties of a department employee(s) may be materially affected. Yes No
- Applicable job description(s) may require revision. Yes No
- Item may impact a bargaining unit agreement or county work policy. Yes No
- Item may change the department's authorized staffing level. Yes No



Supporting Attachment(s)

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- Copy of applicable county policy and/or ordinance (excerpts acceptable)
- Copy of applicable state/federal statute/regulation (excerpts acceptable)
- Copy of applicable contract and/or agreement
- Original bid spec or quote request (excluding complex construction projects)
- Bids/quotes received (excluding complex construction projects, provide comparison worksheet)
- Bid/quote comparison worksheet
- Draft County Board resolution
- Plat approval check-list and supporting documents
- Copy of previous minutes related to this issue
- Other supporting document(s) (please list) Graphs, Cash Balance Sheet, Report

Provide (1) copy of supporting documentation NO LATER THAN Wednesday at Noon to make the Board's agenda for the following Tuesday. (If your packet contains colored copies, please provide (4) paper copies of supporting documentation as we do not have a color printer or copier.) Items WILL NOT be placed on the Board agenda unless complete documentation is provided for the Board packets.

AITKIN COUNTY ADMINISTRATION

Aitkin County Courthouse
217 Second Street N.W. Room 130
Aitkin, MN 56431
218-927-7276
Fax: 218-927-7374

TO: Aitkin County Board of Commissioners

FROM: Sue Bingham, Administrative Assistant

RE: First Quarter Revenue and Expenditure Reports

DATE: April 14, 2014

Attached for your review is the 2014 First Quarter Revenue and Expenditure Report. It contains the following:

- Expenditure and Revenue Graphs
- Cash Balance Sheet
- Revenues & Expenditures Budget Report through 3/31/14

If you have any questions or concerns, please feel free to contact Roxy.

04/11/14 CASH BALANCE SHEET		BALANCE 09/30/13	BALANCE 10/31/13	BALANCE 11/30/13	BALANCE 12/31/13	BALANCE 01/31/14	BALANCE 02/28/14	BALANCE 03/31/14	BALANCE 03/31/13	
INVESTMENTS (YTD)		28,564,913.85	31,149,524.53	28,364,205.94	27,723,155.59	25,073,091.36	25,293,373.71	25,073,091.36	27,163,049.99	
CASH BALANCES										
GENERAL FUND		1 000	7,265,342.61	6,734,391.32	8,467,624.03	8,380,477.05	6,953,713.69	6,482,498.63	6,284,411.05	6,499,350.91
RESERVED		1 000	318,571.69	313,194.63	261,746.10	332,722.35	314,071.26	313,366.08	313,366.48	371,063.13
RESERVE FROM ECON DEV		1 000	580,297.61	580,297.61	580,297.61	580,297.61	525,297.61	525,297.61	525,297.61	580,297.61
SHERIFF CONTINGENT		1 201	900.92CR	925.92CR	950.92CR	975.92CR	5,012.50CR	5,232.50CR	5,295.00CR	2,815.00CR
ENHANCED 911		1 254	596,664.93CR	603,065.36CR	608,597.85CR	608,498.23CR	609,046.72CR	616,479.21CR	620,194.46CR	558,581.12CR
SOLID WASTE		1 391	627,756.73CR	597,314.22CR	670,775.02CR	645,554.71CR	627,685.55CR	610,900.12CR	594,540.61CR	616,611.97CR
COUNTY PARKS-NOW FUND 21		1 520	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Fund 1 Subtotal			8,164,211.91	7,627,883.56	9,309,667.74	9,293,497.01	7,793,082.56	7,321,162.32	7,123,075.14	7,450,711.65
ROAD & BRIDGE		3 000	582,066.80	1,094,634.91	1,386,779.23	1,634,744.72	1,134,413.78	2,108,127.08	1,738,453.81	2,728,065.78
"232" TURNBACK		3 310	8,391,092.82	7,391,092.82	7,391,092.82	7,391,092.82	7,391,092.82	7,391,092.82	7,391,092.82	8,399,072.82
Fund 3 Subtotal			8,973,159.62	8,485,727.73	8,777,872.05	9,025,837.54	8,525,506.60	9,499,219.90	9,129,546.63	11,127,138.60
UNORG R&B		4 421	525,064.70	525,064.70	538,996.37	413,116.37	413,116.37	456,293.31	456,293.31	484,955.10
UNORG FIRE		4 422	32,137.59	32,137.59	38,427.64	40,166.05	40,166.05	40,166.05	25,807.03	32,280.67
UNORG CEMETERY		4 423	106.16	106.16	682.30	814.97	0.00	0.00	0.00	0.00
Fund 4 Subtotal			557,308.45	557,308.45	578,106.31	454,097.39	453,282.42	496,459.36	482,100.34	517,235.77
HEALTH & HUMAN SERVICES		5 000	4,729,926.46	4,428,569.68	5,323,990.58	5,295,265.67	4,900,509.99	4,696,922.15	4,562,200.11	4,282,710.07
DEBT SERVICE		6 000	403,897.51	404,263.27	544,621.80	180,579.11	180,579.11	180,579.11	180,579.11	221,976.48
DITCH JUDICIAL 2		7 350	12,319.18	12,319.59	12,320.01	12,320.86	12,320.86	12,321.37	12,321.81	12,316.82
COUNTY 2		7 367	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COUNTY 5		7 353	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COUNTY 20		7 364	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COUNTY 21		7 365	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COUNTY 23		7 354	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COUNTY 24		7 351	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COUNTY 25		7 355	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COUNTY 28		7 356	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COUNTY 29		7 371	265.12	265.12	265.12	265.12	265.12	265.12	265.12	265.12
COUNTY 30		7 352	28,151.50	28,152.43	28,153.39	27,982.84	27,982.84	27,984.02	27,985.02	28,146.11
COUNTY 34		7 357	795.89	795.89	795.89	795.89	795.89	795.89	795.89	795.89
COUNTY 36		7 358	2,755.29	2,755.29	2,755.29	2,755.29	2,755.29	2,755.29	2,755.29	2,755.29
COUNTY 37		7 359	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COUNTY 42		7 360	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COUNTY 43		7 366	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COUNTY 58		7 361	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COUNTY 63		7 362	1,523.30	1,523.30	1,523.30	1,512.88	1,512.88	1,512.88	1,512.88	1,512.90
COUNTY 66		7 363	1,278.73	1,278.73	1,278.73	1,278.73	1,278.73	1,278.73	1,278.73	1,278.73
DIVERSION CHANNEL		7 373	2.54	2.54	2.54	0.00	0.00	0.00	0.00	2.54
Fund 7 Subtotal			47,091.55	47,092.89	47,094.27	46,911.61	46,911.61	46,913.30	46,914.74	47,073.40

		BALANCE 09/30/13	BALANCE 10/31/13	BALANCE 11/30/13	BALANCE 12/31/13	BALANCE 01/31/14	BALANCE 02/28/14	BALANCE 03/31/14	BALANCE 03/31/13
STATE	9 000	45,766.36	(1,084,999.76)	29,690.43	121,469.09	22,136.90	21,150.50	22,722.06	32,206.49
TIMBER PERMIT BONDS	10 900	75,337.99	79,365.11	84,984.61	72,963.19	69,906.10	76,299.41	75,109.90	62,151.47
LIFELINE SUBSIDY	10 901	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PROBATE SURCHARGES	10 915	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ABAN DEP/BAIL ESCROW	10 919	1,814.56	1,814.56	1,814.56	1,814.56	1,814.56	1,814.56	1,814.56	1,814.56
CO DEVELOPMENT	10 921	484,378.58	476,491.11	458,344.88	415,845.09	380,119.64	367,628.01	355,171.79	341,271.03
CONS FORF TAX SALE	10 922	(19.54)	(19.54)	(19.54)	(1.12)	(1.12)	498.88	498.40	15,355.82
FORF. TAX SALE	10 923	455,995.68	520,377.87	534,309.19	681,956.46	843,231.79	291,055.04	331,153.87	207,252.21
LAW LIBRARY	10 926	53,299.31	55,141.63	55,821.45	54,412.94	54,002.60	54,000.03	55,049.13	49,106.05
MISSING HEIRS	10 927	21,519.08	21,519.08	21,519.08	21,519.08	21,519.08	21,519.08	21,519.08	21,519.08
CO INSURANCE TRUST	10 929	853,817.48	853,817.48	1,059,711.48	857,227.48	857,227.48	857,227.48	857,227.48	853,817.48
Fund 10 Subtotal		1,946,143.14	2,008,507.30	2,216,485.71	2,105,737.68	2,227,820.13	1,670,042.49	1,697,544.21	1,552,287.70
FOREST RESOURCE	11 924	307,303.37	290,616.77	272,083.74	263,468.43	251,839.91	241,312.85	232,140.86	213,072.05
REFORESTATION	11 925	521,361.11	503,663.00	479,766.43	508,506.72	488,983.56	631,187.57	616,535.52	638,258.78
MEMORIAL FOREST	11 934	153,135.50	147,826.23	138,485.25	133,798.54	120,255.59	205,479.31	120,871.71	257,383.21
FOREST ROAD	11 935	69,004.95	60,744.63	53,663.71	53,389.14	50,556.63	50,620.64	70,399.09	82,202.16
GRAVEL PIT	11 936	64,197.60	64,197.60	64,197.60	64,197.60	64,197.60	64,197.60	67,863.53	65,559.95
Fund 11 Subtotal		1,115,002.53	1,067,048.23	1,008,196.73	1,023,360.43	975,833.29	1,192,797.97	1,187,810.71	1,256,476.15
PREPAID TAXES	12 000	0.00	2,300.00	2,448.04	12,077.96	17,843.06	24,884.26	218.00	584.00
ARROWHEAD REG COMM	12 930	667.02	695.94	19,386.84	22,523.76	0.00	0.00	0.00	0.00
TOWNS	12 931	144,649.98	158,798.91	(3,356.36)	334,291.03	(3,638.74)	37,470.73	37,470.73	36,525.18
SCHOOLS	12 932	253,007.20	(861,628.39)	0.00	182,613.60	0.00	170,340.42	170,340.42	107,039.27
Fund 12 Subtotal		398,324.20	(699,833.54)	18,478.52	551,506.35	14,204.32	232,695.41	208,029.15	144,148.45
TAXES & PENALTIES	13 943	2,501,734.06	9,645,336.02	676,379.03	0.00	123,426.76	250,778.35	435,475.42	678,614.76
CAPITAL PROJECT	14 000	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COLLABORATIVE AGENCY	15 000	72,065.88	71,331.88	71,331.88	93,646.02	69,148.11	69,148.11	69,148.11	37,641.14
ECONOMIC DEV FUND	16 944	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ACT NOW FEDERAL GRANT	17 000	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ENVIRONMENTAL TRUST	18 937	479,952.14	479,952.70	479,953.36	487,267.20	487,267.20	472,635.63	479,949.09	472,636.51
LLCC GENERAL OPERATIONS	19 000	(458,715.07)	(467,881.51)	(454,298.42)	(457,178.80)	(504,517.43)	(519,672.44)	(511,300.72)	(416,695.03)
LLCC CAPITAL IMPROV. C/O	19 525	24,069.84	24,069.84	23,394.39	23,394.39	23,394.39	23,394.39	23,394.39	24,069.84
Fund 19 Subtotal		(434,645.23)	(443,811.67)	(430,904.03)	(433,784.41)	(481,123.04)	(496,278.05)	(487,906.33)	(392,625.19)
PARKS	21 520	111,497.26	95,868.39	87,789.31	87,050.87	73,508.01	206,895.28	167,461.21	180,804.87
TOTAL CASH & INVEST.		29,111,435.84	32,690,245.13	28,738,753.69	28,332,441.56	25,412,093.97	25,861,121.83	25,304,649.70	27,609,036.85

RESERVES:

13,072.06	Assessor-Computers
0.00	Assessor-Vehicle
12,998.59	IT-Network Equipment
5,500.00	IT-Staff Training
3,464.50	Elections-Voting Equipment
10,000.00	Attorney-Murder Trial
153,750.08	Building-Construction
10,800.00	Sheriff-Posse
43,815.39	Sheriff-Technology
27,300.00	Sheriff-Vehicle
25,165.86	Sheriff-Forfeiture
7,500.00	Environmental Services-Vehicle
<hr/>	
313,366.48	
0.00	
525,297.61	From Economic Development
838,664.09	

TOTAL

SMB1
4/11/14

1:35PM

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT

Page 1

Budget Name for Report: ADOPTED 2014 BUDGET Orig

Page Break Option: 2

1 - Page Break by FUND

Include on the Report: 1 1 - All G/L Accounts

2 - Page Break by DEPT

2 - Only G/L Accounts with Budget Amounts

Report Basis: 1

1 - Cash

3 - Only G/L Accounts without Budget Amounts

2 - Modified Accrual

Report Thru: 03/2014

3 - Full Accrual

Save Report: Y

Comment:

FUND Range From 1 Thru 21

DEPT Range From 1 Thru 711

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	Percent of Year		<u>25% % of BDG</u>
			<u>Year To Date</u>	<u>Budget</u>	
1 DEPT Commissioners					
----- EXPENDITURES -----					
01-001-000-0000-6101 Salaries		33,050.40	33,050.40	143,220.00	23
01-001-000-0000-6108 Meals (Not Overnight)		0.00	0.00	20.00	0
01-001-000-0000-6124 Medicare- Employer 1.45%		419.52	419.52	1,900.00	22
01-001-000-0000-6149 Employer Deduct Contribution- Veba		8,256.00	8,256.00	8,256.00	100
01-001-000-0000-6150 Health Insurance- Employer		11,250.00	11,250.00	45,000.00	25
01-001-000-0000-6152 Life Insurance- Employer		78.00	78.00	370.00	21
01-001-000-0000-6162 Pera- Dcp 5%		1,652.40	1,652.40	7,160.00	23
01-001-000-0000-6205 Postage		11.50	11.50	300.00	4
01-001-000-0000-6230 Printing, Publishing & Adv		694.74	694.74	2,500.00	28
01-001-000-0000-6241 Registration Fee		2,410.00	2,410.00	3,800.00	63
01-001-000-0000-6250 Telephone		826.85	826.85	2,400.00	34
01-001-000-0000-6330 Transportation & Travel & Parking		5,392.32	5,392.32	15,000.00	36
01-001-000-0000-6332 Hotel / Motel Lodging		2,051.79	2,051.79	3,000.00	68
01-001-000-0000-6340 Meals (Overnight)		167.99	167.99	200.00	84
01-001-000-0000-6352 Insurance		1,476.00	1,476.00	1,476.00	100
01-001-000-0000-6353 Workers Compensation Insurance		936.00	936.00	936.00	100
01-001-000-0000-6405 Office & Computer Supplies		328.21	328.21	750.00	44
01-001-000-0000-6511 Gas And Oil		56.91	56.91	100.00	57
01-001-000-0000-6625 Office Equipment		86.71	86.71	2,000.00	4
1 DEPT Totals Commissioners					
	Revenue				
	Expend.	69,145.34	69,145.34	238,388.00	29
	Net	69,145.34	69,145.34	238,388.00	29

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter</u> <u>To Date</u>	<u>Year</u> <u>To Date</u>	Percent of Year	
				<u>Budget</u>	<u>% of</u> <u>BDG</u>
12 DEPT Court Administration					25%
----- REVENUES -----					
01-012-000-0000-5512 Costs Of Prosecution		934.00-	934.00-	0.00	0
01-012-000-0000-5603 Child Support Motion Fee		20.00-	20.00-	0.00	0
01-012-000-0000-5840 Misc Receipts		474.23-	474.23-	100.00-	474
----- EXPENDITURES -----					
01-012-000-0000-6205 Postage		82.24-	82.24-	100.00	-82-
01-012-000-0000-6232 Attorney Services		14,595.11	14,595.11	100,000.00	15
01-012-000-0000-6250 Telephone		205.92	205.92	0.00	0
01-012-000-0000-6252 Witnesses		60.00	60.00	5,000.00	1
12 DEPT Totals Court Administration		Revenue 1,428.23-	1,428.23-	100.00-	428
		Expend. 14,778.79	14,778.79	105,100.00	14
		Net 13,350.56	13,350.56	105,000.00	13

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

1 FUND General Fund

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
40 DEPT Auditor					
----- REVENUES -----					
01-040-000-0000-5076 Judgement Costs		0.00	0.00	13,000.00-	0
01-040-000-0000-5081 Mortgage Registry- 3%		1,047.96-	1,047.96-	9,000.00-	12
01-040-000-0000-5115 Auctioneers Licenses		40.00-	40.00-	120.00-	33
01-040-000-0000-5116 1/2 Beer License		0.00	0.00	250.00-	0
01-040-000-0000-5119 Liquor Licenses		2,050.00-	2,050.00-	52,000.00-	4
01-040-000-0000-5124 Fireworks Permit		0.00	0.00	10.00-	0
01-040-000-0000-5125 Precious Metal Licenses		0.00	0.00	50.00-	0
01-040-000-0000-5132 Cigarette License Fees		1,550.00-	1,550.00-	1,700.00-	91
01-040-000-0000-5517 Fees For Services		769.43-	769.43-	2,500.00-	31
01-040-000-0000-5518 Tax Search Ms 297.14		55.00-	55.00-	250.00-	22
01-040-000-0000-5519 Lien Release Ditch & Hwy		45.00-	45.00-	250.00-	18
01-040-000-0000-5590 Auditor Fee- Clerical FTS Sales & Fees		30,000.00-	30,000.00-	30,000.00-	100
01-040-000-0000-5840 Misc Receipts		10.96-	10.96-	2,500.00-	0
01-040-000-0000-5868 Tint Rmb From Schools/City/Town		144.84-	144.84-	6,500.00-	2
----- EXPENDITURES -----					
01-040-000-0000-6101 Salaries- Full Time		61,187.18	61,187.18	256,058.00	24
01-040-000-0000-6108 Meals (Not Overnight)		7.18	7.18	200.00	4
01-040-000-0000-6109 Overtime- Salaries		81.67	81.67	1,000.00	8
01-040-000-0000-6124 Medicare- Employer 1.45%		869.48	869.48	3,730.00	23
01-040-000-0000-6149 Employer Deduct Contribution- Veba		3,666.60	3,666.60	5,033.00	73
01-040-000-0000-6150 Health Insurance- Employer		10,462.38	10,462.38	40,770.00	26
01-040-000-0000-6152 Life Insurance- Employer		61.98	61.98	240.00	26
01-040-000-0000-6154 Long Term Disability- Employer		58.71	58.71	243.00	24
01-040-000-0000-6159 Pera 7.25%		4,442.04	4,442.04	18,637.00	24
01-040-000-0000-6165 Fica- Employer 6.20%		3,717.77	3,717.77	15,950.00	23
01-040-000-0000-6205 Postage		4,713.86	4,713.86	17,000.00	28
01-040-000-0000-6230 Printing, Publishing & Adv		1,908.88	1,908.88	25,000.00	8
01-040-000-0000-6231 Services, Labor, Contracts		9,986.75	9,986.75	23,000.00	43
01-040-000-0000-6240 Dues		360.00	360.00	370.00	97
01-040-000-0000-6241 Registration Fee		0.00	0.00	750.00	0
01-040-000-0000-6250 Telephone		192.80	192.80	800.00	24
01-040-000-0000-6330 Transportation & Travel		207.92	207.92	1,000.00	21
01-040-000-0000-6332 Hotels / Motels		226.26	226.26	1,500.00	15
01-040-000-0000-6340 Meals (Overnight)		0.00	0.00	100.00	0

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>		<u>Status</u>	<u>Percent of Year</u>		<u>% of</u>
			<u>Quarter To Date</u>	<u>Year To Date</u>	
01-040-000-0000-6352	Insurance		1,507.51	1,507.51	1,476.00 102
01-040-000-0000-6353	Workers Compensation Insurance		622.00	622.00	622.00 100
01-040-000-0000-6405	Office & Computer Supplies		943.02	943.02	4,000.00 24
01-040-000-0000-6511	Gas And Oil		0.00	0.00	100.00 0
01-040-000-0000-6625	Office Equipment		905.00	905.00	3,000.00 30
----- REVENUES -----					
01-040-021-0000-5504	G & F License Fee		142.50-	142.50-	1,000.00- 14
01-040-021-0000-5520	Drivers License Fees		6,989.00-	6,989.00-	20,000.00- 35
01-040-021-0000-5522	Motor Vehicle License/Tab Fees		27,178.00-	27,178.00-	120,000.00- 23
01-040-021-0000-5523	DNR/License Tab Fees		2,836.50-	2,836.50-	22,000.00- 13
01-040-021-0000-5840	Misc Receipts		252.08-	252.08-	500.00- 50
----- EXPENDITURES -----					
01-040-021-0000-6101	Salaries- Full Time		19,425.63	19,425.63	98,162.00 20
01-040-021-0000-6102	Wages- Part Time		170.96	170.96	2,000.00 9
01-040-021-0000-6108	Meals (Not Overnight)		0.00	0.00	50.00 0
01-040-021-0000-6109	Overtime		1,164.05	1,164.05	4,000.00 29
01-040-021-0000-6124	Medicare- Employer 1.45%		254.06	254.06	1,511.00 17
01-040-021-0000-6149	Employer Deduct Contribution- Veba		858.00	858.00	3,000.00 29
01-040-021-0000-6150	Health Insurance- Employer		5,491.50	5,491.50	23,100.00 24
01-040-021-0000-6152	Life Insurance- Employer		31.20	31.20	125.00 25
01-040-021-0000-6159	Pera Co- Or 7.25%		1,492.77	1,492.77	7,555.00 20
01-040-021-0000-6165	Fica- Employer 6.20%		1,086.31	1,086.31	6,461.00 17
01-040-021-0000-6205	Postage		200.00	200.00	1,000.00 20
01-040-021-0000-6230	Printing, Publishing & Adv		391.00	391.00	500.00 78
01-040-021-0000-6231	Services, Labor, Contracts		275.88	275.88	500.00 55
01-040-021-0000-6240	Dues		253.00	253.00	300.00 84
01-040-021-0000-6241	Registration Fee		0.00	0.00	150.00 0
01-040-021-0000-6250	License Center- Phone		928.86	928.86	3,250.00 29
01-040-021-0000-6301	Rentals		2,250.00	2,250.00	9,000.00 25
01-040-021-0000-6330	Transportation/Travel/Parking (Own Auto)		0.00	0.00	100.00 0
01-040-021-0000-6340	Meals (Overnight)		0.00	0.00	50.00 0
01-040-021-0000-6352	Insurance		590.40	590.40	591.00 100
01-040-021-0000-6353	Workers Compensation Insurance		214.00	214.00	214.00 100
01-040-021-0000-6405	Office & Computer Supplies		252.18	252.18	1,200.00 21
01-040-021-0000-6511	Gas And Oil		0.00	0.00	50.00 0
01-040-021-0000-6625	Office Equipment & Other Equipment		0.00	0.00	1,200.00 0

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year		
				<u>Budget</u>	<u>25% % of BDG</u>	
40 DEPT	Totals Auditor	Revenue	73,111.27-	73,111.27-	281,630.00-	26
		Expend.	141,458.79	141,458.79	584,648.00	24
		Net	68,347.52	68,347.52	303,018.00	23

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

1 FUND General Fund

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of BDG</u>
41 DEPT Internal Audit					
----- EXPENDITURES -----					
01-041-000-0000-6231 Services, Labor, Etc		20,156.38	20,156.38	65,000.00	31
41 DEPT Totals Internal Audit	Revenue				
	Expend.	20,156.38	20,156.38	65,000.00	31
	Net	20,156.38	20,156.38	65,000.00	31

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

1 FUND General Fund

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
42 DEPT	Treasurer				
----- REVENUES -----					
01-042-000-0000-5079	3% State Deed Tax	997.01-	997,01-	5,000.00-	20
01-042-000-0000-5518	Tax Search Ms 297.14	55.00-	55,00-	100.00-	55
01-042-000-0000-5524	Handling Fee (Nfs Check)	85.00-	85,00-	400.00-	21
01-042-000-0000-5840	Misc Receipts	4,990.63-	4,990,63-	25,000.00-	20
01-042-000-0000-5868	Tint Rmb From Schools/City/Town	51.17-	51,17-	2,000.00-	3
----- EXPENDITURES -----					
01-042-000-0000-6101	Salaries- Full Time	32,988.60	32,988.60	142,302.00	23
01-042-000-0000-6108	Meals (Not Overnight)	7.40	7.40	40.00	19
01-042-000-0000-6109	Overtime- Salaries	0.00	0.00	500.00	0
01-042-000-0000-6124	Medicare- Employer 1.45%	427.08	427.08	2,137.00	20
01-042-000-0000-6148	Employer Deduct Contribution- HSA	782.00	782.00	3,128.00	25
01-042-000-0000-6149	Employer Deduct Contribution- Veba	2,250.00	2,250.00	3,000.00	75
01-042-000-0000-6150	Health Insurance- Employer	9,225.00	9,225.00	36,900.00	25
01-042-000-0000-6152	Life Insurance- Employer	37.50	37.50	150.00	25
01-042-000-0000-6159	Pera 7.25%	2,391.64	2,391.64	10,679.00	22
01-042-000-0000-6165	Fica- Employer 6.20%	1,826.11	1,826.11	9,136.00	20
01-042-000-0000-6205	Postage	1,392.70	1,392.70	6,000.00	23
01-042-000-0000-6231	Services, Labor, Contracts	2,444.00	2,444.00	3,000.00	81
01-042-000-0000-6240	Dues	360.00	360.00	400.00	90
01-042-000-0000-6241	Registration Fee	300.00	300.00	400.00	75
01-042-000-0000-6250	Telephone	112.62	112.62	500.00	23
01-042-000-0000-6330	Transportation & Travel	175.44	175.44	300.00	58
01-042-000-0000-6332	Hotel / Motel Lodging	452.52	452.52	900.00	50
01-042-000-0000-6340	Meals (Overnight)	48.39	48.39	100.00	48
01-042-000-0000-6352	Insurance	885.60	885.60	886.00	100
01-042-000-0000-6353	Workers Compensation Insurance	320.00	320.00	320.00	100
01-042-000-0000-6405	Office & Computer Supplies	429.70-	429,70-	10,000.00	-4-
01-042-000-0000-6511	Gas And Oil	0.00	0.00	50.00	0
01-042-000-0000-6625	Office Equipment	2,715.00	2,715.00	0.00	0
42 DEPT	Totals Treasurer				
	Revenue	6,178.81-	6,178.81-	32,500.00-	19
	Expend.	58,711.90	58,711.90	230,828.00	25
	Net	52,533.09	52,533.09	198,328.00	26

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

1 FUND General Fund

Account Number	Status	Quarter To Date	Year To Date	Percent of Year	
				Budget	% of BDG
43 DEPT Assessor					
----- REVENUES -----					
01-043-000-0000-5526	Assessor Township Assessment	147,231.00-	147,231.00-	158,058.00-	93
01-043-000-0000-5840	Misc Receipts	35.16-	35.16-	4,100.00-	1
01-043-000-0000-5860	Technology Funds	0.00	0.00	20,823.00-	0
----- EXPENDITURES -----					
01-043-000-0000-6101	Salaries- Full Time	121,489.10	121,489.10	510,890.00	24
01-043-000-0000-6108	Meals (Not Overnight)	45.80	45.80	200.00	23
01-043-000-0000-6109	Overtime- Salaries	0.00	0.00	100.00	0
01-043-000-0000-6124	Medicare- Employer 1.45%	1,607.46	1,607.46	7,412.00	22
01-043-000-0000-6148	Employer Deduct Contribution- HSA	4,692.00	4,692.00	6,256.00	75
01-043-000-0000-6149	Employer Deduct Contribution- Veba	4,262.70	4,262.70	16,545.00	26
01-043-000-0000-6150	Health Insurance- Employer	29,587.59	29,587.59	117,271.00	25
01-043-000-0000-6152	Life Insurance- Employer	149.28	149.28	600.00	25
01-043-000-0000-6154	Long Term Disability- Employer	83.73	83.73	345.00	24
01-043-000-0000-6159	Pera Co- Or 7.25%	8,609.53	8,609.53	37,047.00	23
01-043-000-0000-6165	Fica- Employer 6.20%	6,873.28	6,873.28	31,691.00	22
01-043-000-0000-6205	Postage	4,329.99	4,329.99	9,000.00	48
01-043-000-0000-6208	Training/Education	3,177.34	3,177.34	3,000.00	106
01-043-000-0000-6230	Printing, Publishing & Adv	225.72	225.72	7,000.00	3
01-043-000-0000-6231	Services, Labor, Contracts	735.79	735.79	3,000.00	25
01-043-000-0000-6232	Attorney Services	3,735.27	3,735.27	5,000.00	75
01-043-000-0000-6240	Dues & License Renewal	945.00	945.00	1,600.00	59
01-043-000-0000-6250	Telephone	1,202.07	1,202.07	4,800.00	25
01-043-000-0000-6272	Physical Examinations	0.00	0.00	400.00	0
01-043-000-0000-6302	Car Maintenance	812.98	812.98	1,800.00	45
01-043-000-0000-6330	Transportation & Travel & Parking	111.08	111.08	500.00	22
01-043-000-0000-6332	Hotel / Motel Lodging	0.00	0.00	1,800.00	0
01-043-000-0000-6340	Meals (Overnight)	0.00	0.00	500.00	0
01-043-000-0000-6352	Insurance	5,534.00	5,534.00	5,534.00	100
01-043-000-0000-6353	Workers Compensation Insurance	4,430.00	4,430.00	4,430.00	100
01-043-000-0000-6359	Wrecker Service	75.00	75.00	200.00	38
01-043-000-0000-6360	GIS Mapping	0.00	0.00	1,000.00	0
01-043-000-0000-6374	Auto & Trailer License	80.00	80.00	100.00	80
01-043-000-0000-6405	Office, Film & Computer Supplies	1,222.80	1,222.80	5,500.00	22
01-043-000-0000-6511	Gas And Oil	1,571.07	1,571.07	6,500.00	24

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDC</u>	
01-043-000-0000-6590	Repair & Maintenance Supplies	0.00	0.00	100.00	0	
01-043-000-0000-6620	Auto, Trailers, Snowmobiles	18,124.25	18,124.25	10,000.00	181	
01-043-000-0000-6625	Office Equipment	0.00	0.00	6,300.00	0	
43 DEPT	Totals Assessor	Revenue	147,266.16	147,266.16	182,981.00	80
		Expend.	223,712.83	223,712.83	806,421.00	28
		Net	76,446.67	76,446.67	623,440.00	12

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
44 DEPT Central Services					
----- REVENUES -----					
01-044-000-0000-5403 Cost Allocation Reimbursement		22,999.00-	22,999.00-	135,000.00-	17
01-044-000-0000-5791 Interest Income		118,982.70-	118,982.70-	330,000.00-	36
01-044-000-0000-5840 Misc Receipts		182.13-	182.13-	25,000.00-	1
01-044-000-0000-5947 Transfer In From Other Funds		14,632.64-	14,632.64-	0.00	0
----- EXPENDITURES -----					
01-044-000-0000-6101 Salaries- Full Time		2,455.95	2,455.95	13,744.00	18
01-044-000-0000-6102 Wages- Part Time		1,219.68	1,219.68	7,000.00	17
01-044-000-0000-6124 Medicare- Employer 1.45%		52.43	52.43	200.00	26
01-044-000-0000-6149 Employer Deduct Contribution-Veba		350.00	350.00	670.00	52
01-044-000-0000-6150 Health Insurance- Employer		506.25	506.25	3,690.00	14
01-044-000-0000-6152 Life Insurance- Employer		3.90	3.90	22.00	18
01-044-000-0000-6154 Long Term Disability- Employer		5.75	5.75	34.00	17
01-044-000-0000-6159 Pera Co- Or 7.25%		246.43	246.43	1,000.00	25
01-044-000-0000-6165 Fica- Employer 6.20%		224.05	224.05	855.00	26
01-044-000-0000-6208 In Service Training/Education		395.00	395.00	7,500.00	5
01-044-000-0000-6230 Printing, Publishing & Adv		0.00	0.00	500.00	0
01-044-000-0000-6231 Services, Labor, Contracts		40,127.62	40,127.62	85,000.00	47
01-044-000-0000-6240 Central Svcs Dues		11,472.00	11,472.00	14,000.00	82
01-044-000-0000-6250 Telephone		12.30	12.30	200.00	6
01-044-000-0000-6299 Employee Training		100.00	100.00	4,500.00	2
01-044-000-0000-6330 Central Svcs Transport & Travel (CAC)		0.00	0.00	400.00	0
01-044-000-0000-6350 Central Svcs Per Diem (Cac)		0.00	0.00	100.00	0
01-044-000-0000-6352 Insurance		15,470.00	15,470.00	15,470.00	100
01-044-000-0000-6353 Workers Compensation Insurance		27.00	27.00	31.00	87
01-044-000-0000-6404 Misc. Supplies		0.00	0.00	1,000.00	0
01-044-000-0000-6405 Office & Computer Supplies		786.51-	786.51-	5,000.00	-16-
01-044-000-0000-6600 Capital Outlay		275,906.84	275,906.84	0.00	0
01-044-000-0000-6625 Office Equipment & Other Equipment		0.00	0.00	2,500.00	0
01-044-000-0000-6829 Right of Way Purchase		55,000.00	55,000.00	0.00	0
01-044-000-0000-6844 MN Rural Counties Caucus		0.00	0.00	2,100.00	0
01-044-000-0000-6845 Assoc of MN Counties		0.00	0.00	9,372.00	0
01-044-000-0000-6846 Arrowhead Counties approp		0.00	0.00	2,750.00	0
01-044-046-0000-6625 Telephone System Equipment		282.00	282.00	4,000.00	7
01-044-048-0000-6205 Postage		4,160.73	4,160.73	2,000.00	208

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

1 FUND General Fund

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year	
				<u>Budget</u>	<u>% of BDG</u>
01-044-048-0000-6301 Postage Rentals		1,131.12	1,131.12	2,260.00	50
----- REVENUES -----					
01-044-049-0000-5840 Wellness Grant Receipts		1,900.00-	1,900.00-	0.00	0
01-044-100-0000-5001 Property Taxes - Current		0.00	0.00	5,527,305.00-	0
01-044-100-0000-5060 Mobile Home - Current		0.00	0.00	10,000.00-	0
01-044-100-0000-5065 Severed Mineral - Current		0.00	0.00	2,500.00-	0
01-044-100-0000-5067 Industrial Minerals- Current		0.00	0.00	400.00-	0
01-044-100-0000-5070 Penalty - Current		0.00	0.00	25,000.00-	0
01-044-100-0000-5071 Penalty & Interest - Delinquent		0.00	0.00	45,000.00-	0
01-044-100-0000-5250 1/2 Light & Power- Intergovernmental		0.00	0.00	7,000.00-	0
01-044-100-0000-5251 In Lieu Apportionments & Receipts		0.00	0.00	906,112.00-	0
01-044-100-0000-5252 Forf Tax Sales Apportionment		107,646.42-	107,646.42-	150,000.00-	72
----- EXPENDITURES -----					
01-044-100-0000-6800 Tax Abatements		0.00	0.00	61,650.00	0
01-044-196-0000-6625 Recorders Equip Fund Exp. 357.18 Subd 4		10,652.99	10,652.99	0.00	0
01-044-904-0000-6231 Flex Services, Labor, Etc		1,029.40	1,029.40	5,000.00	21
01-044-904-0000-6360 Flex Plan Withdrawals		30,716.95	30,716.95	0.00	0
44 DEPT Totals Central Services	Revenue	266,342.89-	266,342.89-	7,163,317.00-	4
	Expend.	450,761.88	450,761.88	252,548.00	178
	Net	184,418.99	184,418.99	6,910,769.00-	3-

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

1 FUND General Fund

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of BDG</u>
45 DEPT Motor Pool					
----- REVENUES -----					
01-045-000-0000-5840 Misc Receipts		0.00	0.00	30,000.00-	0
----- EXPENDITURES -----					
01-045-000-0000-6101 Salaries- Full Time		3,481.27	3,481.27	14,544.00	24
01-045-000-0000-6109 Salaries- Overtime		7.82	7.82	50.00	16
01-045-000-0000-6124 Medicare- Employer 1.45%		44.60	44.60	212.00	21
01-045-000-0000-6149 Employer Deduct Contribution-Veba		175.00	175.00	300.00	58
01-045-000-0000-6150 Health Insurance- Employer		438.75	438.75	2,430.00	18
01-045-000-0000-6152 Life Insurance- Employer		2.93	2.93	15.00	20
01-045-000-0000-6154 Long Term Disability- Employer		3.72	3.72	16.00	23
01-045-000-0000-6159 Pera Co- Or 7.25%		182.16	182.16	1,058.00	17
01-045-000-0000-6165 Fica- Employer 6.20%		190.71	190.71	905.00	21
01-045-000-0000-6250 Telephone		0.00	0.00	170.00	0
01-045-000-0000-6302 Car Maintenance		1,722.74	1,722.74	8,500.00	20
01-045-000-0000-6352 Insurance		4,882.00	4,882.00	4,882.00	100
01-045-000-0000-6353 Workers Comp Insurance		379.00	379.00	379.00	100
01-045-000-0000-6358 Car Wash		0.00	0.00	100.00	0
01-045-000-0000-6374 Auto & Trailer License, Taxes, Plates		192.00	192.00	200.00	96
01-045-000-0000-6405 Office & Computer Supplies		0.00	0.00	200.00	0
01-045-000-0000-6512 Car Equipment		97.99	97.99	300.00	33
01-045-000-0000-6621 Auto Replacement		0.00	0.00	19,000.00	0
45 DEPT Totals Motor Pool		0.00	0.00	30,000.00-	0
	Revenue				
	Expend.	11,800.69	11,800.69	53,261.00	22
	Net	11,800.69	11,800.69	23,261.00	51

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Budget</u>	<u>Percent of Year</u>	<u>25% % of BDG</u>
49 DEPT	Information Technologies					
----- REVENUES -----						
01-049-000-0000-5525	Label & Listing Sales	326.56-	326.56-	600.00-		54
01-049-000-0000-5868	Tint Rmb From Schools/City/Town	1.65-	1.65-	100.00-		2
----- EXPENDITURES -----						
01-049-000-0000-6101	Salaries- Full Time	51,960.47	51,960.47	277,364.00		19
01-049-000-0000-6108	Meals (Not Overnight)	0.00	0.00	100.00		0
01-049-000-0000-6124	Medicare- Employer 1.45%	736.28	736.28	4,023.00		18
01-049-000-0000-6149	Employer Deduct Contribution- Veba	5,000.00	5,000.00	5,000.00		100
01-049-000-0000-6150	Health Insurance- Employer	8,100.00	8,100.00	40,500.00		20
01-049-000-0000-6152	Life Insurance- Employer	53.10	53.10	275.00		19
01-049-000-0000-6154	Long Term Disability- Employer	133.74	133.74	694.00		19
01-049-000-0000-6159	Pera Co- Or 7.25%	3,767.05	3,767.05	20,109.00		19
01-049-000-0000-6165	Fica- Employer 6.20%	3,148.30	3,148.30	17,203.00		18
01-049-000-0000-6205	Postage	5.32	5.32	150.00		4
01-049-000-0000-6208	Training/Education	783.37	783.37	6,500.00		12
01-049-000-0000-6230	Printing & Advertising	295.00	295.00	100.00		295
01-049-000-0000-6231	Programming, Services, Contracts	17,706.06	17,706.06	132,181.00		13
01-049-000-0000-6250	Telephone	133.34	133.34	600.00		22
01-049-000-0000-6330	Transportation & Travel & Parking	81.88	81.88	1,200.00		7
01-049-000-0000-6332	Hotels / Motels	0.00	0.00	1,430.00		0
01-049-000-0000-6340	Meals (Overnight)	0.00	0.00	300.00		0
01-049-000-0000-6352	Insurance	1,476.00	1,476.00	1,476.00		100
01-049-000-0000-6353	Workers Compensation Insurance	593.00	593.00	593.00		100
01-049-000-0000-6402	Computer Supplies & Software	319.64	319.64	6,500.00		5
01-049-000-0000-6405	Office Supplies (Non Computer)	247.39	247.39	1,500.00		16
01-049-000-0000-6625	As/400, Computer & Office Equip.	0.00	0.00	14,000.00		0
49 DEPT	Totals Information Technologies	Revenue	328.21-	328.21-	700.00-	47
		Expend.	94,539.94	94,539.94	531,798.00	18
		Net	94,211.73	94,211.73	531,098.00	18

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

1 FUND General Fund

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
52 DEPT Administration/Personnel Dept					
----- EXPENDITURES -----					
01-052-000-0000-6101 Salaries- Full Time		51,196.49	51,196.49	213,608.00	24
01-052-000-0000-6108 Meals (Not Overnight)		0.00	0.00	100.00	0
01-052-000-0000-6109 Overtime		0.00	0.00	100.00	0
01-052-000-0000-6124 Medicare- Employer 1.45%		721.23	721.23	3,101.00	23
01-052-000-0000-6149 Employer Deduct Contribution- Veba		2,537.50	2,537.50	6,974.00	36
01-052-000-0000-6150 Health Insurance- Employer		5,501.25	5,501.25	36,300.00	15
01-052-000-0000-6152 Life Insurance- Employer		42.38	42.38	205.00	21
01-052-000-0000-6154 Long Term Disability- Employer		72.30	72.30	289.00	25
01-052-000-0000-6159 Pera Co- Or 7.25%		3,076.41	3,076.41	15,487.00	20
01-052-000-0000-6165 Fica- Employer 6.20%		3,083.82	3,083.82	13,259.00	23
01-052-000-0000-6205 Postage		90.07	90.07	500.00	18
01-052-000-0000-6208 Training/Education		497.96	497.96	4,500.00	11
01-052-000-0000-6230 Printing, Publishing & Adv		0.00	0.00	1,500.00	0
01-052-000-0000-6231 Services, Labor, Contracts		483.00	483.00	2,500.00	19
01-052-000-0000-6232 Attorney Services		7,440.31	7,440.31	24,000.00	31
01-052-000-0000-6234 Background Check Fee		686.75	686.75	1,500.00	46
01-052-000-0000-6240 Dues & Subscriptions		150.00	150.00	1,000.00	15
01-052-000-0000-6241 Registration Fee		983.00	983.00	2,000.00	49
01-052-000-0000-6250 Telephone		401.26	401.26	1,600.00	25
01-052-000-0000-6330 Transportation & Travel & Parking		285.77	285.77	750.00	38
01-052-000-0000-6332 Hotels / Motels		99.33	99.33	1,800.00	6
01-052-000-0000-6340 Meals(Overnight)		0.00	0.00	250.00	0
01-052-000-0000-6352 Insurance		1,180.80	1,180.80	1,181.00	100
01-052-000-0000-6353 Workers Compensation Insurance		490.00	490.00	490.00	100
01-052-000-0000-6405 Office & Computer Supplies		300.81	300.81	2,500.00	12
01-052-000-0000-6511 Gas And Oil		53.28	53.28	700.00	8
01-052-000-0000-6625 Office Equipment		3,639.34	3,639.34	3,000.00	121
52 DEPT Totals Administration/Personnel Dept					
	Revenue				
	Expend.	83,013.06	83,013.06	339,194.00	24
	Net	83,013.06	83,013.06	339,194.00	24

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

1 FUND General Fund

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of BDG</u>
60 DEPT Elections					
----- REVENUES -----					
01-060-000-0000-5521 Election Filing Fees		0.00	0.00	800.00-	0
01-060-000-0000-5840 Misc Receipts		0.00	0.00	500.00-	0
----- EXPENDITURES -----					
01-060-000-0000-6101 Salaries- Full Time		0.00	0.00	23,504.00	0
01-060-000-0000-6108 Meals(Not Overnight)		0.00	0.00	50.00	0
01-060-000-0000-6109 Overtime		0.00	0.00	9,000.00	0
01-060-000-0000-6124 Medicare- Employer 1.45%		0.00	0.00	472.00	0
01-060-000-0000-6159 Pera Co- Or 7.25%		0.00	0.00	2,357.00	0
01-060-000-0000-6165 Fica- Employer 6.20%		0.00	0.00	2,018.00	0
01-060-000-0000-6205 Postage		0.48	0.48	2,500.00	0
01-060-000-0000-6230 Printing, Publishing & Adv		49.50	49.50	7,000.00	1
01-060-000-0000-6231 Services, Labor, Contracts		0.00	0.00	18,760.00	0
01-060-000-0000-6301 Rentals		0.00	0.00	150.00	0
01-060-000-0000-6330 Transportation & Travel		0.00	0.00	200.00	0
01-060-000-0000-6340 Meals		137.50	137.50	150.00	92
01-060-000-0000-6353 Workers Compensation Insurance		45.00	45.00	45.00	100
01-060-000-0000-6405 Office & Computer Supplies		481.47	481.47	2,500.00	19
01-060-000-0000-6406 Ballots & Programming		597.85	597.85	58,000.00	1
01-060-000-0000-6630 Miscellaneous- Capital Outlay		0.00	0.00	2,000.00	0
60 DEPT Totals Elections		0.00	0.00	1,300.00-	0
	Revenue				
	Expend.	1,311.80	1,311.80	128,706.00	1
	Net	1,311.80	1,311.80	127,406.00	1

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

1 FUND General Fund

<u>Account Number</u>		<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
90 DEPT	Attorney					
----- REVENUES -----						
01-090-000-0000-5512	Costs Of Prosecution		1,220.00-	1,220.00-	18,017.00-	7
01-090-000-0000-5527	Asst Co Atty & Sec Fees		5,418.75-	5,418.75-	27,488.00-	20
01-090-000-0000-5612	Drug & Forfeiture Ms387.213		1,080.95-	1,080.95-	7,037.00-	15
01-090-000-0000-5840	Misc Receipts		304.43-	304.43-	1,672.00-	18
----- EXPENDITURES -----						
01-090-000-0000-6101	Salaries- Full Time		144,375.17	144,375.17	627,499.00	23
01-090-000-0000-6108	Meals Reimbursed (Taxable)		0.00	0.00	100.00	0
01-090-000-0000-6124	Medicare- Employer 1.45%		1,988.36	1,988.36	9,115.00	22
01-090-000-0000-6149	Employer Deduct Contribution-Veba		11,256.00	11,256.00	14,256.00	79
01-090-000-0000-6150	Health Insurance- Employer		23,250.00	23,250.00	93,000.00	25
01-090-000-0000-6152	Life Insurance- Employer		128.10	128.10	475.00	27
01-090-000-0000-6154	Long Term Disability- Employer		140.70	140.70	898.00	16
01-090-000-0000-6159	Pera Co- Or 7.25%		10,467.18	10,467.18	45,566.00	23
01-090-000-0000-6165	Fica- Employer 6.20%		8,502.01	8,502.01	38,973.00	22
01-090-000-0000-6205	Postage		472.13	472.13	1,073.00	44
01-090-000-0000-6208	Training/Education		0.00	0.00	2,149.00	0
01-090-000-0000-6213	Drug & Forfeiture Ms387.213		4,878.87	4,878.87	2,037.00	240
01-090-000-0000-6230	Printing, Publishing & Adv		268.20	268.20	691.00	39
01-090-000-0000-6231	Services, Labor, Contracts		0.00	0.00	1,000.00	0
01-090-000-0000-6232	Attorney Services		0.00	0.00	1,000.00	0
01-090-000-0000-6233	Court Reporter Services		0.00	0.00	347.00	0
01-090-000-0000-6234	Co Sheriff Services		2,680.45	2,680.45	5,396.00	50
01-090-000-0000-6240	Dues & Registration Fee		40.56	40.56	5,851.00	1
01-090-000-0000-6250	Telephone		387.39	387.39	1,532.00	25
01-090-000-0000-6252	Witness/Expert Witness & Travel Expense		0.00	0.00	1,000.00	0
01-090-000-0000-6260	Professional Consulting		0.00	0.00	500.00	0
01-090-000-0000-6330	Transportation & Travel & Parking		0.00	0.00	222.00	0
01-090-000-0000-6332	Hotels / Motels		0.00	0.00	310.00	0
01-090-000-0000-6333	Crt.Related Travel Expenses		229.02	229.02	502.00	46
01-090-000-0000-6340	Meals		0.00	0.00	20.00	0
01-090-000-0000-6352	Insurance		2,952.00	2,952.00	2,952.00	100
01-090-000-0000-6353	Workers Compensation Insurance		1,368.00	1,368.00	1,368.00	100
01-090-000-0000-6405	Office & Computer Supplies		8,546.94	8,546.94	9,496.00	90
01-090-000-0000-6406	Law Publ. & Subscriptions		5,670.50	5,670.50	12,735.00	45

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Budget</u>	<u>Percent of Year</u>	<u>25% % of BDG</u>
01-090-000-0000-6625	Office Equipment	1,701.58	1,701.58	4,364.00		39
90 DEPT	Totals Attorney	8,024.13	8,024.13	54,214.00		15
	Revenue	229,303.16	229,303.16	884,427.00		26
	Expend.					
	Net	221,279.03	221,279.03	830,213.00		27

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

1 FUND General Fund

Account Number	Status	Quarter To Date	Year To Date	Percent of Year	
				Budget	% of BDG
100 DEPT Recorder					
----- REVENUES -----					
01-100-000-0000-5186 Equip. Fund (Ms 357.18 Sd.4)		0.00	0.00	135,000.00-	0
01-100-000-0000-5529 County Recorder Fees		41,471.00-	41,471.00-	99,231.00-	42
01-100-000-0000-5840 Misc Receipts		4,072.35-	4,072.35-	5,000.00-	81
01-100-000-0000-5860 Technology Funds In		0.00	0.00	41,733.00-	0
----- EXPENDITURES -----					
01-100-000-0000-6101 Salaries- Full Time		44,931.85	44,931.85	182,500.00	25
01-100-000-0000-6109 Overtime- Salaries		0.00	0.00	450.00	0
01-100-000-0000-6124 Medicare- Employer 1.45%		650.27	650.27	2,750.00	24
01-100-000-0000-6149 Employer Deduct Contribution- Veba		1,666.70	1,666.70	4,185.00	40
01-100-000-0000-6150 Health Insurance- Employer		6,412.59	6,412.59	38,670.00	17
01-100-000-0000-6152 Life Insurance- Employer		46.38	46.38	225.00	21
01-100-000-0000-6154 Long Term Disability- Employer		1.47	1.47	15.00	10
01-100-000-0000-6159 Pera Co- Or 7.25%		3,257.58	3,257.58	13,944.00	23
01-100-000-0000-6165 Fica- Employer 6.20%		2,780.39	2,780.39	11,957.00	23
01-100-000-0000-6205 Postage		374.66	374.66	1,900.00	20
01-100-000-0000-6208 Training/Education		0.00	0.00	500.00	0
01-100-000-0000-6230 Printing, Publishing & Adv		32.00	32.00	400.00	8
01-100-000-0000-6231 Services, Labor, Contracts		495.00	495.00	2,000.00	25
01-100-000-0000-6240 Dues		360.00	360.00	500.00	72
01-100-000-0000-6241 Registration Fee		0.00	0.00	200.00	0
01-100-000-0000-6250 Telephone		113.61	113.61	1,000.00	11
01-100-000-0000-6272 Physical Examinations		0.00	0.00	200.00	0
01-100-000-0000-6301 Rentals		235.00	235.00	300.00	78
01-100-000-0000-6311 Sales Tax		275.16	275.16	1,100.00	25
01-100-000-0000-6312 Sales Tax Adjustment		0.84	0.84	0.00	0
01-100-000-0000-6330 Transportation & Travel		0.00	0.00	100.00	0
01-100-000-0000-6332 Hotels / Motels		0.00	0.00	100.00	0
01-100-000-0000-6340 Meals		0.00	0.00	100.00	0
01-100-000-0000-6352 Insurance		1,180.80	1,180.80	1,181.00	100
01-100-000-0000-6353 Workers Compensation Insurance		437.00	437.00	437.00	100
01-100-000-0000-6405 Office & Computer Supplies		214.93	214.93	2,000.00	11
01-100-000-0000-6511 Gas And Oil		0.00	0.00	100.00	0
01-100-000-0000-6625 Office Equipment		0.00	0.00	300.00	0

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

1 FUND General Fund

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
100 DEPT	Totals Recorder	Revenue 45,543.35-	45,543.35-	280,964.00-	16
		Expend. 63,466.23	63,466.23	267,114.00	24
		Net 17,922.88	17,922.88	13,850.00-	129-

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

1 FUND General Fund

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
110 DEPT Courthouse Maintenance					
----- REVENUES -----					
01-110-000-0000-5840 Misc Receipts		20,000.00-	20,000.00-	20,000.00-	100
----- EXPENDITURES -----					
01-110-000-0000-6101 Salaries- Full Time		25,388.26	25,388.26	107,024.00	24
01-110-000-0000-6102 Salaries- - Part Time		13,220.91	13,220.91	54,870.00	24
01-110-000-0000-6109 Overtime- Salaries		148.66	148.66	800.00	19
01-110-000-0000-6124 Medicare- Employer 1.45%		568.46	568.46	2,359.00	24
01-110-000-0000-6149 Employer Deduct Contribution- Veba		1,437.50	1,437.50	2,850.00	50
01-110-000-0000-6150 Health Insurance- Employer		5,872.50	5,872.50	23,085.00	25
01-110-000-0000-6152 Life Insurance- Employer		36.39	36.39	107.00	34
01-110-000-0000-6154 Long Term Disability- Employer		28.17	28.17	117.00	24
01-110-000-0000-6159 Pera Co- Or 7.25%		2,579.64	2,579.64	7,817.00	33
01-110-000-0000-6165 Fica- Employer 6.20%		2,430.52	2,430.52	10,087.00	24
01-110-000-0000-6208 Training/Education		0.00	0.00	200.00	0
01-110-000-0000-6230 Printing, Publishing & Adv		291.30	291.30	200.00	146
01-110-000-0000-6231 Services, Labor, Contracts		7,024.60	7,024.60	19,000.00	37
01-110-000-0000-6250 Phone		179.09	179.09	700.00	26
01-110-000-0000-6254 Utilities & Heating		16,028.75	16,028.75	52,000.00	31
01-110-000-0000-6255 Garbage		1,664.04	1,664.04	6,500.00	26
01-110-000-0000-6271 Inspection Fees		0.00	0.00	500.00	0
01-110-000-0000-6272 Physical Examinations		365.00	365.00	700.00	52
01-110-000-0000-6352 Insurance		2,508.47	2,508.47	2,494.00	101
01-110-000-0000-6353 Workers Compensation Insurance		9,385.00	9,385.00	9,385.00	100
01-110-000-0000-6374 Auto & Trailer		27.00	27.00	20.00	135
01-110-000-0000-6405 Office Supplies		96.26	96.26	150.00	64
01-110-000-0000-6422 Janitorial Supplies		3,993.16	3,993.16	17,000.00	23
01-110-000-0000-6511 Gas And Oil		819.75	819.75	800.00	102
01-110-000-0000-6590 Repair & Maintenance		2,395.51	2,395.51	9,000.00	27
01-110-000-0000-6610 Equipment		0.00	0.00	100.00	0
110 DEPT Totals Courthouse Maintenance					
	Revenue	20,000.00-	20,000.00-	20,000.00-	100
	Expend.	96,488.94	96,488.94	327,865.00	29
	Net	76,488.94	76,488.94	307,865.00	25

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Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of BDG</u>
111 DEPT Buildings					
----- EXPENDITURES -----					
01-111-000-0000-6605 Building & Structures		4,151.84	4,151.84	72,000.00	6
111 DEPT Totals Buildings	Revenue				
	Expend.	4,151.84	4,151.84	72,000.00	6
	Net	4,151.84	4,151.84	72,000.00	6

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
120 DEPT	Service Officer				
----- REVENUES -----					
01-120-000-0000-5301	Co. Veteran Service Grant	0.00	0.00	10,000.00-	0
01-120-000-0000-5840	Misc Receipts & Donations For Van Equip	0.94-	0.94-	200.00-	0
01-120-000-0000-5862	Co Service Officer Van Reimbursement	1,772.52-	1,772.52-	12,000.00-	15
----- EXPENDITURES -----					
01-120-000-0000-6101	Salaries- Full Time	11,879.71	11,879.71	51,819.00	23
01-120-000-0000-6108	Meals Reimbursed (Taxable)	0.00	0.00	100.00	0
01-120-000-0000-6124	Medicare- Employer 1.45%	160.23	160.23	754.00	21
01-120-000-0000-6149	Employer Deduct Contribution- Veba	1,000.00	1,000.00	1,000.00	100
01-120-000-0000-6150	Health Insurance- Employer	2,025.00	2,025.00	8,100.00	25
01-120-000-0000-6152	Life Insurance- Employer	15.60	15.60	62.00	25
01-120-000-0000-6154	Long Term Disability- Employer	31.32	31.32	130.00	24
01-120-000-0000-6159	Pera Co- Or 7.25%	861.27	861.27	3,761.00	23
01-120-000-0000-6165	Fica- Employer 6.20%	685.08	685.08	3,222.00	21
01-120-000-0000-6205	Postage	91.65	91.65	400.00	23
01-120-000-0000-6230	Printing, Publishing & Adv	886.00	886.00	50.00	772
01-120-000-0000-6240	Dues	100.00	100.00	200.00	50
01-120-000-0000-6241	Registration Fee	50.00	50.00	150.00	33
01-120-000-0000-6250	Telephone	160.98	160.98	800.00	20
01-120-000-0000-6300	Maintenance- Service Contracts	0.00	0.00	450.00	0
01-120-000-0000-6302	Car Maintenance	460.31	460.31	1,500.00	31
01-120-000-0000-6330	Transportation & Travel	212.00	212.00	800.00	27
01-120-000-0000-6332	Hotel / Motel Lodging	0.00	0.00	600.00	0
01-120-000-0000-6340	Meals	0.00	0.00	90.00	0
01-120-000-0000-6350	Per Diem	1,800.00	1,800.00	9,500.00	19
01-120-000-0000-6352	Insurance	673.20	673.20	673.00	100
01-120-000-0000-6353	Workers Compensation Insurance	108.00	108.00	108.00	100
01-120-000-0000-6374	Auto & Trailer License	16.00	16.00	0.00	0
01-120-000-0000-6405	Office & Computer Supplies	1,964.05	1,964.05	600.00	327
01-120-000-0000-6511	Gas And Oil	1,261.23	1,261.23	6,800.00	19
01-120-000-0000-6625	Office Equipment	367.90	367.90	0.00	0
120 DEPT	Totals Service Officer				
	Revenue	1,773.46-	1,773.46-	22,200.00-	8
	Expend.	24,809.53	24,809.53	91,669.00	27
	Net	23,036.07	23,036.07	69,469.00	33

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Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of BDG</u>
121 DEPT Housing & Redevelopment					
----- EXPENDITURES -----					
01-121-000-0000-6350 Per Diem		525.00	525.00	1,600.00	33
121 DEPT Totals Housing & Redevelopment	Revenue				
	Expend.	525.00	525.00	1,600.00	33
	Net	525.00	525.00	1,600.00	33

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

1 FUND General Fund

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Budget</u>	<u>Percent of Year % of BDG</u>
122 DEPT	Planning & Zoning				
----- REVENUES -----					
01-122-000-0000-5135	Planning & Zoning Permits	15,705.00-	15,705.00-	197,500.00-	8
01-122-000-0000-5302	Shoreland State Grant	10,786.00-	10,786.00-	10,786.00-	100
01-122-000-0000-5304	P&Z Wetland Conserv. State Grant	16,620.00-	16,620.00-	16,621.00-	100
01-122-000-0000-5840	Misc Receipts	23.39-	23.39-	0.00	0
01-122-000-0000-5842	Co Development Funds	0.00	0.00	25,000.00-	0
----- EXPENDITURES -----					
01-122-000-0000-6101	Salaries- Full Time	48,644.85	48,644.85	213,952.00	23
01-122-000-0000-6102	Salaries- Part Time	0.00	0.00	10,000.00	0
01-122-000-0000-6108	Meals Reimbursed (Taxable)	20.00	20.00	100.00	20
01-122-000-0000-6109	Overtime- Salaries	0.00	0.00	500.00	0
01-122-000-0000-6124	Medicare- Employer 1.45%	674.79	674.79	3,147.00	21
01-122-000-0000-6148	Employer Deduct Contribution- HSA	782.00	782.00	0.00	0
01-122-000-0000-6149	Employer Deduct Contribution- Veba	2,150.00	2,150.00	6,778.00	32
01-122-000-0000-6150	Health Insurance- Employer	10,841.25	10,841.25	43,365.00	25
01-122-000-0000-6152	Life Insurance- Employer	58.59	58.59	234.00	25
01-122-000-0000-6154	Long Term Disability- Employer	58.83	58.83	243.00	24
01-122-000-0000-6159	Pera Co- Or 7.25%	3,526.79	3,526.79	15,729.00	22
01-122-000-0000-6165	Fica- Employer 6.20%	2,885.13	2,885.13	13,457.00	21
01-122-000-0000-6205	Postage	709.60	709.60	3,000.00	24
01-122-000-0000-6208	Training/Education	694.00	694.00	2,000.00	35
01-122-000-0000-6230	Printing, Publishing & Adv	371.52	371.52	2,500.00	15
01-122-000-0000-6231	Services, Labor, Contracts, Programming	6,441.36	6,441.36	51,700.00	12
01-122-000-0000-6240	Dues	0.00	0.00	100.00	0
01-122-000-0000-6241	Registration Fee	0.00	0.00	150.00	0
01-122-000-0000-6250	Telephone	361.76	361.76	1,700.00	21
01-122-000-0000-6302	Car Maintenance	508.68	508.68	1,200.00	42
01-122-000-0000-6330	Transportation & Travel	0.00	0.00	400.00	0
01-122-000-0000-6332	Hotel / Motel Lodging	221.59	221.59	500.00	44
01-122-000-0000-6340	Meals	0.00	0.00	100.00	0
01-122-000-0000-6350	Per Diem	1,370.00	1,370.00	5,500.00	25
01-122-000-0000-6352	Insurance	1,628.80	1,628.80	1,629.00	100
01-122-000-0000-6353	Workers Compensation Insurance	1,149.00	1,149.00	1,149.00	100
01-122-000-0000-6356	License Fees	0.00	0.00	70.00	0
01-122-000-0000-6374	Auto & Trailer License, Taxes, Plates	32.00	32.00	50.00	64

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
01-122-000-0000-6405	Office, Computer, Film, & Field Supplies	1,233.59	1,233.59	3,000.00	41
01-122-000-0000-6511	Gas And Oil	232.24	232.24	1,500.00	15
01-122-000-0000-6625	Office Equipment	0.00	0.00	2,500.00	0
01-122-000-0000-6800	Misc. Promotional	0.00	0.00	250.00	0
01-122-000-0000-6820	Refunds & Reimbursements	519.00	519.00	0.00	0
----- REVENUES -----					
01-122-029-0000-5397	MPCA SSTS Upgrade Grant	37,900.00-	37,900.00-	0.00	0
01-122-029-0000-5840	MPCA SSTS Base Grant	20,000.00-	20,000.00-	20,000.00-	100
----- EXPENDITURES -----					
01-122-038-0000-6330	Boa/Pc Mileage	2,054.61	2,054.61	6,200.00	33
122 DEPT	Totals Planning & Zoning				
	Revenue	101,034.39-	101,034.39-	269,907.00-	37
	Expend.	87,169.98	87,169.98	392,703.00	22
	Net	13,864.41-	13,864.41-	122,796.00	11-

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Budget</u>	<u>Percent of Year</u>	<u>25% % of BDG</u>
123 DEPT	Coroner					
----- EXPENDITURES -----						
01-123-000-0000-6231	Coroner Fees	6,000.00	6,000.00	15,000.00		40
01-123-000-0000-6260	Autopsies- - Pathologist, Xrays, Etc	6,449.00	6,449.00	35,000.00		18
01-123-000-0000-6330	Transportation For Autoposy	3,500.00	3,500.00	8,000.00		44
123 DEPT	Totals Coroner					
	Revenue					
	Expend.	15,949.00	15,949.00	58,000.00		27
	Net	15,949.00	15,949.00	58,000.00		27

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

Account Number	Description	Status	Percent of Year		25% % of BDG
			Quarter To Date	Year To Date	
200 DEPT	Enforcement				
----- REVENUES -----					
01-200-000-0000-5307	Police State Aid- State Shared Revenue		0.00	0.00	120,000.00- 0
01-200-000-0000-5308	Police Officer Training		0.00	0.00	6,000.00- 0
01-200-000-0000-5530	County Sheriff Fees		6,936.86-	6,936.86-	22,000.00- 32
01-200-000-0000-5531	County Sheriff From Welfare		75.00-	75.00-	1,000.00- 8
01-200-000-0000-5532	County Sheriff Mileage		3,176.50-	3,176.50-	15,000.00- 21
01-200-000-0000-5533	Alarm System		2,130.00-	2,130.00-	3,000.00- 71
01-200-000-0000-5613	Cost Of Restitution		1,897.50-	1,897.50-	6,000.00- 32
01-200-000-0000-5840	Misc Receipts		1,511.73-	1,511.73-	13,000.00- 12
01-200-000-0000-5861	Insurance Proceeds/Reimbursements		418.63-	418.63-	4,000.00- 10
----- EXPENDITURES -----					
01-200-000-0000-6101	Salaries- Full Time		239,779.03	239,779.03	1,067,025.00 22
01-200-000-0000-6102	Salaries- - Part Time		0.00	0.00	3,000.00 0
01-200-000-0000-6108	Meals Reimbursed (Taxable)		0.00	0.00	500.00 0
01-200-000-0000-6109	Overtime- Salaries		7,715.62	7,715.62	45,000.00 17
01-200-000-0000-6110	Holiday Pay		16,831.80	16,831.80	56,000.00 30
01-200-000-0000-6124	Medicare- Employer 1.45%		3,697.53	3,697.53	15,850.00 23
01-200-000-0000-6149	Employer Deduct Contribution- Veba		2,000.00	2,000.00	2,000.00 100
01-200-000-0000-6150	Health Insurance- Employer		46,372.50	46,372.50	194,490.00 24
01-200-000-0000-6152	Life Insurance- Employer		251.40	251.40	1,300.00 19
01-200-000-0000-6154	Long Term Disability- Employer		46.29	46.29	500.00 9
01-200-000-0000-6159	Pera 14.4%		38,562.66	38,562.66	162,250.00 24
01-200-000-0000-6165	Fica- Employer 6.20%		1,428.05	1,428.05	6,500.00 22
01-200-000-0000-6205	Postage		525.94	525.94	2,200.00 24
01-200-000-0000-6230	Printing, Publishing & Adv		736.90	736.90	1,500.00 49
01-200-000-0000-6231	Services & Labor (Incl Contracts)		4,888.20	4,888.20	17,000.00 29
01-200-000-0000-6240	Dues		5,044.00	5,044.00	6,500.00 78
01-200-000-0000-6241	Registration Fee		0.00	0.00	600.00 0
01-200-000-0000-6250	Telephone		4,189.71	4,189.71	18,000.00 23
01-200-000-0000-6254	Utilities		1,162.40	1,162.40	2,400.00 48
01-200-000-0000-6260	Professional Consulting		0.00	0.00	1,000.00 0
01-200-000-0000-6272	Physical Examinations		0.00	0.00	1,200.00 0
01-200-000-0000-6302	Car Maintenance		4,836.42	4,836.42	36,000.00 13
01-200-000-0000-6314	Radio Maint		895.00	895.00	10,000.00 9
01-200-000-0000-6330	Transportation & Travel & Parking		0.00	0.00	200.00 0

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>		<u>Status</u>	Percent of Year		25%	
			<u>Quarter To Date</u>	<u>Year To Date</u>		<u>Budget</u>
01-200-000-0000-6332	Hotels / Motels		0.00	0.00	1,000.00	0
01-200-000-0000-6340	Meals		0.00	0.00	300.00	0
01-200-000-0000-6352	Insurance		51,687.00	51,687.00	49,632.00	104
01-200-000-0000-6353	Workers Compensation Insurance		32,182.00	32,182.00	32,604.00	99
01-200-000-0000-6359	Wrecker Service		965.03	965.03	4,500.00	21
01-200-000-0000-6374	Auto & Trailer License		15.00	15.00	1,500.00	1
01-200-000-0000-6405	Office Supplies		4,928.18	4,928.18	7,500.00	66
01-200-000-0000-6409	Deputy Supplies		3,844.76	3,844.76	10,000.00	38
01-200-000-0000-6410	Clothing Allowance		641.00	641.00	6,000.00	11
01-200-000-0000-6511	Gas And Oil		19,058.42	19,058.42	98,000.00	19
01-200-000-0000-6610	Equipment & Radios		4,780.19	4,780.19	20,000.00	24
01-200-000-0000-6620	Auto, Trailers, Snowmobiles		0.00	0.00	110,000.00	0
01-200-000-0000-6625	Office Equipment		0.00	0.00	5,000.00	0
01-200-000-0000-6630	Miscellaneous- Capital Outlay		0.00	0.00	40,000.00	0
01-200-003-0000-6200	Arlt- Sheriff Training		0.00	0.00	4,000.00	0
01-200-003-0000-6241	Registration Fee		4,510.00	4,510.00	7,000.00	64
01-200-003-0000-6330	Transportation & Travel & Parking		268.94	268.94	800.00	34
01-200-003-0000-6332	Hotels / Motels		979.36	979.36	3,000.00	33
01-200-003-0000-6340	Meals		150.09	150.09	0.00	0
01-200-003-0000-6511	Gas And Oil		57.56	57.56	200.00	29
01-200-019-0000-6231	Services, Labor, Contracts		1,100.00	1,100.00	0.00	0
01-200-019-0000-6340	Meals Reimbursed Non- Taxable		0.00	0.00	500.00	0
01-200-019-0000-6409	Supplies		1,997.98	1,997.98	0.00	0
01-200-019-0000-6610	Equipment		15.99	15.99	0.00	0
----- REVENUES -----						
01-200-020-0000-5840	Misc. Posse Receipts		100.00-	100.00-	0.00	0
----- EXPENDITURES -----						
01-200-020-0000-6409	Posse Supplies/Training		0.00	0.00	2,000.00	0
----- REVENUES -----						
01-200-039-0000-5517	Fees For Gun Permits		5,270.00-	5,270.00-	0.00	0
----- EXPENDITURES -----						
01-200-039-0000-6425	Gun Permit Expenses		690.00	690.00	0.00	0
200 DEPT	Totals Enforcement					
		Revenue	21,516.22-	21,516.22-	190,000.00-	11
		Expend.	506,834.95	506,834.95	2,054,551.00	25
		Net	485,318.73	485,318.73	1,864,551.00	26

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Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of BDG</u>
201 DEPT Sheriff Contingency For D & A					
----- REVENUES -----					
01-201-000-0000-5612 Drug & Forfeiture Ms387.213		295.00-	295.00-	0.00	0
201 DEPT Totals Sheriff Contingency For D & A	Revenue	295.00-	295.00-	0.00	0
	Expend.				
	Net	295.00-	295.00-	0.00	0

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
202 DEPT Boat & Water					
----- REVENUES -----					
01-202-000-0000-5310 State Grants- B & W Ppl (Ot)		0.00	0.00	6,375.00-	0
01-202-000-0000-5315 Boat & Water State Grant		18,628.00-	18,628.00-	18,628.00-	100
01-202-000-0000-5840 Misc Receipts		10.00-	10.00-	500.00-	2
----- EXPENDITURES -----					
01-202-000-0000-6101 Salaries- Full Time		0.00	0.00	28,664.00	0
01-202-000-0000-6102 Salaries- - Part Time		0.00	0.00	11,000.00	0
01-202-000-0000-6109 Salaries- Overtime		0.00	0.00	6,575.00	0
01-202-000-0000-6110 Holiday Pay		0.00	0.00	1,035.00	0
01-202-000-0000-6124 Medicare- Employer 1.45%		0.00	0.00	685.00	0
01-202-000-0000-6150 Health Insurance- Employer		0.00	0.00	5,175.00	0
01-202-000-0000-6159 Pera		0.00	0.00	5,550.00	0
01-202-000-0000-6165 Fica- Employer 6.20%		0.00	0.00	682.00	0
01-202-000-0000-6230 Printing, Publishing & Adv		0.00	0.00	200.00	0
01-202-000-0000-6231 Services & Labor (Incl Contracts)		0.00	0.00	2,500.00	0
01-202-000-0000-6250 Telephone		0.00	0.00	400.00	0
01-202-000-0000-6254 Utilities		47.23	47.23	250.00	19
01-202-000-0000-6272 Physical Examinations		0.00	0.00	400.00	0
01-202-000-0000-6302 B&W Maintenance		0.00	0.00	3,000.00	0
01-202-000-0000-6314 Radio Maint		0.00	0.00	500.00	0
01-202-000-0000-6352 Insurance		2,437.20	2,437.20	2,437.00	100
01-202-000-0000-6353 Workers Compensation Insurance		1,380.00	1,380.00	1,380.00	100
01-202-000-0000-6374 Auto & Trailer License		16.00	16.00	200.00	8
01-202-000-0000-6409 Field Supplies		0.00	0.00	1,200.00	0
01-202-000-0000-6410 Clothing Allowance		0.00	0.00	500.00	0
01-202-000-0000-6511 Gas And Oil		0.00	0.00	4,000.00	0
01-202-000-0000-6610 Equipment		0.00	0.00	3,000.00	0
01-202-000-0000-6617 Radio Equipment		0.00	0.00	500.00	0
202 DEPT Totals Boat & Water					
	Revenue	18,638.00-	18,638.00-	25,503.00-	73
	Expend.	3,880.43	3,880.43	79,833.00	5
	Net	14,757.57-	14,757.57-	54,330.00	27-

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
203 DEPT Snowmobile					
----- REVENUES -----					
01-203-000-0000-5315 Snowmobile State Grant		0.00	0.00	6,392.00-	0
01-203-000-0000-5840 Misc Receipts		18.00-	18.00-	30.00-	60
----- EXPENDITURES -----					
01-203-000-0000-6101 Salaries- Full Time		13,611.90	13,611.90	19,921.00	68
01-203-000-0000-6109 Salaries- Overtime		1,457.97	1,457.97	0.00	0
01-203-000-0000-6110 Holiday Pay		1,358.88	1,358.88	1,726.00	79
01-203-000-0000-6124 Medicare- Employer 1.45%		231.23	231.23	314.00	74
01-203-000-0000-6150 Health Insurance- Employer		2,565.00	2,565.00	3,600.00	71
01-203-000-0000-6152 Life Insurance- Employer		15.60	15.60	21.00	74
01-203-000-0000-6159 Pera Co- Or 14.4%		2,513.60	2,513.60	3,312.00	76
01-203-000-0000-6231 Services, Labor, Contracts		743.91	743.91	500.00	149
01-203-000-0000-6250 Telephone		153.54	153.54	250.00	61
01-203-000-0000-6302 Car Maintenance		70.42	70.42	800.00	9
01-203-000-0000-6314 Radio Maint		0.00	0.00	150.00	0
01-203-000-0000-6353 Workers Comp Insurance		697.00	697.00	697.00	100
01-203-000-0000-6374 Auto & Trailer License		16.00	16.00	30.00	53
01-203-000-0000-6409 Field Supplies		0.00	0.00	300.00	0
01-203-000-0000-6410 Clothing Allowance		0.00	0.00	200.00	0
01-203-000-0000-6511 Gas And Oil		1,937.11	1,937.11	1,500.00	129
203 DEPT Totals Snowmobile					
	Revenue	18.00-	18.00-	6,422.00-	0
	Expend.	25,372.16	25,372.16	33,321.00	76
	Net	25,354.16	25,354.16	26,899.00	94

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

Account Number	Status	Quarter To Date	Year To Date	Percent of Year	
				Budget	25% % of BDG
204 DEPT ATV					
----- REVENUES -----					
01-204-000-0000-5315 ATV State Grant		0.00	0.00	10,000.00-	0
----- EXPENDITURES -----					
01-204-000-0000-6101 Salaries- Full Time		0.00	0.00	11,216.00	0
01-204-000-0000-6110 Holiday Pay		0.00	0.00	1,035.00	0
01-204-000-0000-6124 Medicare- Employer 1.45%		0.00	0.00	178.00	0
01-204-000-0000-6150 Health Insurance Employer		0.00	0.00	2,025.00	0
01-204-000-0000-6159 Pera		0.00	0.00	1,874.00	0
01-204-000-0000-6231 Services, Labor, Contracts		623.41	623.41	500.00	125
01-204-000-0000-6250 Telephone		0.00	0.00	125.00	0
01-204-000-0000-6302 Car Maintenance		0.00	0.00	1,500.00	0
01-204-000-0000-6353 Workers Compensation Insurance		366.00	366.00	366.00	100
01-204-000-0000-6374 Auto & Trailer License		0.00	0.00	75.00	0
01-204-000-0000-6409 Field Supplies		0.00	0.00	1,200.00	0
01-204-000-0000-6511 Gas And Oil		0.00	0.00	2,200.00	0
204 DEPT Totals ATV					
	Revenue	0.00	0.00	10,000.00-	0
	Expend.	989.41	989.41	22,294.00	4
	Net	989.41	989.41	12,294.00	8

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Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of BDG</u>
206 DEPT Forfeitures					
----- REVENUES -----					
01-206-000-0000-5840 Revenue/Forfeitures		11,535.06-	11,535.06-	0.00	0
----- EXPENDITURES -----					
01-206-000-0000-6409 Forfeiture Supplies		2,305.99	2,305.99	0.00	0
206 DEPT Totals Forfeitures	Revenue	11,535.06-	11,535.06-	0.00	0
	Expend.	2,305.99	2,305.99	0.00	0
	Net	9,229.07-	9,229.07-	0.00	0

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
252 DEPT Corrections					
----- REVENUES -----					
01-252-000-0000-5001	Property Taxes - Current	0.00	0.00	1,996,480.00-	0
01-252-000-0000-5530	Corrections Fees	2,323.08-	2,323.08-	7,500.00-	31
01-252-000-0000-5532	Transport Inmates	1,255.43-	1,255.43-	2,500.00-	50
01-252-000-0000-5535	Board Of Prisoners	57,550.00-	57,550.00-	299,625.00-	19
01-252-000-0000-5536	Inmate Medical (Boarding)	2,211.16-	2,211.16-	2,500.00-	88
01-252-000-0000-5541	Pay To Stay Incounty Boarding Mn641.12 3	13,232.22-	13,232.22-	12,000.00-	110
01-252-000-0000-5542	Pay To Stay Incounty Medical Mn641.12 3	53.97-	53.97-	0.00	0
01-252-000-0000-5840	Misc Receipts	1,615.00-	1,615.00-	3,000.00-	54
01-252-000-0000-5861	Medical Co Pay From Inmates	399.60-	399.60-	1,000.00-	40
----- EXPENDITURES -----					
01-252-000-0000-6101	Salaries- Full Time	285,158.85	285,158.85	1,220,895.00	23
01-252-000-0000-6102	Salaries- - Part Time	594.29	594.29	48,000.00	1
01-252-000-0000-6109	Overtime- Salaries	11,779.63	11,779.63	38,000.00	31
01-252-000-0000-6110	Holiday Pay	18,273.36	18,273.36	56,000.00	33
01-252-000-0000-6124	Medicare- Employer 1.45%	4,438.26	4,438.26	19,760.00	22
01-252-000-0000-6149	Employer Deduct Contribution- Veba	1,000.00	1,000.00	4,000.00	25
01-252-000-0000-6150	Health Insurance- Employer	70,087.50	70,087.50	281,880.00	25
01-252-000-0000-6151	Sick Leave Accrual	0.00	0.00	100.00	0
01-252-000-0000-6152	Life Insurance- Employer	391.44	391.44	1,900.00	21
01-252-000-0000-6154	Long Term Disability- Employer	115.32	115.32	800.00	14
01-252-000-0000-6159	Pera 8.75%	27,200.90	27,200.90	9,945.00	274
01-252-000-0000-6164	Police & Fire (12)	0.00	0.00	119,425.00	0
01-252-000-0000-6165	Fica- Employer 6.20%	18,394.82	18,394.82	83,200.00	22
01-252-000-0000-6205	Postage	4.20	4.20	100.00	4
01-252-000-0000-6230	Printing, Publishing & Adv	0.00	0.00	600.00	0
01-252-000-0000-6231	Services & Labor (Incl Contracts)	4,370.82	4,370.82	35,000.00	12
01-252-000-0000-6234	Huber- Electronic Monitor	0.00	0.00	1,000.00	0
01-252-000-0000-6241	Registration Fee	0.00	0.00	100.00	0
01-252-000-0000-6250	Telephone	994.48	994.48	4,000.00	25
01-252-000-0000-6254	Utilities & Heating	30,752.69	30,752.69	104,000.00	30
01-252-000-0000-6260	Prof Counseling - Inmates	0.00	0.00	1,000.00	0
01-252-000-0000-6262	Medical Expenses & Supplies - Inmates	14,891.13	14,891.13	50,000.00	30
01-252-000-0000-6267	Unemployment Compensation	0.00	0.00	1,000.00	0
01-252-000-0000-6271	Inspection Fees	0.00	0.00	500.00	0

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year	
				<u>Budget</u>	<u>% of BDG</u>
01-252-000-0000-6272	Physical Examinations	200.00	200.00	500.00	40
01-252-000-0000-6302	Car Maintenance	568.74	568.74	2,000.00	28
01-252-000-0000-6330	Prisoner Transportation & Travel	5,749.45	5,749.45	0.00	0
01-252-000-0000-6332	Hotel / Motel Lodging	112.95	112.95	0.00	0
01-252-000-0000-6340	Meals	43.33	43.33	0.00	0
01-252-000-0000-6351	Board Of Prisoners	0.00	0.00	500.00	0
01-252-000-0000-6352	Insurance	3,385.60	3,385.60	886.00	382
01-252-000-0000-6353	Workers Compensation Insurance	32,185.00	32,185.00	32,595.00	99
01-252-000-0000-6374	Auto & Trailer License	0.00	0.00	50.00	0
01-252-000-0000-6405	Office & Computer Supplies	2,693.84	2,693.84	11,000.00	24
01-252-000-0000-6409	Jail Supplies	0.00	0.00	3,000.00	0
01-252-000-0000-6410	Clothing Allowance	476.78	476.78	5,000.00	10
01-252-000-0000-6418	Groceries	36,407.23	36,407.23	128,000.00	28
01-252-000-0000-6420	Kitchen Supplies	415.44	415.44	3,300.00	13
01-252-000-0000-6422	Janitorial Supplies	5,741.67	5,741.67	22,000.00	26
01-252-000-0000-6424	Inmate Supplies	146.20	146.20	4,000.00	4
01-252-000-0000-6511	Gas And Oil	116.63	116.63	500.00	23
01-252-000-0000-6513	Fuel Oil	0.00	0.00	750.00	0
01-252-000-0000-6590	Repair & Maintenance Supplies	4,637.95	4,637.95	20,000.00	23
01-252-000-0000-6605	Building & Structures	0.00	0.00	2,000.00	0
01-252-000-0000-6610	Equipment	2,794.77	2,794.77	0.00	0
01-252-000-0000-6625	Office Equipment	0.00	0.00	3,000.00	0
01-252-003-0000-6241	School Registration Fee	535.00	535.00	4,000.00	13
01-252-003-0000-6330	School Tran & Travel & Parking	22.33	22.33	500.00	4
01-252-003-0000-6332	School Hotels / Motels	0.00	0.00	2,500.00	0
01-252-003-0000-6340	Schooling Meals	0.00	0.00	500.00	0
01-252-003-0000-6511	Gas And Oil	0.00	0.00	300.00	0
----- REVENUES -----					
01-252-252-0000-5870	Prisoner Welfare Account(Non Tax)	501.75-	501.75-	0.00	0
01-252-252-0000-5871	Tw Vending Prisoner Welfare(Non Tax)	962.65-	962.65-	0.00	0
01-252-252-0000-5872	Phone Card Prisoner Welfare(Taxable)	12,455.15-	12,455.15-	0.00	0
01-252-252-0000-5885	Commissary Sales Taxable	2,175.39-	2,175.39-	0.00	0
----- EXPENDITURES -----					
01-252-252-0000-6405	Prisoner Welfare	2,589.28	2,589.28	0.00	0
01-252-252-0000-6406	Phone Card Prisoner Welfare	8,699.18	8,699.18	0.00	0
01-252-252-0000-6408	Commissary Supplies	1,086.78	1,086.78	0.00	0

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter</u> <u>To Date</u>	<u>Year</u> <u>To Date</u>	Percent of Year		
				<u>Budget</u>	<u>% of</u> <u>BDG</u>	
252 DEPT	Totals Corrections	Revenue	94,735.40-	94,735.40-	2,324,605.00-	4
		Expend.	597,055.84	597,055.84	2,328,086.00	26
		Net	502,320.44	502,320.44	3,481.00	430

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year	
				<u>Budget</u>	<u>25% % of BDG</u>
253 DEPT Aitkin Co Community Corrections					
----- REVENUES -----					
01-253-000-0000-5315 State Grant Funding		8,923.20-	8,923.20-	30,443.00-	29
01-253-000-0000-5872 Donations		350.00-	350.00-	3,000.00-	12
----- EXPENDITURES -----					
01-253-000-0000-6101 Salaries- Full Time		19,233.14	19,233.14	86,382.00	22
01-253-000-0000-6109 Salaries- Overtime		471.24	471.24	0.00	0
01-253-000-0000-6110 Holiday Pay		0.00	0.00	5,422.00	0
01-253-000-0000-6124 Medicare Employer		267.19	267.19	1,331.00	20
01-253-000-0000-6150 Health Insurance Employer		5,130.00	5,130.00	21,600.00	24
01-253-000-0000-6152 Life Insurance- Employer		31.20	31.20	125.00	25
01-253-000-0000-6154 Long Term Disability- Employer		28.02	28.02	0.00	0
01-253-000-0000-6159 Pera Co- Or		1,724.14	1,724.14	8,032.00	21
01-253-000-0000-6165 Fica- Employer		1,142.49	1,142.49	5,691.00	20
01-253-000-0000-6204 Juvenile Detention		25,000.98	25,000.98	0.00	0
01-253-000-0000-6231 Services, Labor, Contracts		894.68	894.68	250.00	358
01-253-000-0000-6250 Telephone		29.89	29.89	250.00	12
01-253-000-0000-6302 Car Maintenance		1,286.58	1,286.58	3,000.00	43
01-253-000-0000-6352 Insurance		1,686.00	1,686.00	1,686.00	100
01-253-000-0000-6353 Workers Comp Insurance		2,731.00	2,731.00	2,731.00	100
01-253-000-0000-6374 Auto & Trailer License		66.00	66.00	75.00	88
01-253-000-0000-6405 Operating Supplies		2,229.30	2,229.30	4,000.00	56
01-253-000-0000-6409 STS Project Supplies		0.00	0.00	1,000.00	0
01-253-000-0000-6410 Clothing Allowance		0.00	0.00	300.00	0
01-253-000-0000-6511 Gas And Oil		1,561.41	1,561.41	7,000.00	22
01-253-000-0000-6590 Repair & Maintenance Supplies		0.00	0.00	1,500.00	0
01-253-000-0000-6610 Equipment		0.00	0.00	1,500.00	0
01-253-000-0000-6625 Office Equipment		0.00	0.00	200.00	0
01-253-000-0000-6823 County Allocation		32,172.24	32,172.24	128,689.00	25
01-253-003-0000-6241 Registration Fee		0.00	0.00	500.00	0
01-253-003-0000-6330 Transportation/Travel/Parking		0.00	0.00	100.00	0
01-253-003-0000-6332 Hotel/Motel Lodging		0.00	0.00	250.00	0
01-253-003-0000-6340 Meals (Overnight)		0.00	0.00	50.00	0
01-253-003-0000-6511 Gas & Oil		0.00	0.00	200.00	0
253 DEPT Totals Aitkin Co Community Corrections	Revenue	9,273.20-	9,273.20-	33,443.00-	28
	Expend.	95,685.50	95,685.50	281,864.00	34
	Net	86,412.30	86,412.30	248,421.00	35

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of BDG</u>
254 DEPT	Enhanced 911 System				
----- REVENUES -----					
01-254-000-0000-5310	State 'Shared Revenue'- Enhanced 911	22,297.47-	22,297.47-	89,150.00-	25
----- EXPENDITURES -----					
01-254-000-0000-6231	Services, Labor, Contracts	10,429.52	10,429.52	42,000.00	25
01-254-000-0000-6250	Telephone	0.00	0.00	500.00	0
01-254-000-0000-6330	Transportation/Travel/Parking	15.37	15.37	0.00	0
01-254-000-0000-6405	Office & Computer Supplies	156.35	156.35	1,500.00	10
01-254-000-0000-6511	Gas And Oil	0.00	0.00	200.00	0
01-254-000-0000-6610	Equipment	0.00	0.00	5,000.00	0
254 DEPT	Totals Enhanced 911 System				
	Revenue	22,297.47-	22,297.47-	89,150.00-	25
	Expend.	10,601.24	10,601.24	49,200.00	22
	Net	11,696.23-	11,696.23-	39,950.00-	29

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year	
				<u>Budget</u>	<u>25% % of BDG</u>
255 DEPT	General Crime Victim Grant				
----- REVENUES -----					
01-255-000-0000-5310	Crime Victims State Grant	23,444.96-	23,444.96-	42,000.00-	56
01-255-000-0000-5840	Misc Receipts	204.78-	204.78-	874.00-	23
----- EXPENDITURES -----					
01-255-000-0000-6101	Salaries- Full Time	10,675.58	10,675.58	46,586.00	23
01-255-000-0000-6124	Medicare- Employer 1.45%	151.50	151.50	675.00	22
01-255-000-0000-6149	Employer Deduct Contribution- Veba	1,000.00	1,000.00	1,000.00	100
01-255-000-0000-6150	Health Insurance- Employer	2,025.00	2,025.00	8,100.00	25
01-255-000-0000-6152	Life Insurance- Employer	15.60	15.60	62.00	25
01-255-000-0000-6154	Long Term Disability- Employer	28.11	28.11	117.00	24
01-255-000-0000-6159	Pera Co- Or 7.25%	773.97	773.97	3,377.00	23
01-255-000-0000-6165	Fica- Employer 6.20%	647.81	647.81	2,888.00	22
01-255-000-0000-6250	Telephone	36.56	36.56	120.00	30
01-255-000-0000-6353	Workers Compensation Insurance	288.00	288.00	288.00	100
01-255-000-0000-6405	Office & Computer Supplies	26.45	26.45	189.00	14
01-255-000-0000-6409	Program Supplies	184.00	184.00	200.00	92
01-255-003-0000-6241	Registration Fee/Training	0.00	0.00	59.00	0
----- REVENUES -----					
01-255-031-0000-5840	Emergency Fund Money	300.00	300.00	0.00	0
255 DEPT	Totals General Crime Victim Grant	Revenue	23,349.74-	42,874.00-	54
		Expend.	15,852.58	63,661.00	25
		Net	7,497.16-	20,787.00	36-

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
257 DEPT Sobriety Court					
----- EXPENDITURES -----					
01-257-000-0000-6250 Telephone		7.42	7.42	0.00	0
01-257-000-0000-6330 Transportation/Travel/Parking		928.30	928.30	0.00	0
----- REVENUES -----					
01-257-022-0000-5135 Fees		3,187.00-	3,187.00-	0.00	0
----- EXPENDITURES -----					
01-257-022-0000-6406 Sobriety Crt Expenses		1,036.30	1,036.30	27,000.00	4
257 DEPT Totals Sobriety Court	Revenue	3,187.00-	3,187.00-	0.00	0
	Expend.	1,972.02	1,972.02	27,000.00	7
	Net	1,214.98-	1,214.98-	27,000.00	4-

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>	
280 DEPT	Emergency Management					
----- REVENUES -----						
01-280-000-0000-5390	Emergency Service State Grant	24,737.58-	24,737.58-	19,000.00-	130	
----- EXPENDITURES -----						
01-280-000-0000-6101	Salaries- Full Time	6,489.60	6,489.60	28,590.00	23	
01-280-000-0000-6124	Medicare- Employer 1.45%	0.00	0.00	415.00	0	
01-280-000-0000-6150	Health Insurance- Employer	0.00	0.00	5,400.00	0	
01-280-000-0000-6152	Life Insurance- Employer	0.00	0.00	31.00	0	
01-280-000-0000-6159	Pera Co- Or 14.4%	0.00	0.00	2,502.00	0	
01-280-000-0000-6165	Fica- Employer 6.20%	0.00	0.00	1,773.00	0	
01-280-000-0000-6230	Printing, Publishing & Adv	0.00	0.00	100.00	0	
01-280-000-0000-6231	Services, Labor, Etc	5,100.00	5,100.00	100.00	100	
01-280-000-0000-6240	Dues	200.00	200.00	350.00	57	
01-280-000-0000-6241	Registration Fee	0.00	0.00	800.00	0	
01-280-000-0000-6250	Telephone	52.32	52.32	700.00	7	
01-280-000-0000-6330	Transportation & Travel & Parking	69.92	69.92	200.00	35	
01-280-000-0000-6352	Insurance	327.20	327.20	327.00	100	
01-280-000-0000-6353	Workers Compensation Insurance	1,163.00	1,163.00	1,163.00	100	
01-280-000-0000-6405	Office Supplies	0.00	0.00	500.00	0	
01-280-000-0000-6409	Deputy Supplie	0.00	0.00	1,000.00	0	
01-280-000-0000-6511	Gas And Oil	0.00	0.00	100.00	0	
01-280-000-0000-6610	Equipment	0.00	0.00	2,000.00	0	
01-280-003-0000-6241	Registration Fee	325.00	325.00	300.00	108	
01-280-003-0000-6330	Transporation	123.28	123.28	200.00	62	
01-280-003-0000-6332	Hotel / Motel Lodging	212.96	212.96	700.00	30	
01-280-003-0000-6340	Meals- Schooling	30.87	30.87	200.00	15	
280 DEPT	Totals Emergency Management	Revenue	24,737.58-	24,737.58-	19,000.00-	130
		Expend.	14,094.15	14,094.15	47,451.00	30
		Net	10,643.43-	10,643.43-	28,451.00	37-

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Percent of Year</u>		<u>25% % of BDG</u>
			<u>Year To Date</u>	<u>Budget</u>	
390 DEPT Environmental Health (FBL)					
----- REVENUES -----					
01-390-000-0000-5136 Fbl Licenses		40,990.25-	40,990.25-	72,000.00-	57
----- EXPENDITURES -----					
01-390-000-0000-6101 Salaries- Full Time		10,684.70	10,684.70	46,625.00	23
01-390-000-0000-6102 Salaries- - Part Time		0.00	0.00	4,000.00	0
01-390-000-0000-6108 Meals Reimbursed (Taxable)		10.00	10.00	100.00	10
01-390-000-0000-6124 Medicare- Employer 1.45%		152.58	152.58	678.00	23
01-390-000-0000-6152 Life Insurance- Employer		15.60	15.60	62.00	25
01-390-000-0000-6154 Long Term Disability- Employer		28.14	28.14	117.00	24
01-390-000-0000-6159 Pera Co- Or 7.25%		774.62	774.62	3,380.00	23
01-390-000-0000-6165 Fica- Employer 6.20%		652.40	652.40	2,897.00	23
01-390-000-0000-6205 Postage		134.58	134.58	325.00	41
01-390-000-0000-6208 Training/Education		0.00	0.00	700.00	0
01-390-000-0000-6230 Printing, Publishing & Adv		0.00	0.00	500.00	0
01-390-000-0000-6231 Services, Labor, Contracts		326.40	326.40	50.00	653
01-390-000-0000-6240 Dues		0.00	0.00	70.00	0
01-390-000-0000-6250 Telephone		87.05	87.05	400.00	22
01-390-000-0000-6302 Car Maintenance		0.00	0.00	250.00	0
01-390-000-0000-6330 Transportation & Travel & Parking		12.00	12.00	100.00	12
01-390-000-0000-6332 Hotel / Motel Lodging		90.97	90.97	400.00	23
01-390-000-0000-6340 Meals		36.82	36.82	100.00	37
01-390-000-0000-6352 Insurance		1,051.20	1,051.20	1,051.00	100
01-390-000-0000-6353 Workers Compensation Insurance		471.00	471.00	471.00	100
01-390-000-0000-6374 Auto & Trailer License		16.00	16.00	0.00	0
01-390-000-0000-6405 Office, Film, And Field Supplies		218.88	218.88	500.00	44
01-390-000-0000-6511 Gas And Oil		231.49	231.49	900.00	26
01-390-000-0000-6620 Auto, Trailers, Snowmobiles		0.00	0.00	5,000.00	0
01-390-000-0000-6625 Office Equipment & Other Equipment		1,155.15	1,155.15	4,750.00	24
390 DEPT Totals Environmental Health (FBL)					
	Revenue	40,990.25-	40,990.25-	72,000.00-	57
	Expend.	16,149.58	16,149.58	73,426.00	22
	Net	24,840.67-	24,840.67-	1,426.00	742-

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
391 DEPT Solid Waste					
----- REVENUES -----					
01-391-000-0000-5001 Taxes		0.00	0.00	191,087.00-	0
01-391-000-0000-5137 Solid Waste License		300.00-	300.00-	1,000.00-	30
01-391-000-0000-5545 Household Hazardous Waste		0.00	0.00	2,500.00-	0
----- EXPENDITURES -----					
01-391-000-0000-6101 Salaries- Full Time		26,257.58	26,257.58	114,059.00	23
01-391-000-0000-6102 Salaries- - Part Time		0.00	0.00	2,000.00	0
01-391-000-0000-6108 Meals Reimbursed (Taxable)		23.34	23.34	150.00	16
01-391-000-0000-6109 Overtime- Salaries		0.00	0.00	1,000.00	0
01-391-000-0000-6124 Medicare- Employer 1.45%		379.66	379.66	1,710.00	22
01-391-000-0000-6149 Employer Deduct Contribution-Veba		1,500.00	1,500.00	1,500.00	100
01-391-000-0000-6150 Health Insurance- Employer		3,037.50	3,037.50	12,150.00	25
01-391-000-0000-6152 Life Insurance- Employer		18.75	18.75	90.00	21
01-391-000-0000-6154 Long Term Disability- Employer		69.36	69.36	470.00	15
01-391-000-0000-6159 Pera Co- Or 7.25%		1,903.66	1,903.66	8,545.00	22
01-391-000-0000-6165 Fica- Employer 6.20%		1,623.43	1,623.43	7,313.00	22
01-391-000-0000-6205 Postage		10.54	10.54	750.00	1
01-391-000-0000-6208 Training/Education		0.00	0.00	1,000.00	0
01-391-000-0000-6230 Printing, Publishing & Adv		0.00	0.00	1,400.00	0
01-391-000-0000-6231 Services, Labor, & Minor Contracts		338.92	338.92	17,500.00	2
01-391-000-0000-6240 Dues		85.00	85.00	300.00	28
01-391-000-0000-6241 Registration Fee		30.00	30.00	500.00	6
01-391-000-0000-6250 Telephone		195.34	195.34	900.00	22
01-391-000-0000-6260 Professional Consulting		0.00	0.00	500.00	0
01-391-000-0000-6302 Car Maintenance		0.00	0.00	500.00	0
01-391-000-0000-6330 Transportation & Travel & Parking		0.00	0.00	300.00	0
01-391-000-0000-6332 Hotel / Motel Lodging		411.63	411.63	1,200.00	34
01-391-000-0000-6340 Meals		0.00	0.00	100.00	0
01-391-000-0000-6352 Insurance		1,583.00	1,583.00	1,583.00	100
01-391-000-0000-6353 Workers Compensation Insurance		1,198.00	1,198.00	1,198.00	100
01-391-000-0000-6374 Auto & Trailer License		16.00	16.00	0.00	0
01-391-000-0000-6405 Office & Film Supplies		203.42	203.42	1,000.00	20
01-391-000-0000-6511 Gas And Oil		145.61	145.61	800.00	18
01-391-000-0000-6625 Office Equipment		0.00	0.00	1,500.00	0
01-391-000-0000-6800 Miscellaneous(Promotional)		0.00	0.00	1,000.00	0
----- REVENUES -----					

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter</u> <u>To Date</u>	<u>Year</u> <u>To Date</u>	Percent of Year	
				<u>Budget</u>	<u>25%</u> <u>% of</u> <u>BDG</u>
01-391-060-0000-5392 Score State Grant		0.00	0.00	55,950.00-	0
----- EXPENDITURES -----					
01-391-060-0000-6360 Recycling Contract		12,283.36	12,283.36	70,000.00	18
391 DEPT Totals Solid Waste	Revenue	300.00-	300.00-	250,537.00-	0
	Expend.	51,314.10	51,314.10	251,018.00	20
	Net	51,014.10	51,014.10	481.00	606

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
392 DEPT Water Wells					
----- REVENUES -----					
01-392-000-0000-5546 Drinking Water Test Fees		1,442.00-	1,442.00-	6,150.00-	23
----- EXPENDITURES -----					
01-392-000-0000-6231 Services, Labor, Contracts		478.00	478.00	500.00	96
01-392-000-0000-6240 Dues		0.00	0.00	2,650.00	0
01-392-000-0000-6405 Office & Film Supplies		6.38	6.38	3,000.00	0
392 DEPT Totals Water Wells	Revenue	1,442.00-	1,442.00-	6,150.00-	23
	Expend.	484.38	484.38	6,150.00	8
	Net	957.62-	957.62-	0.00	0

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of BDG</u>
500 DEPT	Library And Historical Society				
----- EXPENDITURES -----					
01- 500- 500- 0000- 6350	Library Per Diem	210.00	210.00	1,500.00	14
01- 500- 500- 0000- 6801	Library Appropriations	116,068.50	116,068.50	232,137.00	50
01- 500- 501- 0000- 6352	Historical Society Insurance	2,828.00	2,828.00	3,000.00	94
01- 500- 501- 0000- 6353	Historical Society Workers Compensation	50.00	50.00	50.00	100
01- 500- 501- 0000- 6801	Historical Society Appropriations	0.00	0.00	15,000.00	0
01- 500- 502- 0000- 6848	CARE Approp	37,900.00	37,900.00	37,900.00	100
01- 500- 502- 0000- 6849	Kinship approp	0.00	0.00	7,000.00	0
500 DEPT	Totals Library And Historical Society				
	Revenue				
	Expend.	157,056.50	157,056.50	296,587.00	53
	Net	157,056.50	157,056.50	296,587.00	53

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of BDG</u>
600 DEPT	Ag Society, Soil & Water, Ag Inspect				
----- EXPENDITURES -----					
01-600-550-0000-6352	Ag Society Insurance	3,987.00	3,987.00	1,681.00	237
01-600-550-0000-6353	Ag Societyworkers Compensation Insurance	50.00	50.00	75.00	67
01-600-550-0000-6801	Ag Society Appropriations	0.00	0.00	10,000.00	0
01-600-550-0000-6843	Ag Society Capital Improvements	0.00	0.00	10,000.00	0
01-600-552-0000-6801	Soil & Water Appropriations	49,017.00	49,017.00	98,034.00	50
01-600-552-0000-6836	Soil & Water Snake River Watershed	10,079.00	10,079.00	10,079.00	100
01-600-552-0000-6847	Mississippi Headwaters Board	1,500.00	1,500.00	1,500.00	100
01-600-553-0000-6231	Ag Inspector Contracts & Services	2,400.00	2,400.00	4,800.00	50
600 DEPT	Totals Ag Society, Soil & Water, Ag Inspect				
	Revenue	67,033.00	67,033.00	136,169.00	49
	Expend.	67,033.00	67,033.00	136,169.00	49
	Net				

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Budget</u>	<u>25% % of BDG</u>
601 DEPT Extension					
----- REVENUES -----					
01-601-000-0000-5840 4- H Program Reimbursements		0.00	0.00	250.00-	0
----- EXPENDITURES -----					
01-601-000-0000-6101 Salaries- Full Time		2,452.55	2,452.55	9,787.00	25
01-601-000-0000-6108 Meals Reimbursed (Taxable)		0.00	0.00	50.00	0
01-601-000-0000-6124 Medicare- Employer 1.45%		33.65	33.65	143.00	24
01-601-000-0000-6149 Veba Contribution		250.00	250.00	350.00	71
01-601-000-0000-6150 Health Insurance- Employer		506.25	506.25	2,715.00	19
01-601-000-0000-6152 Life Insurance- Employer		3.90	3.90	16.00	24
01-601-000-0000-6154 Long Term Disability- Employer		5.86	5.86	24.00	24
01-601-000-0000-6159 Pera Co- Or 7.25%		162.72	162.72	710.00	23
01-601-000-0000-6165 Fica- Employer 6.20%		144.00	144.00	610.00	24
01-601-000-0000-6205 Postage		28.26	28.26	600.00	5
01-601-000-0000-6230 Printing, Publishing & Adv		0.00	0.00	100.00	0
01-601-000-0000-6231 Services & Charges		0.00	0.00	450.00	0
01-601-000-0000-6250 Telephone		62.07	62.07	300.00	21
01-601-000-0000-6262 Univ Of Minn Contracts		12,290.64	12,290.64	49,898.00	25
01-601-000-0000-6350 Per Diem		175.00	175.00	800.00	22
01-601-000-0000-6352 Insurance		161.60	161.60	162.00	100
01-601-000-0000-6353 Workers Compensation Insurance		21.00	21.00	21.00	100
01-601-000-0000-6360 Extension Comm Expenses (Not Per Diem)		32.48	32.48	150.00	22
01-601-000-0000-6405 Office Supplies		1,792.03	1,792.03	2,000.00	90
----- REVENUES -----					
01-601-551-0000-5840 4- H Plat Book Sales		560.00	560.00	0.00	0
601 DEPT Totals Extension					
	Revenue	560.00	560.00	250.00-	224-
	Expend.	18,122.01	18,122.01	68,886.00	26
	Net	18,682.01	18,682.01	68,636.00	27

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of BDG</u>
700 DEPT	Promotion,AEOA Tran,Airport,RC&D,Tourism				
----- EXPENDITURES -----					
01- 700- 554- 0000- 6330	Rc & D Transportation & Travel	0.00	0.00	400.00	0
01- 700- 554- 0000- 6340	Meals Reimbursed Non- Taxable	0.00	0.00	65.00	0
01- 700- 554- 0000- 6350	Rc & D Per Diem	0.00	0.00	350.00	0
01- 700- 903- 0000- 6800	Aitkin Airport Appropriation	0.00	0.00	14,107.00	0
01- 700- 903- 0000- 6801	Mcgregor Airport Appropriation	0.00	0.00	13,900.00	0
01- 700- 909- 0000- 6330	Tourism Transportation & Travel	0.00	0.00	500.00	0
01- 700- 909- 0000- 6350	Per Diem	0.00	0.00	500.00	0
01- 700- 909- 0000- 6801	Appropriations- Grant	1,549.50	1,549.50	12,800.00	12
700 DEPT	Totals Promotion,AEOA Tran,Airport,RC&D,Tourism				
	Revenue				
	Expend.	1,549.50	1,549.50	42,622.00	4
	Net	1,549.50	1,549.50	42,622.00	4

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

1 FUND General Fund

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Budget</u>	<u>Percent of Year</u>	<u>25% % of BDG</u>
711 DEPT Economic Development						
----- REVENUES -----						
01-711-000-0000-5840 Misc Receipts		250.00-	250.00-	1,000.00-		25
----- EXPENDITURES -----						
01-711-000-0000-6101 Salaries- Full Time		6,246.23	6,246.23	27,331.00		23
01-711-000-0000-6108 Meals Reimbursed (Taxable)		3.96	3.96	50.00		8
01-711-000-0000-6124 Medicare- Employer 1.45%		90.28	90.28	397.00		23
01-711-000-0000-6149 Employer Deduct Contribution- Veba		400.00	400.00	400.00		100
01-711-000-0000-6150 Health Insurance- Employer		810.00	810.00	3,240.00		25
01-711-000-0000-6152 Life Insurance- Employer		6.24	6.24	25.00		25
01-711-000-0000-6154 Long Term Disability- Employer		16.59	16.59	68.00		24
01-711-000-0000-6159 Pera Co- Or 7.25%		452.85	452.85	1,981.00		23
01-711-000-0000-6165 Fica- Employer 6.20%		386.06	386.06	1,698.00		23
01-711-000-0000-6205 Postage		0.00	0.00	150.00		0
01-711-000-0000-6208 Mandated Training/Education		0.00	0.00	100.00		0
01-711-000-0000-6230 Printing, Publishing & Adv		0.00	0.00	200.00		0
01-711-000-0000-6240 Dues/Assoc Fees		200.00	200.00	200.00		100
01-711-000-0000-6241 Registration Fee		0.00	0.00	250.00		0
01-711-000-0000-6250 Telephone		34.63	34.63	400.00		9
01-711-000-0000-6303 Mcnight/Blandin Grant Expenses		6,947.00	6,947.00	0.00		0
01-711-000-0000-6330 Transportation/Travel/Parking (Own Auto)		0.00	0.00	50.00		0
01-711-000-0000-6332 Hotel / Motel Lodging		0.00	0.00	250.00		0
01-711-000-0000-6340 Meals Reimbursed Non- Taxable		0.00	0.00	100.00		0
01-711-000-0000-6352 Insurance		295.20	295.20	295.00		100
01-711-000-0000-6353 Workers Compensation Insurance		173.00	173.00	173.00		100
01-711-000-0000-6405 Office & Computer Supplies		0.00	0.00	25.00		0
01-711-000-0000-6511 Gas And Oil		87.67	87.67	600.00		15
711 DEPT Totals Economic Development	Revenue	250.00-	250.00-	1,000.00-		25
	Expend.	16,149.71	16,149.71	37,983.00		43
	Net	15,899.71	15,899.71	36,983.00		43
1 FUND Totals General Fund	Revenue	943,035.82-	943,035.82-	11,410,747.00-		8
	Expend.	3,293,758.13	3,293,758.13	11,331,372.00		29
	Net	2,350,722.31	2,350,722.31	79,375.00-		962-

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

3 FUND Road & Bridge

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter</u> <u>To Date</u>	<u>Year</u> <u>To Date</u>	Percent of Year	
				<u>Budget</u>	<u>25%</u> <u>% of</u> <u>BDG</u>
301 DEPT R&B Administration					
----- EXPENDITURES -----					
03-301-000-0000-6101 Salaries- Full Time		73,664.51	73,664.51	331,792.00	22
03-301-000-0000-6102 Wages- Part Time		68.83	68.83	0.00	0
03-301-000-0000-6108 Meals Reimbursed (Taxable)		10.00	10.00	200.00	5
03-301-000-0000-6124 Medicare- Employer 1.45%		1,037.80	1,037.80	4,811.00	22
03-301-000-0000-6148 Employer Deduct Contribution- HSA		3,128.00	3,128.00	0.00	0
03-301-000-0000-6149 Employer Deduct Contribution- Veba		3,150.00	3,150.00	6,428.00	49
03-301-000-0000-6150 Health Insurance- Employer		9,828.75	9,828.75	40,530.00	24
03-301-000-0000-6152 Life Insurance- Employer		55.44	55.44	194.00	29
03-301-000-0000-6154 Long Term Disability- Employer		180.78	180.78	1,294.00	14
03-301-000-0000-6159 Pera Employer 7.25%		5,117.11	5,117.11	24,055.00	21
03-301-000-0000-6165 Fica- Employer 6.20%		4,437.39	4,437.39	20,571.00	22
03-301-000-0000-6205 Postage		124.13	124.13	1,400.00	9
03-301-000-0000-6208 Staff Development/Training		0.00	0.00	1,000.00	0
03-301-000-0000-6240 Dues		2,790.00	2,790.00	2,725.00	102
03-301-000-0000-6241 Fees/Prof/Misc		0.00	0.00	1,500.00	0
03-301-000-0000-6250 Telephone		1,682.19	1,682.19	5,700.00	30
03-301-000-0000-6296 Meeting Expense/Physicals		2,044.45	2,044.45	3,000.00	68
03-301-000-0000-6300 Service Contracts		3,328.31	3,328.31	12,000.00	28
03-301-000-0000-6352 Insurance		15,333.00	15,333.00	15,263.00	100
03-301-000-0000-6353 Workers Compensation Insurance		3,106.00	3,106.00	2,616.00	119
03-301-000-0000-6400 Supplies And Materials		1,407.12	1,407.12	6,000.00	23
301 DEPT Totals R&B Administration					
	Revenue				
	Expend.	130,493.81	130,493.81	481,079.00	27
	Net	130,493.81	130,493.81	481,079.00	27

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

3 FUND Road & Bridge

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter</u> <u>To Date</u>	<u>Year</u> <u>To Date</u>	Percent of Year	
				<u>Budget</u>	<u>25%</u> <u>% of</u> <u>BDG</u>
302 DEPT	R&B Engineering/Construction				
----- EXPENDITURES -----					
03-302-000-0000-6101	Salaries- Full Time	69,730.52	69,730.52	308,749.00	23
03-302-000-0000-6102	Salaries- - Part Time	0.00	0.00	17,021.00	0
03-302-000-0000-6108	Meals Reimbursed (Taxable)	41.12	41.12	100.00	41
03-302-000-0000-6109	Overtime- Salaries	582.49	582.49	33,336.00	2
03-302-000-0000-6124	Medicare- Employer 1.45%	983.91	983.91	5,207.00	19
03-302-000-0000-6149	Employer Deduct Contribution- Veba	1,000.00	1,000.00	1,000.00	100
03-302-000-0000-6150	Health Insurance- Employer	15,525.00	15,525.00	62,100.00	25
03-302-000-0000-6152	Life Insurance- Employer	65.70	65.70	263.00	25
03-302-000-0000-6154	Long Term Disability- Employer	36.75	36.75	237.00	16
03-302-000-0000-6159	Pera Employer 7.25%	5,097.72	5,097.72	24,801.00	21
03-302-000-0000-6165	Fica- Employer 6.20%	4,207.01	4,207.01	22,264.00	19
03-302-000-0000-6296	Meeting Expense/Physicals	997.79	997.79	5,000.00	20
03-302-000-0000-6353	Workers Compensation Insurance	3,736.00	3,736.00	4,384.00	85
03-302-000-0000-6449	Rd/Br Engr. Supplies	318.14	318.14	7,500.00	4
302 DEPT	Totals R&B Engineering/Construction				
	Revenue				
	Expend.	102,322.15	102,322.15	491,962.00	21
	Net	102,322.15	102,322.15	491,962.00	21

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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3 FUND Road & Bridge

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
303 DEPT R&B Highway Maintenance					
----- EXPENDITURES -----					
03-303-000-0000-6101 Salaries- Full Time		195,508.02	195,508.02	883,193.00	22
03-303-000-0000-6102 Salaries- - Part Time		0.00	0.00	29,786.00	0
03-303-000-0000-6108 Meals Reimbursed (Taxable)		0.00	0.00	50.00	0
03-303-000-0000-6109 Overtime- Salaries		27,241.76	27,241.76	39,399.00	69
03-303-000-0000-6124 Medicare- Employer 1.45%		3,138.39	3,138.39	13,810.00	23
03-303-000-0000-6149 Employer Deduct Contribution- Veba		2,000.00	2,000.00	2,000.00	100
03-303-000-0000-6150 Health Insurance- Employer		49,950.00	49,950.00	199,800.00	25
03-303-000-0000-6152 Life Insurance- Employer		271.60	271.60	1,037.00	26
03-303-000-0000-6154 Long Term Disability- Employer		77.91	77.91	503.00	15
03-303-000-0000-6159 Pera Employer 7.25%		16,150.75	16,150.75	66,888.00	24
03-303-000-0000-6165 Fica- Employer 6.20%		13,419.24	13,419.24	59,052.00	23
03-303-000-0000-6231 Services, Equip. Rental Etc.		0.00	0.00	12,500.00	0
03-303-000-0000-6250 Telephone		780.51	780.51	3,400.00	23
03-303-000-0000-6254 Utilities		21,033.42	21,033.42	34,000.00	62
03-303-000-0000-6262 Contracts		51,990.99	51,990.99	0.00	0
03-303-000-0000-6296 Meeting Expense/Physicals		163.85	163.85	2,000.00	8
03-303-000-0000-6297 Shop Fuel		16,864.49	16,864.49	17,000.00	99
03-303-000-0000-6298 Shop Maintenance		2,206.57	2,206.57	14,000.00	16
03-303-000-0000-6352 Insurance		5,047.00	5,047.00	5,047.00	100
03-303-000-0000-6353 Workers Compensation Insurance		87,588.00	87,588.00	88,742.00	99
03-303-000-0000-6513 Motor Fuel & Lubricants		95,050.44	95,050.44	321,500.00	30
03-303-000-0000-6514 Pavement Striping		0.00	0.00	60,000.00	0
03-303-000-0000-6515 Culverts		0.00	0.00	50,000.00	0
03-303-000-0000-6516 Signs & Posts		5,230.18	5,230.18	14,500.00	36
03-303-000-0000-6517 Asphalt, Crackfiller, Tack Oil, Etc		0.00	0.00	23,500.00	0
03-303-000-0000-6518 De- Icing Salt		87,753.25	87,753.25	130,000.00	68
03-303-000-0000-6519 Gravel & Royalties		3,750.00	3,750.00	170,000.00	2
03-303-000-0000-6520 Calcium Chloride Dust Control		0.00	0.00	265,500.00	0
03-303-000-0000-6521 Maintenance Supplies		889.85	889.85	2,000.00	44
03-303-000-0000-6522 Small Tools		0.00	0.00	1,000.00	0
03-303-000-0000-6523 Misc Bldg & Shop Supplies		9,996.84	9,996.84	23,500.00	43
03-303-000-0000-6524 Winter Sand		0.00	0.00	19,000.00	0
03-303-000-0000-6590 Repair & Maintenance Supplies		93,850.31	93,850.31	235,000.00	40
03-303-000-0000-6820 Approach & Misc Refunds		0.00	0.00	3,000.00	0

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3 FUND Road & Bridge

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
03-303-000-0000-6825	Maintenance Agreements	3,780.00	3,780.00	25,000.00	15
03-303-000-0000-6830	Twp Road Allotment Gas Tax	340,030.80	340,030.80	360,000.00	94
303 DEPT	Totals R&B Highway Maintenance				
	Revenue				
	Expend.	1,133,764.17	1,133,764.17	3,175,707.00	36
	Net	1,133,764.17	1,133,764.17	3,175,707.00	36

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

3 FUND Road & Bridge

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDC</u>
307 DEPT R&B Capital Infrastructure					
----- REVENUES -----					
03- 307- 000- 0000- 5001 Taxes, Aids, Etc.		0.00	0.00	607,000.00-	0
03- 307- 000- 0000- 5841 Federal Transportation Funds		18,653.30-	18,653.30-	1,568,000.00-	1
03- 307- 000- 0000- 5842 State Park Fund		0.00	0.00	286,000.00-	0
03- 307- 000- 0000- 5844 State- Aid Disaster Funds		0.00	0.00	152,000.00-	0
03- 307- 000- 0000- 5850 St Aid- Reg Construction Funds		232,931.46-	232,931.46-	1,440,000.00-	16
03- 307- 000- 0000- 5854 Township/City/Private Funds		0.00	0.00	18,000.00-	0
----- EXPENDITURES -----					
03- 307- 000- 0000- 6260 Professional Services		13,190.25	13,190.25	61,000.00	22
03- 307- 000- 0000- 6262 Contract Payments		92,652.60	92,652.60	5,751,000.00	2
03- 307- 000- 0000- 6295 Utility Moves		8,005.00	8,005.00	0.00	0
03- 307- 000- 0000- 6362 Right Of Way		20,989.10	20,989.10	42,000.00	50
307 DEPT Totals R&B Capital Infrastructure					
	Revenue	251,584.76-	251,584.76-	4,071,000.00-	6
	Expend.	134,836.95	134,836.95	5,854,000.00	2
	Net	116,747.81-	116,747.81-	1,783,000.00	7-

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

3 FUND Road & Bridge

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of BDG</u>
308 DEPT R&B Equipment & Facilities					
----- REVENUES -----					
03-308-000-0000-5001 Taxes, Aids, Etc.		0.00	0.00	474,400.00-	0
----- EXPENDITURES -----					
03-308-000-0000-6600 Capital Outlay- Facilities		15,563.28	15,563.28	474,400.00	3
308 DEPT Totals R&B Equipment & Facilities	Revenue	0.00	0.00	474,400.00-	0
	Expend.	15,563.28	15,563.28	474,400.00	3
	Net	15,563.28	15,563.28	0.00	0
3 FUND Totals Road & Bridge	Revenue	251,584.76-	251,584.76-	4,545,400.00-	6
	Expend.	1,516,980.36	1,516,980.36	10,477,148.00	14
	Net	1,265,395.60	1,265,395.60	5,931,748.00	21

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4 FUND Special Revenue(Unorg R&B,Fire,Cemetery)

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
421 DEPT	Unorganized Road & Bridge				
----- REVENUES -----					
04-421-000-0000-5001	Property Taxes- Current	0.00	0.00	41,000.00-	0
04-421-000-0000-5252	Forf Tax Sales Apportionment	16,352.48-	16,352.48-	0.00	0
----- EXPENDITURES -----					
04-421-000-0000-6818	Unorganized Road & Bridge Work	0.00	0.00	41,000.00	0
----- REVENUES -----					
04-421-143-0000-5227	Gasoline Tax	1,750.60-	1,750.60-	0.00	0
04-421-144-0000-5227	Gasoline Tax	2,429.80-	2,429.80-	0.00	0
04-421-145-0000-5227	Gasoline Tax	3,511.22-	3,511.22-	0.00	0
04-421-146-0000-5227	Gasoline Tax	2,248.65-	2,248.65-	0.00	0
04-421-147-0000-5227	Gasoline Tax	4,682.82-	4,682.82-	0.00	0
04-421-148-0000-5227	Gasoline Tax	1,123.58-	1,123.58-	0.00	0
04-421-150-0000-5227	Gasoline Tax	2,246.55-	2,246.55-	0.00	0
04-421-151-0000-5227	Gasoline Tax	2,190.78-	2,190.78-	0.00	0
04-421-152-0000-5227	Gasoline Tax	2,320.03-	2,320.03-	0.00	0
04-421-153-0000-5227	Gasoline Tax	1,119.47-	1,119.47-	0.00	0
04-421-154-0000-5227	Gasoline Tax	1,107.15-	1,107.15-	0.00	0
04-421-155-0000-5227	Gasoline Tax	2,093.81-	2,093.81-	0.00	0
421 DEPT	Totals Unorganized Road & Bridge				
	Revenue	43,176.94-	43,176.94-	41,000.00-	105
	Expend.	0.00	0.00	41,000.00	0
	Net	43,176.94-	43,176.94-	0.00	0

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

4 FUND Special Revenue(Unorg R&B,Fire,Cemetary)

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
422 DEPT Unorganized Fire					
----- REVENUES -----					
04-422-000-0000-5001 Property Taxes- Current		0.00	0.00	25,100.00-	0
----- EXPENDITURES -----					
04-422-000-0000-6801 Appropriations		14,359.02	14,359.02	25,100.00	57
422 DEPT Totals Unorganized Fire	Revenue	0.00	0.00	25,100.00-	0
	Expend.	14,359.02	14,359.02	25,100.00	57
	Net	14,359.02	14,359.02	0.00	0

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4 FUND Special Revenue(Unorg R&B,Fire,Cemetary)

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
423 DEPT Unorganized Cemetary					
----- REVENUES -----					
04-423-000-0000-5001 Property Taxes- Current		0.00	0.00	2,700.00-	0
----- EXPENDITURES -----					
04-423-000-0000-6801 Appropriations		814.97	814.97	2,700.00	30
423 DEPT Totals Unorganized Cemetary	Revenue	0.00	0.00	2,700.00-	0
	Expend.	814.97	814.97	2,700.00	30
	Net	814.97	814.97	0.00	0
4 FUND Totals Special Revenue(Unorg R&B,Fire,Cemetary)	Revenue	43,176.94-	43,176.94-	68,800.00-	63
	Expend.	15,173.99	15,173.99	68,800.00	22
	Net	28,002.95-	28,002.95-	0.00	0

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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5 FUND Health & Human Services

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
400 DEPT	Public Health Department				
----- REVENUES -----					
05-400-000-0000-5001	All Current/Delinquent Taxes	0.00	0.00	294,619.00-	0
05-400-400-0402-5422	Federal Grants- Programs	6,465.40-	6,465.40-	20,000.00-	32
05-400-400-0402-5801	Ph Immunizations	55.00-	55.00-	400.00-	14
05-400-400-0402-5802	Flu Shots/Pneumvax Fees	20,239.13-	20,239.13-	41,000.00-	49
05-400-400-0402-5803	Hepatitis B Fees	901.46-	901.46-	1,000.00-	90
05-400-400-0402-5832	Misc Immun/Dp&C/Ep/Pan Flu	900.00	900.00	0.00	0
----- EXPENDITURES -----					
05-400-400-0402-6205	Postage	4.53	4.53	1,000.00	0
05-400-400-0402-6208	Staff Development/Training	75.00	75.00	250.00	30
05-400-400-0402-6231	Services Or Contracts	430.32	430.32	1,500.00	29
05-400-400-0402-6330	Transportation/Travel/Parking	72.30	72.30	1,000.00	7
05-400-400-0402-6401	Vaccine Cost	1,815.50	1,815.50	6,000.00	30
05-400-400-0402-6405	Supplies- Computer/Office/Meeting	0.00	0.00	1,000.00	0
05-400-401-0000-6809	No. Memorial Ambulance- Aitkin	2,835.00	2,835.00	20,000.00	14
05-400-401-0000-6812	Mcgregor Area Ambulance	3,205.00	3,205.00	13,000.00	25
05-400-401-0000-6813	Meds- 1 Hill City Ambulance	0.00	0.00	2,000.00	0
05-400-401-0000-6814	Isle Ambulance/Mille Lacs Health System	360.00	360.00	2,000.00	18
----- REVENUES -----					
05-400-410-0413-5422	Wic Federal Grant	5,567.00-	5,567.00-	55,080.00-	10
----- EXPENDITURES -----					
05-400-410-0413-6205	Postage	23.83	23.83	200.00	12
05-400-410-0413-6208	Staff Development/Training	0.00	0.00	100.00	0
05-400-410-0413-6301	Wic Space Rentals	45.00	45.00	200.00	23
05-400-410-0413-6330	Transportation/Travel/Parking	66.27	66.27	650.00	10
05-400-410-0413-6405	Supplies- Computer/Office/Meeting	434.08	434.08	1,000.00	43
----- REVENUES -----					
05-400-430-0403-5328	C & Tc State Share	4,827.00-	4,827.00-	22,658.00-	21
05-400-430-0403-5422	C & Tc Federal Share	4,827.00-	4,827.00-	22,657.00-	21
----- EXPENDITURES -----					
05-400-430-0403-6205	Postage	116.16	116.16	700.00	17
05-400-430-0403-6208	Staff Development/Training	0.00	0.00	80.00	0
05-400-430-0403-6231	Services Or Contracts	0.00	0.00	1,400.00	0
05-400-430-0403-6330	Transportation/Travel/Parking	0.00	0.00	60.00	0
05-400-430-0403-6405	Supplies- Computer/Office/Meeting	29.07	29.07	3,274.00	1
05-400-430-0407-6262	Family Planning Approp	358.26	358.26	6,000.00	6

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

5 FUND Health & Human Services

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Budget</u>	<u>Percent of Year</u>	<u>25% % of BDG</u>
----- REVENUES -----						
05-400-430-0408-5313	LPH Grant	0.00	0.00	24,699.00-		0
05-400-430-0408-5422	Federal Grants- Family Health	0.00	0.00	56,998.00-		0
05-400-430-0408-5894	Healthy Starts/Follow A Long	0.00	0.00	1,000.00-		0
----- EXPENDITURES -----						
05-400-430-0408-6205	Postage	227.88	227.88	1,100.00		21
05-400-430-0408-6208	Staff Development/Training	0.00	0.00	200.00		0
05-400-430-0408-6330	Transportation/Travel/Parking	66.35	66.35	1,000.00		7
05-400-430-0408-6405	Supplies- Computer/Office/Meeting	2,021.15	2,021.15	1,000.00		202
----- REVENUES -----						
05-400-440-0410-5325	MA*FELTSS*LCTS	0.00	0.00	1,500.00-		0
05-400-440-0410-5425	MA*STLTSS*LCTS	0.00	0.00	1,500.00-		0
05-400-440-0410-5500	Pca Assessment- Third Party	516.58-	516.58-	1,200.00-		43
05-400-440-0410-5805	Misc Revenue (Lcts)	120.34-	120.34-	20,500.00-		1
----- EXPENDITURES -----						
05-400-440-0410-6101	Gross Salary- Admin	15,446.71	15,446.71	123,042.00		13
05-400-440-0410-6108	Meals Reimbursed Taxable	0.00	0.00	60.00		0
05-400-440-0410-6109	Salaries Overtime	24.20	24.20	0.00		0
05-400-440-0410-6124	Medicare Employer 1.45%	203.66	203.66	1,784.00		11
05-400-440-0410-6148	Employer Deduct Contribution- HSA	214.80	214.80	0.00		0
05-400-440-0410-6149	Employer Deduct Contribution- Veba	1,161.70	1,161.70	3,757.00		31
05-400-440-0410-6150	Health Insurance Employer	3,267.90	3,267.90	18,780.00		17
05-400-440-0410-6152	Life Insurance- Employer	20.17	20.17	131.00		15
05-400-440-0410-6154	Long Term Disability	5.79	5.79	125.00		5
05-400-440-0410-6159	Pera Employer- Admin	1,060.59	1,060.59	8,921.00		12
05-400-440-0410-6165	Fica Employer 6.2%	871.04	871.04	7,629.00		11
05-400-440-0410-6205	Postage	126.59	126.59	800.00		16
05-400-440-0410-6208	Staff Development/Training	1,073.75	1,073.75	1,600.00		67
05-400-440-0410-6231	Services Or Contracts	7,752.54	7,752.54	34,000.00		23
05-400-440-0410-6250	Telephone	447.59	447.59	1,900.00		24
05-400-440-0410-6333	Travel Expense	349.96	349.96	8,500.00		4
05-400-440-0410-6352	Insurance- Vehicles/Equipment/Liability	2,577.00	2,577.00	3,237.00		80
05-400-440-0410-6353	Workers Comp Insurance	10,589.00	10,589.00	10,589.00		100
05-400-440-0410-6405	Supplies- Computer/Office/Meeting	2,576.57	2,576.57	5,000.00		52
05-400-440-0410-6625	Furniture, Fixtures, Etc.	1,742.49	1,742.49	6,000.00		29
05-400-440-0410-6630	Miscellaneous- Capital Expense	735.65	735.65	0.00		0
05-400-440-0411-6101	Ph Staff Salaries	72,717.46	72,717.46	286,116.00		25

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

5 FUND Health & Human Services

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
05-400-440-0411-6108	Meals Reimbursed Taxable	0.00	0.00	75.00	0
05-400-440-0411-6109	Salaries- Overtime	164.11	164.11	1,400.00	12
05-400-440-0411-6124	Medicare Employer - Ph Nurse	950.36	950.36	4,169.00	23
05-400-440-0411-6149	Employer Deduct Contribution- Veba	11,634.00	11,634.00	12,248.00	95
05-400-440-0411-6150	Health Insurance Employer - Ph Nurse	16,050.00	16,050.00	58,200.00	28
05-400-440-0411-6152	Life Insurance- Employer - Ph Nurse	88.40	88.40	312.00	28
05-400-440-0411-6154	Long Term Disability	143.61	143.61	240.00	60
05-400-440-0411-6159	Pera Employer- Ph Staff	5,232.91	5,232.91	20,845.00	25
05-400-440-0411-6165	Fica Employer - Nurse	4,063.67	4,063.67	17,826.00	23
----- REVENUES -----					
05-400-450-0451-5313	Lph Grant	0.00	0.00	24,699.00-	0
05-400-450-0451-5319	Health Ed State Grants	0.00	0.00	30,000.00-	0
05-400-450-0451-5832	Misc Health Ed Grants	0.00	0.00	100.00-	0
----- EXPENDITURES -----					
05-400-450-0451-6205	Postage	51.36	51.36	300.00	17
05-400-450-0451-6208	Staff Development/Training	0.00	0.00	350.00	0
05-400-450-0451-6231	Services Or Contracts	0.00	0.00	1,000.00	0
05-400-450-0451-6330	Transportation/Travel/Parking	177.57	177.57	250.00	71
05-400-450-0451-6405	Supplies- Computer/Office/Meeting	249.89	249.89	1,000.00	25
400 DEPT	Totals Public Health Department				
	Revenue	42,618.91-	42,618.91-	619,610.00-	7
	Expend.	173,956.74	173,956.74	704,900.00	25
	Net	131,337.83	131,337.83	85,290.00	154

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5 FUND Health & Human Services

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Budget</u>	<u>Percent of Year</u>	<u>25% % of BDG</u>
420 DEPT	Income Maintenance					
----- REVENUES -----						
05-420-000-0000-5001	All Current/Delinquent Taxes	0.00	0.00	466,881.00		0
05-420-600-0000-5321	State Grants- Admin	58.15	58.15	1,000.00		6
05-420-600-0000-5421	TANF Income Maintenance Admin	8,747.00	8,747.00	35,000.00		25
05-420-600-0000-5422	Title IV- E Income Maintenance Admin Aid	377.00	377.00	1,000.00		38
05-420-600-0000-5832	Misc Recoveries	0.00	0.00	30.00		0
----- EXPENDITURES -----						
05-420-600-4800-6101	Im O/Head Admin Salaries	65,166.16	65,166.16	255,841.00		25
05-420-600-4800-6108	H & Hs Meals	0.00	0.00	21.00		0
05-420-600-4800-6109	Salaries- Overtime	62.93	62.93	0.00		0
05-420-600-4800-6124	Medicare Employer	873.32	873.32	3,710.00		24
05-420-600-4800-6148	Employer Deduct Contribution- HSA	558.48	558.48	0.00		0
05-420-600-4800-6149	Employer Deduct Contribution- Veba	4,866.92	4,866.92	10,647.00		46
05-420-600-4800-6150	Im O/Head Admin Health Ins	14,371.14	14,371.14	51,516.00		28
05-420-600-4800-6152	Im O/Head Admin Life Ins	77.46	77.46	306.00		25
05-420-600-4800-6154	Long Term Disability	15.03	15.03	630.00		2
05-420-600-4800-6159	Pera Employer	4,371.48	4,371.48	18,548.00		24
05-420-600-4800-6165	Im O/Head Admin Fica	3,734.10	3,734.10	15,862.00		24
05-420-600-4800-6205	Postage	1,754.71	1,754.71	6,200.00		28
05-420-600-4800-6208	Staff Development/Training	271.95	271.95	1,200.00		23
05-420-600-4800-6231	Services Or Contracts	30,989.17	30,989.17	40,000.00		77
05-420-600-4800-6250	Telephone	1,065.01	1,065.01	4,300.00		25
05-420-600-4800-6263	Contract Legal Services- Fraud	0.00	0.00	1,000.00		0
05-420-600-4800-6265	Sheriff - Fraud Investigation	75.00	75.00	1,000.00		8
05-420-600-4800-6330	Transportation/Travel/Parking	734.89	734.89	2,000.00		37
05-420-600-4800-6333	Travel Expense Im	906.34	906.34	3,000.00		30
05-420-600-4800-6352	Insurance- Vehicles/Equipment/Liability	0.00	0.00	1,672.00		0
05-420-600-4800-6353	Workers Comp Insurance	1,947.00	1,947.00	1,947.00		100
05-420-600-4800-6405	Supplies- Computer/Office/Meeting	3,032.21	3,032.21	8,000.00		38
05-420-600-4800-6625	Office & Other Equipment	886.42	886.42	15,000.00		6
05-420-600-4800-6630	Miscellaneous- Capital Expense	1,912.67	1,912.67	0.00		0
05-420-600-4800-6800	Other Expenses - Direct Charge	1,062.08	1,062.08	0.00		0
05-420-600-4820-6101	Im Rms Salaries	80,248.42	80,248.42	383,844.00		21
05-420-600-4820-6108	Meals Reimbursed Taxable	18.24	18.24	30.00		61
05-420-600-4820-6124	Medicare Employer	1,081.80	1,081.80	5,566.00		19

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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5 FUND Health & Human Services

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year	
				<u>Budget</u>	<u>% of BDG</u>
05-420-600-4820-6148	Employer Deduct Contribution- HSA	1,564.00	1,564.00	0.00	0
05-420-600-4820-6149	Employer Deduct Contribution- Veba	2,532.00	2,532.00	19,408.00	13
05-420-600-4820-6150	Im Rms Health Insurance Employer	25,050.00	25,050.00	95,700.00	26
05-420-600-4820-6152	Im Rms Life Insurance- Employer	133.20	133.20	587.00	23
05-420-600-4820-6159	Pera Employer - Rms	5,817.96	5,817.96	27,829.00	21
05-420-600-4820-6165	Im Rms Employer Fica	4,625.58	4,625.58	23,798.00	19
----- REVENUES -----					
05-420-610-0000-5832	Afdc/Mfip Recoveries- Non Maxis	353.72-	353.72-	0.00	0
05-420-610-0000-5836	Afdc/Mfip Recoveries- Maxis	2,790.24-	2,790.24-	9,000.00-	31
----- EXPENDITURES -----					
05-420-610-4100-6011	County Share- Afdc/Mfip	37.50	37.50	6,500.00	1
05-420-610-4800-6800	Program Expenses- Direct Charge	0.00	0.00	100.00	0
----- REVENUES -----					
05-420-620-0000-5322	State Grants- Programs Ga	0.00	0.00	1,293.00-	0
05-420-620-0000-5836	Ga Recoveries - Maxis	301.00-	301.00-	900.00-	33
----- EXPENDITURES -----					
05-420-620-4100-6011	County Share - Ga	30.00	30.00	600.00	5
----- REVENUES -----					
05-420-630-0000-5421	Food Support Direct Admin Aid	27,824.50-	27,824.50-	102,500.00-	27
05-420-630-0000-5836	Food Support Recoveries- Maxis	899.55-	899.55-	2,000.00-	45
----- EXPENDITURES -----					
05-420-630-4100-6011	County Share- Food Support	49.39	49.39	1,500.00	3
05-420-630-4800-6801	Bonus Bucks Expenditures	200.00	200.00	2,000.00	10
----- REVENUES -----					
05-420-640-0000-5328	Child Support Incentives - State	1,715.65-	1,715.65-	4,000.00-	43
05-420-640-0000-5421	Title IV- D Child Support Admin	93,094.68-	93,094.68-	385,000.00-	24
05-420-640-0000-5423	Titile IV- D Child Support Incentives	8,700.00-	8,700.00-	35,000.00-	25
05-420-640-0000-5832	Recoveries Child Support	290.00-	290.00-	1,400.00-	21
----- EXPENDITURES -----					
05-420-640-4800-6205	Postage	706.80	706.80	3,250.00	22
05-420-640-4800-6208	Staff Development/Training	0.00	0.00	900.00	0
05-420-640-4800-6231	Services Or Contracts	1,227.34	1,227.34	6,000.00	20
05-420-640-4800-6250	Telephone	346.56	346.56	1,500.00	23
05-420-640-4800-6263	Contract Legal Services Iv- D	5,418.75	5,418.75	28,000.00	19
05-420-640-4800-6270	Aitkin Co Sheriff Fees Iv- D	250.00	250.00	1,900.00	13
05-420-640-4800-6330	Transportation/Travel/Parking	7.81	7.81	1,500.00	1
05-420-640-4800-6379	Other Iv- D Charges	397.29	397.29	3,400.00	12

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

5 FUND Health & Human Services

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Percent of Year</u>		<u>% of</u>	
		<u>Quarter To Date</u>	<u>Year To Date</u>		<u>Budget</u>
05-420-640-4800-6397	Genetic Tests Iv- D	224.00	224.00	1,500.00	15
05-420-640-4800-6405	Supplies- Computer/Office/Meeting	105.80	105.80	1,500.00	7
05-420-640-4800-6625	Office & Other Equipment	0.00	0.00	3,600.00	0
05-420-640-4820-6101	Gross Salary	53,915.40	53,915.40	236,156.00	23
05-420-640-4820-6108	Taxable Meals Iv- D	9.71	9.71	150.00	6
05-420-640-4820-6124	Medicare Employer	762.73	762.73	3,424.00	22
05-420-640-4820-6148	Employer Deduct Contribution- HSA	1,432.00	1,432.00	0.00	0
05-420-640-4820-6149	Employer Deduct Contribution- Veba	1,000.00	1,000.00	7,160.00	14
05-420-640-4820-6150	Health Insurance Employer	9,576.00	9,576.00	37,500.00	26
05-420-640-4820-6152	Life Insurance- Employer	68.70	68.70	275.00	25
05-420-640-4820-6154	Long Term Disability	0.00	0.00	320.00	0
05-420-640-4820-6159	Pera Employer	3,908.91	3,908.91	17,121.00	23
05-420-640-4820-6165	Fica Employer	3,261.27	3,261.27	23,798.00	14
----- REVENUES -----					
05-420-650-0000-5322	MA Medical Support State Incentive	27,734.08-	27,734.08-	82,000.00-	34
05-420-650-0000-5421	Medical Assistance Admin Aid	61,324.50-	61,324.50-	200,000.00-	31
05-420-650-0000-5422	MA Medical Support Fed Incentive	21,535.31-	21,535.31-	65,000.00-	33
05-420-650-0000-5500	PMAP Mileage Reimbursement	2,448.05-	2,448.05-	20,000.00-	12
05-420-650-0000-5828	County Burial Recoveries	40.55-	40.55-	10,000.00-	0
05-420-650-0000-5832	MA Recoveries	6,001.41-	6,001.41-	1,500.00-	400
05-420-650-0000-5836	MA Estate Recoveries	5,907.65-	5,907.65-	75,000.00-	8
----- EXPENDITURES -----					
05-420-650-4400-6020	Medicare Premium Reimbursement	4,007.30	4,007.30	10,346.00	39
05-420-650-4400-6022	MA CEHI Reimbursement	30,970.69	30,970.69	62,000.00	50
05-420-650-4400-6025	State/Fed Share - MA	19,843.08	19,843.08	75,000.00	26
05-420-650-4400-6212	MA PMAP Access	3,241.95	3,241.95	25,000.00	13
05-420-650-4401-6210	MA Access- Individual(Vested Interest)	5,140.60	5,140.60	24,000.00	21
05-420-650-4402-6210	MA Access- Licensed Foster Parent	227.35	227.35	3,000.00	8
05-420-650-4403-6210	MA Access- Volunteer	3,441.13	3,441.13	21,000.00	16
05-420-650-4404-6210	MA Access- Taxi	3,400.00	3,400.00	0.00	0
05-420-650-4405-6210	MA Access- Meals	207.81	207.81	1,600.00	13
05-420-650-4406-6210	MA Access- Lodging	203.86	203.86	1,800.00	11
05-420-650-4407-6210	MA Access- Parking	11.00	11.00	300.00	4
05-420-650-4800-6800	Program Expenses Direct Charge Ffp	0.00	0.00	1,500.00	0
05-420-650-4800-6810	County Burials	6,535.00	6,535.00	20,000.00	33

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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5 FUND Health & Human Services

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter</u> <u>To Date</u>	<u>Year</u> <u>To Date</u>	Percent of Year		<u>% of</u> <u>BDG</u>
				<u>Budget</u>		
420 DEPT	Totals Income Maintenance	Revenue	270,143.04-	270,143.04-	1,498,504.00-	18
		Expend.	417,847.24	417,847.24	1,634,362.00	26
		Net	147,704.20	147,704.20	135,858.00	109

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

5 FUND Health & Human Services

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Budget</u>	<u>Percent of Year</u> 25% <u>% of</u> <u>BDG</u>
430 DEPT Social Services					
----- REVENUES -----					
05-430-000-0000-5001 All Current/Delinquent Taxes		0.00	0.00	1,356,091.00-	0
05-430-700-0000-5325 VCAA Block Grant - 53		0.00	0.00	188,732.00-	0
05-430-700-0000-5421 MA SSTS Admin*54		0.00	0.00	165,000.00-	0
05-430-700-0000-5426 TXX SS Block Grant*56		27,264.00-	27,264.00-	109,056.00-	25
05-430-700-0000-5828 Mh Initiative		0.00	0.00	21,000.00-	0
05-430-700-0000-5832 Ss Administrative Recoveries		352.04-	352.04-	5,000.00-	7
05-430-700-0000-5833 Mh Init- Housing		0.00	0.00	6,500.00-	0
05-430-700-0000-5836 Mh Init- Employ Capacity		0.00	0.00	20,000.00-	0
----- EXPENDITURES -----					
05-430-700-4800-6101 Allocated Admin Salary		31,945.69	31,945.69	147,682.00	22
05-430-700-4800-6108 Meals Reimbursed Taxable		0.00	0.00	45.00	0
05-430-700-4800-6109 Salaries- Overtime		74.23	74.23	0.00	0
05-430-700-4800-6124 Medicare Employer		400.99	400.99	2,141.00	19
05-430-700-4800-6148 Employer Deduct Contribution- HSA		658.72	658.72	0.00	0
05-430-700-4800-6149 Employer Deduct Contribution- Veba		3,048.88	3,048.88	5,757.00	53
05-430-700-4800-6150 Allocated Admin Health Ins		5,715.96	5,715.96	27,354.00	21
05-430-700-4800-6152 Allocated Admin Life Ins		28.68	28.68	147.00	20
05-430-700-4800-6154 Long Term Disability		17.73	17.73	440.00	4
05-430-700-4800-6159 Pera Employer		2,134.16	2,134.16	10,707.00	20
05-430-700-4800-6165 Allocated Admin Fica		1,714.76	1,714.76	9,156.00	19
05-430-700-4800-6205 Postage		1,340.00	1,340.00	6,500.00	21
05-430-700-4800-6208 Staff Development/Training		1,407.30	1,407.30	6,000.00	23
05-430-700-4800-6231 Services Or Contracts		17,210.83	17,210.83	52,000.00	33
05-430-700-4800-6250 Telephone		1,785.91	1,785.91	7,300.00	24
05-430-700-4800-6330 Transportation/Travel/Parking		6,952.34	6,952.34	60,000.00	12
05-430-700-4800-6333 Travel Expense		1,069.00	1,069.00	4,000.00	27
05-430-700-4800-6352 Insurance- Vehicles/Equipment/Liability		16,985.00	16,985.00	14,653.00	116
05-430-700-4800-6353 Workers Comp Insurance		10,257.00	10,257.00	10,257.00	100
05-430-700-4800-6405 Supplies- Computer/Office/Meeting		6,205.10	6,205.10	14,000.00	44
05-430-700-4800-6625 Office & Other Equipment		11,559.35	11,559.35	19,600.00	59
05-430-700-4800-6630 Miscellaneous- Capital Expense		2,255.97	2,255.97	0.00	0
05-430-700-4800-6800 Direct Charge Expenses Non Ffp		79.35	79.35	5,300.00	1
05-430-700-4800-6802 Mh Init - Lac		0.00	0.00	1,300.00	0
05-430-700-4800-6803 Mh Int - Consumer Support		0.00	0.00	100.00	0

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5 FUND Health & Human Services

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	Percent of Year			25% <u>% of</u> <u>BGD</u>
		<u>Quarter</u> <u>To Date</u>	<u>Year</u> <u>To Date</u>	<u>Budget</u>	
05- 430- 700- 4800- 6804	Mh Init - Housing Expense	1,200.00	1,200.00	4,000.00	30
05- 430- 700- 4800- 6809	Mh Init - Employability	1,247.25	1,247.25	5,000.00	25
05- 430- 700- 4800- 6810	Mh Init - Flex	797.75	797.75	2,500.00	32
05- 430- 700- 4820- 6101	Direct Social Service Salaries	241,011.03	241,011.03	1,123,478.00	21
05- 430- 700- 4820- 6108	Meals Reimbursed Taxable	122.17	122.17	725.00	17
05- 430- 700- 4820- 6109	Salaries- Overtime	2,037.10	2,037.10	6,500.00	31
05- 430- 700- 4820- 6124	Direct Soc Serv Medicare	3,380.95	3,380.95	16,385.00	21
05- 430- 700- 4820- 6148	Employer Deduct Contribution- HSA	1,564.00	1,564.00	0.00	0
05- 430- 700- 4820- 6149	Employer Deduct Contribution- Veba	9,301.00	9,301.00	33,728.00	28
05- 430- 700- 4820- 6150	Direct Soc Serv Health Ins	45,945.00	45,945.00	170,700.00	27
05- 430- 700- 4820- 6152	Direct Soc Serv Life Ins	270.70	270.70	1,187.00	23
05- 430- 700- 4820- 6154	Long Term Disability	0.00	0.00	230.00	0
05- 430- 700- 4820- 6159	Pera Employer	17,620.92	17,620.92	81,923.00	22
05- 430- 700- 4820- 6165	Direct Soc Serv Fica	14,455.99	14,455.99	70,059.00	21
05- 430- 700- 4821- 6101	Direct Ph Salaries	29,877.58	29,877.58	150,175.00	20
05- 430- 700- 4821- 6108	Meals Reimbursed Taxable	0.00	0.00	30.00	0
05- 430- 700- 4821- 6124	Direct Ph Medicare	418.68	418.68	2,178.00	19
05- 430- 700- 4821- 6149	Employer Deduct Contribution- Veba	1,332.50	1,332.50	3,810.00	35
05- 430- 700- 4821- 6150	Direct Ph Health Ins	4,671.00	4,671.00	19,950.00	23
05- 430- 700- 4821- 6152	Direct Ph Life Insurance	35.99	35.99	166.00	22
05- 430- 700- 4821- 6154	Long Term Disability- Employer	29.10	29.10	0.00	0
05- 430- 700- 4821- 6159	Pera Employer	2,157.81	2,157.81	10,888.00	20
05- 430- 700- 4821- 6165	Direct Ph Fica - Employer	1,790.16	1,790.16	9,311.00	19
----- REVENUES -----					
05- 430- 710- 0000- 5320	Misc State Receipts	580.00-	580.00-	0.00	0
05- 430- 710- 0000- 5321	Relative Custody Asst S02	3,571.00-	3,571.00-	16,000.00-	22
05- 430- 710- 0000- 5323	Family Response State Grant	65.00-	65.00-	2,090.00-	3
05- 430- 710- 0000- 5324	State Share- CADI/CAC/BI/LTCC S01	631.74-	631.74-	2,500.00-	25
05- 430- 710- 0000- 5330	PSOP Grant Expansion	5,500.00-	5,500.00-	0.00	0
05- 430- 710- 0000- 5420	Fed- Cadi/Tbi/Ltcc F06	631.93-	631.93-	2,500.00-	25
05- 430- 710- 0000- 5423	Title IV- B2 Family Response*65	0.00	0.00	3,385.00-	0
05- 430- 710- 0000- 5425	Title IV- B1 Family Response*65	2,962.00-	2,962.00-	1,617.00-	183
05- 430- 710- 0000- 5429	IV- E Self Grant*04	1,051.00-	1,051.00-	1,930.00-	54
05- 430- 710- 0000- 5441	IV- E Foster Care*01	30,771.00-	30,771.00-	60,000.00-	51
05- 430- 710- 0000- 5442	IV- E SSTS Admin*02	0.00	0.00	35,000.00-	0
05- 430- 710- 0000- 5453	CW TCM Revenue	28,105.50-	28,105.50-	110,000.00-	26

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5 FUND Health & Human Services

Report Basis: Cash

<u>Account Number</u>		<u>Status</u>	Percent of Year			
			<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Budget</u>	<u>25% % of BDG</u>
05-430-710-0000-5482	IV- E Admin LCTS*07		0.00	0.00	21,000.00-	0
05-430-710-0000-5483	MA Admin LCTS*07		0.00	0.00	44,000.00-	0
05-430-710-0000-5832	Admin Foster Care Recoveries		12,032.76-	12,032.76-	100,000.00-	12
05-430-710-0000-5833	IV- E Foster Care Recoveries		1,958.53-	1,958.53-	7,500.00-	26
----- EXPENDITURES -----						
05-430-710-3040-6020	Child Protect Assess/Investigation		50.84	50.84	0.00	0
05-430-710-3160-6020	Transportation Child Serv		1,263.93	1,263.93	0.00	0
05-430-710-3160-6057	Foster Care- Transportation		2,881.26	2,881.26	15,000.00	19
05-430-710-3180-6020	Health- Related Services		771.32	771.32	1,000.00	77
05-430-710-3180-6057	Health Related Services- Foster Care		151.56	151.56	350.00	43
05-430-710-3181-6020	Drug Testing - CMCC Juveniles		171.75	171.75	1,500.00	11
05-430-710-3190-6020	Court Related Services & Activities		139.77	139.77	8,500.00	2
05-430-710-3410-6057	Electronic Monitor/Specialize Supply- OHP		0.00	0.00	1,000.00	0
05-430-710-3440-6050	Housing Services- Child		600.00	600.00	2,500.00	24
05-430-710-3460-6065	Self Funds - Adolescent Life Skills		220.00	220.00	2,350.00	9
05-430-710-3470-6020	Independent Living Skills		0.00	0.00	500.00	0
05-430-710-3630-6020	Family- Based Life Mgmt Skills Services		0.00	0.00	2,500.00	0
05-430-710-3640-6020	Family Assessment Response Services		1,067.50	1,067.50	4,500.00	24
05-430-710-3650-6027	Serv For Concurrent Perm Plan		59.91	59.91	1,500.00	4
05-430-710-3660-6020	Family Group Decision Making		887.04	887.04	1,500.00	59
05-430-710-3661-6020	Triple P Activity		1,393.43	1,393.43	2,500.00	56
05-430-710-3670-6020	PSOP - Parent Support Outreach Services		911.11	911.11	11,000.00	8
05-430-710-3710-6050	Shelter- Truancy Program		656.00	656.00	0.00	0
05-430-710-3710-6053	Shelter- Corrective		0.00	0.00	5,000.00	0
05-430-710-3710-6057	Child Shelter		0.00	0.00	5,000.00	0
05-430-710-3800-6057	Treatment Foster Care		9,572.40	9,572.40	0.00	0
05-430-710-3810-6057	Family Foster Care		40,634.97	40,634.97	450,000.00	9
05-430-710-3820-6040	Relative Custody Assistance		4,578.38	4,578.38	18,000.00	25
05-430-710-3830-6057	Children's Group Residential Care		99.57	99.57	50,000.00	0
05-430-710-3850-6057	Correctional Facilities		32,561.26	32,561.26	260,000.00	13
05-430-710-3890-6020	Respite Care - Non Foster Care		0.00	0.00	150.00	0
05-430-710-3890-6057	Respite Care- Foster Care		0.00	0.00	3,000.00	0
05-430-710-3930-6020	General Case Management		47.99	47.99	400.00	12
05-430-710-3960-6050	Adoptions		0.00	0.00	5,000.00	0
05-430-710-3970-6064	Collaborative Grant		0.00	0.00	65,000.00	0
05-430-710-3980-6020	License & Resource Development		0.00	0.00	300.00	0

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5 FUND Health & Human Services

Report Basis: Cash

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			<u>Year</u> <u>To Date</u>	<u>Budget</u>	
----- REVENUES -----					
05-430-720-0000-5322	MFIP Consolidated Fund - State	6,043.00-	6,043.00-	17,003.00-	36
05-430-720-0000-5326	Child Care MFIP Admin- State 66	248.00-	248.00-	2,000.00-	12
05-430-720-0000-5370	BSF Child Care Admin - State 08	622.00-	622.00-	5,381.00-	12
05-430-720-0000-5426	Child Care MFIP Admin- Fed 13	477.00-	477.00-	4,250.00-	11
05-430-720-0000-5432	Employment & Train Serv - F14	35,205.00-	35,205.00-	171,923.00-	20
05-430-720-0000-5470	BSF Child Care Admin*15	869.00-	869.00-	7,743.00-	11
05-430-720-0000-5832	Misc Child Care Recoveries/Fees	1,054.13-	1,054.13-	6,000.00-	18
----- EXPENDITURES -----					
05-430-720-3020-6069	Community Ed & Prevent/Advertising	192.00	192.00	750.00	26
05-430-720-3110-6069	Bsf Child Care	1,084.22	1,084.22	4,337.00	25
05-430-720-3140-6020	Other Child Care	468.10	468.10	4,100.00	11
05-430-720-3140-6057	Day Care- Foster Care	44.00	44.00	1,000.00	4
05-430-720-3370-6038	Mfip- Employment Services	39,081.26	39,081.26	156,325.00	25
05-430-720-3980-6020	License And Resource Development	90.00	90.00	800.00	11
----- REVENUES -----					
05-430-730-0000-5321	CDTF Fund Admin S17	2,473.98-	2,473.98-	6,100.00-	41
05-430-730-0000-5421	MA Rule 25 Admin SSTS*22	0.00	0.00	30,000.00-	0
05-430-730-0000-5832	Detox Recoveries	4,764.37-	4,764.37-	20,000.00-	24
----- EXPENDITURES -----					
05-430-730-3170-6050	Detox Transportation	524.20	524.20	1,500.00	35
05-430-730-3590-6072	Ccdtf County % State Billings	8,278.17	8,278.17	60,000.00	14
05-430-730-3700-6080	Commitment Costs - Alcoholism	0.00	0.00	13,000.00	0
05-430-730-3710-6020	Detoxification - Grand Rapids	3,900.00	3,900.00	35,000.00	11
05-430-730-3710-6080	Detoxification - Other	5,760.00	5,760.00	13,000.00	44
05-430-730-3930-6050	General Case Management	71.50	71.50	0.00	0
05-430-730-4800-6800	Other Cd/Detox Fees	0.00	0.00	300.00	0
----- REVENUES -----					
05-430-740-0000-5351	Child MH Combined S63	4,595.00-	4,595.00-	18,380.00-	25
05-430-740-0000-5437	IV- E MH Foster Care*28	0.00	0.00	12,000.00-	0
05-430-740-0000-5444	MA Rule 5 Foster Care*66	4,434.96-	4,434.96-	30,000.00-	15
05-430-740-0000-5450	MA CMH TCM*64	6,916.00-	6,916.00-	40,000.00-	17
05-430-740-0000-5500	Insurance Company Revenue	8,180.00-	8,180.00-	50,000.00-	16
05-430-740-0000-5832	Misc Child MH Recoveries	2,194.36-	2,194.36-	10,000.00-	22
----- EXPENDITURES -----					
05-430-740-3050-6020	Child Outpat Assess/Psyc. Testing	5,351.74	5,351.74	14,000.00	38
05-430-740-3160-6057	Mh Foster Care Transportation	75.00	75.00	0.00	0

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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5 FUND Health & Human Services

Report Basis: Cash

<u>Account Number</u>		<u>Status</u>	Percent of Year		25%
			<u>Quarter To Date</u>	<u>Year To Date</u>	
05-430-740-3300-6020	Other Family Community Support Services		172.42	172.42	200.00 86
05-430-740-3530-6020	Child Outpatient Psychotherapy		165.31	165.31	0.00 0
05-430-740-3830-6057	Rule 5- Children's Residential Trmt		15,003.11	15,003.11	100,000.00 15
05-430-740-3890-6020	Child Mh Respite		508.14	508.14	1,500.00 34
05-430-740-3890-6057	Mh Respite - Foster Care		0.00	0.00	6,100.00 0
05-430-740-3900-6020	Child Rule 79 Case Mgmt		540.00	540.00	2,160.00 25
----- REVENUES -----					
05-430-745-0000-5343	Adult MH Rule 78 CSP S25		7,222.00	7,222.00	55,418.00 13
05-430-745-0000-5421	MA Adult MH TCM*31		11,336.34	11,336.34	74,500.00 15
05-430-745-0000-5500	Insurance Company Revenue		0.00	0.00	14,000.00 0
05-430-745-0000-5832	Adult MH - Misc Recoveries		0.00	0.00	100.00 0
----- EXPENDITURES -----					
05-430-745-3030-6071	Client Outreach - Csp		1,261.05	1,261.05	0.00 0
05-430-745-3085-6020	Adult Outpat Diagnostic Assess/Psyc		3,668.38	3,668.38	28,000.00 13
05-430-745-3090-6050	Pre- Petition Screening/Hearing		0.00	0.00	4,000.00 0
05-430-745-3160-6050	Adult Transportation		275.50	275.50	1,800.00 15
05-430-745-3340-6071	Psychosocial Rehab/Ind Living Skills Csp		540.00	540.00	27,790.00 2
05-430-745-3720-6081	State- Operated Inpatient - Rtc Or Cbhh		8,491.50	8,491.50	35,000.00 24
05-430-745-3721-6081	Commitment Costs - Poor Relief		65,845.80	65,845.80	95,000.00 69
05-430-745-3910-6020	Adult Rule 79 Case Mgmt		1,080.00	1,080.00	4,320.00 25
----- REVENUES -----					
05-430-750-0000-5321	State Share- DD Screening S37		0.00	0.00	600.00 0
05-430-750-0000-5323	State Share- DD Services S38		15,314.44	15,314.44	60,000.00 26
05-430-750-0000-5341	DD Family Support Grant*35		0.00	0.00	3,000.00 0
05-430-750-0000-5373	DD SILS Program S34		5,024.00	5,024.00	10,800.00 47
05-430-750-0000-5420	Fed Share- DD Services F38		15,319.56	15,319.56	60,000.00 26
05-430-750-0000-5421	Federal Share- DD Screening F40		0.00	0.00	600.00 0
05-430-750-0000-5445	MA VA/DD TCM*42		2,169.95	2,169.95	13,500.00 16
----- EXPENDITURES -----					
05-430-750-3160-6050	Transportation/Txx		0.00	0.00	360.00 0
05-430-750-3340-6073	Semi- Independent Living Serv (Sils)		3,089.02	3,089.02	20,000.00 15
05-430-750-3350-6020	Family Support Program		0.00	0.00	4,000.00 0
05-430-750-3380-6050	Extended Supported Employment		2,255.25	2,255.25	12,500.00 18
05-430-750-3950-6020	Public Guardianship Dd		1,826.33	1,826.33	9,500.00 19
----- REVENUES -----					
05-430-760-0000-5320	State Share - LTCC		0.00	0.00	5,300.00 0
05-430-760-0000-5322	State Share - CADI/CAC S44		14,334.35	14,334.35	50,000.00 29

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

5 FUND Health & Human Services

Report Basis: Cash

Account Number	Status	Quarter To Date	Percent of Year		25% % of BDG
			Year To Date	Budget	
05-430-760-0000-5323	State Share - EW S44	4,115.89-	4,115.89-	11,250.00-	37
05-430-760-0000-5324	State Share - AC S45	1,910.61-	1,910.61-	20,000.00-	10
05-430-760-0000-5325	State Share - TBI S44	1,096.73-	1,096.73-	5,000.00-	22
05-430-760-0000-5331	State Share - RSC	170.80-	170.80-	3,000.00-	6
05-430-760-0000-5422	Fed Share - CADI/CAC F47	14,336.72-	14,336.72-	50,000.00-	29
05-430-760-0000-5423	Fed Share - EW F47	4,116.49-	4,116.49-	11,250.00-	37
05-430-760-0000-5425	Fed Share - TBI F47	1,096.87-	1,096.87-	5,000.00-	22
05-430-760-0000-5432	Federal Share - RSC	170.86-	170.86-	3,000.00-	6
05-430-760-0000-5434	Federal Share - LTCC	0.00	0.00	5,300.00-	0
05-430-760-0000-5500	Insurance Company Revenue	27,835.25-	27,835.25-	125,000.00-	22
05-430-760-0000-5810	Co Share - Waivered Services	226.00-	226.00-	400.00-	57
05-430-760-0000-5832	Misc Adult Service Recoveries	250.00-	250.00-	500.00-	50
05-430-760-0000-5845	LTCC Screening-Nursing Facility	0.00	0.00	31,643.00-	0
----- EXPENDITURES -----					
05-430-760-3160-6050	Transportation - Txx	0.00	0.00	1,200.00	0
05-430-760-3160-6075	Waiver & Ac Transportation	45.00	45.00	600.00	8
05-430-760-3180-6020	Health Related Services	502.50	502.50	0.00	0
05-430-760-3370-6050	Employability - Txx	690.00	690.00	3,090.00	22
05-430-760-3410-6075	Environment Access,Adapt,Special Supply	160.00-	160.00-	3,000.00	-5-
05-430-760-3950-6020	Guardianship/Conservatorship	1,422.43	1,422.43	8,000.00	18
05-430-760-3980-6020	Licensing & Resource Development	0.00	0.00	80.00	0
430 DEPT	Totals Social Services	Revenue	319,600.16-	319,600.16-	10
		Expend.	772,975.55	772,975.55	21
		Net	453,375.39	453,375.39	120
5 FUND	Totals Health & Human Services	Revenue	632,362.11-	632,362.11-	12
		Expend.	1,364,779.53	1,364,779.53	23
		Net	732,417.42	732,417.42	122

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

7 FUND Ditch

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Budget</u>	<u>Percent of Year</u>	<u>25% % of BDG</u>
350 DEPT	Ditch 2 (Judicial)					
----- REVENUES -----						
07-350-000-0000-5791	Interest Income	0.95-	0.95-	0.00		0
350 DEPT	Totals Ditch 2 (Judicial)	Revenue	0.95-	0.00		0
		Expend.	0.95-	0.00		0
		Net	0.95-	0.00		0

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Report Basis: Cash

<u>Account Number</u>		<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of BDG</u>
352 DEPT	Ditch 30 (County)					
----- REVENUES -----						
07-352-000-0000-5791	Interest Income		2.18-	2.18-	0.00	0
352 DEPT	Totals Ditch 30 (County)	Revenue	2.18-	2.18-	0.00	0
		Expend.				
		Net	2.18-	2.18-	0.00	0
7 FUND	Totals Ditch	Revenue	3.13-	3.13-	0.00	0
		Expend.				
		Net	3.13-	3.13-	0.00	0

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

15 FUND Aitkin County Collaborative

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
450 DEPT Collaborative- Aitkin School					
----- EXPENDITURES -----					
15-450-000-0000-6231 Aitkin School Services		24,497.91	24,497.91	32,850.00	75
450 DEPT Totals Collaborative- Aitkin School	Revenue				
	Expend.	24,497.91	24,497.91	32,850.00	75
	Net	24,497.91	24,497.91	32,850.00	75

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

15 FUND Aitkin County Collaborative

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	Percent of Year Budget	25% <u>% of BDG</u>
451 DEPT Collaborative- Hill City School					
----- EXPENDITURES -----					
15- 451- 000- 0000- 6231 Hill City School Services		0.00	0.00	25,000.00	0
451 DEPT Totals Collaborative- Hill City School	Revenue				
	Expend.	0.00	0.00	25,000.00	0
	Net	0.00	0.00	25,000.00	0

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

15 FUND Aitkin County Collaborative

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
452 DEPT Collaborative- Mcgregor School					
----- EXPENDITURES -----					
15- 452- 000- 0000- 6231 Mcgregor School Services		0.00	0.00	25,000.00	0
452 DEPT Totals Collaborative- Mcgregor School	Revenue				
	Expend.	0.00	0.00	25,000.00	0
	Net	0.00	0.00	25,000.00	0

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

15 FUND Aitkin County Collaborative

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
453 DEPT Collaborative- Aitkin Co Hlth & Hmn Svs					
----- EXPENDITURES -----					
15-453-000-0000-6231 Ach&Hs Services		0.00	0.00	5,000.00	0
453 DEPT Totals Collaborative- Aitkin Co Hlth & Hmn Svs	Revenue				
	Expend.	0.00	0.00	5,000.00	0
	Net	0.00	0.00	5,000.00	0
15 FUND Totals Aitkin County Collaborative	Revenue				
	Expend.	24,497.91	24,497.91	87,850.00	28
	Net	24,497.91	24,497.91	87,850.00	28

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

19 FUND Long Lake Conservation Center

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
521 DEPT	LLCC Administration				
----- REVENUES -----					
19-521-000-0000-5751	Contributions- Unrestricted	2,070.00-	2,070.00-	3,500.00-	59
19-521-000-0000-5840	Misc Receipts	43.50-	43.50-	2,000.00-	2
19-521-000-0000-5884	Commissary Sales Non Taxable	5,243.82-	5,243.82-	20,000.00-	26
19-521-000-0000-5885	Commissary Sales Taxable	5,267.07-	5,267.07-	25,000.00-	21
19-521-000-0000-5896	Phone/Postage/Mileage Reimbursement	5.00-	5.00-	0.00	0
----- EXPENDITURES -----					
19-521-000-0000-6101	Salaries- Full Time	19,794.63	19,794.63	83,341.00	24
19-521-000-0000-6124	Medicare- Employer 1.45%	287.05	287.05	1,208.00	24
19-521-000-0000-6149	Employer Deduct Contribution- Veba	1,750.00	1,750.00	2,250.00	78
19-521-000-0000-6150	Health Insurance- Employer	4,050.00	4,050.00	16,875.00	24
19-521-000-0000-6152	Life Insurance- Employer	31.20	31.20	130.00	24
19-521-000-0000-6154	Long Term Disability- Employer	83.43	83.43	0.00	0
19-521-000-0000-6155	Long Term Disability- Employee	0.00	0.00	200.00	0
19-521-000-0000-6159	Pera Co- Or 7.00%	1,435.12	1,435.12	6,042.00	24
19-521-000-0000-6165	Fica- Employer 6.20%	1,227.37	1,227.37	5,167.00	24
19-521-000-0000-6205	Postage	597.83	597.83	1,500.00	40
19-521-000-0000-6230	Printing, Publ & Adv Promotion	192.00	192.00	1,950.00	10
19-521-000-0000-6231	Services, Labor, Contracts	2,020.42	2,020.42	11,500.00	18
19-521-000-0000-6234	Background Check Fee	0.00	0.00	100.00	0
19-521-000-0000-6240	Dues/Assoc Fees	0.00	0.00	180.00	0
19-521-000-0000-6250	Telephone	1,278.64	1,278.64	6,800.00	19
19-521-000-0000-6254	Utilities	26,063.54	26,063.54	37,500.00	70
19-521-000-0000-6255	Garbage	277.14	277.14	1,200.00	23
19-521-000-0000-6272	Physical Examinations	0.00	0.00	250.00	0
19-521-000-0000-6330	Transportation/Travel/Parking	17.25	17.25	125.00	14
19-521-000-0000-6332	Hotel / Motel Lodging	112.00	112.00	0.00	0
19-521-000-0000-6352	Insurance	10,606.00	10,606.00	10,606.00	100
19-521-000-0000-6353	Workers Compensation Insurance	236.00	236.00	236.00	100
19-521-000-0000-6374	Auto & Trailer License	45.00	45.00	0.00	0
19-521-000-0000-6400	Commissary Items	6,899.23	6,899.23	19,000.00	36
19-521-000-0000-6405	Office & Computer Supplies	292.65	292.65	750.00	39
19-521-000-0000-6590	Repair & Maintenance Supplies	0.00	0.00	250.00	0
521 DEPT	Totals LLCC Administration	Revenue	12,629.39-	12,629.39-	25
		Expend.	77,296.50	77,296.50	37
		Net	64,667.11	64,667.11	41

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

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19 FUND Long Lake Conservation Center

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
522 DEPT	LLCC Education				
----- REVENUES -----					
19-522-000-0000-5553	Non School Groups	24,478.50-	24,478.50-	87,750.00-	28
19-522-000-0000-5557	Adventure Program Pkg Fees	20,539.00-	20,539.00-	81,850.00-	25
19-522-000-0000-5558	School Program Pkg Fees	86,770.57-	86,770.57-	448,760.00-	19
----- EXPENDITURES -----					
19-522-000-0000-6101	Salaries- Full Time	24,189.89	24,189.89	96,775.00	25
19-522-000-0000-6102	Wages- Part Time	7,821.69	7,821.69	72,818.00	11
19-522-000-0000-6124	Medicare- Employer 1.45%	441.18	441.18	2,459.00	18
19-522-000-0000-6149	Employer Deduct Contribution- Veba	3,128.00	3,128.00	2,000.00	156
19-522-000-0000-6150	Health Insurance- Employer	3,600.00	3,600.00	15,000.00	24
19-522-000-0000-6152	Life Insurance- Employer	15.60	15.60	62.00	25
19-522-000-0000-6154	Long Term Disability- Employer	31.80	31.80	0.00	0
19-522-000-0000-6155	Long Term Disability- Employee	0.00	0.00	240.00	0
19-522-000-0000-6159	Pera Co- Or 7.00%	2,320.91	2,320.91	12,144.00	19
19-522-000-0000-6165	Fica- Employer 6.20%	1,886.23	1,886.23	10,515.00	18
19-522-000-0000-6217	Credit Card Fees	184.04	184.04	1,500.00	12
19-522-000-0000-6224	Permits/License/Field Trips	0.00	0.00	2,250.00	0
19-522-000-0000-6230	Printing, Publ & Adv Promotion	435.94	435.94	0.00	0
19-522-000-0000-6231	Services, Labor, Contracts	15.60	15.60	0.00	0
19-522-000-0000-6240	Dues/Assoc Fees	20.00	20.00	725.00	3
19-522-000-0000-6267	Unemployment Compensation	787.31	787.31	5,000.00	16
19-522-000-0000-6353	Workers Compensation Insurance	1,778.00	1,778.00	1,778.00	100
19-522-000-0000-6374	Auto & Trailer License	0.00	0.00	100.00	0
19-522-000-0000-6405	Office & Computer Supplies	24.96	24.96	500.00	5
19-522-000-0000-6416	Education Supplies	943.07	943.07	7,500.00	13
19-522-000-0000-6430	Medical Supplies	33.83	33.83	750.00	5
19-522-000-0000-6590	Repair & Maintenance Supplies	0.00	0.00	250.00	0
522 DEPT	Totals LLCC Education				
	Revenue	131,788.07-	131,788.07-	618,360.00-	21
	Expend.	47,658.05	47,658.05	232,366.00	21
	Net	84,130.02-	84,130.02-	385,994.00-	22

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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

19 FUND Long Lake Conservation Center

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter</u> <u>To Date</u>	<u>Year</u> <u>To Date</u>	Percent of Year	
				<u>Budget</u>	<u>25%</u> <u>% of</u> <u>BDG</u>
523 DEPT LLCC Food					
----- REVENUES -----					
19- 523- 000- 0000- 5543 Special Milk Refunds		651.43-	651.43-	4,500.00-	14
----- EXPENDITURES -----					
19- 523- 000- 0000- 6101 Salaries- Full Time		10,540.95	10,540.95	43,638.00	24
19- 523- 000- 0000- 6102 Wages- Part Time		4,967.71	4,967.71	26,446.00	19
19- 523- 000- 0000- 6109 Salaries- Overtime		1,048.61	1,048.61	1,300.00	81
19- 523- 000- 0000- 6124 Medicare- Employer 1.45%		240.88	240.88	1,016.00	24
19- 523- 000- 0000- 6149 Employer Deduct Contribution- Veba		1,000.00	1,000.00	1,000.00	100
19- 523- 000- 0000- 6150 Health Insurance- Employer		2,025.00	2,025.00	8,100.00	25
19- 523- 000- 0000- 6152 Life Insurance- Employer		15.60	15.60	62.00	25
19- 523- 000- 0000- 6154 Long Term Disability- Employer		55.29	55.29	0.00	0
19- 523- 000- 0000- 6159 Pera Co- Or 7.00%		1,200.39	1,200.39	5,081.00	24
19- 523- 000- 0000- 6165 Fica- Employer 6.20%		1,029.99	1,029.99	3,214.00	32
19- 523- 000- 0000- 6230 Printing, Publishing & Adv		135.00	135.00	0.00	0
19- 523- 000- 0000- 6245 State Wide Hospitality Fee		0.00	0.00	35.00	0
19- 523- 000- 0000- 6267 Unemployment Compensation		453.00	453.00	3,500.00	13
19- 523- 000- 0000- 6353 Workers Compensation Insurance		1,785.00	1,785.00	1,785.00	100
19- 523- 000- 0000- 6418 Groceries- Students		15,779.45	15,779.45	57,500.00	27
19- 523- 000- 0000- 6420 Food Service Supplies		674.77	674.77	2,000.00	34
19- 523- 000- 0000- 6590 Repair & Maintenance Supplies		1,474.60	1,474.60	1,500.00	98
523 DEPT Totals LLCC Food	Revenue	651.43-	651.43-	4,500.00-	14
	Expend.	42,426.24	42,426.24	156,177.00	27
	Net	41,774.81	41,774.81	151,677.00	28

Aitkin County



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REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

Page 83

19 FUND Long Lake Conservation Center

Report Basis: Cash

<u>Account Number</u>		<u>Status</u>	<u>Quarter</u> <u>To Date</u>	<u>Year</u> <u>To Date</u>	Percent of Year <u>Budget</u>	25% <u>% of</u> <u>BDG</u>
524 DEPT	LLCC Maintenance					
----- EXPENDITURES -----						
19-524-000-0000-6101	Salaries- Full Time		8,619.11	8,619.11	33,634.00	26
19-524-000-0000-6102	Wages- Part Time		2,910.11	2,910.11	8,527.00	34
19-524-000-0000-6109	Salaries- Overtime		134.37	134.37	500.00	27
19-524-000-0000-6124	Medicare- Employer 1.45%		169.10	169.10	611.00	28
19-524-000-0000-6149	Employer Deduct Contribution- Veba		1,000.00	1,000.00	1,000.00	100
19-524-000-0000-6150	Health Insurance- Employer		2,025.00	2,025.00	8,100.00	25
19-524-000-0000-6152	Life Insurance- Employer		15.60	15.60	62.00	25
19-524-000-0000-6159	Pera Co- Or 7.00%		845.61	845.61	3,057.00	28
19-524-000-0000-6165	Fica- Employer 6.20%		723.12	723.12	2,614.00	28
19-524-000-0000-6267	Unemployment Compensation		745.00	745.00	2,500.00	30
19-524-000-0000-6302	Vehicle Maintenance		2,769.38	2,769.38	1,000.00	277
19-524-000-0000-6353	Workers Compensation Insurance		2,867.00	2,867.00	2,867.00	100
19-524-000-0000-6374	Auto & Trailer License		0.00	0.00	50.00	0
19-524-000-0000-6404	Grounds/Landscaping Materials		0.00	0.00	200.00	0
19-524-000-0000-6422	Janitorial Services/Supplies		1,140.58	1,140.58	7,500.00	15
19-524-000-0000-6450	Maintenance Small Tools		0.00	0.00	250.00	0
19-524-000-0000-6511	Gas And Oil		583.71	583.71	1,500.00	39
19-524-000-0000-6590	Repair & Maintenance Supplies		3,746.13	3,746.13	5,000.00	75
19-524-000-0000-6600	Capital Outlay		1,800.00	1,800.00	0.00	0
524 DEPT	Totals LLCC Maintenance	Revenue				
		Expend.	30,093.82	30,093.82	78,972.00	38
		Net	30,093.82	30,093.82	78,972.00	38

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Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

19 FUND Long Lake Conservation Center

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% of BDG</u>
525 DEPT	LLCC Capital Improvement				
----- EXPENDITURES -----					
19-525-000-0000-6601	Capital Outlay- Non Marcum House	1,716.20	1,716.20	0.00	0
525 DEPT	Totals LLCC Capital Improvement				
	Revenue				
	Expend.	1,716.20	1,716.20	0.00	0
	Net	1,716.20	1,716.20	0.00	0
19 FUND	Totals Long Lake Conservation Center				
	Revenue	145,068.89-	145,068.89-	673,360.00-	22
	Expend.	199,190.81	199,190.81	674,675.00	30
	Net	54,121.92	54,121.92	1,315.00	116

Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

21 FUND Parks

Report Basis: Cash

Account Number	Status	Quarter To Date	Year To Date	Percent of Year		
				Budget	% of BDG	
520 DEPT Parks						
----- REVENUES -----						
21-520-000-0000-5001 Taxes		0.00	0.00	15,000.00-	0	
21-520-000-0000-5252 Forf Tax Sales Apportionment		107,646.42-	107,646.42-	110,000.00-	98	
21-520-000-0000-5256 Intgov Rev Dnr- Public Access Maint		0.00	0.00	3,000.00-	0	
21-520-000-0000-5396 Trail Grants- State		162,872.99-	162,872.99-	425,000.00-	38	
21-520-000-0000-5398 Trail Grants- Federal		1,000.43-	1,000.43-	0.00	0	
21-520-000-0000-5510 Co. Parks Campground Fees		681.48-	681.48-	11,000.00-	6	
----- EXPENDITURES -----						
21-520-000-0000-6101 Salaries- Full Time		4,285.57	4,285.57	65,361.00	7	
21-520-000-0000-6102 Salaries- Part Time		0.00	0.00	25,000.00	0	
21-520-000-0000-6124 Medicare Employer		60.59	60.59	1,136.00	5	
21-520-000-0000-6149 Employer Deduct Contribution- Veba		125.00	125.00	1,500.00	8	
21-520-000-0000-6150 Health Insurance Employer		1,012.50	1,012.50	12,150.00	8	
21-520-000-0000-6152 Life Insurance- Employer		7.80	7.80	94.00	8	
21-520-000-0000-6159 Pera Co		310.68	310.68	4,739.00	7	
21-520-000-0000-6165 Fica- Employer		259.11	259.11	4,858.00	5	
21-520-000-0000-6205 Postage		33.96	33.96	0.00	0	
21-520-000-0000-6230 Printing, Publishing & Adv		0.00	0.00	2,500.00	0	
21-520-000-0000-6231 Services, Labor, Contracts		2,767.53	2,767.53	25,000.00	11	
21-520-000-0000-6243 License Fee		999.50	999.50	1,000.00	100	
21-520-000-0000-6250 Telephone		73.84	73.84	500.00	15	
21-520-000-0000-6254 Utilities		3,873.18	3,873.18	10,000.00	39	
21-520-000-0000-6330 Transportation & Travel		287.56	287.56	0.00	0	
21-520-000-0000-6350 Per Diem		280.00	280.00	1,000.00	28	
21-520-000-0000-6352 Insurance		2,817.00	2,817.00	2,817.00	100	
21-520-000-0000-6353 Workers Compensation Insurance		3,164.00	3,164.00	3,164.00	100	
21-520-000-0000-6374 Auto & Trailer License		224.00	224.00	200.00	112	
21-520-000-0000-6405 Office Supplies		390.05	390.05	0.00	0	
21-520-000-0000-6406 Field Supplies		257.41	257.41	0.00	0	
21-520-000-0000-6450 Small Tools		28.78	28.78	1,500.00	2	
21-520-000-0000-6511 Gas & Oil		6,002.48	6,002.48	25,000.00	24	
21-520-000-0000-6590 Repair & Maintenance Supplies		1,657.45	1,657.45	5,000.00	33	
21-520-000-0000-6802 Trail Grants- State		162,872.99	162,872.99	375,000.00	43	
520 DEPT Totals Parks		Revenue	272,201.32-	272,201.32-	564,000.00-	48
		Expend.	191,790.98	191,790.98	567,519.00	34
		Net	80,410.34-	80,410.34-	3,519.00	285-

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Aitkin County



REVENUES & EXPENDITURES BUDGET REPORT As of 03/2014

21 FUND Parks

Report Basis: Cash

<u>Account Number</u>	<u>Status</u>	<u>Quarter To Date</u>	<u>Year To Date</u>	<u>Percent of Year Budget</u>	<u>25% % of BDG</u>
21 FUND	Totals Parks	Revenue	272,201.32-	272,201.32-	564,000.00- 48
		Expend.	191,790.98	191,790.98	567,519.00 34
		Net	80,410.34-	80,410.34-	3,519.00 285-
FINAL TOTALS	1,458 Accounts	Revenue	2,287,432.97-	2,287,432.97-	22,709,263.00- 10
		Expend.	6,606,171.71	6,606,171.71	29,254,350.00 23
		Net	4,318,738.74	4,318,738.74	6,545,087.00 66

Aitkin County Board of Commissioners
Request for County Board Action/Agenda Item Cover Sheet



To: Chairperson, Aitkin County Board of Commissioners Date: 4/15/14

Via: Roxy Traxler, Interim County Administrator

From: Lori Grams

Title of Item: 1st Quarter Investment Report

Requested Meeting Date: 4/22/14 Estimated Presentation Time: None

Presenter:

Type of Action Requested (check all that apply)

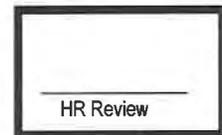
- For info only, no action requested
- Approve under Consent Agenda
- For discussion with possible action
- Adopt Ordinance Revision
- Let/Award Bid or Quote (attach copy of basic bid/quote specs or summary of complex specs, each bid/quote received & bid/quote comparison)
- Approve/adopt proposal by motion
- Approve/adopt proposal by resolution (attach draft resolution)
- Authorize filling vacant staff position
- Request to schedule public hearing or sale
- Other (please list)
- Request by member of the public to be heard
- Item should be addressed in closed session under MN Statute

Fiscal Impact (check all that apply)

- Is this item in the current approved budget? Yes _____ No _____ (attach explanation)
- What type of expenditure is this? Operating Capital Other (attach explanation)
- Revenue line account # that funds this item is: _____
- Expenditure line account # for this item is: _____

Staffing Impact (Any yes answer requires a review by Human Resources Manager before going to the board)

- Duties of a department employee(s) may be materially affected. Yes No
- Applicable job description(s) may require revision. Yes No
- Item may impact a bargaining unit agreement or county work policy. Yes No
- Item may change the department's authorized staffing level. Yes No



Supporting Attachment(s)

- Memorandum Summary of Item
- Copy of applicable county policy and/or ordinance (excerpts acceptable)
- Copy of applicable state/federal statute/regulation (excerpts acceptable)
- Copy of applicable contract and/or agreement
- Original bid spec or quote request (excluding complex construction projects)
- Bids/quotes received (excluding complex construction projects, provide comparison worksheet)
- Bid/quote comparison worksheet
- Draft County Board resolution
- Plat approval check-list and supporting documents
- Copy of previous minutes related to this issue

Lori Grams, County Treasurer

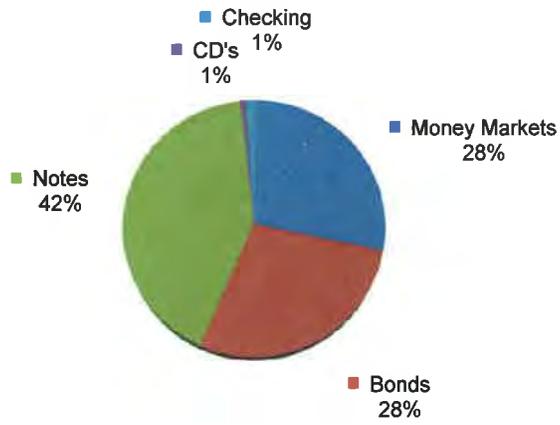
Bank #	Bank	Type of Investment	Purchase Date	Maturity Date	Interest Rate	Total
8	Grand Timber Bank	Money Market	-	-	0.25	2,529.33
15	Federal Reserve	Bond	4/20/1987	4/1/2017	8.00	76.79
102	Wells Fargo	Bond	11/21/1984	5/21/2021	8.50	2,869.18
104	Magic-General	Money Market	-	-	0.04	5,440,788.39
108	Wells Fargo	Money Market	-	-	0.01	21,521.44
109	Security State	Checking	-	-	0.05	22,464.05
110	Bremer	Checking	-	-	0.01	209,094.29
147	Magic-Ditch 2	Money Market	-	-	0.04	12,321.81
148	Magic-Ditch 30	Money Market	-	-	0.04	27,985.02
177	Magic-Envir Trust	Money Market	-	-	0.04	34,013.79
189	Bremer	Money Market	-	-	0.01	760,024.69
323	WFA	Money Market	-	-	0.01	0.00
363	Security State Bank	Money Market	-	-	0.30	846,453.31
381	Magic-Drainage/Cons	Money Market	-	-	0.04	0.00
414	Magic	Note	3/30/2011	3/9/2018	3.25	2,530,876.39
440	WFA	Note	7/24/2012	7/27/2019	1.00	2,215,000.00
442	WFA	Note	8/28/2012	8/28/2019	1.65	2,250,000.00
443	WFA	Bond	9/27/2012	9/27/2019	1.66	494,117.65
444	WFA	Note	10/4/2012	10/4/2019	1.72	1,000,000.00
446	WFA	Bond	10/3/2012	10/3/2019	1.65	2,000,000.00
445	WFA	Bond	10/11/2012	10/11/2019	1.69	1,304,347.83
447	WFA	Bond	10/15/2012	10/15/2019	1.63	250,000.00
448	Grand Timber Bank	CD	1/11/2013	1/11/2015	1.25	200,000.00
449	WFA	Bond	1/30/2013	1/30/2020	1.64	1,000,000.00
450	WFA	Note	2/12/2013	2/12/2020	1.67	1,000,000.00
451	WFA	Bond	2/13/2013	2/13/2020	1.73	1,000,000.00
452	WFA	Note	4/17/2013	4/17/2020	1.80	1,000,000.00
453	WFA	Note	6/26/2013	6/26/2020	2.04	500,000.00
455	WFA	Bond	9/11/2013	9/11/2020	3.25	1,000,000.00
456	Peoples National Bank	CD	1/28/2014	1/28/2015	0.35	25,000.00
						25,149,483.96

MARCH 2014

INVESTMENT PORTFOLIO DIVERSIFICATION

PORTFOLIO

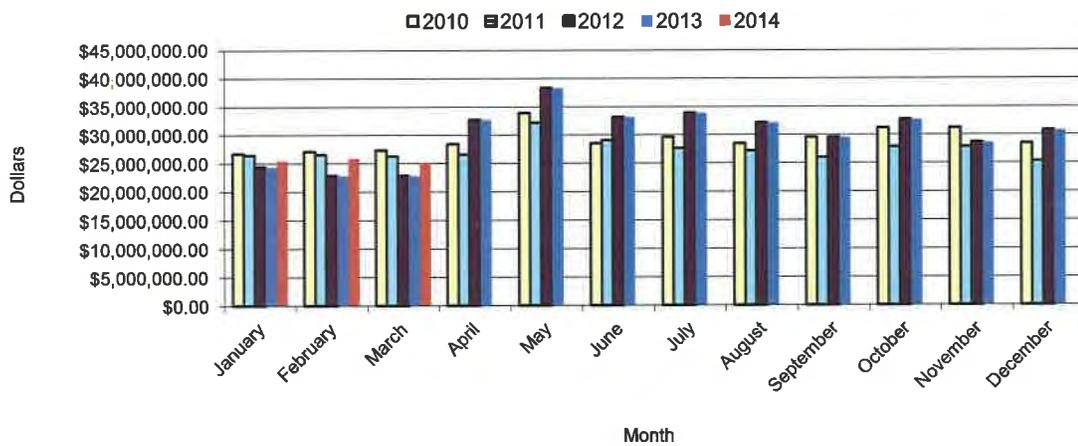
Money Markets	\$7,145,637.78
Bonds	\$7,051,411.45
Notes	\$10,495,876.39
CD's	\$225,000.00
Checking	\$231,558.34
Total	\$25,149,483.96



PORTFOLIO BALANCE

	2010	2011	2012	2013	2014
January	\$26,731,514.66	\$26,414,041.13	\$24,367,549.40	\$24,367,549.40	\$25,412,093.97
February	\$27,106,213.10	\$26,547,115.00	\$22,873,046.63	\$22,873,046.63	\$25,861,121.83
March	\$27,319,533.28	\$26,288,864.37	\$22,854,934.11	\$22,854,934.11	\$25,149,483.96
April	\$28,410,235.28	\$26,536,253.86	\$32,720,309.44	\$32,720,309.44	
May	\$33,936,657.66	\$32,170,929.96	\$38,314,598.16	\$38,314,598.16	
June	\$28,513,599.15	\$29,058,120.68	\$33,155,604.57	\$33,155,604.57	
July	\$29,590,832.38	\$27,638,077.10	\$33,946,246.47	\$33,946,246.47	
August	\$28,461,956.29	\$27,200,515.06	\$32,141,928.59	\$32,141,928.59	
September	\$29,575,813.54	\$25,975,141.17	\$29,568,924.83	\$29,568,924.83	
October	\$31,220,715.67	\$27,828,872.25	\$32,703,656.18	\$32,703,656.18	
November	\$31,220,715.67	\$27,828,872.25	\$28,619,875.28	\$28,619,875.28	
December	\$28,479,935.82	\$25,325,566.17	\$30,798,195.43	\$30,798,195.43	
Average Balance	\$29,213,976.88	\$27,401,030.75	\$30,172,072.42	\$30,172,072.42	\$25,474,233.25

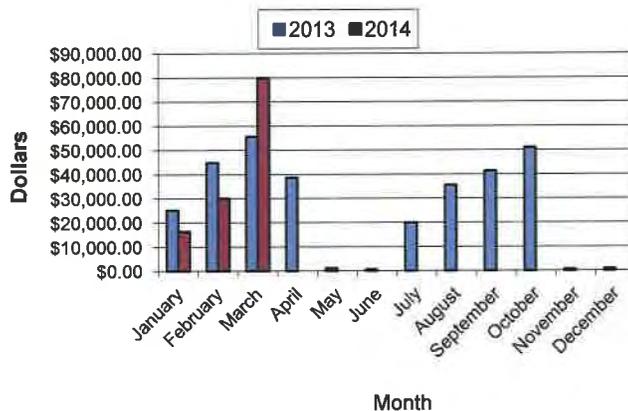
PORTFOLIO BALANCE



INTEREST EARNED

	2013	2014
January	\$25,110.50	\$16,360.81
February	\$44,781.58	\$30,049.56
March	\$55,604.94	\$79,889.99
April	\$38,627.26	
May	\$1,076.56	
June	\$608.37	
July	\$19,903.30	
August	\$35,486.57	
September	\$41,269.92	
October	\$50,944.03	
November	\$565.46	
December	\$851.93	
Total	\$314,830.42	\$126,300.36

INTEREST EARNED



Interest Earned

2012	\$314,893.06
2011	\$322,490.59
2010	\$530,362.75

Aitkin County Board of Commissioners
Request for County Board Action/Agenda Item Cover Sheet

2N
Agenda Item #

To: Chairperson, Aitkin County Board of Commissioners Date: 4-16-14

Via: Roxy Traxler, Interim County Administrator

From: Bobbie Danielson, Human Resources Manager 

Title of Item:

Policy Update, Section 5.1, Group Insurance and Affordable Care Act Policy

Requested Meeting Date: 4-22-14 Estimated Presentation Time: _____

Presenter: Bobbie Danielson, Human Resources Manager

Type of Action Requested (check all that apply)

- For info only, no action requested
- Approve under Consent Agenda
- For discussion only with possible future action
- Adopt Ordinance Revision
- Let/Award Bid or Quote (attach copy of basic bid/quote specs or summary of complex specs, each bid/quote received & bid/quote comparison)
- Approve/adopt proposal by motion
- Approve/adopt proposal by resolution (attach draft resolution)
- Authorize filling vacant staff position
- Request to schedule public hearing or sale
- Other (please list) _____
- Request by member of the public to be heard
- Item should be addressed in closed session under MN Statute _____

Fiscal Impact (check all that apply)

- Is this item in the current approved budget? Yes No (attach explanation)
- What type of expenditure is this? Operating Capital Other (attach explanation)
- Revenue line account # that funds this item is: _____
- Expenditure line account # for this item is: _____

Staffing Impact (Any yes answer requires a review by Human Resources Manager before going to the board)

- Duties of a department employee(s) may be materially affected. Yes No
- Applicable job description(s) may require revision. Yes No
- Item may impact a bargaining unit agreement or county work policy. Yes No
- Item may change the department's authorized staffing level. Yes No


HR Review

Supporting Attachment(s)

- Memorandum Summary of Item
- Copy of applicable county policy and/or ordinance (excerpts acceptable)
- Copy of applicable state/federal statute/regulation (excerpts acceptable)
- Copy of applicable contract and/or agreement
- Original bid spec or quote request (excluding complex construction projects)
- Bids/quotes received (excluding complex construction projects, provide comparison worksheet)
- Bid/quote comparison worksheet
- Draft County Board resolution
- Plat approval check-list and supporting documents
- Copy of previous minutes related to this issue
- Other supporting document(s) (please list) _____

Provide eleven (11) copies of supporting documentation **NO LATER THAN Wednesday at 12:00 pm** to make the Board's agenda for the following Tuesday. Items **WILL NOT** be placed on the Board agenda unless complete documentation is provided for mailing in the Board packets. (see reverse side for details)

AITKIN COUNTY HUMAN RESOURCES

Bobbie Danielson, HR Manager
bobbie.danielson@co.aitkin.mn.us
Nicole Visnovec, HR Specialist
nicole.visnovec@co.aitkin.mn.us

Phone 218-927-7306
Job Hotline 218-927-7393
Fax 218-927-7374
www.co.aitkin.mn.us

To: Aitkin County Commissioners
Roxy Traxler, Interim County Administrator

From: Bobbie Danielson, HR Manager 

Date: April 16, 2014

Subject: Policy Update, Section 5.1, Group Insurance and Affordable Care Act Policy

Background Information

The Personnel Policy Manual is updated on an on-going basis. The proposed changes to Section 5.1 will amend the existing health insurance eligibility language from 32 to 30 hours per week, consistent with the insurance contracts and Affordable Care Act (ACA) requirements. In addition, a new section related to administering provisions of the ACA was added. In part, this new language outlines measurement periods, how variable hour employees' time will be tracked, and which health insurance plan will be offered to variable hour employees who work 30 or more hours per week on average. To the extent that federal statute or regulations change, this policy shall be construed as consistent with those changes.

This was sent to department heads for review and input on April 8, 2014, and discussed at the April 10, 2014, Department Head meeting. Payroll has also had the opportunity to review and provide input.

Language ~~removed~~ is marked as strikethrough.
Language added is underlined.

Action Requested

Motion to adopt the Group Insurance and Affordable Care Act Policy, Section 5.1, as proposed; noting this replaces the current Section 5.1 Insurance – Medical, Life and Long Term Disability policy.

~~Strikethrough denotes text removed.~~
Underlined denotes text added.

ARTICLE 5: EMPLOYEE BENEFITS AND SERVICES

~~**SUBJECT 5.1: INSURANCE – MEDICAL, LIFE AND LONG
TERM DISABILITY**~~

**SUBJECT 5.1: GROUP INSURANCE AND AFFORDABLE CARE
ACT POLICY**

Effective: ~~11/28/00, revised 8/10/04~~

Adopted: 4/22/2014 [pending board approval]

GROUP INSURANCE:

Purpose

To provide medical, life and long term disability insurance to employees of Aitkin County.

Summary

All full time, permanent employees, who work a minimum of ~~thirty two (32)~~ thirty (30) hours per week are entitled to health and life insurance provided by Aitkin County. Those who are eligible for medical insurance and can prove that they are already covered by a different policy are not required to sign up for a plan provided by Aitkin County.

Some agreements entitle employees to Long-Term Disability benefits after six (6) months of continuous employment with Aitkin County.

The effective date of coverage shall be based upon the specific policy.

Select voluntary benefits are also available for employees to purchase, including dental insurance, supplemental life insurance, short-term disability insurance, long-term disability insurance, long-term care insurance, and critical illness voluntary insurance policies.

Refer to applicable agreements for additional details and employer contribution rates.

AFFORDABLE CARE ACT (ACA) POLICY:

In March 2010, Congress enacted and President Obama signed major reform legislation – the Patient Protection and Affordable Care Act (commonly called PPACA, ACA, or “Obamacare”) (Pub.L. 111-148), as amended by the Health Care and Education Reconciliation Act of 2010 (Pub. L. 111-152). This represents the most significant regulatory overhaul of the U.S. healthcare system since the passage of Medicare and Medicaid in 1965. The law includes hundreds of new requirements packed into thousands of pages of rules that affect the delivery and administration of employer-sponsored group health plans. The rules, as applied to employer-sponsored group health plans, generally fall into one of seven general categories, namely: 1) effective dates and grandfathering; 2) qualifying coverage mandates (insurance reforms); 3) employer mandates (play-or-pay provisions); 4) reporting and disclosure requirements; 5) individual mandates; 6) tax issues (revenue generating rules); and 7) the exchange program.

To the extent that federal statute or regulations change, this policy shall be construed as consistent with those changes.

Purpose

To comply with requirements of the Affordable Care Act and to offer health care coverage to “substantially all” full-time employees, effective January 1, 2015.

Definitions

Employer: Aitkin County

Full-time Employee: For purposes of this Affordable Care Act (ACA) policy, full-time means an employee working 30 or more hours per week on average or 130 or more hours per month on average.

Variable Hour Employee: For purposes of the Affordable Care Act (ACA), variable hour employee means an employee working in a position classified as part-time, seasonal, temporary, or intermittent. The employer will use a look back period to determine each variable hour employee’s full-time status by looking back 12 months to analyze whether the employee worked an average of 30 or more hours per week on average or 130 or more hours per month on average.

Substantially All: Substantially all full-time employees is defined as 95% of employees working 30 or more hours per week on average or 130 or more hours per month on average. The employer is not subject to a penalty if 5% of employees working 30 or more hours per week on average or 130 or more hours per month on average are not offered health care coverage.

Measurement Periods

Standard measurement period, 12 months (October 15 – October 14)

Administrative period not to exceed 90 days (October 15 – December 31)

Stability period, 12 months (January 1 – December 31)

For Positions Classified as Full-time

Employees who are expected to be full-time, working 30 or more hours per week on average or 130 or more hours per month on average, during the standard measurement period will be offered health coverage under the employer's health insurance plan during new hire orientation.

For Positions Classified as Variable Hour (aka Part-time, Seasonal, Temporary or Intermittent)

The employer will implement a standard measurement period of 12 calendar months to determine whether or not a variable hour employee is eligible for health coverage under the employer's health insurance plan. The standard measurement period will be from October 15th through October 14th of each calendar year.

If an employee is determined to be full-time during the standard measurement period, they will be treated as full-time during a subsequent stability period, regardless of the number of hours they work during the stability period. The employer will implement a stability period of 12 calendar months during which a variable hour employee, determined to be full-time in the standard measurement period, will be eligible for health coverage under the employer's health insurance plan. The stability period will be from January 1st through December 31st of each calendar year.

If an employee is determined to be eligible for health insurance coverage through the standard measurement period, the employer has up to 90 days to enroll the employee in the employer's health insurance plan. An administrative period will be used to determine eligibility and to facilitate notification and enrollment of employees. This administrative period will be from October 15th through December 31st of each calendar year. During this period, eligible variable hour employees will be given a two-week open enrollment period to enroll in health coverage under the employer's health insurance plan which will be in effect for the upcoming stability period/plan year. (Note: Variable hour employees are not eligible for other insurance benefits, such as dental, life, long-term or short-term disability, long-term care insurance, or FSA plan enrollment.)

Unless mandated otherwise by the Local 49 or Teamsters Health Fund agreement, all eligible variable hour employees will be offered coverage on one plan, the BCBS \$5,000/\$10,000 HDHP, during the stability period. The employee and employer contributions towards this plan shall be established by the County Board and calculated in the same manner as defined in the agreement between Aitkin County and AFSCME Council 65, Local Union #667 (Courthouse Unit). In the event the health insurance provisions or contribution rates fail to meet the requirements of the Affordable Care Act and its related regulations or cause the Employer to be subject to a penalty, tax or fine, the Employer may amend contribution rates or implement alternative provisions so as to comply with the Act and avoid any penalties, taxes or fines for the Employer.

If funds are not available in a department's budget to cover the cost of health insurance, the Department Head may submit a written request to the County Administrator to reduce the employee's work hours to less than 30 hours per week or less than 130 hours per month to avoid

the obligation to offer health care coverage. Said request will generally be approved if it is not prohibited by the terms of a collective bargaining agreement.

Rehired Seasonal Employees

Seasonal employees work up to 67 days per calendar year. For ease of recordkeeping, seasonal employees will be required to be inactive (zero hours of work) for a period of 26 consecutive weeks between work seasons.

An employee who is rehired and had no active service with the employer for a period of 26 consecutive weeks will be treated as a new employee and will be evaluated by the employer during the standard measurement period to determine if the employee is eligible for health insurance benefits during a subsequent stability period.

Active service is based on all hours combined with the employer and is not separated or tracked individually by department.

Opt-out Health Insurance Waivers

Employees who elect to waive coverage will be required to do so in writing. The employer does not provide a cash in-lieu of health insurance benefit.

Aitkin County Board of Commissioners
Request for County Board Action/Agenda Item Cover Sheet

20
Agenda Item #

To: Chairperson, Aitkin County Board of Commissioners Date: 4-16-14

Via: Roxy Traxler, Interim County Administrator

From: Bobbie Danielson, Human Resources Manager *Bobbie Danielson*

Title of Item:

Policy Update, Section 5.5, Family and Medical Leave Policy

Requested Meeting Date: 4-22-14 Estimated Presentation Time: _____

Presenter: Bobbie Danielson, Human Resources Manager

Type of Action Requested (check all that apply)

- For info only, no action requested
- Approve under Consent Agenda
- For discussion only with possible future action
- Adopt Ordinance Revision
- Let/Award Bid or Quote (attach copy of basic bid/quote specs or summary of complex specs, each bid/quote received & bid/quote comparison)
- Approve/adopt proposal by motion
- Approve/adopt proposal by resolution (attach draft resolution)
- Authorize filling vacant staff position
- Request to schedule public hearing or sale
- Other (please list) _____
- Request by member of the public to be heard
- Item should be addressed in closed session under MN Statute _____

Fiscal Impact (check all that apply)

- Is this item in the current approved budget? Yes No (attach explanation)
- What type of expenditure is this? Operating Capital Other (attach explanation)
- Revenue line account # that funds this item is: _____
- Expenditure line account # for this item is: _____

Staffing Impact (Any yes answer requires a review by Human Resources Manager before going to the board)

- Duties of a department employee(s) may be materially affected. Yes No
- Applicable job description(s) may require revision. Yes No
- Item may impact a bargaining unit agreement or county work policy. Yes No
- Item may change the department's authorized staffing level. Yes No

BD
HR Review

Supporting Attachment(s)

- Memorandum Summary of Item
- Copy of applicable county policy and/or ordinance (excerpts acceptable)
- Copy of applicable state/federal statute/regulation (excerpts acceptable)
- Copy of applicable contract and/or agreement
- Original bid spec or quote request (excluding complex construction projects)
- Bids/quotes received (excluding complex construction projects, provide comparison worksheet)
- Bid/quote comparison worksheet
- Draft County Board resolution
- Plat approval check-list and supporting documents
- Copy of previous minutes related to this issue
- Other supporting document(s) (please list) _____

Provide eleven (11) copies of supporting documentation NO LATER THAN Wednesday at 12:00 pm to make the Board's agenda for the following Tuesday. Items WILL NOT be placed on the Board agenda unless complete documentation is provided for mailing in the Board packets. (see reverse side for details)

AITKIN COUNTY HUMAN RESOURCES

Bobbie Danielson, HR Manager
bobbie.danielson@co.aitkin.mn.us
Nicole Visnovec, HR Specialist
nicole.visnovec@co.aitkin.mn.us

Phone 218-927-7306
Job Hotline 218-927-7393
Fax 218-927-7374
www.co.aitkin.mn.us

To: Aitkin County Commissioners
Roxly Traxler, Interim County Administrator

From: Bobbie Danielson, HR Manager 

Date: April 16, 2014

Subject: Policy Update, Section 5.5, Family and Medical Leave Policy

Background Information

The Personnel Policy Manual is updated on an on-going basis. The proposed re-write of Section 5.5 related to the Family and Medical Leave Act is attached. The most notable updates include the expanded military-related leave protections. To the extent that federal statute or regulations change, this policy shall be construed as consistent with those changes.

This was sent to department heads for review and input on April 8, 2014, and discussed at the April 10, 2014, Department Head meeting. Payroll has also had the opportunity to review and provide input.

Action Requested

Motion to adopt the Family and Medical Leave Policy, Section 5.5, as proposed; noting this replaces the current Section 5.5 Family and Medical Leave policy.

Current Policy

ARTICLE 5: EMPLOYEE BENEFITS AND SERVICES

SUBJECT 5.5: FAMILY AND MEDICAL LEAVE

Effective: ~~11/28/00~~

PURPOSE:

To comply with the Family and Medical Leave Act.

A. GENERAL PROCEDURES:

~~Eligible employees may request a family and/or medical leave of absence for up to 12 weeks of leave in any 12-month period under certain circumstances. Employees are eligible after one year of employment and after 1,250 hours of work over the previous 12 months. An eligible employee's FMLA entitlement is limited to a total of 12 work weeks of leave during any 12-month period measured forward from the date the employee's first FMLA leave began.~~

~~Employees must utilize accrued paid leave during a family and/or medical leave of absence. It will be the policy of Aitkin County to require all employees to first use their paid vacation, personal or sick leave for any part of the twelve (12) week mandated period. The County will then provide only enough unpaid leave to total twelve (12) weeks of leave (Board approved 6/8/93).~~

B. REASONS FOR TAKING LEAVE:

Pursuant to the FMLA, a leave may be granted for any of the following reasons:

- ~~• For the birth of the employee's child and to care for the newborn child;~~
- ~~• For placement with the employee of a son or daughter for adoption or foster care;~~
- ~~• To care for the employee's spouse, son or daughter, or parent, who has a serious health condition; or~~
- ~~• For a "serious health condition" that makes the employee unable to perform the employee's job.~~

~~A "serious health condition" means an illness, injury impairment, or physical or mental condition that involves one of the following:~~

- ~~1. Hospital Care~~

~~Inpatient care (i.e., an overnight stay) in a hospital, hospice or residential medical care facility, including any period of incapacity or subsequent treatment in connection with or consequent to such inpatient care.~~

~~2. Absence Plus Treatment~~

~~a. A period of incapacity of more than three consecutive calendar days (including any subsequent treatment or period of incapacity relating to the same condition), that also involves:~~

~~(1) Treatment two or more times by a health care provider, by a nurse or physician's assistant under direct supervision of a health care provider, or by a provider of health care services (e.g., physical therapist) under orders of, or on referral by, a health care provider; or~~

~~(2) Treatment by a health care provider on at least one occasion which results in a regimen of continuing treatment under the supervision of the health care provider.~~

~~3. Pregnancy~~

~~Any period of incapacity due to pregnancy, or for prenatal care.~~

~~4. Chronic Conditions Requiring Treatments~~

~~A chronic condition which:~~

~~(1) Requires periodic visits for treatment by a health care provider, or by a nurse or physician's assistant under direct supervision of a health care provider;~~

~~(2) Continues over an extended period of time (including recurring episodes of a single underlying condition); and~~

~~(3) May cause episodic rather than a continuing period of incapacity (e.g., asthma, diabetes, epilepsy, etc.).~~

~~5. Permanent/Long term Conditions Requiring Supervision~~

~~A period of incapacity which is permanent or long term due to a condition for which treatment may not be effective. The employee or family member must be under the continuing supervision of, but need not be receiving active treatment by a health care provider. Examples include Alzheimer's, a severe stroke or the terminal stages of a disease.~~

~~6. Multiple Treatments (Non-Chronic Conditions)~~

~~Any period of absence to receive multiple treatments (including any period of recovery therefrom) by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for restorative surgery after an accident or other injury, or for a condition that would likely result in a period of incapacity of more than three consecutive calendar days in the absence of medical intervention or treatment, such as cancer (chemotherapy, radiation, etc.); severe arthritis (physical therapy), and kidney disease (dialysis).~~

~~C. ADVANCE NOTICE AND MEDICAL CERTIFICATION:~~

~~Employees may be required to provide advance notice and medical certification. A family and/or medical leave of absence may be denied if requirements are not met:~~

- ~~• An employee must ordinarily provide 30 days' advance notice when the leave is foreseeable;~~
- ~~• A medical certification to support a request for leave because of a serious health condition may be required. Second or third opinions, at the expense of the County, and a fitness for duty report to return to work may also be required.~~

~~D. JOB BENEFITS AND PROTECTION:~~

~~For the duration of the leave, an employee's health coverage under any group health plan will be maintained. An employee must continue to pay his or her share of group health plan premiums that had been paid by the employee prior to the leave.~~

~~Upon return from leave, most employees will be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms.~~

~~A FMLA leave will not result in the loss of any employment benefit that accrued prior to the start of an employee's leave.~~

~~E. INTERPLAY BETWEEN LEAVES:~~

~~If a leave qualifies as both Family and/or Medical Leave and Parenting Leave pursuant to Minnesota Chapter 181, the leaves will run concurrently and the leave used will count against the employee's entitlement under both types of leave.~~

~~F. INTERPLAY WITH COLLECTIVE BARGAINING AGREEMENTS:~~

~~If an applicable collective bargaining agreement provides for an employment benefit plan with greater family or medical leave rights than those established by the FMLA, the terms of the collective bargaining agreement shall be adhered to.~~

Attachment 5A Family Medical Leave Act Request Form

Proposed re-write of Section 5.5.

ARTICLE 5: EMPLOYEE BENEFITS AND SERVICES

SUBJECT 5.5: FAMILY AND MEDICAL LEAVE

Adopted: April 22, 2014 [pending board approval]

To the extent that federal statute or regulations change, this policy shall be construed as consistent with those changes.

Federal Department of Labor Wage and Hour Division 29 CFR Part 825
February 6, 2013 Register

Aitkin County will comply with the Family and Medical Leave Act of 1993, as amended. The employer posts the mandatory FMLA Notice and upon hire provides all new employees with notices required by the U.S. Department of Labor (DOL) on Employee Rights and Responsibilities under the Family and Medical Leave Act on the bulletin board in the courthouse, on the Intranet, and in each staffed building.

The function of this policy is to provide employees with a general description of their FMLA rights. In the event of any conflict between this policy and the applicable law, employees will be afforded all rights required by law.

If you have any questions, concerns, or disputes with this policy, you must contact the Human Resources Department.

A. General Provisions

Under this policy, Aitkin County will grant up to 12 weeks (or up to 26 weeks of military caregiver leave to care for a covered service member with a serious injury or illness) during a 12-month period to eligible employees. The leave may be paid, unpaid or a combination of paid and unpaid leave, depending on the circumstances of the leave and as specified in this policy.

B. Eligibility

To qualify to take family or medical leave under this policy, the employee must meet all of the following conditions:

1) The employee must have worked for the employer for 12 months or 52 weeks. The 12 months or 52 weeks need not have been consecutive. Separate periods of employment will be counted, provided that the break in service does not exceed seven years. Separate periods of employment will be counted if the break in service exceeds seven years due to National Guard or Reserve military service obligations or when there is a written agreement stating the employer's intention to rehire the employee after the service break.

Proposed re-write of Section 5.5.

2) The employee must have worked at least 1,250 hours during the 12-month period immediately before the date when the leave is requested to commence. The principles established under the Fair Labor Standards Act (FLSA) determine the number of hours worked by an employee. The FLSA does not include time spent on paid or unpaid leave as hours worked. Consequently, these hours of leave should not be counted in determining the 1,250 hours eligibility test for an employee under FMLA. All periods of absence from work due to or necessitated by USERRA-covered service is counted in determining an employee's eligibility for FMLA leave.

C. Type of Leave Covered

To qualify as FMLA leave under this policy, the employee must be taking leave for one of the reasons listed below:

- 1) The birth of a child and in order to care for that child.
- 2) For placement with the employee of a child for adoption or foster care and to care for the newly placed child.
- 3) To care for the employee's spouse, child or parent (not parent in-law) with a serious health condition (described below). *Note, in some circumstances this may include "in loco parentis", meaning whoever is standing in the place of a parent, such as same-sex couples, grandparents, or other non-biological parents if they have held themselves out as the parent. It requires a statement explaining the family scenario relationship and each will be reviewed on a case by case basis.*
- 4) The serious health condition (described below) of the employee.

An employee may take leave because of a serious health condition that makes the employee unable to perform the functions of the employee's position.

A serious health condition is defined as an illness, injury, impairment, or physical or mental condition that requires inpatient care at a hospital, hospice or residential medical care facility, including any period of incapacity or any subsequent treatment in connection with such inpatient care or a condition that requires continuing care by a licensed health care provider.

Employees with questions about what illnesses are covered under this FMLA policy are required to consult with the Human Resource Department. FMLA eligibility is determined on a case by case basis.

- 5) Qualifying exigency leave for families of members of the National Guard or Reserves or of a regular component of the Armed Forces when the military member is on covered active duty or called to covered active duty.

An employee whose spouse, son, daughter or parent either has been notified of an impending call or order to covered active military duty or who is already on covered active duty may take up to 12 weeks of leave for reasons related to or affected by the family member's call-up or service.

Proposed re-write of Section 5.5.

The qualifying exigency must be one of the following: 1) short-notice deployment, 2) military events and activities, 3) child care and school activities, 4) financial and legal arrangements, 5) counseling, 6) rest and recuperation to a maximum of 15 calendar days for each instance, 7) post-deployment activities, and 8) Eligible employees may also take leave to care for a military member's parent who is incapable of self-care when the care is necessitated by the member's covered active duty. Such care may include arranging for alternative care, providing care on an immediate need basis, admitting or transferring the parent to a care facility, or attending meetings with staff at a care facility. 9) Additional activities that arise out of active duty, provided that the employer and employee agree, including agreement on timing and duration of the leave.

"Covered active duty" means:

(a) in the case of a member of a regular component of the Armed Forces, duty during the deployment of the member with the Armed Forces to a foreign country; and

(b) in the case of a member of a reserve component of the Armed Forces, duty during the deployment of the member with the Armed Forces to a foreign country under a Federal call or order to active duty under a provision of law referred to in section 101(a)(13)(B) of title 10, United States Code.

The leave may commence as soon as the individual receives the call-up notice. (Son or daughter for this type of FMLA leave is defined the same as for child for other types of FMLA leave except that the person does not have to be a minor.) This type of leave would be counted toward the employee's 12-week maximum of FMLA leave in a 12-month period.

6) Military caregiver leave (also known as covered service member leave) to care for an injured or ill service member or covered veteran.

An employee whose son, daughter, parent or next of kin is a covered service member may take up to 26 weeks in a single 12-month period to care for the covered service member.

The term "covered service member" means:

(a) a current member of the Armed Forces (including a member of the National Guard or Reserves) who is undergoing medical treatment, recuperation, or therapy, is otherwise in outpatient status, or is otherwise on the temporary disability retired list, for a serious injury or illness; or

(b) a covered veteran who is undergoing medical treatment, recuperation or therapy for a serious injury or illness and who was a member of the Armed Forces (including a member of the National Guard or Reserves), and was discharged or released under conditions other than dishonorable at any time during the five-year period prior to the first date the eligible employee takes FMLA leave to care for the covered veteran. An eligible employee must commence leave to care for a covered veteran within five years of the veteran's active duty service. Some

Proposed re-write of Section 5.5.

exceptions may apply to the single 12-month period; each request will be considered on a case by case basis.

The term “serious injury or illness”:

(a) in the case of a member of the Armed Forces (including a member of the National Guard or Reserves), means an injury or illness that was incurred by the covered member in line of duty on active duty in the Armed Forces (or existed before the beginning of the member’s active duty and was aggravated by service in line of duty on active duty in the Armed Forces) and that may render the member medically unfit to perform the duties of the member’s office, grade, rank, or rating; and

(b) in the case of a covered veteran who was a member of the Armed Forces (including a member of the National Guard or Reserves) at any time during a period when the person was a covered service member, means a qualifying (as defined by the Secretary of Labor) injury or illness that was incurred by the member in line of duty on an active duty in the Armed Forces (or existed before the beginning of the member’s active duty and was aggravated by service in line of duty on active duty in the Armed Forces) and that manifested itself before or after the member became a veteran, and is:

- (1) A continuation of a serious injury or illness that was incurred or aggravated when the covered veteran was a member of the Armed Forces and rendered the service member unable to perform the duties of the service member’s office, grade, rank, or rating; OR
- (2) A physical or mental condition for which the covered veteran has received a VA Service Related Disability Rating (VASRD) of 50 percent or greater and such VASRD rating is based, in whole or in part, on the condition precipitating the need for military caregiver leave; OR
- (3) A physical or mental condition that substantially impairs the veteran’s ability to secure or follow a substantially gainful occupation by reason of a disability or disabilities related to military service or would do so absent treatment; OR
- (4) An injury, including a psychological injury, on the basis of which the covered veteran has been enrolled in the Department of Veterans Affairs Program of Comprehensive Assistance for Family Caregivers.

Retroactive designation. If an employee is absent for a condition or event that is or progresses into a FMLA qualifying event and the employee subsequently requests a leave as provided under this policy, the employer may designate all or some portion of the related prior leave taken as FMLA, to the extent that the earlier leave meets the necessary qualifications.

D. Amount of Leave

An eligible employee can take up to 12 weeks for the FMLA circumstances (1) through (5) above under this policy during any 12-month period. The employer will measure the 12-month period as a rolling 12-month period measured backward from the date an employee uses any FMLA leave under this policy. Each time an employee takes leave, the employer will compute the amount of leave the employee has taken under this policy in the last 12 months and subtract it

Proposed re-write of Section 5.5.

from the 12 weeks of available leave, and the balance remaining is the amount the employee is entitled to take at that time.

An eligible employee can take up to 26 weeks for the FMLA circumstance (6) above (military caregiver leave) during a single 12-month period. For this military caregiver leave, the employer will measure the 12-month period as a rolling 12-month period measured forward. FMLA leave already taken for other FMLA circumstances will be deducted from the total of 26 weeks available.

If a husband and wife both work for the employer and each wishes to take leave for the birth of a child, adoption or placement of a child in foster care, or to care for a parent (but not a parent "in-law") with a serious health condition, the husband and wife may each take 12 weeks of leave for qualifying events. If a husband and wife both work for the employer and each wishes to take leave to care for a covered injured or ill service member, the husband and wife may each take 26 weeks of leave.

E. Employee Status and Benefits During Leave

While an employee is on FMLA, the employer will continue the employee's health benefits during the leave period at the same level and under the same conditions as if the employee had continued to work.

If the employee chooses not to return to work for reasons other than a continued serious health condition of the employee or the employee's family member or a circumstance beyond the employee's control, the employer will require the employee to reimburse the employer the amount it paid for the employee's health insurance premium during the leave period. An employee who returns to work for at least 30 calendar days is considered to have returned to work. An employee who transfers directly from taking FMLA leave to retirement, or who retires during the first 30 days after the employee returns to work, is deemed to have returned to work.

While on paid FMLA, the employer will continue to make payroll deductions to collect the employee's share of the premium. While on unpaid FMLA, the employee must continue to make this payment, either in person or by mail. The payment must be received in the Auditor's Office by the 1st day of each month. If the payment is more than 30 days late and other payment arrangements have not been made, the employee's health insurance coverage may be dropped for the duration of the leave. The employer will provide 15 days' notification prior to the employee's loss of coverage.

If the employee contributes to a life insurance or disability plan or other voluntary plans, the employer will continue making payroll deductions while the employee is on paid FMLA. While the employee is on unpaid FMLA, the employee may request continuation of such benefits and pay his or her portion of the premiums. If the employee does not continue these payments or make other payment arrangements, the employer may discontinue coverage during the leave. If the employer maintains coverage, the employer may recover the costs incurred for paying the employee's share of any premiums, whether or not the employee returns to work.

F. Employee Status After Leave

An employee who takes leave under this policy may be asked to provide a fitness for duty (FFD) clearance from the health care provider. This requirement will be included in the employer's response to the FMLA request. Generally, an employee who takes FMLA leave will be able to return to the same position or a position with equivalent status, pay, benefits and other employment terms and conditions of employment. The position will be the same or one which is virtually identical in terms of pay, benefits and working conditions. With written notice to the employee at the time the employee gives notice of the need for FMLA leave (or when FMLA leave commences, if earlier), the employer may choose to exempt certain key employees from this requirement and not return them to the same or similar position.

G. Use of Paid and Unpaid Leave

An employee who is taking FMLA leave because of the employee's own serious health condition or the serious health condition of a family member must use all paid comp time, vacation, PTO, personal or sick leave prior to being eligible for unpaid leave, unless provided otherwise by law or a collective bargaining agreement. Accrued time off shall run concurrently with FMLA leave if the reason for the FMLA leave is covered by the established sick leave policy.

An employee who is using military FMLA leave for a qualifying exigency must use all paid vacation and personal leave prior to being eligible for unpaid leave. An employee using FMLA military caregiver leave must also use all paid vacation, personal leave or sick leave (as long as the reason for the absence is covered by the employer's sick leave policy) prior to being eligible for unpaid leave.

H. Intermittent Leave or a Reduced Work Schedule

The employee may take FMLA leave in 12 consecutive weeks, may use the leave intermittently or, under certain circumstances, may use the leave to reduce the workweek or workday, resulting in a reduced hour schedule. In all cases, the leave may not exceed a total of 12 workweeks (or 26 workweeks to care for an injured or ill service member over a 12-month period) and the employee must make a reasonable effort to schedule treatments so as not to disrupt unduly the employer's operations.

The employer may temporarily transfer an employee to an available alternative position with equivalent pay and benefits if the alternative position would better accommodate the intermittent or reduced schedule, in instances of when leave for the employee or employee's family member is foreseeable and for planned medical treatment, including recovery from a serious health condition or to care for a child after birth, or placement for adoption or foster care.

For the birth, adoption or foster care of a child, the employer and the employee must mutually agree to the schedule before the employee may take the leave intermittently or work a reduced hour schedule. Leave for birth, adoption or foster care of a child must be taken during the 12 month period beginning on the date of birth or placement of the child.

I. Certification for the Employee's Serious Health Condition

The employer will require certification for the employee's serious health condition. The employee must respond to such a request within 15 days of the request or provide a reasonable explanation for the delay. Failure to provide certification may result in a denial of continuation of leave. Medical certification will be provided using the DOL Certification of Health Care Provider for Employee's Serious Health Condition.

The employer may directly contact the employee's health care provider for verification or clarification purposes using a health care professional, HR representative, or management official. Before the employer makes this direct contact with the health care provider, the employee will be given an opportunity to resolve any deficiencies in the medical certification.

The employer has the right to ask for a second opinion if it has reason to doubt the certification. The employer will pay for the employee to get a certification from a second doctor, which the employer will select. The employer may deny FMLA leave to an employee who refuses to release relevant medical records to the health care provider designated to provide a second or third opinion. If necessary to resolve a conflict between the original certification and the second opinion, the employer will require the opinion of a third doctor. The employer and the employee will mutually select the third doctor, and the employer will pay for the opinion. This third opinion will be considered final. The employee will be provisionally entitled to leave and benefits under the FMLA pending the second and/or third opinion.

J. Certification for the Family Member's Serious Health Condition

The employer will require certification for the family member's serious health condition. The employee must respond to such a request within 15 days of the request or provide a reasonable explanation for the delay. Failure to provide certification may result in a denial of continuation of leave. Medical certification will be provided using the DOL Certification of Health Care Provider for Family Member's Serious Health Condition.

The employer may directly contact the employee's family member's health care provider for verification or clarification purposes using a health care professional, HR representative, or management official. Before the employer makes this direct contact with the health care provider, the employee will be given an opportunity to resolve any deficiencies in the medical certification.

The employer has the right to ask for a second opinion if it has reason to doubt the certification. The employer will pay for the employee's family member to get a certification from a second doctor, which the employer will select. The employer may deny FMLA leave to an employee whose family member refuses to release relevant medical records to the health care provider designated to provide a second or third opinion. If necessary to resolve a conflict between the original certification and the second opinion, the employer will require the opinion of a third doctor. The employer and the employee will mutually select the third doctor, and the employer will pay for the opinion. This third opinion will be considered final. The employee will be

Proposed re-write of Section 5.5.

provisionally entitled to leave and benefits under the FMLA pending the second and/or third opinion.

K. Certification of Qualifying Exigency for Military Family Leave

The employer will require certification of the qualifying exigency for military family leave. The employee must respond to such a request within 15 days of the request or provide a reasonable explanation for the delay. Failure to provide certification may result in a denial of continuation of leave. This certification will be provided using the DOL Certification of Qualifying Exigency for Military Family Leave.

L. Certification for Serious Injury or Illness of Covered Service member for Military Family Leave

The employer will require certification for the serious injury or illness of the covered service member. The employee must respond to such a request within 15 days of the request or provide a reasonable explanation for the delay. Failure to provide certification may result in a denial of continuation of leave. This certification will be provided using the DOL Certification for Serious Injury or Illness of Covered Service member.

M. Recertification

The employer may request recertification for the serious health condition of the employee or the employee's family member no more frequently than every 30 days and only when circumstances have changed significantly, or if the employer receives information casting doubt on the reason given for the absence, or if the employee seeks an extension of his or her leave. Otherwise, the employer may request recertification for the serious health condition of the employee or the employee's family member when the minimum duration expires or every six months in connection with a FMLA absence. The employer may provide the employee's health care provider with the employee's attendance records and ask whether need for leave is consistent with the employee's serious health condition.

N. Procedure for Requesting FMLA Leave

All employees requesting FMLA leave must provide verbal or written notice of the need for the leave to the HR Department. Within five business days after the employee has provided this notice, the HR Department will complete and provide the employee with the DOL Notice of Eligibility and Rights.

When the need for the leave is foreseeable, the employee must provide the employer with at least 30 days' notice. When an employee becomes aware of a need for FMLA leave less than 30 days in advance, the employee must provide notice of the need for the leave either the same day or the next business day. When the need for FMLA leave is not foreseeable, the employee must comply with the employer's usual and customary notice and procedural requirements for requesting leave, absent unusual circumstances.

Proposed re-write of Section 5.5.

O. Designation of FMLA Leave

Within five business days after the employee has submitted the appropriate certification form, the HR Department will complete and provide the employee with a written response to the employee's request for FMLA leave using the DOL Designation Notice.

P. Intent to Return to Work From FMLA Leave

On a basis that does not discriminate against employees on FMLA leave, the employer may require an employee on FMLA leave to report periodically on the employee's status and intent to return to work.

Aitkin County Board of Commissioners
Request for County Board Action/Agenda Item Cover Sheet

3A
Agenda Item #

To: Chairperson, Aitkin County Board of Commissioners Date: April 8, 2014
Via: Roxy Traxler, Interim County Administrator
From: Terry Neff, Environmental Services Director

Title of Item:
Adoption of Proposed SSTS Ordinance
Requested Meeting Date: April 22, 2014 Estimated Presentation Time: 20 Min
Presenter: Terry Neff, Environmental Services Director

Type of Action Requested (check all that apply)

- For info only, no action requested
- For discussion with possible action
- Let/Award Bid or Quote (attach copy of basic bid/quote specs or summary of complex specs, each bid/quote received & bid/quote comparison)
- Approve/adopt proposal by motion
- Authorize filling vacant staff position
- Request to schedule public hearing or sale
- Request by member of the public to be heard
- Item should be addressed in closed session under MN Statute _____
- Approve under Consent Agenda
- Adopt Ordinance Revision
- Approve/adopt proposal by resolution (attach draft resolution)
- Other (please list) _____

Fiscal Impact (check all that apply)

- Is this item in the current approved budget? Yes _____ No _____ (attach explanation)
- What type of expenditure is this? Operating Capital Other (attach explanation)
- Revenue line account # that funds this item is: _____
- Expenditure line account # for this item is: _____

Staffing Impact (Any yes answer requires a review by Human Resources Manager before going to the board)

- Duties of a department employee(s) may be materially affected. Yes No
- Applicable job description(s) may require revision. Yes No
- Item may impact a bargaining unit agreement or county work policy. Yes No
- Item may change the department's authorized staffing level. Yes No

HR Review

Supporting Attachment(s)

- Memorandum Summary of Item
- Copy of applicable county policy and/or ordinance (excerpts acceptable)
- Copy of applicable state/federal statute/regulation (excerpts acceptable)
- Copy of applicable contract and/or agreement
- Original bid spec or quote request (excluding complex construction projects)
- Bids/quotes received (excluding complex construction projects, provide comparison worksheet)
- Bid/quote comparison worksheet
- Draft County Board resolution
- Plat approval check-list and supporting documents
- Copy of previous minutes related to this issue
- Other supporting document(s) (please list) _____

Provide (1) copy of supporting documentation NO LATER THAN Wednesday at Noon to make the Board's agenda for the following Tuesday. (If your packet contains colored copies, please provide (4) paper copies of supporting documentation as we do not have a color printer or copier.) Items WILL NOT be placed on the Board agenda unless complete documentation is provided for the Board packets.

Aitkin County Environmental Services Planning and Zoning
209 Second Street NW
Room 100
Aitkin, MN 56431
Phone: 218-927-7342
Fax: 218-927-4372



MEMORANDUM

DATE: April 8, 2014

TO: Aitkin County Board of Commissioners
Roxy Traxler, Interim County Administrator

FROM: Terry Neff, Environmental Services Director 

RE: Adopt Subsurface Sewage Treatment System (SSTS) Ordinance

The Ordinance Committee met on February 11, 2014 and February 18, 2014, to review drafts of a proposed SSTS Ordinance (see attached). The proposed SSTS Ordinance is a result of legislation and rule making that requires all counties to have an approved SSTS Ordinance that meets minimum state requirements by February 4, 2014. Although the February 4, 2014 date has passed, having the proposed SSTS Ordinance adopted prior to the construction season will meet the intent of the legislation.

A public hearing on the proposed SSTS Ordinance was held before the Aitkin County Planning Commission (PC) on April 7, 2014. The enclosed draft SSTS Ordinance contains changes approved by the PC at the public hearing. Proposed new language is in red and language proposed for deletion in ~~strikethrough~~. The PC made the recommendation to submit the draft SSTS Ordinance to the County Board of Commissioners for final adoption with the noted changes. Also attached are the minutes from the public hearing and a letter from the Greater Lakes Association of Realtors.

At the April 22, 2014, Aitkin County Board of Commissioners meeting I will be requesting the final adoption of the enclosed draft Aitkin County Subsurface Sewage Treatment System Ordinance.

If you have any questions, please contact me at 218-927-7342 or by e-mail at tneff@co.aitkin.mn.us.

enclosures

c:\ctybrd\ctybrd2014

CERTIFIED COPY OF RESOLUTION OF COUNTY BOARD OF AITKIN COUNTY, MINNESOTA

ADOPTED April 22, 2014

By Commissioner: xx

042214-0xx

Aitkin County Subsurface Sewage Treatment System Ordinance

WHEREAS, in accordance with Minnesota Statutes 375.51 and 394.26, a public hearing was held at the April 7, 2014 Aitkin County Planning Commission meeting to consider adoption of the Aitkin County Subsurface Sewage Treatment System Ordinance.

NOW THEREFORE, BE IT RESOLVED the Board of Commissioners of Aitkin County, Minnesota, adopts the attached Aitkin County Subsurface Sewage Treatment System Ordinance, effective May 1, 2014.

Commissioner XX moved the adoption of the resolution and it was declared adopted upon the following vote

FIVE MEMBERS PRESENT All Members Voting Yes

STATE OF MINNESOTA)
County of Aitkin) ss.
Office of County Auditor,)

I, Kirk Peysar, Auditor, of the County of Aitkin, do hereby certify that I have compared the foregoing with the original resolution filed in my office on the 22nd day of April A.D., 2014, and that the same is a true and correct copy of the whole thereof.

WITNESS MY HAND AND SEAL OF OFFICE at Aitkin, Minnesota, this 22nd day of April A.D., 2014

KIRK PEYSAR, County Auditor
BY _____, Deputy

SUBSURFACE SEWAGE TREATMENT SYSTEM ORDINANCE

Aitkin County

(Effective Date)

Draft

4/8/14

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AITKIN COUNTY SUBSURFACE SEWAGE TREATMENT ORDINANCE

SECTION 1 PURPOSE, INTENT AND SCOPE

1.1 Purpose

The purpose of the Subsurface Sewage Treatment System (SSTS) Ordinance is to provide minimum standards for and regulation of Individual Sewage Treatment Systems (ISTS) and Midsized Sewage Treatment Systems (MSTS) including the proper location, design and construction; their necessary modification and reconstruction; their operation, maintenance and repair to protect surface water and groundwater from contamination by human sewage and waterborne household and commercial wastes within the applicable jurisdiction of the County; to protect the public's health and safety, and eliminate or prevent the development of public nuisances pursuant to the authority granted under Minnesota Statutes, Sections 115.55, 145A.05, 375.51, 394.21-394.37, and 471.82, the County Comprehensive Plan, and the County Zoning Ordinance, Shoreland Management Ordinance and the Flood Plain Management Ordinance.

1.2 Intent

It is intended by the County that this Ordinance will promote the following:

- A. The protection of lakes, rivers and streams, wetlands, and groundwater in Aitkin County essential to the promotion of public health, safety, welfare, socioeconomic growth and development of the County.
- B. The regulation of proper SSTS construction, reconstruction, repair, maintenance, and location of SSTS to prevent the entry and migration of contaminants, thereby preventing the degradation of surface water and groundwater quality.
- C. The establishment of minimum standards for SSTS placement, design, construction, reconstruction, repair, maintenance and to prevent contamination and, if contamination is discovered, the identification and control of its consequences and the abatement of its source and migration.
- D. The appropriate utilization of privy vaults and other non-water carried sewage collection and storage facilities.
- E. The provision of technical assistance and education, SSTS permitting, inspections, and enforcement to prevent and control water-borne diseases, lake and stream degradation, groundwater-related hazards, and public nuisance conditions.

1.3 Scope

This Ordinance regulates the siting, design, installation, alterations, operation, maintenance, monitoring, and management of all SSTS within the County's applicable jurisdiction including, but not necessarily limited to individual SSTS and cluster or community SSTS, privy vaults, and other non-water carried SSTS. All sewage generated in unsewered areas of the County shall be treated and dispersed by an approved SSTS that is sited, designed, installed, operated, and maintained in accordance with the provisions of this Ordinance or by a system that has been permitted by the MPCA.

SECTION 2 GENERAL PROVISIONS

2.1 Authority

This Ordinance is adopted pursuant to MN Statutes, Section 115.55; MN Statutes, Sections 145A.01 through 145A.08; MN Statutes, Section 375.51; or successor statutes, MN Rules 2006, Chapter 7080, and elements of 2011 Rules from Chapters 7080, 7081, 7082, and 7083; or successor Rules.

2.2 Jurisdiction

The jurisdiction of this Ordinance shall include all lands of the County except for incorporated areas that administer a (SSTS) program by Ordinance within their incorporated jurisdiction, which is at least as strict as this Ordinance.

2.3 Interpretation

In their interpretation and application, the provisions of this Ordinance shall be held to be minimum requirements and shall be liberally construed in favor of the County and shall not be deemed a limitation or repeal of any other powers granted by MN Statutes.

2.4 Severability

If any section, clause, provision, or portion of this Ordinance is adjudged unconstitutional or invalid by a court of law, the remainder of this Ordinance shall not be affected and shall remain in full force.

2.5 Liability

The County's involvement in administration of this Ordinance does not create a special duty to any person and, further liability or responsibility shall not be imposed upon the County or any of its officials, employees, or other contract agents, for damage resulting from the defective construction, operation, or abandonment of any onsite or cluster SSTS regulated under this Ordinance or by reason of any standards, requirements, or inspections authorized by this Ordinance hereunder.

2.6 Abrogation and Greater Restrictions

It is not intended by this Ordinance to repeal, abrogate, or impair any other existing County Ordinance, easements, covenants, or deed restrictions. However, where this Ordinance imposes greater restrictions, the provisions of this Ordinance shall prevail. All other Ordinances inconsistent with this Ordinance are hereby repealed to the extent of the inconsistency only.

SECTION 3 ADMINISTRATION

3.1 County Administration

- A.** The Aitkin County Environmental Services Department shall administer the SSTS program and all provisions of this Ordinance.
- B.** The County's duties and responsibilities include, but are not be limited to, the following:
 1. Review all applications for SSTS.
 2. Issue all permits required in this Ordinance.
 3. Inspect all work regulated in this Ordinance.
 4. Investigate all complaints regarding SSTS.

5. Issue certificates of installation, certificates of compliance or notices of noncompliance where applicable.
6. Enact enforcement provisions of this Ordinance as necessary.
7. Refer unresolved violations of this Ordinance to the County Attorney.
8. Maintain current records for each permitted SSTS including all site evaluation documents, design documents, inspection documents, and other applicable documents.
9. The County shall employ or retain under contract qualified and appropriately licensed professionals to administer and operate the SSTS program.
10. Submit annual reports to MPCA as required.

3.11 References to Rule

References to Minnesota (MN) Rules Chapter 7080 are referencing the 2011 Rules. References to the 2006 Rules will be specifically indicated as 2006 Minnesota (MN) Rules Chapter 7080.

3.2 State of Minnesota

Where a single SSTS or group of SSTS under single ownership within one-half mile of each other, have a design flow greater than 10,000 gallons per day, the owner or owners shall make application for and obtain a State Disposal System permit from MPCA. For any SSTS that has a measured daily flow for a consecutive seven-day period, as determined according to 7081.0110, which equals or exceeds 10,000 gallons per day, a State Disposal System permit is required.

SSTS serving establishments or facilities licensed or otherwise regulated by the State shall conform to the requirements of this Ordinance.

3.3 Cities and Township

Any jurisdiction within the County that regulates SSTS must comply with the standards and requirements of this Ordinance. The standards and ordinance of the jurisdiction may be administratively and technically more restrictive than this Ordinance.

SECTION 4 DEFINITIONS

The following words and phrases shall have the meanings ascribed to them in this Section. If not specifically defined in this Section, terms used in this Ordinance shall have the same meaning as provided in the standards adopted by reference. For purposes of this Ordinance, the words “must” and “shall” are mandatory and the words “may” and “should” are permissive.

Absorption Area: means the area below a mound that is designed to absorb sewage tank effluent. This area is determined by multiplying the rockbed length by the required absorption width. The absorption area shall be the minimum clean sand area under the mound.

Absorption Width- is determined by using (2006 MN Rules Chapter 7080) Part 7080.0170, Subp. 5 (B), subitems 4 and 5, or by calculating the berm widths by using the berm slope multipliers found on the Mound Design Worksheet (see Appendix A), whichever is greater.

Alternative Local Standards (ALS): ALS are individual sewage treatment system standards that are less restrictive than the State’s technical standards and criteria. ALS contains the adopted standards from the 2006 MN Rules for systems using less than 2,500 gallons of water per day.

As-Built: Drawings and documentation specifying the final in-place location, size, and type of all system components. These records identify the results of materials testing and describe conditions during construction. Information provided must be verified by a certified statement.

Authorized Representative: An employee or agent of the Environmental Services Department.

Bedroom: Any room or unfinished area within a dwelling that is designed or might reasonably be used for sleeping. An all purpose room, den, study, or office will be considered a bedroom if it has an egress window and closet.

County: Aitkin County, Minnesota.

County Board: The Aitkin County Board of Commissioners.

Department: The Aitkin County Environmental Services Department.

Failing System: At a minimum, an SSTS that discharges sewage to a seepage pit, cesspool, drywell, leaching pit, or other pit; and any SSTS with less than the required vertical separation distance as described in Chapter 7080.1500, Subp. 4(D & E). The determination of the threat to groundwater for other conditions shall be made by a Qualified Employee or State licensed inspection business.

Grey water: Sewage that does not contain toilet wastes.

Imminent Threat to Public Health or Safety (ITPH): A SSTS that creates the potential to immediately and adversely affect or threaten public health and safety as described in Chapter 7080.1500, Subp. 4(A). At a minimum a SSTS with a discharge of sewage or sewage effluent to the ground surface, drainage systems, ditches, or storm water drains or directly to surface water; SSTS that cause a reoccurring sewage backup into a dwelling or other establishment; SSTS with electrical hazards; or sewage tanks with unsecured, or weak maintenance access covers. The determination of protectiveness for other conditions must be made by a Qualified Employee or a State licensed inspection business.

Individual Subsurface Sewage Treatment System or ISTS: A subsurface sewage treatment system, or part thereof, that is designed to treat a sewage design flow of 5,000 gallons per day or less.

Large Subsurface Sewage Treatment System or LSTS: A system designed to treat more than 10,000 gallons of sewage per day. These systems are permitted by the MPCA.

Mottling: As applied to soils, means a zone of chemical and reduction activity, appearing as splotchy patches of red, brown or grey in the soil. In sub soils with a color value of four or more, the term mottling also includes soil having matrix colors with a chroma of two or less as described in "Keys to Soil Taxonomy": 11th Edition, 2010.

MPCA: Minnesota Pollution Control Agency.

Midsized Subsurface Sewage Treatment System or MSTs: A subsurface sewage treatment system, or part thereof, that is designed to treat more than 5,000 gallons per day to a maximum of 10,000 gallons per day. These systems require an operating permit.

Qualified Employee: A State or Local Unit of Government employee who designs, installs, maintains, pumps, or inspects SSTS as part of the individual's employment duties.

Running water: as it pertains to structures, means when a faucet or other device is opened and water drains out whether by pressure or gravity flow.

Sewage: Waste from toilets, bathing, laundry, or culinary activities or operations or floor drains associated with these sources, including household cleaners and other constituents in amounts normally used for domestic purposes.

Subsurface Sewage Treatment System or SSTS: Subsurface Sewage Treatment System including an ISTS, MSTS or LSTS.

Soil Dispersal System: A system where sewage effluent is dispersed into the soil for treatment by absorption and filtration and includes, but is not limited to, trenches, seepage beds, at-grade systems, mound systems and drip dispersal systems.

State: The State of Minnesota.

SWF: Shoreland, wellhead protection areas, food, beverage, lodging establishments.

Toilet Waste Treatment Device: Incinerating and composting toilets. Chemical, biological and holding toilets are not included in this definition.

Type I System (Standard): A SSTS that is designed according to Parts 7080.2200 to 7080.2240. These standard systems utilize trenches, beds, mounds, at-grades, chambers, dual fields or grey water systems. Standard systems must be placed on natural, undisturbed soils and installed in a manner that allows for at least thirty-six (36) inches of vertical separation between the bottom of the systems distribution media and periodically saturated soils or bedrock.

Type II System: A SSTS that is designed according to Parts 7080.2270 to 7080.2290. These systems are designed as holding tanks, privies, toilet waste treatment devices and septic systems installed in the flood plain.

Type III System: A SSTS that deviates from the requirements in Parts 7080.2210 to 7080.2240. These systems include systems built on fill or disturbed soil, systems constructed on sites with less than twelve (12) inches of natural soil above the periodically saturated soil or bedrock, and reduced size systems with timed dosing. These systems require operating permits.

Type IV System: A SSTS that is designed according to Part 7080.2350. These systems utilizes registered treatment or pretreatment technologies in order to meet various treatment requirements that a standard systems may not accomplish. These systems require operating permits.

Type V System: A SSTS that is designed according to Part 7080.2400. These systems are designed by a professional engineer and do not meet the prescriptive designs for Types I-IV. These systems require operating permits.

Zoning/Land Use/Building Permit. “Zoning permit” means a document issued by the zoning office to use land as designated in this ordinance. In addition to specific instances provided for herein, and unless otherwise provided for herein, a permit shall be required before beginning any construction, moving, rebuilding or material alteration of a structure or septic system.

SECTION 5 GENERAL REQUIREMENTS

5.1 Retroactivity

5.11 Existing Permits

Unexpired permits which were issued prior to the effective date of this Ordinance shall remain valid under the terms and conditions of the original permit until the original expiration date.

5.12 Existing SSTS

A SSTS installed prior to the effective date of this Ordinance and meeting the minimum requirements at the time it was installed, shall be allowed to continue in use except if it is determined as a failure to protect ground water or an Imminent Threat to Public Health or Safety.

5.13 SSTS on Lots Created After January 21, 1992 and January 23, 1996

Lots created after January 21, 1992, through the subdivision/platting process must have two (2) septic system sites capable of supporting standard/Type I individual sewage treatment systems. Lots created after January 23, 1996, through metes and bounds descriptions must have two (2) septic system sites each capable of supporting standard/Type I individual sewage treatment systems. Lots that would require use of holding tanks will not be approved.

5.2 Upgrade, Repair, Replacement, and Abandonment

5.21 SSTS Capacity Expansions

Expansion of an existing SSTS must include any system upgrades that are necessary to bring the entire system into compliance with the provisions of this Ordinance at the time of the expansion. Expansions may include addition of bedrooms, water using appliances and mobile home replacement with a larger home.

5.22 Bedroom Additions

Any addition to a structure that includes bedroom(s) that require a zoning permit from the County shall require that the SSTS meet the required design flow according to MN Rule 7080.1860.

5.23 Failure to Protect Groundwater

An SSTS that is determined not to be protective of groundwater in accordance with MN Rule 7080.1500, Subp. 4(B) shall be upgraded, repaired, replaced or abandoned by the owner in accordance with the provisions of this Ordinance within twelve (12) months upon receipt of a Notice of Noncompliance.

5.24 Imminent Threat to Public Health or Safety

An SSTS posing an Imminent Threat to Public Health or Safety shall be pumped within 24 hours and managed as a holding tank in accordance with MN Rule 7080.1500, Subp. 4(A) and said SSTS shall be upgraded, repaired, replaced or abandoned by the owner in accordance with the provisions of this Ordinance within ten (10) months upon receipt of a Notice of Noncompliance.

5.25 Abandonment of SSTS

Any SSTS, or any component thereof, which is no longer intended to be used, must be abandoned in accordance with MN Rule 7080.2500.

5.3 SSTS Located in Floodplain

SSTS shall not be located in a floodway and wherever possible, location within any part of a floodplain should be avoided. If no option exists to locate a SSTS outside of a floodplain, location within the flood fringe is allowed if the requirements in MN Rule 7080.2270 and all relevant local requirements are met. For existing structures within the floodway that are served by an SSTS, holding tanks will be allowed as a replacement system but the ground elevation where the tank is placed shall not be raised above its existing elevation.

5.4 Class V Injection Wells

All owners of new or replacement SSTS that are considered to be Class V injection wells, as defined in the Code of Federal Regulations, Title 40, Part 144, are required by the Federal Government to submit an UIC Class 5 Inventory Form to the Environmental Protection Agency as described in CFR40, Part 144. Further, owners are required to identify all Class V injection wells in property transfer disclosures.

5.5 SSTS Practitioner Licensing

5.51 License Required

No person shall engage in site evaluation, inspection, design, installation, construction, alteration, extension, repair, maintenance, or pumping of SSTS in Aitkin County without an appropriate and valid license issued by MPCA in accordance with MN Rules Chapter 7083 except as exempted in Rule 7083.0700.

5.52 License Exemption

A MPCA license is not required of an individual who is constructing a SSTS on land that is owned by the individual and functions solely as a dwelling for that individual pursuant to MN Rule 7083.0700. Installation of the system shall be based upon a design by a licensed designer. The system shall be inspected before it is covered and a twenty-four (24)-hour notification to the Department for inspection is required.

5.6 Prohibitions

5.61 Sewage Discharge to Ground Surface or Surface Water

It is unlawful for any person to construct, maintain, or use any SSTS system regulated under this Ordinance that results in raw or partially treated wastewater seeping to the ground surface or flowing into any surface water. Any surface discharging system must be permitted under the National Pollutant Discharge Elimination System program by the MPCA.

5.62 Sewage Discharge to a Well or Boring

It is unlawful for any person to discharge raw or treated wastewater into any well or boring as described in MN Rules Chapter 4725.2050, or any other excavation in the ground that is not in compliance with this Ordinance.

5.63 Discharge of Hazardous or Deleterious Materials

It is unlawful for any person to discharge into any treatment system, regulated under this Ordinance, any hazardous or deleterious material other than in normal household use and quantities that adversely affects the treatment or dispersal performance of the system or groundwater quality.

5.64 Occupancy or Use of a Building without a Compliant SSTS

It is unlawful for any person to maintain, occupy, or use any building intended for habitation or that contains one or more of the following – sleeping areas, bathtub, shower, toilet facilities, sink, or any other feature that would make the structure more oriented towards a dwelling unit than an accessory structure, that is not provided with a wastewater treatment system or that disposes of wastewater in a manner that does not comply with the provisions of this Ordinance.

5.65 Holding Tanks

Holding tanks are not allowed as a means of sewage treatment for new construction on lots created after January 21, 1992 within the shoreland district and January 10, 1995 outside the shoreland district. Holding tanks may be allowed as replacements for existing failing septic systems, systems which pose an Imminent Threat to Public Health or Safety, and only when it can be conclusively shown that a standard/Type I (Classification I or II, MN Rules Chapter 7080.1860) SSTS cannot be feasibly installed.

5.66 Toilet Waste Treatment Devices

Toilet waste treatment devices are not allowed as the only method of sewage treatment for structures with running water. For structures without running water a composting toilet or an incinerating toilet would be allowed as an only method of sewage treatment. Specifications on type of toilet waste treatment device must be submitted at the time of permit application. Photos and receipts must be submitted to the Department as evidence of compliance. Toilet waste treatment devices must meet 7080.2450, Subp. 4(A).

SECTION 6 SSTS STANDARDS

6.1 Alternative Local Standards Adopted By Reference

6.11 Alternative Local Standards for New and Existing SSTS

The County hereby adopts by reference the 2006 version of MN Rules Chapter 7080 effective April 3, 2006 as the alternative local standards for new and existing residential SSTS with flows of less than 2,500 gallons per day, and SSTS that serve Food, Beverage and Lodging Establishments with a flow of less than 2,500 gallons per day provided the effluent discharge does not exceed the standards in MN Rules 7080.2150, Subp. 3(K).

6.12 Adoption of Rule by Reference

The County hereby adopts by reference the 2011 MN Rules Chapters 7080 and 7081 for new and replacement systems using greater than 2,500 gallons per day. Specific elements that are required by the 2011 Rules for all sizes of systems are listed in Section 6.8 of this Ordinance. This adoption does not supersede the County's right or ability to adopt local standards that are in compliance with MN Statute 115.55.

6.2 Compliance Criteria for Existing SSTS

For an SSTS built before April 1, 1996, and outside of areas designated as "SWF" - Systems in shoreland areas, wellhead protection areas, or systems serving food, beverage, or lodging establishments - there must be at least two feet of vertical separation between the bottom of the dispersal system and periodically saturated soil or bedrock.

6.3 Dispute Resolution

Resolution of disputes between SSTS Certified Individuals regarding conflicting compliance inspections, determination of periodically saturated soils and other technical issues shall follow MNRule7082.0700, Subp. 5.

6.4 Holding Tanks

Holding tanks may be allowed as replacements for existing failing SSTS, SSTS which pose an Imminent Threat to Public Health or Safety, and only when it can be conclusively shown that a

standard/Type I (Classification I or II as per MN Rules Chapter 7080.1860) SSTS cannot be feasibly installed as determined by the Department.

6.5 Pumping Agreements

Pumping agreements are required for all permits issued for holding tanks, privies and outhouses.

6.6 SSTS for Recreational Vehicles (RV)/Fish Houses used as RV's

RV's, that have a manufactured built in holding tanks for grey and black water, that are on a parcel of land without a principle dwelling unit for more than 60 days in a calendar year must comply with the following:

If there is running water from a well to the RV a standard/Type I SSTS must be installed. Where there is no running water from a well to the RV, at a minimum an outhouse/privy must be installed, or a toilet waste treatment device as in Section 5.66 of this Ordinance would be allowed. Holding tanks will be considered only if a Type I (Classification I or II as per MN Rules Chapter 7080.1860) system can't be installed.

6.7 Differences in Standards

6.71 Alternative Local Standards as per Section 6.11 of this Ordinance.

6.72 All SSTS shall be sized on a Type I (Classification I) Dwelling as indicated in 2006 MN Rules Chapter 7080.0125 Table I. On lots created prior to January 21, 1992 within shoreland areas and January 10, 1995 outside the shoreland area, if the lot area does not permit for a Type I SSTS, a Type II or III SSTS may be allowed with conditions.

6.73 Mound septic systems with percolation rates between greater than thirty (30) mpi and one hundred twenty (120) mpi, shall not be located on slopes in excess of twelve (12)%.

6.74 The absorption width of mounds shall be calculated using dike (Berm) slope multiplier ratios of 3:1 or flatter. If the lot area or setback distances don't allow for the use of these multipliers, the Department may consider the use of steeper dike slopes.

6.75 A maximum of two ten-foot wide beds may be installed side by side in a single mound if the original soil percolation rate is between five (5) and sixty (60) mpi to a depth of at least twenty four (24) inches below the sand layer. The beds must be separated by at least four (4) feet of clean sand. The absorption area under the sand layer must equal or exceed that of a similar sized mound with one rockbed. It is preferred that the separation between the rockbeds is the same as a downslope dike width.

6.76 The entire construction of a mound must take place and continue through the entire construction process when the upper twelve (12) inches of soil has a moisture content of less than the plastic limit. If a mound gets rained on prior to covering, construction of the mound shall not continue until the upper twelve (12) inches of soil under the absorption area and around the perimeter of the sand base has a moisture content less than the plastic limit.

6.77 Setback distances from mound septic systems to buildings, lakes, property lines, wells, rivers, creeks, streams, road right-of-ways, etc., will be taken from five (5) feet beyond the upslope of the rockbed and five (5) feet beyond the ends of the rockbed and from the end of the downslope dike or from the outer limits of the absorption area as defined in this Section, whichever is greater.

- 6.78 All SSTS in sandy soils, shall be sized on a soil sizing factor of 1.27 sq.ft./gallon/day or .79 gal/day/sqft unless the sandy soil meets the special requirements in 2006 MN Rules Chapter 7080.0170, Subp. 2(C), Table V - Fine Sand, which would require a soil sizing factor of 1.67 sq.ft./gallon/day or .6 gal/day/sqft.
- 6.79 Each drainfield line must be connected separately to drop boxes and distribution boxes and must not be subdivided.
- 6.791 For pressure distribution systems using perforated laterals, it is recommended the square foot per perforation be 6-10 as in item #6 of Appendix B.

6.8 2011 MN Rule Elements included in this Ordinance

6.81 Sewage Tanks

- Tank Strength Requirements, 7080.1910
- Septic Tank Design, 7080.1920
- Multiple Septic Tanks, 7080.1940
- Compartmentalization of Single Tanks, 7080.1950
- Septic Tank Baffles, 7080.1960
- Sewage Tank Access, 7080.1970
- Tank Construction, 7080.1980
- Tank Storage, Transport and Use, 7080.1990
- Location and Installation of Tanks, 7080.2000, excluding Floodways in D, H.
- Tank sizing shall meet 2006 MN Rules Chapter 7080.0130, Subp. 3 A-D.**

6.82 Registered Products

Final Treatment and Dispersal, MN Rules Chapter 7080.2150, Subp. 3, A is hereby adopted by reference.

6.83 Vertical Separation Flexibility

MN Rule 7080.1500, Subp. 4(D) is hereby adopted allowing a fifteen (15) %reduction in vertical separation distance for settling of sand or soil, normal variation of measurements and interpretations of the limiting layer for existing SSTS. This provision does not apply to Section 6.2.

6.84 Trench and Seepage Bed Design, 7080.2210, Subp. 4(D)

The minimum depth of soil cover, including topsoil borrow, over the distribution medium is twelve (12) inches.

6.85 Type IV Systems

MN Rules Chapter 7080.2350 is hereby adopted by reference.

6.86 Type V Systems

MN Rules Chapter 7080.2400 is hereby adopted by reference.

SECTION 7 VARIANCES

7.1 Variance Requests

A property owner may request a variance from the standards as specified in this Ordinance pursuant to the Aitkin County Zoning Ordinance, Section 10.

7.2 State Agency Variance Requests

Variations that pertain to the standards and requirements of the State of MN must be approved by the affected State Agency pursuant to the requirements of the State Agency. No permits will be issued by the County until all required State Agency variances have been approved.

7.3 Board of Adjustment Decisions

The Board of Adjustment shall have the authority only to consider variances to horizontal setbacks from ordinary high water levels, property lines, rights of way, structures, or buildings and other standards and criteria per 2006 MN Rules Chapter 7080.0030, Subp. 3. Variances to wells and water supply lines, MN Statutes 4720, 4725, 6105, and 6120 must be approved by the MN Department of Health.

7.4 Department Decisions

~~Variations may be waived by the Department~~ **The Department may grant an exception to these standards** for reduced setback distances to structures when an application is accompanied by an approval from a Registered Engineer of the State of Minnesota approving of the reduced setback distance. The report must address, among other considerations, any impacts to the structural integrity of the structure and septic/pump/holding tank, and contamination from the effluent to the interior of the structure.

~~Variations may be waived by the Department~~ **The Department may grant an exception to these standards** for reduced setback distances to road right-of-ways and easements when an application is accompanied by a letter from the road authority or easement holder(s) approving of the reduced setback distance.

SECTION 8 SSTS PERMITS AND PLANS

8.1 SSTS Permits Required

A SSTS Permit shall be obtained by the property owner or an agent of the property owner from the Department prior to the installation, construction, replacement, modification, alteration, or capacity expansion including the use of advanced treatment components of a SSTS. It is unlawful for any person to construct, install, modify or replace a SSTS without the appropriate permit from the Department including repair or replacement of components that will alter the original function of the system, change the treatment capacity of the system, change the location of the system, or otherwise change the original system's design, layout, or function. The issuing of any permit, variance, or conditional use under the provisions of this Ordinance shall not absolve the applicant of responsibility to obtain any other required permit.

No Zoning/Land Use/Building Permit, where an SSTS is required, shall be issued until after the SSTS permit is approved and issued.

No dwelling, commercial, business, institutional or industrial unit shall be redesigned or enlarged if such redesign or enlargement results in exceeding the design capacity of the SSTS unless a permit has been granted by the Department to redesign or enlarge the SSTS to accommodate the expected increase in sewage.

8.2 Activities Requiring a SSTS Permit

All contractors, property owners or other persons having charge of the SSTS construction, replacement (including tanks and dispersal systems), repair, or modification of components of SSTS, shall obtain a SSTS Permit from the Department prior to starting construction. Permits shall be granted upon receipt of a completed application with design and the appropriate fee.

8.3 Activities Not Requiring a SSTS Permit

A SSTS construction permit is not required for minor repairs or replacements of system components that do not alter the original function of the system, change the treatment capacity of the system, change the location of the system, or otherwise change the original system's design, layout, or function. Examples are, crushed pipe, pumps, floats, or other electrical devices of the pump, maintenance hole risers and cover, baffles and effluent filters.

8.4 SSTS Permit Applications

SSTS construction permit applications shall be made on forms provided by the Department and signed by the applicant or an authorized agent. The application shall include but is not limited to the information and documents listed in items A through D below. Completed application shall be examined and approved or denied by the Department.

- A. Name, mailing address, telephone number, (and email address if available.)
- B. Property Identification Number, property address and legal description of property location.
- C. Site evaluations shall contain all the information in 2006 MN Rules Chapter 7080.0110. A minimum of two (2) soil observations per SSTS site shall be conducted. Two (2) SSTS sites shall be identified on each property, if the land area exists.
- D. Design Reports, operating permits if applicable, and any documents described in 2006 MN Rules Chapter 7080.0110-7080.0115. Design reports shall be made on forms required or approved by the Department.

8.5 Incomplete Application

If after consideration of the application for a permit, the Department shall be satisfied that the work contemplated will not conform to or comply with the provisions of this Ordinance, the Department shall deny the application for a permit. Notice of such denial shall be served by mail or in person on the applicant or permittee. The notice shall state the reason for denial. The permit application may be revised or corrected and resubmitted to the Department at any reasonable time for reconsideration.

8.6 Property Owners Doing Own Work

No SSTS for a commercial establishment can be constructed by anyone other than a MPCA Licensed Installer.

Property Owners of non-commercial properties who may be permitted to construct or repair SSTS on their own properties and shall be exempted from providing proof of a MPCA License but shall be required to execute a signed indemnification agreement pursuant to Subsection 8.61. Property owners doing their own work must comply with Sections 8.1 thru 8.4, as well as other applicable provisions of this Ordinance. A property owner shall have a current license issued by the MPCA for a Designer, Intermediate Designer or Advanced Designer if they wish to perform the site evaluation or design their own SSTS. Every phase of the installation must be inspected by the Department at such stages and times as the Department determines. There shall be a reinspection fee for each additional inspection required to ensure compliance with this Ordinance. If the property homeowner arranges for, hires, or subcontracts for services or assistance installing the

SSTS, a person or entity providing such assistance or services must be fully licensed by the MPCA.

8.61 Indemnification Agreement

The permittee in Section 8.6 shall provide a signed agreement to the Department which indemnifies and saves the County, holding it harmless from all losses, damages, costs and charges that may be incurred by the County due to the failure of the permittee to conform to and comply with the provisions of this Ordinance. A copy of a signed agreement will be provided by the Department.

8.7 SSTS Permit Expiration

The SSTS Permit is valid for a period of one (1) year from its date of issue. An extension of the permit may be granted at the discretion of the Department for up to three (3) additional months.

8.8 Transferability

A SSTS Permit is not transferable from one parcel to another.

8.9 Operating Permits

Operating Permits must be submitted on forms approved by the Department.

A. An Operating Permit shall be required for the following SSTS:

1. SSTS with high strength waste effluent standards that exceed MN Rule 7080.2150, Subp. 3(K).
2. SSTS serving three or more connections.
3. Type III, Type IV and Type V SSTS.
4. SSTS that exceed a daily flow of 2,500 gallons per day.
5. MSTTS designed under MN Rules Chapter 7081.

B. Operating Permits shall be a signed agreement between the Department and the property owner and shall include monitoring, performance, mitigation, and reporting requirements.

C. Operating permits are not transferable as to person or place.

D. Operating Permits shall be valid for the specific term stated on the permit as determined by the Department.

E. An Operating Permit must be renewed prior to its expiration. If not renewed, the Department may require the system to be removed from service or operated as a holding tank until the permit is renewed. If not renewed within ninety (90) calendar days of the expiration date, the Department may require that the system be abandoned in accordance with Section 5.25.

F. Operating Permits do not transfer to new property owners. New owners shall apply for an Operating Permit in accordance with Section 8.9. The Department shall not terminate the current permit until ninety (90) calendar days after the date of sale unless an Imminent Threat to Public Health and Safety exists. To consider the new owner's application, the Department may require an inspection of the treatment system certified by a licensed service provider or inspector.

G. A report shall be prepared and certified by the licensed inspection business or licensed service provider. The report shall be submitted to the Department on or before the compliance reporting date stipulated in the operating permit as required. The report shall contain a description of all maintenance and servicing activities performed since the last compliance monitoring report as described in the Operating Permit.

H. The Department may suspend or revoke any Operating Permit issued under this Section for any false statements or misrepresentations of facts on which the Operating Permit was issued.

- I. If suspended or revoked, the Department may require that the system be removed from service, operated as a holding tank, or abandoned.
- J. At the Department's sole discretion, the Operating Permit may be reinstated or renewed upon the owner taking appropriate corrective actions.

8.10 Management Plans

Management Plans for all new or replacement ~~SSTS Type IV, Type V and MSTs~~ shall be provided by the licensed designer. The plans shall include operating, monitoring and maintenance requirements for the new or replacement system. Homeowners are required every three (3) years to maintain their sewage tank per instructions in 7080.2450, Subp. 2 and 3.

For those SSTS without a Management Plan or Operating Permit according to the provisions of this Ordinance, must follow the provisions of 7080.2450, Subp. 2 and 3.

8.11 Suspension or Revocation

The Department may suspend or revoke a SSTS Permit issued under this Section for any false statements, misrepresentations of facts on which the SSTS Permit was issued, or unauthorized changes to the system design that alter the original function of the system, change the treatment capacity of the system, change the location of the system, or otherwise change the original system design, layout, or function. A notice of suspension or revocation and the reasons for the suspension or revocation shall be conveyed in writing to the permit holder. If suspended or revoked, installation or modification of a treatment system may not commence or continue until a valid SSTS Permit is obtained.

SECTION 9 COMPLIANCE INSPECTIONS

9.1 Compliance Inspection Program

- A. SSTS Compliance Inspections are performed:
 - 1. To ensure compliance with applicable requirements.
 - 2. To ensure system compliance before issuance of a Zoning/Land Use/Building Permit, not to include land alteration permits.
 - 3. For all new SSTS construction or replacement.
 - 4. When a construction permit is required to repair, modify, or upgrade an existing system.
 - 5. Prior to the Transfer of Title to Real Estate with a dwelling unit, mobile home or any other building served by or required to have a SSTS, whether by warranty deed, quit claim deed or any other method of transfer including the lease of a term of three (3) years or more.
 - 6. To ensure compliance before issuance of a permit for the addition of a bedroom on properties served by a SSTS.
 - 7. Any time the Department deems appropriate, such as upon receiving a complaint or other information of system failure.
- B. It is the responsibility of the Department, or its agent, to perform installation inspections of new SSTS or upgrades of SSTS to assure that the requirements of this Ordinance are met.
- C. All Compliance Inspections must be performed and signed by licensed inspection businesses or Qualified Employees certified as inspectors.

- D. The Department shall be given access to enter a property at any reasonable time to inspect and/or monitor the SSTS system. As used in this paragraph, “property” does not include a residence or private building.
- E. No person shall hinder or otherwise interfere with the Department’s employees in the performance of their duties and responsibilities pursuant to this Ordinance. Refusal to allow reasonable access to the property by the Department shall be deemed a separate and distinct offense.
- F. A signed Winter Release of Compliance Inspection form may be accepted in lieu of a Compliance Inspection for property transfers between November 1 and April 30, at the Department’s sole discretion, provided the compliance inspection is submitted to the Department by the following June 1, a certificate of compliance is completed by the following September 30, and an escrow agreement, as per Section 9.9, is submitted to the Department. During these months, the signed winter release of compliance inspection form may only be used when frost conditions will not permit for an inspection. Failure to fulfill all of the obligations of the winter release of compliance inspection form shall be a violation of this Ordinance. A copy of the “Winter Release of Compliance Inspection Form” can be obtained from the Department.

9.2 New Construction or Replacement

- A. New installation inspections must be performed on new or replacement SSTS to determine compliance with this Ordinance and MN Rules Chapters 7080 or 7081. SSTS found to be noncompliant with other applicable requirements must be repaired or replaced according to the Department’s requirements.
- B. All SSTS, in whole or in part, shall be inspected by the Department. No system shall be covered, in whole or in part, prior to inspection by the Department unless prior approval has been given by the Department. Failure to obtain approval from the Department shall cause the system to be exposed for inspection. The amount of SSTS exposed for inspection shall be determined by the Department at the time of inspection. The permittee shall notify the Department prior to the completion and covering of the SSTS. The installation and construction of the SSTS shall be in accordance with the permit requirements and application design. Proposals to alter the permitted design shall be reviewed and the proposed change accepted by the Department prior to construction. Inspections shall be conducted up to two (2) times for a drainfield trench system (prior to final cover and after final cover) and up to three (3) times for a mound or at-grade system (scarification, prior to final cover and after final cover) or at other such times as to assure that the system has been constructed per submitted and approved design.
- C. It is the responsibility of the SSTS owner or the owner’s agent to notify the Department twenty-four (24) hours prior to the installation inspection.
- D. If the installer provides proper notice and the Department does not provide an inspection within two (2) hours after an inspection time was set, the installer may complete the construction per the following:

The installer shall submit photographs of the entire uncovered system and complete an as-built form with a certified statement that the installation of the SSTS met the design and permit conditions and it is free from defects. The as-built form and photographs must be submitted to the Department within five (5) working days of the installation. The as-built form will be supplied by the Department.

- E. A Certificate of Installation for new SSTS construction or replacement shall be issued by the Department within thirty (30) days of inspection if the Department has reasonable assurance that the system was built in accordance with the applicable requirements as specified in the construction permit.
- F. The Certificate of Installation must include a certified statement by the Licensed Inspector or Qualified Employee who conducted the inspection that the SSTS is or is not in compliance with the Ordinance requirements. If the SSTS is determined not to be in compliance with the applicable requirements, a notice of noncompliance must be issued to the owner which includes a statement specifying those Ordinance provisions with which the SSTS does not comply.
- G. No SSTS shall be placed into operation until a valid Certificate of Installation has been issued.
- H. Certificates of Installation for new construction or replacement shall remain valid for five (5) years from the date of issuance unless the Department finds evidence of noncompliance.

9.3 Existing Systems

- A. Compliance inspections shall be required when any of the following conditions occur:
 1. When a construction permit is required to repair, modify, or upgrade an existing system.
 2. Anytime there is an expansion of use of the building being served by an existing SSTS which may impact the performance of the system.
 3. Anytime there is a change in use of the property being served by an existing SSTS which may impact the performance of the system.
 4. When applying for a zoning permit, minor subdivision, plat, land use map amendment, conditional use permit or variance and the original Certificate of Installation is more than five (5) years old or the Certificate of Compliance is more than three (3) years old.
 5. Prior to the Transfer of Title to Real Estate with a dwelling unit, mobile home or any other building served by or required to have an SSTS, whether by warranty deed, quit claim deed or any other method of transfer including the lease of a term of three (3) years or more.
 6. At anytime as required by this Ordinance or the Department deems appropriate such as upon receipt of a complaint or other notice of a system malfunction.
- B. Compliance Inspections of existing SSTS shall be reported on the inspection report forms provided by MPCA.
- C. Soil borings for Compliance Inspections of existing systems must be done off the ends of trenches, beds and mounds, and outside the area of influence of the absorption area. If topography or other conditions don't allow for a representative soil sample in these areas the inspector shall use their best judgment in locating a representative soil sample.
- D. The Certificate of Compliance must include a certified statement by a Qualified Employee or licensed inspection business, indicating whether the SSTS is in compliance with the requirements of this Ordinance. If the SSTS is determined not to be in compliance with the applicable requirements, a notice of noncompliance must include a statement specifying those ordinance provisions with which the SSTS does not comply. A construction permit application must be submitted to the Department if the required corrective action is not a minor repair under Section 8.3.

- E. The Certificate of Compliance or notice of noncompliance must be submitted by the inspector to the Department no later than -fifteen (15) calendar days after the date the inspection was performed.
- F. Certificates of Compliance for existing SSTS shall remain valid for three (3) years from the date of issuance unless the Department finds evidence of noncompliance.

9.4 Failing SSTS

- A. A SSTS that is found to be failing shall be upgraded, replaced or repaired in compliance with this Ordinance, as applicable within one (1) year.
- B. A SSTS that is found to be an Imminent Threat to Public Health or Safety (ITPHS) shall abate the Imminent Threat to Public Health or Safety within ten (10) days and the SSTS shall be upgraded, replaced or repaired within ten (10) months. **If the ITPHS is a surface discharge of sewage or sewage tank effluent the SSTS must be pumped often enough to prevent a surface discharge from reoccurring.**
- C. Any SSTS, irrespective of the date of original installation, which is found to be in violation of this Ordinance, shall be relocated, reconstructed or reinstalled so as to be in compliance with this Ordinance.

9.5 Transfer of Property

- A. A Certificate of Compliance shall be provided by the seller or transferor to the buyer or transferee before the Transfer of Title to Real Estate with a dwelling unit, mobile home or any other building served by or required to have a SSTS, or, before the Transfer of Title by Deed, contract or lease of a term of three (3) years or more.
- B. If the seller fails to provide a Certificate of Compliance, the seller shall provide the buyer with a site evaluation report, approved septic system design and approved Zoning Permit from the Department for the installation of a SSTS, or an Escrow Agreement, as per Section 9.9, is submitted to the Department.
- C. The Certificate of Compliance shall be completed by an Inspector licensed by the State of Minnesota and shall indicate that said SSTS is in compliance with MN Rule Chapter 7080 and this Ordinance.
- D. In the event that one of the exemptions listed in Section 9.6 of this Ordinance applies, the Sworn Affidavit must be completed and accompany the deed for recording. A copy of the Sworn Affidavit can be obtained from the Department.
- E. The Certificate of Compliance, Winter Release Form, Sworn Affidavit and/or Escrow Agreement shall be filed with the Department.
- F. A Certificate of Compliance, Winter Release Form, Sworn Affidavit, and/or Escrow Agreement shall accompany the deed for recording. The County Recorder shall note on a copy of each deed when the required forms are not submitted. Nothing in this Section precludes the County Recorder from recording a deed.

9.6 Exempt Transactions

The Certificate of Compliance need not be completed if the sale or transfer involves the following circumstances:

- A. The tract of land is without buildings or contains no dwellings or other buildings with plumbing fixtures.

B. No Certificate of Real Estate Value need be filed with the County Auditor, as per Minnesota Statutes, Chapter 272.115.

C. The sale or transfer completes a contract for deed entered into prior to June 30, 1998. This subsection applies only to the original vendor and vendee on such a contract.

D. Any dwellings or other buildings with running water are connected to a municipal wastewater treatment system.

E. Documents dated prior to June 30, 1998.

9.7 Transactions Occurring Between November 1 and April 30

A signed Winter Release of Compliance Inspection Form may be accepted in lieu of a Compliance Inspection for property transfers between November 1 and April 30, at the Department's sole discretion, provided the Compliance Inspection is submitted to the Department by the following June 1, a Certificate of Compliance is completed by the following September 30, and an Escrow Agreement as per Section 9.9 is submitted to the Department. During these months, the signed Winter Release of Compliance Inspection Form may only be used when frost conditions will not permit for an inspection. Failure to fulfill all of the obligations of the Winter Release of Compliance Inspection Form shall be a violation of this Ordinance. A copy of the Winter Release of Compliance Inspection Form can be obtained from the Department. The forms and documents listed above must be brought to the Department for approval.

9.8 Disclaimer

Neither the issuance of permits, Certificates of Compliance, nor Notices of Noncompliance as requested or issued shall be construed to represent a guarantee or warranty of the system's operation or effectiveness. Such certificates signify that the system in question is or has been designed and installed in compliance or non-compliance with the provisions of these standards and regulations.

9.9 Escrow

If the seller fails to provide a Certificate of Compliance, or if a compliance inspection indicates a Notice of Noncompliance or if the seller is unable to complete a compliance inspection due to frozen soil conditions, the seller shall provide the buyer sufficient security in the form of an Escrow Agreement to assure the installation of the complying SSTS.

The security shall be placed in an escrow with a licensed real estate closer, licensed attorney at law, or federal or state-chartered financial institution. The amount escrowed shall be equal to 125% of a written estimate to install a complying SSTS provided by a Licensed Installation business or Licensed Installer or if a written estimate cannot be completed due to frozen soil conditions, the amount escrowed shall be equal to 150% of the annual average cost of a mound system as determined by the Department.

The Escrow Agreement shall list Aitkin County as having the "release authority" of the escrow monies which shall not be released until a Certificate of Compliance is issued by the Department or its agent.

After a complying SSTS has been installed and a Certificate of Compliance issued, the Department shall provide the escrow agent a copy of the Certificate of Compliance which shall

cause the escrow to be released. A copy of the Escrow Agreement and written estimate must be submitted to the Department.

SECTION 10 ENFORCEMENT

10.1 Violations

10.11 Cause to Issue a Notice of Violation

Any person, firm, agent, or corporation who violates any of the provisions of this Ordinance, or who fails, neglects, or refuses to comply with the provisions of this Ordinance, including violations of conditions and safeguards, or who knowingly makes any material false statement or knowing omission in any document required to be submitted under the provisions hereof, shall be guilty of a misdemeanor and upon conviction thereof, shall be punishable as defined by MN Statutes.

10.12 Notice of Violation

The Department shall serve, in person or by mail, a notice of violation to any person determined to be violating provisions of this Ordinance. The notice of violation shall contain:

- A. A statement documenting the findings of fact determined through observations, inspections, reinspections or investigations.
- B. A list of specific violation(s) of this Ordinance.
- C. Specific requirements for correction or removal of the specified violation(s).
- D. A mandatory time schedule for correction, removal and compliance with this Ordinance.
- E. Specific enforcement actions that will be taken if corrective action is not completed.

10.13 Cease and Desist Orders

Cease and Desist Orders may be issued when the Department has probable cause that an activity regulated by this or any other County Ordinance is being or has been conducted without a permit or in violation of a permit. When work has been stopped by a Cease and Desist Order, the work shall not resume until the reason for the work stoppage has been completely satisfied, administrative fees paid, and the Cease and Desist Order lifted.

10.14 Administrative Fees

Any application for a permit that is made after the work has commenced and which requires a permit or is done in violation of a permit shall be charged an "after-the-fact" administrative fee of five (5) times the original permit fee.

10.15 Reimbursements for Restoration

The Department may require correction and/or restoration of the property to its original state should the application for a permit be denied or if the action permitted does not include all or part of the work commenced prior to approval of said permit. The Department may recover the cost incurred in removal or abatement in a civil action; or at the discretion of the County Board, the cost of an enforcement action under this Ordinance

may be assessed and charged against the real property on which the public health nuisance was located. The County Auditor may extend the cost as assessed and charged on the tax roll against said real property.

10.2 Prosecution

- A. In the event of a violation or a threatened violation of this Ordinance, Aitkin County, in addition to other remedies, may institute appropriate actions or proceedings to prevent, restrain, or abate such violations or threatened violations. The Department may and is empowered to issue Citations and/or Cease and Desist Orders to halt the progress of any on-going violation. When the work has been stopped by the Department for any valid reason whatsoever, it shall not again be resumed until the reason for the work stoppage has been completely satisfied and the Cease and Desist Order lifted.
- B. Any person with standing, may institute mandamus proceedings in the District Court to compel specific performance by the proper official or officials of any duty required by this Ordinance.
- C. Any person, firm or corporation who violates, disobeys, omits, neglects or refuses to comply with, or who resists the enforcement of any other provisions of this Ordinance shall be guilty of a misdemeanor, punishable by \$1,000.00 and/or ninety (90) days imprisonment or both. Each day that a violation is permitted to exist shall constitute a separate offense. The County Attorney shall have the authority to prosecute any and all violations of this Ordinance.
- D. After two or more attempts to achieve compliance, the Department may charge for the enforcement of violations of this Ordinance to recover actual costs for staff time, mileage and supplies. This cost shall be above and beyond any other fee imposed by this Ordinance.

SECTION 11 FEES

From time to time, the County Board shall establish fees for activities undertaken by the Department pursuant to this Ordinance. Fees shall be due and payable at a time and in a manner to be determined by the Department.

SECTION 12 ADOPTION

The Aitkin County Subsurface Sewage Treatment System Ordinance is hereby adopted by Aitkin County Board of Commissioners on the _____ day of _____, 20__.

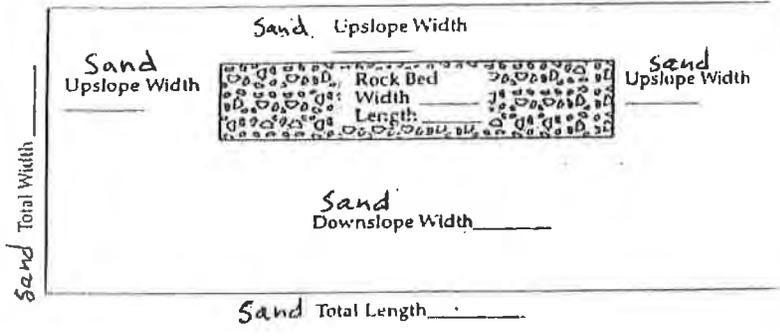
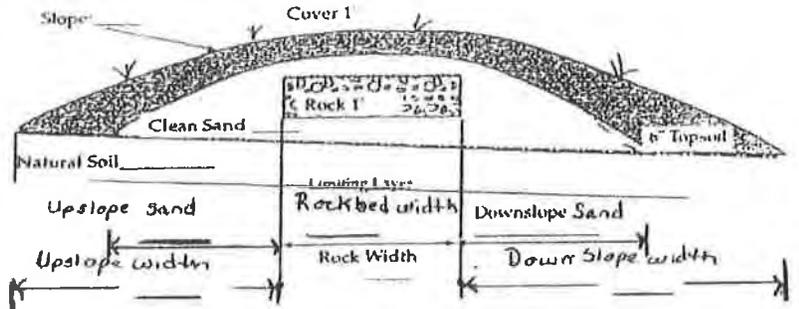
Chairperson, Aitkin County Board of Commissioners

ATTEST:

EFFECTIVE DATE: _____, 20__

MINIMUM MOUND SIZE

1. Subtract rock layer width from absorption width to obtain minimum downslope berm toe
 $\text{_____ ft} - \text{_____ ft} = \text{_____ feet}$
2. Determine depth of clean sand fill at upslope edge of rock layer:
 Separation 3' - _____ ft = _____ feet
3. Add depth of clean sand for separation (2) at upslope edge, depth of rock layer (1 ft) to depth of cover (1 ft) to find the mound height at upslope edge of rock layer:
 $\text{_____ ft} + 1 \text{ ft} + 1 \text{ ft} = \text{_____ feet}$
4. Enter table with landslope and upslope berm ratio. Select berm multiplier _____.
5. Multiply berm multiplier by upslope mound height to find upslope berm width:
 $\text{_____} \times \text{_____} = \text{_____ feet}$
6. Multiply rock layer width (K) by landslope to determine drop in elevation:
 $\text{_____} \times \text{_____} \% \div 100 = \text{_____ feet}$
7. Add depth of clean sand for slope difference (6) at downslope edge to the mound height at the upslope edge of rock layer (3) to find the downslope height:
 $\text{_____ ft} + \text{_____ ft} = \text{_____ feet}$
8. Enter table with landslope and downslope berm ratio. Select berm multiplier of _____.
9. Multiply berm multiplier by downslope mound height to get downslope berm width:
 $\text{_____} \times \text{_____} = \text{_____ feet}$
10. Compare the values of Step (1) _____ and Step(9) _____. Select the greater of the two values as the downslope berm width: _____ feet
11. Total mound width is the sum of upslope berm (5): width plus rock layer width (K) plus downslope berm width (9):
 $\text{_____ ft} + \text{_____ ft} + \text{_____ ft} = \text{_____ feet}$
12. Total mound length is the sum of upslope berm width (5) plus rock layer length (L) plus upslope berm width (5):
 $\text{_____ ft} + \text{_____ ft} + \text{_____ ft} = \text{_____ feet}$



Final Cover Dimension

 X

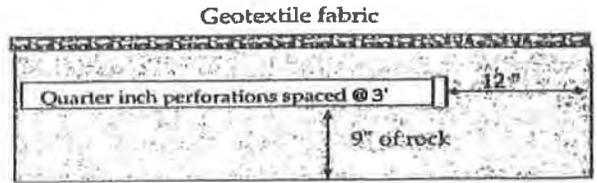
BERM SLOPE MULTIPLIERS

Land Slope, in %	DOWNSLOPE berm multipliers for various berm slope ratios					UPSLOPE berm multipliers for various berm slope ratios					
	3:1	4:1	5:1	6:1	7:1	3:1	4:1	5:1	6:1	7:1	8:1
0	3.0	4.0	5.0	6.0	7.0	3.0	4.0	5.0	6.0	7.0	8.0
1	3.09	4.17	5.26	6.38	7.53	2.91	3.85	4.76	5.66	6.54	7.41
2	3.19	4.35	5.56	6.82	8.14	2.83	3.70	4.54	5.36	6.14	6.90
3	3.30	4.54	5.88	7.32	8.86	2.75	3.57	4.35	5.08	5.79	6.45
4	3.41	4.76	6.25	7.89	9.72	2.68	3.45	4.17	4.84	5.46	6.06
5	3.53	5.00	6.67	8.57	10.77	2.61	3.33	4.00	4.62	5.19	5.71
6	3.66	5.26	7.14	9.38	12.07	2.54	3.23	3.85	4.41	4.93	5.41
7	3.80	5.56	7.69	10.34	13.73	2.48	3.12	3.70	4.23	4.70	5.13
8	3.95	5.88	8.33	11.54	15.91	2.42	3.03	3.57	4.05	4.49	4.88
9	4.11	6.25	9.09	13.04	18.92	2.36	2.94	3.45	3.90	4.30	4.65
10	4.29	6.67	10.00	15.00	23.33	2.31	2.86	3.33	3.75	4.12	4.44
11	4.48	7.14	11.11	17.65	30.43	2.26	2.78	3.23	3.61	3.95	4.26
12	4.69	7.69	12.50	21.43	43.75	2.21	2.70	3.12	3.49	3.80	4.08

Note: The product of the multiplier and the height results in the horizontal distance to where the berm meets the original land slope. Example: Height at upper edge of rock layer is 3.0 feet, rock layer is 10 feet wide, land slope is 6% and berm slope ratio is 4:1. Upslope berm width is 3.23 x 3.0 = 9.7 ft, height at lower edge of rock layer is 3.0 + 10 x 0.6 = 3.6 ft and downslope berm width is 5.26 x 3.6 = 18.9 ft.

SSTS Appendix B
PRESSURE DISTRIBUTION SYSTEM

- Select number of perforated laterals _____
- Select perforation spacing = _____ feet.
- Since perforations should not be placed closer than 1 ft. to the edge of the rock layer (see diagram), subtract 2 ft. from the rock layer length. System area: _____ x _____ = _____



Perf Sizing 7/32" - 1/4"
Perf Spacing 1.5' - 5'

_____ - 2 ft. = _____ feet.
Rock layer length

- Determine the number of spaces between perforations. Divide the length above by perforation spacing and round down to nearest whole number.

Length perf. spacing = _____ ft. + _____ ft. = _____ spaces
(3) (2)

- Number of perforations is equal to one plus the number of perforation spaces .

_____ spaces + 1 = _____ perforations/lateral

- Multiply perforations per lateral by number of laterals to get total number of perforations.

_____ laterals x _____ perfs/lateral = _____ perforations.

Calculate the square footage per perforation (6-10 sqft/perf)

_____ area ÷ _____ perforations = _____ sqft/perf

- Determine required flow rate by multiplying number of perforations by flow per perforation

_____ perfs x _____ gpm/perf = _____ gpm

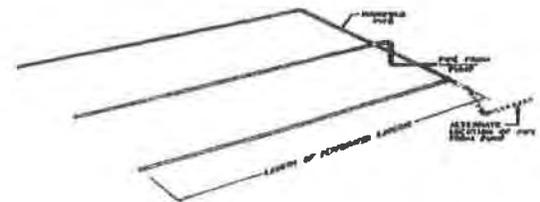
- If laterals are connected to header pipe as shown on upper example, to select minimum required lateral diameter; enter table with perforation spacing and number of perforations per lateral. Select minimum diameter for perforated lateral = _____ inches.
- If perforated lateral system is attached to manifold pipe near the center, lower diagram, perforated lateral length and number of perforations per lateral will be approximately one half of that in step 8. Using these values, select minimum diameter for perforated lateral = _____ inches.

Perforation Discharges in GPM				
Head (feet)	Perforation diameter (inches)			
	1/8 ^a	3/16	7/32	1/4
1.0a	0.18	0.42	0.56	0.74
2.0b	0.26	0.59	0.80	1.04
5.0	0.41	0.94	1.26	1.65

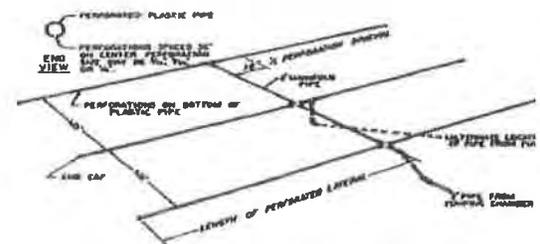
a Use 1.0 foot for single homes.
b Use 2.0 feet for anything else.
* Potential for plugging

Maximum number of quarter inch perforations per lateral to guarantee < 10% discharge variation			
Perforation Spacing (feet)	1½	1½	2
2.5	14	18	28
3.0	13	17	26
3.3	12	16	25
4.0	11	15	23
5.0	10	14	22

MANIFOLD LOCATED AT END OF PRESSURE DISTRIBUTION SYSTEM



LAYOUT OF PERFORATED PIPE LATERALS FOR PRESSURE DISTRIBUTION BY MANIFOLD



Adopted by the Aitkin County Board of Commissioners this 22nd Day of
April, 2014.

Chairperson
Aitkin County Board of Commissioners

Attest:

Kirk Peysar
Aitkin County Auditor

Approved as to Form:

Jim Ratz
Aitkin County Attorney

**MINUTES OF THE PLANNING COMMISSION
PUBLIC HEARING
April 1, 2014**

MEMBERS PRESENT: DALE LUECK, ROBERT HARWARTH, JEREMY PAQUETTE, LAURIE WESTERLUND,

OTHERS PRESENT: TERRY NEFF, BARB WILLIAMSON.

MEMBERS ABSENT: DAVE LANGE

1. The Chair called the meeting to order at 4:00 p.m.
2. Roll Call. The Chair read the rules of the meeting.
3. **APPROVE AGENDA:**

Laurie Westerlund made a **motion to approve** the agenda for April 7, 2014.
Robert Harwarth **seconded** the motion.

The Chair called the question. The **motion carried 3.0 to approve the agenda.**

OLD BUSINESS:

NEW BUSINESS:

4. **SUBSURFACE SEWAGE TREATMENT SYSTEM ORDINANCE PUBLIC HEARING:**

Terry Neff explained what Alternative Standards meant; that this has been approved by MPCA that it covers all the requirements. This Ordinance has been modeled after Crow Wing, Cass, and Marshall counties ordinances. They have already adopted new SSTS ordinances.

The Planning Commission members and Terry Neff discussed each section of the proposed ordinance and several small changes were suggested.

After the discussion, the Chair asked if any audience members had questions or input on the document.

Marissa Skuza submitted a document from the Greater Lakes Realty Association (on file). She explained that they are having a meeting with Planning and Zoning staff on Wednesday the 16th of April to learn about the new ordinance. Commission members took time to look over the document.

DRAFT

Bill Haroldson, Farm Island Township, stated he never heard of anyone saying to pump your system in the fall. He suggested talking to lenders about the escrow amounts, and stated he has always heard 150% of the cost of a new sewer should be put in escrow, and had never heard of anyone using as low as 125%. Terry Neff explained that the lenders could choose to go higher with escrow amounts, but the county is suggesting 125% minimum.

Terry Neff agreed that it is not a good idea to pump tanks in winter. He stated the inspectors can check operating depth and if stays at the operating depth it should be at, they can at least verify if the tank is tight or not. Terry Neff also explained that usually tanks will crack soon after install if they are going to crack. The inspectors can check without having it pumped.

The Chair stated you may have trouble if you pump in winter. You wouldn't want to encourage putting a system at risk unless you have to or have a good reason. The Chair thanked the speakers for their input.

Terry Neff asked that the Planning Commission make a recommendation to the board that the ordinance be adopted. He stated he will try to get it recommended for approval at the April 22nd meeting, and the Board can either adopt, or decide to take testimony again, listen to comments, and adopt at a following meeting. Terry Neff stated he hopes to have the ordinance adopted before construction season begins. The MPCA wanted it done by Feb 4th which we couldn't do, but we would like to get it adopted before work is started. He stated he hopes for adoption on the 22nd or if not, the following meeting.

Laurie Westerlund stated it has been looked at by a lot of people, and by committee, so it should be ok.

The Chair commented on the issue of whether there is a requirement for the escrow process. He stated that is really a policy decision, it's not necessarily the purview of this board, but the county board should make that policy decision as to whether it's adopted by Aitkin County.

Laurie Westerlund stated, or hire another person to handle all the paperwork involved in tracking the inspections and winter releases.

Terry Neff stated that the other counties say it's working well and they don't have a lot of problems with it. In many cases soils have been done two or more times, so it isn't necessary to have an escrow. There will be some done, but it won't be as often as you'd think.

The Chair stated, another point is people who can regulate whether that escrow will be in there, the lenders and their approach to that, it's important to understand the ramifications. The process is there to protect a number of people – the lender first, the seller to some extent, and the buyer.

The Chair asked if there were any other comments.

Terry Neff invited Planning Commission members to attend the county board meeting on the 22nd if they wished to provide input as well.

The Chair asked for a recommendation. He stated any recommendations would include changes discussed today.

Laurie Westerlund made a motion to recommend approval of the SSTS Ordinance with the changes discussed at the Planning Commission Public Hearing on April 7, 2014.

Bob Harwarth seconded the motion.

The Chair called for further discussion. There was none.

The Chair called the question. The motion passed by a vote of 3.0 to approve the recommendation.

5. Adjournment

The Chair called for a motion to adjourn.

Laurie Westerlund made a motion to adjourn the meeting. **Jeremy Paquette seconded the motion.**

The Chair called the question. The motion carried **3.0 to adjourn** the meeting.

The meeting was **adjourned at 5:34 p.m.**

Respectfully Submitted:

Barb Williamson
Secretary/ Planning Commission

Last updated: April 8, 2014

Approved:



We look forward to meeting with you on your proposed ordinance changes; GLAR believes waiting until real property transfers before addressing environmental hazards will never result in adequate protection of the County's environmental resources. REALTORS® are not in favor of polluting the ground water or lakes. GLAR believes that all environmental issues should be regulated on an on-going basis, not just at point of sale. Setting up a permitting system countywide for all septic owners with regular and periodical system inspections would be best for the environment.

Minnesota needs sufficient and reliable reporting information on a statewide level and strong implementation of current laws to track current systems. Adding to the costs at time of sale makes housing less affordable not to mention could stop or delay sales from occurring, especially in the winter months.

The Association has recently successfully worked with Cass County Staff on their SSTS Ordinance and looks forward to doing the same in Aitkin County. At this time we would like to request a meeting with Planning and Zoning staff to discuss our concerns. Please contact Marissa Skuza at 218-828-4567 to arrange a meeting time.

Respectfully,

Linda Steffen
President
Greater Lakes Association of REALTORS®

Trenton Simon
Governmental Affairs Committee Chair
Greater Lakes Association of REALTORS®

Marissa Skuza
Governmental Affairs Coordinator
Greater Lakes Association of REALTORS®

15344 Pearl Drive
Baxter, MN 56425
218-828-4567
marissa@greaterlakesrealtors.com

The Greater Lakes Association of REALTORS is located in Baxter, Minnesota and is made up of REALTORS and Affiliates who service Aitkin, Cass, Crow Wing, Hubbard, Mille Lacs, Morrison, Todd, and Wadena Counties. The Association is governed by a Board of Directors made up of Association Members and Affiliates. The members of this Association adhere to a strict ethical code; as well foster the education of our Membership. The Association provides services to Members including access to the Multiple Listing System (MLS) which houses the listings of our Members and listing from around the state of Minnesota. Other services include education, networking opportunities, placement on our Association website, and a weekly email and monthly newsletter.





Aitkin County Planning and Zoning
209 2nd Street NW
Room 100
Aitkin, MN 56431

Dear Aitkin County Planning and Zoning Staff:

On behalf of the Greater Lakes Association of REALTORS® (GLAR) and its membership, we are writing to express our opposition to portions of the Aitkin County Subsurface Sewage Treatment (SSTS) Ordinance Draft and to request a meeting with County Planning and Zoning Staff.

Specifically, we are opposed to the language in the draft ordinance relating to Escrow (Section 9.9) and Enforcement (Section 10).

Firstly, we request all escrow language within the ordinance be removed. Escrow accounts tied to septic systems have proven to be problematic for lenders, inspectors, buyers and sellers.

- Adding to the costs at time of sale makes housing less affordable.
- Lenders may require up to three bids for any escrow funds, and also may require up to 150%, not 125% of written bids to be placed in escrow, which makes it even more cost prohibitive for the parties of the transaction.
- We have been advised by parties that do business in the County that the required cost of escrow on a mound system could be upwards of \$13,500-\$20,000 (depending on the number of bedrooms) this may be extremely cost prohibitive to the parties of the transaction and could perhaps lead to an inability for the buyer or seller to complete the sale, or make the property unmarketable.
- It will be difficult for installers to provide any estimate or bid on updating or replacing a septic system when the ground is frozen, making it impossible to acquire bids for the lenders to create the escrow, also thereby shutting down the winter real estate market.
- There is no interest income on escrow accounts and there are additional fees for creating and maintaining these accounts.
- The ordinance states that the county has release authority over the escrow funds. There are legitimate concerns over the County's liabilities in the implementation, management, manpower and release of the escrow funds. These liabilities could lead to potential legal action by the residents of the County.
- The addition of enforcement actions in Section 10, making a person guilty of a misdemeanor for not complying with the ordinance is a serious and expensive addition to ordinance text.

Aitkin County Board of Commissioners
Request for County Board Action/Agenda Item Cover Sheet

4A
Agenda Item #

To: Chairperson, Aitkin County Board of Commissioners Date: 4/22/2014

Via: Roxy Traxler, Interim County Administrator

From: Bobbie Danielson, HR Manager *Bobbie Danielson*

Title of Item:

Ratify Teamsters Licensed Essential Unit 2014-2016 Collective Bargaining Agreement

Requested Meeting Date: 4/22/2014 Est. Time: 5 Minutes

Presenter: Bobbie Danielson

Type of Action Requested (check all that apply)

- For info only, no action requested Approve under Consent Agenda
 For discussion only with possible future action Adopt Ordinance Revision
 Let/Award Bid or Quote (attach copy of basic bid/quote specs or summary of complex specs, each bid/quote received & bid/quote comparison)
 Approve/adopt proposal by motion Approve/adopt proposal by resolution (attach draft resolution)
 Authorize filling vacant staff position
 Request to schedule public hearing or sale Other (please list) _____
 Request by member of the public to be heard
 Item should be addressed in closed session under MN Statute _____

Fiscal Impact (check all that apply)

Is this item in the current approved budget? Yes _____ No _____ (attach explanation) *Roxy/budget detail

What type of expenditure is this? Operating Capital Other (attach explanation)

Revenue line account # that funds this item is: _____

Expenditure line account # for this item is: _____

Staffing Impact (Any yes answer requires a review by Human Resources Manager before going to the board)

Duties of a department employee(s) may be materially affected. Yes No

Applicable job description(s) may require revision. Yes No

Item may impact a bargaining unit agreement or county work policy. Yes No

Item may change the department's authorized staffing level. Yes No

BJD

HR Review

Supporting Attachment(s)

- Memorandum Summary of Item
 Copy of applicable county policy and/or ordinance (excerpts acceptable)
 Copy of applicable state/federal statute/regulation (excerpts acceptable)
 Copy of applicable contract and/or agreement
 Original bid spec or quote request (excluding complex construction projects)
 Bids/quotes received (excluding complex construction projects, provide comparison worksheet)
 Bid/quote comparison worksheet
 Draft County Board resolution
 Plat approval check-list and supporting documents
 Copy of previous minutes related to this issue
 Other supporting document(s) (please list) _____

Provide (1) copy of supporting documentation NO LATER THAN Wednesday at Noon to make the Board's agenda for the following Tuesday. (If your packet contains colored copies, please provide (4) paper copies of supporting documentation as we do not have a color printer or copier.) Items WILL NOT be placed on the Board agenda unless complete documentation is provided for the Board packets.

AITKIN COUNTY HUMAN RESOURCES

Bobbie Danielson, HR Manager
bobbie.danielson@co.aitkin.mn.us
Nicole Visnovec, HR Specialist
nicole.visnovec@co.aitkin.mn.us

Phone 218-927-7306
Job Hotline 218-927-7393
Fax 218-927-7374
www.co.aitkin.mn.us

To: Aitkin County Commissioners and Interim County Administrator Roxy Traxler
From: Bobbie Danielson, HR Manager 
Date: April 16, 2014
Subject: Teamsters Licensed Essential Unit 2014-2016 Collective Bargaining Agreement

Background Information

Aitkin County and the Teamsters Licensed Essential (Deputy) unit have been in contract negotiations since December 16, 2013. The Agreement covers these job classifications: Deputy Sheriff (13 incumbents), Investigator (2), and Patrol Sergeant (1).

The contract has been updated to include changes shown in the red-lined document attached. Highlights of the wage and insurance proposals are shown below.

Employer's contribution towards health insurance:

Effective January 1, 2014, \$900.00 per month flat dollar contribution. *(Same as Local 49 unit.)*
Effective January 1, 2015, \$920.00 per month flat dollar contribution.
Effective January 1, 2016, \$940.00 per month flat dollar contribution.

(new) In the event the health insurance provisions of this Agreement fail to meet the requirements of the Affordable Care Act and its related regulations or cause the Employer to be subject to a penalty, tax or fine, the Union and the Employer will meet immediately to bargain over alternative provisions so as to comply with the Act and avoid any penalties, taxes or fines for the Employer.

Wages

Employees whose wage is below the maximum of the appropriate wage schedule will advance to the next step on the wage schedule on January 1 each year of the 2014-2016 Agreement ~~their anniversary date based upon the time interval for each step.~~ In no event shall an employee's wage exceed the maximum of the appropriate wage schedule. ~~For purposes of step progression, the anniversary date for all employees hired before January 1, 2006 will be January 1.~~ All employees shall remain at their rate of pay at the expiration date of this Agreement until a new Agreement is executed by the parties.

Wages (highlights continued)

1/1/2014 – Conversion from HAY scale to new wage scale. Effective January 1, 2014, employees shall be placed on the closest step that provides at least a 1% increase. In no event shall an employee's wage exceed the maximum of the wage schedule.

1/1/2015 – increase wage schedule by 30 cents per hour, plus all employees whose wage is below the maximum of the appropriate wage schedule will advance to the next step on the wage schedule on January 1.

1/1/2016 – increase wage schedule by 35 cents per hour, plus all employees whose wage is below the maximum of the appropriate wage schedule will advance to the next step on the wage schedule on January 1.

As discussed by the parties, the following language will not be included in the contract. However, the understanding is that retroactivity, hard freeze (no increase to wage schedule and no step movement), and soft freeze (no general increase) are subject to negotiations.

Shift differential increase from \$0.20 to \$0.68 per hour effective January 1, 2014. *(Same as Teamsters Non-licensed Essential unit.)*

Action Requested

Motion to ratify the 2014-2016 Teamsters Licensed Essential Unit collective bargaining agreement and authorize the Chairperson, Interim County Administrator, and HR Manager to sign.

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A G R E E M E N T

By and Between

AITKIN COUNTY

and

***GENERAL DRIVERS, WAREHOUSEMEN,
HELPERS & INSIDE EMPLOYEES
LOCAL UNION NO. 346
(LICENSED ESSENTIAL UNIT)***

Duluth, Minnesota

January 1, 2014 to December 31, 2016

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AITKIN COUNTY SHERIFF DEPARTMENT LICENSED ESSENTIAL UNIT
CONTRACT
2014 - 2016

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AITKIN COUNTY SHERIFF DEPARTMENT LICENSED ESSENTIAL UNIT
CONTRACT
2014 - 2016

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PREAMBLE

Aitkin County, hereinafter referred to as the "Employer" and the General Drivers, Dairy Employees, Warehousemen, Helpers and Inside Employees Local Union No. 346 of Duluth, Minnesota, affiliated with the International Brotherhood of Teamsters, Chauffeurs, Warehousemen and Helpers of America, representing employees in those classifications covered by this Agreement, hereinafter referred to as the "Union", agree to the following provisions covering wages, hours and working conditions during the period of this Agreement. This Agreement shall supersede and replace all previous agreements between the parties hereto.

TERMS AND RELATIONS

This Agreement is intended to secure proper employment terms and conditions of said Employer and to advance friendly relations between the Employer and the employees. Both the Employer and the employees agree to carry it out fairly.

CONDITIONS OF EMPLOYMENT

The Employer agrees that all conditions of employment relating to wages, hours of work, overtime differentials, vacations and other benefits shall be maintained at not less than the highest minimum standard in effect at the time of signing this Agreement, and the conditions of employment shall be improved wherever specific provisions for improvement are made elsewhere in this Agreement.

ARTICLE 1.

RECOGNITION

Local Union No. 346, affiliated with the International Brotherhood of Teamsters, Chauffeurs, Warehousemen and Helpers of America, shall be recognized as the sole and exclusive collective bargaining agent for all essential licensed employees of the Aitkin County Sheriff's Department, Aitkin, Minnesota, whose service exceeds 67 working days in a calendar year or the lesser of 14 hours per week or 35% of the normal work week, excluding supervisory, confidential and non-licensed essential employees, as set forth in the Certification of Exclusive Representative, BMS Case No. 00-PCE-454, dated October 20, 1999, by the Minnesota Bureau of Mediation Services.

REPRESENTATION

The Union shall be the sole representative of all classifications of employees covered by this Agreement in collective bargaining with the Employer, and there shall be no discrimination against any employee because of non-union affiliation.

AITKIN COUNTY SHERIFF DEPARTMENT LICENSED ESSENTIAL UNIT
CONTRACT

2014 - 2016

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CHECK OFF

The Employer agrees to deduct from the pay of all employees covered by this Agreement, dues and initiation fees of the Local Union having jurisdiction over such employees, and agrees to remit to said Local Union all such deductions. Where laws require written authorization by the employee, the same is to be furnished in the form required. No deduction shall be made which is prohibited by applicable law. Check-off procedures and timing shall be worked out locally. If there is no agreement, the matter shall be referred to the grievance procedure.

UNION SECURITY

All new regular employees shall become a member of the Local Union on or after the 91st day of their employment. When an employee does not wish to become a member of the Local Union, they shall make arrangements with the Local Union to pay a Fair Share Fee as provided for by legislation. Each employee in the bargaining unit covered by this Agreement and certification who fails to acquire and maintain membership in the exclusive representative Union shall, beginning on the 91st day following the beginning of such employment or the effective date of this Agreement whichever is later, pay to the Union each month a Fair Share Fee for services rendered by the exclusive representative. The required contribution shall in no instance exceed a pro rata share of the specific expenses incurred for services rendered by the representative in relationship to negotiations and administration of grievance procedures. The Employer, upon notification of the exclusive representative of such employees and of the amount of the Fair Share Fee, shall check off said fee each month from the earnings of the employee and transmit the same to the exclusive representative. Students who are employed on a temporary basis shall not be subject to the Fair Share clause.

TIME OFF

The Sheriff agrees to grant reasonable and necessary time off, without discrimination or loss of seniority rights and without pay, to any employee designated by the Union to attend a labor convention or serve in any capacity or other Official Union business, provided one (1) week's written notice is given to the Sheriff by the Union, specifying length of time off. The Union agrees that in making its request for time off for Union activities, due consideration shall be given to the number of individuals affected in order that there shall be no disruption of the Sheriff's operations due to lack of available employees.

The Employer will not pay any employee to come in on their scheduled time or day(s) off for negotiations, but when on-duty, the Employer will permit the Teamsters Negotiating Committee, comprised of up to two members of the bargaining unit, to appear at all negotiation meetings with the Employer without the loss of pay.

AITKIN COUNTY SHERIFF DEPARTMENT LICENSED ESSENTIAL UNIT
CONTRACT
2014 - 2016

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ARTICLE 2.

VESTED RIGHT OF MANAGEMENT

The right to employ, transfer, direct and discipline employees and the management of the property and equipment of Aitkin County is reserved and shall be vested exclusively in the County Board, including the sole authority of the County Board to define "cause" for management action. The County Board through authority vested by the Minnesota State Statutes shall have the right to determine how many individuals will be employed or retained together with the right to exercise full control and discipline in the proper conduct of its operation. The County Board shall have the sole right to contract for any work it chooses, and direct employees to perform such work wherever located in its jurisdiction. The County Board shall have the exclusive right to determine the hours of employment and the length of the work week and to make changes in the detail of the employment of the various employees from time to time as is deemed necessary for the efficient operation of the Sheriff's Department, and the Union and the members agree to cooperate with the County Board in all respects to promote the efficient operation of the Sheriff's Department. The Union will be notified by the County Board of any said changes or adjustments. The provisions of this Article are subject to the procedural rights of the employees as set forth in the other Articles contained in this Agreement.

ARTICLE 3.

EMPLOYMENT STATUS

A regular employee is hereby defined as a person hired to fill a permanent full-time position.

A regular seasonal employee is hereby defined as a person on the active payroll only during the season in which the services are required.

A temporary employee is hereby defined as a person hired for a period of time not to exceed six (6) months and they shall be separated from the payroll at the end of such period. At the time of hiring, temporary employees will be notified that their employment is temporary and that they shall accrue no rights under this Agreement for such periods of time worked. Successive appointments to temporary positions will not be made unless mutually agreed to between the County and the Union.

A part-time employee is hereby defined as a person hired to do less than eight (8) hours work per day or less than five (5) days' work per week on a regular basis.

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ARTICLE 4.

PROBATION

All newly hired employees shall serve a one year probationary period of continuous service. During such probationary period they shall not accrue any seniority rights and shall be subject to dismissal for any reason without recourse to the grievance procedure. Upon completion of the one (1) year probationary period, the employee shall be granted seniority rights from the date of original hire.

During the first 90 days of the probationary period, the employee will not be entitled to any of the benefits provided by this Agreement, except Health Insurance which starts as per the plan specified in Article 21, and sick leave pursuant to Article 17. Upon satisfactory completion of the 90 day period, the employee shall be entitled to all of the benefits provided by this Agreement, except paid holidays, computed from their starting date of employment. Employees will receive only those paid holidays that occur following the completion of a 90 day period.

ARTICLE 5.

SENIORITY

The seniority of all employees covered by the terms of this Agreement shall begin with the employee's starting date of employment as a regular employee, provided, however, that no time prior to discharge or quit shall be included. The employee's seniority shall not be diminished by temporary lay-off due to lack of work, shortage of funds or any other contingency beyond the control of either party to this Agreement.

The policy of seniority shall prevail to regular employees and seasonal employees.

The seniority list shall be posted and kept up-to-date annually by the Employer. A copy of the list shall be made available to the Secretary of Local No. 346. Said seniority list shall contain the name and starting date of each employee. Seasonal and part time employees shall be carried on the bottom of the list in proper sequence and the list shall so state that they are seasonal or part time.

No seasonal employee, part-time employee, or temporary employee shall exceed in seniority a regular employee who fills a full-time position.

Seniority shall terminate if:

1. An employee quits.
2. An employee is discharged for cause and is not reinstated.
3. An employee is absent because of a layoff for a period exceeding one (1) year.

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Any employees accepting a supervisory position outside of the bargaining unit contract covering deputies will be granted a leave of absence and have their seniority frozen as of the date they accepted the new position. Their sick leave benefits shall be carried forward with them to the supervisory unit.

In the event of a reduction in the work force or hours, the employee with the least seniority in the affected classification shall be laid off first. Employees on layoff status shall have the right to recall for a period of one (1) year from their date of layoff when a recall is initiated by the Employer. In the event of a recall employees will be recalled in the inverse order of layoff by classification. In the event of a layoff of a sergeant or investigator, the employee to be laid off may bump the least senior deputy, provided the employee to be laid off has previously held a deputy position in the bargaining unit and has more seniority than the least seniority deputy.

ARTICLE 6.

SCHOOLING

All employees who are required to attend school shall be paid the straight time hourly rate for each day of attendance at school. It is further agreed that they shall be reimbursed for necessary and actual expenses in accordance with the established policy of the County of Aitkin on presentation of expense report with receipts. Any function which requires mandatory attendance shall have the hours counted toward computing weekly overtime.

ARTICLE 7.

SAFETY EQUIPMENT

No employee shall be required to drive a vehicle that does not comply with all state and city safety regulations. All vehicles shall be equipped with adequate heaters, defrosters and matting.

EXPENSES

All employees, when away from their homes overnight because of their duty, or outside the County, shall be reimbursed for food and lodging expenses during their absence in accordance with the established policy of the County of Aitkin on presentation of expense report with receipts.

LOSS OR DAMAGE

Employees shall not be charged for loss or damage to equipment unless clear proof of negligence is shown. This Article is not to be construed as applying to charging for normal usage or wear and tear on equipment.

ARTICLE 8.

UNIFORMS

The County agrees to supply to all regular full-time employees, three (3) winter and three (3) summer uniforms. Replacements will be furnished when needed.

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ARTICLE 9.

MEDICAL EXAMINATIONS

Physical, mental or other examinations required by the Employer shall be promptly complied with by all employees, provided, however, the Employer shall pay for all such examinations. Examinations not to exceed one in any one year, unless the employee has suffered serious injury or illness during the year. Employees shall receive their regular compensation and shall not be deducted pay for time spent during an examination required by the Employer.

If the employee disagrees with the results of the medical examination required by the Employer, the employee may be examined by a doctor chosen by the employee or the Union. The Employer shall not be required to pay for said examination. The employee and the Union shall provide the Employer with a copy of the second opinion.

If the opinions of the Employer's and the employee's or Union's physician differ, the Employer may require the employee to submit to a third examination by a physician at the Brainerd Medical Center, at the expense of the Employer. The opinion of the third physician shall be binding. Employees shall receive their regular compensation and shall not be deducted pay for time spent during this third examination.

ARTICLE 10.

WEEKLY HOURS AND OVERTIME RATES

The Sheriff's Department maintains the facilities on a twenty-four (24) hour a day basis. The Employer shall establish work schedules for its employees and shall post the schedules for one (1) week.

In an 8 hour per day schedule: All hours over eight (8) hours per day and 40 hours per week shall be paid at one and one-half (1-1/2) times the rate of pay.

In a 10 hour per day schedule: All hours over ten (10) hours per day and 40 hours per week shall be paid at one and one-half (1-1/2) times the rate of pay.

If the needs of the service permit, all employees shall be allowed two (2) fifteen (15) minutes rest breaks in each eight (8) and ten (10) hour shift, at times determined by the work load.

When a regular employee reports to work in accordance with the work schedule without having been previously notified not to report to work or if any employees are called back to work after completing the scheduled work day, or are called out for work during

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scheduled time off, they shall receive the minimum of two (2) hours pay at time and one-half (1-1/2).

Rescue organizations under the control of the Sheriff (including the ATV Posse and similar organizations) may perform duties covered by this Agreement only in the case of an emergency or when all bargaining unit employees (except those on sick leave, workers compensation, vacation or temporary layoff) are engaged in work. An emergency is defined as a circumstance where additional persons are needed to seek to prevent death or serious bodily harm. "Rescue organizations under the control of the Sheriff" do not include search and rescue organizations from other jurisdictions, the civil air patrol, volunteer fire departments, or other similar rescue organizations, and said rescue organizations may be called at the discretion of the Sheriff. This section shall not be interpreted to prohibit the ATV Posse or similar organizations from providing crowd and traffic control at community events or assisting at the annual County fair.

COURT TIME

An employee who is scheduled to appear in court during the employee's scheduled off duty time shall receive a minimum of four (4) hours pay at the employee's regular base rate of pay, unless the court appearance is cancelled by 8:00 a.m. on the date of the scheduled court appearance. This pay shall be used in computing overtime pay. An extension of or early report to a regularly scheduled shift for court appearance does not qualify the employee for the four (4) hour minimum.

ARTICLE 11.

PAY PERIOD

All employees covered by this Agreement shall be paid bi-weekly on Friday for work performed during the previous pay period. If a holiday falls on Friday, pay day will be the last workday before the holiday. Each employee shall be provided with a statement of gross earnings and an itemized statement of all deductions made for any purpose.

ARTICLE 12.

WORKERS' COMPENSATION

An employee receiving workers' compensation loss of time benefits due to a work-related injury or illness has the option of using accumulated sick leave, personal leave or vacation leave until exhausted to equal the difference between the payment received from workers' compensation and the gross amount the employee would have been paid in a normal pay period. At no time shall the combined total weekly rate of compensation exceed the average weekly wage of the employee on the date of the injury. Employees shall be responsible for benefit deductions that would normally be taken out of their paycheck to the extent not covered by use of the leave benefits as well as after leave balances are exhausted.

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The Employer will continue to contribute its portion of the medical insurance in force when the workers' compensation begins during the period an employee is receiving workers' compensation loss of time benefits due to a work-related injury or illness.

In compliance with the Minnesota Workers' Compensation Act, Minn. Stat. §176.021, subd. 5, and the PERA, workers' compensation wage loss payments are exempt from federal, state, social security tax and PERA deductions and any other deductions that would normally be taken out of the employee's paycheck.

ARTICLE 13.

PROMOTIONS

In filling job vacancies or new positions preference shall be given to those employees oldest in point of service, provided, however, that the qualifications and physical fitness of the employees being considered for the job have to be relatively equal. In judging employee's qualifications for the job, the following factors shall be considered:

1. Ability to perform related work.
2. Attitude.
3. Aptitude.
4. Versatility.
5. Efficiency.
6. Previous work record.
7. Attendance.

Where qualifications and ability are equal, then seniority shall prevail.

All job vacancies or new positions shall be posted on the bulletin board for a period of five (5) weekdays (Monday through Friday) so that the interested employees may have an opportunity to apply. Such notice shall state the requirements of the job. Employees shall apply for the vacancy or new position in writing, and only those applicants who meet the requirements shall be considered.

The successful applicant shall have a ninety (90) calendar day trial period in which to demonstrate his or her ability to perform the job. During the trial period, either the employee or the County may request that the employee return to their previous position and rate of pay per the collective bargaining agreement without loss of seniority.

The Employer may make immediate temporary assignments to fill any vacancy or new position while the job posting procedures are being carried out. If there is a dispute involving the provisions of this Article it shall be referred to the grievance procedure of this Agreement for resolution.

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ARTICLE 14.

LEAVE OF ABSENCE

Family and Medical Leave - Family and Medical Leave shall be granted in accordance with legal mandates and Aitkin County Policy. Attached Aitkin County Resolution #93-88.

Leave of Absence - Any employee desiring a leave of absence from his or her employment shall secure written permission from the Sheriff. The maximum leave of absence shall be two (2) thirty (30) day periods and may be extended for like periods upon approval of the County Administrator. During the period of absence, the employee shall not engage in gainful employment without prior written approval of the County Administrator. Failure to comply with this provision shall result in the complete loss of seniority rights. The employee must make suitable arrangements for continuation of health and welfare and pension payments before the leave may be approved by the Employer. The employee will provide written notice to the Union of all leaves of absence approved pursuant to this paragraph.

Temporary Lay-Off - A temporary lay-off is defined as a lay-off lasting not more than one (1) year. After such period, the employee shall be considered terminated.

Recall - Recall of an employee shall be provided for in the following manner. Initially, the County shall attempt to locate the employee by telephone. If that attempt is unsuccessful, the Employer shall post a certified or registered letter to the employee's last known address. If the employee fails to respond to said letter within a five (5) working day period from the date of receipt of the signed, requested "Return Receipt" or notification from the Post Office that said notice is undeliverable, the employee shall be considered terminated.

ARTICLE 15.

HOLIDAYS

All regular full-time employees shall be entitled to the following paid eight (8) hour holidays:

- | | |
|------------------------|-------------------------------|
| New Year's Day | Labor Day |
| Presidents Day | Veteran's Day |
| Martin Luther King Day | Thanksgiving Day |
| Good Friday | Friday after Thanksgiving Day |
| Memorial Day | Christmas Day |
| Fourth of July | |

When an employee is required to work on any of these holidays, they shall be paid at the rate of time and one-half (1-1/2) in addition to their regular holiday pay.

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When an employee does not work on any of the above-named holidays, the holiday shall, nevertheless, count as eight (8) hours work for the purpose of computing overtime for hours worked in excess of forty (40) in any such week. Employees may elect to use their accrued and unused vacation or personal leave, up to the number of hours in each employee's regularly scheduled shift, to complete a holiday.

For the purpose of overtime pay, holidays shall be celebrated on the day on which the holiday falls. Employees may use accrued vacation or comp time at the employee's option, up to the employee's normal scheduled hours.

ARTICLE 16.

VACATIONS

All regular full-time employees shall be granted vacation as follows:

<u>Completed Years of Service</u>	<u>Working Hours Employee May Earn as Vacation Per Year</u>
0 - 3	96
3 - 5	120
5 - 10	144
10 - 15	168
15+	192

The number of hours equivalent to the employee's scheduled shift will be deducted for each day of vacation used.

For the purposes of administering an employee's vacation time earned, the accumulated time will be shown in hours earned on the employees pay stub. An employee may accumulate vacation hours up to a maximum of 280 hours. Vacation hours over the 280 hours maximum will be forfeited as accumulated on the monthly rate until such time as the employee is below the 280 hour maximum.

Employees who have taken at least 80 hours of vacation during the calendar year may elect to take straight time pay in lieu of a maximum of 80 hours of earned vacation in December. Such vacation will not be counted as hours worked for the purpose of computing overtime.

When an employee is not working because of illness or injury and has exhausted accumulated sick leave, they will be permitted to draw earned vacation pay.

Upon termination of employment for any cause, regular employees shall be paid for any accumulated vacation credits, including prorated payments for periods of less than one (1) year. See also Article 17, Section 3, MSRS HCSP.

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Probationary employees can use vacation after 6 months of employment.

ARTICLE 17.

SICK LEAVE:

Section 1. Sick Leave

Full-time (probationary and non-probationary) employees shall be entitled to eight (8) hours of sick leave with pay for each month of continuous employment. Unused sick leave may be accumulated up to a maximum of nine hundred sixty (960) hours. Employees begin earning sick leave as of the day of employment and may use sick leave during the probationary period.

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Accrued sick leave may be used when an employee cannot perform work duties due to but not limited to the following: personal illness or injury; necessity for medical or dental treatment or examination, where such treatment cannot be scheduled outside of working hours; emergency, illness or injury of the employee's immediate family member which requires the employee's attendance and care; quarantine directed by a medical physician; disability; pre and postnatal care. For the purpose of this paragraph, immediate family is defined as: child, step child, adult child, spouse, sibling, parent, grandparent, or step parent.

Employees must notify the employee's supervisor or sick leave usage prior to employee's starting time, unless an emergency prevents the employee from doing so. The Sheriff at his/her discretion may require a doctor's certificate showing the nature of an injury or illness.

Section 2. Severance Pay

All regular employees of Aitkin County who were hired on or before April 1, 2008, after completion of ten (10) years continuous service, shall be entitled to severance pay upon retirement, death, layoff, or resignation. An employee must be laid off for more than one year before being entitled to severance pay. The requirement of ten (10) years continuous service is waived as to any payment of severance pay due to death or retirement pursuant to a bona fide retirement plan. Such severance pay shall be allowed as follows:

Retirement pursuant to a bona fide retirement plan or death.	100% of unused sick leave
Retirement, resignation, or a voluntary quit with a 40 day maximum	50% of all unused sick leave

Upon layoff for more than one year, retirement, or resignation, the severance benefit will be paid to the eligible employee. In the event of death, the severance pay shall be paid

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to the employee's estate. The severance pay benefit is eliminated for all employees hired after April 1, 2008.

Section 3. MSRS HCSP

For employees who have met age and service requirements necessary to receive an annuity from PERA or who are receiving a disability benefit from PERA, the County will deposit 100% of the employee's severance pay and accrued but unused vacation into a MSRS HCSP account upon retirement or resignation in good standing.

ARTICLE 18.

PERSONAL LEAVE

A regular full-time employee shall be granted three (3) days (24 hours) personal leave each year, not to be accumulative. Employees may elect to use their accrued and unused vacation, up to the number of hours in each employee's regularly scheduled shift, to complete a personal leave day. Personal leave days shall be granted on a prorated basis for employees working a portion of the calendar year.

ARTICLE 19.

FUNERAL LEAVE

When a death occurs in a regular full-time employee's immediate family, the employee may take up to 24 hours off with pay to attend the funeral or make funeral arrangements over the course of up to three (3) days. i.e. 3 eight-hour days or 2.4 ten-hour days or 2 twelve-hour days. Employees may elect to use their accrued and unused sick leave, up to the number of hours in each employee's regularly scheduled shift, to complete a funeral leave day. The County may require verification of the need for the leave. For purposes of this Article, immediate family members are defined as an employee's husband, wife, son, daughter, father, mother, sister, brother, father-in-law, mother-in-law, grandmother, grandfather, and grandchildren.

In cases requiring extensive travel time, the employee may be granted up to an additional 16 hours off with pay over the course of up to two (2) days, subject to approval of the Sheriff. Extensive travel time is defined as travel distance greater than 250 miles, one way.

Additional time, if needed, may be allowed by the County Sheriff, but such additional time in excess of 40 hours off with pay, over the course of up to five (5) days as indicated above, shall be charged against the employee's sick leave.

As an example, the general intent is as follows: If the employee is working 12 hour shifts and needs two days off, they would be paid for 24 hours funeral leave -- or if they are working 10 hour shifts and need two days off, they would be paid for 20 hours funeral leave -- or if they are working 8 hour shifts and need two days off, they would be paid

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for 16 hours funeral leave -- or if they are working 12 hour shifts and need 3 days off and there's no extensive travel time, they would be paid for 24 hours funeral leave and can elect to use 12 hours from their sick leave bank for the third day -- or if they are working 10 hour shifts and need three days off and there's no extensive travel time, they would be paid for 24 hours funeral leave and can elect to use 6 hours from their sick leave bank to complete the third day and it is understood that in most cases the County is not likely to schedule an employee to return for a partial shift on the last day.

ARTICLE 20.

Deleted: A maximum of three (3) days (24 hours) leave with pay will be allowed when a death occurs in a regular full-time employee's family, namely the husband, wife, son, daughter, father, mother, sister, brother, father-in-law, mother-in-law, and grandchildren. Employees may elect to use their accrued and unused sick leave, up to the number of hours in each employee's regularly scheduled shift, to complete a funeral leave day.¶

¶
Two (2) additional days (16 hours) may be allowed when traveling is necessary, subject to the approval of the Sheriff. Additional time, if needed, may be allowed by the County Sheriff, but such additional time in excess of five (5) days (40 hours) indicated above, shall be charged against the employee's sick leave.¶

RETIREMENT

Retirement benefits, specifically PFERA and PERA, will be provided to each employee covered by this Agreement as required by state statute.

ARTICLE 21.

INSURANCE AND BONDS

GROUP HEALTH INSURANCE

Regular full-time employees and their dependents shall be provided with group insurance through the Teamsters Local 346 Health Fund, Benefit Plan E, and effective July 1, 2000, Benefit Plan G. The Employer's contribution toward the total premium for group insurance shall be as follows:

Effective January 1, 2014, \$900.00 per month flat dollar contribution.

Effective January 1, 2015, \$920.00 per month flat dollar contribution.

Effective January 1, 2016, \$940.00 per month flat dollar contribution.

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Effective January 1, 2012, \$810.00 per month flat dollar contribution.¶
Effective January 1, 2013, \$855.00 per month flat dollar contribution. ¶

In no event will the Employer's contribution exceed the actual cost of the coverage. Any additional amount due shall be paid by the employee. Notwithstanding anything herein contained, it is agreed that in the event the County is delinquent in the payment of its contribution to the Health and Welfare Program in effect for the employees covered under this contract, the Local Union shall have the right to take such legal action as they deem necessary until such delinquent payments are made. It is further agreed that in the event that action is taken, the County shall be responsible to the employees for losses resulting therefrom.

Coverage starts on the first of the month following date of hire.

In the event the health insurance provisions of this Agreement fail to meet the requirements of the Affordable Care Act and its related regulations or cause the Employer to be subject to a penalty, tax or fine, the Union and the Employer will meet immediately to bargain over alternative provisions so as to comply with the Act and avoid any penalties, taxes or fines for the Employer.

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LIABILITY INSURANCE

The County of Aitkin agrees to furnish, at no cost to the employee, liability insurance to protect officers in amounts equal to the county's statutory liability for claims where the county has a duty of indemnification pursuant to Minnesota Statute Section 466.07.

LIFE INSURANCE

The Employer agrees to provide and pay for a life insurance policy of \$15,000 for all regular employees and to provide life insurance coverage in the amount of \$10,000 for their spouses and dependents up to age 26.

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BONDS AND PREMIUMS

Should the Employer require any employee to give bond, cash bond shall not be compulsory, and any standard premium involved shall be paid by the Employer.

The primary obligation to procure the bond shall be on the Employer. If the Employer cannot arrange for a bond within ninety (90) days, he must so notify the employee in writing. Failure to so notify shall relieve the employee of the bonding requirement.

If the proper notice is given, the employee shall be allowed thirty (30) days from the date of such notice to make his/her bonding requirements. Standard premiums only on said bond to be paid by the Employer. The standard premium shall be that premium paid by the Employer for bonds applicable to all other of its employees in similar classifications. Any excess premium to be paid by the employee.

ARTICLE 22.

INDIVIDUAL AGREEMENT

The Employer agrees not to enter into any contract or agreement with any employees, individually or collectively, which in any way conflicts with the terms and provisions of this Agreement.

JOB STEWARD

Aitkin County and the Aitkin County Sheriff recognize the right of the Union to designate Job Stewards to handle such Union business as may from time to time be delegated to the Job Stewards by the Union. The Employer shall be notified in writing of the names of the employees designated as Job Stewards.

ARTICLE 23.

GRIEVANCE PROCEDURE

23.1 Definition of a Grievance

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A grievance is defined as a dispute or disagreement as to the interpretation or application of the specific terms and conditions of this Agreement.

23.2 Union Representatives

The Employer will recognize representatives designated by the Union as the grievance representatives of the bargaining unit having the duties and responsibilities established by this Article. The Union shall notify the Employer in writing of the names of such Union representatives and of their successors when so designated.

23.3 Processing of a Grievance

It is recognized and accepted by the Union and the Employer that the processing of grievances as hereinafter provided is limited by the job duties and responsibilities of the employees and shall therefore be accomplished during the normal working hours only when consistent with such employee duties and responsibilities. The aggrieved employee and a Union representative shall be allowed a reasonable amount of time without loss of pay when a grievance is investigated and presented to the Employer during normal working hours provided that the employee and the Union representative have notified and received the approval of the designated supervisor who has determined that such absence is reasonable and would not be detrimental to the work programs of the Employer.

23.4 Procedure

Grievances, as defined by Article 23 shall be resolved in conformance with the following procedure:

Step 1. An employee claiming a violation concerning the interpretation or application of this Agreement shall, within twenty-one (21) calendar days after such alleged violation has occurred, present such grievance to the Employee's supervisor as designated by the Employer (Sheriff). The Employer-designated representative will discuss and give an answer to such Step 1 grievance within ten (10) calendar days after receipt. A grievance not resolved in Step 1 and appealed to Step 2 shall be placed in writing setting forth the nature of the grievance, the facts on which it is based, the provision or provisions of the Agreement allegedly violated, the remedy requested, and shall be appealed to Step 2 within ten (10) calendar days after the Employer-designated representative's final answer in Step 1. Any grievance not appealed in writing shall be considered waived.

Step 2. If appealed, the written grievance shall be presented by the Union and discussed with the Employer-designated Step 2 representative (Human

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Resources Manager). The Employer designated representative shall give the Union the Employer's answer in writing within ten (10) calendar days after receipt of such Step 2 grievance. A grievance not resolved in Step 2 may be appealed to Step 3 within ten (10) calendar days following the Employer-designated representative's final answer in Step 2. Any grievance not appealed in writing shall be considered waived.

Step 3. If appealed, the written grievance shall be presented by the Union and discussed with the Employer-designated Step 3 representative (County Administrator). The Employer designated representative shall give the Union the Employer's answer in writing within ten (10) calendar days after receipt of such Step 3 grievance. A grievance not resolved in Step 3 may be appealed to Step 4 within ten (10) calendar days following the Employer-designated representative's final answer in Step 3. Any grievance not appealed in writing shall be considered waived.

Step 4. A grievance unresolved in Step 3 and appealed to Step 4 by the Union shall be submitted to arbitration subject to the provisions of the Public Employment Labor Relations Act of 1971 as amended. The selection of an arbitrator shall be made in accordance with the "Rules Governing the Arbitration of Grievances" as established by the Bureau of Mediation Services.

23.5 Arbitrator's Authority

A. The arbitrator shall have no right to amend, modify, nullify, ignore, or add to or subtract from the terms and conditions of this Agreement. The arbitrator shall consider and decide only the specific issue(s) submitted in writing by the Employer and the Union, and shall have no authority to make a decision on any other issue not so submitted.

B. The arbitrator shall be without power to make decisions contrary to, or inconsistent with, or modifying or varying in any way the application of laws, rules, or regulations having the force and effect of law. The arbitrator's decision shall be submitted in writing within thirty (30) calendar days following close of the hearing or the submission of briefs by the parties, whichever be later, unless the parties agree to an extension. The decision shall be binding on both the Employer and the Union and shall be based solely on the arbitrator's interpretation or application of the express terms of this Agreement and to the facts of the grievance presented.

C. The fees and expenses for the arbitrator's services and proceedings shall be borne equally by the Employer and the Union. Each party shall be responsible for compensating its own representatives and witnesses. If either party desires a verbatim record of the proceedings, it may cause such a record to be made, providing it pays for the record. If both parties desire a verbatim record

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of the proceedings, the cost shall be shared equally.

23.6 Waiver

If a grievance is not presented within the time limits set forth above, it shall be considered "waived". If a grievance is not appealed to the next step within the specified time limit or any agreed extension thereof, it shall be considered settled on the basis of the Employer's last answer. If the Employer does not answer a grievance or an appeal thereof within the specified time limits, the Union may elect to treat the grievance as denied at that step and immediately appeal the grievance to the next step. The time limit in each step may be extended by mutual agreement of the Employer and the Union in each step.

23.7 Choice of Remedy

If, as a result of the written Employer response in Step 3, the grievance remains unresolved, and if the grievance involves the suspension, demotion, or discharge of an employee who has completed the required probationary period, the grievance may be appealed either to Step 4 of Article 23 or to another procedure such as Veterans Preference. If appealed to any procedure other than Step 4, the grievance shall not be subject to the arbitration procedure provided in Step 4. The aggrieved employee shall indicate in writing which procedure is to be used – Step 4 of this grievance procedure, or an alternative procedure. The election set forth above shall not apply to claims subject to the jurisdiction of the United States Equal Employment Opportunity Commissioner unless allowed by law.

23.8 Postmark

A grievance shall be considered to have been presented within the time limits set forth in this Article if it is postmarked within the time limits specified. The Employer's written response to a grievance shall be considered to have been made within the time limits set forth in this Article if it is postmarked within the time limits specified.

ARTICLE 24.

SUSPENSION

An employee may be temporarily suspended for just cause after the investigation. The employee shall be notified of the reason for the suspension seven (7) calendar days prior to the date of suspension except in emergency. If the employee believes that the suspension is without just cause, or that the period of suspension is unwarranted, the employee shall have the right to appeal by invoking the normal grievance procedure within twenty-one (21) calendar days of the date of suspension. If it is determined without just cause, the employee shall be reinstated immediately and shall receive full pay lost as the result of the suspension.

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ARTICLE 25.

DISCHARGE

This Article 25 shall pertain to discharge cases only.

An employee who has completed the required probationary period shall be discharged only for just cause after an investigation. An action to discharge an employee shall be taken by the appointing authority only after a meeting has been held between the designated Union representative and employee, and the County Administrator or a subcommittee thereof or the County Board's designee. The employee and the Union shall be given written notice of the charges against the employee and of the meeting date and time at least ten (10) calendar days prior to the meeting. The Union and the employee shall be present at the meeting, and the Union shall present information relevant to the proposed discharge and may present witnesses and evidence. The Employer shall have the right to present information, witnesses and evidence at the meeting. This meeting shall be in lieu of Steps 1 and 2 of the Grievance Procedure set forth in Article 23 of this Agreement.

In the event the appointing authority proceeds to discharge, then a grievance relating to discharge shall be filed at Step 3 of the Grievance Procedure within fourteen (14) calendar days of the date of the discharge action.

ARTICLE 26.

WAGES

Employees covered by this Agreement shall be paid in accordance with Appendix A.

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Employees whose wage is below the maximum of the appropriate wage schedule will advance to the next step on the wage schedule on January 1 each year of the 2014-2016 Agreement. In no event shall an employee's wage exceed the maximum of the appropriate wage schedule. All employees shall remain at their rate of pay at the expiration date of this Agreement until a new Agreement is executed by the parties.

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Shift Differential –Effective January 1, 2014, employees will receive shift differential of \$0.68 per hour for hours worked from 6:00 p.m. to 6:00 a.m.

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ARTICLE 27.

SAVINGS AND SEPARABILITY CLAUSE

If any Articles or Sections of this Agreement or any riders thereto should be held invalid by operation of law or by any tribunal of competent jurisdiction, or if compliance with or enforcement of any Article or Section should be restrained by such tribunal pending a final determination as to its validity, the remainder of this contract and any rider thereto,

AITKIN COUNTY SHERIFF DEPARTMENT LICENSED ESSENTIAL UNIT
CONTRACT
2014 - 2016

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or the application of such Article or Section to persons or circumstances other than those to which it had been held invalid or to which compliance with or enforcement of has been restrained, shall not be affected thereby.

In the event that any Article or Section of this Agreement is held invalid or enforcement of or compliance with which has been restrained, as set forth, the parties affected thereby shall enter into immediate collective bargaining negotiations, upon the request of the Union or the County, for the purpose of arriving at a mutually satisfactory replacement, pertaining to the same subject matter for such Article or Section during the period of invalidity or restraint.

ARTICLE 28.

EXPIRATION

The period of this Agreement shall be from the 1st day of January 2014 until the 31st day of December, 2016 and shall continue in full force and effect from year to year thereafter, unless written notice of intention to terminate or modify this Agreement is given by either party to the other party sixty (60) days prior to the date of expiration or any anniversary thereof. Such notice may be delivered personally or by certified mail and if by mail, the notice must be received sixty (60) days prior to the expiration or anniversary date thereof. If the notice is to terminate, this Agreement shall then terminate on the anniversary date next following. If the notice is to change or modify, such notice shall specify the changes or modifications demanded.

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IN WITNESS WHEREOF, we have hereunto set our hands and seals this 22th day of April, 2014.

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Secretary/Treasurer, Local No. 346

Chairperson,
Aitkin County Board of Commissioners

President, Local No. 346

Interim County Administrator

Business Agent

Human Resources Manager

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Memorandum of Agreement (Comp Time)

This Memorandum of Agreement is entered into between Aitkin County (hereafter "County") and the General Drivers, Warehousemen, Helpers & Inside Employees Local Union No. 346 (hereafter "Union").

WHEREAS, the County and the Union are parties to a collective bargaining agreement negotiated pursuant to the Public Employment Labor Relations Act; and

WHEREAS, during negotiations for the 2014-2016 collective bargaining agreement, the parties agreed to provide compensatory time off, on a trial basis, for the duration of the 2014-2016 agreement.

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NOW, THEREFORE, the parties agree as follows:

1. At the discretion of the Sheriff, employees shall be permitted to accrue compensatory time off hours in lieu of the overtime pay set forth in Article 10 of the collective bargaining agreement. Compensatory time shall accrue at the rate of one and one-half (1-1/2) hours for each overtime hour worked:
2. Employees must obtain prior approval from the Sheriff or the Sheriff's designee for accrual of compensatory time off in lieu of overtime pay.
3. Use of compensatory time is subject to the prior approval of the Sheriff or the Sheriff's designee and the needs of the Sheriff's Office.
4. It is agreed and understood that the use of compensatory time shall not result in overtime hours for any other employee of the Sheriff's Office.
5. The maximum compensatory time accrual shall be fifty (50) hours.
6. All accrued and unused compensatory time hours will be paid out at the end of each calendar year so as to not carry a balance forward into each subsequent year.
7. This Memorandum of Agreement will be in effect the date of County Board approval of the 2014-2016 collective bargaining agreement, and it shall sunset on December 31, 2016 and shall be of no effect thereafter.
8. This Memorandum of Agreement constitutes the complete and total agreement of the parties regarding this matter.

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IN WITNESS WHEREOF, the parties have caused this Memorandum of Agreement to be executed this 22nd day of April, 2014,

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FOR LOCAL NO. 346:

FOR COUNTY OF AITKIN:

Secretary/Treasurer, Local No. 346

Chairperson,
Aitkin County Board of Commissioners

President, Local No. 346

Interim County Administrator

Business Agent

Human Resources Manager

AITKIN COUNTY SHERIFF DEPARTMENT LICENSED ESSENTIAL UNIT
CONTRACT

2014 - 2016

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Memorandum of Agreement (Permanent Part-time Employees)

This Memorandum of Agreement is entered into between Aitkin County (hereafter "County") and the General Drivers, Warehousemen, Helpers & Inside Employees Local Union No. 346 (hereafter "Union").

WHEREAS, the County and the Union are parties to a collective bargaining agreement negotiated pursuant to the Public Employment Labor Relations Act; and

WHEREAS, during negotiations for the 2014 collective bargaining agreement, the parties agreed to meet to negotiate language concerning permanent part-time employees if the County decides to hire permanent part-time employees starting in calendar year 2014.

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NOW, THEREFORE, the parties agree as follows:

1. If the County decides to hire permanent part-time employees, the parties will meet to negotiate language concerning part-time employees.
2. This Memorandum of Agreement will be in effect the date of County Board approval of the 2014 bargaining agreement.
3. This Memorandum of Agreement constitutes the complete and total agreement of the parties regarding this matter.

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IN WITNESS WHEREOF, the parties have caused this Memorandum of Agreement to be executed this 22nd day of April, 2014.

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FOR LOCAL NO. 346:

FOR COUNTY OF AITKIN:

Secretary/Treasurer, Local No. 346

Chairperson,
Aitkin County Board of Commissioners

President, Local No. 346

Interim County Administrator

Business Agent

Human Resources Manager

AITKIN COUNTY SHERIFF DEPARTMENT LICENSED ESSENTIAL UNIT CONTRACT
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APPENDIX A: 2014-2016 Wage Schedules

1/1/2014															
	Min/A	B	C	D	E	F	G	H	I	J	K	L	M	N	Max/O
Investigators/Sergeants	\$ 23.50	\$ 24.21	\$ 24.93	\$ 25.68	\$ 26.45	\$ 27.24	\$ 28.06	\$ 28.90	\$ 29.77	\$ 30.66	\$ 31.58	\$ 32.53	\$ 33.51	\$ 34.51	\$ 35.25
Deputies	\$ 22.00	\$ 22.66	\$ 23.34	\$ 24.04	\$ 24.76	\$ 25.50	\$ 26.27	\$ 27.06	\$ 27.87	\$ 28.71	\$ 29.57	\$ 30.45	\$ 31.37	\$ 32.31	\$ 33.00

Effective January 1, 2014, employees shall be placed on the closest step that provides at least a 1% increase. In no event shall an employee's wage exceed the maximum of the wage schedule.

1/1/2015															
	Min/A	B	C	D	E	F	G	H	I	J	K	L	M	N	Max/O
Investigators/Sergeants	\$ 23.80	\$ 24.51	\$ 25.23	\$ 25.98	\$ 26.75	\$ 27.54	\$ 28.36	\$ 29.20	\$ 30.07	\$ 30.96	\$ 31.88	\$ 32.83	\$ 33.81	\$ 34.81	\$ 35.55
Deputies	\$ 22.30	\$ 22.96	\$ 23.64	\$ 24.34	\$ 25.06	\$ 25.80	\$ 26.57	\$ 27.36	\$ 28.17	\$ 29.01	\$ 29.87	\$ 30.75	\$ 31.67	\$ 32.61	\$ 33.30

1/1/2016															
	Min/A	B	C	D	E	F	G	H	I	J	K	L	M	N	Max/O
Investigators/Sergeants	\$ 24.15	\$ 24.86	\$ 25.58	\$ 26.33	\$ 27.10	\$ 27.89	\$ 28.71	\$ 29.55	\$ 30.42	\$ 31.31	\$ 32.23	\$ 33.18	\$ 34.16	\$ 35.16	\$ 35.90
Deputies	\$ 22.65	\$ 23.31	\$ 23.99	\$ 24.69	\$ 25.41	\$ 26.15	\$ 26.92	\$ 27.71	\$ 28.52	\$ 29.36	\$ 30.22	\$ 31.10	\$ 32.02	\$ 32.96	\$ 33.65

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