



**T**ORRANCE **C**OUNTY  
COMMISSION MEETING  
DECEMBER 13<sup>TH</sup>, 2017  
9:00 A.M.

FOR PUBLIC VIEW, DO NOT REMOVE



# Torrance County Commission

## AGENDA

December 13<sup>th</sup>, 2017

9:00 A.M.

Please Silence All Electronic Devices

Regular Meeting to be Held at:

Administrative Offices of Torrance County

Commission Chambers

205 9<sup>th</sup> Street

Estancia, NM 87016

Call Meeting to Order  
Pledge of Allegiance  
Invocation

Approval of Minutes: November 22, 2017 Regular Meeting

Approval of Meeting Agenda

Approval of Consent Agenda:

1. Approval of Checks
2. Indigent Claim(s)



### ACTION ITEMS\*:

#### **ITEMS TO BE CONSIDERED AND ACTED UPON**

(Public Comment, each item: At the Discretion of the Commission Chair. Comments are limited to one (1) minute per person.)

#### \*Presentation(s):

1. Vendor Demonstration on Solar Lighting on Traffic Signs – Gary Aragon, K&S Industries
2. 1:00 P.M. - Presentation on Proposed Land Exchange between State Land Office & BLM – Chris McNiel, NM State Land Office

#### \*Department Requests/Reports:

3. Updates: a. Various County Departments b. Other Boards or Land Grants (upon request) c. Forest Service (upon request) d. Commission
4. FY2017 DWI Program Report for DFA – Tracey Master, DWI Prevention Coordinator
5. Assessor's Office Request to Re-Classify all Appraiser/Re-Appraisal Clerk Positions – Jesse Lucero, Deputy Assessor
6. Fire Department Job Specifications, Review & Approval
7. Resolution 2017-60 Budget Increase – Amanda Tenorio, Finance Director
8. Resolution 2017-61 Line Item Transfer – Amanda Tenorio, Finance Director

#### \*Commission Matters:

9. Address the Commission in Regards to the Solid Waste Fees; Would Like to Request VA Benefits Recipients Receive Solid Waste Discount – Edward McCracken, Resident
10. 2018 Commission Meeting Schedule
11. 2018 Holiday Closure Schedule
12. Letter to Applicants for Special Projects
13. Schedule a Workshop to Review & Develop Road Plan
14. Request Approval of the Voting Membership for the Partnership for a Healthy Torrance

#### \*County Manager Requests/Reports:

15. Ratification of 2018 Health Insurance Contract with Presbyterian
16. Request to Fund Two Transport Deputies
17. Update

Public Comment / Requests: At the Discretion of the Commission Chair. For Information Only (No Action Can Be Taken). Comments are limited to three (3) minutes per person on any subject.

#### \*Adjourn

#### Friendly Reminder:

The Torrance County Commission has cancelled the December 27<sup>th</sup>, 2017 regularly scheduled meeting.

#### Administrative Offices of Torrance County Holiday Closures:

Monday Dec. 25<sup>th</sup>, 2017 and Tuesday Dec. 26<sup>th</sup>, 2017

Monday Jan. 1<sup>st</sup>, 2018



*Minutes*

**DRAFT COPY**  
**TORRANCE COUNTY BOARD OF COMMISSIONERS**  
**REGULAR COMMISSION MEETING**  
**November 22<sup>nd</sup>, 2017**

**COMMISSIONERS PRESENT:** JAVIER SANCHEZ-CHAIRMAN  
JAMES FROST-MEMBER  
JULIA DUCHARME-MEMBER

**OTHERS PRESENT:** BELINDA GARLAND-COUNTY MANAGER  
ANNETTE ORTIZ-DEPUTY COUNTY MANAGER  
DENNIS WALLIN-COUNTY ATTORNEY  
YVONNE OTERO-ADMIN. ASST.

**CALL MEETING TO ORDER**

Chairman Sanchez calls the November 22<sup>nd</sup>, 2017 Regular Commission Meeting to order at 9:02 am

Pledge lead by Mr. Nick Sedillo and Invocation lead by Ms. Annette Ortiz

**APPROVAL OF NOVEMBER 6<sup>th</sup>, 2017 SPECIAL MEETING MINUTES**

Chairman Sanchez asks for a motion to approve the November 6<sup>th</sup>, 2017 special meeting minutes. **ACTION TAKEN:** Commissioner Frost makes a motion to approve the November 6<sup>th</sup>, 2017 special meeting minutes. Madam Commissioner DuCharme seconds the motion. No further discussion, all Commissioners in favor. **MOTION CARRIED**

**APPROVAL OF NOVEMBER 8<sup>th</sup>, 2017 REGULAR MEETING MINUTES**

Chairman Sanchez asks for a motion to approve the November 8<sup>th</sup>, 2017 regular meeting minutes. **ACTION TAKEN:** Chairman Sanchez makes a motion to approve the November 8<sup>th</sup>, 2017 regular meeting minutes. Commissioner Frost seconds the motion. No further discussion, all Commissioners in favor. **MOTION CARRIED**

**APPROVAL OF NOVEMBER 22<sup>nd</sup>, 2017 MEETING AGENDA**

Chairman Sanchez asks for a motion to approve the November 22<sup>nd</sup>, 2017 meeting agenda. **ACTION TAKEN:** Chairman Sanchez makes a motion to approve the November 22<sup>nd</sup>, 2017 meeting agenda. Madam Commissioner DuCharme seconds the motion. No further discussion, all Commissioners in favor. **MOTION CARRIED**

## **APPROVAL OF CONSENT AGENDA**

Chairman Sanchez asks for a motion to approve the consent agenda. **ACTION TAKEN:** Madam Commissioner DuCharme makes a motion to approve the consent agenda. Commissioner Frost seconds the motion. Madam Commissioner DuCharme asks if there are any indigent claims and if so what is the amount. Ms. Ortiz states that yes there was and the amount was \$2,000.00. No further discussion, all Commissioners in favor. **MOTION CARRIED**

### **ACTION ITEMS** **ITEMS TO BE CONSIDERED AND ACTED UPON**

#### **\*Presentation(s):**

##### **1.) Recognition of Excellence for Wanda Sullenger, Torrance County Volunteer EMT**

Lester Gary, Torrance County Fire Chief Introduces Ms. Wanda Sullenger a member of the Mountainair Volunteer Fire Department. Ms. Sullenger has been with the department for 13 years and recently received an award from the state of New Mexico Emergency Services Bureau for 2017 Provider of the Year. Even though Ms. Sullenger is out of Mountainair, Torrance County does work closely with them on mutual aid calls and Mountainair does help with a lot of the southwestern end of the county. Chief Gary would like to present her with a Recognition of Excellence for her service from the Torrance County Fire Department. A video of the news clip is shown for all to view. **NO ACTION TAKEN DISCUSSION ONLY**

#### **\*Department Request/Reports:**

##### **2.) Updates: a. Various County Departments d. Commission**

###### **a.) Various Departments**

**1.) Linda Jaramillo, Torrance County Clerk:** Ms. Jaramillo would like to update everyone on the upcoming elections in 2018. On February 6, 2018 Moriarty/Edgewood Schools will be having a special GO Bond Election, which is run by the Torrance County Clerk's office. Consolidated precincts for that election will be at the Edgewood Middle School and the Moriarty Civic Center. Absentee voting for this election will be held here at the Clerk's office. Ms. Jaramillo will be publishing the resolutions for this election in the Independent on December 6, 2017 and December 13, 2017, and in the Mountainview Telegraph on December 7, 2017 & December 14, 2017. If anyone is interested on the details or to read the resolution, they will be available in my office and you are welcome to come review them, or read them in the paper.

On March 6, 2018 all of the Municipalities in Torrance County will be having their elections. The municipalities include Encino, Estancia, Moriarty, Mountainair, and Willard. Voting will take place at each of these city halls. In the municipal elections the Torrance County Clerk provides the voting machines, voting machine technicians, voter lists, and document their

absentee voters to help prepare their rosters for Election Day. For any information on your town elections you will need to contact your municipalities.

On November 20<sup>th</sup>, 2017 letters were sent out to the voters in precincts 9 & 10 in Mountainair to inform them of their change of precinct location. The changes are from the Mountainair High School Gym (precinct 10) and the Mountainair Catholic Center (precinct 9) to the Dr. Robert J. Saul Community Center.

On January 29<sup>th</sup>, 2018 the Governor will issue the Primary Election Proclamation. Anyone seeking office will not be able to change their party affiliation after this date and must run as the party they are registered as. If they wish to change their party affiliation it must be done before this date.

**2. Better Cabber Torrance County Assessor:** Ms. Cabber states that some of you may have received an email with this information but she would like to let everyone know that the opioid crisis workshops will be held in Albuquerque, NM on November 28<sup>th</sup>, 2017 in the morning and in the afternoon in Santa Fe, NM, and on December 5<sup>th</sup>, 2017 in Las Cruces, NM.

The next thing Ms. Cabber states is that the Special Method Evaluation Forms (the blue forms) are at the printer, they must be out by January 1<sup>st</sup>, 2018, but we are going to try to get them out by December 1<sup>st</sup>, 2017. These are the livestock forms for everyone that owns livestock must report to us by February 28<sup>th</sup>, 2018. Also business personal property everyone must report those as well. If they are depreciating with the IRS then they have to report their business personal property to us by the end of February. Ms. Cabber states that her office will be sending out a letter stating that the form the business owners will use to report the business personal property will be available on the assessor's website. If they don't have access to the internet then they can call the office and have a form sent to them.

Ms. Cabber states that she has also been attending the revenue and stabilization interim committee meetings in Santa Fe. The main talk is all about the budget. Ms. Cabber states she has attended a few of the legislative finance committee meetings as well. Ms. Cabber would like to remind everyone that if they go onto the state legislature sight you can access the committees and their agendas. The revenue and stabilization committee will be meeting again on December 20<sup>th</sup>, 2017 and also the legislative committee will be meeting December 4<sup>th</sup> & 5<sup>th</sup> 2017 in Santa Fe. You can watch these meetings on their websites, especially if you can't make it up to Santa Fe. It's a good idea to view these because they are talking about capital outlay, GRTs, property tax, pretty much anything that has to do with the budget. This upcoming 30 day session will be all about the budget. Commissioner Frost asks what the dates are for the Legislative Conference. Ms. Cabber states that it will begin on January 16<sup>th</sup>, 2018 and run for 30 days. Ms. Cabber states that the work on NM 41 is coming along well and they seem to be working very fast.

#### **d.) Commission**

**1.) Madam Commissioner DuCharme:** Madam Commissioner DuCharme states that last week she attended a workshop at the Mid-Region Council of Governments for the US Census in 2020. The people that are responsible for collecting that information have already begun to prepare for the census. The first step the county has to take is to sign up for the LUCA program

if they have not already done so. Madam Commissioner DuCharme ask Ms. Cabber if the county is currently part of this program. Ms. Garland replies that Ms. Ortiz and Mr. Gastelum from rural addressing are working on making sure that the county is meeting all the requirements for that program. Madam Commissioner DuCharme states that Ms. Ortiz also attended the meeting and they were provided with some information.

Madam Commissioner DuCharme would like to point out that the George Washington University in Washington, D.C. provided information that shows federal programs, 16 large federal assistance programs that distribute funds on basis of decennial census derived statistics. It shows total program obligation in fiscal year 2015 was \$6,197,394,617.00 that was \$2,972.00 per person. In this workshop it emphasized the county's interest to count every person in the county. The county's responsibility is to try and get the people to participate so that all the information will be accurate for the census. The county will just need to keep reminding the people to participate in the census. There will also be a website where people can go to enter their information if they do not want to deal with the in person people.

Madam Commissioner DuCharme states that she watched the recognition presentation and the interview and would like to state what amazing people we have in the county. They have great difficulties themselves and they put aside those difficulties in order to help other people. Madam Commissioner DuCharme would also like to state that in her opinion we need to slow down and reflect and we need to give more attention and care to people we love and she would like to wish everyone Happy Thanksgiving, Gobble Gobble.

**\*Commission Matters:**

**3.) Findings of Fact, Conclusions of Law Special Use District for Pacific Wind, LLC, La Joya & Lucia Projects**

Mr. Steve Guetschow Planning & Zoning states before you we have a draft that Mr. Wallin provided us with. As you recall back in May the Commission approved the Special Use to Pacific Wind, LLC for the La Joya and Lucia projects for their wind and solar farms. The document that you have before you is just a formality of the facts and conclusions of that action. With everything that has been going on we overlooked getting this done at an earlier date. Therefore I bring this to you today for your approval and signatures. Mr. Guetschow also states that he has included the section of the minutes where this was approved just to help refresh your memory.

Madam Commissioner DuCharme states that she was glad that the minutes from the meeting were included. **ACTION TAKEN:** Chairman Sanchez makes a motion to approve the Findings of Fact, Conclusions of Law Special Use District for Pacific Wind, LLC, La Joya & Lucia Projects. Madam Commissioner DuCharme seconds the motion. No further discussion, all Commissioners in favor. **MOTION CARRIED**

**4.) Review 2019-2013 Infrastructure Improvement Plan**

Ms. Garland states that she would like for Chief Gary to give an update on the Fire Station that is in need of improvements.

Lester Gary Torrance County Fire Chief states that they have had a well service company come out for the Sub-Fire Station, on 84 Galloway in District 5, to look at the well that has had some issues with for quite a while. The well is approximately 250 feet and has 10 feet of water. What the serviceman is going to attempt to do is get a bale and drop down in to the well and clean out some of the sand that's in there and see if he can get 2 more feet of water. Once that is complete he will check the casings, we are also going to get another pump and drop it down the well to see how much water it will actually provide. The serviceman is confident that it will produce water. They are just not sure of how much and how big of a pocket that is down there to hold the water. As it stands now we can get water to the station and can use the showers, the sinks, the toilet, etc. If it does not produce water, we will obtain a pressure tank to build up the pressure and see how that helps. Worst case scenario is we will have to obtain a 1000 gallon holding tank and we can fill that tank from the well and have that water available as well. The well is strictly for station use we don't use it to fill any of the equipment.

Madam Commissioner DuCharme asks how the project will be financed. Chief Gary replies that it will be funded by the fire protection fund, we have building fund money available, and since the project is not going to cost as much as we anticipated we can use the fire protection fund.

Chairman Sanchez states that this is currently placeholder 6 on the ICIP list, correct? Chief Gary replies yes it is. Chairman Sanchez asks if it is the County Managers office recommendation to remove this project from the list. Ms. Garland states, no they are not ready to completely remove it from the list. In case something happens its will be good for it to still be on the list.

Ms. Garland would like to give a brief explanation of this list. Ms. Garland states that they recently moved up the deadline for the list. She was not aware until recently that the legislatures are only going to be looking at the top 5 projects on the list. Next year we are looking at having a better list. Chairman Sanchez was wanting us to revisit this list to adjust the order of the projects and their importance, so that way we can let the legislatures know what projects we would like for them to look at during the legislative session.

Last week Ms. Garland, Chief Gary, and Chairman Sanchez met with Mayor Garcia of Vaughn, NM Nazim Hindi & Leonard Villanueva from the town of Vaughn and Duran, NM to look at a new water system for the town. It was requested by Mr. Garcia that the two fire stations and the fill station have meters put on the water valves so that water usage can be accounted for. They really don't want a well drilled for Duran as Vaughn is ok with supplying water to Duran. What they are requesting is that an emergency plan be put in place in the event the water system fails. Ms. Garland states that there are two 40,000 gallon water tanks for the town of Duran out on a ranch northwest of town. If we for any reason they feel they would need water it would be difficult to get up there during severe weather conditions. We may want to look at contacting some engineers to place a new holding tank in town that way in the event we have to haul water in we can place it in this tank. When we did this list were thinking we needed to drill a well for the town but that is not the case and this project would not be shovel ready by the time the session come around.



Commissioner Frost states that for many year the Duran water system has been in jeopardy due to leaks etc. Based on his knowledge, that issue has seemed to have been resolved. His thoughts now are about the holding tanks. Could the tank be placed in Duran? Could it be filled with the existing water line and used in an emergency? Ms. Garland states that a tank must be approved for human consumption. If we fill that tank with the water that we have stored from the two tanks at the ranch and keep the water circulating and test it often it can be used for human consumption. There is discussion back and forth concerning the Duran water system. It is decided that item #2 on the list is not shovel ready and we will need to inform the legislatures about this and maybe we can move it back up to the top of the list next year.

Madam Commissioner DuCharme asks Chief Gary that when the 2 Senators were here at the last commission meeting she mentioned 2 other projects within the Fire Department. One is the mold in the District 3 bathrooms and the lack of special washing machines to wash the equipment. Can we request money for that? Chief Gary states that yes we can request money be put in place for that. We did find that we do have 1 extractor at district 2, Indian Hills fire station. So what we have done is that when the equipment is ready for cleaning the departments take the equipment there for cleaning. We are also still addressing the mold situation at the district 3 Fire Department. Madam Commissioner Ducharme says the Senators stated that they would like to fund immediately, not in stages. Madam Commissioner DuCharme states these would be great projects to request money for.

Chairman Sanchez states that he requested about is \$240,000.00 for this project, would we be getting that amount? Ms. Garland states that no we most likely will not get that amount, but what we can do is have Chief Gary get a couple of bids on this to see what the actual cost will be before we go to the session.

Madam Commissioner Ducharme states that the Sheriff's Department needs a new vehicle every year because of the amount of miles they put on them. She thinks this item should stay in the position of where it is at. Chairman Sanchez agrees with this in light of the current transport situation. It would be great to request money for a couple of vehicles to offset the cost of the transport. We should leave this item in this position since there is an immediate need for this.

Chairman Sanchez states that the Duran and McIntosh water issues should be moved to a lower position and we need to concentrate more on issues that are most needed. One item that needs to be moved up is the senior center equipment. We are currently asking for \$250,000.00 maybe we could amend this amount and ask for a little bit less. Maybe if we request less money for the projects we will have a better chance at getting them funded. Maybe ask for 2 vehicles that may cost about \$80,000.00 instead of asking for the full \$250,000.00. Try to make the amounts more feasible.

Commissioner Frost states that the common term for the ICIP is "Wish List." We have already seen in the past couple of years that our wishes have not been fulfilled at all. We have been told that there will be some money available but we are unaware of how much. We should inform the senators that Duran is not a necessity and advise them of our needs. The mold situation at the fire station is really important and the amount is so small that it does have a possibility of getting funded. The county Road improvements are something that will benefit everyone in the county and that is something that the legislatures will look at when they are

funding these projects. The Road Improvements and Sheriff's vehicles are really number 1 since they do benefit everyone.

Chairman Sanchez states that a project he would like to see funded, taking into account that the legislatures would like to see shovel ready projects, would be the Torreon Acequia Revitalization project. There has already been some funding put into this project as well as local fundraisers for this. The amount that is requested is relatively small compared to a lot of the other projects. This project is also shovel ready. I encourage you to move this project into the top 5 of the list.

**ACTION TAKEN:** Chairman Sanchez makes a motion to include in the top 5 of the ICIP the County Road Improvements with an adjusted amount, the Senior Center vehicles with an adjusted amount, the Sheriff's vehicle with an adjusted amount, the Fire Department renovations with an adjusted amount, and the Torreon Acequia Revitalization Project. Madam Commissioner DuCharme seconds the motion. Ms. Ortiz asks if this will be the final ranking for the projects.

Commissioner Frost asks Ms. Garland if there has been any other talk of another source when it comes to obtaining the vehicles for the senior center. Ms. Garland replies, no, she doesn't have anything concrete for this right now. Ms. Garland is working on it, and there can be other options, but there is nothing for sure. We have the funding for the zipper since it was already approved in the budget. If we can get money for that then we can use that money for something else, so maybe out the road improvements can be placed as number 5 on our list.

The rankings would be: 1.) Sheriffs Vehicles, 2.) Fire Department Renovations, 3.) Senior Citizens 4.) Torreon Acequia Revitalization Project, and 5.) County Road Improvements. No further discussion, all Commissioners in favor. **MOTION CARRIED**

**a.) Resolution 2017-059 Adoption of 2019-2023 ICIP**

**ACTION TAKEN:** Chairman Sanchez makes a motion to approve Resolution 2017-59 Adoption for 2019-2023 ICIP. Madam Commissioner DuCharme seconds the motion. No further discussion, all Commissioners in favor. **MOTION CARRIED**

**\*County Manager Requests/Reports**

**5.) Update**

County Manager Belinda Garland gives her update from what she has done the past few weeks. On Monday November 13<sup>th</sup>, 2017 she attended the hearing to dismiss the law suit against Wallin law Firm and Torrance County from Linda Filippi for an IPRA request. On Tuesday November 14<sup>th</sup>, 2017 she asked Deputy County Manager Annette Ortiz to attend the census workshop. Ms. Ortiz & Mr. Gastelum are working to make sure the county is meeting our requirements. On that same day a representative from Triadic was present to help with any questions regarding processing payroll.

On Wednesday November 15<sup>th</sup>, 2017 Ms. Garland and Chairman Sanchez met with Chief Gary, several representatives from Duran, and the Mayor of Vaughn to talk about the water system. On this same day the Finance Department met with representatives from Albuquerque Image to review proposals for new copy machines for the Road Department, Finance Department and Managers Office.

On Thursday November 16<sup>th</sup>, 2017 Ms. Garland met with Andy Miller from EVSWA to go over the letters that will be going out concerning the new changes to fees. There were a few changes to clarify the process for billing and low income. On Monday November 29<sup>th</sup> Ms. Garland attended a Juvenile Justice Board meeting. There will be an open house from 1:30 to 4:00 pm for the newly remodeled RAC which houses the mock trials for the Teen Court.

Other things Ms. Garland has been working on is a lease agreement with T-Mobile for a tower at dispatch and an MOU with the town of Estancia for emergency animal services. Also Ms. Garland is currently working with the Aging and Long Term Department to finalize paperwork to purchase equipment for Meals on Wheels for the Senior Centers.

Interviews for the HR position will be held on Monday November 27<sup>th</sup>, 2017, and also Ms. Garland was asked to be a representative for the MRCOG review of the CEDS. The meeting for this will be November 30<sup>th</sup>, 2017 at the MRCOG conference room. **UPDATE ONLY NO ACTION TAKEN, complete update hereto attached.**

Annette Ortiz Deputy County Manager states that she would like to impress upon the leadership, not just within the County, but in the towns, villages, and municipalities that we really need to register for the LUCA program. The entire county needs to be registered as a whole not just us. Everyone needs to get with their leadership and make sure that they get registered by December 15<sup>th</sup>, 2017. The road viewing committee will be out on December 1<sup>st</sup>, 2017 at 10:00 a.m. to discuss the 7/10 closure of Marty Road. **UPDATE ONLY NO ACTION TAKEN**

### *Public Comment/Requests*

1.) Michael Godey stated that the last time he gave his public comment he gave the dates wrong for the open house for the learning center in Mountainair. Mr. Godey did email the commissioner and Ms. Cabber to give them the correct information. The open house was last Wednesday and would like to thank Madam Commissioner DuCharme for showing up and the questions that were asked were very informative, again thank you.

**ADJOURNMENT**

**ACTION TAKEN:** Chairman Sanchez makes a motion to adjourn the November 22<sup>nd</sup>, 2017 Regular Commission Meeting. Commissioner Frost seconds the motion. No further discussion, all Commissioners in favor. **MOTION CARRIED.**

**Meeting adjourned at 10:15 a.m.**

\_\_\_\_\_  
Chairman Javier Sanchez

\_\_\_\_\_  
Yvonne Otero-Administrative Assistant

\_\_\_\_\_  
Date

**The video of this meeting can be viewed in its entirety on the Torrance County NM website, Audio discs of this meeting can be purchased in the Torrance County Clerk's office and the audio of this meeting will be aired on our local radio station KXNM.**



*Consent Agenda*

C E R T I F I C A T I O N

TOTAL CHECKS PRINTED 123

THE UNDERSIGNED MEMBERS OF THE TORRANCE COUNTY BOARD OF COMMISSIONERS DO CERTIFY THAT THE CLAIMS ENUMERATED ABOVE WERE APPROVED ALLOWED & DO AUTHORIZE THE WARRANTS AGAINST THE FUNDS OF TORRANCE COUNTY FOR THE SUM OF 411,342.47 ON ACCOUNT OF OBLIGATIONS INCURRED FOR THE SERVICES AS SHOWN ABOVE FOR THE PERIOD ENDING 12/07/2017 . WE CERTIFY THAT THE WITHIN NAMED PERSONS ARE LEGALLY ENTITLED UNDER THE CONSTITUTION OF THE STATUTES OF NEW MEXICO TO RECEIVE THE COMPENSATION STATED HEREIN. THAT THE SERVICES HAVE BEEN PERFORMED AS STATED IN THE ACCOUNTS HEREBIN, THAT THEY ARE NECESSARY AND PROPER, THAT THIS VOUCHER HAS BEEN EXAMINED, THAT THE AMOUNTS CLAIMED ARE JUST, REASONABLE, AND AS AGREED AND THAT NO PART HAS BEEN PAID BY TORRANCE COUNTY.

SIGNED

ATTEST BY

-----  
James W. Frost

-----  
Javier Sanchez

-----  
Julia Ducharme

-----  
Linda Jaramillo

THE UNDERSIGNED COUNTY TREASURER DOES HEREBY CERTIFY THAT SUFFICIENT FUNDS EXIST FOR THESE ACCOUNTS PAYABLE CHECKS TO BE ISSUED ON THIS DATE AND DOES HEREBY AUTHORIZE THE FINANCE DEPARTMENT TO PROCESS THESE CHECKS.

-----  
Tracy L. Sedillo

KW

CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	AMOUNT
01 R	102034	LUCERO, LUCIA	TEEN COURT SERVICES	605-02-2272	1112117	11/21/2017	31716	640.50
			NOVEMBER 1-15, 2017					31716
	11/21/2017							

DWI LOCAL GRANT FY18 640.50

01 R	102035	WEX FLEET UNIVERSAL		401-08-2202	2112117	11/21/2017		26.00
				401-15-2202		/ /		226.14
				612-20-2205		/ /		29.66
				401-30-2202		/ /		126.09
				610-40-2202		/ /		101.85
				401-50-2202		/ /		5859.07
				420-74-2202		/ /		2161.76
				405-91-2202		/ /		478.72
				406-91-2202		/ /		151.90
				407-91-2202		/ /		62.99
				408-91-2202		/ /		207.68
				413-91-2202		/ /		684.75
				418-91-2202		/ /		99.59
				420-73-2202		/ /		26.10
				604-83-2202		/ /		79.65
				605-02-2202		/ /		33.46
				685-08-2202		/ /		80.42
				690-09-2202		/ /		41.38
				911-80-2202		/ /		121.30
				625-49-2202		/ /		15.95

PLANNING & ZONING	106.42	ADMINISTRATIVE OFFICES	226.14	COUNTY CLERK				29.66
COUNTY TREASURER	126.09	COUNTY ASSESSOR	101.85	COUNTY SHERIFF				5869.07
TRANSPORTATION OF PRIS	2161.76	STATE FIRE ALLOTMENT	1685.63	COMMUNITY MONITORING				26.10
COMMUNICATIONS/EMS TRX	79.65	DWI LOCAL GRANT FY18	33.46	HIGH LONDSOME WIND PTL				41.38
911-DISPATCH CENTER	121.30	HOME VISITING GRANT FY	15.95					

01 O	102066	AIRGAS USA LLC	INVT# 9948977189 RENTAL FEE	405-91-2230	1112917	11/29/2017		117.93
			INVT# 9949030698	408-91-2230		/ /		136.36
			INVT# 9949161111	405-91-2230		/ /		375.15
			INVT# 9949161111	408-91-2230		/ /		375.15
			INVT# 9949161111	405-91-2230		/ /		375.15

STATE FIRE ALLOTMENT 1379.74

01 O	102067	ALBUQUERQUE OFFICE SYSTEMS	1 - OFFICE FURNITURE	610-40-2617	2112917	11/29/2017		31795
			COMPLETE OFFICE SYSTEM FOR					31795
			B. CABBER NEW OFFICE					31795

COUNTY ASSESSOR 2467.01

01 O	102068	AUTOZONE INC.	BATTERIES, WIPER BLADES, WASHER	401-50-2201	3112917	11/29/2017		31225
			FLUID, OTHER VEHICLE MAINTENANCE	420-74-2201		/ /		31225
			NEEDS			/ /		31225
			SEPTEMBER 2017					31225

COUNTY SHERIFF 513.65

01 O	102069	AUTOZONE INC.	BATTERIES, WIPER BLADES, WASHER	401-50-2201	4112917	11/29/2017		31226
			FLUID, OTHER VEHICLE MAINTENANCE	420-74-2201		/ /		31226
			NEEDS			/ /		31226
			OCTOBER 2017					31226

COUNTY SHERIFF 303.16

TRANSPORTATION OF PRIS 303.16







CK#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
			VEHICLE MAINTENANCE					
			OCTOBER 2017					
			RADIATOR (STOCUM DODGE)	401-50-2201	26112917	11/29/2017	31220	31220
			DRIVER SIDE DOOR (TRANSPORT VAN)	420-74-2201	/	/	31784	275.00
			MOTOR AND LABOR	401-50-2201	27112917	11/29/2017	31802	800.00
			COBB DODGE				31802	4800.00
			MOTOR, LABOR, PARTS	401-50-2201	28112917	11/29/2017	31803	31802
			2017 CHEVY SILVERADO				31803	9665.74
			DEPUTY FORNEMTO				31803	31803

COUNTY SHERIFF	16884.74	TRANSPORTATION OF PRIS	800.00					
01 O 102084	ESTANCLIA PUBLIC SCHOOLS	46% OF \$325,000 PILOT PAYMENT	641-09-2410		29112917	11/29/2017		149500.00
149500.00								
11/30/2017								

HIGH JONESOME WIND PII149500.00								
01 O 102085	G & K SERVICES	MATS, MOPS, ETC. ADMIN	401-15-2237		30112917	11/29/2017		805.72
1613.77		MATS, MOPS, ETC JUDICIAL	401-16-2237		/	/		808.05
11/30/2017		OCTOBER, 2017						

ADMINISTRATIVE OFFICES	805.72	JUDICIAL COMPLEX MAINT	808.05					
01 O 102086	GILDS LLC	1 - BENCHMADE ADAMERS AUTO KNIFE	410-50-2222		31112917	11/29/2017	31761	1018.00
1018.00		4 - SHERIFF SALTERY VEST					31761	31761
11/30/2017		(REGULAR)					31761	31761
		2 - SHERIFF SALTERY VEST (2X-4X)					31761	31761
		5 - DYNA MED COMPACT MEDIC FIRST RESPONDER KIT					31761	31761

COUNTY SHERIFF	1018.00							
01 O 102087	GUSTIN HARDWARE INC.	5 - U BENT FLOORSCHENT LIGHT TUBE	911-80-2215		32112917	11/29/2017	31809	99.95
99.95								
11/30/2017								

911-DISPATCH CENTER	99.95							
01 O 102088	HART'S TRUSTWORTHY HARDWARE	2 - 4 PACK 60W CFL LIGHT BULBS	911-80-2219		33112917	11/29/2017	31808	19.98
769.36		NOTS, BOLTS, SCREWS, KEYS, LOCKS	401-50-2218		34112917	11/29/2017	31232	749.38
11/30/2017		HARDWARE FOR S.O.					31232	31232
		OCTOBER 2017					31232	31232

911-DISPATCH CENTER	19.98	COUNTY SHERIFF	749.38					
01 O 102089	HERRANDEZ, KATHRYN	2018-2019 IGD BDDGET CONFERENCE	401-55-2205		35112917	11/29/2017		32.61
32.61		RETURN PERDITEM						
11/30/2017								

FINANCE DEPARTMENT	32.61							
01 R 102090	HONSTEIN OIL CO.	MONTH 10-17 TCRROAD	402-60-2202		36112917	11/29/2017		9744.19
11744.26		FUEL						
11/30/2017		INV# ZZZ2219 RCT# TCSAS	610-40-2202		37112917	11/29/2017		68.19
		FUEL 11/1-15/2017						
		INV# ZZZ2218 RCT# TCSHER	401-50-2202		38111917	11/29/2017		865.52
		FUEL 10/16-31/2017						
		INV#ZZ2217 ACC# 3864	401-50-2202		39112917	11/29/2017		861.45
		FUEL 10/1-15/2017						

CK#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
			INV# ZZZ218 TCEMER	604-83-2202	40112917	11/29/2017		45.29
			FUEL 10/16-31/2017					
			INV# ZZZ219 TCFURAL	675-07-2202	41112917	11/29/2017		44.62
			FUEL 11/1/17-11/15/17					
			INV# ZZZ219 TCFPLAZO	685-08-2202	42112917	11/29/2017		115.00
			FUEL 11/1-15/2017					

COUNTY ROAD DEPARTMENT	9744.19	COUNTY ASSESSOR	68.19	COUNTY SHERIFF	1726.97
COMMUNICATIONS/EMS TRX	45.29	RURAL ADDRESSING	44.62	PLANNING & ZONING	115.00
01 O 102091	IAP0	2018 IAP0 MEMBERSHIP	10159035	610-40-2269	
11/30/2017					43112917 11/29/2017
					210.00

COUNTY ASSESSOR	210.00				
01 O 102092	INDEPENDENT DRUG TESTING	INV#4346 ACCT# 05580000	420-73-2272		44112917 11/29/2017
11/30/2017					77.40

COMMUNITY MONITORING	77.40				
01 O 102093	IRON MOUNTAIN RECORDS MANAGEMENT/MONTHLY STORAGE FOR MICROFILM		612-20-2203		45112917 11/29/2017
11/30/2017					31347
					85.17

COUNTY CLERK	85.17				
01 O 102094	JASAPILLO, LINDA	ELECTION SOFTWARE TRAINING	401-21-2205		46112917 11/29/2017
11/30/2017		RETURN PERDIEM			
					60.00

ELECTIONS	60.00				
01 O 102095	KAYSER, LINDA	ELECTION SOFTWARE TRAINING	401-21-2205		47112917 11/29/2017
11/30/2017		RETURN PERDIEM			
					60.00

ELECTIONS	60.00				
01 O 102096	KILLBREW, KAYDANCE	OTD RODEO PAYOUT-GOATS	412-53-2235		48112917 11/29/2017
11/30/2017					
					7.50

COUNTY FAIR	7.50				
01 O 102097	LAKIP-H STRATEGIC MANAGEMENT COMNT# 2017-0001	JTB CONSULTANT	635-68-2272		49112917 11/29/2017
11/30/2017		1ST HALF GRANT WRITING GFYD	635-68-2272		50112917 11/29/2017
					1624.73

CYFD JUVENILE JUSTICE	3736.88				
01 O 102098	LOVEFACE HEALTH SYSTEM INC	INDIGENT MEDICAL CLAIM # 1931	414-19-2293		85112917 11/30/2017
11/30/2017		GUARANTOR # 374748			
		STATEMENT # 33320 9/28/2017			
					1478.58

2ND 1/8 GROSS RECEIPTS	1478.58				
01 O 102099	MARLIN BUSINESS BANK	INV# 15449683 ACCT# 1489142	612-20-2203		51112917 11/29/2017
		LEASE PAYMENT SCAN PRO 1100			
					266.36

CHK#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	AMOUNT
11/30/2017								
COUNTY CLERK								266.36
01 0 102100		MENDEZ, DEVON	OTD RODO PAYOUT POLES	412-53-2235	52112917	11/29/2017		6.00
11/30/2017								6.00

COUNTY PAIR	AMOUNT
COUNTY PAIR	6.00
01 0 102101	400.00
11/30/2017	

01 0 102102	1919.76	11/30/2017	INVTVA INC	INV#R003581	ACT# 2029540	610-40-2207	54112917	11/29/2017	351.52
						401-20-2207	/	/	189.28
						401-10-2207	/	/	135.20
						401-55-2207	/	/	81.12
						401-15-2207	/	/	54.08
						401-27-2207	/	/	27.04
						401-05-2207	/	/	54.08
						401-08-2207	/	/	54.08
						685-08-2207	/	/	27.04
						605-22-2207	/	/	53.89
						401-65-2207	/	/	27.04
						403-60-2207	/	/	54.08
						401-90-2207	/	/	27.04
						675-07-2207	/	/	27.04
						401-50-2207	/	/	275.75
						420-73-2207	/	/	27.04
						401-30-2207	/	/	216.32
						690-86-2207	/	/	51.46
						629-52-2207	/	/	51.46
						401-05-2207	/	/	108.16
						604-83-2207	/	/	27.04

COUNTY ASSESSOR	351.52	COUNTY CLERK	189.28	COUNTY MANAGER	135.20
FINANCE DEPARTMENT	81.12	ADMINISTRATIVE OFFICES	54.08	PURCHASING DEPARTMENT	27.04
COUNTY COMMISSION	162.24	PLANNING & ZONING	81.12	DWT LOCAL GRANT FY17	53.89
INFORMATION TECHNOLOGY	27.04	COUNTY ROAD DEPARTMENT	54.08	PROBATE JUDGE	27.04
RURAL ADDRESSING	27.04	COUNTY SHERIFF	275.75	COMMUNITY MONITORING	27.04
COUNTY TREASURER	216.32	DV CONTRACT FY18	51.46	HOME VISITING GRANT FY	51.46
COMMUNICATIONS/EMS TAX	27.04				

01 0 102103	1800.00	11/30/2017	NM EDGE	8 - NM EDGE CREDITS	401-10-2266	55112917	11/29/2017	31823	400.00
				4 - NM EDGE CREDITS	401-20-2266	/	/	31823	200.00
				12 - NM EDGE CREDITS	401-30-2266	/	/	31823	600.00
				8 - NM EDGE CREDITS	401-55-2266	/	/	31823	400.00
				4 - NM EDGE CREDITS	610-40-2266	/	/	31823	200.00

COUNTY MANAGER	400.00	COUNTY CLERK	200.00	COUNTY TREASURER	600.00				
FINANCE DEPARTMENT	400.00	COUNTY ASSESSOR	200.00						
01 0 102104	310.00	11/30/2017	NM MUNICIPAL LEAGUE	2 - MUNICIPAL ELECTION SCHOOL	612-20-2266	56112917	11/29/2017	31674	310.00

COUNTY CLERK	310.00
COUNTY CLERK	310.00

CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
01 O	102105	NM SHERIFFS ASSOCIATION	2 - ANNUAL MEMBERSHIP DUES/FEES	401-50-2269	57112917	11/29/2017	31783	320.00
			H. WHITE, M. RIVERA				31783	
	11/30/2017							

CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
01 R	102106	ORTIZ, JENNA R	CONTINUUM COORDINATOR	635-68-2272	58112917	11/29/2017		3166.66
	11/30/2017		GRT NOV-2017					

CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
01 O	102107	PRESBYTERIAN HEALTHCARE SERVICES	EMERGENT MEDICAL CLAIM #1931	414-19-2293	84112917	11/30/2017		200.00
	11/30/2017		GUARANTOR NUMBER 1134439 B.L.M					

CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
01 O	102108	PRESBYTERIAN MEDICAL SERVICES	INV# 102017 OCT 2017	616-18-2272	59112917	11/29/2017		5508.36
	11/30/2017		INV# 92017 NOV 2017	616-18-2272				5508.36
			RPRCA CONTRACT DAILY OPERATIONS					

CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
01 O	102109	WEST CORPORATION	ACCT# NS05-832-0012 749M	420-70-2207	60112917	11/29/2017		273.59
	11/30/2017		505-384-1277 037E	401-50-2207				32.53
			505-384-4362 899B	401-40-2207				112.65
			505-384-1067 935B	413-91-2207				204.80
			505-384-2810 154B/	832-4911 598B 408-91-2207				290.50

CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
01 O	102110	RENNY, WARREN T	MONTHLY MAINT. (NOVEMBER)	911-80-2203	61112917	11/29/2017		360.00
	11/30/2017							

CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
01 R	102111	RICH FORD SALES	2009 FORD ESCAPE	401-05-2201	62112917	11/29/2017		31579
	11/30/2017		OIL CHANGE					31579

CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
01 O	102112	RICOH USA, INC	INV#99702694-80569-10160 34A11	610-40-2203	63112917	11/29/2017		467.85
	11/30/2017		COPIER LEASE OCT-2017					

CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
01 O	102113	RICOH USA, INC	REPLACES PO 28393	610-40-2203	64112917	11/29/2017		57.48
	11/30/2017		RICOH MPCW20SP WIDE FORMAT	675-07-2203				31290

CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
01 O	102114	RICOH USA, INC	REPLACES PO 29850	402-60-2203	65112917	11/29/2017		31279
	11/30/2017							

CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
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COUNTY ROAD DEPARTMENT 72.18								
01 O	102115	RICOH USA, INC	REPLACES POW30551	401-05-2203	6112917	11/29/2017		31640 414.60
11/30/2017								

COUNTY COMMISSION 414.60								
01 R	102116	SAFETY FLASH INC.	B456 101B ABC FIRE EXTINGUISHER	401-16-2215	67112917	11/29/2017		31789 72.75
			4A-80BC					31789
11/30/2017 JUDICIAL COMPLEX 31789								

JUDICIAL COMPLEX MAINT 72.75								
01 O	102117	SANTA FE COUNTY CORRECTIONS DEPTOR	10-2017	420-72-2172	68112917	11/29/2017		5735.00
11/30/2017 JUVENILE INMATE CARE								

JUVENILE INMATE CARE 5735.00								
01 O	102118	SF. VINCENT HOSPITAL	INMATE MEDICAL	420-70-2173	70112917	11/29/2017		3926.23
11/30/2017								

ADULT INMATE CARE 3926.23								
01 O	102119	STAPLES BUSINESS ADVANTAGE	1" BINDERS, 3" BINDERS, AVERY	401-10-2219	71112917	11/29/2017		31806 231.05
			11447 DIVIDER LABELS, POST-ITS,					31806
			KLEENEX, DIVIDERS, BLUE PENS,					31806
			BLACK PENS, PENCILS, CLOROX					31806
11/30/2017 WIPES, HIGHLIGHTERS, SHARPIE PEN 31806								

COUNTY MANAGER 231.05								
01 O	102120	STAPLES BUSINESS ADVANTAGE	1 - HP ENVY ALL-IN-ONE PRINTER	401-50-2219	72112917	11/29/2017		31642 1310.85
			2 - WIRELESS MOUSE					31642
			1 - SLIM KEYBOARD					31642
			2 - GLASS SCREEN PROTECTOR					31642
			1 - SURFACE PRO 4 (7TH GEN)					31642
			2 - PRINTER INK					31642
			4 - HD CAR DASH CAMERA					31642
11/30/2017 SPECIAL INVESTIGATION UNIT 31642								

COUNTY SHERIFF 1310.85								
01 O	102121	STAPLES BUSINESS ADVANTAGE	AAA BATTERIES, AA BATTERIES, DVD	401-50-2219	73112917	11/29/2017		31749 887.50
			100/PK; CD 100/PK; BLACK PENS,					31749
			PLASTIC ENVELOPES; DSK					31749
			ORGANIZERS; 1TB EXTERNAL HARD					31749
			DRIVE; BLUE PENS; MANILLA					31749
			ENVELOPES; MANILLA FILES; COPY					31749
			PAPER; TRANSPARENCY PAPER;					31749
11/30/2017 ELECTRONIC SIGNATURE PAD 31749								

COUNTY SHERIFF 887.50								
01 O	102122	STAPLES BUSINESS ADVANTAGE	8 - UNIVERSAL LAP TOP ADAPTERS	401-50-2222	74112917	11/29/2017		31667 885.55
			8 - USB PORT EXTENSIONS					31667
11/30/2017 885.55								

CHK#	DATE	NAME	Description	Line Item	Invoice #	DATE	PO #	Amount
11/30/2017			1 - PORTABLE PROJECTOR (SIU) DEPUTY LAPTOPS				31667 31667	

COUNTY SHERIFF 885.55								
01 O	102123	STAPLES BUSINESS ADVANTAGE	MOP, MOP HANDLE, TONER, BATTERIES, PENS, SHARPIES, SHEET PROTECTORS, BINDERS, COPY PAPER, DIVIDERS, TZE LABEL MAKER TAPE	408-91-2219	75112917	11/29/2017	31743 31743 31743	530.99
11/30/2017	530.99							

STATE FIRE ALLIEMENT 530.99								
01 O	102124	STAPLES BUSINESS ADVANTAGE	2 - 24 PACK AA BATTERIES FOR USE IN THE SCBA'S	405-91-2248	76112917	11/29/2017	31773 31773	32.14
11/30/2017	32.14							

STATE FIRE ALLIEMENT 32.14								
01 O	102125	STAPLES BUSINESS ADVANTAGE	3 - COBRA DASH CAMERAS 1 - 7B EXTERNAL HARD DRIVE 1 - DEPENDER SECURITY SYSTEM 2 - COMPUTER ADAPTER 1 - HP PROBOOK LAPTOP (S DUNLAP)	401-50-2219	77112917	/	31515 31515 31515 31515 31515	1362.85
11/30/2017	1362.85							

COUNTY SHERIFF 1362.85								
01 O	102126	TEMPORIO, AMANDA	2018-2019 LGD BUDGET CONFERENCE RETURN PERDIEW	401-55-2205	78112917	11/29/2017		32.62
11/30/2017	32.62							

FINANCE DEPARTMENT 32.62								
01 R	102127	TRICORE REFERENCE LAB	INDIGENT MEDICAL CLAIM # 1931 ACCOUNT # 2971371000	414-19-2293	86112917	11/30/2017		321.42
11/30/2017	321.42							

2ND 1/8 GROSS RECEIPTS 321.42								
01 O	102128	UNIVERSITY OF NM HOSPITALS	INMATE MEDICAL INMATE MEDICAL	420-70-2173 420-70-2173	79112917 80112917	11/29/2017 11/29/2017		98.00 128.00
11/30/2017	226.00							

ADDIAT INMATE CARE 226.00								
01 O	102129	VERIZON WIRELESS	INV# 979598558 242016457-000001	401-50-2207	81112917	11/29/2017		246.72
11/30/2017	246.72							

COUNTY SHERIFF 246.72								
01 O	102130	WARE, SIDNEY K	INV#122 18-690-14488 CASE MANAGEMENT NOV.2017 GIRLS CIRCLE/BOYS COUNCIL FOLLOW UP (33) YOUTH	635-68-2272	82112917	11/29/2017		3865.00
11/30/2017	3865.00							

CYFD JUVENILE JUSTICE 3865.00								
01 O	102131	ZABRUD, IZBAH J.	INV# Y1-2018 RCT# 187697 YOUTH STEPEND 10/20/2017 JOB MEETING	635-68-2272	83112917	11/29/2017		25.00
11/30/2017	25.00							

CK#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
			CYED JUVENILE JUSTICE					25.00
01 0	102132	ARCOM/DRS CORPORATION	SERVICE OF OFFICE PERSONNEL	604-83-2272	12517	12/06/2017		5127.88
			INVOICE # 37965845					
	12/07/2017							

COMMUNICATIONS/EMS TRX 5127.88

01 0	102133	ALBUQUERQUE OFFICE SYSTEMS	3 - OFFICE CHAIRS	610-40-2617	212617	12/06/2017		31842
			STACKING CHAIRS W/WHEELS AND					31842
			LIMBAR SUPPORT					31842
			B. CABBER'S NEW OFFICE					31842
			INVOICE # 6452					
	12/07/2017							

COUNTY ASSESSOR 498.50

01 0	102134	ARAGON, TITANIUM	HOME VISITING IN TORRANCE COUNTY	629-49-2205	312617	12/06/2017		85.50
			MEETINGS IN ALBUQUERQUE					
			NOVEMBER, 2017					
	12/07/2017							

HOME VISITING GRANT FY 85.50

01 0	102135	ARTESIA FIRE EQUIPMENT INC	1 - ACTION COUPLING M/N ABS-1+60	408-91-2248	412617	12/06/2017		31554
			6" BASKET STRAINER NST					31554
			THREADS;					31554
			16 - FIRE HOSE, 3"X50' DOUBLE					31554
			JACKET, 800 PSI WHITE,					31554
			COUPLER 2.5" NST;					31554
			8 - POLY FLOW 800, POLYESTER					31554
			DOUBLE JACKET W/POLYURETHANE					31554
			INNER LINER, COUPLER 1 1/2"					31554
			NST ALUMINUM, PLAIN WHITE;					31554
			2 - 1.5" TURBO-JET NOZZLE WITH					31554
			PISTOL GRIP;					31554
			1 - 1.5" TURBO-JET NOZZLE WITH					31554
			PISTOLE GRIP. GPM 100 PSI;					31554
			1 - SOUTH PARK 1.5" QUC-LOC					31554
			MOUNTING PLATE;					31554
			1 - AXIAL PLAYPIECE W/STACKED					31554
			TIPS AND 2 1/2" BASE;					31554
			1 - 2.5" QUC-LOC MOUNTING PLATE					31554
			1 - COUNCIL FLATHEAD AXE WITH					31554
			FIBERGLASS HANDLE, 6 LB;					31554
			1 - SOUTH PARK AXE BLADE BRACKET					31554
			1 - SOUTH PARK AXE HANDLE					31554
			BRACKETS FOR SIDE MOUNTING;					31554
			1 - NIJPA SUPER DUTY 6 FT.					31554
			I-BEAM PIKE POLE W/BUTT GRIP					31554
			1 - SOUTH PARK PIKE POLE BRACKET					31554
			1 1/2" O.D. POLE, SIDE MOUNT					31554
			ZINC, W/GASKET;					31554
			1 - PIKE POLE RING, CHROME					31554
			PLATED ZINC, W/GASKET;					31554
			1 - 10' PKE POLE, SUPER DUTY					31554



CR# DATE Name

Description Line Item

Invoice # DATE

PO # Amount

CLASSIC W/I-BEAM, BUTT GRIP;							
1 - SOUTH PARK FIRE POLE BRACKET						31554	
1 1/2" O.D. POLE SIDE MOUNT,						31554	
ZINC, W/GASKET;						31554	
1 - PIKE POLE RING, CHROME						31554	
PLATED ZINC, W/GASKET;						31554	
2 - FIREBOX, VEHICLE MOUNT						31554	
SYSTEM, 8 WSS, ORANGE,						31554	
W/BLUE TAIL LIGHT LED'S;						31554	
1 - 10# ABC AMEREX FIRE EXT.						31554	
W/BRASS VALVE;						31554	
1 - HEAVY DUTY VEHICLE BRACKET;						31554	
1 - AMEREX 2.5 GALLON WATER TYPE						31554	
TYPE FIRE EXTINGUISHER;						31554	
1 - AMEREX HD VEHICLE BRACKET;						31554	
4 - ZIMATIC SCBA BRACKET;						31554	
1 - 10-UNIT/10-PEOPLE FIRST-AID						31554	
KIT, STEEL CASE;						31554	
2 - SOUTH PARK WRENCH SETS;						31554	
1 - REDHEAD 2.5" P NX X 2.5"						31554	
P NH DOUBLE FEMALE SWIVEL						31554	
ROCKERPLUG ADAPTER;						31554	
1 - REDHEAD 2.5" M NH X 2.5"						31554	
M NH DOUBLE MALE RIGID						31554	
ROCKERPLUG ADAPTER;						31554	
1 - SOUTH PARK 2.5" QUIC-LOC						31554	
MOUNTING PLATE;						31554	
1 - NUTPA RM2 RUBBER Mallet;						31554	
1 - PIKE POLE RING, CHROME						31554	
PLATED ZINC, W/GASKET;						31554	
2 - HUSKY PORTABLE, SALVAGE						31554	
COVER, VINYL MATERIAL;						31554	
2 - CHOC FOR UP TO 44" DIAM						31554	
DIAMETER W/EASY GRIP HANDLE;						31554	
2 - CHOC HOLDER, HORIZONTAL;						31554	
4 - MESH OPEN SIDED GOR-GRAIN						31554	
VEST, VELCRO, 5-POINT BREAK-						31554	
AWAY LIMB YELLOW. SIZE:						31554	
REGULAR;						31554	
1 - 28" SAFETY CONE 5-PACK KIT;						31554	
1 - POWERFLARE LANDING ZONE/ROAD						31554	
FLARE KIT						31554	
INVOICE # 61234							

STATE FIRE ALLOTMENT 10554.00

01 O 102136 AT & T MOBILITY LLC 158.49

MONTHLY CHARGES	401-10-2207	512617 12/06/2017	99.84
11/6/17-11/20/17			
COUNTY MANAGER PHONE			
INVOICE # 287281210062X11282017			
MONTHLY CHARGES	407-91-2207	612617 12/06/2017	58.65
10/21/17-11/20/17			
DIST. 1 VPD			
INVOICE # 2872729156809X11282017			

COUNTY MANAGER 99.84 STATE FIRE ALLOTMENT 58.65

01 O 102137 CENTRAL NM ELECTRIC COOP. JUDICIAL MONTHLY BILL OCT. 17 401-16-2208 712617 12/06/2017 3175.06

4650.78 DIST. 5 VPD MONTHLY BILL 405-91-2208 / / 389.80

12/07/2017 DIST. 2 VPD MONTHLY BILL 406-91-2208 / / 143.93

CK# DATE Name

Description

Line Item

Invoice #

DATE

PO #

Amount

DIST.1 VPD MONTHLY BILL - 407-91-2208 / / 124.78  
 DIST.3 VPD MONTHLY BILL 408-91-2208 / / 284.52  
 DIST.4 VPD MONTHLY BILL 409-91-2208 / / 172.37  
 DIST.6 VPD MONTHLY BILL 418-91-2208 / / 65.64  
 DISPATCH MONTHLY BILL 911-80-2208 / / 46.49  
 TC ANIMAL SHELTER MONTHLY BILL 401-82-2208 / / 248.19

JUDICIAL COMPLEX MAINT 3175.06 STATE FIRE ALLOTMENT 1181.04 911-DISPATCH CENTER 46.49  
 ANIMAL SHELTER 248.19

01 O 102138 CHIEF SUPPLY 4300.76  
 12/07/2017  
 3 - THERMAL IMAGER CAMERA KITS 413-91-2248 31818 4173.56  
 3 - RETRACTABLE LANYARD FOR K2 CAMERAS 31818  
 FREIGHT 31818  
 WILDLAND CONT 409-91-2248 912617 12/06/2017 127.20  
 31501/PO CLOSED  
 INVOICE # 297118

STATE FIRE ALLOTMENT 4300.76

01 O 102139 COMPUTER CORNER INC 105.49  
 12/07/2017  
 SYMANTEC NORTON SECURITY PREMIUM 413-91-2219 31787 105.49  
 (Y.3.0)  
 SUBSCRIPTION LICENSE (1 YEAR) -  
 UP TO 10 DEVICES, 1 USER, 25 GB  
 ONLINE STORAGE 31787  
 INVOICE # 159684 31787

STATE FIRE ALLOTMENT 105.49  
 01 O 102140 DOCUMENT TECHNOLOGISTS 268.75  
 12/07/2017  
 REPAIR OF MP 2400 AFTIO COPY 612-20-2218 31833 268.75  
 MACHINE 31833  
 INVOICE # 77192

COUNTY CLERK 268.75  
 01 O 102141 EMM GAS ASSOCIATION 3448.61  
 12/07/2017  
 ROAD MONTHLY GAS BILL 402-61-2209 1212617 12/06/2017 361.28  
 DIST.5 VPD MONTHLY GAS BILL 405-91-2209 / / 108.95  
 DIST.5 VPD MONTHLY GAS BILL 405-91-2209 / / 147.64  
 DIST.2 VPD MONTHLY GAS BILL 406-91-2209 / / 117.96  
 DIST.3 VPD MONTHLY GAS BILL 408-91-2209 / / 151.15  
 DIST.3 VPD MONTHLY BILL 408-91-2209 / / 117.60  
 TCEB MONTHLY GAS BILL 412-53-2209 / / 80.27  
 DIST.6 VPD MONTHLY GAS BILL 418-91-2209 / / 237.18  
 CLERK MONTHLY GAS BILL 612-20-2308 / / 36.98  
 DISPATCH MONTHLY GAS BILL 911-80-2209 / / 124.18  
 COURTHOUSE MONTHLY GAS BILL 401-15-2209 / / 946.40  
 JUDICIAL MONTHLY GAS BILL 401-16-2209 / / 633.79  
 MEDICAL CENTER MONTHLY BILL 401-24-2209 / / 101.91  
 SENIOR CENTERS MONTHLY GAS BILL 401-05-2209 / / 283.32

COUNTY ROAD SHOP 361.28 STATE FIRE ALLOTMENT 880.48 COUNTY PAIR 80.27  
 COUNTY CLERK 36.98 911-DISPATCH CENTER 124.18 ADMINISTRATIVE OFFICES 946.40  
 JUDICIAL COMPLEX MAINT 633.79 HEALTH DEPT BLDG MAINT 101.91 COUNTY COMMISSION 283.32

01 O 102142 ESPINOSA-MOORE, BERTHA 101.84  
 12/07/2017  
 MEETINGS, HV & OUTREACH 629-49-2205 1312617 12/06/2017 101.84  
 NOVEMBER, 2017

HOME VISITING GRANT FY 101.84

CHK#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
01 O	102143	ESPANCA, TOWN OF	COURTHOUSE MONTHLY BILL	401-15-2210	1412617	12/06/2017		178.91
	711.68		TCFB MONTHLY BILL	412-53-2210	/	/		114.45
	12/07/2017		JUDICIAL COMPLEX MONTHLY BILL	401-16-2210	/	/		237.86
			MEDICAL CENTER MONTHLY BILL	401-24-2210	/	/		68.06
			SENIOR CENTER MONTHLY BILL	401-05-2210	/	/		112.40

ADMINISTRATIVE OFFICES	178.91	COUNTY FAIR	114.45	JUDICIAL COMPLEX MAINT	237.86			
HEALTH DEPT BLDG MAINT	68.06	COUNTY COMMISSION	112.40					
01 O	102144	EVSMA	TORRANCE COUNTY-RECYCLABLES	419-05-2292	1512617	12/06/2017		96.00
	8428.85		NOV. 30,2017 INVOICE # 1930					
	12/07/2017		TORRANCE COUNTY-TIPPING FEES	419-05-2292	1612617	12/06/2017		8332.85
			NOV.30,2017 INVOICE # 1917					

COUNTY COMMISSION	8428.85							
01 O	102145	FORENSIC BEHAVIORAL HEALTH ASSESSMCH EVALUATION		401-50-2272	5212617	12/06/2017	31644	376.25
	376.25		COLLIER				31644	
	12/07/2017		INVOICE # 24016					

COUNTY SHERIFF	376.25							
01 O	102146	GUSTIN HARDWARE INC.	ELECTRICAL/PLUMBING/SPOOFING AND	401-15-2215	1712617	12/06/2017	31786	564.02
	564.02		HARDWARE SUPPLIES FOR BUILDING				31786	
	12/07/2017		MAINTENANCE				31786	
			NOVEMBER 2017				31786	

ADMINISTRATIVE OFFICES	564.02							
01 O	102147	HART'S TRUSTWORTHY HARDWARE	1 - CORDLESS 6V ELECTRIC	411-92-2248	1812617	12/06/2017	31776	29.05
	29.05		ENGRAYER				31776	
	12/07/2017		INVOICE # B250584					

1/4 FIRE EXCISE TAX	29.05							
01 O	102148	HONSTEIN CIL CO.	TC ANIMAL SHELTER MONTHLY FUEL	401-82-2202	1912617	12/06/2017		46.65
	374.81		INVOICE # 333;638					
	12/07/2017		TC ANIMAL SHELTER FUEL NOV 1-15	401-82-2202	2012617	12/06/2017		237.21
			INVOICE # Z22219					
			SAFETY MONTHLY FUEL	600-06-2202	2112617	12/06/2017		90.95
			10/15/2017-UNIT T-24					
			INVOICE # Z22217					

ANIMAL SHELTER	283.86	RISK MANAGEMENT	90.95					
01 O	102149	INDEPENDENT NEWS LLC	LEGAL AD	401-30-2221	2212617	12/06/2017	31730	62.63
	62.63		FIRST HALF TAXES DUE				31730	
	12/07/2017		PUBLISH 3 TIMES				31730	
			INVOICE # 78553;78506;78454					

COUNTY TREASURER	62.63							
01 O	102150	KAM-FM 88.7	DECEMBER 2017, COMMISSIONER	401-05-2243	2312617	12/06/2017		1250.00
	1250.00		MEETINGS & PSA'S					
	12/07/2017		INVOICE # 2017-1271					

COUNTY COMMISSION	1250.00							
01 O	102151	LOBO INTERNET SERVICES LTD	CORD 2,3,4,5 & FIRE ADMIN.	408-91-2272	2412617	12/06/2017		156.15
	430.75		MONTHLY INTERNET BILL	409-91-2272	/	/		81.15



CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
12/07/2017			INVOICE # 92043		3412617	12/06/2017		115.44
			TENDER 32 INSTALL PANEL LIGHTS	408-91-2201				
			INVOICE # 92045		3512617	12/06/2017		7759.43
			RESCUE 4	409-91-2201				
			RR AXLE, PM, DOT, REPLACE AIR					
			COMPRESSORS, PARTS, LABOR					
			INVOICE # 92042		3612617	12/06/2017		935.42
			RESCUE 5 PM, DOT,	405-91-2201				
			REPLACE REAR U-JOINT					
			INVOICE # 92052					

STATE FIRE ALLOTMENT 9406.03

01 O 102160	NM BOARD OF PHARMACY	EMERGENCY MEDICAL SERVICE	411-92-2230	3712617	12/06/2017		31793	50.00
150.00		ANNUAL LICENSE RENEWAL					31793	
12/07/2017		LICENSE RENEWAL	401-82-2272	3812617	12/06/2017		31826	100.00
		CI00005331					31826	

1/4% FIRE EXCISE TRX 50.00 ANIMAL SHELTER 100.00

01 O 102161	NM COUNTY INSURANCE AUTHORITY	ACCIDENT & SICKNESS	407-91-2211	3912617	12/06/2017			3986.50
23919.00		POLICY # VFP 4632-4315E-02	406-91-2211					3986.50
12/07/2017		01/01/2018	408-91-2211					3986.50
			409-91-2211					3986.50
			405-91-2211					3986.50
			418-91-2211					3986.50

STATE FIRE ALLOTMENT 23919.00

01 O 102162	NM PROPANE	DIST. 1 VPD PROPANE	407-91-2209	4012617	12/06/2017			1126.21
1827.85		HAZMAT FEE/FUEL						
12/07/2017		INVOICE # 3071158458/3071158448	409-91-2209	4112617	12/06/2017			367.06
		DIST. 4 VPD PROPANE						
		18 E TORREBON HEIGHTS HAZMAT FEE						
		INVOICE # 3071158136	409-91-2209	4212617	12/06/2017			263.51
		DIST. 4 VPD PROPANE						
		INVOICE # 3071641207	409-91-2209	4312617	12/06/2017			71.07
		DIST. 4 VPD 500 GALLON						
		TANK PROPANE 11/1/17-10/31/18						
		INVOICE # 3071827531						

STATE FIRE ALLOTMENT 1827.85

01 O 102163	NM WASTE SERVICE INC	4 YARD CONTAINER MONTHLY SERVICE	406-91-2210	4412617	12/06/2017		31296	262.56
262.56		JANUARY, FEBRUARY, MARCH 2018						
12/07/2017		INVOICE # 56109						

STATE FIRE ALLOTMENT 262.56

01 O 102164	NMS COMMUNICATIONS	MONTHLY LONG DISTANCE BILL	911-80-2207	4512617	12/06/2017			109.14
109.14		NOVEMBER-DISPATCH						
12/07/2017								

911-DISPATCH CENTER 109.14

01 O 102165	NMS COMMUNICATIONS	MONTHLY LONG DISTANCE FAX	612-20-2207	4612617	12/06/2017			2.80
10.71		MANAGER/CLERK/TREASURER	401-30-2207					2.44
12/07/2017		ASSESSOR/SHERIFF	401-40-2207					2.56
			401-50-2207					2.91

CK# DATE Name Description Line Item Invoice # DATE PO # AMOUNT

COUNTY SHERIFF 2.91

01 O 102166 ORKIN INC. JUDICIAL COMPLEX 401-16-2203 4712617 12/06/2017 236.50  
321.17 PC STANDARD-MONTHLY PC  
12/07/2017 INVOICE # 164112897;164112898  
STANDARD MONTHLY PC 401-05-2272 4812617 12/06/2017 84.67  
INVOICE # 164112536

JUDICIAL COMPLEX MAINT 236.50 COUNTY COMMISSION 84.67  
01 O 102167 PCM/TIGER DIRECT 2 - APC BR1500G BACK-UPS XS LCD 401-27-2219 4912617 12/06/2017 31790 169.99  
339.98 1500VA UPS BATTERY BACKUP 401-50-2219 / / 31790 169.99  
12/07/2017 INVOICE # B0574630101

PURCHASING DEPARTMENT 169.99 COUNTY SHERIFF 169.99  
01 O 102168 PEAVEY PERFORMANCE SYSTEMS 7 - SAFETY INCENTIVE 600-06-2248 5012617 12/06/2017 31811 1309.00  
1309.00 SAFETY JACKPOT 31811  
12/07/2017 QUARTERLY UPDATES INVOICE # 403320 31811

RISK MANAGEMENT 1309.00  
01 O 102169 PLATTEN WIRELESS 11/22/2017-12/21/2017 407-91-2207 5112617 12/06/2017 176.95  
176.95 575-584-2244  
12/07/2017 LANDLINE CHARGES INVOICE # 8445033

STATE FIRE ALLOTMENT 176.95  
01 O 102170 QWEST CORPORATION MONTHLY CHARGES NOV.22-DEC.21.17 406-91-2207 5312617 12/06/2017 59.41  
59.41  
12/07/2017

STATE FIRE ALLOTMENT 59.41  
01 O 102171 RICOH USA, INC LEASE PAYMENT & IVANGS 612-20-2203 5412617 12/06/2017 328.84  
328.84 MPC2504  
12/07/2017 INVOICE # 99765433

COUNTY CLERK 328.84  
01 O 102172 RICOH USA, INC MP354SP C86130949 401-30-2203 5512617 12/06/2017 283.70  
283.70 9/21/2017-10/24/2017  
12/07/2017 RENT INVOICE # 99650079

COUNTY TREASURER 283.70  
01 O 102173 RICOH USA, INC REPLACES PO 28393 612-40-2203 5612617 12/06/2017 148.74  
297.49 RICOH MPCW220SP WIDE FORMAT 675-07-2203 / / 31290 148.75  
12/07/2017 INVOICE # 23748805

COUNTY ASSESSOR 148.74 RURAL ADDRESSING 148.75  
01 O 102174 RICOH USA, INC PERIODIC PAYMENT 629-49-2218 5712617 12/06/2017 98.90  
197.80 12/1/2017-12/31/2017 / / 98.90  
12/07/2017 INVOICE # 23748808

HOME VISITING GRANT FY 98.90 DV CONTRACT FY18 98.90

CR#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
01 0	102175	STAPLES BUSINESS ADVANTAGE	INK CARTRIDGES, HP PRINTER, FILE 609-30-2219		5812617	12/06/2017	31708	756.40
	756.40		BOX, SCOTCH TAPE, CALCULATOR				31708	
	12/07/2017		RIBBON, FACIAL TISSUE, PEN				31708	
			REPIELS, PENS, MARKERS, STAPLER,				31708	
			SURGE PROTECTOR, COPY PAPER,				31708	
			STORAGE BOXES				31708	
			INVOICE # 335918486;3357470974					
			3358260492					

COUNTY TREASURER	756.40
01 0 102176	STAPLES BUSINESS ADVANTAGE
	2 - PLANTRONICS WIRELESS VOID
	609-30-2219
	5912617 12/06/2017
	31781
	499.14
	12/07/2017
	INVOICE # 3358813708
	HEADSETS
	31781

COUNTY TREASURER	499.14
01 0 102177	STAPLES BUSINESS ADVANTAGE
	MAXWELL HEADPHONE, SCOTCH MAGIC
	401-20-2219
	6012617 12/06/2017
	31748
	68.66
	12/07/2017
	INVOICE # 3358356578;3358592155
	TAPE, PAPERMATE PENS
	31748

COUNTY CLERK	68.66
01 0 102178	STAPLES BUSINESS ADVANTAGE
	MANILA ENVELOPE, WALL CLOCK,
	413-91-2219
	6112617 12/06/2017
	31744
	450.09
	12/07/2017
	INVOICE # 3358940999;3358356577
	BANKER BOXES, DESK CHAIR
	31744
	3358260499

STATE FIRE ALLOTMENT	450.09
01 0 102179	STAPLES BUSINESS ADVANTAGE
	PENS, PAPER CLIPS, COPY PAPER,
	406-91-2219
	6212617 12/06/2017
	31785
	361.72
	12/07/2017
	INVOICE # 3358873795;3358941002
	BATTERIES, 3 HOLE PUNCH
	31785
	INVOICE # 3358873795;3358941002

STATE FIRE ALLOTMENT	361.72
01 0 102180	STAPLES BUSINESS ADVANTAGE
	CLEAR REPORT COVERS; CARPET
	610-40-2219
	6312617 12/06/2017
	31592
	82.57
	12/07/2017
	INVOICE # 3356359619;3356359622
	CHAIR MAT
	31592

COUNTY ASSESSOR	82.57
01 0 102181	TJ ENTERPRISES AUTO SUPPLY
	FLOOR MATS
	401-30-2201
	6412617 12/06/2017
	31830
	25.98
	12/07/2017
	INVOICE # 32975
	31830

COUNTY TREASURER	25.98
01 0 102182	TRIDIC INC.
	MAINTENANCE CONTRACT
	401-65-2203
	6512617 12/06/2017
	4215.83
	12/07/2017
	INVOICE # 59:17.5

INFORMATION TECHNOLOGY	4215.83
01 0 102183	U.S. POSTMASTER
	POSTAGE FOR 2018
	401-05-2206
	6612617 12/06/2017
	541.35
	12/07/2017
	BUSINESS PERSONAL PROPERTY
	LIVESTOCK BULK MAILINGS
	ESTANCIA PERMIT # 12

CK#	DATE	Name	Description	Line Item	Invoice #	DATE	PO #	Amount
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COUNTY COMMISSION 541.35								
01 O	102184	MULLIN LAW FIRM, THE	LEGAL SERVICES-NOV. 2017	401-05-2275	6712617	12/06/2017		14111.15
	16509.89		INVOICE #8384-GENERAL BUSINESS					
	12/07/2017		INVOICE # 8385-IBERDROLA	401-05-2273		/ /		2398.74

COUNTY COMMISSION 16509.89								
01 O	102185	WASTE MANAGEMENT OF NM INC.	MONTHLY TRASH PICK-UP	401-82-2210	6812617	12/06/2017		117.81
	736.22		FOR THE MONTH OF DECEMBER					
	12/07/2017		INVOICE # 8638804-0573-4					

			MONTHLY CHARGES 1-8 YARD	413-91-2210	6912617	12/06/2017		335.70
			DUMPSITER 12/17-12/31/17					
			INVOICE # 8638801-2573-0					
			MONTHLY CHARGES	405-91-2210	7012617	12/06/2017		282.71
			8 YARD DUMPSITER					
			12/1/17-12/31/17					
			INVOICE # 8638802-0573-8					

ANIMAL SHELTER 117.81 STATE FIRE ALLOTMENT 618.41								
01 O	102186	WILLARD, VILLAGE OF	MONTHLY CHARGES WATER, SEWER	418-91-2210	7112617	12/06/2017		54.33
	54.33		10/23/2017-11/20/2017					
	12/07/2017							

STATE FIRE ALLOTMENT 54.33								
123	41342.47	/ /	TOTAL					



\*\* GRAND TOTAL \*\* 411,342.47 .00

\*\*TOTAL GENERAL FUND 82,358.99 .00

\*\*DEPT 401-05-2201 COUNTY COMMISSION 26,923.28 .00

401-05-2203 VEHICLE MAINTENANCE/REPAIR 73.85 .00

401-05-2206 MAINTENANCE CONTRACTS 414.60 .00

401-05-2207 POSTAGE 541.35 .00

401-05-2208 TELECOMMUNICATIONS 162.24 .00

401-05-2209 ELECTRICITY 1,203.14 .00

401-05-2210 HEATING/GAS/PROPANE 603.14 .00

401-05-2213 WATER/SEWER/TRASH 194.40 .00

401-05-2219 KANM FOUNDATION 5013 1,250.00 .00

401-05-2272 MEMBERSHIP DUES/SUBSCRIPTIONS 5,886.00 .00

401-05-2273 PROFESSIONAL SERVICES 84.67 .00

401-05-2275 IIR LEGAL SERVICES 2,398.74 .00

LEGAL SERVICES 14,111.15 .00

\*\*DEPT 401-08-2202 PLANNING & ZONING 80.08 .00

401-08-2207 VEHICLE FUEL 26.00 .00

401-08-2207 TELECOMMUNICATIONS 54.08 .00

\*\*DEPT 401-10-2207 COUNTY MANAGER 866.09 .00

401-10-2207 TELECOMMUNICATIONS 235.04 .00

401-10-2219 OFFICE SUPPLIES 231.05 .00

401-10-2266 TRAINING 400.00 .00

\*\*DEPT 401-15-2202 ADMINISTRATIVE OFFICES MAINTENAN 5,142.45 .00

401-15-2202 VEHICLE FUEL 226.14 .00

401-15-2207 TELECOMMUNICATIONS 54.08 .00

401-15-2208 ELECTRICITY 2,367.18 .00

401-15-2209 HEATING/GAS/PROPANE 946.40 .00

401-15-2210 WATER/SEWER/TRASH 178.91 .00

401-15-2215 BUILDING MAINTENANCE/REPAIR 564.02 .00

401-15-2237 CLEANING SERVICE 805.72 .00

\*\*DEPT 401-16-2203 JUDICIAL COMPLEX MAINTENANCE 5,164.01 .00

401-16-2203 MAINTENANCE CONTRACTS 236.50 .00

401-16-2208 ELECTRICITY 3,175.06 .00

401-16-2209 HEATING/GAS/PROPANE 633.79 .00

401-16-2210 WATER/SEWER/TRASH 237.86 .00

401-16-2215 BUILDING MAINTENANCE/REPAIR 72.75 .00

401-16-2237 CLEANING SERVICE 808.05 .00

\*\*DEPT 401-20-2207 COUNTY CLERK 457.94 .00

401-20-2207 TELECOMMUNICATIONS 189.28 .00

401-20-2219 OFFICE SUPPLIES 68.66 .00

401-20-2266 TRAINING 200.00 .00

\*\*DEPT 401-21-2205 ELECTIONS 178.33 .00

401-21-2205 WILBERG/PER DIEM 120.00 .00

401-21-2308 VOTING MACHINE STORAGE 58.33 .00

\*\*DEPT 401-24-2208 HEALTH DEPT BLDG MAINTENANCE 327.19 .00

401-24-2208 ELECTRICITY 157.22 .00

401-24-2209 HEATING/GAS/PROPANE 101.91 .00

401-24-2210 WATER/SEWER/TRASH 68.06 .00

\*\*DEPT 401-27-2207 PURCHASING DEPARTMENT 197.03 .00

401-27-2207 TELECOMMUNICATIONS 27.04 .00

DEBITS CREDITS

401-27-2219	OFFICE SUPPLIES	169.99	.00
**DEPT	COUNTY TREASURER	1,717.10	.00
401-30-2201	VEHICLE MAINTENANCE/REPAIR	25.98	.00
401-30-2202	VEHICLE FUEL	126.09	.00
401-30-2203	MAINTENANCE CONTRACTS	283.70	.00
401-30-2207	TELECOMMUNICATIONS	218.76	.00
401-30-2218	EQUIPMENT MAINTENANCE/REPAIR	399.94	.00
401-30-2221	PRINTING/PUBLISHING/ADVERTISING	62.63	.00
401-30-2266	TRAINING	600.00	.00
**DEPT	COUNTY ASSESSOR	115.21	.00
401-40-2207	TELECOMMUNICATIONS	115.21	.00
**DEPT	COUNTY SHERIFF	35,624.16	.00
401-50-2201	VEHICLE MAINTENANCE/REPAIR	17,701.55	.00
401-50-2202	VEHICLE FUEL	7,596.04	.00
401-50-2203	MAINTENANCE CONTRACTS	173.18	.00
401-50-2207	TELECOMMUNICATIONS	557.91	.00
401-50-2218	EQUIPMENT MAINTENANCE/REPAIR	795.97	.00
401-50-2219	OFFICE SUPPLIES	3,731.19	.00
401-50-2222	FIELD SUPPLIES	885.55	.00
401-50-2231	WEAPONS/AMMUNITION	3,044.59	.00
401-50-2236	UNIFORMS	441.93	.00
401-50-2269	MEMBERSHIP DUES/SUBSCRIPTIONS	320.00	.00
401-50-2272	PROFESSIONAL SERVICES	376.25	.00
**DEPT	FINANCE DEPARTMENT	546.35	.00
401-55-2205	MILEAGE/PER DIEM	65.23	.00
401-55-2207	TELECOMMUNICATIONS	81.12	.00
401-55-2266	TRAINING	400.00	.00
**DEPT	INFORMATION TECHNOLOGY DEPARTMENT	4,242.87	.00
401-65-2203	MAINTENANCE CONTRACTS	4,215.83	.00
401-65-2207	TELECOMMUNICATIONS	27.04	.00
**DEPT	ANTIMAL SHELTER	749.86	.00
401-82-2202	VEHICLE FUEL	283.86	.00
401-82-2208	ELECTRICITY	248.19	.00
401-82-2210	WATER/SEWER/TRASH	117.81	.00
401-82-2272	PROFESSIONAL SERVICES	100.00	.00
**DEPT	PROBATE JUDGE	27.04	.00
401-90-2207	TELECOMMUNICATIONS	27.04	.00
**TOTAL	ROAD FUND	10,928.16	.00
**DEPT	COUNTY ROAD DEPARTMENT	10,566.88	.00
402-60-2202	VEHICLE FUEL	9,744.19	.00
402-60-2203	MAINTENANCE CONTRACTS	72.18	.00
402-60-2207	TELECOMMUNICATIONS	54.08	.00
402-60-2248	SAFETY EQUIPMENT	696.43	.00
**DEPT	COUNTY ROAD SHOP	361.28	.00
402-61-2209	HEATING/GAS/PROPANE	361.28	.00
**TOTAL	DISTRICT 5 VPD	6,936.11	.00
**DEPT	STATE FIRE ALLOTMENT	6,936.11	.00
405-91-2201	VEHICLE MAINTENANCE/REPAIR	935.42	.00
405-91-2202	VEHICLE FUEL	478.72	.00

405-91-2208	ELECTRICITY	389.80	.00
405-91-2209	HEATING/GAS/PROPANE	256.59	.00
405-91-2210	WATER/SEWER/TRASH	282.71	.00
405-91-2211	VOLUNTEER FIRE INSURANCE	3,986.50	.00
405-91-2230	MEDICAL SUPPLIES	493.08	.00
405-91-2248	SAFETY EQUIPMENT	32.14	.00
405-91-2272	PROFESSIONAL SERVICES	81.15	.00

\*\*\*\*\*  
 \*\*TOTAL DISTRICT 2 VPD 5,535.28 .00  
 \*\*\*\*\*

406-91-2202	STATE FIRE ALLOTMENT	5,535.28	.00
406-91-2207	VEHICLE FUEL	151.90	.00
406-91-2208	TELECOMMUNICATIONS	59.41	.00
406-91-2209	ELECTRICITY	143.93	.00
406-91-2210	HEATING/GAS/PROPANE	117.96	.00
406-91-2211	WATER/SEWER/TRASH	262.56	.00
406-91-2219	VOLUNTEER FIRE INSURANCE	3,986.50	.00
406-91-2230	OFFICE SUPPLIES	361.72	.00
406-91-2230	MEDICAL SUPPLIES	375.15	.00
406-91-2272	PROFESSIONAL SERVICES	76.15	.00

\*\*\*\*\*  
 \*\*TOTAL DISTRICT 1 VPD 5,536.08 .00  
 \*\*\*\*\*

407-91-2202	STATE FIRE ALLOTMENT	5,536.08	.00
407-91-2207	VEHICLE FUEL	62.99	.00
407-91-2208	TELECOMMUNICATIONS	235.60	.00
407-91-2209	ELECTRICITY	124.78	.00
407-91-2211	HEATING/GAS/PROPANE	1,126.21	.00
407-91-2211	VOLUNTEER FIRE INSURANCE	3,986.50	.00

\*\*\*\*\*  
 \*\*TOTAL DISTRICT 3 VPD 17,501.78 .00  
 \*\*\*\*\*

408-91-2201	STATE FIRE ALLOTMENT	17,501.78	.00
408-91-2202	VEHICLE MAINTENANCE/REPAIR	711.18	.00
408-91-2207	VEHICLE FUEL	207.68	.00
408-91-2208	TELECOMMUNICATIONS	290.50	.00
408-91-2209	ELECTRICITY	284.52	.00
408-91-2211	HEATING/GAS/PROPANE	268.75	.00
408-91-2219	VOLUNTEER FIRE INSURANCE	3,986.50	.00
408-91-2230	OFFICE SUPPLIES	530.99	.00
408-91-2230	MEDICAL SUPPLIES	511.51	.00
408-91-2248	SAFETY EQUIPMENT	10,554.00	.00
408-91-2272	PROFESSIONAL SERVICES	156.15	.00

\*\*\*\*\*  
 \*\*TOTAL DISTRICT 4 VPD 14,517.59 .00  
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409-91-2201	STATE FIRE ALLOTMENT	14,517.59	.00
409-91-2208	VEHICLE MAINTENANCE/REPAIR	7,759.43	.00
409-91-2209	ELECTRICITY	172.37	.00
409-91-2211	HEATING/GAS/PROPANE	701.64	.00
409-91-2211	VOLUNTEER FIRE INSURANCE	3,986.50	.00
409-91-2248	SAFETY EQUIPMENT	1,816.50	.00
409-91-2272	PROFESSIONAL SERVICES	81.15	.00

\*\*\*\*\*  
 \*\*TOTAL I. E. PROTECTION FUND 1,018.00 .00  
 \*\*\*\*\*

410-50-2222	COUNTY SHERIFF	1,018.00	.00
410-50-2222	FIELD SUPPLIES	1,018.00	.00

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 \*\*TOTAL COUNTY FIRE PROTECTION FUND 1,829.05 .00  
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**DEPT	1/4% FIRE EXCISE TAX	1,829.05	.00
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DEBITS CREDITS

411-92-2230	MEDICAL SUPPLIES	50.00	.00
411-92-2248	SAFETY EQUIPMENT	1,779.05	.00
**TOTAL	COUNTY PAIR	343.54	.00
**DEPT	COUNTY PAIR	343.54	.00
412-53-2208	ELECTRICITY	135.32	.00
412-53-2209	HEATING/GAS/PROPANE	80.27	.00
412-53-2210	WATER/SEWER/TRASH	114.45	.00
412-53-2235	AWARDS FOR COUNTY PAIR	13.50	.00
**TOTAL	FIRE DEPARTMENT ADMIN	5,990.54	.00
**DEPT	STATE FIRE ALLOTMENT	5,990.54	.00
413-91-2202	VEHICLE FUEL	684.75	.00
413-91-2207	TELECOMMUNICATIONS	204.80	.00
413-91-2210	WATER/SEWER/TRASH	335.70	.00
413-91-2219	OFFICE SUPPLIES	555.58	.00
413-91-2248	SAFETY EQUIPMENT	4,172.56	.00
413-91-2272	PROFESSIONAL SERVICES	36.15	.00
**TOTAL	INDIGENT FUND	2,000.00	.00
**DEPT	2ND 1/8 GROSS RECEIPTS TAX	2,000.00	.00
414-19-2293	INDIGENT MEDICAL CLAIMS	2,000.00	.00
**TOTAL	DISTRICT 6 VPD	4,443.24	.00
**DEPT	STATE FIRE ALLOTMENT	4,443.24	.00
418-91-2202	VEHICLE FUEL	99.59	.00
418-91-2208	ELECTRICITY	65.64	.00
418-91-2209	HEATING/GAS/PROPANE	237.18	.00
418-91-2210	WATER/SEWER/TRASH	54.33	.00
418-91-2211	VOLUNTEER FIRE INSURANCE	3,986.50	.00
**TOTAL	EVSWA CONTRACT	8,428.85	.00
**DEPT	COUNTY COMMISSION	8,428.85	.00
419-05-2292	EVSWA TIPPING FEES	8,428.85	.00
**TOTAL	JAIL FUND	50,027.37	.00
**DEPT	ADULT INMATE CARE	31,978.65	.00
420-70-2172	CARE OF INMATES	26,436.25	.00
420-70-2173	INMATE MEDICAL	5,268.81	.00
420-70-2207	TELECOMMUNICATIONS	273.59	.00
**DEPT	JUVENILE INMATE CARE	10,861.52	.00
420-72-2172	CARE OF INMATES	10,850.00	.00
420-72-2173	INMATE MEDICAL	11.52	.00
**DEPT	COMMUNITY MONITORING	1,982.00	.00
420-73-2202	VEHICLE FUEL	26.10	.00
420-73-2207	TELECOMMUNICATIONS	27.04	.00
420-73-2218	EQUIPMENT MAINTENANCE/REPAIR	1,851.46	.00
420-73-2272	PROFESSIONAL SERVICES	77.40	.00
**DEPT	TRANSPORTATION OF PRISONERS	5,205.20	.00
420-74-2201	VEHICLE MAINTENANCE/REPAIR	1,616.80	.00
420-74-2202	VEHICLE FUEL	2,161.76	.00
420-74-2222	FIELD SUPPLIES	1,426.64	.00

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 \*\*TOTAL SAFETY PROGRAM 1,780.07 .00  
 \*\*DEPT RISK MANAGEMENT 1,780.07 .00  
 600-06-2202 VEHICLE FUEL 90.95 .00  
 600-06-2248 SAFETY EQUIPMENT 1,689.12 .00  
 \*\*TOTAL CIVIL DEFENSE FUND 5,279.86 .00

=====  
 \*\*DEPT COMMUNICATIONS/EMS TAX 5,279.86 .00  
 604-83-2202 VEHICLE FUEL 124.94 .00  
 604-83-2207 TELECOMMUNICATIONS 27.04 .00  
 604-83-2272 PROFESSIONAL SERVICES 5,127.88 .00  
 \*\*TOTAL DWI PROGRAM FUND 1,368.35 .00

=====  
 \*\*DEPT DWI LOCAL GRANT FY18 1,314.46 .00  
 605-02-2202 VEHICLE FUEL 33.46 .00  
 605-02-2272 PROFESSIONAL SERVICES 1,281.00 .00  
 \*\*DEPT DWI LOCAL GRANT FY17 53.89 .00  
 605-22-2207 TELECOMMUNICATIONS 53.89 .00  
 \*\*TOTAL TREASURER'S FEE 1,255.54 .00

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 \*\*DEPT COUNTY TREASURER 1,255.54 .00  
 609-30-2219 OFFICE SUPPLIES 1,255.54 .00  
 \*\*TOTAL PROPERTY VALUATION FUND 6,103.12 .00

=====  
 \*\*DEPT COUNTY ASSESSOR 6,103.12 .00  
 610-40-2202 VEHICLE FUEL 170.04 .00  
 610-40-2203 MAINTENANCE CONTRACTS 674.07 .00  
 610-40-2207 TELECOMMUNICATIONS 351.52 .00  
 610-40-2218 EQUIPMENT MAINTENANCE/REPAIR 1,449.41 .00  
 610-40-2219 OFFICE SUPPLIES 82.57 .00  
 610-40-2266 TRAINING 200.00 .00  
 610-40-2269 MEMBERSHIP DUES/SUBSCRIPTIONS 210.00 .00  
 610-40-2617 CC/EQUIPMENT 2,965.51 .00  
 \*\*TOTAL CLERK'S EQUIPMENT FUND 1,328.56 .00

=====  
 \*\*DEPT COUNTY CLERK 1,328.56 .00  
 612-20-2203 MAINTENANCE CONTRACTS 680.37 .00  
 612-20-2205 MILEAGE/PER DIEM 29.66 .00  
 612-20-2207 TELECOMMUNICATIONS 2.80 .00  
 612-20-2218 EQUIPMENT MAINTENANCE/REPAIR 268.75 .00  
 612-20-2266 TRAINING 310.00 .00  
 612-20-2308 VOTING MACHINE STORAGE 36.98 .00  
 \*\*TOTAL RPICA GRANT 11,016.72 .00

=====  
 \*\*DEPT RPICA GRANT 11,016.72 .00  
 616-18-2272 RPICA GRANT FY18 11,016.72 .00  
 PROFESSIONAL SERVICES 11,016.72 .00  
 \*\*TOTAL HOME VISITING GRANT 353.65 .00

=====  
 \*\*DEPT HOME VISITING GRANT FY18 302.19 .00  
 629-49-2202 VEHICLE FUEL 15.95 .00  
 629-49-2205 MILEAGE/PER DIEM 187.34 .00  
 629-49-2218 EQUIPMENT MAINTENANCE/REPAIR 98.90 .00

DEBITS

CREDITS

\*\*DEPT HOME VISITING GRANT FY17 51.46 .00  
 629-52-2207 TELECOMMUNICATIONS 51.46 .00

\*\*TOTAL JUVENILE JUSTICE GRANT 11,193.54 .00

\*\*DEPT HIGH LONESOME WIND PILOT 400.00 .00  
 635-09-2219 OFFICE SUPPLIES 400.00 .00

\*\*DEPT CYFD JUVENILE JUSTICE GRANT FY18 10,793.54 .00  
 635-68-2272 PROFESSIONAL SERVICES 10,793.54 .00

\*\*TOTAL HIGH LONESOME WIND PILOT 149,500.00 .00

\*\*DEPT HIGH LONESOME WIND PILOT 149,500.00 .00  
 641-09-2410 HIGH LONESOME WIND FARM PILOT 149,500.00 .00

\*\*TOTAL RURAL ADDRESSING 277.89 .00

\*\*DEPT RURAL ADDRESSING 277.89 .00  
 675-07-2202 RURAL ADDRESSING 277.89 .00

\*\*DEPT MAINTENANCE CONTRACTS 206.23 .00  
 675-07-2203 MAINTENANCE CONTRACTS 206.23 .00

\*\*TOTAL TELECOMMUNICATIONS 27.04 .00

\*\*DEPT PLANNING & ZONING 222.46 .00  
 685-08-2202 PLANNING & ZONING 222.46 .00

\*\*TOTAL VEHICLE FUEL 27.04 .00

\*\*DEPT DOMESTIC VIOLENCE GRANT 191.74 .00  
 690-09-2202 DOMESTIC VIOLENCE GRANT 191.74 .00

\*\*DEPT HIGH LONESOME WIND PILOT 41.38 .00  
 690-09-2202 HIGH LONESOME WIND PILOT 41.38 .00

\*\*TOTAL VEHICLE FUEL 41.38 .00

\*\*DEPT DV CONTRACT FY18 150.36 .00  
 690-86-2207 DV CONTRACT FY18 150.36 .00

\*\*TOTAL TELECOMMUNICATIONS 51.46 .00

\*\*DEPT EQUIPMENT MAINTENANCE/REPAIR 98.90 .00  
 690-86-2218 EQUIPMENT MAINTENANCE/REPAIR 98.90 .00

\*\*TOTAL DRUG EDUCATION PROGRAM 148.98 .00

\*\*DEPT DRUG EDUCATION 148.98 .00  
 804-89-2257 DRUG EDUCATION 148.98 .00

\*\*TOTAL OUTRAGE MATERIALS/SUPPLIES 148.98 .00

\*\*DEPT IMMIGRATION & CUSTOMS ENFORCEMENT 1,145.63 .00  
 825-70-2172 IMMIGRATION & CUSTOMS ENFORCEMENT 1,145.63 .00

\*\*TOTAL ADULT INMATE CARE 1,145.63 .00  
 CARE OF INMATES 1,145.63 .00  
 EMERGENCY-911 FUND 2,781.78 .00

\*\*DEPT 911-DISPATCH CENTER 2,781.78 .00  
 911-80-2202 911-DISPATCH CENTER 2,781.78 .00  
 911-80-2203 VEHICLE FUEL 121.30 .00  
 911-80-2207 MAINTENANCE CONTRACTS 616.51 .00  
 911-80-2208 TELECOMMUNICATIONS 109.14 .00  
 911-80-2209 ELECTRICITY 1,380.35 .00  
 911-80-2215 HEATING/GAS/PROPANE 124.18 .00  
 911-80-2219 BUILDING MAINTENANCE/REPAIR 99.95 .00  
 911-80-2221 OFFICE SUPPLIES 19.98 .00  
 911-80-2248 PRINTING/PUBLISHING/ADVERTISING 43.57 .00  
 SAFETY EQUIPMENT 266.80 .00

Date: 12/07/17 8:13:05 D I S T R I B U T I O N CHECKS PRINTED 11/16/2017-12/07/2017

BANK01 WELLS FARGO 411,342.47

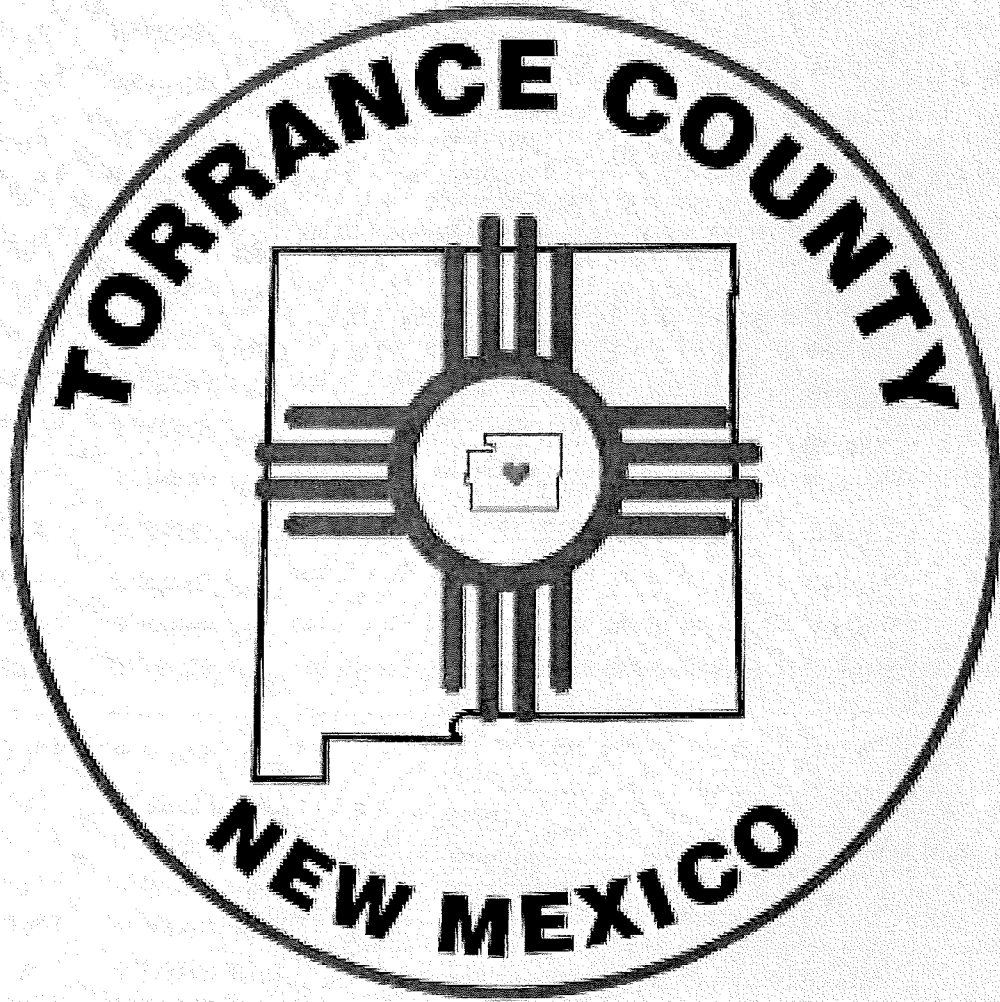
\*\* BANK TOTALS \*\*

411,342.47

.00

DEBITS

CREDITS



*Agenda Item  
No. 1*



PO Box 48  
205 9th Street  
Estancia, NM 87016  
(505) 544-4700 Main Line (505) 384-5294 Fax  
www.torrancecountynm.org



County Commission  
Commissioner James "Jim" Frost, District 1  
Commissioner Julia DuCharme, District 2  
Commissioner Javier E. Sanchez, District 3  
County Manager  
Belinda Garland  
Deputy County Manager  
Annette Ortiz

December 13<sup>th</sup>

**REQUEST TO BE PLACED ON THE TORRANCE COUNTY  
COMMISSION AGENDA**

This form must be returned to the County Manager's Office ONLY!

Deadline for inclusion of an item is WEDNESDAY, NOON prior to the subsequent meeting.  
All fields must be filled out for consideration.

Name: Greg Aragon K&S Industries  
First Last Department / Company / Organization Name

Today's Date: 11-20-17 Mailing Address: Moriarty  
(Departments/employees of Torrance County need not include their address)

Telephone number/Extension: 401-2812 Fax Number: \_\_\_\_\_  
Would you like this Agenda Faxed to you? Yes No

Email Address: \_\_\_\_\_

Is this request for the next Commission meeting?  YES  NO If no, date of Commission Meeting: \_\_\_\_\_

Brief explanation of business to be discussed:

Vendor Demonstration on Solar lighting on Traffic Signs

Is this a Resolution, Contract, Agreement, Grant Application, Other? \_\_\_\_\_

Has this been reviewed by Grant Committee?  YES  NO If yes, corresponding paperwork must be attached.

Has this been reviewed by the County Attorney? YES NO

If this is a contract, MOU, or Joint Powers Agreement there must be a signature line for the County Attorney on the original contract.

Has this been reviewed by the Finance Dept?  YES  NO Comptroller Initials: \_\_\_\_\_

- No Impact
- Change in current fund
- Raise Budget (allow 45 days after Commission approval)
- Change in funds (allow 45 days after Commission approval)
- Reduction
- Transfer funds (allow 45 days after Commission approval)

Other: \_\_\_\_\_



*Agenda Item*  
*No. 2*

PO Box 48  
205 9<sup>th</sup> Street  
Estancia, NM 87016  
(505) 544-4700 Main Line (505) 384-5294 Fax  
[www.torrancecountynm.org](http://www.torrancecountynm.org)



County Commission  
Commissioner James "Jim" Frost, District 1  
Commissioner Julia DuCharme, District 2  
Commissioner Javier E. Sanchez, District 3  
County Manager  
Belinda Garland  
Deputy County Manager  
Annette Ortiz

**REQUEST TO BE PLACED ON THE TORRANCE COUNTY  
COMMISSION AGENDA**  
This form must be returned to the County Manager's Office ONLY!

Deadline for inclusion of an item is WEDNESDAY, NOON prior to the subsequent meeting.  
All fields must be filled out for consideration.

Name: Chris McNeil NM State Land Office  
First Last Department / Company / Organization Name

Today's Date: 11-20-17 Mailing Address: \_\_\_\_\_  
(Departments/employees of Torrance County need not include their address)

Telephone number/Extension: 827-3650 Fax Number: \_\_\_\_\_  
Would you like this Agenda Faxed to you? Yes No

Email Address: kmcniel@slp.state.nm.us

Is this request for the next Commission meeting?  YES  NO If no, date of Commission Meeting: 12-13-17 NOTE: They cannot be here until 1:00PM. Will need to break & re-convene.

Brief explanation of business to be discussed:  
Presentation on proposed Land Exchange between State Land Office & BLM.  
Proposal: Approximately 8500 Acres & \$17,000<sup>00</sup> PILT funds.

Is this a Resolution, Contract, Agreement, Grant Application, Other? \_\_\_\_\_

Has this been reviewed by Grant Committee?  YES  NO If yes, corresponding paperwork must be attached.

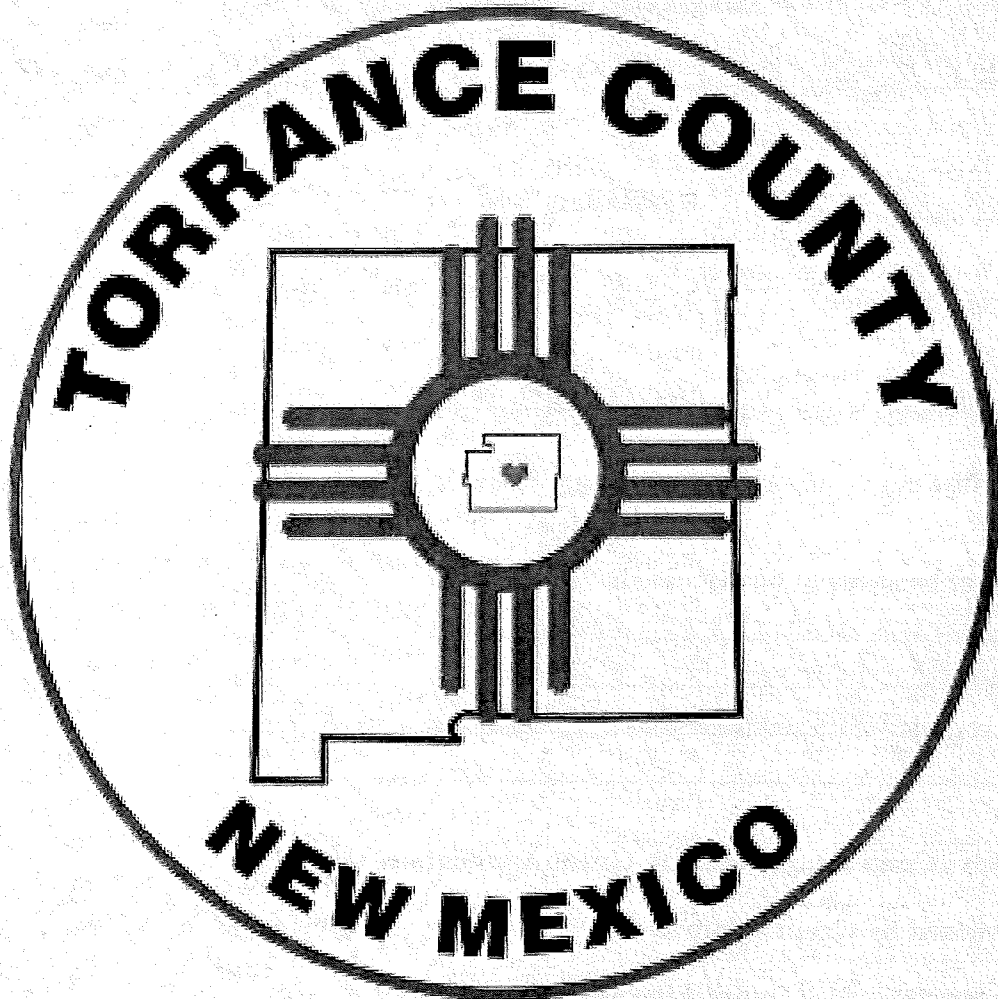
Has this been reviewed by the County Attorney? YES NO

If this is a contract, MOU, or Joint Powers Agreement there must be a signature line for the County Attorney on the original contract.

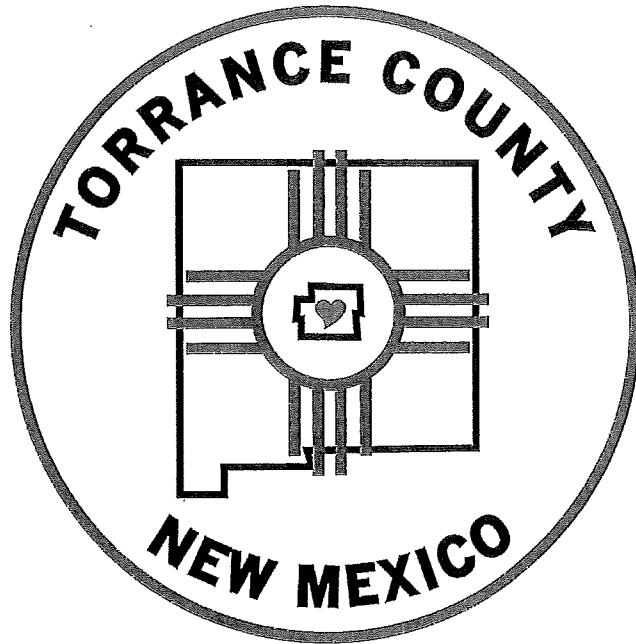
Has this been reviewed by the Finance Dept?  YES  NO Comptroller Initials: \_\_\_\_\_

- No Impact
- Change in current fund
- Raise Budget (allow 45 days after Commission approval)
- Change in funds (allow 45 days after Commission approval)
- Reduction
- Transfer funds (allow 45 days after Commission approval)

Other: \_\_\_\_\_

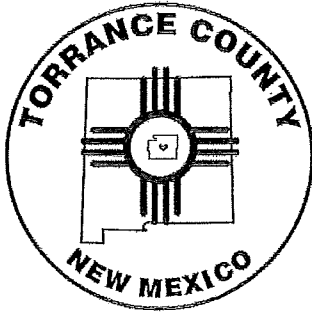


*Agenda Item*  
*No. 3*



# UPDATES

- ✓ Various County Departments
- ✓ Other Boards
- ✓ Forest Service
- ✓ Commission



# *Torrance County*

## *Planning & Zoning*

*P.O. Box 48 205 9<sup>th</sup> Street*

*Estancia, NM 87016*

*(505) 544-4393 Main Line (505) 384-5294 Fax*

*[www.torrancecountynm.org](http://www.torrancecountynm.org)*

### 2018 Planning & Zoning Board Meeting Schedule

<u>Meeting Date</u>	<u>Deadline for Application Submissions</u>
January 3, 2018	December 7, 2017
February 7, 2018	January 8, 2018
March 7, 2018	February 8, 2018
April 4, 2018	March 8, 2018
May 2, 2018	April 5, 2018
June 6, 2018	May 7, 2018
July 2, 2018	June 7, 2018
August 1, 2018	July 5, 2018
September 5, 2018	August 6, 2018
October 3, 2018	September 6, 2018
November 7, 2018	October 8, 2018
December 5, 2018	November 8, 2018
January 2, 2019	December 6, 2018

Please note:

If there are not enough action items on the agenda, the meeting may be cancelled. Cancellation notices will appear in the Mountain View Telegraph and The Independent.

Complete applications must be received by the submission deadline for the subsequent meeting in order to be placed on the agenda.



*Agenda Item  
No. 4*

## Torrance County DWI Program FY17 DWI Program Evaluation Report for DFA

### BACKGROUND: BASELINE DATA

In FY2017, the county of Torrance was not included in analyses conducted by the DOH and reported in the Epidemiological Profile due to small sample sizes. In the 2010 profile, the same was the case for many variables.

In the 2016 Epi Profile, Torrance ranked 9<sup>th</sup> for alcohol-related injury death rates and 24<sup>th</sup> for youth drinking and driving in 2013 (2016 Epi Profile). There were 7 counties with insufficient data for “driving after having too much to drink,” including Torrance County. Torrance’s youth drinking and driving for grades 9-12 had a prevalence of 6.8% (2013). Torrance County was ranked 24<sup>th</sup> compared to other counties and has a LOWER prevalence than that of the state of New Mexico at 8.9% for youth drinking and driving.

Torrance County’s youth binge drinking (grades 9 – 12) prevalence in 2013 (24.4%) was LOWER than that of the state (28.9%). Torrance ranks 26<sup>th</sup> among New Mexico counties for youth binge drinking.

The NM DWI Offender Characteristics and Recidivism Report (2003-2013) indicated that recidivism in NM decreased by more than half between 2003 and 2011, indicating a positive result. The following data shows number and percent of DWI convictions that were screened for substance use issues between 2010 and 2014. The overall percent of convicted DWI offenders with a re-arrest in Torrance County from 2003-2013 was 21.8%, 16<sup>th</sup> among New Mexico counties.

**Table 1. NM DWI Offender Characteristics and Recidivism Report (2010-2014)**

	2010	2011	2012	2013	2014	% 2010-2013	State
Number of DWI Convictions Screened	72	58	47	46	41	-43.1	-13.4%
Percent (%) of DWI Convictions Screened	83.7%	85.3%	77%	64.8%	87.3%	+4.3%	91.4%
<b>Data Summary:</b> The percent of DWI convictions screened increased steadily from 2010 through 2014 (with exception to years 2012 and 2013). In Torrance County, 87.3% of DWI convictions were screened in 2014. The goal is to screen 100% of cases in FY2018.							



## DESCRIPTION OF STRATEGIES USED DURING THE PROJECT PERIOD FY17

### PREVENTION

#### Objective 1.

“Keep A Clear Mind” (KACM) is a parent-child, take-home program in alcohol, tobacco, and drug education. It has been field-tested and rigorously evaluated with students in grades 4, 5, & 6. The program is conducted over a 4-week time period where brief in-class topics are supplemented by a take home booklet for review with parents or guardians. Letters are also sent home along with the booklets to attest that the parents have reviewed the material and to allow the student to receive a token prize.

#### Rationale for use:

Keep A Clear Mind was chosen by the Torrance County DWI program for its solid reputation as a model program, and because it is felt that by changing attitudes among our youth today, we reduce DWI tomorrow. The program has won the Center for Substance Abuse Prevention's (CSAP) Exemplary Program Award, has been promoted as a Model Program by CSAP, the Substance Abuse and Mental Health Services Administration, and the Office of Juvenile Justice and Delinquency Prevention. The program is also listed on the National Registry of Evidence-Based Programs and Practices.

#### Objective 2.

The “Protecting You, Protecting Me” (PYPM) Prevention Program, is an 8-week alcohol prevention program for grades 1-5. PYPM addresses eight core topics across grade levels: our brain, growth and development, health and safety, rules and laws, friends, choices and decisions, media and awareness, and communication (especially with adults).

#### Rationale for use:

The PYPM Prevention model was developed and tested Mothers Against Drunk Driving (MADD), and is now administered by The Hazelden Corporation. It was chosen due to its being an evidence-based program that also works to reframe attitudes and teach good behaviors regarding alcohol to youth. PYPM is a Model Program of the Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services (an NREPP model program).

#### Objective 3.

Alcohol-free and/or educational events and presentations were offered to youths in Torrance County to provide social alternatives to drinking while infusing the events with prevention elements.

**Rationale for use:**

If youths are to see that alcohol isn't a necessity at every function where they anticipate having a good time, then opportunities for fun without alcohol must exist. The Torrance DWI Program helped to finance and organize these events, at times with help from teen groups such as "Teens Need Teens" (TNT). Not only are they an opportunity to have sober fun, but they provide the opportunity to disseminate prevention messaging and to encourage youth leadership. Besides providing alcohol-free alternative activities other evidence-based approaches such as raising the perceived level of risk and countering social norms that accept or encourage underage drinking were infused into these events, activities, and presentations.

**Statewide Goals**

- **Statewide Goal 1: Reduce binge drinking and underage drinking in New Mexico by 5% by June 2017**
- **Statewide Goal 2: Reduce alcohol-related injury and death 5% in New Mexico by June 2017**
- **Statewide Goal 3: Reduce alcohol-related motor vehicle crashes and deaths by 5% in New Mexico by June 2017.**

The Torrance County prevention program has addressed these indicators and seen reductions for the past several years. By continuing the use of the PYPM and KACM curricula, and by providing alcohol-free activities to youths county-wide, the goal of Torrance County is to hold a steady line on underage and adult drinking and to not have an attendant increase in DWI. We hope to see a continued trend toward a 5% reduction in binge drinking, underage drinking, alcohol-related injury and death, and alcohol-related motor vehicle crashes and deaths by June 2018.

**Torrance County's objectives related to statewide Goals during FY16 were as follows:**

**Objective 1:** Using the evidence-based "Keep a Clear Mind" (KACM) educational program in Torrance elementary schools throughout the 2016 – 2017 academic year, knowledge and attitudes regarding program elements will increase 10% from pretest to posttest.

**Strategy:** The Keep A Clear Mind (KACM) program was implemented with 64 students in the entire sixth grade population of Moriarty Middle School. Approximately three or four students' parents opted them out of participation. The program relies heavily on students bringing program materials home and discussing them with their parents or guardians. A trained facilitator, Tracey Master, the DWI Prevention Program Coordinator conducted the program with this cohort.

## KACM RESULTS

A total of 64 students were provided with the KACM program, but there were 11 students who did not complete both pre and posttests.

The group analyzed consisted of 53 students- 26 males (49%) and 27 females (51%) who completed a pretest before the program began, and a posttest upon the program's conclusion to measure student attitudes regarding alcohol, cigarettes, and marijuana. The posttest also asked if the students' parents had spoken to them about the program's elements, and three questions asked about parent/guardian permissiveness of alcohol, cigarettes, and marijuana use

The pretest/posttest questionnaires contained nine questions which can be divided into thirds according to content and substance in this way:

**Table 2. Pre/Post Survey Breakdown of the 10 Questions**

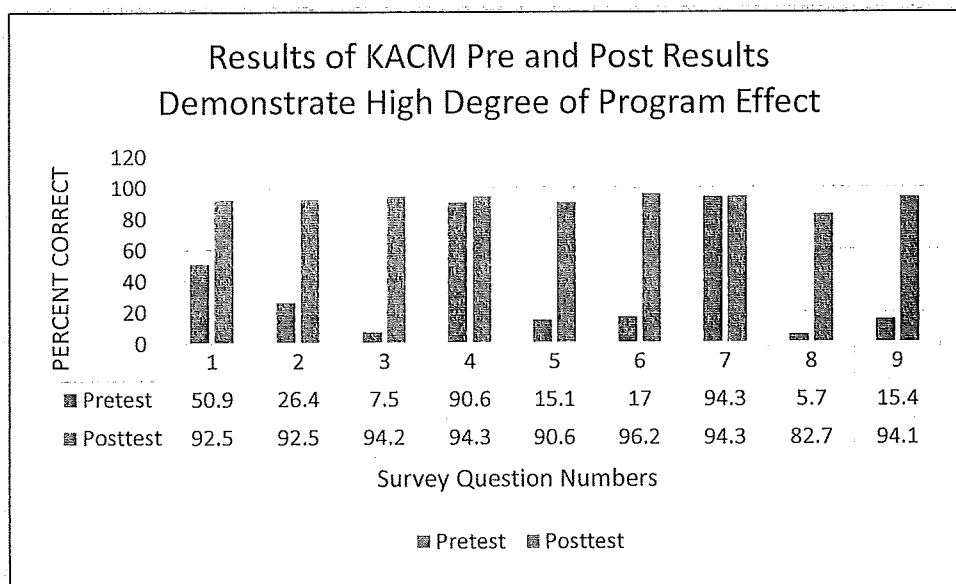
My parent/guardians think it is OK to use alcohol/cigarettes/marijuana	3 Questions (1, 4, and 7)	Responses Yes/No
Kids can hurt themselves if they use alcohol/cigarettes/marijuana	3 Questions (2, 5, and 8)	Responses Yes/No
Do you think you will use alcohol/cigarettes/marijuana when you are a teenager?	3 Questions (3, 6, and 9)	Responses Yes/No
<b>Posttest Only:</b> Did my parent/guardian talk with me about the information in the booklets about alcohol/cigarettes/marijuana and making healthy choices?	1 Question (10)	Responses Yes/No

When the pretest and posttest questionnaires were analyzed for changes in the desired direction from pre to posttest, an extremely large difference in responding was seen between pre and post- and in the correct direction!

As seen in the chart below, the smallest magnitude of change from pre to post occurred in questions 1, 4, and 7; these asked students if their parents/guardians thought it was OK to use alcohol, cigarettes, and marijuana. Since both pre and post scores are high on these three measures, it demonstrates generally healthy attitudes regarding the use of these mind-altering agents. It is hard to know if the students were echoing parent/guardian attitudes on adult use or young people's use.

The remaining pre and post responses were more clear and showed an excellent degree of change in the desired direction. Here we are measuring a clearer concept- 1) the degree to which the students believe they can be hurt by using alcohol, tobacco, and marijuana, and 2) do they believe THEY will use these substances when they reach their teenage years. The results are clear, and can be seen in the figure below:

**Figure 1. Mean Pretest And Posttest Test Scores On The 9 Questions From The KACM Pre/Post Survey Questionnaire.**



The magnitude of change from pre to posttest is highly encouraging! While not represented on the graph, the posttest question #10 regarding parents/guardians speaking with the student about the program content was answered affirmatively by 44 of the 53 students (83%), indicating a high level of parent/guardian participation- a possible contributor to the program’s positive effects.

### Qualitative Findings

On the posttest survey, students were invited to add a personal comment on how the program delivery might be improved in the future. This evaluator found that these elementary school students provided very insightful and useful feedback to the project team. Some examples of student comments include:

- Several requests for more information on the subject of alcohol, tobacco, and other drugs
- Dedicate more time to the program/make it longer/class needs more time
- Talk more about the things that are “not good for us”

- Show pictures or diagrams to show how drugs can affect internal organs
- Need longer discussion so more can be learned
- Keep it just as it is right now!

The KACM program is designed for student – parent/guardian interaction, but at fidelity checks the evaluator noted that the program facilitator Ms. Tracey Master provided some additional information for the students regarding the content of the current topic. The extra time put into the program really bore fruit in FY16. This seemed to be a good addition to the program as noted by comments by students. The prevention team will be discussing ways to incorporate more of this into the KACM program in the future. **In this evaluator’s estimation the KACM program was an unqualified success, and exceeded the results seen in FY16.**

**Objective 2:** By implementing the “Protecting you, Protecting Me” (PYPM) program in Torrance elementary schools throughout the 2016 – 2017 academic year, knowledge, attitudes, and intentions regarding program elements will increase by 10% from pretest to posttest.

**Strategy:** The PYPM program was implemented in the Estancia Elementary School during the 2016 – 2017 academic year. The table below presents the number of classrooms receiving the program at all three schools:

**Table 3. Torrance Students Receiving PYPM**

School	# of Grade 3 classes/students	# of Grade 4 classes/students	# of Grade 5 classes/students	# of classes/ Total students
Estancia ES	3/35	2/35	3/34	8/104

The Torrance County program manager worked with the principal of Estancia ES to ensure implementation during the 2016 – 2017 school year. The program in the classroom was provided by two trained and experienced providers- Tracey Master, the DWI Prevention Program Coordinator and Lucia Lucero, who conducted all sessions of PYPM at all schools and in all grades. Using feedback provided from last year’s program, the facilitators incorporated additional material and set aside a short time for discussion and students’ questions.

### **PYPM RESULTS**

***Note: During the 2015 – 2016 school year the program evaluator conducted fidelity checks, the results of which enabled the Torrance DWI prevention team to make adjustments to the program’s delivery that proved to be extremely successful. The previous FY16 analysis showed a very modest effect. Please read on to see how well the students in FY17 performed!***

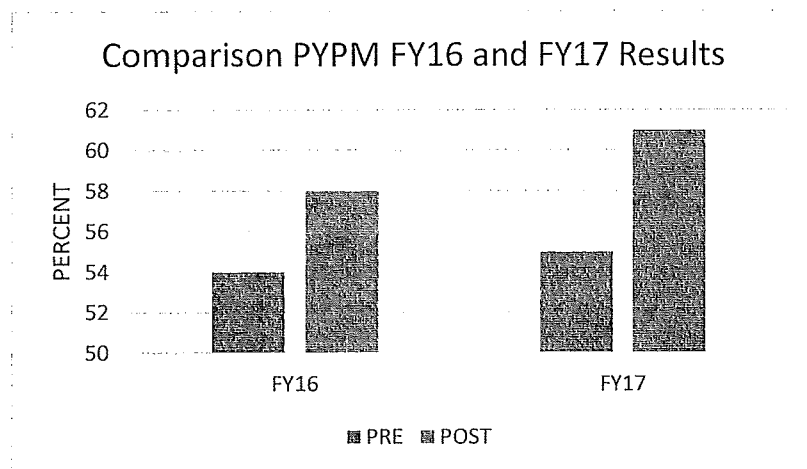
A total of 139 students were provided with the Protecting Me, Protecting You program in grades three through five at the Estancia ES. Due to students moving out of district during the school year or being absent at either pre or posttest survey days, a total of 104 students fully participated in the 8 PYPM sessions in the program and were included in this analysis.

Of these 51% were males and 48.1% were females (1 student failed to report sex). Students in grades 3 - 5 ranged from 8 to 11 years of age. With regard to ethnicity, the distribution was about what could be expected from a Torrance County cohort with the largest group being Hispanic (50.5%), followed by White (21.4%) and Native American (2.9%). One student reported as "Black" (1%). A category that has been on the increase in recent years include those students who report their ethnicity as "Bi-Racial" who, in this cohort, comprised 24.3% of the sample.

Students in this cohort were given a 13 item pretest and identical posttest before the program began and upon completion. Questionnaire items were coded as "correct" or "incorrect" and a score for all 13 items was calculated. ***On the overall calculation, mean scores from pretest to posttest increased to a greater degree than was predicted.*** For pretest, the mean score was 54.76% while at posttest, the mean was 61.09%. This degree of positive change represents an increase of 12% from pretest to posttest. (Note: the previous year's degree of change was only 4%) This notable positive increase in the knowledge contained in the PYPM program is significant with respect to the constraint of needing to do the program's lessons monthly rather than weekly. ***The findings suggest the improvements made in program delivery based on what we learned from fidelity studies in FY16 overcame this constraint by a factor of three (4% change FY16 versus 12% FY17)!***

**This 12% change exceeded the 10% change sought in Objective 2. When a paired samples t-test was conducted on the pretest and posttest scores, the degree of change seen here proved to be of a highly significant magnitude ( $t = 3.23, p = .002$ ).**

**Figure 2. Improvement in PYPM Results FY16 to FY17**



**Note:** While the standard format is for modules 1 – 8 to be conducted weekly, constraints at the Estancia Elementary School required the provider to meet with students once per month from September through May. Surprisingly this did not reduce the effectiveness of the program. For details see the Results Section on page 4.

These findings on the PYPM program demonstrate the worth of the program in terms of educating young people on the importance of keeping their brains healthy, how to avoid riding with a drunk driver (and what to do if there's no other choice), and how the messages about alcohol they receive via media can be misleading. Their responses also indicated a change (positively) in their intentions to use alcohol as a teen. The Torrance DWI Prevention Team hopes to see continued success with this program and Torrance County youth in FY18.

**Objective 3:** During the 2017 Fiscal Year, a number of alcohol-free and/or educational events will be offered to youths and families in Torrance County to provide social alternatives to drinking and providing educational substance abuse information.

**Strategy:** The Torrance County DWI Program conducted a number of alcohol-free events were organized by the Torrance County DWI Program. Below is a table showing the events/activities, and approximate numbers of attendees.

**Table 4. Alcohol-Free Activities with Education and Information Dissemination**

DATE/QUARTER	EVENT/ACTIVITY	ATTENDEES/REACHED
7/16 - 1 <sup>st</sup> Q	Project Graduation: Alcohol Free Prom	450
7/2/16	Stars and Stripes Family Ball	48
9/10/16	Dance Under the Stars	86
10/16 – 2 <sup>nd</sup> Q	Presentations for MADD Red Ribbon Week – Estancia ES	234
10/16	Presentations for MADD Red Ribbon Week – Estancia MS	96
10/16	Presentations for MADD Red Ribbon Week – Mountainair ES	108
10/16	Presentations for MADD Red Ribbon Week – Moriarty ES	421
10/16	Technical Assistance to Mountainair Schools for “Red Ribbon Week”	14
1/17 – 3 <sup>rd</sup> Q	Alcohol/Drug Awareness Presentations- Mountainair ES	91
1/17	Alcohol/Drug Awareness Presentations- Estancia MS	46
3/22/17	Overview presentation of the PYPM curriculum for Mountainair ES (School could not accommodate whole curriculum)	77
4/17 – 4 <sup>th</sup> Q	Alcohol/Drug Awareness Presentation – Mountainair ES	157
4/17	Alcohol/Drug Awareness Presentation – Moriarty MS	169
4/17	3- Teens Need Teens (TNT) Program activities held	109

4/17	"Sticker Shock" Campaign (Raising awareness of NM 4 <sup>th</sup> degree felony law for purchasing/providing alcohol to minors)	500
4/22/17	Torrance County Family Health and Safety Fair	225
	<b>TOTAL &gt;&gt;&gt;</b>	<b>2,831</b>

## PROCESS EVALUATION RESULTS

*What were the successes and challenges with implementing the program as planned?*

Program staff and facilitators of curriculum were interviewed at the end of each cohort. Common themes around implementation successes and challenges included the following: In this project, like any other, the prevention team was faced with challenges, but with teamwork and perseverance managed to accomplish nearly all of the activities planned. One challenge that has been reported by many preventionists working with elementary school aged youth has been the increasing burdens on time placed on teachers and school administrators due to the demands of standardized testing. Once more this proved to be the case with the Torrance County program. While teachers have been enthusiastic and welcome the implementation of programs, they have a particularly hard time making it work schedule-wise. One particular problem mentioned in this report, was that the Estancia ES limited the available times for the PYPM program implementation to once per month. As is also detailed, this challenge was met-head on by conducting a more intensive "review" of the previous module's content before presenting the new information.

*How many sessions were held, and how many people attended each session? How many participants completed the program? What were participants' impressions of the program?*

For the PYPM program, there were 8 sessions held with 8 classes in grades 3 – 5 (a total of 64 sessions delivered). Given the short time each facilitator has to spend with the students, attendance records are not kept of each session. Rather, the total numbers of students enrolled in the class, minus the ones who do not submit a pre and posttest are considered in the numbers below. This underestimates the program's impact as there are students who may have missed the pretest or posttest but attended other sessions.

Table 5. Participants Enrolled and Completing the KACM and PYPM Programs

PROGRAM	# OF STUDENTS ENROLLED	# OF STUDENTS COMPLETING PGM.
KACM	64	53
PYPM	139	104



## Outcome Evaluation Results

To what extent did the Torrance County Prevention program benefit participants?

- The programs for young elementary students such as PYPM are designed to increase knowledge of automobile safety (when a young person is faced with needing to take a ride home from someone they suspect has been drinking) and the role and importance of their brain. During this fiscal year, a cohort of over 300 students were able to perform with greater knowledge on the posttest which points to the success of the PYPM implementation
- The students receiving the KACM program designed to educate on alcohol and other drug topics and to facilitate communication between students and their parents/guardians, were unable to beat their stellar pretest scores at posttest! (Please see Results under Objective 1.)
- The youths attending the numerous activities, presentations, and events were asked about their opinion of the value of the particular program. The comments gleaned from comment cards and verbally to the prevention team were overwhelmingly positive.

*To what extent did the Prevention program decrease self-reported past 30-day alcohol use in middle and high schools in Torrance County?*

This data not collected directly via the PYPM or KACM programs.

*To what extent did the Prevention program decrease past 30-day binge drinking among MS and HS youth?*

This data not collected directly via the PYPM or KACM programs.

*To what extent did Torrance County Prevention impact age of first drink?*

This data not collected directly via the PYPM or KACM programs.

NOTE: Both the PYPM and KACM programs are designed for elementary school aged students, therefore the above indicators are neither collected nor are the relevant. These primary prevention programs address the knowledge, attitude, and **future** behaviors of the participants. It is unlikely that middle school and high school students will refrain from risky alcohol behaviors unless prevention begins earlier.

## Information Dissemination

**Strategy:** Information dissemination- raise awareness of substance abuse consequences by providing educational materials at community events and at school to raise awareness of alcohol-related injury.

Rather than create an additional objective, the Torrance Prevention Team decided to use the activities, presentations, and events listed in Table 4 (Objective 3) to provide for as much

dissemination of substance abuse information as possible. At each of these events, information in the way of pamphlets, hand-outs, and information cards were widely distributed. The Prevention team members as well as allies also communicated information in their verbal encounters with participants. It is said that alcohol problems are not an "individual's" problem, but rather community problems. Many of the events and activities listed here raise community awareness about risky drinking and behaviors like DWI.

### **Process Evaluation Results**

*How many individuals in the county were reached through information dissemination?*

This would be the total of Table 4: 2,831

*How many individuals were referred to treatment services?*

The Torrance county Youth Programs were not designed to refer to treatment

*How did the collaboration change among stakeholders?*

Torrance County DWI has always enjoyed a positive working relationship with the many county government, law enforcement agencies, school districts, health care providers, the faith based community and more. The relationship has only strengthened during the past year. This is demonstrated by the positive working relationship that the program has with the Estancia Municipal School District. In spite of obstacles and the inability to deliver PYPM in the prescribed manner, the elementary school has worked closely with the DWI Coordinator to ensure that prevention education is provided to the first- through fifth-grade population. Additionally, the DWI Coordinator was recognized as a "special guest" and thanked for her contributions to prevention education during Red Ribbon Week 2017.

### **Outcome Evaluation Results**

*To what extent did the perception of risk of being stopped by law enforcement for DWI increase or decrease?*

Not addressed in these youth programs.

*To what extent did the perception of risk of being convicted if stopped and charged with a DWI increase or decrease?*

The current program collected data on neither of these variables.

## **FY17 Lessons Learned**

This evaluator discussed the subject of lessons learned during FY16 activities with the hope of making course corrections for the upcoming year's work (FY17). One of the things that has occurred to the prevention team is that while the schools have the ultimate decision-making power over which programs to allow and how much time they will provide to them, this can be mediated by a more proactive approach to recruiting Principals, administrators and teachers. To do this, the team feels that the work of the Torrance County DWI program should be more widely publicized and explained in greater detail to the public and the key educational decision-makers.

As far as successes go, seeing the positive reactions by the students to the programs, along with the pictures they draw and the comments they make as part of the programs give the team the sense that we are doing the right thing at the right time. Further, declining rates of DWI give us the feeling that we are on the right track and making a difference. The impact will hopefully be felt as today's grade school students become tomorrow's young adults.

## **FY17 Conclusions and Recommendations**

As an evaluator, I urge the Torrance County DWI Program to continue their work with grade school aged students as I feel that a systems approach is needed and prevention programs should be presented through high school, college, and adulthood. The stakes are too high to do otherwise. While limited finding and availability of school-time is a constraint, the prevention

All three objectives outlined in the prevention plan demonstrated positive outcomes and a close look at the process work of implementation revealed no major concerns to this evaluator.

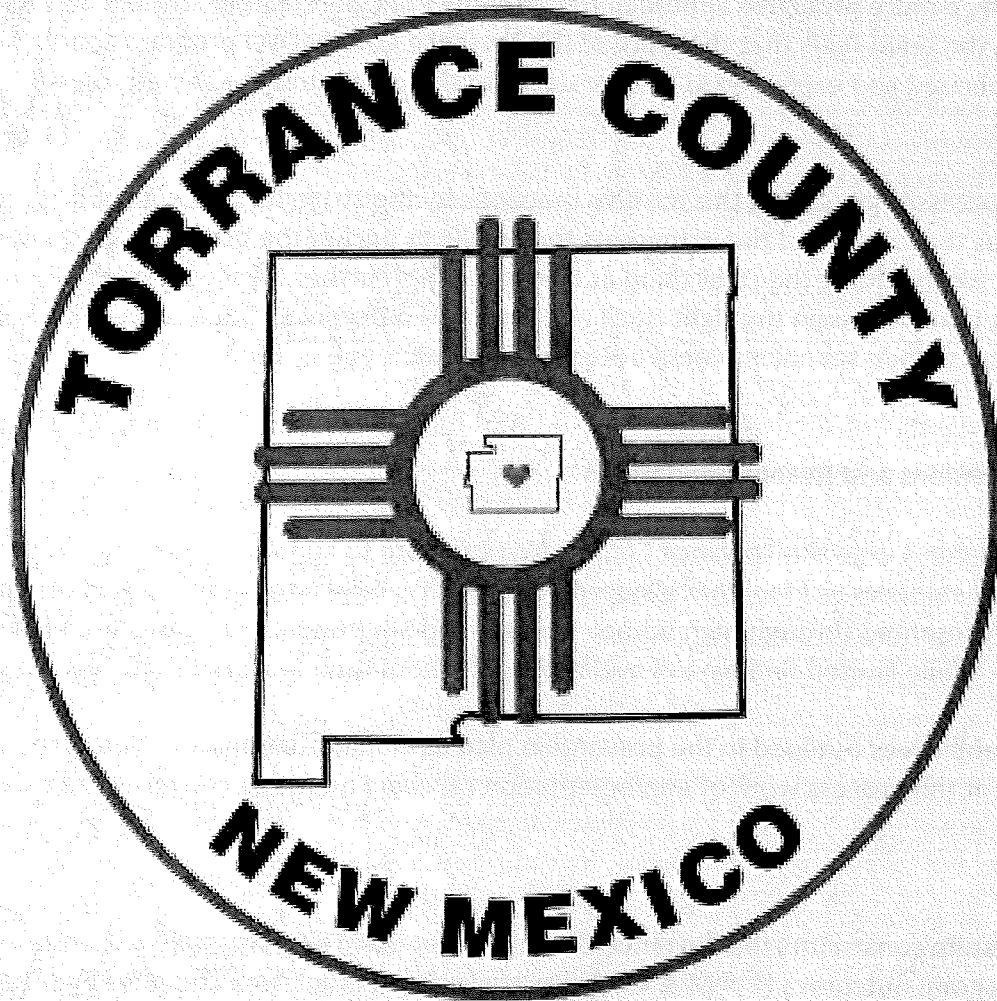
To sum up:

- Despite constraints the Torrance County Prevention Team was able to demonstrate program outcomes (PYPM & KACM) that exceeded objectives and have laid the groundwork for continued success.
- The calendar of events and presentations was sufficient to reach a large number of youth and families with alcohol information, awareness raising, and FUN!
- The program is well-positioned to continue improving on its track record and reducing DWI in Torrance County.

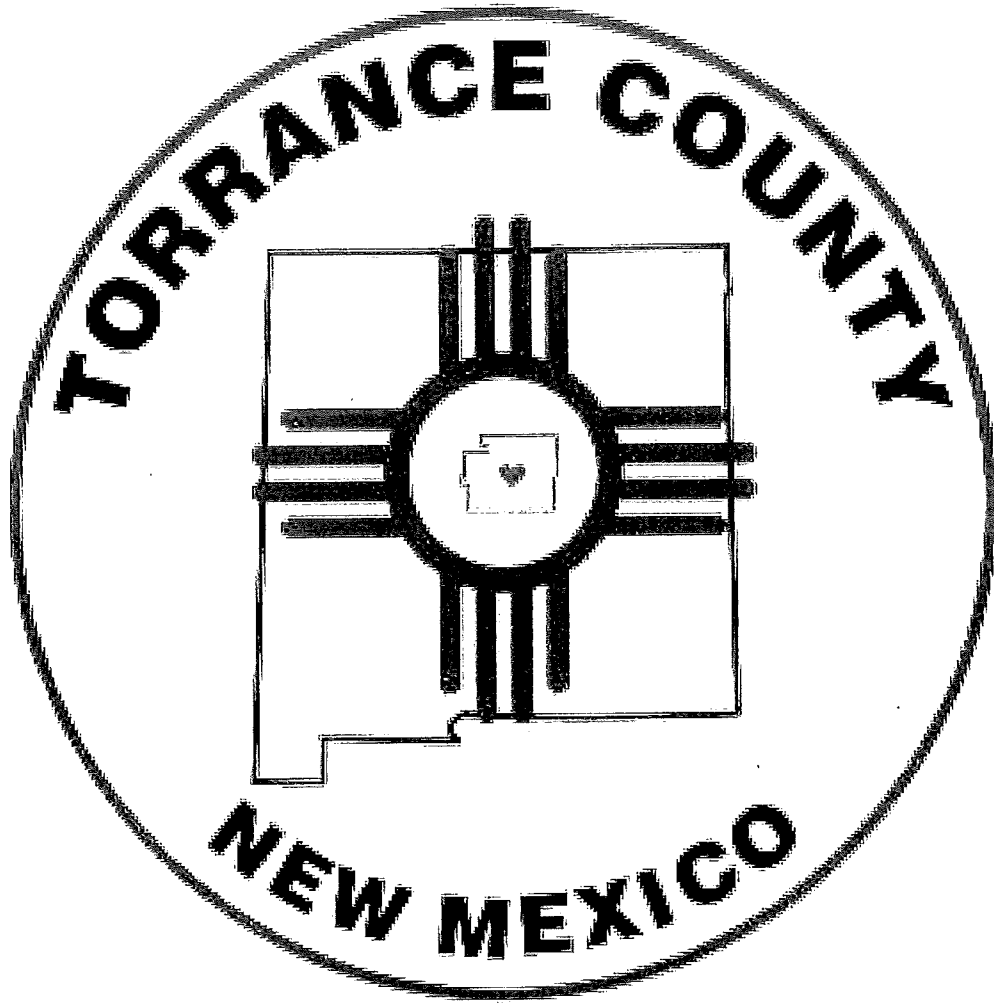
Respectfully submitted by:

John Steiner, MPH  
Program Evaluator, Torrance County DWI

Tracey Master, MA  
Program Manager, Torrance County DWI



*Agenda Item*  
*No. 5*



*Agenda Item*  
*No. 6*



## Job Specifications

Effective Date:

Revised Date:

**ASSISTANT CHIEF OF OPERATIONS**

**POSITION TITLE:** Assistant Chief of Operations (Fire)

**REPORTS TO:** Fire Chief

### **JOB DESCRIPTION**

**Operations Coordinator:** Under the direction of the Fire Chief, initiates, administers, and supervises all services and programs. Work involves assisting the Fire Chief in the administration, direction, and coordination of District activities and operations, including direct management and supervisory authority over staff personnel. The authority includes but not limited to:

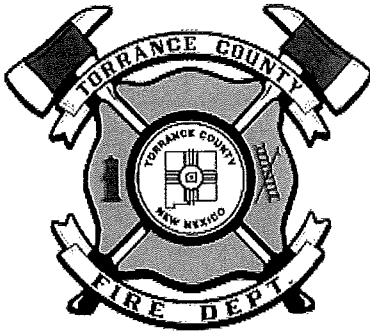
- Oversight of Department's volunteer/student program.
- Fire suppression training programs.
- Assisting in the administration of the Department's emergency medical services program.
- Responsible for interpreting, applying and enforcing all Department policies and procedures.
- Responsible for the Department's emergency response delivery system. The delivery system shall perform using accepted firefighting & EMS practices and Department policies and procedures.
- Responsibility to recommend, transfer, suspension, promotion, discharge, and discipline of employee's.

The Operation's Chief will assist and act in a confidential capacity to the Fire Chief. The Operation's Chief works in a confidential environment as it relates to budgeting, bargaining, personnel matters and preparation of confidential proposals, policies, and other materials relating to employee relations. The Operation's Chief is in command of the District in the absence of the Fire Chief.

### **QUALIFICATIONS**

**Minimum Qualifications Required:** Any combination of training, education, and experience in Firefighting, Fire Science, or related field. Extensive experience in the fire suppression, with knowledge or certification in the following:

- Minimum of a High School Diploma or GED
- Fire prevention, education and relations.
- Fire and Building codes.
- Labor Relations
- Knowledge of fire department and district, including three years (3) supervisory experience.



## Job Specifications

Effective Date:

Revised Date:

### ASSISTANT CHIEF OF OPERATIONS

- New Mexico Drivers License, class E, at time of appointment.
- EMT – FR or higher
- Fire Fighter I
- Wildland Firefighter II

**Substance Abuse Testing.** Due to the safety and/or security sensitive nature of this position, individuals shall be subject to pre-employment or pre-placement alcohol, drug and/or controlled substance testing as outlined in County or Fire Department policy and procedures.

**Preferred/Desirable Qualifications.**

- Fire Officer I
- Wildland Firefighter I
- Hazmat and USAR Certification
- EMT B or higher

**Physical Demands and Conditioning**

- This position requires two diverse sets of physical qualifications since appointment is both in the office and emergency scene environments. The Operation's Chief must be able to function at a high cognitive level, communicate clearly both orally and in writing, have the ability to utilize office and telecommunications equipment, operate a vehicle in both emergency and routine driving modes, function in a physically, mentally and emotionally stressful environments, function outdoors in all types of weather conditions and extremes, and be able to utilize all five senses to determine threats to safety of self, emergency response personnel, and the public. On rare occasions for short durations of time this position may be required to participate in active firefighting or rescue in atmospheres that are inherently dangerous to life and health utilizing firefighting personal protective equipment and self-contained breathing apparatus. Participate in a regularly scheduled (minimum of three times a week) physical fitness program.

### **ESSENTIAL FUNCTIONS**

Duties may include, but are not limited to, the following:

- Executes general and special assignments in the planning, administration, coordination, direction, and review of Department fire operations and activities.
- Acts as the Departments Safety Officer



## Job Specifications

Effective Date:

Revised Date:

### ASSISTANT CHIEF OF OPERATIONS

- Is responsible for implementing, evaluating, reviewing and making recommendations for updating Department personnel programs, staffing plan, and procedures as necessary. Shall work closely with all Department personnel, evaluate and counsel subordinate personnel on work performance and make recommendations as necessary.
- Represents the Fire Chief in conferences and cooperative endeavors with County Emergency Services, industrial, business, insurance, safety, municipal, state and other officials.
- Participate in duty officer rotation schedule for the Department's chief officer coverage. Chief officer coverage involves being available in Department's response area and the ability to respond and/or communicate by phone for all Department's administrative needs.
- Must have an understanding of human relations and the ability to establish and maintain positive public relations.
- Ability to command large-scale operations of personnel and equipment under emergency conditions.
- Develop, maintain and assure a positive public image both personal and Department wide.
- Ability to communicate effectively orally and in writing.
- May be required to submit written recommendations to the Fire Chief for improving the efficiency of the overall Department operations.
- This position must have a thorough knowledge of the Department's rights and obligations as provided in the State Mobilization Plan.
- This appointment requires a minimum of 12 to 20 hours a week assignment.
- This appointment requires response to calls for service while on duty.

All members of the Torrance County Fire Department are expected to uphold and exhibit the Department's shared values of Knowledge, Respect, and Integrity.





## Job Specifications

Effective Date:

Revised Date:

### ASSISTANT CHIEF OF SUPPORT SERVICES

**POSITION TITLE:** Assistant Chief of Support Services (Fire/EMS)

**REPORTS TO:** Fire Chief

#### **JOB DESCRIPTION**

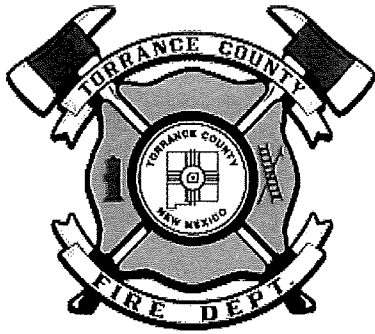
**Operations Coordinator:** This position, under the general supervision of Fire Chief, is responsible for supervising and coordinating assigned administrative activities within the Fire Department including participation in various programs and internal controls. May be assigned administrative, support services, and/or operational responsibilities. Assists in planning, organizing, and coordinating projects and activities to ensure the efficient and effective provision of life safety services to the community. The Assistant Chief is responsible for the supervision of employees in his/her assigned work group. Assists other supervisors/officers as necessary to facilitate Department initiatives. In the absence of the Fire Chief, this position may assume the duties of the department director when assigned. The authority includes but not limited to:

- Oversight of Department's volunteer/student program.
- Fire suppression training programs.
- Assisting in the administration of the Department's emergency medical services program to include training.
- Responsible for interpreting, applying and enforcing all Department policies and procedures.
- Responsible for the Department's emergency response delivery system. The delivery system shall perform using accepted firefighting & EMS practices and Department policies and procedures.
- Responsibility to recommend, transfer, suspension, promotion, discharge, and discipline of employee's.

The Support Services Chief will assist and act in a confidential capacity to the Fire Chief. The Support Services Chief works in a confidential environment as it relates to budgeting, bargaining, personnel matters and preparation of confidential proposals, policies, and other materials relating to employee relations. The Support Services Chief is in command of the District in the absence of the Fire Chief.

#### **QUALIFICATIONS**

**Minimum Qualifications Required:** Any combination of training, education, and experience in Firefighting, Fire Science, or related field. Extensive experience in the fire suppression, with knowledge or certification in the following:



## Job Specifications

Effective Date:

Revised Date:

### ASSISTANT CHIEF OF SUPPORT SERVICES

- Minimum of a High School Diploma or GED
- Fire prevention, education and relations.
- Fire and Building codes.
- Labor Relations
- Knowledge of fire department and district, including three years (3) supervisory experience.
- New Mexico Drivers License, class E, at time of appointment.
- EMT – FR or higher
- Fire Fighter I
- Wildland Firefighter II

**Substance Abuse Testing.** Due to the safety and/or security sensitive nature of this position, individuals shall be subject to pre-employment or pre-placement alcohol, drug and/or controlled substance testing as outlined in County or Fire Department policy and procedures.

#### **Preferred/Desirable Qualifications.**

- Fire Officer I
- Wildland Firefighter I
- Hazmat and USAR Certification
- EMT B or higher

#### **Physical Demands and Conditioning**

- This position requires two diverse sets of physical qualifications since appointment is both in the office and emergency scene environments. The Support Services Chief must be able to function at a high cognitive level, communicate clearly both orally and in writing, have the ability to utilize office and telecommunications equipment, operate a vehicle in both emergency and routine driving modes, function in a physically, mentally and emotionally stressful environments, function outdoors in all types of weather conditions and extremes, and be able to utilize all five senses to determine threats to safety of self, emergency response personnel, and the public. On rare occasions for short durations of time this position may be required to participate in active firefighting or rescue in atmospheres that are inherently dangerous to life and health utilizing firefighting personal protective equipment and self-contained breathing apparatus. Participate in a regularly scheduled (minimum of three times a week) physical fitness program.



## Job Specifications

Effective Date:

Revised Date:

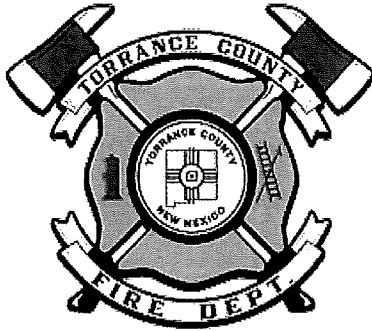
<b>ASSISTANT CHIEF OF SUPPORT SERVICES</b>
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### ESSENTIAL FUNCTIONS

Duties may include, but are not limited to, the following:

- Executes general and special assignments in the planning, administration, coordination, direction, and review of Department fire operations and activities.
- Acts as the Department's Safety Officer
- Is responsible for implementing, evaluating, reviewing and making recommendations for updating Department personnel programs, staffing plan, and procedures as necessary. Shall work closely with all Department personnel, evaluate and counsel subordinate personnel on work performance and make recommendations as necessary.
- Represents the Fire Chief in conferences and cooperative endeavors with County Emergency Services, industrial, business, insurance, safety, municipal, state and other officials.
- Participate in duty officer rotation schedule for the Department's chief officer coverage. Chief officer coverage involves being available in Department's response area and the ability to respond and/or communicate by phone for all Department's administrative needs.
- Must have an understanding of human relations and the ability to establish and maintain positive public relations.
- Ability to command large-scale operations of personnel and equipment under emergency conditions.
- Develop, maintain and assure a positive public image both personal and Department wide.
- Ability to communicate effectively orally and in writing.
- May be required to submit written recommendations to the Fire Chief for improving the efficiency of the overall Department operations.
- This position must have a thorough knowledge of the Department's rights and obligations as provided in the State Mobilization Plan.
- This appointment requires a minimum of 12 to 20 hours a week assignment.
- This appointment requires response to calls for service while on duty.

All members of the Torrance County Fire Department are expected to uphold and exhibit the Department's shared values of Knowledge, Respect, and Integrity.



## Job Specifications

Effective Date:

Revised Date:

**SAFETY OFFICER**

**POSITION TITLE:** Emergency Medical Services (EMS) Coordinator

**REPORTS TO:** Fire Chief

### **JOB DESCRIPTION**

**EMS Coordinator:** An EMS Coordinator manages the certification and recertification of Advanced Life Support (ALS) and/or Basic Life Support (BLS) providers and/or instructors, and is responsible for evaluating EMS training activities for effectiveness, with an emphasis on its impact on department service delivery, and conducts classroom and other training. This assignment also performs continuous quality improvement (CQI) which involves designing quality assurance programs to measure program outcome and effectiveness, evaluating EMS data, identifying methods of providing effective emergency medical care, and identifying methods to address complex medical issues and patient care delivery situations; serves as a pre-hospital liaison between the Fire Department, hospitals and other outside agencies; and participates in the resolution of issues and the enhancement of services. This position is also responsible for performing related duties as required. This position answers directly to the Fire Chief.

### **QUALIFICATIONS**

**Minimum Qualifications Required:** Any combination of training, education, and experience, Emergency Medical Services, Education, Fire Science, or related field.

- Minimum of a High School Diploma or GED
- EMT-FR or above
- Certification as a provider in Cardiopulmonary Resuscitation (CPR).
- IFSAC Firefighter I or equivalent

**Special Requirements.** Must possess a valid New Mexico Driver's License. Must maintain current status as an EMT (example: EMT-First Responder, EMT Basic or EMT-Paramedic). Must possess and maintain Instructor Certifications for CPR, ACLS, or PALS, and EMT within one year. One year of teaching experience is preferred.

**Substance Abuse Testing.** Due to the safety and/or security sensitive nature of this position, individuals shall be subject to pre-employment or pre-placement alcohol, drug and/or controlled substance testing as outlined in County or Fire Department policy and procedures.

### **Preferred/Desirable Qualifications.**

- EMT-Intermediate
- Preferred certification in Advanced Cardiac Life Support (ACLS)
- Preferred certification in Pediatric Life Support (PALS)



## Job Specifications

Effective Date:

Revised Date:

### SAFETY OFFICER

- Preferred certification in Pediatric Education for Pre-hospital Provider (PEPP)

#### **Physical Demands and Conditioning**

- This position requires two diverse sets of physical qualifications since appointment is both in the office and emergency scene environments. The EMS coordinator must be able to function at a high cognitive level, communicate clearly both orally and in writing, have the ability to utilize office and telecommunications equipment, operate a vehicle in both emergency and routine driving modes, function in a physically, mentally and emotionally stressful environments, function outdoors in all types of weather conditions and extremes, and be able to utilize all five senses to determine threats to safety of self, emergency response personnel, and the public. On rare occasions for short durations of time this position may be required to participate in active firefighting or rescue in atmospheres that are inherently dangerous to life and health utilizing firefighting personal protective equipment and self-contained breathing apparatus.

#### **ESSENTIAL FUNCTIONS**

Duties may include, but are not limited to, the following:

- Evaluate Emergency Medical Services (EMS) data; identify methods of effective emergency medical care; identify methods to correct complex medical issues and patient care delivery situations; design quality assurance programs to measure program outcome and effectiveness; and develop SOP's, educational and operational programs, and make other medical recommendations.
- Conduct research and analysis of current and future EMS issues and trends to ensure the Fire Department's medical services reflect the most current technology and service delivery alternatives.
- Recommend and assist the Chief in the implementation of goals and objectives for EMS programs, projects and systems; establish schedules and methods for EMS operations; assist in the implementation of policies, procedures, programs, methods and systems as appropriate.
- This appointment requires a minimum of 12 hours a week assignment.
- This appointment requires response to calls for service while on duty.

All members of the Torrance County Fire Department are expected to uphold and exhibit the Department's shared values of Knowledge, Respect, and Integrity.



## Job Specifications

Effective Date:

Revised Date:

<b>EMERGENCY MEDICAL SERVICE COORDINATOR</b>
--

**POSITION TITLE:** Emergency Medical Services (EMS) Coordinator

**REPORTS TO:** Fire Chief

### **JOB DESCRIPTION**

**EMS Coordinator:** An EMS Coordinator manages the certification and recertification of Advanced Life Support (ALS) and/or Basic Life Support (BLS) providers and/or instructors, and is responsible for evaluating EMS training activities for effectiveness, with an emphasis on its impact on department service delivery, and conducts classroom and other training. This assignment also performs continuous quality improvement (CQI) which involves designing quality assurance programs to measure program outcome and effectiveness, evaluating EMS data, identifying methods of providing effective emergency medical care, and identifying methods to address complex medical issues and patient care delivery situations; serves as a pre-hospital liaison between the Fire Department, hospitals and other outside agencies; and participates in the resolution of issues and the enhancement of services. This position is also responsible for performing related duties as required. This position answers directly to the Fire Chief.

### **QUALIFICATIONS**

**Minimum Qualifications Required:** Any combination of training, education, and experience, Emergency Medical Services, Education, Fire Science, or related field.

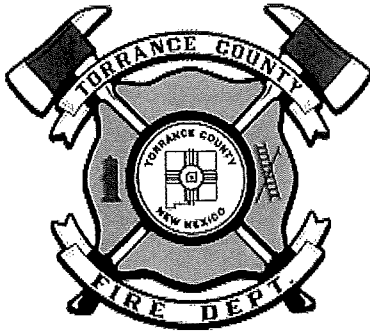
- Minimum of a High School Diploma or GED
- EMT-FR or above
- Certification as a provider in Cardiopulmonary Resuscitation (CPR).
- IFSAC Firefighter I or equivalent

**Special Requirements.** Must possess a valid New Mexico Driver's License. Must maintain current status as an EMT (example: EMT-First Responder, EMT Basic or EMT-Paramedic). Must possess and maintain Instructor Certifications for CPR, ACLS, or PALS, and EMT within one year. One year of teaching experience is preferred.

**Substance Abuse Testing.** Due to the safety and/or security sensitive nature of this position, individuals shall be subject to pre-employment or pre-placement alcohol, drug and/or controlled substance testing as outlined in County or Fire Department policy and procedures.

### **Preferred/Desirable Qualifications.**

- EMT-Intermediate
- Preferred certification in Advanced Cardiac Life Support (ACLS)



## Job Specifications

Effective Date:

Revised Date:

### EMERGENCY MEDICAL SERVICE COORDINATOR

- Preferred certification in Pediatric Life Support (PALS)
- Preferred certification in Pediatric Education for Pre-hospital Provider (PEPP)

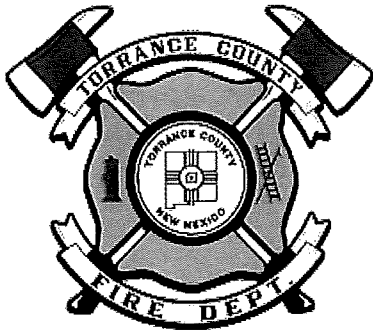
#### **Physical Demands and Conditioning**

- This position requires two diverse sets of physical qualifications since appointment is both in the office and emergency scene environments. The EMS coordinator must be able to function at a high cognitive level, communicate clearly both orally and in writing, have the ability to utilize office and telecommunications equipment, operate a vehicle in both emergency and routine driving modes, function in a physically, mentally and emotionally stressful environments, function outdoors in all types of weather conditions and extremes, and be able to utilize all five senses to determine threats to safety of self, emergency response personnel, and the public. On rare occasions for short durations of time this position may be required to participate in active firefighting or rescue in atmospheres that are inherently dangerous to life and health utilizing firefighting personal protective equipment and self-contained breathing apparatus.

#### **ESSENTIAL FUNCTIONS**

Duties may include, but are not limited to, the following:

- Evaluate Emergency Medical Services (EMS) data; identify methods of effective emergency medical care; identify methods to correct complex medical issues and patient care delivery situations; design quality assurance programs to measure program outcome and effectiveness; and develop SOP's, educational and operational programs, and make other medical recommendations.
- Conduct research and analysis of current and future EMS issues and trends to ensure the Fire Department's medical services reflect the most current technology and service delivery alternatives.
- Recommend and assist the Chief in the implementation of goals and objectives for EMS programs, projects and systems; establish schedules and methods for EMS operations; assist in the implementation of policies, procedures, programs, methods and systems as appropriate.
- This appointment requires a minimum of 12 hours a week assignment.
- This appointment requires response to calls for service while on duty.



## Job Specifications

Effective Date:

Revised Date:

**EMERGENCY MEDICAL SERVICE  
COORDINATOR**

All members of the Torrance County Fire Department are expected to uphold and exhibit the Department's shared values of Knowledge, Respect, and Integrity.





## Job Specifications

Effective Date:

Revised Date:

### TRAINING COORDINATOR

**POSITION TITLE:** Training Coordinator

**REPORTS TO:** Fire Chief

#### **JOB DESCRIPTION**

**Operations Coordinator:** Under general supervision of the Fire Chief, responsible for planning, coordinating, scheduling, and documenting all training for Fire personnel. The Training Coordinator must have considerable knowledge of departmental policies, procedures and have the ability to explain each policy to personnel should the need arise. Must possess organizational and technical skills and have the ability to use independent judgment working with little direct supervision when necessary. Training Coordinator will report to the Fire Chief.

#### **QUALIFICATIONS**

**Minimum Qualifications Required:** Any combination of training, education, and experience in Firefighting, Fire Science, or related field. Extensive experience in the fire suppression, with knowledge or certification in the following:

- High School diploma or GED with higher education preferred
- Firefighter I, or greater
- EMT-FR, or greater
- NWGC Firefighter Type II with current Red Card with Arduous Pack Test
- Ability to maintain effective relationships with co-workers, vendors and the public
- Ability to protect confidential Department information
- Ability to pass department background and driving records checks

**Substance Abuse Testing.** Due to the safety and/or security sensitive nature of this position, individuals shall be subject to pre-employment or pre-placement alcohol, drug and/or controlled substance testing as outlined in County or Fire Department policy and procedures.

#### **Preferred/Desirable Qualifications.**

- Firefighter II
- Fire Instructor I
- EMT-FR or higher
- Additional wildland certifications
- Experience in minor vehicle maintenance and repair
- Knowledge of Emergency Reporting, IQS, NMEMSTARS etc.
- Crew supervisory experience



## Job Specifications

Effective Date:

Revised Date:

### TRAINING COORDINATOR

#### Physical Demands and Conditioning

In order to perform the essential functions of this position, the employee must be able to do the following with or without accommodation: crawl, run, climb, crouch, bend, stoop, twist, reach, contort, and lift up to 175 lbs. while wearing heavy protective gear weighing about 50 lbs. in all kinds of environments, as described below; face exposure and take precautions against carcinogenic dusts, toxic substances, infectious agents, and the visual/emotional shock of burn/trauma victims..

#### **ESSENTIAL FUNCTIONS**

Duties may include, but are not limited to, the following:

- Coordinate all specialty trainings with designated instructors and coordinators, i.e. EMS, Wildland, Search and Rescue etc.
- Prepare educationally sound lesson plans and programs of instruction as a finished package for use by department instructors.
- Responsible for identifying and assessing Department training needs, scheduling training programs and coordinating schedules with Fire Department personnel.
- Submit recommendations for training activities; work with Administration to set and oversee training budget.
- Organize a general training plan for the following year, six months in advance, and present to Administration.
- Communicate directly with both internal and external training personnel and organizations to plan, identify, schedule, coordinate, deliver, execute and evaluate training activities.
- Develop and administer special programs and projects as assigned by the Assistant Chief or Fire Chief.
- Provide monthly and quarterly training reports to Administration.
- Attend and participate in professional group meetings; stay abreast of new trends and innovations in the field of Fire Suppression, EMS and other training needs.
- Acquire and/or develop necessary audio/visual materials such as CD's, DVD's, interactive computer programs and pamphlets and brochures to be utilized in the presentation of training programs.
- Provide a motivational atmosphere and communicate a positive attitude for Fire Department personnel.
- Participate in or conduct a continuing program of training and instruction; attend majority of scheduled drills and classes including recommended classes through recognized and approved institutions of higher learning.



## Job Specifications

Effective Date:

Revised Date:

### TRAINING COORDINATOR

- Support the Administration's philosophies, goals and objectives.
- Read, understand, adhere to and implement departmental guidelines, bulletins, directives, memorandums and policies.
- Ensure the adherence to safe work practices and procedures.
- Perform other duties and responsibilities as directed or required. Also essential to this position and required when needed:
  - Respond to emergency medical and fire calls in accordance with standard practice guidelines.
  - Provide rescue and required emergency medical services as needed by the Department.
  - Drive and operate fire apparatus as allowed by Department policy.
- Operate saws, power jacks and a variety of other rescue equipment and tools; remove fire and accident victims to a safe location.
- Keep current on all firefighter certifications as well as all certifications, licenses, etc., required for the position of Training Officer as required by the county, state and federal licensing authorities, if any. Keep informed and updated of any changes in credential requirements and advise Administration
- This appointment requires a minimum of 12 hours a week assignment.
- This appointment requires response to calls for service while on duty.

All members of the Torrance County Fire Department are expected to uphold and exhibit the Department's shared values of Knowledge, Respect, and Integrity.



## Job Specifications

Effective Date:

Revised Date:

### WILDLAND COORDINATOR

**POSITION TITLE:** Wildland Coordinator

**REPORTS TO:** Fire Chief

#### **JOB DESCRIPTION**

**Operations Coordinator:** Under general supervision of the Fire Chief, responsible for planning, coordinating, scheduling, and documenting all training for Fire personnel. The Training Coordinator must have considerable knowledge of departmental policies, procedures and have the ability to explain each policy to personnel should the need arise. Must possess organizational and technical skills and have the ability to use independent judgment working with little direct supervision when necessary. Training Coordinator will report to the Fire Chief.

#### **QUALIFICATIONS**

**Minimum Qualifications Required:** Any combination of training, education, and experience in Firefighting, Fire Science, or related field. Extensive experience in the fire suppression, with knowledge or certification in the following:

- High School diploma or GED with higher education preferred
- Firefighter I, or greater
- EMT-FR, or greater
- NWGC Firefighter Type II with current Red Card with Arduous Pack Test
- Ability to maintain effective relationships with co-workers, vendors and the public
- Ability to protect confidential Department information
- Ability to pass department background and driving records checks

**Substance Abuse Testing.** Due to the safety and/or security sensitive nature of this position, individuals shall be subject to pre-employment or pre-placement alcohol, drug and/or controlled substance testing as outlined in County or Fire Department policy and procedures.

#### **Preferred/Desirable Qualifications.**

- Firefighter II
- Fire Instructor I
- EMT-FR or higher
- Additional wildland certifications
- Experience in minor vehicle maintenance and repair
- Knowledge of Emergency Reporting, IQS, NMEMSTARS etc.
- Crew supervisory experience



## Job Specifications

Effective Date:

Revised Date:

### WILDLAND COORDINATOR

#### Physical Demands and Conditioning

In order to perform the essential functions of this position, the employee must be able to do the following with or without accommodation: crawl, run, climb, crouch, bend, stoop, twist, reach, contort, and lift up to 175 lbs. while wearing heavy protective gear weighing about 50 lbs. in all kinds of environments, as described below; face exposure and take precautions against carcinogenic dusts, toxic substances, infectious agents, and the visual/emotional shock of burn/trauma victims..

#### **ESSENTIAL FUNCTIONS**

Duties may include, but are not limited to, the following:

- Coordinate all specialty trainings with designated instructors and coordinators, i.e. EMS, Wildland, Search and Rescue etc.
- Prepare educationally sound lesson plans and programs of instruction as a finished package for use by department instructors.
- Responsible for identifying and assessing Department training needs, scheduling training programs and coordinating schedules with Fire Department personnel.
- Submit recommendations for training activities; work with Administration to set and oversee training budget.
- Organize a general training plan for the following year, six months in advance, and present to Administration.
- Communicate directly with both internal and external training personnel and organizations to plan, identify, schedule, coordinate, deliver, execute and evaluate training activities.
- Develop and administer special programs and projects as assigned by the Assistant Chief or Fire Chief.
- Provide monthly and quarterly training reports to Administration.
- Attend and participate in professional group meetings; stay abreast of new trends and innovations in the field of Fire Suppression, EMS and other training needs.
- Acquire and/or develop necessary audio/visual materials such as CD's, DVD's, interactive computer programs and pamphlets and brochures to be utilized in the presentation of training programs.
- Provide a motivational atmosphere and communicate a positive attitude for Fire Department personnel.
- Participate in or conduct a continuing program of training and instruction; attend majority of scheduled drills and classes including recommended classes through recognized and approved institutions of higher learning.



## Job Specifications

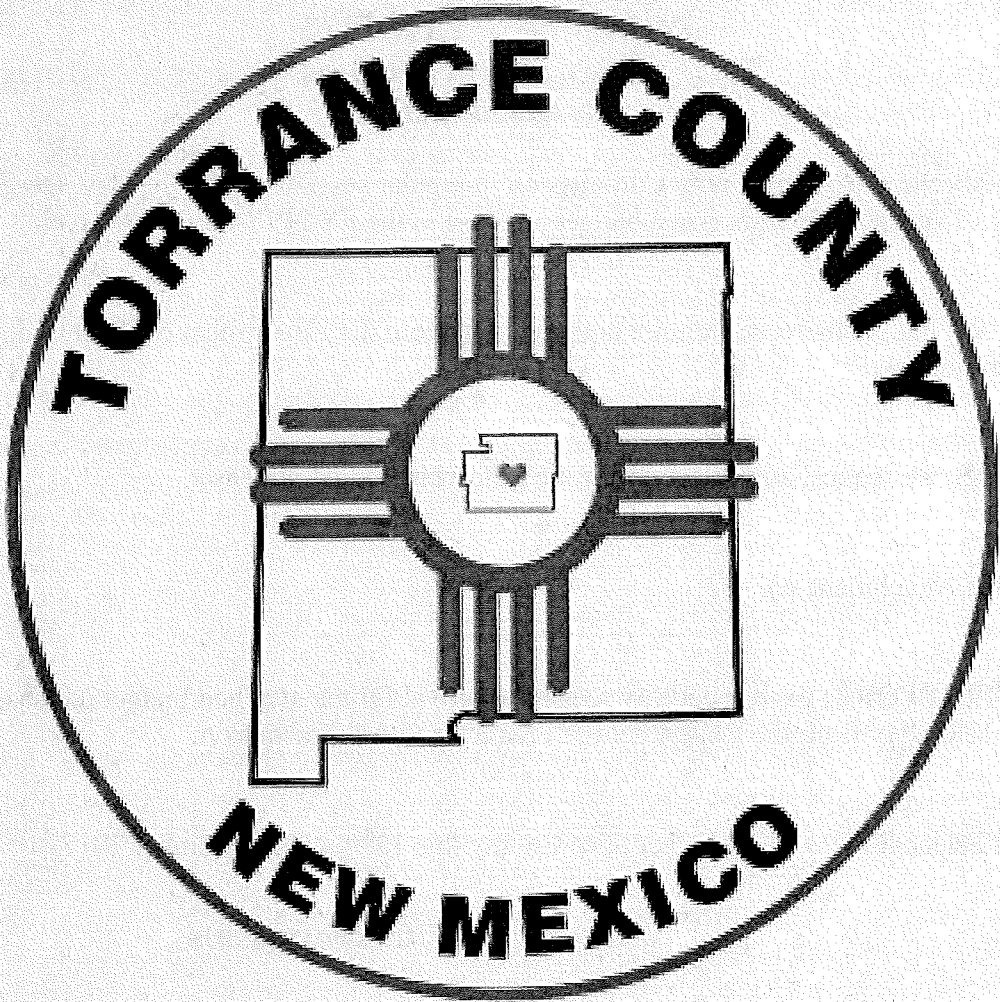
Effective Date:

Revised Date:

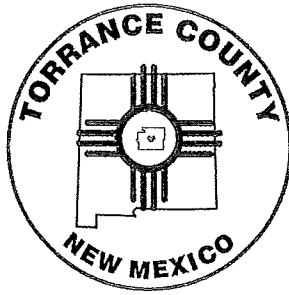
### WILDLAND COORDINATOR

- Support the Administration's philosophies, goals and objectives.
- Read, understand, adhere to and implement departmental guidelines, bulletins, directives, memorandums and policies.
- Ensure the adherence to safe work practices and procedures.
- Perform other duties and responsibilities as directed or required. Also essential to this position and required when needed:
  - Respond to emergency medical and fire calls in accordance with standard practice guidelines.
  - Provide rescue and required emergency medical services as needed by the Department.
  - Drive and operate fire apparatus as allowed by Department policy.
- Operate saws, power jacks and a variety of other rescue equipment and tools; remove fire and accident victims to a safe location.
- Keep current on all firefighter certifications as well as all certifications, licenses, etc., required for the position of Training Officer as required by the county, state and federal licensing authorities, if any. Keep informed and updated of any changes in credential requirements and advise Administration
- This appointment requires a minimum of 12 hours a week assignment.
- This appointment requires response to calls for service while on duty.

All members of the Torrance County Fire Department are expected to uphold and exhibit the Department's shared values of Knowledge, Respect, and Integrity.



*Agenda Item  
No. 7*



***TORRANCE COUNTY***  
**RESOLUTION # 2017-*L*0**  
**Budget Increase**

**WHEREAS**, the Torrance County Commission in regular session on Wednesday, December 13th 2017 did propose to authorize a budget increase in the FY 2017-18 Budget, and

**WHEREAS**, budget increases require authorization from the Department of Finance and Administration, and

**WHEREAS**, we request authorization for the following budget increase:

(See Attachment A)

**NOW THEREFORE**, we respectfully request approval for the attached budget increase in the FY 2017-18 budget from the Department of Finance and Administration.

**DONE** at Estancia, New Mexico, Torrance County this 13<sup>th</sup> day of December 2017.

**TORRANCE COUNTY COMMISSION**

\_\_\_\_\_  
James W. Frost, District 1

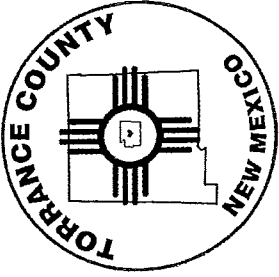
Attest:

\_\_\_\_\_  
Julia DuCharme, District 2

\_\_\_\_\_  
County Clerk  
DFA Approval

\_\_\_\_\_  
Javier E. Sanchez, District 3





# TORRANCE COUNTY

## Budget Increase Request Form

Requesting Department: Dispatch

My department hereby requests that the following budget increase be made to the budget:

Revenue Increase:		Expenditure Increase:		Amount of Increase
Line Item Number	Line Item Description	Line Item Number	Line Item Description	
911-00-1855	Municipal Dispatch Fee's	911-80-2218	equip/maint repair	\$ 16,579.21
911-00-0999	Fund Balance	911-80-2218	equip/maint repair	\$ 21,117.99

This is for the fee's that were divided up between Municipal PD's, TCSO, and Dispatch according to each Dept's number of users and licenses for the EFORCE Program that we all share.

Signature \_\_\_\_\_

Date \_\_\_\_\_



*Agenda Item*  
*No. 8*



## ***TORRANCE COUNTY***

### **RESOLUTION # 2017-1a1 Line Item Transfers**

**WHEREAS**, County Departments are requesting line item transfers within their budgeted funds in the FY 2017-18 Budget, and

**WHEREAS**, line item transfers within the same fund require authorization from the Torrance County Commission, and

**WHEREAS**, the attached line item transfers within the same fund are hereby authorized:

(See Schedule A)

**NOW THEREFORE BE IT RESOLVED** by the Torrance County Commission.

**DONE** at Estancia, New Mexico, Torrance County this 13th day of December 2017.

#### **TORRANCE COUNTY COMMISSION**

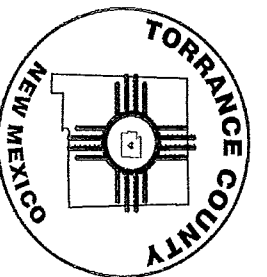
\_\_\_\_\_  
**James W. Frost, District 1**

**Attest:**

\_\_\_\_\_  
**Julia DuCharme, District 2**

\_\_\_\_\_  
**County Clerk**

\_\_\_\_\_  
**Javier E. Sanchez, District 3**

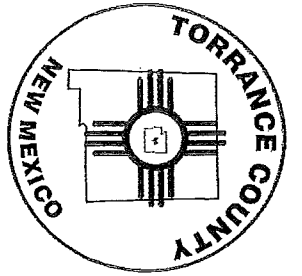


# Torrance County

Resolution 2017-\_\_\_\_\_

## Line Item Transfer Schedule A

Funding Source:		Transfer From:		Transfer To:		Total Amount
Department	Source	Line Item	Description	Line Item	Description	
Civil Defense	grant funding	604 83 2 248	safety equipment	604 83 2 272	professional services	\$ 5,127.88
Dist. 3 VFD	fire allotment	408 91 2 248	safety equipment	408 91 2 272	professional services	\$ 500.00
Dist. 4 VFD	fire allotment	409 91 2 248	safety equipment	409 91 2 272	professional services	\$ 150.00
Dist. 5 VFD	fire allotment	405 91 2 248	safety equipment	405 91 2 272	professional services	\$ 150.00
Road	road fund	402 60 2 256	road material	402 60 2 241	communication maint.	\$ 4,500.00
Road	road fund	402 60 2 219	office supplies	402 61 2 221	printing and publishing	\$ 100.00
Sheriff	general fund	401 50 2 221	printing and publishing	401 50 2 272	professional services	\$ 700.00
Sheriff	general fund	401 50 2 221	printing and publishing	401 50 2 219	office supplies	\$ 100.00
Sheriff	general fund	401 50 2 266	training	401 50 2 269	membership dues	\$ 1,000.00
P & Z	general fund	401 8 2 218	equip/maint repair	685 8 2 201	veh. Maint. & repair	\$ 500.00
<b>TOTAL</b>						<b>\$ 12,827.88</b>



# TORRANCE COUNTY

## Line Item Transfer Form

Requesting Department: \_\_\_\_\_

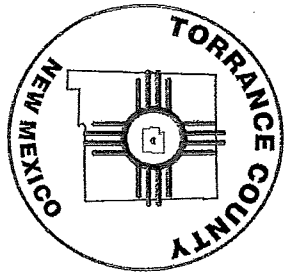
Civil Defense

My department hereby requests that the following line item transfer(s) be made to the budget:

Transfer From:		Transfer To:		\$
Line Item Number	Line Item Description	Line Item Number	Line Item Description	Amount of Transfer
604-83-2248	Safety Equipment	604-83-2272	Professional Services	\$ 5,127.88
Reason for Transfer: To pay remaining balance for AECOM contract.				

Signature \_\_\_\_\_

Date 11.30.2017



# TORRANCE COUNTY

## Line Item Transfer Form

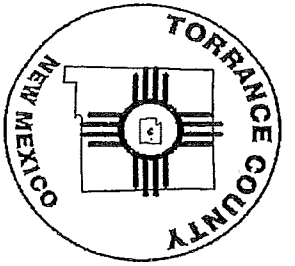
Requesting Department: \_\_\_\_\_

Districts 3, 4 & 5 VFD

My department hereby requests that the following line item transfer(s) be made to the budget:

Transfer From:		Transfer To:		\$
Line Item Number	Line Item Description	Line Item Number	Line Item Description	Amount of Transfer
408-91-2248	Safety Equipment	408-91-2272	Professional Svcs.	\$ 500.00
409-91-2248	Safety Equipment	409-91-2272	Professional Svcs.	\$ 150.00
405-91-2248	Safety Equipment	405-91-2272	Professional Svcs.	\$ 150.00
<b>Reason for Transfer:</b>				
Additional funds needed in professional services				

Signature *Hannah Archer* *Hester Gary* Date *11.01.17*



# TORRANCE COUNTY

## Line Item Transfer Form

Requesting Department: \_\_\_\_\_

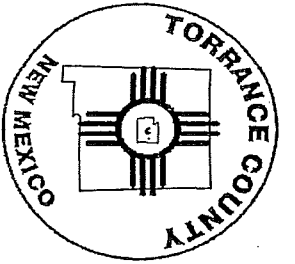
\_\_\_\_\_ Road

My department hereby requests that the following line item transfer(s) be made to the budget:

Line Item Number	Line Item Description	Line Item Number	Line Item Description	Amount of Transfer
Transfer From:		Transfer To:		\$
<del>402-60-2256</del>	<del>Road Material</del>	402-60-2240	Communication	84500.00
402-60-2256	✓ Rd			
Reason for Transfer: <u>Need to get Radios Fixed dont work</u>				

Signature

Date 11-29-17



# TORRANCE COUNTY

## Line Item Transfer Form

Requesting Department: \_\_\_\_\_

Road

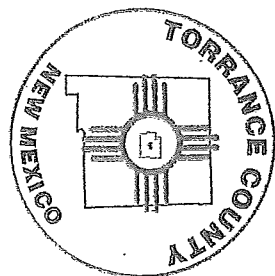
My department hereby requests that the following line item transfer(s) be made to the budget:

Transfer From:		Transfer To:		Amount of Transfer
Line Item Number	Line Item Description	Line Item Number	Line Item Description	
402-60-2219	Office Supplies	402-61-2221	Printing/Publishing	\$100.00
Reason for Transfer: Need to have money in line item for add.				

Signature \_\_\_\_\_

11-28-17  
Date





# TORRANCE COUNTY Line Item Transfer Form

Requesting Department: \_\_\_\_\_

Sheriff

My department hereby requests that the following line item transfer(s) be made to the budget:

Transfer From:		Transfer To:		\$
Line Item Number	Line Item Description	Line Item Number	Line Item Description	Amount of Transfer
401-50-2221	Printing and Publishing	401-50-2272	Professional Services	\$ 700.00
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
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				\$ -
				\$ -
				\$ -

Reason for Transfer:  
Transfer to cover Radar Re-Certification

Signature

*S. Thomas*

11/20/17  
Date



# TORRANCE COUNTY

## Line Item Transfer Form

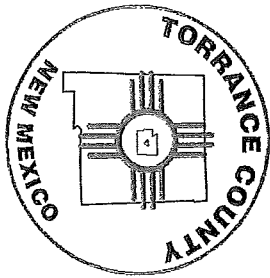
Requesting Department: \_\_\_\_\_

\_\_\_\_\_ Sheriff

My department hereby requests that the following line item transfer(s) be made to the budget:

Transfer From:		Transfer To:		\$
Line Item Number	Line Item Description	Line Item Number	Line Item Description	Amount of Transfer
401-50-2221	Printing and Publishing	401-50-2219	Office Supplies	\$ 100.00
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
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				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
Reason for Transfer: Transfer to cover purchases for Office Supplies				

Signature: Stohman TP Date: 11/28/17



# TORRANCE COUNTY

## Line Item Transfer Form

Requesting Department: \_\_\_\_\_

Sheriff

My department hereby requests that the following line item transfer(s) be made to the budget:

Transfer From:		Transfer To:		\$
Line Item Number	Line Item Description	Line Item Number	Line Item Description	Amount of Transfer
401-50-2266	Training	401-50-2269	Membership Dues	\$ 1,000.00
				-
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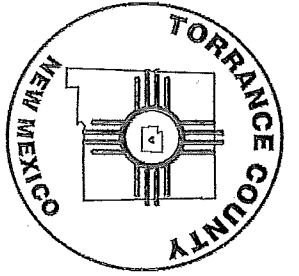
Reason for Transfer:  
Transfer to cover Membership Dues

Signature: *Stephanie VP*

Date: *11/2/17*

Signature

Date



# TORRANCE COUNTY Line Item Transfer Form

Requesting Department: \_\_\_\_\_

Planning & Zoning

My department hereby requests that the following line item transfer(s) be made to the budget:

Transfer From:		Transfer To:		Amount of Transfer
Line Item Number	Line Item Description	Line Item Number	Line Item Description	
401-08-2218	Equipment Maintenance/Repair	685-08-2201	Veh. Maint. & Repair	\$ 500.00
<b>Reason for Transfer:</b> Catch up on deficit in line item and pay for additional maintenance to F-150				

Signature: *[Handwritten Signature]* Date: 12/5/2017



*Agenda Item  
No. 9*

PO Box 48  
205 9<sup>th</sup> Street  
Estancia, NM 87016  
(505) 544-4700 Main Line (505) 384-5294 Fax  
[www.torrancecountynm.org](http://www.torrancecountynm.org)



**County Commission**  
Commissioner James "Jim" Frost, District 1  
Commissioner Julia DuCharme, District 2  
Commissioner Javier E. Sanchez, District 3  
**County Manager**  
Belinda Garland  
**Deputy County Manager**  
Annette Ortiz

**REQUEST TO BE PLACED ON THE TORRANCE COUNTY  
COMMISSION AGENDA**

This form must be returned to the County Manager's Office **ONLY!**

Deadline for inclusion of an item is WEDNESDAY, NOON prior to the subsequent meeting.  
All fields must be filled out for consideration.

Name: Edward McCracken  
First Last Department / Company / Organization Name

Today's Date: 12-6-17 Mailing Address: \_\_\_\_\_  
(Departments/employees of Torrance County need not include their address)

Telephone number/Extension: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Would you like this Agenda Faxed to you? Yes No

Email Address: \_\_\_\_\_

Is this request for the next Commission meeting? YES NO If no, date of Commission Meeting: \_\_\_\_\_

Brief explanation of business to be discussed:

Address the commission in regards to Solid  
Waste Fees.  
Wants to request va benefits recipients  
receive solid waste discount.

Is this a Resolution, Contract, Agreement, Grant Application, Other? \_\_\_\_\_

Has this been reviewed by Grant Committee? YES NO If yes, corresponding paperwork must be attached.

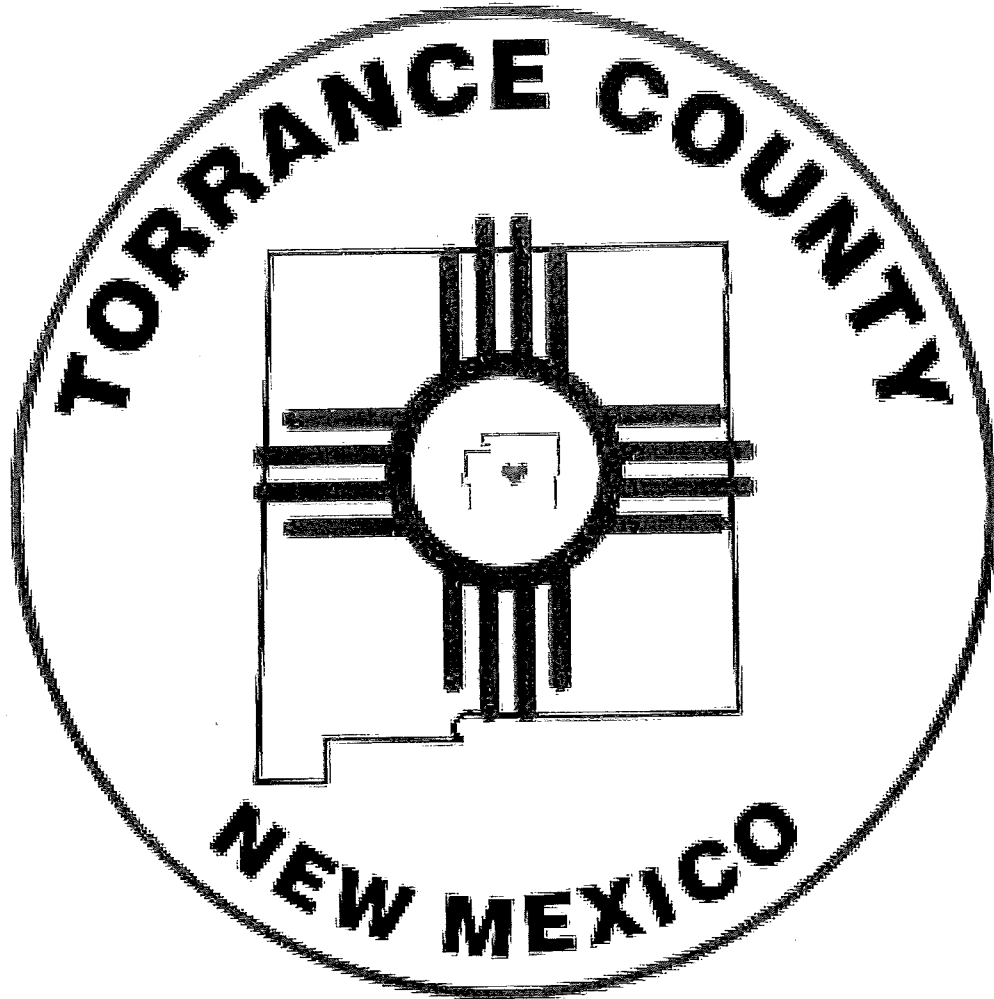
Has this been reviewed by the County Attorney? YES NO

If this is a contract, MOU, or Joint Powers Agreement there must be a signature line for the County Attorney on the original contract.

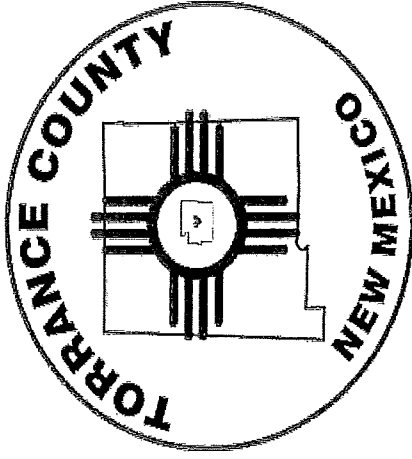
Has this been reviewed by the Finance Dept? YES NO Comptroller Initials: \_\_\_\_\_

- No Impact
- Change in current fund
- Raise Budget (allow 45 days after Commission approval)
- Change in funds (allow 45 days after Commission approval)
- Reduction
- Transfer funds (allow 45 days after Commission approval)

Other: \_\_\_\_\_



*Agenda Item  
No. 10*



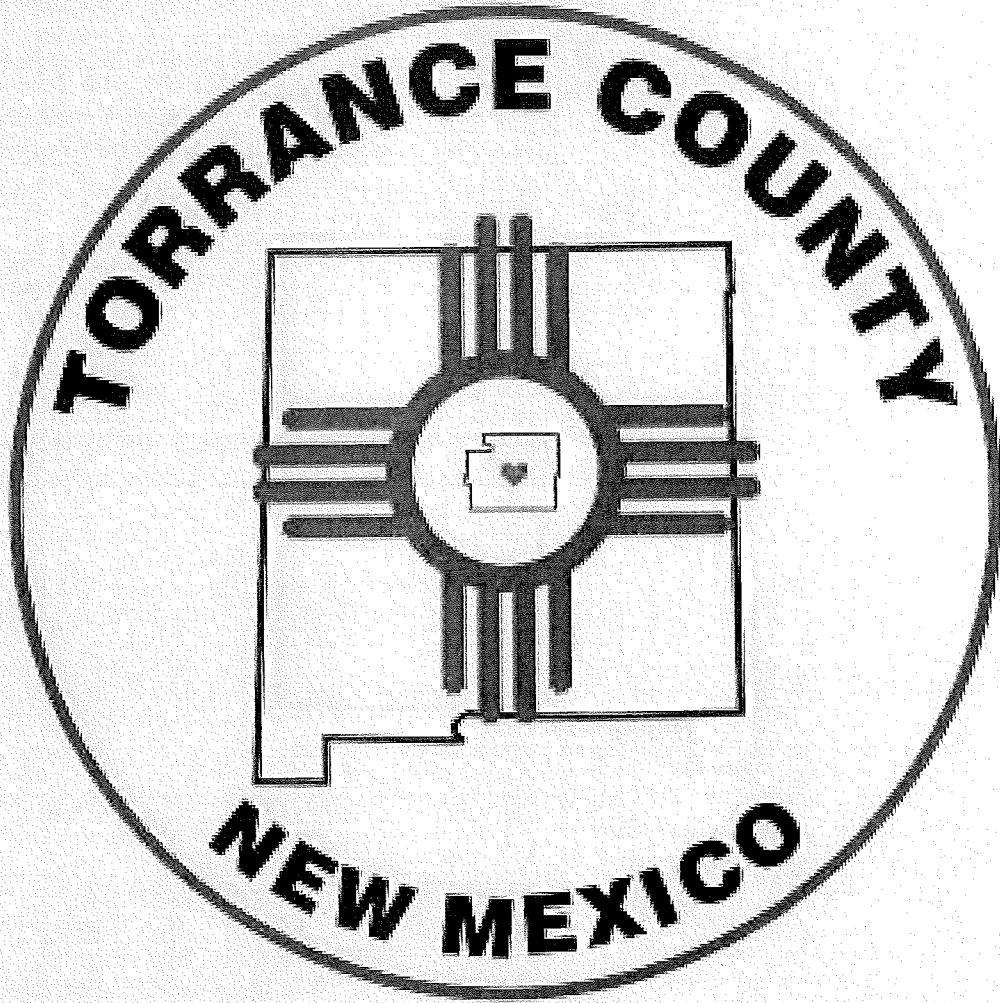
## Commission Schedule 2018

January	10	2018	July	11	2018
January	24	2018	July	25	2018
February	14	2018	August	8	2018
February	28	2018	August	22	2018
March	14	2018	September	12	2018
March	28	2018	September	26	2018
April	11	2018	October	10	2018
April	25	2018	October	24	2018
May	9	2018	November	14	2018
May	23	2018	November	28	2018
June	13	2018	December	12	2018
June	27	2018	December	26	2018

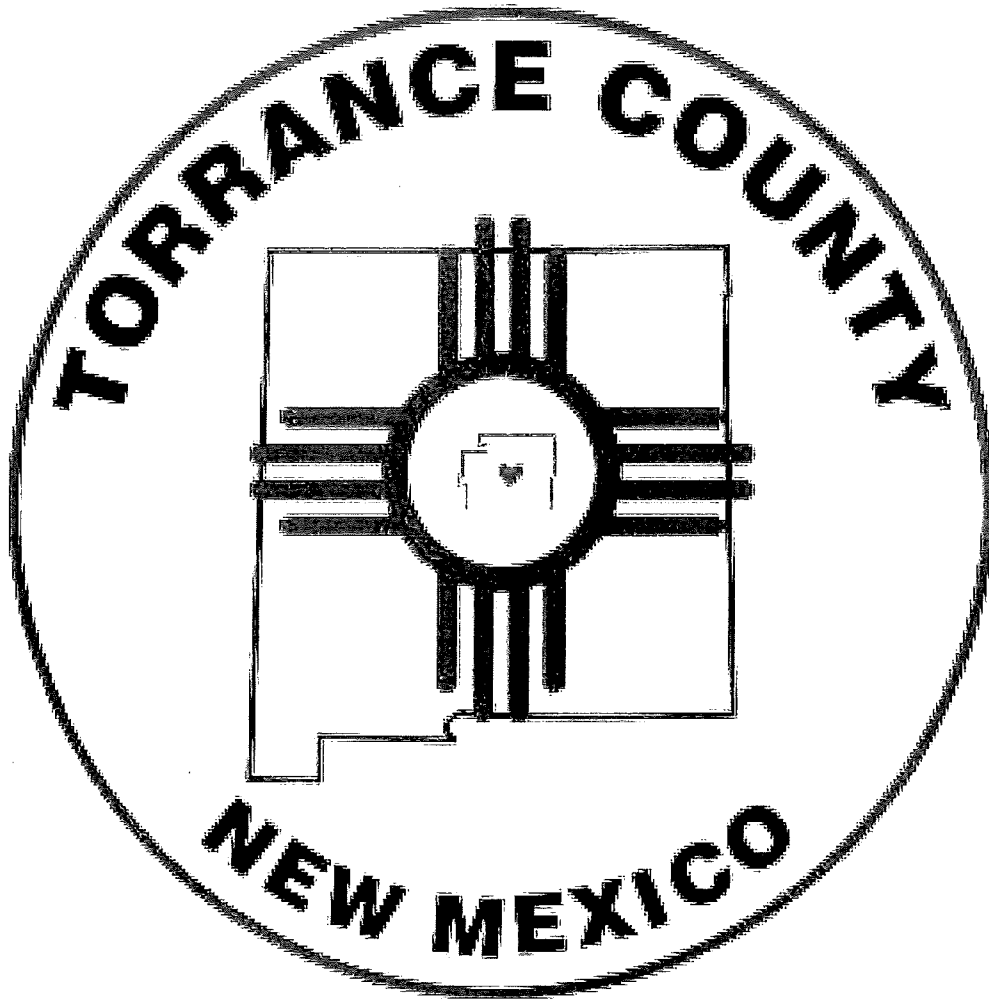
## Holiday Closure Schedule

January	1	2018	New Year's Observance
January	15	2018	Martin Luther King Jr. Day
February	19	2018	Presidents' Day
March	30	2018	Good Friday (Half Day)
May	28	2018	Memorial Day
July	4	2018	Independence Day
September	3	2018	Labor Day
October	8	2018	Columbus Day
November	12	2018	Veteran's Day Observance
November	22	2018	Thanksgiving
November	23	2018	Thanksgiving
December	24	2018	Christmas Eve
December	25	2018	Christmas
December	31	2018	New Year's Eve (Half Day)





*Agenda Item  
No. 11*



*Agenda Item  
No. 12*

County Commission

*James "Jim" Frost  
Commissioner  
District 1*

*Julia DuCharme  
Commissioner  
District 2*

*Javier E. Sanchez  
Commission Chair  
District 3*



*PO Box 48 ~ 205 Ninth Street  
Estancia, NM 87016  
(505) 246-4752 Main Line (505) 384-5294 Fax  
[www.torrancecountynm.org](http://www.torrancecountynm.org)*

*County Manager  
Belinda Garland  
Deputy County Manager  
Annette Ortiz*

*County Attorney  
Dennis Wallin*

December 13, 2017

Torrance County wishes to thank you for the project ideas and funding requests you have submitted. We regret to inform you that Torrance County is unable to provide funding for your project at this time. The year 2017 has seen many financial challenges that has drastically limited funding to the County as a whole. It is a disappointment to us that we must decline many worthy projects.

We will inform you of our next funding cycle, and we encourage your continued participation with future project ideas and requests. As we look to the future, it is our hope that proposals such as yours can be funded and our communities prosper.

Sincerely,

Torrance County Board of Commissioners

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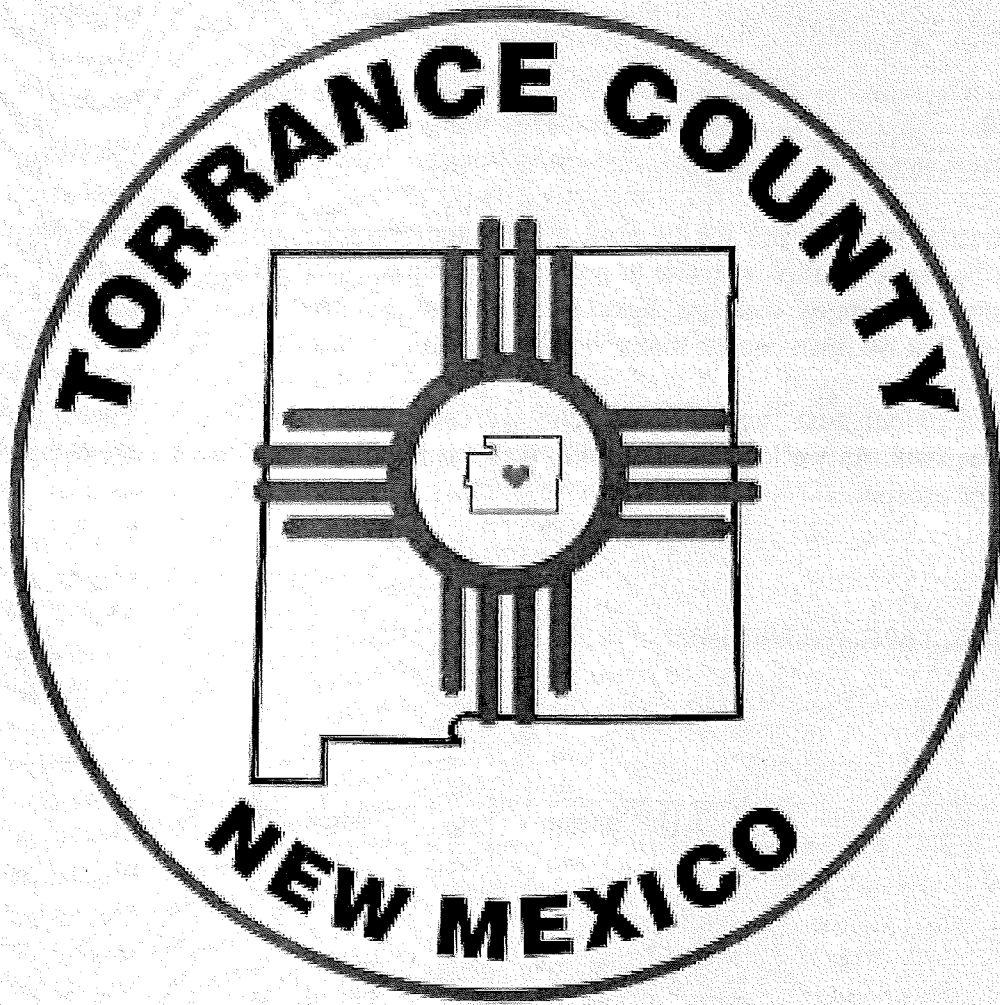
Javier Sanchez

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Julia DuCharme

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James "Jim" Frost



*Agenda Item  
No. 13*

PO Box 48  
205 9<sup>th</sup> Street  
Estancia, NM 87016  
(505) 544-4700 Main Line (505) 384-5294 Fax  
[www.torrancecountynm.org](http://www.torrancecountynm.org)



County Commission  
Commissioner James "Jim" Frost, District 1  
Commissioner Julia DuCharne, District 2  
Commissioner Javier E. Sanchez, District 3  
County Manager  
Belinda Garland  
Deputy County Manager  
Annette Ortiz

**REQUEST TO BE PLACED ON THE TORRANCE COUNTY  
COMMISSION AGENDA**

This form must be returned to the County Manager's Office **ONLY!**

Deadline for inclusion of an item is WEDNESDAY, NOON prior to the subsequent meeting.  
All fields must be filled out for consideration.

Name: Belinda for Javier Sanchez \_\_\_\_\_  
First Last Department / Company / Organization Name

Today's Date: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
(Departments/employees of Torrance County need not include their address)

Telephone number/Extension: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Would you like this Agenda Faxed to you? Yes No

Email Address: \_\_\_\_\_

Is this request for the next Commission meeting?  YES  NO If no, date of Commission Meeting: \_\_\_\_\_

Brief explanation of business to be discussed:

Set a ~~workshop~~ workshop to review & develop road plan.

Is this a Resolution, Contract, Agreement, Grant Application, Other? \_\_\_\_\_

Has this been reviewed by Grant Committee?  YES  NO If yes, corresponding paperwork must be attached.

Has this been reviewed by the County Attorney?  YES  NO

If this is a contract, MOU, or Joint Powers Agreement there must be a signature line for the County Attorney on the original contract.

Has this been reviewed by the Finance Dept?  YES  NO Comptroller Initials: \_\_\_\_\_

- No Impact
- Change in current fund
- Raise Budget (allow 45 days after Commission approval)
- Change in funds (allow 45 days after Commission approval)
- Reduction
- Transfer funds (allow 45 days after Commission approval)

Other: \_\_\_\_\_



*Agenda Item  
No. 14*



**PHTC Voting Membership ~ July 1, 2017**

**Officers**

Chair:

Vice-Chair:

Secretary:

Mark Clark, DOH Northwest Region  
 Danielle Berrien, Vice-Chair  
 Debbie L. Ortiz, Secretary

**1 Year Term**

7/1/2017 - 6/30/2018  
 7/1/2017 - 6/30/2018  
 7/1/2017 - 6/30/2018

**Voting Members**

Art Falconer

Art Swenka

Beth Fullerton

BJ Travis

Carole Glade

Danielle Berrien

Debbie Ortiz

Gail Falconer

Janet Travis

Mark Clark

Meredith Root Bowman

Sidney Smart

Tracey Master

Trish Daino

Member-At-Large (Estancia)

KXNM Community Foundation, EBRA

PMS Esperanza Family Health

Torrance County District 5 Fire Dept/ NMDK Karate

Member-At-Large (Mountainair), EMT

NMSU, Torrance County Cooperative Extension Svc

Perpetual Tears Memorial/ United Prevention

Member-At-Large (Estancia), Bhv Hlth Plan Council

Care Net East Mountain Pregnancy Center

DOH Northwest Region

Presbyterian Healthcare Services

Member-At-Large (Mountainair)

Torrance County DWI Program, United Prevention

Private Mental Health Therapist

**2 Year Term**

7/1/2016 - 6/30/2018

7/1/2016 - 6/30/2018

7/1/2017 - 6/30/2019

7/1/2017 - 6/30/2019

7/1/2017 - 6/30/2019

7/1/2016 - 6/30/2018

7/1/2016 - 6/30/2018

7/1/2016 - 6/30/2018

7/1/2017 - 6/30/2019

7/1/2016 - 6/30/2018

7/1/2017 - 6/30/2019

7/1/2017 - 6/30/2019

7/1/2017 - 6/30/2019

7/1/2017 - 6/30/2019

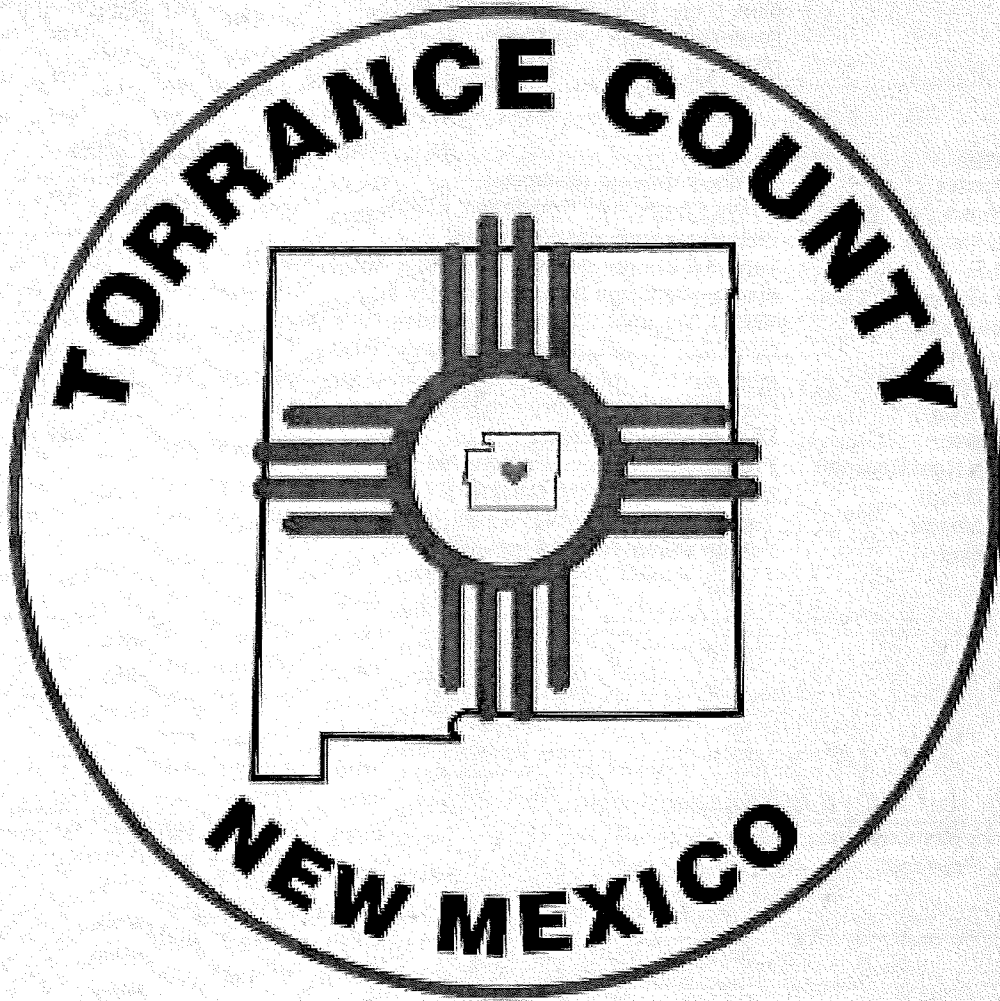
*Janice Y. Barela*

Perpetual Tears Memorial, Inc.  
 Janice Barela, President

11.3.17  
 Date

Torrance County Commission  
 Javier Sanchez, Chair

\_\_\_\_\_  
 Date



*Agenda Item  
No. 15*



PO Box 48  
205 9<sup>th</sup> Street  
Estancia, NM 87016  
(505) 544-4700 Main Line (505) 384-5294 Fax  
[www.torrancecountynm.org](http://www.torrancecountynm.org)



County Commission  
Commissioner James "Jim" Frost, District 1  
Commissioner Julia DuCharme, District 2  
Commissioner Javier E. Sanchez, District 3  
County Manager  
Belinda Garland  
Deputy County Manager  
Annette Ortiz

**REQUEST TO BE PLACED ON THE TORRANCE COUNTY  
COMMISSION AGENDA**  
This form must be returned to the County Manager's Office ONLY!

Deadline for inclusion of an item is WEDNESDAY, NOON prior to the subsequent meeting.  
All fields must be filled out for consideration.

Name: Belinda Manager  
First Last Department / Company / Organization Name

Today's Date: 12-5-17 Mailing Address: \_\_\_\_\_  
(Departments/employees of Torrance County need not include their address)

Telephone number/Extension: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Would you like this Agenda Faxed to you? Yes No

Email Address: \_\_\_\_\_

Is this request for the next Commission meeting? YES NO If no, date of Commission Meeting: \_\_\_\_\_

Brief explanation of business to be discussed:

Revocation of 2018 Health Insurance Contract  
with Presbyterians  
Quote from BCBS, Decline to give quote Cigna & United  
Healthcare

Is this a Resolution, Contract, Agreement, Grant Application, Other? \_\_\_\_\_

Has this been reviewed by Grant Committee? YES NO If yes, corresponding paperwork must be attached.

Has this been reviewed by the County Attorney? YES NO

If this is a contract, MOU, or Joint Powers Agreement there must be a signature line for the County Attorney on the original contract.

Has this been reviewed by the Finance Dept? YES NO Comptroller Initials: \_\_\_\_\_

- No Impact
- Change in current fund
- Raise Budget (allow 45 days after Commission approval)
- Change in funds (allow 45 days after Commission approval)
- Reduction
- Transfer funds (allow 45 days after Commission approval)

Other: \_\_\_\_\_



# Blue Cross and Blue Shield of New Mexico

## Torrance County

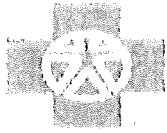
Prospective Premium Projection  
for the period  
January 1, 2018 - December 31, 2018

**01/1/2018 Fully Insured Proposal**

*Producer: Rydeski & Company*

*Presented by:*

*BCBS of New Mexico*



# Blue Cross and Blue Shield of New Mexico

## Affordable Care Act Information

Notwithstanding anything in the proposal or renewal to the contrary, BCBS reserves the right to revise or withdraw our offer or to change our charge for the cost of coverage (premium or other amounts) at any time before or during the contract period if any local, state or federal legislation, regulation, rule or guidance (or amendment or clarification thereto) is enacted or becomes effective/implemented, which would require BCBS to pay, submit or forward, on its own behalf or on the Employer Group's behalf, any additional tax, surcharge, fee, or other amount (all of which may be estimated, allocated or pro-rated amounts).

### NOTICE: AFFORDABLE CARE ACT (ACA) FEES

ACA established a number of taxes and fees that will affect our customers and their benefit plans. Two of those fees are: (1) the Annual Fee on Health Insurers or "Health Insurer Fee"; and (2) the Transitional Reinsurance Program Contribution Fee or "Reinsurance Fee." Both the Reinsurance Fee and Health Insurer Fee go into effect in 2014.

Section 9010(a) of ACA requires that "covered entities" providing health insurance ("health insurers") pay an annual fee to the federal government, commonly referred to as the Health Insurer Fee. The amount of this fee for a given calendar year will be determined by the federal government and involves a formula based in part on a health insurer's net premiums written with respect to health insurance on certain health risk during the preceding calendar year. This fee will go to help fund premium tax credits and cost-sharing subsidies offered to certain individuals who purchase coverage on health insurance exchanges.

In addition, ACA Section 1341 provides for the establishment of a temporary reinsurance program(s) (for a three (3) year period (2014-2016)) which will be funded by Reinsurance Fees collected from health insurance issuers and self-funded group health plans. Federal and state governments will provide information as to how these fees are calculated. Federal regulations establish the fee at \$5.25 per member, per month for 2014. The temporary reinsurance programs funded by these Reinsurance Fees will help stabilize premiums in the individual market.

Your premium, which already accounts for current applicable federal and state taxes, includes the effects of the Health Insurer and Reinsurance Fees.



## **Blue Cross and Blue Shield of New Mexico**

### *Important Updates*

*If your existing group health plan or group health insurance coverage (each "plan") was in effect on March 23, 2010, it may be "grandfathered health plan" as that term is defined in the Affordable Care Act and related regulations (currently 75 Fed. Reg.34538).*

*Federal regulations have been published regarding the maintenance and loss of grandfathered health plan status. We encourage you to confer with your own legal counsel to determine what benefit changes or other events may cause the loss of grandfathered health plan status and to evaluate the benefit options that are most suitable for you.*

*The following proposed benefit programs are not considered "grandfathered health plans".*



# Blue Cross and Blue Shield of New Mexico

Group Zip Code: 87016  
TEFRA Protected?: Y

Account Name: Torrance County  
Effective Date: 01/01/2018  
Producer: Rydeski & Company

Emp Only	Emp + Sp/DP	Emp + Ch(ren)	Emp + Family	Total
28	18	8	13	67

Plan	Benefit	Emp Only	Emp + Sp/DP	Emp + Ch(ren)	Emp + Family	Total
POS \$1000	\$0/\$10/\$35/\$75/\$150	\$557.77	\$1,254.94	\$1,003.97	\$1,645.38	\$67,628.18
POS \$1500	\$0/\$10/\$35/\$75/\$150	\$524.78	\$1,180.72	\$944.58	\$1,548.06	\$63,628.22
POS \$2500	\$0/\$10/\$35/\$75/\$150	\$504.92	\$1,136.03	\$908.84	\$1,489.47	\$61,220.13
POS \$3000	\$0/\$10/\$35/\$75/\$150	\$474.78	\$1,068.22	\$854.59	\$1,400.56	\$57,565.80

Plan	Benefit	Emp Only	Emp + Sp/DP	Emp + Ch(ren)	Emp + Family	Total
EPO \$1250*	\$0/\$10/\$35/\$75/\$150/\$250	\$513.22	\$1,154.71	\$923.78	\$1,513.96	\$62,226.66
EPO \$2500*	\$0/\$10/\$35/\$75/\$150/\$250	\$444.89	\$1,000.97	\$800.79	\$1,312.39	\$53,941.77
EPO \$3500*	\$0/\$10/\$35/\$75/\$150/\$250	\$389.26	\$875.81	\$700.65	\$1,148.29	\$47,196.83
EPO \$5000*	\$0/\$10/\$35/\$75/\$150/\$250	\$356.25	\$801.54	\$641.24	\$1,050.91	\$43,194.47

\*RX Subject to Med. Plan OPX; Durable Medical Equipment (DME), Supplies, Prosthetics & Orthotics: Subject to Ded & Coins.

Plan	Benefit	Emp Only	Emp + Sp/DP	Emp + Ch(ren)	Emp + Family	Total
PPO Evolution \$500*	\$0/\$10/\$35/\$75/\$150/\$250	\$704.64	\$1,585.39	\$1,268.33	\$2,078.63	\$85,435.77
PPO Evolution \$1000*	\$0/\$10/\$35/\$75/\$150/\$250	\$645.58	\$1,452.51	\$1,162.02	\$1,904.41	\$78,274.91
PPO Evolution \$2000*	\$0/\$10/\$50/\$100/\$150/\$250	\$568.64	\$1,279.40	\$1,023.53	\$1,677.44	\$68,946.08
PPO Evolution \$3500*	\$0/\$10/\$50/\$100/\$150/\$250	\$504.75	\$1,135.65	\$908.53	\$1,488.97	\$61,199.55
PPO Evolution \$5000*	\$0/\$10/\$50/\$100/\$150/\$250	\$473.83	\$1,066.08	\$852.88	\$1,397.76	\$57,450.60
PPO Evolution \$1500*	\$0/\$10/\$35/\$75/\$150/\$250	\$577.91	\$1,300.26	\$1,040.22	\$1,704.79	\$70,070.19
PPO Evolution \$2500*	\$0/\$10/\$35/\$75/\$150/\$250	\$547.23	\$1,231.23	\$984.99	\$1,614.29	\$66,350.27

\*RX Subject to Med. Plan OPX; Durable Medical Equipment (DME), Supplies, Prosthetics & Orthotics: Subject to Ded & Coins.



# Blue Cross and Blue Shield of New Mexico

Account Name: Torrance County  
 Effective Date: 01/01/2018  
 Producer: Rydeski & Company

Group Zip Code: 87016  
 TEFRA Protected?: Y

Emp Only	Emp + Sp/DP	Emp + Ch(ren)	Emp + Family	Total
28	18	8	13	67

Plan Name	Benefit Description	Employee Premium	Employer Premium	Family Premium	Spouse/Dependent Premium	Total Premium
BlueNet \$500/A*	\$0/\$10/\$35/\$75/\$150/\$250	\$647.85	\$1,457.62	\$1,166.11	\$1,911.11	\$78,550.27
BlueNet \$500/B*	\$0/\$10/\$35/\$75/\$150/\$250	\$644.72	\$1,450.57	\$1,160.47	\$1,901.87	\$78,170.49
BlueNet \$500/C*	\$0/\$10/\$50/\$100/\$150/\$250	\$626.05	\$1,408.57	\$1,126.87	\$1,846.80	\$75,907.02
BlueNet \$500/D*	\$0/\$10/\$50/\$100/\$150/\$250	\$623.54	\$1,402.92	\$1,122.35	\$1,839.39	\$75,602.55
BlueNet \$750/A*	\$0/\$10/\$35/\$75/\$150/\$250	\$631.73	\$1,421.35	\$1,137.09	\$1,863.55	\$76,595.61
BlueNet \$750/B*	\$0/\$10/\$35/\$75/\$150/\$250	\$628.75	\$1,414.64	\$1,131.73	\$1,854.76	\$76,234.24
BlueNet \$750/C*	\$0/\$10/\$50/\$100/\$150/\$250	\$611.08	\$1,374.89	\$1,099.92	\$1,802.64	\$74,091.94
BlueNet \$750/D*	\$0/\$10/\$50/\$100/\$150/\$250	\$608.73	\$1,369.60	\$1,095.69	\$1,795.71	\$73,806.99
BlueNet \$1000/A*	\$0/\$10/\$35/\$75/\$150/\$250	\$613.62	\$1,380.60	\$1,104.49	\$1,810.13	\$74,399.77
BlueNet \$1000/B*	\$0/\$10/\$35/\$75/\$150/\$250	\$607.32	\$1,366.43	\$1,093.15	\$1,791.55	\$73,636.05
BlueNet \$1000/C*	\$0/\$10/\$50/\$100/\$150/\$250	\$554.35	\$1,247.25	\$997.81	\$1,635.29	\$67,213.55
BlueNet \$1000/D*	\$0/\$10/\$50/\$100/\$150/\$250	\$549.05	\$1,235.32	\$988.27	\$1,619.65	\$66,570.77
BlueNet \$2000/A*	\$0/\$10/\$35/\$75/\$150/\$250	\$544.31	\$1,224.66	\$979.74	\$1,605.67	\$65,996.19
BlueNet \$2000/B*	\$0/\$10/\$35/\$75/\$150/\$250	\$533.94	\$1,201.33	\$961.07	\$1,575.08	\$64,738.86
BlueNet \$2000/C*	\$0/\$10/\$50/\$100/\$150/\$250	\$487.08	\$1,095.90	\$876.73	\$1,436.85	\$59,057.33
BlueNet \$2000/D*	\$0/\$10/\$50/\$100/\$150/\$250	\$481.66	\$1,083.70	\$866.97	\$1,420.86	\$58,400.02
BlueNet \$4000/A*	\$0/\$10/\$35/\$75/\$150/\$250	\$475.65	\$1,070.18	\$856.15	\$1,403.13	\$57,671.33
BlueNet \$4000/B*	\$0/\$10/\$35/\$75/\$150/\$250	\$465.19	\$1,046.64	\$837.32	\$1,372.27	\$56,402.91
BlueNet \$4000/C*	\$0/\$10/\$50/\$100/\$150/\$250	\$423.19	\$952.15	\$761.73	\$1,248.38	\$51,310.80
BlueNet \$4000/D*	\$0/\$10/\$50/\$100/\$150/\$250	\$418.20	\$940.92	\$752.74	\$1,233.66	\$50,705.66
BlueNet \$5000/A*	\$0/\$10/\$35/\$75/\$150/\$250	\$406.84	\$915.36	\$732.30	\$1,200.15	\$49,328.35
BlueNet \$5000/B*	\$0/\$10/\$35/\$75/\$150/\$250	\$406.43	\$914.44	\$731.56	\$1,198.94	\$49,278.66
BlueNet \$5000/C*	\$0/\$10/\$50/\$100/\$150/\$250	\$360.59	\$811.30	\$649.05	\$1,063.71	\$43,720.55
BlueNet \$5000/D*	\$0/\$10/\$50/\$100/\$150/\$250	\$356.34	\$801.74	\$641.40	\$1,051.17	\$43,205.25
BlueNet \$6000/A*	\$0/\$10/\$35/\$75/\$150/\$250	\$356.90	\$803.00	\$642.41	\$1,052.83	\$43,273.27
BlueNet \$6000/B*	\$0/\$10/\$35/\$75/\$150/\$250	\$353.75	\$795.91	\$636.74	\$1,043.53	\$42,891.19
BlueNet \$6000/C*	\$0/\$10/\$50/\$100/\$150/\$250	\$335.34	\$754.49	\$603.60	\$989.23	\$40,659.13
BlueNet \$6000/D*	\$0/\$10/\$50/\$100/\$150/\$250	\$333.02	\$749.27	\$599.42	\$982.38	\$40,377.72
BlueNet \$7000/A*	\$0/\$10/\$35/\$75/\$150/\$250	\$356.16	\$801.34	\$641.07	\$1,050.64	\$43,183.48
BlueNet \$7000/B*	\$0/\$10/\$35/\$75/\$150/\$250	\$353.06	\$794.36	\$635.49	\$1,041.50	\$42,807.58
BlueNet \$7000/C*	\$0/\$10/\$50/\$100/\$150/\$250	\$335.24	\$754.27	\$603.42	\$988.93	\$40,647.03
BlueNet \$7000/D*	\$0/\$10/\$50/\$100/\$150/\$250	\$332.93	\$749.07	\$599.26	\$982.12	\$40,366.94

\* RX Subject to Med. Plan OPX; Durable Medical Equipment (DME), Supplies, Prosthetics & Orthotics: Subject to Ded & Coins.

Plan Name	Benefit Description	Employee Premium	Employer Premium	Family Premium	Spouse/Dependent Premium	Total Premium
BlueNet H EPO 700*	\$0/\$10/\$35/\$75/\$150/\$250	\$783.45	\$1,762.71	\$1,410.18	\$2,311.12	\$94,991.38
BlueNet H EPO 701*	\$0/\$10/\$35/\$75/\$150/\$250	\$715.56	\$1,609.96	\$1,287.98	\$2,110.85	\$86,759.85
BlueNet H EPO 702*	\$0/\$10/\$35/\$75/\$150/\$250	\$651.13	\$1,465.00	\$1,172.01	\$1,920.78	\$78,947.86
BlueNet H EPO 703*	\$0/\$10/\$35/\$75/\$150/\$250	\$637.85	\$1,435.12	\$1,148.11	\$1,881.61	\$77,337.77

\* RX Subject to Med. Plan OPX; Durable Medical Equipment (DME), Supplies, Prosthetics & Orthotics: Subject to Ded & Coins.



# Blue Cross and Blue Shield of New Mexico

Group Zip Code: 87016  
TEFRA Protected?: Y

Account Name: Torrance County  
Effective Date: 01/01/2018  
Producer: Rydeski & Company

Emp Only	Emp + Sp/DP	Emp + Ch(ren)	Emp + Family	Total
28	18	8	13	67

Plan Name	Benefit Description	Emp Only	Emp + Sp/DP	Emp + Ch(ren)	Emp + Family	Total
BlueEdge HSA \$2700*	90%/90%/80%/70%/60%/50%	\$460.54	\$1,036.18	\$828.95	\$1,358.56	\$55,839.24
BlueEdge HSA \$3500*	90%/90%/80%/70%/60%/50%	\$407.37	\$916.55	\$733.25	\$1,201.71	\$49,392.49
BlueEdge HSA \$5000*	90%/90%/80%/70%/60%/50%	\$359.14	\$808.04	\$646.44	\$1,059.43	\$43,544.75
BlueEdge HSA 100 \$2700*	100%	\$474.63	\$1,067.88	\$854.32	\$1,400.12	\$57,547.60
BlueEdge HSA 100 \$3500*	100%	\$428.81	\$964.79	\$771.84	\$1,264.96	\$51,992.10
BlueEdge HSA 100 \$5000*	100%	\$368.96	\$830.13	\$664.11	\$1,088.40	\$44,735.30

\* RX Subject to Med. Plan OPX; Durable Medical Equipment (DME), Supplies, Prosthetics & Orthotics: Subject to Ded & Coins.

Plan Name	Benefit Description	Emp Only	Emp + Sp/DP	Emp + Ch(ren)	Emp + Family	Total
BlueEdge HCA \$2500 Direct*	\$0/\$10/\$35/\$75/\$150/\$250	\$446.74	\$1,005.13	\$804.12	\$1,317.85	\$54,166.07
BlueEdge HCA \$2500 Standard*	\$0/\$10/\$35/\$75/\$150/\$250	\$446.74	\$1,005.13	\$804.12	\$1,317.85	\$54,166.07
BlueEdge HCA \$5000 Direct*	\$0/\$10/\$35/\$75/\$150/\$250	\$383.99	\$863.95	\$691.17	\$1,132.74	\$46,557.80
BlueEdge HCA \$5000 Standard*	\$0/\$10/\$35/\$75/\$150/\$250	\$383.99	\$863.95	\$691.17	\$1,132.74	\$46,557.80

\* RX Subject to Med. Plan OPX; Durable Medical Equipment (DME), Supplies, Prosthetics & Orthotics: Subject to Ded & Coins.

Plan Name	Benefit Description	Emp Only	Emp + Sp/DP	Emp + Ch(ren)	Emp + Family	Total
Blue PPO Minimum Value*	100%	\$365.64	\$822.66	\$658.14	\$1,078.61	\$44,332.85

\* RX Subject to Med. Plan OPX; Durable Medical Equipment (DME), Supplies, Prosthetics & Orthotics: Subject to Ded & Coins.

Plan Name	Benefit Description	Emp Only	Emp + Sp/DP	Emp + Ch(ren)	Emp + Family	Total
HMO Blue 100*	\$0/\$10/\$35/\$75/\$150/\$250	\$763.32	\$1,717.42	\$1,373.95	\$2,251.73	\$92,550.61
HMO Blue 101*	\$0/\$10/\$35/\$75/\$150/\$250	\$738.19	\$1,660.88	\$1,328.71	\$2,177.60	\$89,503.64
HMO Blue 102*	\$0/\$10/\$35/\$75/\$150/\$250	\$719.09	\$1,617.90	\$1,294.34	\$2,121.26	\$87,187.82
HMO Blue 103*	\$0/\$10/\$35/\$75/\$150/\$250	\$698.53	\$1,571.64	\$1,257.33	\$2,060.61	\$84,694.93

\* RX Subject to Med. Plan OPX; Durable Medical Equipment (DME), Supplies, Prosthetics & Orthotics: Subject to Ded & Coins.

Plan Name	Benefit Description	Emp Only	Emp + Sp/DP	Emp + Ch(ren)	Emp + Family	Total
Preferred		\$0.66	\$1.48	\$1.19	\$1.95	\$79.99
Premier		\$3.46	\$7.78	\$6.23	\$10.21	\$419.49

## New Mexico Dental Plans

For dental rates please send the below information to your NM BCBS representative.

Request must include:

- 1) Census (DOB, Gender, Zip Code, EE Status, plan election and Dependent Tiers)
- 2) Employer Contribution
- 3) Current Rates
- 4) Current Benefit Summary

Plan	Allocation of Services	Deductible (INN/OON)**	Coins (INN / OON)	Ann. Max	Ortho Max	OON	Implants	Waiting Periods	EO	ES	EC	EF	Total Monthly Dental Cost**
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### Contributory Group

DNNHR01	High	\$25/\$25	100/80/50/50 100/80/50/50	\$3,000	2000	90th R&C	Yes	No					
DNNHR02	High	\$50/\$50	100/80/50/50 100/80/50/50	\$2,000	2000	90th R&C	Yes	No					
DNNHR03	High	\$50/\$50	100/80/50/50 100/80/50/50	\$1,500	1500	90th R&C	Yes	No					
DNNHR04	High	\$50/\$75	100/80/50/50 80/60/50/50	\$1,500 / \$1,000	1000	90th R&C	Yes	No					
DNNLR06	Low	\$50/\$50	100/80/50 100/80/50	\$1,000	N/A	90th R&C	No	No					
DNNLR07	Low	\$75/\$75	90/70/50 90/70/50	\$1,000	N/A	90th R&C	No	No					
DNNHM08	High	\$50/\$50	100/80/50/50 100/80/50/50	\$1,000	1000	MAC	No	No					
DNNHM10**	High	\$50/\$50	100/80/50 80/60/40	\$1,500 / \$1,000	N/A	MAC	No	Yes					
DNNLM11**	Low	\$75/\$75	90/70/50 70/50/30	\$1,000	N/A	MAC	No	Yes					
DNNHM12	High	\$25/\$75	100/80 100/80	\$750	N/A	MAC	No	No					
DNNHR20	High	\$50/\$50	100/80/50 100/80/50	\$1,500	N/A	90th R&C	No	No					
DNNLM21	Low	\$50/\$50	100/80/50/50 100/80/50/50	\$1,000	1000	MAC	No	No					

### Voluntary

DNNHR13**	High	\$50/\$50	100/80/50/50 100/80/50/50	\$1,500	1500	90th R&C	No	Yes					
DNNHM14**	High	\$50/\$50	100/80/50 80/60/40	\$1,500 / \$1,000	N/A	MAC	No	Yes					
DNNHM16	High	\$25/\$75	100/80 100/80	\$750	N/A	MAC	No	No					
DNNHR22**	High	\$50/\$50	100/80/50/50 100/80/50/50	\$1,000	1000	90th R&C	No	Yes					
DNNHR23**	High	\$50/\$50	100/80/50 100/80/50	\$1,500	N/A	90th R&C	No	Yes					
DNNLR24**	Low	\$50/\$50	100/80/50 100/80/50	\$1,000	N/A	90th R&C	No	Yes					
DNNLM25**	Low	\$50/\$50	100/80/50/50 100/80/50/50	\$1,000	1000	MAC	No	Yes					
DNNLM26**	Low	\$50/\$100	100/80/50 100/50/50	\$750	N/A	MAC	No	Yes					

Coinsurance Type - I : Exams/Cleanings/X-Rays (both High & Low Coverage)

Coinsurance Type - II : Basic Restorative, Simple Extractions, Non-surg Perio (both High & Low Coverage), Endodontics, Oral Surgery, Surgical Perio (High)

Coinsurance Type - III: Major Restorative, Prosthodontics, Prosthodontics (both High & Low Coverage), Endodontics, Oral Surgery, Surgical Perio (Low)

Coinsurance Type - IV: Ortho (both High & Low Coverage)

R&C: Reasonable and Customary, MAC: Max. Allowed Charge

\*\*Waived Deductible applies to all Class I services and 3x family deductible limit.

\*\*Waiting Period 12 month applicable for Surgical Perio/Major Restorative/Prosthodontics/Miso Rest & Prosth Services

True Group = (>75% Participation > 50% Employer Contribution), Voluntary = (>25% Participation and <50% Employer Contribution)

### Dual Option Guidelines

Groups (10+)	High Option DNNHR01 DNNHR02 DNNHR03	Low Option DNNLR06 DNNLR07 DNNLM21	Any one contributory group high option can be paired with any one contributory group low option.	DNNHM12 can be freely paired with any contributory group.	High Option DNNHR13 DNNHR22	Low Option DNNLM25 DNNLM26	Any one voluntary high option can be paired with any one voluntary low option.	DNNHM16 can be freely paired with any voluntary option.
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## The BlueCare Dental Advantage

As a full service carrier, Blue Cross and Blue Shield of New Mexico offers a variety of dental plans to enhance employers' benefit packages. Our experience speaks for itself:

### Simplicity

- Ease of administration
- One point of contact for Medical and Dental
- One ID Card and One 800 Number
- Coordination of coverage with Medical

### Value

- Experienced Dental Carrier
- Competitive products and rates
- Large National Network of over 380,000 access points, 3,041 in New Mexico
- Excellent Service with a local touch
- Integrated Carrier approach

### One Stop Shopping

Dental coverage through BCBSNM lessens your administrative burdens and helps you manage overall benefit costs. You will have one team for all your needs and one bill to pay. Administrative ease, superior service and flexible, cost-effective plan designs are just a few reasons why more employers are choosing BlueCare Dental.





# Blue Cross and Blue Shield of New Mexico

## Blue Directions

Blue Directions is a benefits administration solution that can help employers with 51 or more employees reduce their human resources burden and provide their employees with a personalized enrollment experience.

Blue Directions allows employers the ability to build a package of plan offerings from any of the standard medical and dental plan designs outlined within this exhibit.

When choosing plans to include, please be aware of the following guidelines:

- The goal is to offer an array of plan design choices from both a product and benefit richness perspective.

- For Medical Plan selections, it is a requirement to offer a minimum of three (3) plans but no more than five.

- For Dental Plan selections, please choose one or two plans.

When reviewing plan design options, please consider:

- Choosing the plans that most closely match the current offerings.

- Selecting plans to add more choice and provide a wide array of benefit richness.

- Selecting at least one High Deductible Health Plan (HDHP) to be included in the plan package.



# Blue Cross and Blue Shield of New Mexico

In order to obtain a proposal for a specific effective date, a complete proposal must be submitted at least 60 days (75 days for January 1st effective dates) prior to the requested effective date. If a complete proposal submission was received less than 60 days (75 days for January 1st effective dates) prior to the requested effective date, the actual quoted effective date may have been adjusted to the following month.

BCBSNM reserves the right to take any or all of the following actions: 1) initial rates will be finalized for the effective date of the policy based on the enrolled participation and employer contribution levels; 2) after the policy effective date the group will be required to maintain a minimum Employer contribution of 50%, and at least a 75% participation of eligible employees. In the event the group is unable to maintain the contribution and participation requirements, rates will be adjusted accordingly; and/or 3) non-renew or discontinue coverage unless the 50% minimum employer contribution is met and at least 75% of eligible employees have enrolled for coverage.

For groups with <75% final enrolled participation

Rates will be adjusted in accordance with the final participation level and quoted rate factor as follows:

Final Participation Level is 71% to 74.9%: Factor to be applied to quoted rates will be 1.05  
Final Participation Level is 61% to 70.9%: Factor to be applied to quoted rates will be 1.10  
Final Participation Level is 51% to 60.9%: Factor to be applied to quoted rates will be 1.25  
Final Participation Level is 41% to 50.9%: Factor to be applied to quoted rates will be 1.35  
Final Participation Level is 25% to 40.9%: Factor to be applied to quoted rates will be 1.50  
Final Participation Level is <25%: Factor to be applied to quoted rates will be 2.50  
Dental participation level is <25% may select a voluntary dental option.

Calculation of Participation %:  $\text{Actual Enrollment} / \text{Total Eligible} = \text{Participation \%}$

Note: Waivers will no longer be considered when determining participation %.

Employer Groups are expected to solicit enrollment and determine participation, adjust quoted rates accordingly as described above, and re-enroll employees as necessary using the revised rates. However, if the number of eligible employees at the time of sale varies significantly (+/- 10% or more) from the number of eligible employees quoted, then BCBSNM reserves the right to revise the initial rate offering based on the revised census of eligible employees in addition to the corresponding participation adjustment factor from the table above.

Submission of the most recent quarterly Wage & Tax Form will be required for all Previously Uninsured Groups at the time of implementation and should be included along with the enrollment paperwork in order to validate the total eligible enrollment for the participation calculation.

Groups must submit enrollment applications 30 days prior to their effective date (45 days for January 1st effective dates) and final participation must be established and verified. If all applications are not received 30 days prior to the proposed effective date (45 days for January 1st effective dates), BCBSNM will delay the effective date by one month.

BCBSNM reserves the right to change premium rates when a substantial change occurs in the number or composition of subscribers covered. A substantial change will be deemed to have occurred when the number of subscribers covered changes by ten percent (10%) or more over a thirty (30) day period or twenty five percent (25%) or more over a ninety (90) day period.



## Blue Cross and Blue Shield of New Mexico

Health and Dental rates are projected to be effective for the 12-month period beginning on the effective date of group coverage and are contingent upon the provisions shown below. Final rates may vary based on actual enrollment results.

- \* Rates are valid only for the stated effective date.
- \* Rates do not include any future mandated benefit changes.
- \* This quote assumes BCBSNM will be the only carrier providing coverage to the employer group's employees. BCBSNM reserves the right to change premium rates if BCBSNM is not the exclusive carrier. Groups must promptly notify BCBS if BCBSNM will not be the exclusive carrier.

\* Standard BCBSNM Managed Care programs with standard membership, eligibility, administration, claims processing, and standard network. Standard Master Contract provisions and definitions apply. Any costs associated with special services or custom materials provided by BCBSNM will be supplemental billed separate and apart from the rates outlined on this confirmation page.

\* Annual open enrollment.

\* This proposal assumes the group contract will be issued in New Mexico. In addition to the benefits stated herein, benefits for covered persons who reside outside of New Mexico will conform to all Extraterritorial requirements of those states.

State and Federal regulations require carriers to determine whether an employer is subject to Small Employer regulations. This proposal is made on the condition you are not a Small Employer as defined by those regulations. A proposal to a Small Employer would have to contain specific contractual elements and mandated insurance plans not contained in this proposal. Should it be determined you were a Small Employer, this proposal and any health insurance contract issued to you shall be null and void.

Commissions of 4.00% are included in the quoted rates. Upon inquiry from employer groups, HCSC will provide information to the employer group regarding commissions and other compensation paid to the employer's broker/producer by HCSC in connection with the employer's policy or contract with HCSC.

Note: The Underwriting Department of BCBSNM will make the final decision regarding policy issuance and rates. Acceptance for coverage and/or final rates will be determined by the statements made and information furnished on the employer's application. Any change in census, zip codes, SIC, or effective date may affect the final rates. No insurance or charges will be effective without approval by BCBSNM. Rates are contingent upon there being no current High Risk claims or any claims over \$10,000 in the last 12 months that were not disclosed on the original RFP.

This information is not intended nor does it modify the terms of any agreement in any way. The coverage provided under any group contract may only be changed in accordance with the terms of the agreement and in accordance with the law.

BCBSNM appointed agents are not authorized to guarantee coverage or rates. This proposal assumes the group contract will be issued in New Mexico. **EMPLOYERS SHOULD NOT CANCEL COVERAGE UNTIL NOTIFIED IN WRITING BY BCBSNM THAT THEIR EMPLOYER APPLICATION HAS BEEN APPROVED AND FINAL RATES ARE DETERMINED.**

**tanya@nmhealthinsurance.com**

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**From:** Johnson, Allison T 584 <Allison.Johnson@Cigna.com>  
**Sent:** Wednesday, November 22, 2017 9:50 AM  
**To:** tanya@nmhealthinsurance.com  
**Cc:** McFarland, Marc 584; Fiore, Savannah R HHHH  
**Subject:** RE: Torrance County January 2018 Quote

Hi Tanya,

After underwriting review of the claims experience and our initial rate position, we just cannot get to a financially competitive position for Torrance County. We are declining to quote as a result.

Thank you for bringing Cigna the opportunity to offer a proposal to Torrance County for 1/1/2018.

Have a wonderful holiday!  
Allison

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**From:** "Fiore, Savannah R HHHH" <Savannah.Fiore@Cigna.com>  
**Sent:** Wednesday, November 22, 2017 10:16 AM  
**To:** tanya@nmhealthinsurance.com  
**CC:** "Johnson, Allison T 584" <Allison.Johnson@Cigna.com>, "McFarland, Marc 584" <Marc.McFarland@Cigna.com>  
**Subject:** RE: Torrance County January 2018 Quote

Hi Tanya,

Good Morning! I have included Allison, the sales representative who could further assist you.

Thank you.

**Savannah Fiore**  
Senior Presale Analyst, Regional Segment  
Cigna Healthcare

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**From:** tanya@nmhealthinsurance.com [mailto:tanya@nmhealthinsurance.com]  
**Sent:** Wednesday, November 22, 2017 7:45 AM  
**To:** Fiore, Savannah R HHHH <Savannah.Fiore@Cigna.com>  
**Subject:** RE: Torrance County January 2018 Quote

Good morning! Is this quote complete?

---

**From:** tanya@nmhealthinsurance.com [mailto:tanya@nmhealthinsurance.com]  
**Sent:** Tuesday, November 21, 2017 9:14 AM  
**To:** 'Fiore, Savannah R HHHH' <Savannah.Fiore@Cigna.com>  
**Subject:** RE: Torrance County January 2018 Quote

Is this quote complete? Please confirm!



November 27, 2017

Tanya Lopez  
Rydeski & Co

Re: Torrance County

Dear Tanya,

Thank you for the opportunity to offer a proposal for Torrance County. We have conducted a preliminary review of your request and have determined that we are unable to offer a competitive proposal for your client.

Should the Employer still wish to obtain a formal quote from us despite the result of our preliminary review, please contact me directly.

Thank you for your inquiry.

Sincerely,

Janelle Brookhouser

## Paula Mendonca

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**From:** Tapia, Cynthia <ctapia3@phs.org>  
**Sent:** Friday, November 10, 2017 12:31 PM  
**To:** Paula Mendonca  
**Subject:** RE: Torrance County

Talked to UW and they are standing with the 29%.

Cynthia Tapia  
Senior Account Manager  
Presbyterian Health Plan  
Direct 505 923-8178  
Cell 505 263-2771  
Email ctapia3@phs.org

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**From:** Paula Mendonca [mailto:paula@nmhealthinsurance.com]  
**Sent:** Friday, November 10, 2017 12:03 PM  
**To:** Tapia, Cynthia  
**Subject:** Torrance County

Will you please send me an email regarding our conversation on Torrance County.  
Paula

[This email was sent from outside the Presbyterian network. Be cautious about the content of this message, opening any attachments or clicking links. If you are unsure of the legitimacy of this message, please contact [abuse@phs.org](mailto:abuse@phs.org)]

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PRESBYTERIAN HEALTH PLAN, INC.

Group LETTER OF AGREEMENT

Large Group (Revised June 1, 2013)

THIS Group LETTER OF AGREEMENT ("Agreement") is dated as of December 4, 2017  
is entered into by and between Presbyterian Health Plan, Inc. ("PHPI"), a New Mexico health maintenance organization, and  
Torrance County, Group # GR010405

WHEREAS, PHPI is a New Mexico corporation authorized to do business as a health maintenance organization in PHPI's licensed service area in the State of New Mexico; and

WHEREAS, the Group is a viable business entity licensed to do business in the State of New Mexico and operating within the scope of its license and charter; and

WHEREAS, the Group has a minimum of 51 eligible, active employees who reside or work in the service area; and the eligible employees work at least a minimum of 20 hours per week to be considered eligible under this Agreement with PHPI; and

WHEREAS, the Group contributes a minimum of 50% of the employee's premium; and

WHEREAS, the Group has offered PHPI as the only health plan option to its employees, or has advised PHPI in writing of other health plan options prior to receiving the Rates and has been approved by PHPI;

NOW, THEREFORE, the parties agree as follows:

1 Services: PHPI agrees to provide, through enrollment in PHPI, the services described in the Group Subscriber Agreement, and any riders or amendments thereto, a copy of which has been, or will be upon request, provided to the Group and the terms of which are hereby incorporated by reference, PHPI will enroll those Group employees and their Dependents who are eligible as outlined in the Group's company policy and approved by PHPI under the terms of Paragraph 5 of this Agreement, to enroll in PHPI as of the effective date of such enrollment. Dependents include, spouse, children, and if applicable, qualified domestic partner of eligible employees ("Dependents"). PHPI's obligation to provide services hereunder is subject to all terms, conditions, exclusions and limitations set forth in this Agreement and in the PHPI Group Subscriber Agreement and any riders or amendments thereto. If there is a conflict between this Agreement and the PHPI Group Subscriber Agreement and any riders or amendments thereto, this Agreement takes precedence.

2 Payment:

a) In consideration of the enrollment in PHPI of eligible Group employees and Dependents, the Group agrees to pay to PHPI the following monthly prepayment for each Group employee enrolled in PHPI, based on the coverage selected by such employee as shown in the:

Presbyterian Health Plan Rate Sheet Dated December 4, 2017

The above referenced Rates are guaranteed for 12 months commencing with the effective date of this Agreement. PHPI reserves the right to re-rate the Group if enrollment fluctuates by 10 percent or more.

b) The Group understands that PHPI is a prepaid health plan. Payment of the total amount of monthly prepayments due hereunder shall be made by the Group in advance of each month that Group employees are enrolled in PHPI. PHPI shall bill the Group on or before the 20th day of each month for the subsequent month's coverage. Payment in the amount of PHPI's bill must be received by PHPI on or before the first day of the month of coverage. The Group shall pay a late fee of one and one-half percent of the outstanding balance for any month in which full payment is not received by PHPI prior to the 10th day of the month of coverage.

c) The Group shall pay to PHPI each month the amount shown due on PHPI's bill. Retroactive adjustments required by the termination or addition of enrollees shall be reflected in the subsequent month's bill. Premiums must be made payable to Presbyterian Health Plan, Inc. and remitted to:

Presbyterian Health Plan, Inc.  
P.O. Box 911694  
Denver, Colorado 80291-1694

d) Acceptance of late, partial or non-electronic payments by PHPI shall not constitute a waiver of any present or future rights PHPI would otherwise have under this Agreement.

e) If the transaction is returned by the Group's financial institution for insufficient funds, account closed, authorization revoked or any other reason caused by an act of the Group, PHPI will notify Group as soon as notification is received by PHPI. Payment of the amount billed plus a charge of \$30.00 must be received by PHPI within 15 days after notification of non-payment is provided.

### 3 Amendments and Changes in Benefits:

a) The parties at anytime may agree in writing to amend or modify any provision of this Agreement or the nature and extent of the benefits provided hereunder provided all underwriting guidelines are adhered to. No increase in amounts paid by any individual enrolled in PHPI hereunder shall become effective until 60 days from and after the postage paid mailing to each enrollee at the enrollee's address of record, or hand-delivery to the enrollee, of written notice of such proposed increase. A decrease in Rates may be made by PHPI at any time.

b) PHPI shall not decrease in any manner the benefits provided hereunder without written agreement from the Group and until 30 days from and after the postage paid mailing to each enrollee at the enrollee's address of record, or hand-delivery to the enrollee, of written notice of such proposed change.

c) The provision of notice to an enrolled Group employee as required in this Paragraph 3 shall be deemed to constitute proper notice hereunder to each of the employee's enrolled Dependents.

### 4 Enrollment:

a) Following prior inspection of appropriate Group marketing materials, the Group agrees to allow PHPI marketing representatives fair and reasonable access to Group members for enrollment purposes. The Group will permit PHPI periodic access to eligible Group members for continued enrollment purposes.

b) Any employee of the Group, or any Dependent of the employee who is eligible to enroll in PHPI as of the effective date of this Agreement, must apply for enrollment in PHPI within 31 days from such effective date. Any such employee or Dependent who fails to enroll during this initial enrollment period shall not thereafter be allowed to enroll in PHPI under this Agreement except during subsequent annual Group enrollment periods identified by PHPI and the Group or as specified in Paragraph 4(f) of this agreement. The employee must have been hired and working full-time before the effective date of the Group and must have met the Group's waiting period, unless the Group is waiving their initial waiting period requirement. During the initial enrollment period, a minimum of 50% of eligible employees must enroll in PHPI. Employees with valid proof of other health coverage may be excluded from the Group of eligible employees for purposes of this participation requirement. Enrollment in an individual health plan is not recognized as a valid waiver, unless, in its sole discretion, PHPI waives such in writing.

c) Any employee joining the Group, or any Dependent of the employee initially becoming eligible for benefits between annual Group enrollment periods, shall be offered the opportunity to enroll in PHPI. Application for enrollment under this Subparagraph must be made within 31 days after the date on which the employee meets or will meet PHPI and Group eligibility requirements. An employee or Dependent who fails to enroll prior to the expiration of this 31-day period shall not thereafter be allowed to enroll in PHPI except during subsequent annual Group enrollment periods identified by PHPI and the Group or as specified in Subparagraph 4(f). PHPI coverage for persons enrolling under this Subparagraph shall become effective as of the waiting period specified in Section 5 b).

d) Application for the enrollment of a new Dependent of an employee already enrolled in PHPI must be made within 31 days of the date such Dependent first becomes eligible to enroll in PHPI under terms of this Agreement and the Group employee Agreement. Any Dependent who is not enrolled during such 31-day period shall not thereafter be allowed to enroll in PHPI except during subsequent annual Group enrollment periods identified by PHPI and the Group or as specified in Subparagraph 4(f).

e) An employee who failed to enroll in PHPI during a previous enrollment period but who would otherwise be eligible for coverage may enroll in PHPI within 31 days of acquiring a new Dependent through marriage, birth, adoption, placement for adoption or Court Order, if the new Dependent is also enrolled within this time period. If the new Dependent is a child, the spouse or, if applicable, qualified domestic partner of the employee may also enroll during this time period. No other Dependents



may enroll.

f) An eligible person may enroll as an employee or Dependent after the initial eligibility period if the person loses coverage under all of the following circumstances:

- 1) the person was covered under a Group health plan or had individual health insurance coverage at the time the person was initially eligible to enroll; and
- 2) the employee stated in writing that the employee was not enrolling because of such other coverage; and
- 3) the employee and/or Dependent is enrolled and applicable prepayment made within 31 days of the date coverage under COBRA was exhausted, or the date the coverage (or the employer's contribution toward coverage) was terminated; and
- 4) the person's coverage under the other plan or insurance;
  - a) was under a COBRA continuation provision and the coverage under that provision was exhausted (and not voluntarily terminated);
  - b) was not under a COBRA continuation period and either the coverage was terminated as a result of loss of eligibility or employer contributions toward the coverage were terminated.

h) The Group shall notify PHPI of any enrolled employee or Dependent who, for any reason, ceases to be eligible for enrollment in PHPI under the terms of this Agreement and the PHPI Group Subscriber Agreement, and shall collect from the enrollee, and return to PHPI, the enrollee's PHPI ID card. The notification shall be made by the Group to PHPI in writing within 30 days of the date such employee or Dependent loses eligibility. In the event the Group fails to notify PHPI within this 30 day period, and the employee or Dependent obtains benefits or services through PHPI after the requested date of termination of coverage, PHPI shall be entitled to recover from the Group premium payment at the prevailing Rates stated in this Agreement for all subsequent months through the end of the month in which the employee or Dependent last obtained benefits or services through PHPI.

#### 5 Eligibility and Effective Date:

- a) The PHPI Group Subscriber Agreement sets forth PHPI eligibility requirements and effective dates of PHPI enrollment for Group employees and their Dependents. PHPI shall not expel or refuse to enroll or re enroll any person because of such person's health status, requirements for health care services, or age, race, gender or sexual orientation.
- b) The Group's waiting period is the first of the month following 60 days

6 Effective Date: This Agreement shall become effective as of 12:01 a.m. on January 1, 2018 (effective date); and shall continue in effect for a term of 12 months. This Agreement shall be guaranteed renewable, subject to the provisions of Paragraph 7 below. However, this Agreement may be modified based on the size of the Group upon renewal. PHPI shall notify the Group at least 60 days prior to the renewal date of this Agreement of the Rates and terms and conditions of the renewal.

#### 7 Termination:

- a) The Group may terminate this Agreement at any time by giving PHPI 30 days advance notice in writing. Such termination shall become effective only as of the last day of any month. If the Group does not specify such a day as the proposed date of termination, such termination shall nonetheless become effective only as of the later of (1) the last day of the month specified, or (2) the last day of the earliest month in which termination could be effected in compliance with the 30 day minimum notice requirement of this Subparagraph. In the event the Group fails to give PHPI at least 30 days advance written notice of termination, the Group shall pay to PHPI, in addition to other damages to which PHPI may be entitled, all prepayment amounts that would be payable under this Agreement for the period extending until the last day of the earliest month in which termination would have been effective had the Group complied with the minimum advance notice requirements of this Subparagraph.
- b) In the event that fewer than two employees are enrolled for PHPI coverage, or the Group is not in compliance with the provisions of the Plan or this Agreement, PHPI may terminate this Agreement by giving the Group 30 days advance notice in writing. Any such termination shall become effective only as of the last day of any month, and the effective date of such termination shall be specified by PHPI in the written notice required by this Subparagraph. No such notice shall be required for non payment. See Subparagraph (e) of this Paragraph.
- c) In the event that the Group ceases to be a viable business entity operating within the scope of its license and charter for reasons including, but not limited to, closing the business, bankruptcy, or insolvency, PHPI may terminate this Agreement by giving the Group 30 days advance notice in writing.

d) In the event PHPI terminates this Agreement as provided in Subparagraphs b. and c. of this Section, the Group shall provide promptly, within five days of receipt of PHPI's notice of termination, to each enrollee by hand delivery or by mail to the enrollee's current address a legible, true copy of such notice. Termination of this Agreement by PHPI shall not become effective sooner than 30 days after the date notice is hand-delivered or mailed to enrollees. The Group shall provide proof of such hand delivery or mailing to PHPI provided, however, that absent actual knowledge to the contrary, PHPI shall be entitled for the purpose of effecting termination of this Agreement to assume that the Group has complied with its obligations under this Subparagraph. The hand-delivery or mailing of a copy of the notice of termination to an enrolled employee shall be deemed to constitute the delivery or mailing of such notice to each of that employee's enrolled Dependents.

e) In the event the Group fails to make the prepayment required under this Agreement, (inclusive of any applicable late fees or charges) within 15 days of the notification that the payment is due, PHPI will by written notice terminate this agreement on the 30th day of notification of non-payment and will be effective as of the last date of payment. Non-payment shall be considered a voluntary termination by the Group. The Group will mail a copy of the notice promptly to each enrollee and shall provide proof of such to PHPI. The Group may not apply for coverage within 6 months if the termination reason is non-pay.

f) In the event an individual enrollee has knowingly given false material information in connection with the enrollment of the Group, PHPI may terminate the Group retroactively effective as of the original effective date. Each Group employee shall be responsible for payment for all services rendered hereunder as of the effective date of such termination and shall reimburse PHPI for all such payments at Reasonable Charges made by PHPI on behalf of the employee or any of his Dependents.

g) PHPI may terminate individual enrollees of PHPI as provided in the PHPI Group Subscriber Agreement.

#### 8 Continuation:

a) Enrollees shall have the option to continue coverage with PHPI.

- 1) If applicable, enrollees may elect to continue Group coverage for a period of six months upon termination of employment with the Group or due to a reduction of hours by the Group which results in a loss of coverage for the enrollee; or
- 2) If applicable, enrollees may elect continuation of coverage under the Consolidated Omnibus Reconciliation Act (COBRA) of 1985, as amended; or
- 3) Continuation of coverage shall be provided without additional evidence of insurability, and will be available regardless of the enrollee's health status.

b) The Group shall be solely responsible for identifying persons entitled to continuation benefits, for providing all notices required to be provided in connection with the availability of such benefits, for billing and collecting any payments or premiums required by the Group in connection with such benefits, and for otherwise administering all facets of its continuation program. The parties agree that PHPI is not a Plan Administrator as that term is used in federal laws governing the provision of continuation benefits. Persons availing themselves of Group continuation benefits through enrollment in PHPI shall be considered and treated by PHPI as employees of the Group. PHPI shall assume no obligation with respect to such persons that is different from or in addition to its obligation to existing Group employees.

c) At the sole discretion of PHPI, PHPI may allow the Group to reinstate terminated enrollees within four months of termination for those enrollees who have timely elected to receive continuation benefits. The Group shall remit all past due prepayment when billed by PHPI. Proof of timely election for continuation benefits will be required on reinstatements requested after the expiration of this four-month period. PHPI, upon request, will segregate all enrollees receiving continuation benefits into one billing category.

9 Conversion: If an enrollee ceases to be eligible for coverage through the Group and is no longer eligible for continuation benefits, the enrollee may apply for conversion coverage through a separate non Group membership agreement as provided in the Group Subscriber Agreement. The Group shall not incur any expense for or on behalf of an enrollee who has exercised his conversion rights. In the event that the Group's coverage is terminated, non-Group membership will not be available.

10 Certificates of Creditable Coverage: PHPI agrees to provide Certificates of Creditable Coverage ("Certificates") to all enrollees of the Group whose enrollment in PHPI terminates for any reason. PHPI shall prepare and deliver the Certificates in compliance with all applicable requirements of state and federal law. The Group agrees to provide PHPI, upon request, with all information necessary to complete the Certificates.

11 Information Necessary for Administration of Agreement: The Group shall provide PHPI with such information as PHPI may reasonably require for the administration of this Agreement. PHPI shall be entitled to rely upon information provided by the Group regarding the enrollment or termination of enrollment, eligibility, or loss of eligibility, of any Group employee or Dependent. PHPI at its sole discretion, may effect retroactive corrections of purely clerical errors made by the Group, but nothing herein shall require it to do so or constitute a waiver of PHPI's right to refuse to do so.

12 Modification: This Agreement and Exhibits hereto constitute the entire understanding of the parties and no change, amendments, or alterations hereto shall become effective unless signed by both parties.

13 Assignment: This Agreement shall not be assigned, delegated or transferred, in whole or in part, by the Group without the written consent of PHPL.

14 Applicable Law: This Agreement and the rights and obligations hereunder shall be governed by and construed in accordance with the laws of the State of New Mexico.

Internal Revenue Bulletin: 2011-2 issued on January 10, 2011 under Notice 2011-1 Affordable Care Act Nondiscrimination Provisions Applicable to Insured Group Health Plans:

Section 10101(d) of the Affordable Care Act adds § 2716 which references the substantive nondiscrimination requirements of § 105(h) of the Internal Revenue Code. Plan sponsors, which includes employers, are solely responsible for complying with these rules. Employers or plan sponsors may not establish eligibility rules that favor highly compensated employees. An insured Group health plan that fails to comply with these rules may be subject to: (1) an excise tax that generally applies for a plan failing to comply with the requirements (2) civil money penalties or (3) a civil action for employers. Employers or plan sponsors should consult their legal counsel to seek advice on the above requirements for non-discrimination as it relates to their choice of health care coverage.

15 Notices: Any notice required to be given pursuant to the terms and provisions hereof shall be in writing and shall be mailed or hand-delivered to the persons at the addresses listed below:

16 Group Reinstatement: A reinstatement may be requested by the Group within 10 days of receiving their termination letter and will be considered provided there has not been more than one payment returned or one collection letter in the last 12 months. A request can be made to escalate the reinstatement request for management review.

17 Dispute Resolution: Representatives of the parties will meet, at the request of either party, in an attempt to resolve any controversy or claim (a "Dispute") relating to this Agreement. If the Dispute is not resolved within five days after the representatives meet to resolve the Dispute, the parties shall select a mediator (the "Mediator") to resolve the Dispute through non-binding mediation. Both parties agree to cooperate with the Mediator in an effort to resolve the Dispute. If the Dispute is not resolved through either negotiation or mediation within forty-five days after the Dispute is first identified, either party may exercise any rights available to the party to resolve the Dispute.

Group

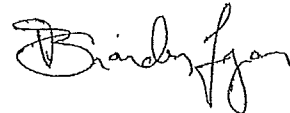
Torrance County  
205 9th Street  
Estancia, NM 87016

PRESBYTERIAN HEALTH PLAN, INC.

Brandon Fryar, President  
Post Office Box 26267  
Albuquerque, New Mexico 87125-6267

  
Authorized Representative

12-5-17  
Date



Presbyterian Health Plan, Inc.  
Authorized Representative

December 4, 2017  
Date

PRESBYTERIAN HEALTH PLAN

Presbyterian Health Plan Rate Sheet

TORRANCE COUNTY, GROUP # GR010405

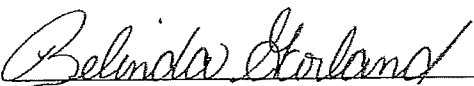
Rates Effective: January 1, 2018

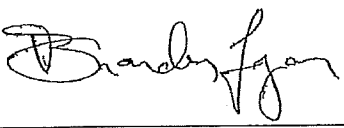
Medical Plan: Cust A OP Svcs - Smart Care \$500  
Prescription Drug Rider: \$10 / \$35 / \$55

Type of Coverage	Prepayment per employee
Single	\$557.53
Employee & Spouse	\$1,254.41
Employee & Child(ren)	\$1,003.54
Family	\$1,644.68

The above rates include Medical and Pharmacy coverage only. Ancillary products such as vision or dental coverage are not included in these rates.

Required fees under the Affordable Care Act (ACA) are included in the above rates as a pass through for remittance of the Employer-required ACA Fees.

TORRANCE COUNTY	
 Signature	<u>12-5-17</u> Date
<u>Torrance County Manager</u> Title	

PRESBYTERIAN HEALTH PLAN, INC	
 Signature	
<u>President</u> Title	<u>December 4, 2017</u> Date

PRESBYTERIAN INSURANCE COMPANY, INC.

GROUP LETTER OF AGREEMENT

Large Group (Revised June 1, 2013)

THIS GROUP LETTER OF AGREEMENT ("Agreement") is dated as of December 4, 2017  
and is entered into by and between Presbyterian Insurance Company, Inc. ("PICI"), a New Mexico corporation and  
Torrance County, Group # GR010405

WHEREAS, PICI is a New Mexico corporation authorized to do business as an insurance company in PICI's licensed service area in the State of New Mexico; and

WHEREAS, the Group is a viable business entity licensed to do business in the State of New Mexico and operating within the scope of its license and charter; and

WHEREAS, the Group has a minimum of 51, eligible, active employees who resides or works in the service area, unless the group is eligible for and has requested enrollment of Out-of-Area employees and has been approved by PICI. Employees must work at least a minimum of 20 hours per week to be considered eligible under this Agreement with PICI; and

WHEREAS, the Group contributes a minimum of 50% of the employee's premium; and

WHEREAS, the Group has offered PICI as the only health plan option to its employees, unless the group is eligible for and has requested a Dual Option offering and has been approved by PICI;

NOW, THEREFORE, the parties agree as follows:

1 Services: PICI agrees to provide, through enrollment in PICI, the services described in the Group Subscriber Agreement, and any riders or amendments thereto, a copy of which has been, or will be upon request, provided to the Group and the terms of which are hereby incorporated by referenced, PICI will enroll those Group employees and their Dependents or qualified domestic partner who are eligible as outlined in the group's company policy and approved by PICI under the terms of Paragraph 5 of this Agreement, to enroll in PICI as of the Effective Date of such enrollment. PICI's obligation to provide services hereunder is subject to all terms, conditions, exclusions and limitations set forth in this Agreement and in the Group Subscriber Agreement and any riders or amendments thereto. If there is a conflict between this Agreement and the Group Subscriber Agreement and any riders or amendments thereto, this Agreement takes precedence.

2 Payment:

a) In consideration of the enrollment in PICI of eligible Group employees and Dependents, the Group agrees to pay to PICI the following monthly prepayment for each Group employee enrolled in PICI, based on the coverage selected by such employee as shown in the:

Presbyterian Insurance Company Rate Sheet Dated December 4, 2017

The above referenced Rates are guaranteed for 12 months commencing with the effective date of this Agreement. PICI reserves the right to re-rate the group if enrollment fluctuates by 10 percent or more.

b) The Group understands that PICI is a prepaid health plan. Payment of the total amount of monthly prepayments due hereunder shall be made by the Group in advance of each month that Group employees are enrolled in PICI. PICI shall bill the Group on or before the 20th day of each month for the subsequent month's coverage. Payment in the amount of PICI's bill must be received by PICI on or before the first day of the month of coverage. The Group shall pay a late fee of one and one-half percent of the outstanding balance for any month in which full payment is not received by PICI prior to the 10th day of the month of coverage.

c) The Group shall pay to PICI each month the amount shown due on PICI's bill. Retroactive adjustments required by the termination or addition of enrollees shall be reflected in the subsequent month's bill. Premiums must be made payable to Presbyterian Health Plan, Inc. and remitted to:

Presbyterian Insurance Company, Inc.  
P.O. Box 911600  
Denver, Colorado 80291-1600

d) Acceptance of late, partial or non-electronic payments by PICI shall not constitute a waiver of any present or future rights PICI would otherwise have under this Agreement.

e) If the transaction is returned by the Group's financial institution for insufficient funds, account closed, authorization revoked or any other reason caused by an act of the Group, PICI will notify Group as soon as notification is received by PICI. Payment of the amount billed plus a charge of \$30.00 must be received by PICI within 15 days after notification of non-payment is provided.

### 3 Amendments and Changes in Benefits:

a) The parties at anytime may agree in writing to amend or modify any provision of this Agreement or the nature and extent of the benefits provided hereunder, provided all underwriting guidelines are adhered to. No increase in amounts paid by any individual enrolled in PICI hereunder shall become effective until 60 days from and after the postage paid mailing to each enrollee at the enrollee's address of record, or hand-delivery to the enrollee, of written notice of such proposed increase. A decrease in Rates may be made by PICI at any time.

b) PICI shall not decrease in any manner the benefits provided hereunder without written agreement from the Group and until 30 days from and after the postage paid mailing to each enrollee at the enrollee's address of record, or hand-delivery to the enrollee, of written notice of such proposed change.

c) The provision of notice to an enrolled Group employee as required in this Paragraph 3 shall be deemed to constitute proper notice hereunder to each of the employee's enrolled Dependents.

### 4 Enrollment:

a) Following prior inspection of appropriate Group marketing materials, the Group agrees to allow PICI marketing representatives fair and reasonable access to Group members for enrollment purposes. The Group will permit PICI periodic access to eligible Group members for continued enrollment purposes.

b) Any employee of the Group, or any Dependent of the employee who is eligible to enroll in PICI as of the effective date of this Agreement, must apply for enrollment in PICI within 31 days from such effective date. Any such employee or Dependent who fails to enroll during this initial enrollment period shall not thereafter be allowed to enroll in PICI under this Agreement except during subsequent annual Group enrollment periods identified by PICI and the Group or as specified in Paragraph 4(f) of this agreement. The employee must have been hired and working full-time before the effective date of the Group and must have met the Group's waiting period, unless the Group is waiving their initial waiting period requirement. During the initial enrollment period, a minimum of 50% of eligible employees must enroll in PICI. Employees with valid proof of other health coverage may be excluded from the Group of eligible employees for purposes of this participation requirement. Enrollment in an individual health plan is not recognized as a valid waiver, unless, in its sole discretion, PICI waives such in writing.

c) Any employee joining the Group, or any Dependent of the employee initially becoming eligible for benefits between annual group enrollment periods, shall be offered the opportunity to enroll in PICI. Application for enrollment under this Subparagraph must be made within 31 days after the date on which the employee meets or will meet PICI and Group eligibility requirements. An employee or Dependent who fails to enroll prior to the expiration of this 31 day period shall not thereafter be allowed to enroll in PICI except during subsequent annual group enrollment periods identified by PICI and the Group or as specified in Subparagraph 4(f). PICI coverage for persons enrolling under this Subparagraph shall become effective as of the waiting period specified in Section 5 b).

d) Application for the enrollment of a new Dependent of an employee already enrolled in PICI must be made within 31 days of the date such Dependent first becomes eligible to enroll in PICI under terms of this Agreement and the Group Subscriber Agreement. Any Dependent who is not enrolled during such 31 day period shall not thereafter be allowed to enroll in PICI except during subsequent annual group enrollment periods identified by PICI and the Group or as specified in Subparagraph 4(f).

e) An employee who failed to enroll in PICI during a previous enrollment period but who would otherwise be eligible for coverage may enroll in PICI within 31 days of acquiring a new Dependent through marriage, birth, adoption, placement for adoption or Court Order, if the new Dependent is also enrolled within this time period. If the new Dependent is a child, the spouse or, if applicable, qualified domestic partner of the employee may also enroll during this time period. No other Dependents may enroll.

f) An eligible person may enroll as an employee or Dependent after the initial eligibility period if the person loses coverage under all of the following circumstances:

- 1) the person was covered under a Group health plan or had individual health insurance coverage at the time the person was initially eligible to enroll; and
- 2) the employee stated in writing that the employee was not enrolling because of such other coverage; and
- 3) the employee and/or Dependent is enrolled and applicable prepayment made within 31 days of the date coverage under COBRA was exhausted, or the date the coverage (or the employer's contribution toward coverage) was terminated; and
- 4) the person's coverage under the other plan or insurance;

- a) was under a COBRA continuation provision and the coverage under that provision was exhausted (and not voluntarily terminated);
- b) was not under a COBRA continuation period and either the coverage was terminated as a result of loss of eligibility or employer contributions toward the coverage were terminated.

g) The Group shall notify PICI of any enrolled employee or Dependent who, for any reason, ceases to be eligible for enrollment in PICI under the terms of this Agreement and the Group Subscriber Agreement, and shall collect from the enrollee, and return to PICI, the enrollee's PICI ID card. The notification shall be made by the Group to PICI in writing within 30 days of the date such employee or Dependent loses eligibility. In the event the Group fails to notify PICI within this 30 day period, and the employee or Dependent obtains benefits or services through PICI after the requested date of termination of coverage, PICI shall be entitled to recover from the Group premium payment at the prevailing Rates stated in this Agreement for all subsequent months through the end of the month in which the employee or Dependent last obtained benefits or services through PICI.

**5 Eligibility and Effective Date:**

- a) Section VIII. of the Group Subscriber Agreement sets forth PICI eligibility requirements and Effective Dates of PICI enrollment for Group employees and their Dependents and qualified domestic partner. PICI shall not expel or refuse to enroll or re enroll any person because of such person's health status, requirements for health care services, or age, race, gender or sexual orientation.
- b) The Group's waiting period is the first of the month following 60 days
- c) In order to address situations where employees reside and work outside of the service area, PICI may offer side-by-side products to enroll employees and their Dependents anywhere in the U.S. once approved by PICI, and provided that all underwriting guidelines are adhered to.

**6 Effective Date:** This Agreement shall become effective as of 12:01 a.m. on January 1, 2018 (Effective Date); and shall continue in effect for a term of 12 months  
 This Agreement shall be guaranteed renewable, subject to the provisions of Paragraph 7 below. However, this Agreement may be modified based on the size of the Group upon renewal. PICI shall notify the Group at least 60 days prior to the renewal date of this Agreement of the Rates and terms and conditions of the renewal.

**7 Termination:**

- a) The Group may terminate this Agreement at any time by giving PICI 30 days advance notice in writing. Such termination shall become effective only as of the last day of any month. If the Group does not specify such a day as the proposed date of termination, such termination shall nonetheless become effective only as of the later of (1) the last day of the month specified, or (2) the last day of the earliest month in which termination could be effected in compliance with the 30 day minimum notice requirement of this Subparagraph. In the event the Group fails to give PICI at least 30 days advance written notice of termination, the Group shall pay to PICI, in addition to other damages to which PICI may be entitled, all prepayment amounts that would be payable under this Agreement for the period extending until the last day of the earliest month in which termination would have been effective had the Group complied with the minimum advance notice requirements of this Subparagraph.
- b) In the event that fewer than two employees are enrolled for PICI coverage, or the Group is not in compliance with the provisions of the Plan or this Agreement, PICI may terminate this Agreement by giving the Group 30 days advance notice in writing. Any such termination shall become effective only as of the last day of any month, and the Effective Date of such termination shall be specified by PICI in the written notice required by this Subparagraph. No such notice shall be required for non payment. See Subparagraph (e) of this Paragraph.
- c) In the event that the Group ceases to be a viable business entity operating within the scope of its license and charter for reasons including, but not limited to, closing the business, bankruptcy, or insolvency, PICI may terminate this Agreement by giving the Group 30 days advance notice in writing.
- d) In the event PICI terminates this Agreement as provided in Subparagraphs b. and c. of this Section, the Group shall provide promptly, within five days of receipt of PICI's notice of termination, to each enrollee by hand delivery or by mail to the enrollee's current address a legible, true copy of such notice. Termination of this Agreement by PICI shall not become effective sooner than 30 days after the date notice is hand delivered or mailed to enrollees. The Group shall provide proof of such hand delivery or mailing to PICI provided, however, that absent actual knowledge to the contrary, PICI shall be entitled for the purpose of effecting termination of this Agreement to assume that the Group has complied with its obligations under this Subparagraph. The hand delivery or mailing of a copy of the notice of termination to an enrolled employee shall be deemed to constitute the delivery or mailing of such notice to each of that employee's enrolled Dependents.
- e) In the event the Group fails to make the prepayment required under this Agreement (inclusive of any applicable late fees or charges) within 15 days of the notification that the payment is due, PICI will by written notice terminate this agreement on the 30th day of notification of non-payment and will be effective as of the last date of payment. Non-payment shall be considered a voluntary termination by the group. The Group will mail a copy of the notice promptly to each enrollee and shall provide proof of such to PICI. The group may not apply for coverage within 6 months if termination reason is non-pay.

f) In the event an individual enrollee has knowingly given false material information in connection with the enrollment of the Group, PICI may terminate the Group retroactively effective as of the original Effective Date. Each subscriber shall be responsible for payment for all services rendered hereunder as of the Effective Date of such termination and shall reimburse PICI for all such payments at Reasonable Charges made by PICI on behalf of the Subscriber or any of his Dependents.

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14 **Applicable Law:** This Agreement and the rights and obligations hereunder shall be governed by and construed in accordance with the laws of the State of New Mexico.

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health care coverage.

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GROUP

Torrance County  
205 9th Street  
Estancia, NM 87016

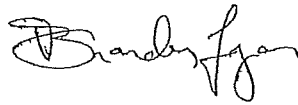


Authorized Representative

12-5-17  
Date

PRESBYTERIAN INSURANCE COMPANY, INC.

Brandon Fryar, President  
Post Office Box 26267  
Albuquerque, New Mexico 87125-8267



\_\_\_\_\_  
Presbyterian Insurance Company, Inc.  
Authorized Representative

December 4, 2017  
Date

PRESBYTERIAN INSURANCE COMPANY

Presbyterian Insurance Company Rate Sheet

TORRANCE COUNTY, GROUP # GR010405

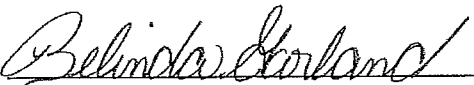

Rates Effective: January 1, 2018

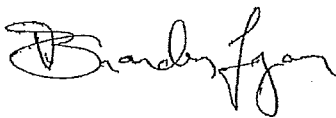
Medical Plan: PPO \$500 Ded,\$3000 OOP, 20%/40% Coin.  
Prescription Drug Rider: \$10 / \$35 / \$55

Type of Coverage	Prepayment per employee
Single	\$601.18
Employee & Spouse	\$1,352.63
Employee & Child(ren)	\$1,082.10
Family	\$1,773.45

The above rates include Medical and Pharmacy coverage only. Ancillary products such as vision or dental coverage are not included in these rates.

Required fees under the Affordable Care Act (ACA) are included in the above rates as a pass through for remittance of the Employer-required ACA Fees.

TORRANCE COUNTY	
	<u>12-5-17</u>
Signature	Date
	
Title	

PRESBYTERIAN INSURANCE COMPANY, INC.	
	
Signature	
President	<u>December 4, 2017</u>
Title	Date



*Agenda Item  
No. 16*

PO Box 48  
205 9<sup>th</sup> Street  
Estancia, NM 87016  
(505) 544-4700 Main Line (505) 384-5294 Fax  
[www.torrancecountynm.org](http://www.torrancecountynm.org)



**County Commission**  
Commissioner James "Jim" Frost, District 1  
Commissioner Julia DuChatme, District 2  
Commissioner Javier E. Sanchez, District 3  
**County Manager**  
Belinda Garland  
**Deputy County Manager**  
Annette Ortiz

*Need Breakout*

**REQUEST TO BE PLACED ON THE TORRANCE COUNTY  
COMMISSION AGENDA**  
This form must be returned to the County Manager's Office **ONLY!**

Deadline for inclusion of an item is WEDNESDAY, NOON prior to the subsequent meeting.  
All fields must be filled out for consideration.

Name: Belinda  
First Last Department / Company / Organization Name

Today's Date: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
(Departments/employees of Torrance County need not include their address)

Telephone number/Extension: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Would you like this Agenda Faxed to you? Yes No

Email Address: \_\_\_\_\_

Is this request for the next Commission meeting?  YES  NO If no, date of Commission Meeting: \_\_\_\_\_

Brief explanation of business to be discussed:

Request to fund two transport deputies

Is this a Resolution, Contract, Agreement, Grant Application, Other? \_\_\_\_\_

Has this been reviewed by Grant Committee?  YES  NO If yes, corresponding paperwork must be attached.

Has this been reviewed by the County Attorney? YES NO

If this is a contract, MOU, or Joint Powers Agreement there must be a signature line for the County Attorney on the original contract.

Has this been reviewed by the Finance Dept?  YES  NO Comptroller Initials: \_\_\_\_\_

- No Impact
- Change in current fund
- Raise Budget (allow 45 days after Commission approval)
- Change in funds (allow 45 days after Commission approval)
- Reduction
- Transfer funds (allow 45 days after Commission approval)

Other: \_\_\_\_\_

Start Up Proposal for 2 New Transport Deputies for Six Months

<u>Expense</u>	<u>Per Position</u>		<u>Total</u>	<u>6 Months</u>
Annual Salary	\$36,400.00	2	\$72,800.00	\$36,400.00
Benefits	\$19,565.00	2	\$39,130.00	\$19,565.00
Uniforms	\$5,000.00	2	\$10,000.00	\$10,000.00
Weapons	\$5,000.00	2	\$10,000.00	\$10,000.00
Ammunition	\$800.00	2	\$1,600.00	\$1,600.00
Vehicles - Vans & Cars	\$30,000.00	2	\$60,000.00	\$60,000.00
Vehicle Emergency Equipment	\$15,000.00	2	\$30,000.00	\$30,000.00
Fuel	\$18,000.00	2	\$36,000.00	\$18,000.00
Maintenance	\$4,000.00	2	\$8,000.00	\$4,000.00
Training	\$3,000.00	2	\$6,000.00	\$6,000.00
<b>Total</b>	<b>\$136,765.00</b>		<b>\$273,530.00</b>	<b>\$195,565.00</b>



**NEW MEXICO DEPARTMENT OF PUBLIC SAFETY**  
 POST OFFICE BOX 1628 • SANTA FE, NEW MEXICO 87504-1628



**SUSANA MARTINEZ**  
 GOVERNOR

**PETE N. KASSETAS**  
 CHIEF/ DEPUTY SECRETARY  
 LAW ENFORCEMENT OPERATIONS

**OFFICE OF THE SECRETARY**  
 505/ 827-3370

**ADMINISTRATIVE SERVICES**  
 505/ 827-3332

**SCOTT WEAVER**  
 CABINET SECRETARY

**AMY L. ORLANDO**  
 DEPUTY SECRETARY  
 STATEWIDE LAW ENFORCEMENT  
 SERVICES AND SUPPORT  
 GENERAL COUNSEL

**OFFICE OF THE CHIEF**  
**NEW MEXICO STATE POLICE**  
 505/ 827-9219

**INFORMATION TECHNOLOGY**  
 505/ 827-3413

**OFFICE OF THE DEPUTY SECRETARY**  
 505/ 827-3367

**LAW ENFORCEMENT ACADEMY**  
 505/ 827-9252

November 9, 2017

Sheriff Heath White  
 Torrance County Sheriff's Department  
 205 9<sup>th</sup> Street  
 Estancia NM 87016

County Manager Belinda Garland  
 Torrance County Managers Office  
 205 9<sup>th</sup> Street  
 Estancia NM 87016

Dear Sheriff White and County Manager Garland,

The recent closing of the Torrance County Detention Center has put all law enforcement agencies operating in Torrance County at risk for severe liability. Currently state law and case law only allow for the removal of prisoners from where the crime was committed to another county by the Sheriff alone. Agencies operating in Torrance County do not have the authority to arrest someone and take them to another county. Doing so is a violation of state statute.

**33-3-3. Confinement of prisoners in county where offense committed.**

The jail or jails in each county shall be used or be available for the detention of every person who, within the same county, is charged with any crime or properly committed for trial or for the imprisonment of every person who in conformity with sentence, upon conviction of an offense, may have been sentenced, and for the safekeeping of every person who shall be committed by competent authority according to law.

**History:** Laws 1865-1866, ch. 19, § 2; C.L. 1884, § 469; C.L. 1897, § 822; Code 1915, § 3034; C.S. 1929, § 75-102; 1941 Comp., § 45-202; 1953 Comp., § 42-2-2; Laws 2001, ch. 51, § 1.

The Sheriff alone has the authority to remove persons arrested or confined in his county to another county by virtue of entering into a joint contract with another county by virtue of the County Commission.



**CALEA**  
 ACCREDITED LAW ENFORCEMENT AGENCY

**33-3-3. Confinement of prisoners in county where offense committed.**

The jail or jails in each county shall be used or be available for the detention of every person who, within the same county, is charged with any crime or properly committed for trial or for the imprisonment of every person who in conformity with sentence, upon conviction of an offense, may have been sentenced, and for the safekeeping of every person who shall be committed by competent authority according to law.

**History:** Laws 1865-1866, ch. 19, § 2; C.L. 1884, § 469; C.L. 1897, § 822; Code 1915, § 3034; C.S. 1929, § 75-102; 1941 Comp., § 45-202; 1953 Comp., § 42-2-2; Laws 2001, ch. 51, § 1.

The rules are clearly spelled out in *Parks v. Hughes*, 1918-NMSC-094, the Court noted:

It will thus be seen that the Legislature has provided that the jail in each county shall be used for the retention of persons charged with crime; that the sheriff alone is authorized to remove such a person from the county jail and confine him in some other county jail, or other place of safety; that an appeal operates to stay execution of the sentence in a criminal case, and that pending the determination of the appeal it is made the duty of the sheriff to keep the defendant in custody. It thus appears that in the state the statute fixes the place of commitment, and the sheriff alone is authorized to transfer the prisoner to another place, under certain contingencies.

With this in mind it is my recommendation that a location for the drop off of persons arrested in Torrance County be made or some sort of transportation system be implemented by the Sheriff for the sole purpose exchanging a person arrested to the custody of the Sheriff to be transported to his location of choice for confinement. I would hate for a serious case to be tossed out of court and someone who needs to be behind bars be released. The ramifications of this issue are serious and should not be taken lightly, we all could find ourselves having to answer tough questions if this issue is not addressed immediately.

Sincerely,



Captain Isaac Valerio  
Commander, District 5 Albuquerque  
New Mexico State Police

<b>PARKS V. HUGHES, 1918-NMSC-094, 24 N.M. 421, 174 P. 425 (S. Ct. 1918)</b>
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**PARKS et al.**

**vs.**

**HUGHES, Superintendent of State Penitentiary.**

No. 2257

SUPREME COURT OF NEW MEXICO  
1918-NMSC-094, 24 N.M. 421, 174 P. 425  
July 24, 1918, Decided

Application for writ of habeas corpus by John Parks and Charlie Parks against Thomas Hughes, superintendent of New Mexico State Penitentiary. Application granted, with directions.

**SYLLABUS**

**SYLLABUS BY THE COURT.**

Where the statute provides that the county jail shall be used for the retention of every person, who within the same county shall be charged with crime, and a party has been convicted of a crime and sentenced to the state penitentiary, and the statute provides that an appeal shall operate to stay execution, and such party has appealed, the judge of the district court has no power to order such party committed to the state penitentiary for safe-keeping pending the determination of such appeal, in the absence of a statute so authorizing. The statute (section 3049, Code 1915) authorizes the sheriff to remove prisoners in the county jail to some other jail, or other safe place, in his discretion. The power of removal is in the hands of the sheriff, at his discretion, and not in the district court.

**COUNSEL**

K. K. SCOTT and H. D. TERRELL, both of Silver City, for petitioners.  
C. A. HATCH, Assistant Attorney General, for respondent.

**JUDGES**

ROBERTS, J. HANNA, C. J., concurs.  
**AUTHOR: ROBERTS**

**OPINION**

{\*422} {1} **OPINION OF THE COURT.** ROBERTS, J. Petitioners were convicted in the district court of Grant county of murder in the second degree, and were sentenced to imprisonment in the state penitentiary for a term of not less than 90 years nor more than 99 years. From the judgment they appealed to this court. After the appeal had been granted the district judge of Grant county entered an order, reciting that the county jail of Grant county "is not a safe place in which to detain the said defendants during the pendency of their appeal heretofore allowed to the Supreme Court," and ordering the defendants (petitioners herein) to be committed to the state penitentiary at Santa Fe, N.M., for safe-keeping during the pendency of



said appeal. Pursuant to the order the sheriff of Grant county delivered the petitioners to the warden of the state penitentiary, and they have since been confined therein. This application for a writ of {\*423} habeas corpus is filed for the purpose of securing the release of petitioners from such state penitentiary and their remand to the sheriff of Grant county. The petition sets forth the facts. The warden filed a return, setting forth the order of the court referred to, and alleged that he was holding said petitioners solely by virtue of such order.

{2} The single question for determination, therefore, is the power of the district court to commit prisoners awaiting trial, or pending an appeal, to the state penitentiary for safekeeping. That there is no statutory authority for so doing is conceded by the Attorney General. Section 3033, Code 1915, provides:

"The common jail shall be under the control of the respective sheriffs of each county, and the same shall be used as prisons in the respective counties."

{3} Section 3034 reads:

"The jail in each county shall be used for the retention of every person or persons who, within the same county, shall be charged with any crime, or properly committed for trial, or for the imprisonment of every person or persons who in conformity with sentence, upon conviction of an offense may have been sentenced, and for the safe-keeping of every person who shall be committed by competent authority, according to law."

{4} Section 3049 provides:

"All persons charged with crime committed in the state of New Mexico, while awaiting indictment or trial on such charge, shall be incarcerated in the county jail of the county wherein such crime is alleged to have been committed, except that such persons may be temporarily imprisoned in other places of confinement while being conveyed or awaiting conveyance to the jail of the proper county: Provided, that the sheriff of any county, having the custody of anyone charged with the commission of crime shall be authorized to remove such person to another county jail, or any other place of safety, when in the opinion of such sheriff the life of such person is in imminent danger. \* \* \*"

{\*424} {5} Section 47, c. 43, Laws 1917, authorized appeals in criminal cases from the district to the Supreme Court. Section 58 of the same chapter provides:

"All appeals in criminal cases shall have the effect of a stay of execution of the sentence of the court until the decision of the Supreme Court upon said appeal."

{6} While section 49 reads as follows:

"If the defendant, in the judgment so ordered to be stayed, shall be in custody, it shall be the duty of the sheriff to keep the defendant in custody without executing the sentence which may have been passed, to abide such judgment as may be rendered upon appeal."

{7} It will thus be seen that the legislature has provided that the jail in each county shall be used for the retention of persons charged with crime; that the sheriff alone is authorized to remove such a person from the county jail and confine him in some other county jail, or other place of safety; that an appeal operates to stay execution of the sentence in a criminal case, and that pending the determination of the appeal it is made the duty of the sheriff to keep the defendant in custody. It thus appears that in the state the statute fixes the place of commitment, and the sheriff alone is authorized to transfer the prisoner to another place, under certain contingencies.

{8} In Bishop's New Criminal Procedure, § 1338, the author says:

"In England, all prisons are the Queen's, so the court of Queen's Bench may commit to any one. With us, this question is commonly determined by statute, and a commitment to a place not thereby authorized is unlawful and void." In the case of *Weed v. People*, 31 N.Y. 465, it was urged that the sentence was void because it did not name the prison in which the defendant should be confined. The statute provided the prison in which the sentence should be served. The court said: {\*/#25} "There is nothin in the statute requiring the particular prison which the law designates, as the one in which the convict is to be confined, to be mentioned in the sentence. The court would have no power to designate another or different prison than that prescribed by the Legislature, and it would be an idle ceremony to repeat, in the sentence, what the law had irrevocably fixed."

{9} The court would have no more power to change the place of confinement of a prisoner awaiting trial than he would have to disregard the mandate of the legislature as to where the prisoner should be confined while serving his sentence. If he has not the power in one case to disregard the provisions of the statute, clearly he would not in the other. Here the legislature has said where the person awaiting trial shall be confined, and it has seen proper only to invest the sheriff with the right to change the place of confinement. In the instant case the sheriff did not remove the prisoners to the penitentiary, in compliance with the statute, but refused to do so, and by his affidavit filed in this court in this case states that he refused to do so until ordered and directed by the court, because he believed the county jail of Grant county to be a safe place in which to securely keep the petitioners.

{10} In the case of *United States v. Greenwald* (D. C.) 64 F. 6, application was made to the district court to remove Louis Greenwald from the prison at San Quinten, Cal., to a county jail. Greenwald was serving a term of 6 years in such prison. The application was filed by his sister, and it was represented that such removal was necessitated by reason of the state of health of the prisoner and the condition of the prison. The court, after referring to section 5546, R. S. U. S., which provided that the place of imprisonment could be changed, when in the opinion of the Attorney General it was necessary, etc., said:

"I think that the power of removal, in a case such as this, is to be found, if at all, in the hands of the Attorney General of the United States."

{\*426} {11} In the case of Huber v. Robinson, 23 Ind. 137, the court held that a person convicted of a crime, punishable by imprisonment in a county jail, could not be removed by order of the court, or confined in a jail of another county.

{12} In the case of Keedy v. People, 84 Ill. 569, the court held it was error for the court to render judgment designating the jail of another county as the place of imprisonment of the defendant.

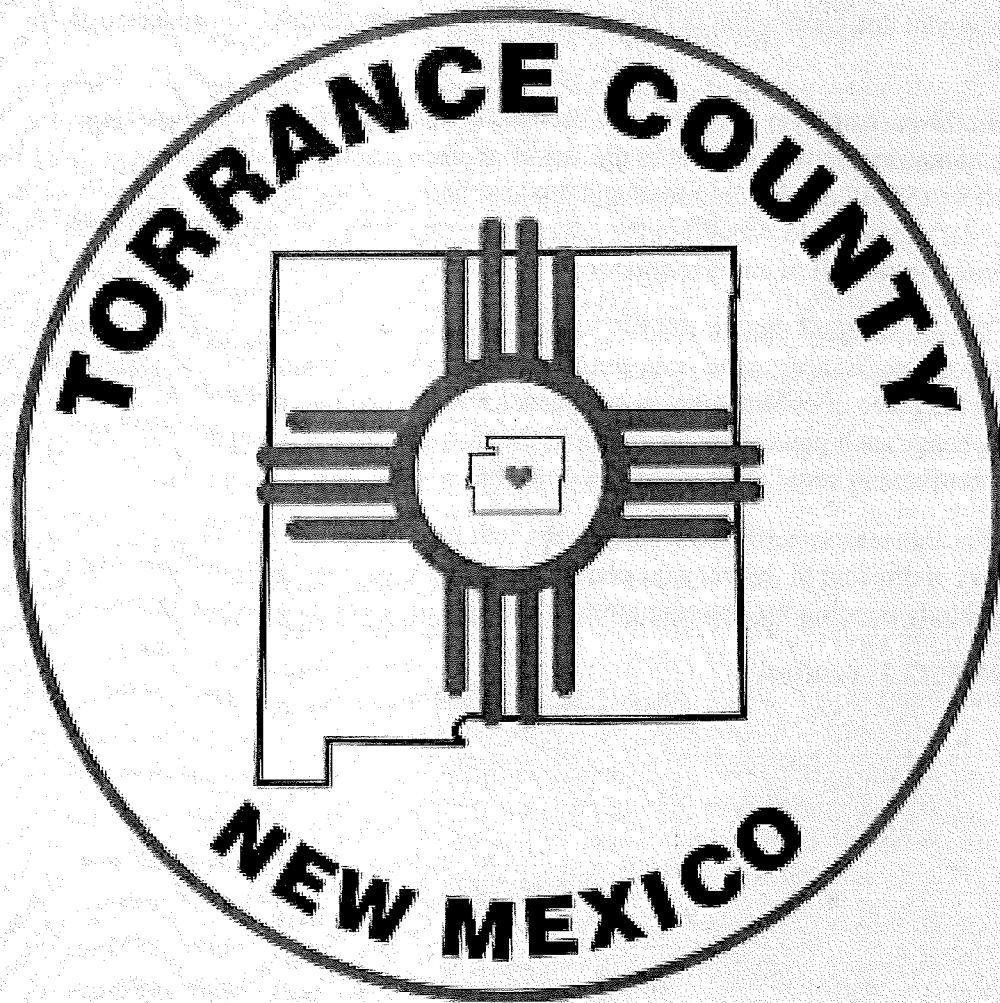
{13} In the case of Dyer v. People, 84 Ill. 624, it was held that it was not for the court to direct the commitment of a prisoner to the jail of another county, although there is no jail in the county where the offense is committed and the trial had, or if there was one it was insufficient; that the order should be to commit to the county jail; then if proper cause existed, the sheriff could commit to the jail of another county.

{14} We are satisfied that the district judge had no power to make the order in question, committing the petitioners to the state penitentiary for safe-keeping. The legislature has prescribed the place of confinement in such cases and has seen proper only to give the sheriff the power to change such place. Having withheld the power from the court to direct that the prisoner might be confined in some other place, the court has not the power to so order.

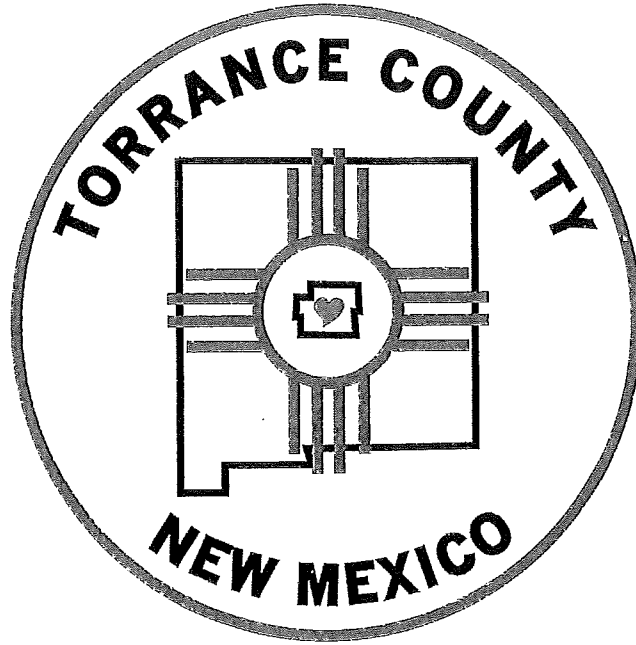
{15} For this reason petitioners' application will be granted and the warden of the state penitentiary is directed to deliver said petitioners to the sheriff of Grant county, who will hold them in custody pending the determination of the appeal; and it is so ordered.

HANNA, C. J., concurs.

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*Agenda Item  
No. 17*



# COUNTY MANAGER UPDATE

