

**Minutes of
Clay County Board of Supervisors
Meeting Held on Thursday, October 6, 2022 at 9:00 a.m.**

BE IT REMEMBERED a regular meeting of the Clay County Board of Supervisors was held at the Clay County Courthouse, West Point, Mississippi, on Thursday, October 6, 2022 at 9:00 a.m.

PRESENT:

Lynn D. Horton, *Supervisor District 1, Presiding*
Luke Lummus, *Supervisor, District 2*
R.B. Davis, *Supervisor District 3*
Shelton Deanes, *Supervisor District 4*
Joe Chandler, *Supervisor District 5*

Amy G. Berry, *Clay County Chancery Clerk*
Angela Turner Ford, *Board Attorney*
Eddie Scott, *Clay County Sheriff*

The following proceedings were had:

CALL TO ORDER/INVOCATION

The meeting was called to order by Sheriff Scott. The welcome was given by Supervisor Horton with the invocation given by Supervisor R. B. Davis.

ADOPTION OF AGENDA

Supervisor Deanes moved to adopt the agenda as presented.

The motion was seconded by Supervisor Davis.

(Exhibit "A")

AMENDMENT OF AGENDA

Supervisor Davis moved to call for amendments to the agenda.

The motion was seconded by Supervisor Lummus.

AMENDMENTS TO THE AGENDA

The following items were added to the agenda for further discussion and consideration by the Board:

- Sheriff Scott regarding US K9 Unlimited to purchase a new canine for the Seized Drug Unit of the Sheriff's Department and invoice from Synergetic
- Angela Turner Ford regarding proposed 911 Building
- Supervisor R. B. Davis regarding Burn Ban

AUTHORIZE AND APPROVE FOR THE ELECTION COMMISSIONERS TO TRAVEL TO THE ECAM 2023 ANNUAL CERTIFICATION TRAINING AND CONVENTION IN PHILADELPHIA, MS, JANUARY 24-26, 2023

Supervisor Lummus moved to authorize and approve for the Election Commissioners to travel to the ECAM Annual Convention in Philadelphia , MS, January 24-26, 2023.

The motion was seconded by Supervisor Chandler.

(Exhibit "B")

AUTHORIZE AND APPROVE TO PAYMENT TO THE GTR LINK FOR INVOICE IN THE AMOUNT OF \$250.00 FOR SPECIAL SERVICES AND FOR THE CLERK TO BILL THE CITY OF WEST POINT FOR THERIF ONE- HALF PORTION

Supervisor Davis moved to authorize and approve payment on the invoice to the GTR LINK in the amount of \$250.00 for Special Services and for the Clerk to bill the City of West Point for their one-half portion.

The motion was seconded by Supervisor Chandler.

(Exhibit "C")

AUTHORIZE AND APPROVE B J MCCLENTON, VOLUNTEER FIRE COORDINATOR TO TRAVEL TO PEARL, MISSISSIPPI TO TRAVEL TO THE VOLUNTEER COORDINATORS TRAINING

Supervisor Davis moved to authorize and approve BJ McClenton, Volunteer Fire Coordinator, to travel to Pearl, Mississippi to travel to the Volunteer Fire Coordinator's Training.

The motion was seconded by Supervisor Lummus.

AUTHORIZE AND APPROVE TO ACCEPT THE MONTHLY DEPARTMENTAL REPORT OF B. J. McClenton, VOLUNTEER FIRE COORDINATOR AND CLAY COUNTY MSU EXTENSION OFFICE DIRECTOR

Supervisor Deanes moved to authorize and approve to accept the monthly departmental report of B. J. McClenton, Volunteer Fire Coordinator and Clay County Extension Office Director.

The motion was seconded by Supervisor Lummus.

AUTHORIZE AND APPROVE THE SHERIFF TO PURCHASE THE CANINE DOG FROM US CANINE UNLIMITED AND FOR THE PAYMENT OF THE DOG TO COME FROM THE SEIZED DRUG FUND

Supervisor Deanes moved to authorize and approve the sheriff to purchase the canine dog from US Canine Unlimited and for the payment of the dog to come from the Seized Drug Fund.

The motion was seconded by Supervisor Lummus.

(Exhibit "D")

AUTHORIZE AND APPROVE THE QUOTE TO SYNERGETICS DCS INC IN THE AMOUNT OF \$4,019.00 TO PURCHASE TWO NEW COMPUTERS FOR THE JAIL AND TO PURCHASE WINDOWS OFFICE 365 FOR FIVE USERS

Supervisors Lummus moved to authorize and approve the quote to Synergetic DCS Inc in the amount of \$4,019.00 to purchase two new computers for the Jail and to purchase Windows Office 365 for five users.

The motion was seconded by Supervisor Deanes.

(Exhibit "E")

AUTHORIZE AND APPROVE FOR DEPUTY WILLIAM KNOWLES TO ATTEND THE HOSTAGE NEGOTIATORS, PHASE III, NOVEMBER 28- DECEMBER 2, 2023, IN SLIDELL, LA

Supervisor Deanes moved for Deputy William Knowles to attend the Hostage Negotiators, Phase III, class November 28-December 2, 2023, in Slidell, LA.

The motion was seconded by Supervisor Lummus.

(Exhibit "F")

AUTHORIZE AND APPROVE THE SHERIFF'S DEPARTMENT TO APPLY FOR A GRANT THROUGH THE US POLICE CANINE ASSOCIATION IN THE AMOUNT OF \$7,500.00 TO GO TOWARDS THE PURCHASE OF THE CANINE UNIT

Supervisor Deanes moved to authorize and approve the Sheriff's Department to apply for a grant in the amount of \$7,500.00 through the U S Police Canine Association to go towards the purchase of the Canine unit.

The motion was seconded by Supervisor Lummus.

AUTHORIZE AND APPROVE THE PRESIDENT TO EXECUTE THE GRANT AGREEMENT FOR THE US POLICE CANINE ASSOCIATION

Supervisor Deanes moved to authorize and approve the President to execute the Grant agreement for the US Police Canine Association.

The motion was seconded by Supervisor Lummus.

(Exhibit "G")

AUTHORIZE AND APPROVE THE QUOTE OF US K9 UNLIMITED AS THE LOWEST AND BEST QUOTE IN THE AMOUNT OF \$21,950.000 TO PURCHASE THE CANINE UNIT FOR THE SEIZED DRUG UNIT AT THE SHERIFF'S DEPARTMENT

Supervisor Lummus moved to authorize and approve the quote of US K9 Unlimited in the amount of \$21,950.00 to purchase a canine unit for the Seized Drug Unit at the Sheriff's Department.

The motion was seconded by Supervisor Deanes.

(Exhibit "H")

AUTHORIZE AND APPROVE TO REIMBURSE THE SHERIFF FOR THE CANINE HANDLER'S TRAVEL EXPENSE

Supervisor Deanes moved to authorize and approve to reimburse the Sheriff for the Handler's Travel expense, Deputy Jimmy Pee, incurred pending approval.

The motion was seconded by Supervisor Lummus.

AUTHORIZE AND APPROVE TRAVEL FOR DEPUTY SHERIFF JIMMY PEE TO BE DESIGNATED AS THE HANDLER FOR THE CANINE UNIT AND TO BE AUTHORIZED TO TRAVEL NOVEMBER 1, 2022 FOR THE TWO- WEEK TRAINING COURSE AND FOR THE COST OF THE SAID TRAVEL TO BE EXPENSED TO THE SEIZED DRUG FUND

Supervisor Lummus moved to authorize and approve travel for Deputy Sheriff Jimmy Pee to be designated as the Handler for the Canine Unit and to be authorized to travel to training November 1, 2022 for the two-week training course and for the cost of the said training to be expensed from the Sheriff's Seized Drug Fund.

The motion was seconded by Supervisor Deanes.

AUTHORIZE AND APPROVE TO SET A BURN BAN

Supervisor Deanes moved to authorize and approve to follow the recommendation of the EMA Coordinator, Torrey Williams, and the Volunteer Fire Coordinator, B. J. McClenton, to set a burn ban pending the appropriate time the Board deems appropriate to lift the said ban.

The motion was seconded by Supervisor Davis.

(Exhibit "I")

AUTHORIZE AND APPROVE OF THE QUOTE FROM COLUMBUS FENCE TO INSTALL A FENCE AROUND THE UNA RECREATIONAL PARK IN THE AMOUNT OF \$6,300.00 AND FOR THE COST TO BE EXPENSED FROM THE UNA RECREATIONAL FUND AS DESIGNATED BY THE MS LEGISLATURE

Supervisor Deanes moved to authorize and approve of the quote from Columbus Fence to install a fence around the UNA RECREATIONAL PARK in the amount of \$6,300.00 and for the cost to be expensed from the Una Recreational Fund as designated by the MS Legislature.

The motion was seconded by Supervisor Davis.

(Exhibit "J")

AUTHORIZE AND APPROVE THE SHORT-TERM NOTE BID OF BANK OF COMMERCE FOR EIGHT MONTHS AT A RATE OF 3.75% WITH PAYOFF OF \$374,075.00

Supervisor Lummus moved to authorize and approve the Short-term Note bid of Bank of Commerce for eight months at a rate of 3.75% with payoff of \$374,075.00.

The motion was seconded by Supervisor Davis.

(Exhibit "K")

AUTHORIZE AND APPROVE THE PURCHASE OF TEN (10) EMV 3000 SIGNATORY PADS FOR THE CREDIT CARD SYSTEMS

Supervisor Lummus moved to authorize and approve the purchase of ten (10) EMV 3000 signatory pads for the credit card systems.

The motion was seconded by Supervisor Deanes.

(Exhibit "L")

AUTHORIZE AND APPROVE THE I/T ADMINISTRATOR, TREVA HODGE, TO OBTAIN QUOTES TO CONTRACT WITH A VENDOR TO CLEAN UP THE WIRING IN THE COMPUTER ROOM DOWNSTAIRS IN THE CHANCERY CLERKS' OFFICE

Supervisor Lummus moved to authorize and approve the I/T Administrator, Treva Hodge, to obtain quotes to contract with a vendor to clean up the wiring in the computer room downstairs in the Chancery Clerk's office.

The motion was seconded by Supervisor Davis.

AUTHORIZE AND APPROVE TO TRANSFER \$1,900,000.00 FROM THE ARPA FUND TO BE DIVIDED EVENLY AMONG THE FIVE (5) DISTRICTS AND TRANSFERRED TO EACH DISTRICT'S ARPA ROAD MAINTENANCE & CAPITAL IMPROVEMENT FUND

Supervisor Deanes moved for the said transfer of funds from the ARPA Fund to each Districts respective ARPA Infrastructure fund as stated above.

The motion was seconded by Supervisor Horton.

AUTHORIZE AND APPROVE OF THE INTERLOCAL AGREEMENT WITH THE CITY OF WEST POINT AND FOR THE BOARD ATTORNEY TO FORWARD TO THE CITY OF WEST POINT BOARD OF ALDERMAN AND MAYOR FOR THEIR REVIEW

Supervisor Deanes moved to authorize and approve the interlocal agreement with the City of West Point and for the Board attorney to forward the said agreement to the City of West Point Board of Mayor and Aldermen for their consideration and approval on the Emergency Operating Center for 911 Services.

The motion was seconded by Supervisor Davis.

(Exhibit "M")

AUTHORIZE AND APPROVE TO GO INTO CLOSED SESSION

Supervisor Deanes moved to authorize and approve to go into closed session.

The motion was seconded by Supervisor Chandler.

AUTHORIZE AND APPROVE TO GO FROM CLOSED SESSION TO EXECUTIVE SESSION AS ALLOWED UNDER SECTION 25-41-7 OF THE *MISSISSIPPI CODE OF 1972*, AS AMENDED AND ANNOTATED, TO DISCUSS A PERSONNEL MATTER

Supervisor Davis moved to authorize and approve to go from closed session to executive session as allowed under Section 25-41-7 of the *Mississippi Code of 1972*, as amended and annotated, to discuss a personnel matter.

The motion was seconded by Supervisor Lummus.

AUTHORIZE AND APPROVE TO COME OUT OF EXECUTIVE SESSION

Supervisor Deanes moved to authorize and approve to come out of executive session.

The motion was seconded by Supervisor Lummus.

RECESS


Supervisor Davis to recess until Thursday, October 27, 2022 at 9:00 a.m. at the Clay County Courthouse.

The motion was seconded by Supervisor Lummus.

*** All motions were carried unanimously unless otherwise indicated.

SO ORDERED, this the 6th day of October, 2022.




AMY G. BERRY, CHANCERY CLERK
CLERK OF THE BOARD
CLAY COUNTY MISSISSIPPI



LYNN HORTON, PRESIDENT
BOARD OF SUPERVISORS
CLAY COUNTY MISSISSIPPI

EXHIBIT A

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**Clay County Board of Supervisors
Agenda for Regular Meeting
Thursday, October 6, 2022, at 9:00 a.m.**

- Call to Order
- Welcome & Prayer
- Adopt and Amend Agenda
- Authorize and approve travel for Election Commissioners and Circuit Clerk to travel to ECAM 2023 Annual Conference Training Philadelphia, January 24-26, 2023
- Authorize and approve payment to GTR LINK for special services and for the Clerk to remit bill to City of West Point for reimbursement for pro-rata portion
- Treva Hodge, *Personnel Manager/IT Administrator*
 - Employee Training Opportunities
- Amy Berry, *Chancery Clerk*
 - Authorize and approve the Short -Term Note bid of Bank of Commerce for 8 months at 3.75% with payoff of \$374,075.00
 - Authorize and approve the purchase of 10 EMV 3000 signatory pads for credit card systems
- Monthly Departmental Reports
- Recess until Thursday, October 27, 2022, at the Clay County Courthouse

AMMENDMENTS:

EXHIBIT B

ECAM 2023 Annual Certification Training and Convention
Silver Star – Hotel – Philadelphia, Mississippi – January 24-26, 2023
REGISTRATION AND PAYMENT DUE DECEMBER 15 (LATE FEE: \$50)

Please complete registration early to be assured of a room at the ECAM RATE, otherwise you may be subject to a higher rate. Registration fees cover two nights and 6 meals. Extra nights are an individual's responsibility.

Print Name: Sawana D. Walker
(Legal name as it appears on ID) Contact Phone: 662 295 9663

Address: 2335 CCC Line Rd. City Prairie Zip 39756

Congressional District 1 Supervisor District 4 County Clay

EMAIL (confirmations will be sent by email provided) sawanawalker@gmail.com

Please check appropriate box: County Election Commissioner Circuit Clerk or D.C. (one only)

New elected/appointed Election Commissioner/Clerk Other

Name of Election Commission Chairperson Sawana D. Walker

Name of Roommate: _____
(List only if election commissioner)

Meal Tickets for spouse/guest: will be available to purchase at convention only during ECAM registration.

DO NOT SEND MONEY WITH REGISTRATION

Tickets: Breakfast \$25 Lunch \$30 Dinner \$42 Banquet \$45

ECAM MEMBER: County Election Commissioner – Includes Tuesday, Wednesday in Hotel
Registration fee: \$460 + Dues - \$40 – Total Due: \$500 \$ 500⁰⁰

ECAM ASSOCIATE: Includes Tuesday, Wednesday in Hotel
Registration fee: \$460 + Dues \$35 – Total Due: \$495 \$ _____

ECAM MEMBER attending convention – but NOT STAYING IN HOTEL
Registration fee: \$210 + Dues \$40 – Total Due: \$250 \$ _____

ECAM ASSOCIATE attending convention – but NOT STAYING IN HOTEL
Registration fee: \$210 + Dues \$35 – Total Due: \$245 \$ _____

EXTRA NIGHT (SUNDAY, MONDAY OR THURSDAY) \$65 \$ _____

ALL FUNDS MUST BE SENT TO ECAM TREASURER – NOT THE HOTEL – FUNDS DUE DECEMBER 24.

_____ Single/King Double/Queen
_____ Smoking Non-Smoking _____ Handicap _____ NO Preference

SPECIAL NEEDS SCOOTER: \$40 a day. _____ Tuesday _____ Wednesday _____ Thursday _____ List Other day
(Limited number of scooters and will be reserved on first come basis)

MAKE CHECKS PAYABLE TO ECAM TOTAL DUE (amount Enclosed) \$ 500⁰⁰

REGISTRATION DEADLINE: DECEMBER 15, 2022 (LATE FEE: \$50) – CANCELLATIONS DEADLINE: December 24

I understand and agree to the terms above: Sawana D Walker Date: 10/3/2022

Mail this SIGNED and DATED form and PAYMENT to: Honorable Larry Gardner

2 SUMMERFIELD PLACE , NATCHEZ, MS 39120

DO NOT SEND REGISTRATION WITHOUT PAYMENT

ECAM 2023 Annual Certification Training and Convention
Silver Star – Hotel – Philadelphia, Mississippi – January 24-26, 2023
REGISTRATION AND PAYMENT DUE DECEMBER 15 (LATE FEE: \$50)

Please complete registration early to be assured of a room at the ECAM RATE, otherwise you may be subject to a higher rate. Registration fees cover two nights and 6 meals. Extra nights are an individual's responsibility.

Print Name: THOMAS "TOMMY" BRYAN
(Legal name as it appears on ID) Contact Phone: 662-295-7121

Address: 640 WAVERLY RD. City WEST POINT Zip 39773

Congressional District 1 Supervisor District 2 County CLAY

EMAIL (confirmations will be sent by email provided) tbryan@claycounty.ms.gov

Please check appropriate box: County Election Commissioner Circuit Clerk or D.C. (one only) _____

New elected/appointed Election Commissioner/Clerk _____ Other _____

Name of Election Commission Chairperson SAWANA WALKER

Name of Roommate: _____
(List only if election commissioner)

Meal Tickets for spouse/guest: will be available to purchase at convention only during ECAM registration.
DO NOT SEND MONEY WITH REGISTRATION

Tickets: Breakfast \$25 Lunch \$30 Dinner \$42 Banquet \$45

ECAM MEMBER: County Election Commissioner – Includes Tuesday, Wednesday in Hotel
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Registration fee: \$210 + Dues \$40 – Total Due: \$250 \$ _____

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EXTRA NIGHT (SUNDAY, MONDAY OR THURSDAY) \$65 \$ _____

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_____ Smoking Non-Smoking Single/King _____ Double/Queen
_____ Handicap _____ NO Preference

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(Limited number of scooters and will be reserved on first come basis)

MAKE CHECKS PAYABLE TO ECAM TOTAL DUE (amount Enclosed) \$ _____

REGISTRATION DEADLINE: DECEMBER 15, 2022 (LATE FEE: \$50) – CANCELLATIONS DEADLINE: December 24

I understand and agree to the terms above: [Signature] Date: 10-3-2022

Mail this SIGNED and DATED form and PAYMENT to: Honorable Larry Gardner
2 SUMMERFIELD PLACE, NATCHEZ, MS 39120

DO NOT SEND REGISTRATION WITHOUT PAYMENT

ECAM 2023 Annual Certification Training and Convention
Silver Star – Hotel – Philadelphia, Mississippi – January 24-26, 2023
REGISTRATION AND PAYMENT DUE DECEMBER 15 (LATE FEE: \$50)

Please complete registration early to be assured of a room at the ECAM RATE, otherwise you may be subject to a higher rate. Registration fees cover two nights and 6 meals. Extra nights are an individual's responsibility.

Print Name: LINDA IVY
(Legal name as it appears on ID) Contact Phone: 662. 854-1021

Address: 107 CARVER STREET City West Point Zip 39773

Congressional District 1 Supervisor District 1 County Clay

EMAIL (confirmations will be sent by email provided) oneal283@yahoo.com

Please check appropriate box: County Election Commissioner Circuit Clerk or D.C. (one only)

New elected/appointed Election Commissioner/Clerk Other

Name of Election Commission Chairperson Sawana Walker

Name of Roommate: _____
(List only if election commissioner)

Meal Tickets for spouse/guest: will be available to purchase at convention only during ECAM registration.
DO NOT SEND MONEY WITH REGISTRATION

Tickets: Breakfast \$25 Lunch \$30 Dinner \$42 Banquet \$45

ECAM MEMBER: County Election Commissioner – Includes Tuesday, Wednesday in Hotel
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Registration fee: \$460 + Dues \$35 – Total Due: \$495 \$ _____

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Registration fee: \$210 + Dues \$40 – Total Due: \$250 \$ _____

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Registration fee: \$210 + Dues \$35 – Total Due: \$245 \$ _____

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_____ Single/King Double/Queen
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(Limited number of scooters and will be reserved on first come basis)

MAKE CHECKS PAYABLE TO ECAM TOTAL DUE (amount Enclosed) \$ 500.00

REGISTRATION DEADLINE: DECEMBER 15, 2022 (LATE FEE: \$50) – CANCELLATIONS DEADLINE: December 24

I understand and agree to the terms above: Linda Ivy Date: 10-3-2022

Mail this SIGNED and DATED form and PAYMENT to: Honorable Larry Gardner

2 SUMMERFIELD PLACE, NATCHEZ, MS 39120

DO NOT SEND REGISTRATION WITHOUT PAYMENT

ECAM 2023 Annual Certification Training and Convention
Silver Star – Hotel – Philadelphia, Mississippi – January 24-26, 2023
REGISTRATION AND PAYMENT DUE DECEMBER 15 (LATE FEE: \$50)

Please complete registration early to be assured of a room at the ECAM RATE, otherwise you may be subject to a higher rate. Registration fees cover two nights and 6 meals. Extra nights are an individual's responsibility.

Print Name: George Hubert Caston
(Legal name as it appears on ID) Contact Phone: 662 524 0048

Address: 111 S. Division City West Point Zip 39173

Congressional District 1 Supervisor District 3 County CLAY

EMAIL (confirmations will be sent by email provided) hubertcaston@yahoo.com

Please check appropriate box: County Election Commissioner Circuit Clerk or D.C. (one only)

New elected/appointed Election Commissioner/Clerk Other

Name of Election Commission Chairperson Sawana D. Walker

Name of Roommate: _____
(List only if election commissioner)

Meal Tickets for spouse/guest: will be available to purchase at convention only during ECAM registration.
DO NOT SEND MONEY WITH REGISTRATION

Tickets: Breakfast \$25 Lunch \$30 Dinner \$42 Banquet \$45

ECAM MEMBER: County Election Commissioner – Includes Tuesday, Wednesday in Hotel	
Registration fee: \$460 + Dues - \$40 – Total Due: \$500	\$ <u>500⁰⁰</u>
ECAM ASSOCIATE: Includes Tuesday, Wednesday in Hotel	
Registration fee: \$460 + Dues \$35 – Total Due: \$495	\$ _____
ECAM MEMBER attending convention – but NOT STAYING IN HOTEL	
Registration fee: \$210 + Dues \$40 – Total Due: \$250	\$ _____
ECAM ASSOCIATE attending convention – but NOT STAYING IN HOTEL	
Registration fee: \$210 + Dues \$35 – Total Due: \$245	\$ _____
EXTRA NIGHT (SUNDAY, MONDAY OR THURSDAY) \$65	\$ _____

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_____ Single/King Double/Queen
_____ Smoking Non-Smoking _____ Handicap _____ NO Preference
SPECIAL NEEDS SCOOTER: \$40 a day. _____ Tuesday _____ Wednesday _____ Thursday _____ List Other day
(Limited number of scooters and will be reserved on first come basis)

MAKE CHECKS PAYABLE TO ECAM TOTAL DUE (amount Enclosed) \$ _____

REGISTRATION DEADLINE: DECEMBER 15, 2022 (LATE FEE: \$50) – CANCELLATIONS DEADLINE: December 24

I understand and agree to the terms above: George Hubert Caston Date: _____

Mail this SIGNED and DATED form and PAYMENT to: Honorable Larry Gardner
2 SUMMERFIELD PLACE, NATCHEZ, MS 39120
DO NOT SEND REGISTRATION WITHOUT PAYMENT

ECAM 2023 Annual Certification Training and Convention
Silver Star – Hotel – Philadelphia, Mississippi – January 24-26, 2023
REGISTRATION AND PAYMENT DUE DECEMBER 15 (LATE FEE: \$50)

Please complete registration early to be assured of a room at the ECAM RATE, otherwise you may be subject to a higher rate. Registration fees cover two nights and 6 meals. Extra nights are an individual's responsibility.

Print Name: DOROTHY Heard
(Legal name as it appears on ID) Contact Phone: 662-364-2238

Address: 70 Hogan street city Pheba Zip 39755

Congressional District 1 Supervisor District 5 County CLAY

EMAIL (confirmations will be sent by email provided) dheard1251@aol.com

Please check appropriate box: County Election Commissioner Circuit Clerk or D.C. (one only) _____

New elected/appointed Election Commissioner/Clerk _____ Other _____

Name of Election Commission Chairperson SAWANA WALKER

Name of Roommate: _____
(List only if election commissioner)

Meal Tickets for spouse/guest: will be available to purchase at convention only during ECAM registration.
DO NOT SEND MONEY WITH REGISTRATION

Tickets: Breakfast \$25 Lunch \$30 Dinner \$42 Banquet \$45

ECAM MEMBER: County Election Commissioner – Includes Tuesday, Wednesday in Hotel
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ECAM ASSOCIATE: Includes Tuesday, Wednesday in Hotel
Registration fee: \$460 + Dues \$35 – Total Due: \$495 \$ _____

ECAM MEMBER attending convention – but NOT STAYING IN HOTEL
Registration fee: \$210 + Dues \$40 – Total Due: \$250 \$ _____

ECAM ASSOCIATE attending convention – but NOT STAYING IN HOTEL
Registration fee: \$210 + Dues \$35 – Total Due: \$245 \$ _____

EXTRA NIGHT (SUNDAY, MONDAY OR THURSDAY) \$65 \$ _____

ALL FUNDS MUST BE SENT TO ECAM TREASURER – NOT THE HOTEL – FUNDS DUE DECEMBER 24.

Single/King _____ Double/Queen

_____ Smoking Non-Smoking _____ Handicap _____ NO Preference

SPECIAL NEEDS SCOOTER: \$40 a day. _____ Tuesday _____ Wednesday _____ Thursday _____ List Other day
(Limited number of scooters and will be reserved on first come basis)

MAKE CHECKS PAYABLE TO ECAM TOTAL DUE (amount Enclosed) \$ _____

REGISTRATION DEADLINE: DECEMBER 15, 2022 (LATE FEE: \$50) – CANCELLATIONS DEADLINE: December 24

I understand and agree to the terms above: Dorothy Heard Date: 10-4-2022

Mail this SIGNED and DATED form and PAYMENT to: Honorable Larry Gardner

2 SUMMERFIELD PLACE, NATCHEZ, MS 39120

DO NOT SEND REGISTRATION WITHOUT PAYMENT

EXHIBIT C

Golden Triangle Development LINK

P.O. Box 1328
Columbus, MS 39703
662.328.8369
www.gtrlink.org



INVOICE

BILL TO
Clay County
Clay County Board of Supervisors
PO Box 815
West Point, MS 39773

INVOICE # 258348 DATE 09/27/2022 TERMS Due on receipt

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
	Clay County Reimbursement	Jones Walker Invoice #1128405	1	250.00	250.00

BALANCE DUE **\$250.00**

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Please Remit Payments Only To:
201 St. Charles Avenue, 50th Floor
New Orleans, LA 70170-5100
Telephone 504.582.8000
Payments Only: iwar@joneswalker.com
Billing Inquiries: creditmanager@joneswalker.com
Fed. I.D. # 72-0445111

May 31, 2022

Golden Triangle Development Link
Lowndes County Administrator
P.O. Box 1364
Columbus, MS 39703

Client: 028755
Matter: 14068101
Invoice #: 1128405

RE: General Project Advice - Lowndes County

Date	Initials	Description	Hours	Amount
12/07/21	CSP	Project Universal: Telephone conference with J. Higgins re expiration of purchase option contract for Project Universal and implications of same. ✓	0.20	100.00
12/13/21	BKP	Project Lettuce - Order title report update; draft Owner's & Contractor's Affidavit; prepare statement for Endorsement premium. ✓	1.50	360.00
12/14/21	BKP	Project Lettuce - Discuss form for O&C Affidavit with A. Taylor. ✓	0.10	24.00
12/21/21	BKP	Project Lettuce - Review title report update. ✓	0.30	72.00
02/04/22	CSP	Travel to Columbus, MS; Participate in extended meeting with SDI, WATCO, County and LINK representatives and engineers re propose port facilities and rail expansion and possible funding sources for the same; advise re state funding options; return travel to Jackson, MS. ✓	6.30	3,150.00
02/17/22	CSP	Participate in conference call with Columbia Industries President re termination of PSA for former Blazon Tube facility in West Point; related discussions with LINK team re same; call and voicemail to TN counsel for seller re same.	0.50	250.00
02/22/22	CSP	Review Altex tube offer proposed by MDA; participate in conference call with same and with LINK team re pros/cons of offer options and next steps.	0.60	300.00
04/05/22	CSP	Project Redberg: Review sources and uses worksheet alternative; provide comments re same to J, Higgins; related telephone conference with same.	0.30	150.00

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<i>Date</i>	<i>Initials</i>	<i>Description</i>	<i>Hours</i>	<i>Amount</i>
04/12/22	CSP	Telephone conference with B. Cork re Project Nova and LINK calculated infrastructure costs; share same with B. Cork for purposes of determining FILOT sharing arrangement; related Telephone conference with J. Higgins and T. Hairston re same.	1.10	550.00
04/14/22	CSP	Project Nova: Correspondence with J. Higgins re project scope and additional details.	0.30	150.00

Total Fees:**\$5,106.00****Timekeeper Summary**

<i>Initials</i>	<i>Timekeeper</i>	<i>Hours</i>	<i>Rate</i>	<i>Amount</i>
BKP	B. K. Payne	1.90	\$240.00	\$456.00
CSP	Christopher S. Pace	9.30	\$500.00	\$4,650.00
Totals		11.20		\$5,106.00

TOTAL AMOUNT DUE THIS INVOICE**\$5,106.00**

225

EXHIBIT D

226



AKC REUNITE ADOPT A K-9 COP
Matching Grant
Guidelines and Application



Please complete all sections. Form must be typed.

Section A: GENERAL INFORMATION

- 1) Date of Application: 10/5/2022
- 2) Department Name: Clay County Sheriff's Office
- 3) Mailing Address for Department: 348 West Broad Street
Street Address
West Point, MS 39773
City, State and Zip
- Web Site: www.claysheriffms.org
- Email: acummings@claysheriffms.org Phone: (662) 275-0413
- 4) Department Chief, Sheriff, or Designee: Eddie Scott
 Title: Sheriff Email: escottclaysheriff@gmail.com
 Phone: (662) 295-5441
- 5) Grant Application Contact Person (if other than above)
 Name: Stephen Young Title: Major
 Email: syoung@claysheriffms.org Phone: (662) 295-1782
- 6) Federal Tax ID# (EIN): 64-6000252
- 7) Tax-exempt status: Exempt
- 8) Has your department received any previous support from the American Kennel Club or AKC Reunite?
 List the specific year (s) and please explain:
N/A

- 9) Territory or area served: Clay County, MS (what jurisdiction will this k9 work in?)

Section B: SPONSORING CLUB INFORMATION

United States K-9 Unlimited, Inc.
 8003 Moline Ave.
 Abbeville, La. 70510
 (855) 875-9364
 www.usk9.com info@usk9.com

Invoice



Bill To
Clay County MS

Date	Invoice No.	P.O. Number	Terms
10/05/22	393114		

Date	Item	Description	Qty	Rate	Amount
10/04/22	Dual Purpose Canine	Imported Canine fully trained in Narcotics Detection & Patrol Functions	1	16,500.00	16,500.00
	5 Week Handler course	Tuition: 5 week handler course (classroom and practical application).	1	3,950.00	3,950.00
	Handler Lodging - private room	Lodging on site location for advanced learning and group participation. Mon, Tues, Wed, Thurs nights - go home on weekend. 5 weeks x's 4 nights each week	20	75.00	1,500.00

		Subtotal	\$21,950.00
		Sales Tax	\$0.00
		Total	\$21,950.00
Balance Due	\$21,950.00	Payments/Credit	\$0.00

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United States K-9 Unlimited, Inc.
 8003 Moline Ave.
 Abbeville, La. 70510
 (855) 875-9364
 www.usk9.com info@usk9.com

Invoice



Bill To
Clay County MS

Date	Invoice No.	P.O. Number	Terms
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	Handler Lodging - private room	Lodging on site location for advanced learning and group participation. Mon, Tues, Wed, Thurs nights - go home on weekend. 5 weeks x's 4 nights each week	20	75.00	1,500.00

		Subtotal	\$21,950.00
		Sales Tax	\$0.00
		Total	\$21,950.00

Balance Due	\$21,950.00	Payments/Credit	\$0.00
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Check list:

Section E: ATTACHMENTS

Please make sure that this application is COMPLETE. All blanks must be filled and there must be a written signature in the certification section.

Completed W-9 Must be included with Application. **The check can only be mailed to the Department and department address listed on the W-9.**

Proof of 501(c)(3) status, if applicable.

Agree to display AKC REUNITE stickers on their k9 squad.

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1) Sponsoring AKC Club: **UNITED STATES POLICE CANINE ASSOCIATION, INC.**

2) Primary Club Grant Contact:

Don Slavik - Executive Director

20 Hickory Ridge Dr, Falmouth, VA 22405-2440

Email: uspcaexecutivedirector@gmail.com

Phone: 651-350-4541

Section C: K-9 PROGRAM DESCRIPTION

1) Please describe the department's current K-9 unit/program: (if it is new, please describe your department's goal. If you have an existing program, tell us briefly about that program:

Our department has an existing K-9 Program and we have a 2021 Dodge Durango K-9 Unit equipped


with the latest safety equipment for K-9 working dogs. Our K-9's are primarily utilized for narcotics detection, suspect apprehension

and search and rescue. This K-9 is being as a replacement for our previous working dog.

2) What is your expected cost for purchase of the K-9? \$21,950

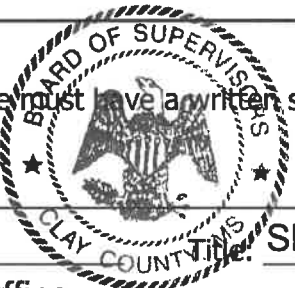
Section D: CERTIFICATION

Please complete the below information. We must have a written signature. Typed or digital signatures are not allowed, please.

SIGNATURE: 

Printed Name: Eddie Scott

Department: Clay County Sheriff's Office Title: Sheriff Date: 10/6/22



****PLEASE NOTE: Check will be issued/mailed to the Department named on the W-9 form.**

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Clay County, Mississippi		
2 Business name/disregarded entity name, if different from above		
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input checked="" type="checkbox"/> Other (see instructions) ▶ County Government	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
5 Address (number, street, and apt. or suite no.) See instructions. P. O. Box 815	6 City, state, and ZIP code West Point, MS 39773	Requester's name and address (optional)
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number								
			-					
or								
Employer identification number								
6	4		-	6	0	0	0	2 5 2

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶ 	Date ▶ 10/7/2022
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)
Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



Federal Tax ID # 64-6000252

000000204 01 SP 0.465 01171 1 204

Date: May 12, 2016 Letter ID: L1505280384



AMY G. BERRY CLAY CO BOARD OF SUPERVISORS PO BOX 815 WEST POINT MS 39773-0815

Reference: Sales Tax Exemption Letter Ruling Number: 16-0185

This is in response to your letter dated May 10, 2016, requesting that the Mississippi Department of Revenue provide a ruling regarding whether Clay County Board of Supervisors is exempt from Mississippi sales and use tax. Your request has been assigned the letter ruling number listed above. Please use this number in any further correspondence with the DOR concerning this request.

After a search of the applicable statutes, this is to confirm that Clay County Board of Supervisors does qualify for sales tax exempt status pursuant to Miss. Code Ann. Section 27-65-105(a). This Section provides that sales of tangible personal property or services made to the United States Government, the State of Mississippi and its departments, institutions, counties and municipalities or departments or school districts of said counties and municipalities are exempt from sales taxes. As a prerequisite to exemption, the sale of property or charge for services must be sold directly to, billed directly to, and paid for directly by the exempt entity.

This exemption does not apply to sales of tangible personal property or services to contractors purchased in the performance of contracts with the exempt entity, nor the employees of the exempt entity, although the contractor or employee may be reimbursed for the expense by the exempt entity. Furthermore, this exemption does not apply to Contractor's Tax levied by Miss. Code Ann. Section 27-65-21.

You may use a copy of this letter in order to substantiate Clay County Board of Supervisors' exempt status. I trust that this is the information you were requesting. Should you have any additional questions, feel free to contact this office.

Under Miss. Code Ann. Section 27-65-85(a), it shall be unlawful for any person to use an exemption authorized under the Sales Tax laws for the purpose of avoiding the payment of tax the person is required to pay by law. Any person violating this provision shall be guilty of a misdemeanor and, on conviction thereof, shall be fined not more than Five Hundred Dollars (\$500.00), or imprisoned not exceeding six (6) months in the county jail, or punished by both such fine and imprisonment, at the discretion of the court.

This letter ruling is based on the specific facts and circumstances that you communicated to the DOR. This ruling is not binding on the DOR if these facts and circumstances are inaccurate, contain a material omission of a relevant fact or facts to the issue(s) presented or if such facts and circumstances change. This letter ruling is also only valid for seven (7) years from the date of this letter. At the end of this seven (7) year period, you are free to update your information and request another letter ruling if you wish. This ruling is only applicable to you or to your client if you are requesting this ruling on behalf of another and can only be relied upon by the person for whom the ruling was requested.

If the facts and circumstances presented in your request are accurate, complete and do not change for the seven (7) year period indicated above, the person for whom it was requested can rely upon this ruling unless and until there is a change

P.O. Box 1033 Jackson, MS 39215-1033 Phone: (601) 923-7700 Fax: (601) 923-7714

Form # mL0004 v. v94

Visit www.dor.ms.gov for tax information and online filing. If you call, please have this letter with you.

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in the law or regulation or the issuance of judicial decision that indicates the ruling is no longer correct or the DOR retracts the ruling. The DOR does reserve the right to retract this ruling if it later determines on its own review that the ruling is incorrect. Such retraction will be in writing and the effect of the retraction will be prospective from the date of the retraction letter.

Sincerely,

Nicolette Floyd
(601) 923-7029
Mississippi Department of Revenue

00001171000204020200 - 001



P.O. Box 1033 Jackson, MS 39215-1033 Phone: (601) 923-7700 Fax: (601) 923-7714

Form # ml0004 v. v04

Visit www.dor.ms.gov for tax information and online filing. If you call, please have this letter with you.

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United States K-9 Unlimited, Inc.
 8003 Moline Ave.
 Abbeville, La. 70510
 (855) 875-9364
 www.usk9.com info@usk9.com

Invoice



Bill To
Clay County MS

Date	Invoice No.	P.O. Number	Terms
10/05/22	393114		

Date	Item	Description	Qty	Rate	Amount
10/04/22	Dual Purpose Canine	Imported Canine fully trained in Narcotics Detection & Patrol Functions	1	16,500.00	16,500.00
	Misc	USPCA Grant	1	-7,500.00	-7,500.00
	5 Week Handler course	Tuition: 5 week handler course (classroom and practical application).	1	3,950.00	3,950.00
	Handler Lodging - private room	Lodging on site location for advanced learning and group participation. Mon, Tues, Wed, Thurs nights - go home on weekend. 5 weeks x's 4 nights each week	20	75.00	1,500.00

Subtotal	\$14,450.00
Sales Tax	\$0.00
Total	\$14,450.00

Balance Due	\$14,450.00	Payments/Credit	\$0.00
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EXHIBIT E

236



Synergetics DCS, Inc.
 501 Highway 12 West
 Suite 100
 Starkville MS 39759
 United States

Sales Person:
 Austin Palmer
 +16623643622
apalmer@synergeticsdcs.com

Created By:
 Alyssa Myers
amyers@synergeticsdcs.com

Quote
 #83985
 9/22/2022

Bill To
 Clay County Sheriff's Department
 330 W Broad St
 West Point MS 39773
 United States

Expires	Project	Shipping Method
10/13/2022		

Quantity	Item Number	Description	Rate/Price	Amount
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Description **Attention: Stephen**
RE: New PCs and Office 365

2	MISC COMPUTER HARDWARE CHARGES	DP2VGA3 - DisplayPort to VGA Adapter 1080p Active	\$22.00	\$44.00
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2	210-BCRJ	Dell Optiplex 5000 SFF	\$1,250.00	\$2,500.00
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12th Gen Intel® Core™ i5-12500 (18 MB cache, 6 cores, 12 threads, 3.00 GHz to 4.60 GHz Turbo, 65 W)
 Windows 10 Pro (Windows 11 Pro license included), English, French, Spanish
 16 GB, 2 x 8 GB, DDR4
 512 GB, M.2 2230, PCIe NVMe, SSD, Class 35
 Intel® Integrated Graphics
 System Power Cord (US)
 Dell Pro Wireless Keyboard and Mouse - KM5221W - English - Black
 Basic Onsite Service 36 Months, 36 Month(s)

5	MISC COMPUTER HARDWARE CHARGES	F5C6362F-9CF3-4C33-AE11-D54F7A54CE8E_ANNUAL - Office 365 Enterprise G3 GCC Annual	\$295.00	\$1,475.00
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NOTE: This will include 2 renewal licenses and 3 new licenses.

Quote valid for 30 days



83985

1 of 2

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Synergetics DCS, Inc.
501 Highway 12 West
Suite 100
Starkville MS 39759
United States

Sales Person:
Austin Palmer
+16623643622
apalmer@synergeticsdcs.com

Created By:
Alyssa Myers
amyers@synergeticsdcs.com

Quote

#83985

9/22/2022

Subtotal	\$4,019.00
Tax Total (%)	\$0.00
Total	\$4,019.00

Austin Palmer

Quote valid for 30 days

2 of 2



83985

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EXHIBIT F

239

Seminar Title:
Hostage Negotiations, Phase III

DATES: 11/28/2022 through 12/2/2022

INSTRUCTOR(S): Brandon Pierpoint

LOCATION: St. Tammany Parish Sheriff's Office - 39395 Pine Street, Pearl River, LA 70452

HOTEL: Hampton Inn - Slidell, LA
\$85.00 Single/Double Gov't

COURSE REGISTRATION FEE: \$595.00 Includes all training materials, and a Certificate of Completion.

Instructor Bio

Brandon Pierpoint is a retired Sergeant with the Lubbock County Sheriff's Office and served his community for over twenty years. Brandon attended Baylor University and South Plains College, where he received an Associates Degree in Law enforcement Technology.

Since the start of his career in law enforcement Brandon has served in various capacities, such as the jail division, court division and the patrol division. Within the jail division, Brandon was a member of the Detention Response Team, and support services. Brandon served in courtroom security for high profile trials and was soon transferred to the patrol division. Brandon would then be promoted to the criminal investigations division where he spent the last half of his career.

Brandon became involved in hostage negotiations in 2003 and was the Team Leader of the SWAT Negotiations Team. In 2002 Brandon was honored with the Life saving Award for preventing an in-custody suicide attempt.

Brandon is a TCOLE instructor, Mental Health Peace Officer, Firearms Instructor, and holds a Master Peace Officer Certificate. In 2007, Brandon was appointed as the new region six director of training and was elected as President of the Texas Association of Hostage Negotiators in 2015. Brandon served as an advisor on the board of directors until 2021.

Brandon has had the honor of presenting at multiple conferences including the Texas Association of Hostage Negotiators, California Association of Hostage Negotiators, Western States Hostage Negotiators Association, National Tactical Officers Association, and the International Association of Chiefs of Police

Pre-Payment is not required to register or attend IN-PERSON seminars. Pre-payment is required for WEBINARS and ONLINE COURSES.

[CLICK HERE TO REGISTER FOR THIS SEMINAR](#)

Course Objectives

Hostage Negotiations Phase III training module is a continuation of Phase I and Phase II that builds on the solid foundation of theories and practicum of Hostage Negotiations.

Phase III will provide comprehensive training in the following areas:

- Supervisory and Management of a Hostage Negotiation Team and Hostage Scene;
- Expert Witnessing and Prediction of Resolution of Hostage / Barricade Situations;
- Mentally Disturbed / Suicidal Risk Analysis;



- Communication and Negotiations Skills with the Mentally Impaired;
- Managing Threatening Situations;
- Stress & Anxiety Management and Psychological Threat Assessment;
- Communication and Negotiation Skills Applicable to Jail and Correction Facilities;
- Dealing with victims of P.T.S. D.

This is a Tested Training Class. A 50 Question Test Based on Phase I, II & III will be given. A Passing Score of 75% or greater is required to receive your Certification Certificate. Each student will be critiqued on their ability to fulfill the duties of the primary negotiator

NOTE: To qualify to take Phase III Hostage Negotiations Certification you must have completed Phase I & II Hostage Negotiations through Public Agency Training Council. No other hostage training courses will qualify an individual / team qualify to take Phase III.



[Register for this Seminar](#) | [Return to Schedule](#) | [Send this page to a friend](#)

EXHIBIT G

242

USA K9
UNLIMITED
Purchase Agreement

This agreement is made this 10th day of October, 2022 by and between United States K-9 Unlimited, Inc., 8003 Moline Ave. Abbeville, Louisiana 70510, hereinafter referred to as "Seller," and Clay County MS Sheriff's Dept, herein after referred to as "Buyer."

A. Recitals

It is the intent of the parties that Seller shall provide to Buyer one trained dog, Spike, including handler-training sessions, with foundation training, suitable for the purpose of patrol and narcotics detection. Seller is an independent contractor engaged in the business of providing trained dogs to law enforcement agencies. It is understood that the dog will be exposed to members of the general public singly and in crowds, with and without animals and other distractions, in calm and excited states, with benign and hostile intentions and attitudes. It is imperative that the handler in charge of the dog at all times is vigilant and aware that a dog is a sentient being with a mind and will of its own. The dog listed herein will be trained at the time it leaves Seller's possession and capable of performing its purpose with direction and direct supervision of the handler who must be trained in the handling of purpose trained dogs.

B. Agreement

In consideration of the above recitals and the following mutual covenants, the Parties agree as follows:

1. Performance Required

The dog shall be trained and ready upon completion of the handler's training. Training shall consist of at least four (4) sessions for the handler to be completed within 30 days of pick up/delivery of the dog.

2. Terms

Buyer shall pay Sixteen Thousand Five Hundred dollars (U.S. \$ 16,500) for one canine, "Spike".

For an Ongoing Arrangement. The Offerings shall be exchanged for an ongoing arrangement until terminated by either of the Parties. If any of the Parties shall terminate this Agreement, any outstanding Offerings shall remain owed. Termination of this Agreement must be done in writing and to the mailing address mentioned in Section I.

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3. Maintenance and Risk of Loss - Dog

Seller warrants the dog to be sound and healthy at the time of transfer to handler and/or Buyer. Buyer is entitled to and encouraged to have the dog examined by a veterinarian within 72 hours of initiation of handler's training but at no less than 72 hours after completion of the handler training of the dog. In the event that the Buyer's veterinarian determines that the dog is not sound and in good health within 72 hours from either initiation of handler training or completion of the handler course, Seller shall replace the dog at no cost to Buyer and provide a new training course with the new dog at no cost to Buyer, or refund to Buyer the compensation paid under this agreement.

4. Limited Training

The aforesaid canine has been demonstrated to the buyer upon completion of delivery. Buyer is required to schedule a minimum of 4 handler training sessions within 30 days of pick-up/delivery at no charge to the buyer. It is the buyer's responsibility to keep the canine's level of training maintained through maintenance sessions after delivery. Buyer understands that there will be charges for future training and upkeep if United States K-9 Unlimited, Inc. is used for maintenance. Buyer understands that upon dog being relocated to buyer's residence, sale of dog is final and no return or refund will be accepted.

Buyer Initials

5. Residential Handler Training and Release of Liability

To the extent the Buyer opts to have its agent, employee or handler be trained such that the handler is to reside on the premises of United States K9 Unlimited, Inc., Buyer agrees to assume all responsibility for loss, injury to person or damage to property such that the handler while training or residing on the premises of United States K9 Unlimited, Inc. is a business invitee, staying as a consideration made solely for the benefit of the Buyer and handler. The Seller shall not be liable for, and the handler/Buyer hereby waives and abandons any claims of whatever nature, including but not limited to that for theft, injury, loss or damage of whatever nature as to the Seller, whether arising from the Seller's default, negligence or otherwise. Buyer and handler acknowledge that the premises is operated daily as a training facility for single and multi-purpose dogs with the associated risks and hazards close proximity to such animals affords and hereby release Seller from any claims which may arise whatever the nature associated with these known hazards.

Buyer Initials

6. Medical Liability - Handler

Buyer agrees that the handler is in good physical health and meets the requirements for handling the dog. Buyer shall be responsible for payment of medical treatment for any injury. Seller shall not be responsible for injuries sustained by handler or canine during training in canine handling to include, but not be limited to, apprehension or aggression training.

7. Indemnity Agreement and Buyer Warranty

Buyer understands that upon dog being relocated to buyer's residence, sale of dog is final and no return or refund will be accepted. To the fullest extent permitted by law, the Buyer SHALL indemnify, defend, and hold harmless the Seller including, but not limited to, United States K9 Unlimited, Inc., as well as its owners, operators, agents, trainers, staff and personnel from and against any and all Claims, damages, losses, demands, judgments and costs of claim or suit or defense, including attorney's fees and costs, and further AGREES to reimburse Seller for any and all expense, damage or liability incurred by Seller whether for personal injury, property damage, direct or consequential damage or economic loss arising or alleged to have arisen from any act or omission of Seller, as well as and INCLUDING any act or omission of the dog which is the subject of this contract, regardless and whether or not any such claim, damage, loss or expense may be caused in part by the party indemnified hereunder. Such obligation SHALL include, but not be limited to, any claims made or lawsuits filed by any employee of Buyer or any third or nonparty to this contract who makes a claim relative to the acts or omission to act of the dog which is the subject of this contract. The foregoing indemnification does not apply to any claim that arises out of the sole and independent negligence of Seller which is defined as and limited to acts of negligence or omission occurring only on the property of the Seller while the Seller is in sole actual physical possession and control of the dog. This indemnity agreement recognizes that the subject of this contract is a dog, who is trained to respond in a certain manner but is required to have supervisory control by the handler at all times. The Buyer warrants to the Seller that it will maintain constant supervision of the dog at all times and acknowledges that once the dog leaves the actual physical possession of the Seller that the Buyer assumes full and total responsibility for the dog, for the dogs actions and behavior and fully herein relieves the Seller of any and all responsibility and agrees to indemnify the Seller for any and all costs, expenses or fees Seller incurs to defend claims or suits not assumed by Buyer upon demand. It is also specifically agreed that of the consideration paid for the dog pursuant to this contract, that \$100 of same is agreed upon and designated specifically as consideration for the indemnity agreement portion of this contract.

Buyer Initials

8. Notification of Occurrence

Buyer agrees that in the event of any occurrence of any accident or incident involving the dog wherein injuries or property damage are alleged to have occurred as a result of use of the dog, whether to employees of Buyer or third parties, or property of Buyer or third parties, Buyer will notify seller in writing and provide a copy of any and all reports, investigation reports, video or other documentation of the event related to same as well as proof of the current insurance coverage for same. Buyer will permit Seller, at Sellers discretion, to examine the dog within 72 hours of the notice of the occurrence.

9. Compliance with Laws

Buyer agrees to comply, at its own expense, with all federal, state and local laws, ordinances and regulations applicable to the ownership and deployment of the dog including but not limited to those dealing with safety, safety rules or policies promulgated in connection with the use of the dog and or its safety or the safety of its handler. The Buyer agrees to indemnify, save and hold harmless the Seller from any and all liability and damages, fines, costs and attorney's fees that may be incurred by Seller on account of Buyers failure to comply with all laws, ordinances and governmental regulations applicable to the ownership and the deployment of the dog.

10. Permits and Licensing

Buyer agrees to comply, at its own expense, with permit requirements in the local where the dog will reside and/or be deployed. This includes but is not limited to registration if required, inoculations of the dog as required by law as well as obligation to maintain tags, control of and limitation of movement of the dog such as leash laws as well as any notification requirements of the proximity of a trained K9 that may be applicable. The Buyer agrees to indemnify, save and hold harmless the Seller from any and all liability from damages, fines, costs and or attorney fees that may be incurred by Seller on account of Buyers failure to comply with all Licensing and Permit requirement.

11. Limit of Liability and Assumption of Risk

Buyer agrees to a limitation of liability relative to this contract such that and subject ONLY to a finding of sole negligence of the Seller, then the liability of Seller SHALL be limited to the purchase price. As consideration, \$100 of the contract price is allocated specifically for the limitation of liability provision herein. Buyer also agrees specifically, with notice of same that the total liability under or pursuant to this contract shall not exceed under any circumstances the total fee paid to Seller as set forth in this contract. As part of this Limitation, the Buyer and Handler agree they are undertaking the ownership and handling of a dog with which there are inherent risks associated with same including risks involved

with training, boarding, socializing, walking and working with the dog. Buyer hereby certifies that Buyer has been informed and understands that there are unavoidable risks of injury involved with working with dogs and that such risk is hereby assumed by Buyer and handler, in full, with complete disclosure and knowledge of same.

Buyer Initials

12. Acknowledgement of Nature of Purchase and Disclaimer

Buyer understands and acknowledges that the ownership and deployment of a trained dog contains inherent risks including injury or death to Buyer, Dog, or persons and dogs of some third party including those that are involved and those that are not involved in the activity of training including without limitations the risks due to a dog bite or infectious disease as well as injury or damage inflicted by the dog. Buyer acknowledges that the dog's behavior upon acceptance by the Buyer, both at the time of acceptance and then in the future are SOLELY THE BUYERS RESPONSIBILITY. The Buyer is voluntarily engaging in ownership and deployment of the dog, as well as training by and through the handler, and understands there are known risks as well as other risks that may result from the dogs training and deployment including but not limited to injury, death or property damage that may occur as the result of the operation handling and deployment of a trained dog.

Buyer Initials

13. Dispute Resolution

Seller and Buyer herein agree and stipulate that to the extent any dispute arises out of this contract or in relation in any respect whatsoever to the dog and the use or deployment of the dog that the parties agree to Non-Binding Mediation prior to any claim or suit being initiated at the discretion of and written request of Seller.

14. Venue and Choice of Law

Any claims, disputes or litigation arising from this agreement shall be held in the 15th Judicial District Court, Parish of Vermillion, Louisiana, and the parties hereby consent to the venue of said court for all controversies arising from this agreement. Provided, however, that the Seller, in its sole option, may initiate litigation in any court that has competent jurisdiction, over the parties to the claim or suit over the dog or over the claim itself. Louisiana law is agreed to apply to this contract.

15. Instrument as Entire Agreement

This agreement contains the full agreement between the parties, and no statement or representations made by either party or by an agent of either party that is/are not contained in this written contract shall be valid or binding. Any verbal discussions or agreements not reduced to writing are void upon execution of this agreement.

16. Waiver of Jury

Buyer and Seller further and expressly agree that due to the nature of disputes involving the use and deployment of dogs such as this, that in the event of any litigation arising out of or related to this agreement or the use of the dog that the Seller may at its sole option , require the case be tried to a court without a jury. Buyer hereby specifically acknowledges this waiver of its rights to a Jury resolution of any claim.

Buyer Initials

17. Warranty of Quiet Possession

The Seller warrants that Seller has good and valid title and ownership rights of the dog being sold and that Seller may rightfully transfer title and ownership of the dog to the Buyer. The Seller further warrants that the dog is being sold free of any lien or claim or encumbrance by any third party.

18. Non-Assignment of Contract

It is agreed by the parties that there will be no assignment or transfer of this contract, nor any interest or obligation under this contract without the express and specific written affirmation of both parties hereto. Any modification of the provisions of this agreement must be in writing signed by both Seller and Buyer. No waiver or modification of this agreement shall be effective unless the Seller signs the written modification.

19. Successors and Assigns

Subject to other provisions herein, this contract shall be binding upon and shall inure to the benefit of any successor at law or assign of the parties hereto.

20. Notices

All written notices as provided for herein shall be deemed effective when sent either by the U.S. Postal Service via certified mail return receipt or by such private overnight mail service providing a receipt of delivery addressed to Buyer or Seller at the addresses set forth

below. Either party may from time to time by written notice sent as herein provided designate a different address to which notices shall be sent.

In witness whereof, the parties have executed this agreement in the Parish of Vermillion, Louisiana on the day and year written above.

UNITED STATES K-9 UNLIMITED, INC.

Seller:
BY: ROGER ABSHIRE (President)
United States K-9 Unlimited, Inc.
8003 Moline Ave., Abbeville, LA 70510

Buyer:
BY: Authorized Signature

Name of person signing: Eddie Scott

Dept: Sheriff

Address: P.O. Box 142 West Point MS 39073

Telephone: (662) 494-2896 or (662) 295-5941

Email: _____

Date: 10/6/2022

MicroChip #: 528224001156268

DOB: November 15, 2022

EXHIBIT H

Invoice

Central Mississippi Canine Consultants

157 Northwind Dr. Madison Ms 39110

601-899-2474

October 4, 2022

BILL TO: Clay County MS
ATTN: Eddie Scott

Details

AMOUNT

Imported Canine fully trained in Narcotics Detection & Patrol Functions	\$18,000.00
8-Wk Dual Purpose Handler Program and Handler Certification in Detection & Patrol Functions	\$7,500.00

SUBTOTAL \$25,500.00

TAX RATE 0.00%

OTHER \$0.00

TOTAL \$25,500.00

THANK YOU FOR YOUR BUSINESS!

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Metro Dade K-9 Services
17940 S.W. 168 Street
Miami, FL 33187
(305) 378-9035
k9services@bellsouth.net

INVOICE

BILL TO
Brandon Police
Department

INVOICE # 5512
DATE 06/06/2022

TERMS Due on receipt

ACTIVITY	QTY	RATE	AMOUNT
Dual Purpose Canine	1	20,000.00	20,000.00
Handlers Course	1	5,000.00	5,000.00

Centerstate Bank of Florida
19900 SW 177th Avenue
Miami, Florida 33187
For credit to: Metro Dade K9 Services

BALANCE DUE

\$25,000.00

252

EXHIBIT I



**State of Mississippi
Request, Extension or Lifting
Outdoor Burn Ban**

To: Region 2 - Dennis Dauterive Regional Forester, Mississippi Forestry Commission

From: Clay County Board of Supervisors

Re:

- Request issuance of burn ban
- Request exemption to current burn ban
- Request the extension of current burn ban
- Request the lifting of current burn ban

- The Board of Supervisors of the above stated county has approved implementing a burn ban upon approval by the State Forester, due to extremely dry conditions in the county and/or as a result of recent wildfires.

Exempted from this burn ban are: (Check all that apply)

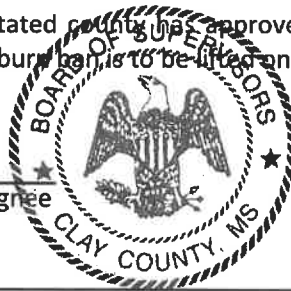
- No exemptions from this burn ban
- Mississippi Forestry Commission
- Certified Burn Managers
- County Fire Services
- Commercial contractors with heavy construction equipment, providing that said burn meets the State's DEQ regulations. MDEQ regulations regarding open burning of brush piles require a separation distance of 1,500 feet from a residence without forced air assistance and 500 feet with forced air assistance.
- Agriculture field burn
- Other _____

This burn ban will be in effect from October 8, 2022 to October 31, 2022

The burn ban will expire on the above stated end date at midnight and no further action is needed.

- The Board of Supervisors of the above stated county has approved extending the current burn ban upon approval by the State Forester. This burn ban is to be extended until _____.
- The Board of Supervisors of the above stated county has approved the lifting of the current burn ban upon approval by the State Forester. This burn ban is to be lifted on _____.


President, Board of Supervisors or Designee



10/6/2022
Date

Instructions:

Step 1:

- To Request a Burn Ban and/or to Make an Exemption to Current Burn Ban:
 - Complete the following fields above: To, From, Re and first bullet.
- To Extend a Current Burn Ban
 - Complete the following fields above: To, From, Re and second bullet.
- To Lift or Cancel a Current Burn Ban Before Expiration Date
 - Complete the following fields above: To, From, Re and third bullet.

Step 2: Sign and date form.

Step 3: Email or fax completed form to MFC local Regional Office.

MFC Regional information can be found at the link below:

<http://www.mfc.ms.gov/offices>

Official MFC Use Only	
_____	_____
Regional Forester or Designee	Date
_____	_____
State Forester or Designee	Date

- Approved
- Rejected

- Approved
- Rejected

EXHIBIT J

Columbus
F·E·N·C·E
Company, LLC

P.O. Box 2246
 Columbus, MS 39704
 662-328-6203
 Fax: 662-328-1285

INVOICE

Building Ground

BILL TO: CLAY COUNTY DISTRICT FOUR
 365 COURT STREET
 P.O. BOX 815
 WEST POINT MS 39773

SHIP TO: CLAY COUNTY DISTRICT FOUR
 365 COURT STREET
 P.O. BOX 815
 WEST POINT MS 39773

INVOICE		ORDER		CUSTOMER	CUSTOMER P.O. NUMBER	TERMS	SALESPERSON
NUMBER	DATE	NUMBER	DATE	NUMBER			
27087	09/23/22	27013	09/23/22	CLAY12	49291	DUE UPON REC GENERAL	HOU

UNITS	U/M	ITEM/DESCRIPTION	DISC.	UNIT PRICE	AMOUNT
1	3	NIKKI CUDE UNA COMMUNITY CENTER PRAIRIE, MS <TAX EXEMPT> COMMERCIAL FENCING 6' LIGHT COMMERCIAL CHAIN LINK FENCE TO GO AROUND THE UNA COMMUNITY CENTER.		7490.000	7,490.00
Subtotal					7,490.00
Total Due					7,490.00

Vendor Name: *Out 1516 C Fence*
 Invoice #: *27087*
 Inv. Date: *9.23.22*
 P.O. #: *49291*
 Fund: *LA Co*
 PO # *603260*

Shelton

BALANCE DUE UPON RECEIPT
 THANK YOU FOR YOUR BUSINESS



P.O. BOX 2246
 COLUMBUS, MS 39704
 PH: 662-328-6203
 FAX: 662-328-1285

REVISED PROPOSAL

Proposal To: Una Community Center Date: August 22, 2022
 Attention: Shelton Dean / Nikki Cude Phone #: 295-6110
 Mailing Address: 4100 Brand-Una Road Fax #:
 City: Prairie State: MS
 e-mail: sheltondean@icloud.com; ncude@claycounty.ms.gov Zip Code: 39756
 Install at:

**TAX STATUS:
 PURCHASE ORDER NUMBER:
 LABOR AND MATERIALS TO INSTALL**

LINE ITEM #	UNITS	U/M	ITEMS/DESCRIPTION	UNIT PRICE	AMOUNT
<u>Option#1</u>					
	350	LF	6' high light commercial chain link fencing		\$ 8,490.00
	16	EA	terminal posts		
	1	EA	4' walk gate		
	1	EA	5' walk gate		
	1	EA	10' double swing gate		
	2	EA	20' double swing gates		
				Tax	\$ 594.00
				TOTAL	\$ 8,084.00 8,490. ⁰⁰
<u>Option#2</u>					
	350	LF	8' high light commercial chain link fencing		\$ 13,325.00
	16	EA	terminal posts		
	1	EA	4' walk gate		
	1	EA	5' walk gate		
	1	EA	10' double swing gate		
	2	EA	20' double swing gates		

**Estimate is based on cash/check method of payment. Payment in full is due upon completion of work unless financing or special payment arrangements are made prior to installation. Financing or special payment arrangements will be subject to credit approval and finance charges. Customers choosing to pay by credit card will be charged an additional 3.5% of the total estimate. If payment is not made as specified, Columbus Fence Co., LLC shall use legal means necessary to collect unpaid balance including interest and legal fees. More or less material other than amount specified will be debited or credited at current rates. Building permit fees paid by Columbus Fence Co., LLC will be charged to the customer.*

***OPTION #1 INCLUDES SALES TAX. OPTION #2 INCLUDES CONTRACTORS TAX.**

***Columbus Fence Company, LLC shall not be responsible for locating, staking, nor clearing fencing lines.**

****PLEASE NOTE**QUOTE IS VALID FOR 6 DAYS**

We appreciate the opportunity to submit this quote.

Acceptance Signature and Date: _____

Matt Bishop 8/22/22

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EXHIBIT K

EXHIBIT L

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EXHIBIT M

INTERLOCAL COOPERATION AGREEMENT

THIS AGREEMENT (this “**Agreement**”) is made and entered into by and between **CLAY COUNTY, MISSISSIPPI** (the “**County**”), a political subdivision of the State of Mississippi, acting by and through its duly elected and serving Board of Supervisors, and the **CITY OF WEST POINT, MISSISSIPPI** (the “**City**”), a municipal corporation of the State of Mississippi, acting by and through its duly elected and serving Board of Mayor and Selectmen.

RECITALS:

WHEREAS, The County and City, pursuant to Section 17-13-1 *et seq.*, of Mississippi Code of 1972, as amended (the “**Interlocal Act**”), provides that any power, authority or responsibility exercised or capable of being exercised by a local governmental authority may be exercised and carried out jointly with any other local governmental unit.

WHEREAS, Mississippi Emergency Management Law, Section 33-15-17, *et seq.* of Mississippi Codes of 1972, as amended, authorizes and allows Clay County and the City of West Point to establish a local organization for emergency management, with said agreement having been executed by the County and the City on October 8, 2015, and thereafter approved by the Office of the Mississippi Attorney General and the Mississippi Emergency Management Agency.

WHEREAS, the County, acting by and through the Clay County Board of Supervisors, pursuant to Section 19-5-301, *et seq.*, of Mississippi Code of 1972, as amended, has created the Emergency Communications District for Clay County, Mississippi, for purposes of reducing the time required to request and receive emergency aid, to promote the efficient dispatch of emergency calls to law enforcement, fire and emergency medical services and to foster the general health, safety and public welfare of county residents.

WHEREAS, the City of West Point, by and through the Mayor and the Board of Selectmen, are authorized pursuant to Section 21-21-3 and Section 21-25-3 of Mississippi Code of 1972, as amended, to provide police and fire protection, and as incident thereto, have access to emergency communication services.

WHEREAS, the existing location of the Emergency Communications District of Clay County was recently struck by lightning, resulting in extensive loss of operational equipment in excess of \$500,000.00, such that emergency communications operations have been significantly impaired and in some instances nonexistent following the severe weather event. An emergency has been declared pursuant to applicable statutory provisions.

WHEREAS, The County and the City desire to enter into an interlocal agreement to change the location of the Emergency Communications District of Clay County to restore the

functional capacity of the District. The change of location agreed to herein will result in the most efficient use of available resources.

NOW, THEREFORE, by the mutual covenants, above listed recitals, promises, agreement and covenants contained herein, and intending that the obligations set forth herein are valid and legal obligations of each party, the County and the City mutually agree as follows:

AGREEMENT

1. Duration. This Agreement shall be in force and effect from the Effective Date stated herein. This Agreement shall remain in effect until such time ninety (90) 180 days advance written notice of the intent to modify or terminate the agreement is served on either party.

2. Purpose and Intent. The purpose of this Agreement is to define the responsibilities of the County and City with respect to the location of the Emergency Communications District of Clay County.

It is the expressed intent of the County and the City that all other terms, conditions and obligations concerning the West Point/Clay County Emergency Management Agency and the Emergency Communications District of Clay County, not specifically addressed herein, remain in effect without modification.

3. Statutory Authority. The County and City are each authorized to enter into and fulfill the terms of this agreement as described in the above listed recitals.

4. Location of Operations. The City agrees 2392 West Churchill Road, West Point, Mississippi, property currently owned by the City, shall serve as the location of the Emergency Communications District of Clay County.

5. Utilities and Insurance. The City agrees, as the owner of the Location of Operations, to be responsible for the costs of monthly utilities and to provide general liability insurance coverage for the premises.

6. Lead Agency. The County shall be considered and, to the extent required, designated as the Lead Agency responsible for providing E911 services to all county residents.

The City and the County agree that no new entity has been created under this agreement.

7. Owner and Insurer of E911 Equipment. The County shall be designated as the owner of all E911 equipment and inventory, and further agrees to provide insurance coverage for these items.

8. Site Renovations. The County shall be solely responsible for the finalization of plans and specifications and the approval, advertisement, acceptance of bids,

execution of renovation/construction contracts, oversight of construction, and payments to contractor(s) in accord with statutory and other requirements for the use and expenditure of public funds required to prepare the site for E911 operations.

The County will keep the City reasonably informed of all actions taken pursuant to this agreement and further agrees to submit all proposals for site renovations to the City for prior approval.

The County agrees that no bids for permanent structural changes can be accepted without prior written consent of the City.

9. Amendment. This Agreement may be amended by mutual written consent of the County and the City.
10. Effective Date. This Agreement shall become effective from and after the date (i) it has been approved by the governing authorities of the County and City and executed by the parties hereto using multiple counterparts, (ii) approved by the Attorney General of the State of Mississippi, (iii) approved by Mississippi Emergency Management Authority, and (iv) filed with the Secretary of State of the State of Mississippi and the Chancery Clerk of Clay County, in compliance with the Interlocal Act.

THIS AGREEMENT ENTERED into as of the Effective Date.

[Remainder of page intentionally left blank]

CLAY COUNTY, MISSISSIPPI

Date: _____

By: _____
President, Board of Supervisors

ATTEST:

Chancery Clerk

CITY OF WEST POINT, MISSISSIPPI

Date: _____

By: _____
Mayor

ATTEST:

City Clerk

CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 01, 2022 TO OCTOBER 09, 2022

BANK: BCF BANCORPSOUTH FISCAL REC. FUNDS		INVOICE		ACCOUNT		CHECK
CHECK NUMBER	DATE	NUMBER	LINE #	NUMBER	DESCRIPTION	AMOUNT
9991	10/03/2022	GENERAL	01	091-900-951	TRANSPER OUT TO GOV'	95270.25
		FUND				95270.25
** CHECK TOTAL FOR BANK: BANCORPSOUTH FISCAL REC. FUNDS						95270.25

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 01, 2022 TO OCTOBER 09, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY		INVOICE		ACCOUNT		CHECK
CHECK NUMBER	DATE	NUMBER	LINE #	NUMBER	DESCRIPTION	AMOUNT
80062	10/03/2022	10/2022	01	020-105-585	SEMINAR/REGISTRATION	425.00
						425.00
80063	10/03/2022	10/2022	01	001-105-476	MEALS & LODGING	895.00
						895.00
** CHECK TOTAL FOR BANK: BANCORP SOUTH GENERAL COUNTY						1320.00

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 01, 2022 TO OCTOBER 09, 2022

BANK: RN2 RENASANT BANK- INSURANCE ACCT		INVOICE		ACCOUNT		CHECK
CHECK NUMBER	DATE	NUMBER	LINE #	NUMBER	DESCRIPTION	AMOUNT
2198	10/05/2022	SHERMAN IVY	01	687-000-139	DUE TO EMPLOYEES-PAR	183.10
2199	10/05/2022	SHELTON DEANES	01	687-000-139	DUE TO EMPLOYEES-PAR	214.10
2200	10/05/2022	R B DAVIS	01	687-000-139	DUE TO EMPLOYEES-PAR	176.60
2201	10/05/2022	THOMAS B. STOREY, JR.	01	687-000-139	DUE TO EMPLOYEES-PAR	267.40
2202	10/05/2022	CASSONDRA SMITH	01	687-000-139	DUE TO EMPLOYEES-PAR	192.80
** CHECK TOTAL FOR BANK: RENASANT BANK- INSURANCE ACCT						1034.00
** TOTAL DISBURSEMENTS **						97624.25

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 11, 2022 TO OCTOBER 31, 2022

BANK: BFB BANKFIRST BRYAN PUBLIC LIBRARY		INVOICE		ACCOUNT		CHECK
CHECK NUMBER	DATE	NUMBER	LINE #	NUMBER	DESCRIPTION	AMOUNT
2	10/21/2022	PHILLIP'S HARDWARE	01	072-500-649	MAINT SUPPLIES & MAT	969.67
			01	072-500-649	MAINT SUPPLIES & MAT	386.88
** CHECK TOTAL FOR BANK: BANKFIRST BRYAN PUBLIC LIBRARY						1356.55

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 11, 2022 TO OCTOBER 31, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE #	ACCOUNT NUMBER	DESCRIPTION	AMOUNT	CHECK AMOUNT
78495	3/10/2022	REGIONS BANK	100472	01	001-800-803	FISCAL AGENT'S FEE VOID DATE: 10/19/2022	1988.75-	1988.75-V
80282	10/11/2022	CLAY COUNTY TAX ASSESSOR/COI	10/2022	01	155-305-695	TRUCK TITLE/TAG	10.00	10.00
80283	10/11/2022	COLUMBUS FENCE CO.	27087A	01	001-151-641	BUILDING REPAIR & SU	1457.40	1457.40
80284	10/11/2022	MS DEPARTMENT OF REVENUE	10/2022A 10/2022	01 01	001-200-695 155-305-695	CAR TITLES/TAGS TRUCK TITLE/TAG	14.75 12.00	26.75
80285	10/11/2022	TRAVELERS	000616927	01	001-100-581	LAW ENFORC INS DEDUC	198.00	198.00
80286	10/12/2022	PAYROLL CLEARING ACCOUNT	120221012023 120221012023 120221012023 120221012023 120221012023	01 02 03 04 05	001-000-110 001-000-110 001-000-110 001-000-110 001-000-110	DEPUTIES DEPUTIES OVERTIME FICA W/H MEDICARE WITHHOLDING RETIREMENT W/H	19287.14 1358.01 1211.04 283.25 3374.29	25493.73
80287	10/12/2022	PAYROLL CLEARING ACCOUNT	120220930031 120220930031 120220930031 120220930031 120220930063 120220930063 120220930063	01 02 03 04 02 02 03	001-000-110 001-000-110 001-000-110 001-000-110 163-000-110 163-000-110 163-000-110	MEDICAL EXAMINERS FICA W/H MEDICARE WITHHOLDING RETIREMENT W/H ROAD LABORERS- HOU FICA W/H MEDICARE WITHHOLDING	350.00 21.70 5.08 60.90 228.48 14.17 3.31	683.64
80288	10/13/2022	AT&T	3142705785	01	097-230-503	NTIC LINE	222.11	222.11
80289	10/13/2022	BOARDTOWN ENGRAVING	101122B	01	001-161-603	OFFICE SUPPLIES & MA	180.00	180.00
80290	10/13/2022	C SPIRE WIRELESS	10/2022AB 10/2022MS 10/2022WM 10/2022DC 10/2022SHER 10/2022SHER 10/2022SHER 10/2022VF 10/2022D3 10/2022D4 10/2022D1 10/2022D2 10/2022D5	01 01 01 01 01 03 02 01 01 01 01 01 01	001-100-504 001-151-503 001-151-503 001-164-503 001-200-503 001-200-506 001-220-503 114-250-504 153-303-503 154-304-503 161-301-503 162-302-503 165-305-503	CELLULAR PHONE CELLULAR PHONE CELLULAR PHONE CELLULAR PHONE CELLULAR PHONES INTERNET SVC/TV CELLULAR PHONES INTERNET SERVICE CELLULAR PHONE CELLULAR PHONE CELLULAR PHONES CELLULAR PHONES CELLULAR PHONES	34.33 43.52 47.52 103.50 775.68 34.33 47.52 28.34 40.87 47.53 60.47 31.42 50.82	

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 11, 2022 TO OCTOBER 31, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER DATE

VENDOR NAME

INVOICE NUMBER LINE # NUMBER ACCOUNT DESCRIPTION AMOUNT CHECK AMOUNT

80291 10/13/2022 U. S. POSTMASTER

10/2022VET 01 001-154-501 POSTAGE & BOX RENT

108.00 108.00 1345.85

80292 10/15/2022 PAYROLL CLEARING ACCOUNT

120221015001	01	001-000-110	PERSONNEL MAN/SYST	1996.50	
120221015001	02	001-000-110	ASST PERSONNEL MNG	112.73	
120221015001	03	001-000-110	OFFICE CLERICAL	1622.18	
120221015001	04	001-000-110	FICA W/H	224.29	
120221015001	05	001-000-110	MEDICARE WITHOLDING	52.46	
120221015001	06	001-000-110	RETIREMENT W/H	649.26	
120221015002	01	001-000-110	DEPUTIES	107.28	
120221015002	02	001-000-110	OFFICE CLERICAL	485.67	
120221015002	03	001-000-110	FICA W/H	35.32	
120221015002	04	001-000-110	MEDICARE WITHOLDING	8.26	
120221015002	05	001-000-110	RETIREMENT W/H	18.67	
120221015003	01	001-000-110	DEPUTIES	2094.02	
120221015003	02	001-000-110	OFFICE CLERICAL	484.10	
120221015003	03	001-000-110	FICA W/H	167.09	
120221015003	04	001-000-110	MEDICARE WITHOLDING	39.08	
120221015003	05	001-000-110	RETIREMENT W/H	391.11	
120221015004	01	001-000-110	DEPUTIES	4254.37	
120221015004	02	001-000-110	PART-TIME HELP	399.64	
120221015004	03	001-000-110	FICA W/H	272.78	
120221015004	04	001-000-110	MEDICARE WITHOLDING	740.26	
120221015006	05	001-000-110	PURCHASE CLERK SAL	560.32	
120221015006	02	001-000-110	ASST PURCHASE CLER	154.50	
120221015006	03	001-000-110	FICA W/H	26.64	
120221015006	04	001-000-110	MEDICARE WITHOLDING	6.23	
120221015006	05	001-000-110	RETIREMENT W/H	124.38	
120221015008	01	001-000-110	RECEIVING CLERK	525.28	
120221015008	02	001-000-110	FICA W/H	29.63	
120221015008	03	001-000-110	MEDICARE WITHOLDING	6.93	
120221015008	04	001-000-110	RETIREMENT W/H	91.40	
120221015009	01	001-000-110	MAINTENANCE SALARY	3788.01	
120221015009	02	001-000-110	SECURITY GUARD	2240.25	
120221015009	03	001-000-110	PART-TIME HELP	755.31	
120221015009	04	001-000-110	MAINTENANCE OVERTI	153.55	
120221015009	05	001-000-110	FICA W/H	426.17	
120221015009	06	001-000-110	MEDICARE WITHOLDING	99.67	
120221015009	07	001-000-110	RETIREMENT W/H	740.37	
120221015010	01	001-000-110	INFORMATION TECHNO	472.54	
120221015010	02	001-000-110	FICA W/H	28.02	
120221015010	03	001-000-110	MEDICARE WITHOLDING	6.55	
120221015010	04	001-000-110	RETIREMENT W/H	82.22	
120221015014	01	001-000-110	DEPUTIES	153.72	
120221015015	01	001-000-110	CASE MANAGER - GRA	514.52	
120221015015	02	001-000-110	WORK PROGRAM DEPUT	61.88	
120221015015	03	001-000-110	OFFICE/CLERICAL	348.49	
120221015015	04	001-000-110	FICA W/H	52.97	

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 11, 2022 TO OCTOBER 31, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY		CLAY COUNTY	
CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER
LINE #	NUMBER	ACCOUNT DESCRIPTION	AMOUNT
05	001-000-110	MEDICARE WITHOLDING	12.39
06	001-000-110	RETIREMENT W/H	160.93
01	001-000-110	DEPUTIES	4707.27
02	001-000-110	FICA W/H	285.55
03	001-000-110	MEDICARE WITHOLDING	66.78
04	001-000-110	RETIREMENT W/H	819.07
01	001-000-110	DEPUTIES	4708.40
02	001-000-110	OFFICE/CLERICAL	5915.19
03	001-000-110	OFFICE CLERICAL OV	684.13
04	001-000-110	MECHANIC SALARY	1981.45
05	001-000-110	FICA W/H	769.58
06	001-000-110	MEDICARE WITHOLDING	179.98
07	001-000-110	RETIREMENT W/H	2267.67
01	001-000-110	MTC TRANSPORT OPFI	441.53
02	001-000-110	FICA W/H	27.37
03	001-000-110	MEDICARE WITHOLDING	6.40
04	001-000-110	RETIREMENT W/H	76.83
01	001-000-110	JAIL ADMINISTRATOR	2008.13
02	001-000-110	JAIL RECORDS CLERK	1382.50
03	001-000-110	JAILORS SALARIES	10514.93
04	001-000-110	KITCHEN MANAGER	1689.80
05	001-000-110	JAILORS OVERTIME	3963.41
06	001-000-110	FICA W/H	1166.88
07	001-000-110	MEDICARE WITHOLDING	272.91
08	001-000-110	RETIREMENT W/H	3403.25
01	001-000-110	DEP EMA DIRECTOR S	218.88
02	001-000-110	GRANT COORDINATOR	651.29
03	001-000-110	FICA W/H	53.35
04	001-000-110	MEDICARE WITHOLDING	12.47
05	001-000-110	RETIREMENT W/H	38.09
01	097-000-110	911 DIRECTOR SALAR	643.75
02	097-000-110	DISPATCHERS	7130.14
03	097-000-110	DISPATCHER O/T	899.52
04	097-000-110	FICA W/H	497.52
05	097-000-110	MEDICARE WITHOLDING	116.35
06	097-000-110	RETIREMENT W/H	1352.29
01	151-000-110	ROAD LABORERS- HOU	2881.20
02	151-000-110	FICA W/H	100.81
03	151-000-110	MEDICARE WITHOLDING	23.58
04	151-000-110	RETIREMENT W/H	307.78
01	152-000-110	ROAD LABORERS- HOU	2381.36
02	152-000-110	FICA W/H	143.50
03	152-000-110	MEDICARE WITHOLDING	33.56
04	152-000-110	RETIREMENT W/H	242.31
01	153-000-110	ROAD LABORERS- HOU	4161.91
02	153-000-110	FICA W/H	179.06
03	153-000-110	MEDICARE WITHOLDING	41.88
04	153-000-110	RETIREMENT W/H	724.18
01	154-000-110	ROAD LABORERS- HOU	1817.56
02	154-000-110	FICA W/H	103.56
03	154-000-110	MEDICARE WITHOLDING	24.22

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 11, 2022 TO OCTOBER 31, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE #	ACCOUNT DESCRIPTION	AMOUNT	CHECK AMOUNT
80293	10/19/2022	CLAY COUNTY TAX ASSESSOR/COL	10/2022A	01	151-301-695 TRUCK TITLES/TAGS	3.33	110299.44
			10/2022B	01	154-304-695 TRUCK TITLES/TAG	3.33	
			10/2022C	01	155-305-695 TRUCK TITLES/TAG	3.34	
			10/2022D	01	155-305-695 TRUCK TITLES/TAG	4.00	10.00
80294	10/19/2022	MS DEPARTMENT OF REVENUE	10/2022B	01	151-301-695 TRUCK TITLES/TAGS	4.00	
			10/2022C	01	154-304-695 TRUCK TITLES/TAG	4.00	
			10/2022D	01	155-305-695 TRUCK TITLES/TAG	4.00	12.00
80295	10/19/2022	ATMOS ENERGY	10/2022OCA	01	001-151-513 OFFICE COMPLEX BUILD	366.48	
			10/2022SHA	01	001-151-514 SHERIFF'S DEPT UTILI	38.21	
			10/2022SHERA	01	001-151-514 SHERIFF'S DEPT UTILI	936.43	
			10/2022DHERA	01	001-151-515 DHS BUILDING UTILITI	52.42	
			10/2022D2A	01	152-302-510 UTILITIES	51.12	1444.66
80296	10/19/2022	BELLSOUTH / ATT	10/2022SH	01	001-200-504 NCIC LINES	35.54	35.54
80297	10/19/2022	BRANDON MCCLENTON	10/2022	01	114-250-477 PRIVATE VEHICLE TRAV	183.75	183.75
80298	10/19/2022	MS STATE MEDICAL EXAMINER	900113790A	01	001-167-557 AUTOPOSTS	1000.00	1000.00
80299	10/19/2022	GOLDEN TRIANGLE AREA	10/2022	01	001-451-754 HOMEMAKERS PROGRAM	500.00	500.00
80300	10/19/2022	REGIONS BANK	100472A	01	001-800-803 FISCAL AGENT'S FEE	1988.75	1988.75

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 11, 2022 TO OCTOBER 31, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE #	ACCOUNT NUMBER	DESCRIPTION	AMOUNT	CHECK AMOUNT
80301	10/19/2022	TINA ROGERS	10/20222	01	001-168-477	PRIVATE VEHICLE TRAV	137.50	137.50
80302	10/19/2022	CITY WATER & LIGHT DEPT.	10/20222ELL	01	001-151-512	ELIIS CLINIC UTILITI	655.85	
			10/20222EKT	01	001-151-513	OFFICE COMPLEX BUTLD	219.26	
			10/20222FOR	01	001-151-513	OFFICE COMPLEX BUTLD	47.40	
			10/20222SHERA	01	001-151-514	SHERIFF'S DEPT UTILI	1112.94	2035.45
80303	10/26/2022	PAYROLL CLEARING ACCOUNT	120221026023	01	001-000-110	DEPUTIES	18394.52	
			120221026023	02	001-000-110	DEPUTIES OVERTIME	1381.13	
			120221026023	03	001-000-110	FICA W/H	1175.73	
			120221026023	04	001-000-110	MEDICARE WITHOLDING	274.98	
			120221026023	05	001-000-110	RETIREMENT W/H	3196.78	
			120221026023	06	001-000-110	GROUP HEALTH - BCBS	3859.69	
			120221026023	07	001-000-110	GROUP LIFE INS - EMP	38.55	
			120221026023	08	001-000-110	GROUP HEALTH -GAP/GG	1299.55	
			120221026023	09	001-000-110	GROUP MEDI-SUPPL	170.59	
			120221026023	10	001-000-110	GROUP MEDI-PART B	170.10	
			120221026023	11	001-000-110	GROUP MEDI-PART D	22.70	29984.32
80304	10/26/2022	MS DEVELOPMENT AUTHORITY	10/20222GRAH	01	138-800-800	PRIN RETIREMENT-CAP	4822.29	
			10/20222GRAH	02	138-800-802	INTEREST EXPENSE	723.69	5545.98
80305	10/26/2022	TRUSTMARK NATIONAL BANK	10/20222A	01	241-800-800	PRIN RETIREMENT CAP	44000.00	
			10/20222A	02	241-800-802	INTEREST EXPENSE	542.30	44542.30
80306	10/26/2022	CALVERT-SPRADING ENGINEERS	10544	01	084-277-555	ENGINEERING FEES	1609.12	1609.12
80307	10/26/2022	CONTINENTAL RAILS, INC.	10/20222	01	084-277-545	REPAIRS TO RAIL SPUR	113017.12	113017.12
80308	10/31/2022	PAYROLL CLEARING ACCOUNT	120221031001	01	001-000-110	SUPERVISORS SALARI	18750.00	
			120221031001	02	001-000-110	PERSONNEL MAN/SYST	1296.50	
			120221031001	03	001-000-110	ATTORNEYS	3750.00	
			120221031001	04	001-000-110	ASST PERSONNEL MNG	112.73	
			120221031001	05	001-000-110	OFFICE CLERICAL	1537.45	
			120221031001	06	001-000-110	FICA W/H	1571.16	
			120221031001	07	001-000-110	MEDICARE WITHOLDING	367.46	
			120221031001	08	001-000-110	RETIREMENT W/H	4549.52	
			120221031001	09	001-000-110	GROUP HEALTH - BCBS	3317.07	
			120221031001	10	001-000-110	GROUP LIFE INS - EMP	20.16	
			120221031001	11	001-000-110	GROUP LIFE INS - OFF	24.44	
			120221031001	12	001-000-110	GROUP HEALTH -GAP/GG	1299.55	
			120221031001	13	001-000-110	GROUP MEDI-SUPPL	363.81	
			120221031001	14	001-000-110	GROUP MEDI-PART B	340.20	
			120221031001	15	001-000-110	GROUP MEDI-PART D	50.50	

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 11, 2022 TO OCTOBER 31, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE	ACCOUNT NUMBER	DESCRIPTION	AMOUNT	CHECK AMOUNT
120221031002			120221031002	01	001-000-110	DEPUTIES	107.28	
120221031002			120221031002	02	001-000-110	OFFICE CLERICAL	275.96	
120221031002			120221031002	03	001-000-110	COMPTROLLER	3849.97	
120221031002			120221031002	04	001-000-110	ATTENDING BRD MEET	120.00	
120221031002			120221031002	05	001-000-110	COUNTY AUDITOR	441.67	
120221031002			120221031002	06	001-000-110	COUNTY TREASURER	208.33	
120221031002			120221031002	07	001-000-110	PUBLIC SVC NOT PRO	416.67	
120221031002			120221031002	08	001-000-110	FICA W/H	320.44	
120221031002			120221031002	09	001-000-110	MEDICARE WITHOLDING	74.94	
120221031002			120221031002	10	001-000-110	RETIREMENT W/H	895.05	
120221031002			120221031002	11	001-000-110	GROUP HEALTH - BCBS	1499.12	
120221031002			120221031002	12	001-000-110	GROUP LIFE INS - EMP	3.27	
120221031002			120221031002	13	001-000-110	GROUP LIFE INS - ORF	6.44	
120221031002			120221031002	14	001-000-110	GROUP HEALTH - GAP/GG	371.30	
120221031003			120221031003	01	001-000-110	DEPUTIES	2500.00	
120221031003			120221031003	02	001-000-110	PUBLIC SVCS NOT PR	416.66	
120221031003			120221031003	03	001-000-110	COUNTY REGISTRAR	1408.75	
120221031003			120221031003	04	001-000-110	STATE FAULTRES	33.33	
120221031003			120221031003	05	001-000-110	ELECTION FEES	208.34	
120221031003			120221031003	06	001-000-110	FICA W/H	255.24	
120221031003			120221031003	07	001-000-110	MEDICARE WITHOLDING	59.70	
120221031003			120221031003	08	001-000-110	RETIREMENT W/H	794.67	
120221031003			120221031003	09	001-000-110	GROUP HEALTH - BCBS	967.73	
120221031003			120221031003	10	001-000-110	GROUP LIFE INS - EMP	11.48	
120221031003			120221031003	11	001-000-110	GROUP HEALTH - GAP/GG	371.30	
120221031004			120221031004	01	001-000-110	TAX ASSESSOR SALAR	6016.66	
120221031004			120221031004	02	001-000-110	DEPUTIES	4254.37	
120221031004			120221031004	03	001-000-110	PART-TIME HELP	570.31	
120221031004			120221031004	04	001-000-110	FICA W/H	623.39	
120221031004			120221031004	05	001-000-110	MEDICARE WITHOLDING	145.56	
120221031004			120221031004	06	001-000-110	RETIREMENT W/H	1787.16	
120221031004			120221031004	07	001-000-110	GROUP HEALTH - BCBS	2774.45	
120221031004			120221031004	08	001-000-110	GROUP LIFE INS - EMP	26.60	
120221031004			120221031004	09	001-000-110	GROUP HEALTH - GAP/GG	928.25	
120221031004			120221031004	01	001-000-110	PURCHASE CLERK SAL	560.32	
120221031006			120221031006	02	001-000-110	ASST PURCHASE CLER	154.50	
120221031006			120221031006	03	001-000-110	FICA W/H	26.64	
120221031006			120221031006	04	001-000-110	MEDICARE WITHOLDING	6.23	
120221031006			120221031006	05	001-000-110	RETIREMENT W/H	124.38	
120221031006			120221031006	06	001-000-110	GROUP HEALTH - BCBS	1499.12	
120221031006			120221031006	07	001-000-110	GROUP LIFE INS - EMP	10.08	
120221031006			120221031006	08	001-000-110	GROUP HEALTH - GAP/GG	371.30	
120221031007			120221031007	01	001-000-110	INVENTORY CLERK	2135.30	
120221031007			120221031007	02	001-000-110	FICA W/H	126.39	
120221031007			120221031007	03	001-000-110	MEDICARE WITHOLDING	29.56	
120221031007			120221031007	04	001-000-110	RETIREMENT W/H	371.54	
120221031008			120221031008	01	001-000-110	RECEIVING CLERK	525.28	
120221031008			120221031008	02	001-000-110	FICA W/H	29.63	
120221031008			120221031008	03	001-000-110	MEDICARE WITHOLDING	6.93	
120221031008			120221031008	04	001-000-110	RETIREMENT W/H	91.40	
120221031009			120221031009	01	001-000-110	MAINTENANCE SALARY	5629.21	

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 11, 2022 TO OCTOBER 31, 2022

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE #	NUMBER	ACCOUNT DESCRIPTION	AMOUNT	CHECK AMOUNT
			120221031009	02	001-000-110	SECURITY GUARD	2090.90	
			120221031009	03	001-000-110	PART-TIME HELP	698.37	
			120221031009	04	001-000-110	MAINTENANCE OVERTI	360.54	
			120221031009	05	001-000-110	FICA W/H	540.39	
			120221031009	06	001-000-110	MEDICARE WITHOLDING	126.40	
			120221031009	07	001-000-110	RETIREMENT W/H	1086.85	
			120221031009	08	001-000-110	GROUP HEALTH - BCBS	1794.92	
			120221031009	09	001-000-110	GROUP LIFE INS - EMP	20.16	
			120221031009	10	001-000-110	GROUP HEALTH - GAP/GG	742.60	
			120221031010	01	001-000-110	INFORMATION TECHNO	472.54	
			120221031010	02	001-000-110	FICA W/H	28.02	
			120221031010	03	001-000-110	MEDICARE WITHOLDING	6.55	
			120221031010	04	001-000-110	RETIREMENT W/H	82.22	
			120221031011	01	001-000-110	OFFICE/CLERICAL	729.58	
			120221031011	02	001-000-110	FICA W/H	45.23	
			120221031011	03	001-000-110	MEDICARE WITHOLDING	10.58	
			120221031015	01	001-000-110	CASE MANAGER - GRA	57.14	
			120221031015	02	001-000-110	WORK PROGRAM DEPUT	348.49	
			120221031015	03	001-000-110	OFFICE/CLERICAL	1030.00	
			120221031015	04	001-000-110	PUBLIC DEFENDER	884.94	
			120221031015	05	001-000-110	JUDGE/REFEREE	229.94	
			120221031015	06	001-000-110	FICA W/H	53.78	
			120221031015	07	001-000-110	MEDICARE WITHOLDING	493.31	
			120221031015	08	001-000-110	RETIREMENT W/H	319.62	
			120221031015	09	001-000-110	GROUP MEDI-SUPPL	170.10	
			120221031015	10	001-000-110	GROUP MEDI-PART B	97.30	
			120221031015	11	001-000-110	GROUP MEDI-PART D	4808.34	
			120221031016	01	001-000-110	COURT ADMINISTRATO	295.84	
			120221031016	02	001-000-110	FICA W/H	69.19	
			120221031016	03	001-000-110	MEDICARE WITHOLDING	836.65	
			120221031016	04	001-000-110	RETIREMENT W/H	425.11	
			120221031016	05	001-000-110	GROUP HEALTH - BCBS	5.04	
			120221031016	06	001-000-110	GROUP LIFE INS - EMP	185.65	
			120221031016	07	001-000-110	GROUP HEALTH - GAP/GG	618.00	
			120221031016	08	001-000-110	PROSECUTING ATTORN	352.13	
			120221031017	01	001-000-110	LUNACY JUDGE	944.17	
			120221031017	02	001-000-110	PUBLIC DEFENDER	34.15	
			120221031017	03	001-000-110	FICA W/H	7.99	
			120221031017	04	001-000-110	MEDICARE WITHOLDING	333.09	
			120221031017	05	001-000-110	RETIREMENT W/H	1074.01	
			120221031017	06	001-000-110	GROUP HEALTH - BCBS	185.65	
			120221031017	07	001-000-110	GROUP HEALTH - GAP/GG	4954.98	
			120221031017	08	001-000-110	DEPUTIES	1050.00	
			120221031018	01	001-000-110	BAILIFF	7500.00	
			120221031018	02	001-000-110	COUNTY JUDGES	806.80	
			120221031018	03	001-000-110	FICA W/H	188.69	
			120221031018	04	001-000-110	MEDICARE WITHOLDING	2323.77	
			120221031018	05	001-000-110	RETIREMENT W/H	2668.17	
			120221031018	06	001-000-110	GROUP HEALTH - BCBS	15.12	
			120221031018	07	001-000-110	GROUP LIFE INS - EMP	9.66	
			120221031018	08	001-000-110	GROUP LIFE INS - OFF		
			120221031018	09	001-000-110	GROUP LIFE INS - OFF		

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 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 11, 2022 TO OCTOBER 31, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	CHECK DATE	VENDOR NAME	INVOICE NUMBER	LINE #	ACCOUNT #	DESCRIPTION	AMOUNT	CHECK AMOUNT
			120221031018	10	001-000-110	GROUP HEALTH - GAP/GG	1113.90	
			120221031019	01	001-000-110	CORONER'S FEE	1287.50	
			120221031019	02	001-000-110	DEP CORONERS FEE	309.00	
			120221031019	03	001-000-110	MEDICAL EXAMINERS	1925.00	
			120221031019	04	001-000-110	DEP MED EXAM FEE	875.00	
			120221031019	05	001-000-110	FTCA W/H	272.59	
			120221031019	06	001-000-110	MEDICARE WITHHOLDING	63.75	
			120221031019	07	001-000-110	RETIREMENT W/H	558.98	
			120221031019	08	001-000-110	GROUP HEALTH - BCBS	425.11	
			120221031019	09	001-000-110	GROUP LIFE INS - OPF	6.44	
			120221031020	10	001-000-110	GROUP HEALTH - GAP/GG	185.65	
			120221031020	01	001-000-110	ATTORNEYS	3571.70	
			120221031020	02	001-000-110	FTCA W/H	195.44	
			120221031020	03	001-000-110	MEDICARE WITHHOLDING	45.71	
			120221031020	04	001-000-110	RETIREMENT W/H	621.48	
			120221031020	05	001-000-110	GROUP HEALTH - BCBS	1074.01	
			120221031020	06	001-000-110	GROUP LIFE INS - EMP	6.44	
			120221031020	07	001-000-110	GROUP HEALTH - GAP/GG	185.65	
			120221031021	01	001-000-110	ATTORNEYS	6492.70	
			120221031021	02	001-000-110	FTCA W/H	391.97	
			120221031021	03	001-000-110	MEDICARE WITHHOLDING	91.67	
			120221031021	04	001-000-110	RETIREMENT W/H	1129.72	
			120221031021	05	001-000-110	GROUP HEALTH - BCBS	425.11	
			120221031021	06	001-000-110	GROUP LIFE INS - EMP	5.04	
			120221031021	07	001-000-110	GROUP HEALTH - GAP/GG	185.65	
			120221031022	01	001-000-110	ELECTION COMMISSION	6210.00	
			120221031022	02	001-000-110	FTCA W/H	380.93	
			120221031022	03	001-000-110	MEDICARE WITHHOLDING	89.10	
			120221031023	01	001-000-110	SHERIFF SALARY	7916.66	
			120221031023	02	001-000-110	DEPUTIES	4708.40	
			120221031023	03	001-000-110	OFFICE/CLERICAL	5900.06	
			120221031023	04	001-000-110	OFFICE CLERICAL OV	1076.95	
			120221031023	05	001-000-110	MECHANIC SALARY	1915.61	
			120221031023	06	001-000-110	FTCA W/H	1285.17	
			120221031023	07	001-000-110	MEDICARE WITHHOLDING	300.57	
			120221031023	08	001-000-110	RETIREMENT W/H	3676.19	
			120221031023	09	001-000-110	GROUP HEALTH - BCBS	5966.35	
			120221031023	10	001-000-110	GROUP LIFE INS - EMP	43.59	
			120221031023	11	001-000-110	GROUP LIFE INS - OFF	6.44	
			120221031023	12	001-000-110	GROUP HEALTH - GAP/GG	1856.50	
			120221031024	01	001-000-110	MTC TRANSPORT OFFI	490.17	
			120221031024	02	001-000-110	FTCA W/H	30.39	
			120221031024	03	001-000-110	MEDICARE WITHHOLDING	7.11	
			120221031024	04	001-000-110	RETIREMENT W/H	85.29	
			120221031027	01	001-000-110	JAIL ADMINISTRATOR	2008.13	
			120221031027	02	001-000-110	JAIL RECORDS CLERK	1477.65	
			120221031027	03	001-000-110	JAILORS SALARIES	12693.70	
			120221031027	04	001-000-110	KITCHEN MANAGER	1779.44	
			120221031027	05	001-000-110	JAILORS OVERTIME	4873.08	
			120221031027	06	001-000-110	FTCA W/H	1369.80	
			120221031027	07	001-000-110	MEDICARE WITHHOLDING	320.37	

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 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 11, 2022 TO OCTOBER 31, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY		CLAY COUNTY	
CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER
LINE #	ACCOUNT	DESCRIPTION	AMOUNT
08	001-000-110	RETIREMENT W/H	3972.75
09	001-000-110	GROUP HEALTH - BCBS	6175.33
10	001-000-110	GROUP LIFE INS - EMP	251.17
11	001-000-110	GROUP HEALTH -GAP/GG	2232.84
01	001-000-110	DEP EMA DIRECTOR S	218.88
02	001-000-110	GRANT COORDINATOR	707.53
03	001-000-110	FICA W/H	56.84
04	001-000-110	MEDICARE WITHHOLDING	13.29
05	001-000-110	RETIREMENT W/H	38.09
01	001-000-110	CONSTABLE FEES	5585.00
02	001-000-110	FICA W/H	347.24
03	001-000-110	MEDICARE WITHHOLDING	81.22
04	001-000-110	RETIREMENT W/H	984.84
05	001-000-110	GROUP LIFE INS - OFF	3.22
06	001-000-110	GROUP MEDI-SUPPL	238.86
07	001-000-110	GROUP MEDI-PART B	170.10
08	001-000-110	GROUP MEDI-PART D	13.00
01	097-000-110	911 DIRECTOR SALAR	643.75
02	097-000-110	DISPATCHERS	8414.05
03	097-000-110	DISPATCHER O/T	2352.84
04	097-000-110	FICA W/H	668.99
05	097-000-110	MEDICARE WITHHOLDING	156.47
06	097-000-110	RETIREMENT W/H	1854.30
07	097-000-110	GROUP HEALTH - BCBS	3848.46
08	097-000-110	GROUP LIFE INS - EMP	35.28
09	097-000-110	GROUP HEALTH -GAP/GG	1299.55
01	104-000-110	LAW LIBRARY- ADMIN	136.22
02	104-000-110	FICA W/H	6.76
03	104-000-110	MEDICARE WITHHOLDING	1.58
04	104-000-110	RETIREMENT W/H	23.70
01	114-000-110	COORDINATOR/VOL.FI	500.00
02	114-000-110	FICA W/H	31.00
03	114-000-110	MEDICARE WITHHOLDING	7.25
04	114-000-110	RETIREMENT W/H	87.00
01	161-000-110	ROAD LABORERS-HOUR	2468.40
02	161-000-110	FICA W/H	14.72
03	161-000-110	MEDICARE WITHHOLDING	33.85
04	161-000-110	RETIREMENT W/H	429.51
05	161-000-110	GROUP HEALTH - BCBS	1546.36
06	161-000-110	GROUP LIFE INS - EMP	10.08
07	161-000-110	GROUP HEALTH -GAP/GG	371.30
01	162-000-110	ROAD LABORERS- HOU	2439.04
02	162-000-110	FICA W/H	147.08
03	162-000-110	MEDICARE WITHHOLDING	34.40
04	162-000-110	RETIREMENT W/H	424.40
05	162-000-110	GROUP HEALTH - BCBS	850.22
06	162-000-110	GROUP LIFE INS - EMP	10.08
07	162-000-110	GROUP HEALTH -GAP/GG	742.60
01	163-000-110	ROAD LABORERS- HOU	3330.32
02	163-000-110	FICA W/H	198.45
03	163-000-110	MEDICARE WITHHOLDING	46.42

CHECK AMOUNT

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD OCTOBER 11, 2022 TO OCTOBER 31, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE	ACCOUNT #	DESCRIPTION	AMOUNT	CHECK AMOUNT
80309	10/31/2022	SHERMAN IVY	120221031051	04	163-000-110	RETIREMENT W/H	579.48	
			120221031051	05	163-000-110	GROUP HEALTH - BCBS	850.22	
			120221031051	06	163-000-110	GROUP LIFE INS - EMP	10.08	
			120221031051	07	163-000-110	GROUP HEALTH -GAP/GG	371.30	
			120221031052	01	164-000-110	ROAD LABORERS- HOU	1466.64	
			120221031052	02	164-000-110	FICA W/H	89.04	
			120221031052	03	164-000-110	MEDICARE WITHOLDING	20.82	
			120221031052	04	164-000-110	RETIREMENT W/H	255.19	
			120221031052	05	164-000-110	GROUP HEALTH - BCBS	425.11	
			120221031052	06	164-000-110	GROUP LIFE INS - EMP	5.04	
			120221031052	07	164-000-110	GROUP HEALTH -GAP/GG	185.65	
			120221031053	01	165-000-110	ROAD LABORERS- HOU	5658.68	
			120221031053	02	165-000-110	FICA W/H	342.79	
			120221031053	03	165-000-110	MEDICARE WITHOLDING	80.17	
			120221031053	04	165-000-110	RETIREMENT W/H	707.65	
			120221031053	05	165-000-110	GROUP HEALTH - BCBS	425.11	
			120221031053	06	165-000-110	GROUP LIFE INS - EMP	5.04	
			120221031053	07	165-000-110	GROUP HEALTH -GAP/GG	185.65	
			120221031056	01	400-000-110	SANITATION SALARY	5648.45	
			120221031056	02	400-000-110	FICA W/H	342.61	
			120221031056	03	400-000-110	MEDICARE WITHOLDING	80.12	
			120221031056	04	400-000-110	RETIREMENT W/H	892.62	
			120221031056	05	400-000-110	GROUP HEALTH - BCBS	1369.81	
			120221031056	06	400-000-110	GROUP LIFE INS - EMP	15.12	
			120221031056	07	400-000-110	GROUP HEALTH -GAP/GG	556.95	
							288095.77	
80310	10/31/2022	UNITED STATES K-9 UNLIMITED, 393114		01	041-201-620	CANINE SUPPLIES	21950.00	21950.00
				02	001-262-477	PRIVATE VEHICLE TRAV	281.25	327.25
								650455.68
								651812.23

** CHECK TOTAL FOR BANK: BANCORP SOUTH GENERAL COUNTY 650455.68
 ** TOTAL DISBURSEMENTS ** 651812.23

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 01, 2022 TO NOVEMBER 09, 2022

BANK: BFM BANKFIRST MOON VALLEY PROJECT		INVOICE		ACCOUNT		CHECK
CHECK NUMBER	DATE	NUMBER	LINE #	NUMBER	DESCRIPTION	AMOUNT
1019	11/02/2022	0005	01	088-300-550	CONTRACTOR FEES	35102.43
		0006	01	088-300-550	CONTRACTOR FEES	129608.18
						164710.61
1020	11/02/2022	10386	01	088-300-555	ENGINEERING FEES	2850.51
		10661	01	088-300-555	ENGINEERING FEES	13302.38
						16152.89
** CHECK TOTAL FOR BANK: BANKFIRST MOON VALLEY PROJECT						180863.50

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 01, 2022 TO NOVEMBER 09, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE #	ACCOUNT NUMBER	DESCRIPTION	AMOUNT	CHECK AMOUNT
80311	11/01/2022	TAX BRAKE MS, LLC	11/2022	01	001-000-204	LAND REDEMPTION	381.61	381.61

80312	11/01/2022	ICS, INC.	11/2022	01	001-100-745	DUE TO ICS HEADSTART	35000.00	35000.00
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80313	11/02/2022	PAYROLL CLEARING ACCOUNT	INVOICE NUMBER	LINE #	ACCOUNT NUMBER	DESCRIPTION	AMOUNT	CHECK AMOUNT
120221031005	01	001-000-110	OFFICE CLERICAL	274.31				
120221031005	02	001-000-110	FICA W/H	17.01				
120221031005	03	001-000-110	MEDICARE WITHOLDING	3.98				
120221031012	01	001-000-110	OFFICE CLERICAL	453.20				
120221031012	02	001-000-110	COMMISSION	62.25				
120221031012	03	001-000-110	FICA W/H	49.66				
120221031012	04	001-000-110	MEDICARE WITHOLDING	11.61				
120221031012	05	001-000-110	RETIREMENT W/H	60.48				
120221031013	01	001-000-110	BAIILFF	525.00				
120221031013	02	001-000-110	FICA W/H	32.36				
120221031013	03	001-000-110	MEDICARE WITHOLDING	7.56				
120221031013	04	001-000-110	RETIREMENT W/H	52.20				
120221031014	01	001-000-110	BAIILFF	2100.00				
120221031014	02	001-000-110	FICA W/H	128.66				
120221031014	03	001-000-110	MEDICARE WITHOLDING	30.10				
120221031014	04	001-000-110	RETIREMENT W/H	300.15				
120221031025	01	001-000-110	BAIILFF	525.00				
120221031025	02	001-000-110	FICA W/H	32.55				
120221031025	03	001-000-110	MEDICARE WITHOLDING	7.61				
120221031025	04	001-000-110	RETIREMENT W/H	91.35				
120221031026	01	001-000-110	BAIILFF	150.00				
120221031026	02	001-000-110	FICA W/H	9.30				
120221031026	03	001-000-110	MEDICARE WITHOLDING	2.18				
120221031026	04	001-000-110	RETIREMENT W/H	26.10				
120221031028	01	001-000-110	BAIILFF	300.00				
120221031028	02	001-000-110	FICA W/H	18.60				
120221031028	03	001-000-110	MEDICARE WITHOLDING	4.35				
120221031028	04	001-000-110	RETIREMENT W/H	39.15				
120221031031	01	001-000-110	OFFICE/CLERICAL	285.35				
120221031031	02	001-000-110	ELECTION COMMISSION	1100.00				
120221031031	03	001-000-110	FICA W/H	68.20				
120221031031	04	001-000-110	MEDICARE WITHOLDING	15.95				
120221031032	01	001-000-110	RETIREMENT W/H	191.40				
120221031032	02	001-000-110	GROUP LIFE INS - OFF	3.22				
120221031032	03	001-000-110	GROUP MEDI-SUPL	238.86				
120221031032	04	001-000-110	GROUP MEDI-PART B	170.10				
120221031045	01	001-000-110	GROUP MEDI-PART D	13.00				
120221031045	02	001-000-110	DISPATCHERS	3.21				
120221031045	03	001-000-110	DISPATCHER O/T	56.60				
120221031045	04	001-000-110	FICA W/H	3.71				
120221031045	05	001-000-110	MEDICARE WITHOLDING	.87				
120221031048	01	001-000-110	DISPATCHERS	10.41				
120221031048	02	001-000-110	FICA W/H	44.17				
120221031048	03	001-000-110	MEDICARE WITHOLDING	2.74				
120221031048	04	001-000-110	MEDICARE WITHOLDING	.64				

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 01, 2022 TO NOVEMBER 09, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY		INVOICE		ACCOUNT		CHECK
CHECK NUMBER	DATE	NUMBER	LINE #	DESCRIPTION	AMOUNT	AMOUNT
80314	11/09/2022	120221031054	04	165-000-110 ROAD LABORERS- HOU	129.60	
		120221031054	02	165-000-110 FICA W/H	8.04	
		120221031054	03	165-000-110 MEDICARE WITHHOLDING	1.88	
		120221031054	04	165-000-110 RETIREMENT W/H	22.55	7692.91
		120221109023	01	001-000-110 DEPUTIES	15207.20	
		120221109023	02	001-000-110 DEPUTIES OVERTIME	1193.54	
		120221109023	03	001-000-110 FICA W/H	966.51	
		120221109023	04	001-000-110 MEDICARE WITHHOLDING	226.04	
		120221109023	05	001-000-110 RETIREMENT W/H	2637.77	20231.06

** CHECK TOTAL FOR BANK: BANCORP SOUTH GENERAL COUNTY

63305.58

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 01, 2022 TO NOVEMBER 09, 2022

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE #	NUMBER	ACCOUNT DESCRIPTION	AMOUNT	CHECK AMOUNT
2211	11/07/2022	SHERMAN IVY	11/2022	01	687-000-139	DUE TO EMPLOYEES-PAR	183.10	183.10
2212	11/07/2022	SHELTON DEANES	11/2022A	01	687-000-139	DUE TO EMPLOYEES-PAR	214.10	214.10
2213	11/07/2022	R B DAVIS	11/2022A	01	687-000-139	DUE TO EMPLOYEES-PAR	176.60	176.60
2214	11/07/2022	THOMAS B. STOREY, JR.	11/2022	01	687-000-139	DUE TO EMPLOYEES-PAR	267.40	267.40
2215	11/07/2022	CASSONDRA SMITH	11/2022	01	687-000-139	DUE TO EMPLOYEES-PAR	192.80	192.80
** CHECK TOTAL FOR BANK: RENASANT BANK- INSURANCE ACCT							1034.00	
** TOTAL DISBURSEMENTS **							245203.08	

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: BYB BANKFIRST BRYAN PUBLIC LIBRARY		INVOICE		ACCOUNT		CHECK
CHECK NUMBER	DATE	NUMBER	LINE #	NUMBER	DESCRIPTION	AMOUNT
100	11/18/2022	17380119	01	072-500-919	FURN & OFF EQUIP < 5	4907.90
101	11/28/2022	PHILLIP'S HARDWARE				
		C139283	01	072-500-649	MAINT SUPPLIES & MAT	215.52
** CHECK TOTAL FOR BANK: BANKFIRST BRYAN PUBLIC LIBRARY						5123.42

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE #	ACCOUNT NUMBER	DESCRIPTION	AMOUNT	CHECK AMOUNT
80512	11/14/2022	PAYROLL CLEARING ACCOUNT	120221109024	01	001-000-110	DEPUTIES	97.40	
			120221109024	02	001-000-110	DEPUTIES OVERTIME	1040.47	
			120221109024	03	001-000-110	FICA W/H	70.55	
			120221109024	04	001-000-110	MEDICARE WITHOLDING	16.50	
			120221109024	05	001-000-110	RETIREMENT W/H	197.99	
			120221115001	01	001-000-110	PERSONNEL MAN/SYST	1996.50	
			120221115001	02	001-000-110	ASST PERSONNEL MNG	112.73	
			120221115001	03	001-000-110	OFFICE CLERICAL	1375.47	
			120221115001	04	001-000-110	FICA W/H	208.99	
			120221115001	05	001-000-110	MEDICARE WITHOLDING	48.89	
			120221115001	06	001-000-110	RETIREMENT W/H	606.33	
			120221115002	01	001-000-110	DEPUTIES	107.28	
			120221115002	02	001-000-110	OFFICE CLERICAL	408.13	
			120221115002	03	001-000-110	FICA W/H	30.51	
			120221115002	04	001-000-110	MEDICARE WITHOLDING	7.14	
			120221115002	05	001-000-110	RETIREMENT W/H	18.67	
			120221115003	01	001-000-110	DEPUTIES	2500.00	
			120221115003	02	001-000-110	OFFICE CLERICAL	381.10	
			120221115003	03	001-000-110	FICA W/H	186.19	
			120221115003	04	001-000-110	MEDICARE WITHOLDING	43.54	
			120221115003	05	001-000-110	RETIREMENT W/H	462.61	
			120221115004	01	001-000-110	DEPUTIES	4254.37	
			120221115004	02	001-000-110	FICA W/H	248.00	
			120221115004	03	001-000-110	MEDICARE WITHOLDING	58.00	
			120221115004	04	001-000-110	RETIREMENT W/H	740.26	
			120221115006	01	001-000-110	PURCHASE CLERK SAL	560.32	
			120221115006	02	001-000-110	ASST PURCHASE CLER	154.50	
			120221115006	03	001-000-110	FICA W/H	26.64	
			120221115006	04	001-000-110	MEDICARE WITHOLDING	6.23	
			120221115006	05	001-000-110	RETIREMENT W/H	124.38	
			120221115008	01	001-000-110	RECEIVING CLERK	525.28	
			120221115008	02	001-000-110	FICA W/H	29.63	
			120221115008	03	001-000-110	MEDICARE WITHOLDING	6.93	
			120221115008	04	001-000-110	RETIREMENT W/H	91.40	
			120221115009	01	001-000-110	MAINTENANCE SALARY	4082.05	
			120221115009	02	001-000-110	SECURITY GUARD	1977.60	
			120221115009	03	001-000-110	FICA W/H	372.34	
			120221115009	04	001-000-110	MEDICARE WITHOLDING	87.10	
			120221115009	05	001-000-110	RETIREMENT W/H	633.39	
			120221115010	01	001-000-110	INFORMATION TECHNO	472.54	
			120221115010	02	001-000-110	FICA W/H	28.02	
			120221115010	03	001-000-110	MEDICARE WITHOLDING	6.55	
			120221115010	04	001-000-110	RETIREMENT W/H	82.22	
			120221115015	01	001-000-110	CASE MANAGER - GRA	406.47	
			120221115015	02	001-000-110	OFFICE/CLERICAL	348.49	
			120221115015	03	001-000-110	FICA W/H	42.43	
			120221115015	04	001-000-110	MEDICARE WITHOLDING	9.93	
			120221115015	05	001-000-110	RETIREMENT W/H	131.36	
			120221115018	01	001-000-110	DEPUTIES	5016.66	
			120221115018	02	001-000-110	FICA W/H	304.74	
			120221115018	03	001-000-110	MEDICARE WITHOLDING	71.27	

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY		CLAY COUNTY		
CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	
			LINE #	
			NUMBER	
		ACCOUNT DESCRIPTION	AMOUNT	
			CHECK AMOUNT	
		04 001-000-110 RETIREMENT W/H	872.90	
		01 001-000-110 OFFICE/CLERICAL	158.69	
		01 001-000-110 DEPUTIES	4708.40	
		02 001-000-110 OFFICE/CLERICAL	6379.88	
		03 001-000-110 OFFICE/CLERICAL OV	857.90	
		04 001-000-110 FICA W/H	697.61	
		05 001-000-110 MEDICARE WITHOLDING	163.16	
		06 001-000-110 RETIREMENT W/H	2020.83	
		01 001-000-110 MTC TRANSPORT OFPI	393.53	
		02 001-000-110 FICA W/H	24.40	
		03 001-000-110 MEDICARE WITHOLDING	5.71	
		04 001-000-110 RETIREMENT W/H	68.47	
		01 001-000-110 JAIL ADMINISTRATOR	2008.13	
		02 001-000-110 JAIL RECORDS CLERK	1378.57	
		03 001-000-110 JAILORS SALARIES	12061.41	
		04 001-000-110 JAILORS OVERTIME	6749.55	
		05 001-000-110 FICA W/H	1332.43	
		06 001-000-110 MEDICARE WITHOLDING	311.61	
		07 001-000-110 RETIREMENT W/H	3862.38	
		01 001-000-110 DEE EMA DIRECTOR S	218.88	
		02 001-000-110 GRANT COORDINATOR	588.22	
		03 001-000-110 FICA W/H	49.44	
		04 001-000-110 MEDICARE WITHOLDING	11.56	
		05 001-000-110 RETIREMENT W/H	38.09	
		01 097-000-110 911 DIRECTOR SALAR	643.75	
		02 097-000-110 DISPATCHER O/T	7619.43	
		03 097-000-110 DISPATCHER O/T	792.19	
		04 097-000-110 FICA W/H	522.37	
		05 097-000-110 MEDICARE WITHOLDING	122.16	
		06 097-000-110 RETIREMENT W/H	1445.99	
		01 151-000-110 ROAD LABORERS- HOU	2451.84	
		02 151-000-110 FICA W/H	57.68	
		03 151-000-110 MEDICARE WITHOLDING	13.49	
		04 152-000-110 RETIREMENT W/H	211.56	
		01 152-000-110 ROAD LABORERS- HOU	2060.00	
		02 152-000-110 FICA W/H	123.58	
		03 152-000-110 MEDICARE WITHOLDING	28.90	
		04 152-000-110 RETIREMENT W/H	186.39	
		01 153-000-110 ROAD LABORERS- HOU	4480.31	
		02 153-000-110 FICA W/H	184.11	
		03 153-000-110 MEDICARE WITHOLDING	43.05	
		04 153-000-110 RETIREMENT W/H	779.57	
		01 154-000-110 ROAD LABORERS- HOU	1236.00	
		02 154-000-110 FICA W/H	76.36	
		03 154-000-110 MEDICARE WITHOLDING	17.86	
		04 154-000-110 RETIREMENT W/H	215.06	
		01 155-000-110 ROAD LABORERS - H	4095.06	
		02 155-000-110 FICA W/H	217.06	
		03 155-000-110 MEDICARE WITHOLDING	50.77	
		04 155-000-110 RETIREMENT W/H	486.59	
		01 161-000-110 FICA W/H	76.36	

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE	NUMBER	ACCOUNT DESCRIPTION	AMOUNT	CHECK AMOUNT
80513	11/15/2022	LELA JACK	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80514	11/15/2022	SANTANA R WOFFORD	11/2022	01	001-180-574	POLL WORKERS	160.00	160.00
80515	11/15/2022	PAT GAVIN	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80516	11/15/2022	WIMA LEE	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80517	11/15/2022	CHARLOTTE MESSIER	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80518	11/15/2022	ANNETTE PETTY	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80519	11/15/2022	BETTY WALKER	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80520	11/15/2022	WILLIE K ORR	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80521	11/15/2022	DARLENE GATES	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80522	11/15/2022	JOHN E ROBINSON JR	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80523	11/15/2022	BECKY T MCNEEL	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80524	11/15/2022	MARION E MCCLENTON	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80525	11/15/2022	EBBA KELLUM	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
							11441.68	

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CLAY COUNTY
CASH DISBURSEMENTS REPORT
FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY		INVOICE		ACCOUNT		CHECK
CHECK NUMBER	DATE	NUMBER	LINE #	NUMBER	DESCRIPTION	AMOUNT
80526	11/15/2022	SARAH A. MOSLEY	01	001-180-574	POLL WORKERS	160.00
80527	11/15/2022	ALICE E RAINES	01	001-180-574	POLL WORKERS	120.00
80528	11/15/2022	MINNIE R. SHELTON	01	001-180-574	POLL WORKERS	120.00
80529	11/15/2022	JAMES SMITH III	01	001-180-574	POLL WORKERS	100.00
80530	11/15/2022	DANA WESLEY	01	001-180-574	POLL WORKERS	120.00
80531	11/15/2022	ROSE MARY ONEAL	01	001-180-574	POLL WORKERS	100.00
80532	11/15/2022	FRANKIE COCKRELL	01	001-180-574	POLL WORKERS	100.00
80533	11/15/2022	LORETTA GUIDO	01	001-180-574	POLL WORKERS	100.00
80534	11/15/2022	KAREN L. GABLE	01	001-180-574	POLL WORKERS	120.00
80535	11/15/2022	BRENDA J. WASHINGTON	01	001-180-574	POLL WORKERS	120.00
80536	11/15/2022	SHAVANDA FORD	01	001-180-574	POLL WORKERS	100.00
80537	11/15/2022	MARTHA C. WHITE	01	001-180-574	POLL WORKERS	120.00
80538	11/15/2022	JOHNNIE M SHUMAKER	01	001-180-574	POLL WORKERS	120.00
80539	11/15/2022	HILDA I. COCKRELL	01	001-180-574	POLL WORKERS	120.00
80540	11/15/2022	LISA K. ANDRESEN	01	001-180-574	POLL WORKERS	160.00
80541	11/15/2022	RENNITA L. MITCHELL	01	001-180-574	POLL WORKERS	120.00
80542	11/15/2022	MARGARET SHELTON	01	001-180-574	POLL WORKERS	160.00

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: B5 BANCORP SOUTH GENERAL COUNTY		INVOICE		ACCOUNT		AMOUNT	CHECK
CHECK NUMBER	DATE	NUMBER	LINE #	NUMBER	DESCRIPTION	AMOUNT	AMOUNT
80543	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80544	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80545	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80546	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80547	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80548	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	160.00	160.00
80549	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80550	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80551	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80552	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80553	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80554	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	160.00	160.00
80555	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	160.00	160.00
80556	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	160.00	160.00
80557	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80558	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80559	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY		INVOICE		ACCOUNT		AMOUNT	
CHECK NUMBER	DATE	NUMBER	LINE #	NUMBER	DESCRIPTION	AMOUNT	CHECK AMOUNT
80560	11/15/2022	ELLA SEAY	01	001-180-574	POLL WORKERS	160.00	160.00
80561	11/15/2022	IDA R. SOLOMON	01	001-180-574	POLL WORKERS	100.00	100.00
80562	11/15/2022	GENEVA MCWILLIAN	01	001-180-574	POLL WORKERS	120.00	120.00
80563	11/15/2022	JAMES CRAWFORD	01	001-180-574	POLL WORKERS	120.00	120.00
80564	11/15/2022	PAULINE ELLIOTT	01	001-180-574	POLL WORKERS	100.00	100.00
80565	11/15/2022	ROSIE M. JACKSON	01	001-180-574	POLL WORKERS	120.00	120.00
80566	11/15/2022	JUDY S. BRADSHAW	01	001-180-574	POLL WORKERS	120.00	120.00
80567	11/15/2022	NETTIE GLADNEY	01	001-180-574	POLL WORKERS	100.00	100.00
80568	11/15/2022	RHONDA STAFFORD	01	001-180-574	POLL WORKERS	120.00	120.00
80569	11/15/2022	ALBERT COCKRELL	01	001-180-574	POLL WORKERS	100.00	100.00
80570	11/15/2022	BETTY STARKS	01	001-180-574	POLL WORKERS	100.00	100.00
80571	11/15/2022	JEANETTE HOLLINGSHEAD	01	001-180-574	POLL WORKERS	100.00	100.00
80572	11/15/2022	ELIZABETH CALVERT	01	001-180-574	POLL WORKERS	120.00	120.00
80573	11/15/2022	BERNICE WILLIAMS	01	001-180-574	POLL WORKERS	100.00	100.00
80574	11/15/2022	JOHN E SPANN	01	001-180-574	POLL WORKERS	100.00	100.00
80575	11/15/2022	PAMELA ROBINSON	01	001-180-574	POLL WORKERS	100.00	100.00
80576	11/15/2022	SONYA O CALVERT	01	001-180-574	POLL WORKERS	160.00	160.00

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE #	ACCOUNT NUMBER	DESCRIPTION	AMOUNT	CHECK AMOUNT
80577	11/15/2022	DEBRA CASPSELL	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80578	11/15/2022	JOHN L. TUCKER	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80579	11/15/2022	TOULUA TALLIE	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
				01	001-180-574	POLL WORKERS	100.00-	
						VOID DATE: 11/15/2022		.00 V
80580	11/15/2022	MARVIN TURNIPSEED	11/2022	01	001-180-574	POLL WORKERS	160.00	160.00
80581	11/15/2022	ELMORA JEFFERSON	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80582	11/15/2022	VENDELLA EDWARDS	11/2022	01	001-180-574	POLL WORKERS	160.00	160.00
80583	11/15/2022	FELECIA FINLEY	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80584	11/15/2022	JOHN COX, JR	11/2022	01	001-180-574	POLL WORKERS	160.00	160.00
80585	11/15/2022	LINDA BLUTTT	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80586	11/15/2022	TEDDY WALKER	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80587	11/15/2022	KENNETH CRUMP	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80588	11/15/2022	GWEN DOSS	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80589	11/15/2022	TERRELL HARRIS	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80590	11/15/2022	DIANA HARRIS	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80591	11/15/2022	SHIRLEY FLAGG	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80592	11/15/2022	BRITTANY CRUSOE	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80593	11/15/2022	CHARLIE ANN LATHAN	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY		INVOICE		ACCOUNT		CHECK
CHECK NUMBER	DATE	NUMBER	LINE #	NUMBER	DESCRIPTION	AMOUNT
80594	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00
80595	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	120.00
80596	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00
80597	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00
80598	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	120.00
80599	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00
80600	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00
80601	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00
80602	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00
80603	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00
80604	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	160.00
80605	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	120.00
80606	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00
80607	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00
80608	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	100.00
80609	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	120.00
80610	11/15/2022	11/2022	01	001-180-574	POLL WORKERS	120.00

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: BS HANCOCK SOUTH GENERAL COUNTY

CHECK NUMBER	CHECK DATE	VENDOR NAME	INVOICE NUMBER	LINE	ACCOUNT #	DESCRIPTION	AMOUNT	CHECK AMOUNT
80611	11/15/2022	ANNIE HARRIS	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00
80612	11/15/2022	JULIE GRAY	11/2022	01	001-180-574	POLL WORKERS	120.00	120.00
80613	11/16/2022	ATMOS ENERGY	11/20220CA	01	001-151-513	OFFICE COMPLEX BUILD	394.62	
			11/2022SHERA	01	001-151-514	SHERIFF'S DEPT UTILI	1052.51	
			11/2022SHA	01	001-151-514	SHERIFF'S DEPT UTILI	42.24	
			11/2022DHS	01	001-151-514	SHERIFF'S DEPT UTILI	95.04	
			11/2022D2	01	152-302-510	UTILITIES	122.60	1707.01
80614	11/16/2022	BELLSOUTH / ATT	11/2022SSH	01	001-200-504	NCIC LINES	35.91	35.91
80615	11/16/2022	CALVERT-SPRADLING ENGINEERS	10600	01	084-277-555	ENGINEERING FEES	4134.78	4134.78
80616	11/16/2022	C SPIRE WIRELESS	11/2022AB	01	001-100-504	CELLULAR PHONE	34.33	
			11/2022WM	01	001-151-503	CELLULAR PHONE	47.55	
			11/2022MS	01	001-151-503	CELLULAR PHONE	43.55	
			11/2022DC	01	001-164-503	CELLULAR PHONE	103.54	
			11/2022SHER	01	001-200-503	CELLULAR PHONES	626.03	
			11/2022SHER	03	001-200-506	INTERNET SVC/TV	34.33	
			11/2022SHER	02	001-220-503	CELLULAR PHONES	47.55	
			11/2022VF	01	114-250-504	INTERNET SERVICE	28.34	
			11/2022D1	01	151-301-503	CELLULAR PHONE	60.50	
			11/2022D2	01	152-302-503	CELLULAR PHONE	21.29	
			11/2022D3	01	153-303-503	CELLULAR PHONE	40.89	
			11/2022D4	01	164-304-503	CELLULAR PHONES	47.55	
			11/2022D5	01	165-305-503	CELLULAR PHONE	50.84	1186.29
80617	11/16/2022	CITY OF WEST POINT	11/2022C	01	001-100-740	CITY OF WEST POINT	16113.04	16113.04
80618	11/16/2022	CONTINENTAL RAILS, INC.	11/2022	01	084-277-545	REPAIRS TO RAIL SPUR	58990.01	58990.01
80619	11/16/2022	GOLDEN TRIANGLE PL & DEV DIS	11/2022SAN	01	400-340-558	GMPDD MONTHLY BILLIN	2967.94	2967.94
80620	11/16/2022	MARK G WILLIAMS	11/2022	01	001-161-550	LEGAL FEES	1614.28	1614.28
80621	11/17/2022	TOUJUA TALLIE EDWARDS	11/2022A	01	001-180-574	POLL WORKERS	100.00	100.00
80622	11/17/2022	LINDA HANNAH	11/2022	01	001-180-574	POLL WORKERS	100.00	100.00

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY		INVOICE		ACCOUNT		CHECK
CHECK NUMBER	DATE	VENDOR NAME	NUMBER	LINE #	DESCRIPTION	AMOUNT
80623	11/18/2022	CLAY COUNTY CO-OP	678908A	01	153-303-643 HARDWARE/PLUMB/ELEC	38.90
			678511A	01	161-301-649 MAINT SUPPLIES & MAT	61.90
			678021A	01	161-301-692 CLOTHES/DRY GOODS-PR	8.99
			674860A	01	161-301-692 CLOTHES/DRY GOODS-PR	11.98
			677792A	01	400-340-692 CLOTHES/DRY GOODS-PR	1398.78
			670235A	01	400-340-692 CLOTHES/DRY GOODS-PR	.50-
						1520.05
80624	11/18/2022	OKTIBBEHA COUNTY COOPERATIVE	831064	01	152-302-696 FERTILIZER & CHEMICA	796.00
						796.00
80625	11/22/2022	AMY BERRY - EXPENSE ACCOUNT		01	001-101-476 MEALS & LODGING	376.48
				02	001-101-477 PRIVATE VEHICLE TRAV	187.50
						563.98
80626	11/22/2022	ANNIE HINES-GOODE		01	001-154-476 MEALS & LODGING	328.99
				02	001-154-477 PRIVATE VEHICLE TRAV	131.25
						460.24
80627	11/22/2022	BARNEY HOING		01	165-305-585 CLEARING ROW	2000.00
						2000.00
80628	11/22/2022	CALVERT-SPRADLING ENGINEERS	10672	01	155-305-555 ENGINEER FEES	15365.35
						15365.35
80629	11/22/2022	GOLDEN TRIANGLE PL & DEV DIS	11/2022B	01	001-662-701 GTR PLANNING & DEVEL	546.00
						546.00
80630	11/22/2022	MS DEVELOPMENT AUTHORITY		01	138-800-800 PRIN RETIREMENT-CAP	4834.34
			11/2022GRAH	02	138-800-802 INTEREST EXPENSE	711.64
						5545.98
80631	11/22/2022	PORSHA JOHNSON LBE		01	001-105-476 MEALS & LODGING	230.00
			11/2022	02	001-105-477 PRIVATE VEHICLE TRAV	182.50
						412.50
80632	11/22/2022	TANYA WEST		01	001-220-552 MEDICAL FEES	525.00
			11/2022			525.00
80633	11/22/2022	CITY WATER & LIGHT DEPT.		01	001-151-512 ELLIS CLINIC UTILITI	382.82
			11/2022EHL	01	001-151-513 OFFICE COMPLEX BUID	125.57
			11/2022FOR	01	001-151-513 OFFICE COMPLEX BUID	35.42
			11/2022SHERRA	01	001-151-514 SHERIFF'S DEPT UTILI	953.69
						1497.50
80636	11/23/2022	PAYROLL CLEARING ACCOUNT		01	001-000-110 DEPUTIES	16235.88
			120221123023	02	001-000-110 DEPUTIES OVERTIME	2960.50
			120221123023	03	001-000-110 FICA W/H	1139.82
			120221123023	04	001-000-110 MEDICARE WITHOLDING	266.56
			120221123023	05	001-000-110 RETIREMENT W/H	3151.47
			120221123023	06	001-000-110 GROUP HEALTH - BCBS	3859.69

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE #	NUMBER	ACCOUNT DESCRIPTION	AMOUNT	CHECK AMOUNT
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			120221130023	07	001-000-110	GROUP LIFE INS - EMP	38.55	
			120221130023	08	001-000-110	GROUP HEALTH - GAP/GG	1299.55	
			120221130023	09	001-000-110	GROUP MEDI-SUPPL	170.59	
			120221130023	10	001-000-110	GROUP MEDI-PART B	170.10	
			120221130023	11	001-000-110	GROUP MEDI-PART D	22.70	
								29325.41

80637	11/28/2022	ECAM		02	001-180-571	DUES & SUBSCRIPTIONS	235.00	
	11/2022			01	001-180-585	SEMINARS/REGISTRATION	2510.00	
								2745.00

80638	11/30/2022	PAYROLL CLEARING ACCOUNT	INVOICE NUMBER	LINE #	NUMBER	ACCOUNT DESCRIPTION	AMOUNT	CHECK AMOUNT
			120221130001	01	001-000-110	SUPERVISORS SALARI	18750.00	
			120221130001	02	001-000-110	PERSONNEL MAN/STY	1996.50	
			120221130001	03	001-000-110	ATTORNEYS	3750.00	
			120221130001	04	001-000-110	ASST PERSONNEL MNG	112.73	
			120221130001	05	001-000-110	OFFICE CLERICAL	1584.20	
			120221130001	06	001-000-110	FICA W/H	1574.06	
			120221130001	07	001-000-110	MEDICARE WITHOLDING	368.14	
			120221130001	08	001-000-110	RETIREMENT W/H	4557.65	
			120221130001	09	001-000-110	GROUP HEALTH - BCBS	3317.07	
			120221130001	10	001-000-110	GROUP LIFE INS - EMP	18.39	
			120221130001	11	001-000-110	GROUP LIFE INS - EMP	24.44	
			120221130001	12	001-000-110	GROUP HEALTH - GAP/GG	1299.55	
			120221130001	13	001-000-110	GROUP MEDI-SUPPL	363.81	
			120221130001	14	001-000-110	GROUP MEDI-PART B	340.20	
			120221130001	15	001-000-110	GROUP MEDI-PART D	50.50	
			120221130002	01	001-000-110	DEPUTIES	107.28	
			120221130002	02	001-000-110	OFFICE CLERICAL	492.26	
			120221130002	03	001-000-110	COMPTROLLER	3849.97	
			120221130002	04	001-000-110	ATTENDING BRD MEET	120.00	
			120221130002	05	001-000-110	COUNTY AUDITOR	441.67	
			120221130002	06	001-000-110	COUNTY TREASURER	209.33	
			120221130002	07	001-000-110	PUBLIC SVC NOT PRO	416.67	
			120221130002	08	001-000-110	FICA W/H	339.18	
			120221130002	09	001-000-110	MEDICARE WITHOLDING	79.33	
			120221130002	10	001-000-110	RETIREMENT W/H	895.05	
			120221130002	11	001-000-110	GROUP HEALTH - BCBS	1499.12	
			120221130002	12	001-000-110	GROUP LIFE INS - EMP	3.27	
			120221130002	13	001-000-110	GROUP LIFE INS - OFF	6.44	
			120221130002	14	001-000-110	GROUP HEALTH - GAP/GG	371.30	
			120221130003	01	001-000-110	DEPUTIES	2500.00	
			120221130003	02	001-000-110	OFFICE CLERICAL	494.40	
			120221130003	03	001-000-110	PUBLIC SVCS NOT PR	416.66	
			120221130003	04	001-000-110	COUNTY REGISTRAR	1408.75	
			120221130003	05	001-000-110	STATE FALURES	33.33	
			120221130003	06	001-000-110	ELECTION FEES	208.34	
			120221130003	07	001-000-110	COMMISSION	85.04	
			120221130003	08	001-000-110	FICA W/H	317.60	
			120221130003	09	001-000-110	MEDICARE WITHOLDING	74.28	
			120221130003	10	001-000-110	RETIREMENT W/H	830.23	
			120221130003	11	001-000-110	GROUP HEALTH - BCBS	1355.81	

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY	CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE #	ACCOUNT NUMBER	DESCRIPTION	AMOUNT	CHECK AMOUNT
				120221130003	12	001-000-110	GROUP LIFE INS - EMP	16.08	
				120221130003	13	001-000-110	GROUP HEALTH - GAP/GG	540.78	
				120221130004	01	001-000-110	TAX ASSESSOR SALAR	6016.66	
				120221130004	02	001-000-110	DEPUTIES	4180.10	
				120221130004	03	001-000-110	PART-TIME HELP	180.04	
				120221130004	04	001-000-110	FICA W/H	593.59	
				120221130004	05	001-000-110	MEDICARE WITHOLDING	138.82	
				120221130004	06	001-000-110	RETIREMENT W/H	1774.24	
				120221130004	07	001-000-110	GROUP HEALTH - BCBS	2774.45	
				120221130004	08	001-000-110	GROUP LIFE INS - EMP	26.60	
				120221130004	09	001-000-110	GROUP HEALTH - GAP/GG	928.25	
				120221130006	01	001-000-110	PURCHASE CLERK SAL	560.32	
				120221130006	02	001-000-110	ASST PURCHASE CLER	154.50	
				120221130006	03	001-000-110	FICA W/H	26.64	
				120221130006	04	001-000-110	MEDICARE WITHOLDING	6.23	
				120221130006	05	001-000-110	RETIREMENT W/H	124.38	
				120221130006	06	001-000-110	GROUP HEALTH - BCBS	1499.12	
				120221130006	07	001-000-110	GROUP LIFE INS - EMP	10.08	
				120221130006	08	001-000-110	GROUP HEALTH - GAP/GG	371.30	
				120221130007	01	001-000-110	INVENTORY CLERK	2135.30	
				120221130007	02	001-000-110	FICA W/H	128.65	
				120221130007	03	001-000-110	MEDICARE WITHOLDING	30.09	
				120221130007	04	001-000-110	RETIREMENT W/H	371.54	
				120221130008	01	001-000-110	RECEIVING CLERK	525.28	
				120221130008	02	001-000-110	FICA W/H	29.63	
				120221130008	03	001-000-110	MEDICARE WITHOLDING	6.93	
				120221130008	04	001-000-110	RETIREMENT W/H	91.40	
				120221130008	05	001-000-110	MAINTENANCE SALARY	6074.96	
				120221130009	01	001-000-110	SECURITY GUARD	2090.90	
				120221130009	02	001-000-110	PART-TIME HELP	718.07	
				120221130009	03	001-000-110	FICA W/H	547.16	
				120221130009	04	001-000-110	MEDICARE WITHOLDING	127.98	
				120221130009	05	001-000-110	RETIREMENT W/H	1105.10	
				120221130009	06	001-000-110	GROUP HEALTH - BCBS	1794.92	
				120221130009	07	001-000-110	GROUP LIFE INS - EMP	20.16	
				120221130009	08	001-000-110	GROUP HEALTH - GAP/GG	742.60	
				120221130010	01	001-000-110	INFORMATION TECHNO	472.54	
				120221130010	02	001-000-110	FICA W/H	28.02	
				120221130010	03	001-000-110	MEDICARE WITHOLDING	6.55	
				120221130010	04	001-000-110	RETIREMENT W/H	82.22	
				120221130010	05	001-000-110	OFFICE/CLERICAL	729.58	
				120221130011	01	001-000-110	FICA W/H	45.23	
				120221130011	02	001-000-110	MEDICARE WITHOLDING	10.58	
				120221130011	03	001-000-110	ATTENDING COURT	600.00	
				120221130013	01	001-000-110	ATTENDING COURT	4080.00	
				120221130013	02	001-000-110	FICA W/H	282.99	
				120221130013	03	001-000-110	MEDICARE WITHOLDING	66.18	
				120221130013	04	001-000-110	RETIREMENT W/H	775.17	
				120221130014	01	001-000-110	ATTENDING COURT	8487.00	
				120221130014	02	001-000-110	FICA W/H	504.68	
				120221130014	03	001-000-110	MEDICARE WITHOLDING	118.03	

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
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BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE	ACCOUNT NUMBER	DESCRIPTION	AMOUNT	CHECK AMOUNT
			120221130014	04	001-000-110	RETIREMENT W/H	1476.74	
			120221130015	01	001-000-110	CASE MANAGER - GRA	489.20	
			120221130015	02	001-000-110	OFFICE/CLERICAL	348.49	
			120221130015	03	001-000-110	PUBLIC DEFENDER	1030.00	
			120221130015	04	001-000-110	JUDGE/REFEREE	884.94	
			120221130015	05	001-000-110	FILING FEES	255.00	
			120221130015	06	001-000-110	FICA W/H	240.19	
			120221130015	07	001-000-110	MEDICARE WITHOLDING	56.18	
			120221130015	08	001-000-110	RETIREMENT W/H	523.33	
			120221130015	09	001-000-110	GROUP MEDI-SUPL	319.62	
			120221130015	10	001-000-110	GROUP MEDI-PART B	170.10	
			120221130015	11	001-000-110	GROUP MEDI-PART D	97.30	
			120221130016	01	001-000-110	COURT ADMINISTRATO	4808.34	
			120221130016	02	001-000-110	FICA W/H	295.84	
			120221130016	03	001-000-110	MEDICARE WITHOLDING	69.19	
			120221130016	04	001-000-110	RETIREMENT W/H	836.65	
			120221130016	05	001-000-110	GROUP HEALTH - BCBS	425.11	
			120221130016	06	001-000-110	GROUP LIFE INS - EMP	5.04	
			120221130016	07	001-000-110	GROUP HEALTH -GAP/GG	185.65	
			120221130017	01	001-000-110	PROSECUTING ATTORN	618.00	
			120221130017	02	001-000-110	LUNACY JUDGE	352.13	
			120221130017	03	001-000-110	PUBLIC DEFENDER	944.17	
			120221130017	04	001-000-110	FICA W/H	34.15	
			120221130017	05	001-000-110	MEDICARE WITHOLDING	7.99	
			120221130017	06	001-000-110	RETIREMENT W/H	333.09	
			120221130017	07	001-000-110	GROUP HEALTH - BCBS	1074.01	
			120221130017	08	001-000-110	GROUP HEALTH -GAP/GG	185.65	
			120221130018	01	001-000-110	DEPUTIES	5264.66	
			120221130018	02	001-000-110	BAILIFF	825.00	
			120221130018	03	001-000-110	COUNTY JUDGES	7500.00	
			120221130018	04	001-000-110	FICA W/H	793.61	
			120221130018	05	001-000-110	MEDICARE WITHOLDING	185.61	
			120221130018	06	001-000-110	RETIREMENT W/H	2299.35	
			120221130018	07	001-000-110	GROUP HEALTH - BCBS	2668.17	
			120221130018	08	001-000-110	GROUP LIFE INS - EMP	15.12	
			120221130018	09	001-000-110	GROUP LIFE INS - OFF	9.66	
			120221130018	10	001-000-110	GROUP HEALTH -GAP/GG	1113.90	
			120221130019	01	001-000-110	CORONER'S FEE	1287.50	
			120221130019	02	001-000-110	DEP CORONERS FEE	309.00	
			120221130019	03	001-000-110	MEDICAL EXAMINERS	1050.00	
			120221130019	04	001-000-110	DEP MED EXAM FEE	350.00	
			120221130019	05	001-000-110	FICA W/H	185.79	
			120221130019	06	001-000-110	MEDICARE WITHOLDING	43.45	
			120221130019	07	001-000-110	RETIREMENT W/H	406.73	
			120221130019	08	001-000-110	GROUP HEALTH - BCBS	425.11	
			120221130019	09	001-000-110	GROUP LIFE INS - OFF	6.44	
			120221130019	10	001-000-110	GROUP HEALTH -GAP/GG	185.65	
			120221130020	01	001-000-110	ATTORNEYS	3571.70	
			120221130020	02	001-000-110	FICA W/H	195.44	
			120221130020	03	001-000-110	MEDICARE WITHOLDING	45.71	
			120221130020	04	001-000-110	RETIREMENT W/H	621.48	

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CLAY COUNTY
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CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE #	ACCOUNT NUMBER	DESCRIPTION	AMOUNT	CHECK AMOUNT
			120221130020	05	001-000-110	GROUP HEALTH - BCBS	1074.01	
			120221130020	06	001-000-110	GROUP LIFE INS - EMP	6.44	
			120221130020	07	001-000-110	GROUP HEALTH -GAP/GG	185.65	
			120221130021	01	001-000-110	ATTORNEYS	6492.70	
			120221130021	02	001-000-110	FICA W/H	391.97	
			120221130021	03	001-000-110	MEDICARE WITHOLDING	91.67	
			120221130021	04	001-000-110	RETIREMENT W/H	1129.72	
			120221130021	05	001-000-110	GROUP HEALTH - BCBS	425.11	
			120221130021	06	001-000-110	GROUP LIFE INS - EMP	5.04	
			120221130021	07	001-000-110	GROUP HEALTH -GAP/GG	185.65	
			120221130022	01	001-000-110	OFFICE/CLERICAL	119.29	
			120221130022	02	001-000-110	ELECTION COMMISSION	9735.00	
			120221130022	03	001-000-110	FICA W/H	599.48	
			120221130022	04	001-000-110	MEDICARE WITHOLDING	140.20	
			120221130022	05	001-000-110	GROUP HEALTH - BCBS	37.03	
			120221130022	06	001-000-110	GROUP LIFE INS - EMP	.44	
			120221130022	07	001-000-110	GROUP HEALTH -GAP/GG	16.17	
			120221130023	01	001-000-110	SHERIFF SALARY	7916.66	
			120221130023	02	001-000-110	DEPUTIES	4708.40	
			120221130023	03	001-000-110	OFFICE/CLERICAL	7448.17	
			120221130023	04	001-000-110	OFFICE/CLERICAL OV	652.31	
			120221130023	05	001-000-110	MECHANIC SALARY	2298.09	
			120221130023	06	001-000-110	FICA W/H	1378.53	
			120221130023	07	001-000-110	MEDICARE WITHOLDING	322.39	
			120221130023	08	001-000-110	RETIREMENT W/H	3963.07	
			120221130023	09	001-000-110	GROUP HEALTH - BCBS	5966.35	
			120221130023	10	001-000-110	GROUP LIFE INS - EMP	43.59	
			120221130023	11	001-000-110	GROUP LIFE INS - OFF	6.44	
			120221130023	12	001-000-110	GROUP HEALTH -GAP/GG	1856.50	
			120221130024	01	001-000-110	MTC TRANSPORT OFPI	485.82	
			120221130024	02	001-000-110	FICA W/H	30.12	
			120221130024	03	001-000-110	MEDICARE WITHOLDING	7.04	
			120221130024	04	001-000-110	RETIREMENT W/H	84.53	
			120221130027	01	001-000-110	JAIL ADMINISTRATOR	2008.13	
			120221130027	02	001-000-110	JAIL RECORDS CLERK	1626.32	
			120221130027	03	001-000-110	JAILORS SALARIES	14508.89	
			120221130027	04	001-000-110	KITCHEN MANAGER	1958.33	
			120221130027	05	001-000-110	JAILORS OVERTIME	5343.06	
			120221130027	06	001-000-110	FICA W/H	151.79	
			120221130027	07	001-000-110	MEDICARE WITHOLDING	358.25	
			120221130027	08	001-000-110	RETIREMENT W/H	4427.38	
			120221130027	09	001-000-110	GROUP HEALTH - BCBS	6175.33	
			120221130027	10	001-000-110	GROUP LIFE INS - EMP	251.17	
			120221130027	11	001-000-110	GROUP HEALTH -GAP/GG	2232.84	
			120221130029	01	001-000-110	DEP EMA DIRECTOR S	218.88	
			120221130029	02	001-000-110	GRANT COORDINATOR	605.50	
			120221130029	03	001-000-110	FICA W/H	50.51	
			120221130029	04	001-000-110	MEDICARE WITHOLDING	11.81	
			120221130029	05	001-000-110	RETIREMENT W/H	38.09	
			120221130030	01	001-000-110	CONSTABLE FEES	5740.00	
			120221130030	02	001-000-110	FICA W/H	375.32	

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BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	CHECK DATE	VENDOR NAME	INVOICE NUMBER	LINE #	ACCOUNT NUMBER	DESCRIPTION	AMOUNT	CHECK AMOUNT
120221130030			120221130030	03	001-000-110	MEDICARE WITHOLDING	87.77	
120221130030			120221130030	04	001-000-110	RETIREMENT W/H	1064.01	
120221130030			120221130030	05	001-000-110	GROUP LIFE INS - OFP	3.22	
120221130030			120221130030	06	001-000-110	GROUP MEDI-SUPPL	238.86	
120221130030			120221130030	07	001-000-110	GROUP MEDI-PART B	170.10	
120221130030			120221130030	08	001-000-110	GROUP MEDI-PART D	13.00	
120221130036			120221130036	01	097-000-110	911 DIRECTOR SALAR	643.75	
120221130036			120221130036	02	097-000-110	DISPATCHERS	8552.60	
120221130036			120221130036	03	097-000-110	DISPATCHER O/T	1796.36	
120221130036			120221130036	04	097-000-110	FICA W/H	642.47	
120221130036			120221130036	05	097-000-110	MEDICARE WITHOLDING	150.25	
120221130036			120221130036	06	097-000-110	RETIREMENT W/H	1855.26	
120221130036			120221130036	07	097-000-110	GROUP HEALTH - BCBS	3848.46	
120221130036			120221130036	08	097-000-110	GROUP LIFE INS - EMP	35.28	
120221130036			120221130036	09	097-000-110	GROUP HEALTH -GAP/GG	1299.55	
120221130037			120221130037	01	104-000-110	LAW LIBRARY- ADMIN	136.22	
120221130037			120221130037	02	104-000-110	FICA W/H	8.10	
120221130037			120221130037	03	104-000-110	MEDICARE WITHOLDING	1.89	
120221130037			120221130037	04	104-000-110	RETIREMENT W/H	23.70	
120221130042			120221130042	01	114-000-110	COORDINATOR/VOL.FI	500.00	
120221130042			120221130042	02	114-000-110	FICA W/H	31.00	
120221130042			120221130042	03	114-000-110	MEDICARE WITHOLDING	7.25	
120221130042			120221130042	04	114-000-110	RETIREMENT W/H	23.70	
120221130049			120221130049	01	161-000-110	ROAD LABORERS-HOUR	2185.25	
120221130049			120221130049	02	161-000-110	FICA W/H	132.28	
120221130049			120221130049	03	161-000-110	MEDICARE WITHOLDING	30.94	
120221130049			120221130049	04	161-000-110	RETIREMENT W/H	380.24	
120221130049			120221130049	05	161-000-110	GROUP HEALTH - BCBS	1546.36	
120221130049			120221130049	06	161-000-110	GROUP LIFE INS - EMP	10.08	
120221130049			120221130049	07	161-000-110	GROUP HEALTH -GAP/GG	371.30	
120221130050			120221130050	01	162-000-110	ROAD LABORERS- HOU	2587.36	
120221130050			120221130050	02	162-000-110	FICA W/H	156.27	
120221130050			120221130050	03	162-000-110	MEDICARE WITHOLDING	36.54	
120221130050			120221130050	04	162-000-110	RETIREMENT W/H	450.20	
120221130050			120221130050	05	162-000-110	GROUP HEALTH - BCBS	850.22	
120221130050			120221130050	06	162-000-110	GROUP LIFE INS - EMP	10.08	
120221130050			120221130050	07	162-000-110	GROUP HEALTH -GAP/GG	742.60	
120221130051			120221130051	01	163-000-110	ROAD LABORERS- HOU	5466.32	
120221130051			120221130051	02	163-000-110	FICA W/H	330.89	
120221130051			120221130051	03	163-000-110	MEDICARE WITHOLDING	77.39	
120221130051			120221130051	04	163-000-110	RETIREMENT W/H	766.86	
120221130051			120221130051	05	163-000-110	GROUP HEALTH - BCBS	850.22	
120221130051			120221130051	06	163-000-110	GROUP LIFE INS - EMP	10.08	
120221130051			120221130051	07	163-000-110	GROUP HEALTH -GAP/GG	371.30	
120221130052			120221130052	01	164-000-110	ROAD LABORERS- HOU	1483.20	
120221130052			120221130052	02	164-000-110	FICA W/H	91.68	
120221130052			120221130052	03	164-000-110	MEDICARE WITHOLDING	21.44	
120221130052			120221130052	04	164-000-110	RETIREMENT W/H	258.08	
120221130052			120221130052	05	164-000-110	GROUP HEALTH - BCBS	425.11	
120221130052			120221130052	06	164-000-110	GROUP LIFE INS - EMP	5.04	
120221130052			120221130052	07	164-000-110	GROUP HEALTH -GAP/GG	185.65	

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CLAY COUNTY
 CASH DISBURSEMENTS REPORT
 FOR THE PERIOD NOVEMBER 11, 2022 TO NOVEMBER 30, 2022

BANK: BS BANCORP SOUTH GENERAL COUNTY

CHECK NUMBER	DATE	VENDOR NAME	INVOICE NUMBER	LINE #	NUMBER	ACCOUNT DESCRIPTION	AMOUNT	CHECK AMOUNT
			120221130053	01	165-000-110	ROAD LABORERS- HOU	3537.46	
			120221130053	02	165-000-110	FICA W/H	219.32	
			120221130053	03	165-000-110	MEDICARE WITHOLDING	51.29	
			120221130053	04	165-000-110	RETIREMENT W/H	338.08	
			120221130053	05	165-000-110	GROUP HEALTH - BCBS	425.11	
			120221130053	06	165-000-110	GROUP LIFE INS - EMP	5.04	
			120221130053	07	165-000-110	GROUP HEALTH -GAP/GG	185.65	
			120221130056	01	400-000-110	SANITATION SALARY	6540.83	
			120221130056	02	400-000-110	FICA W/H	397.94	
			120221130056	03	400-000-110	MEDICARE WITHOLDING	93.06	
			120221130056	04	400-000-110	RETIREMENT W/H	1060.45	
			120221130056	05	400-000-110	GROUP HEALTH - BCBS	1369.81	
			120221130056	06	400-000-110	GROUP LIFE INS - EMP	15.12	
			120221130056	07	400-000-110	GROUP HEALTH -GAP/GG	556.95	
** CHECK TOTAL FOR BANK: BANCORP SOUTH GENERAL COUNTY							313928.72	
** TOTAL DISBURSEMENTS **							585162.67	
							590286.09	

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