

**Minutes of  
Clay County Board of Supervisors  
Regular Meeting  
Monday, April 5, 2021 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 Monday, April 5, 2021 at 9:00 a.m.

**PRESENT:**

Lynn Horton, Supervisor District 1  
Luke Lummus, Supervisor District 2  
Shelton Deanes, Supervisor, District 4, Presiding  
Joe Chandler, Supervisor District 5

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

County Residents

The following proceedings were had:

**CALL TO ORDER/INVOCATION**

The meeting was called to order by Clay County Sheriff Eddie Scott. The welcome was given by Supervisor Deanes with invocation given by Supervisor Luke Lummus.

**ADOPTION OF AGENDA**

Supervisor Lummus moved to adopt the agenda as presented.

The motion was seconded by Supervisor Chandler.

(Exhibit "A")

**AMENDMENT OF AGENDA**

Supervisor Chandler moved to amend the agenda as presented.

The motion was seconded by Supervisor Lummus.

**THE FOLLOWING ITEMS WERE REQUESTED TO BE AMENDED AND ADDED TO THE AGENDA FOR FURTHER DISCUSSION AND CONSIDERATION BY THE BOARD:**



- Authorize and approve to go into executive session to discuss a personnel matter as allowed under Section 25-41-7 of the *Mississippi Code of 1972*

**AUTHORIZE AND APPROVE THE CLAIMS DOCKET FOR THE MONTH OF APRIL 2021**

Supervisor Horton moved to authorize and approve the claims docket for payment for the month of April 2021.

The motion was seconded by Supervisor Chandler.

(Exhibit "B")

**AUTHORIZE AND APPROVE PAYMENT TO RANDY JONES, COUNTY FLOOD PLAIN COORDINATOR, FOR SERVICES RENDERED FOR THE MONTH OF APRIL 2021**

Supervisor Lummus moved to authorize and approve payment to Randy Jones, County Flood Coordinator, for services rendered for the month of April 2021.

The motion was seconded by Supervisor Horton.

(Exhibit "C")

**AUTHORIZE AND APPROVE TO SUBMIT THREE INFRASTRUCTURE PROJECTS TO THE CONGRESSIONAL DELEGATION COMMISSION TO BE CONSIDERED FOR FEDERAL FUNDING**

Supervisor Lummus moved to authorize and approve to submit three infrastructure projects to the Congressional District to be considered for federal funding with stimulus funds.

The motion was seconded by Supervisor Horton.

(Exhibit "D")

**AUTHORIZE AND APPROVE THE OBLIGATION DOCUMENTS AS RECEIVED FROM USDA ON THE PURCHASE OF THE BACKHOE FOR DISTRICT ONE**

Supervisor Horton moved to authorize and approve the obligation documents as received from USDA on the purchase of the backhoe for District One.

The motion was seconded by Supervisor Lummus.

(Exhibit "E")

**AUTHORIZE AND APPROVE OF THE RESOLUTION APPROVING THE GOLDEN TRIANGLE PLANNING AND DEVELOPMENT DISTRICT TO PREPARE THE MULTI-**

MODAL GRANT APPLICATION FOR THE CLAY COUNTY PORT FOR THE PURCHASE OF MATERIAL HANDLING EQUIPMENT

Supervisor Lummus moved to authorize and approve of the Resolution approving the Golden Triangle Planning and Development District to prepare the Multi-modal Grant Application for the Clay County Port for the purchase of material handling equipment.

The motion was seconded by Supervisor Horton.

(Exhibit "F")

AUTHORIZE AND APPROVE OF THE DISHWASHING MACHINE RENTAL AGREEMENT WITH AUTO-CHLOR SYSTEM

Supervisor Lummus moved to authorize and approve of the Dishwashing Machine Rental Agreement with Auto-Chlor System for \$210.00 per month.

The motion was seconded by Supervisor Horton.

(Exhibit "G")

AUTHORIZE AND APPROVE THE SHERIFF TO APPLY FOR LOCAL LAW ENFORCEMENT GRANT I8LB1131 FOR \$5,947.00

Supervisor Lummus moved for the Sheriff's Department to apply for the Local Law Enforcement Grant I8LB1131 in the amount of \$5,947.00 for the purchase of duty boots and dress boots.

The motion was seconded by Supervisor Lummus.

(Exhibit "H")

AUTHORIZE AND APPROVE OF THE FUNDING AGREEMENTS FOR HB1730 FOR DISTRICTS ONE AND FOUR

Supervisor Lummus moved to authorize and approve of the funding agreements for HB1730 for Districts one and four.

The motion was seconded by Supervisor Lummus.

(Exhibit "I")

AUTHORIZE AND APPROVE APPLYING FOR THE THREE RIVERS GRANT FOR TWO POSITIONS

Supervisor Lummus moved to authorize and approve applying for the Three Rivers Grant for two positions.

The motion was seconded by Supervisors Horton.

(Exhibit "J")

**AUTHORIZE AND APPROVE THE HOMESTEAD EXEMPTION DISALLOWANCES AS CERTIFIED BY THE MS DEPARTMENT OF REVENUE FOR YEAR 2021**

Supervisor Lummus moved to authorize and approve the Homestead Exemption Disallowances as certified by the MS Department of Revenue for Year 2021.

The motion was seconded by Supervisor Horton.

(Exhibit "K")

**AUTHORIZE AND APPROVE TO GO INTO CLOSED SESSION**

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

The motion was seconded by Supervisor Horton.

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

Supervisor Lummus moved to go from Closed Session to Executive Session to discuss a Potential Litigation Matter and a Personnel Matter as allowed under Section 25-41-7, of *the Mississippi Code of 1972*.

The motion was seconded by Supervisor Horton.

**AUTHORIZE AND APPROVE TO COME OUT OF EXECUTIVE SESSION**

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

The motion was seconded by Supervisor Horton.

**AUTHORIZE AND APPROVE TO HIRE JIMMY MCKEE TO CLEAN THE VOTING PRECINCTS AFTER WEEKEND RENTALS**

Supervisor Lummus moved to authorize and approve to hire Jimmy McKee to work with the Chancery Clerk's office in ensuring the Voting Precincts are cleaned after weekend rentals and for him to be paid at the current rate of pay for the said position

The motion was seconded by Supervisor Horton.

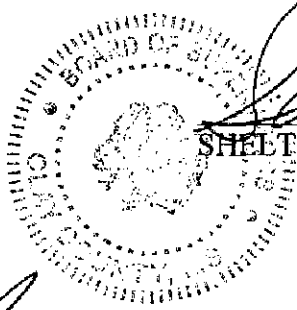
RECESSING

Supervisor Lummus moved to adjourn until Thursday, April 8, 2021 at 9:00 a.m. at the Clay County Courthouse.

The motion was seconded by Supervisor Horton.

ALL MOTIONS CARRIED UNANIMOUSLY UNLESS OTHERWISE INDICATED

SO ORDERED, this the 5<sup>th</sup> day of April, 2021



*Shelton L. Deanes*  
SHELTON L. DEANES, PRESIDENT

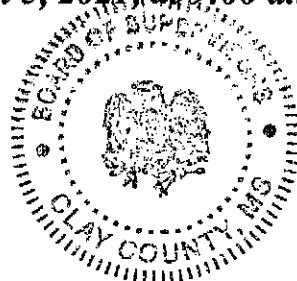
ATTEST:

*Amy G. Berry*  
AMY G. BERRY, CHANCERY CLERK  
CLERK OF THE BOARD

# EXHIBIT A



**Clay County Board of Supervisors  
Agenda for Meeting  
Monday, April 5, 2021, at 9:00 a.m.**



- Call to Order
- Welcome and Prayer
- Adopt and Amend Agenda
- Authorize and approve for payment the Claims Docket for April 2021
- Authorize and approve for payment to the Flood Plain Coordinator, Randy Jones, \$ \_\_\_\_\_ for services rendered in the month of March 2021
- ✍ Robert Calvert, *Calvert Spradling Engineer & County Engineer*
  - Authority to submit three infrastructure projects to Congressional Delegation for Funding
- ✍ Jon Tyler Ackers, *AFLAC & Colonial Life Agent*
  - Contact Information
- Phyllis Benson, *Golden Triangle Planning & Development District*
  - Authorize and approve the obligating documents with USDA for the purchase of the Backhoe for District One
  - Authorize and approve the submission of the multi-modal grant for the Clay County Port
  - Authorize and approve to rescind the submission of the grant application for the Siloam Water Association
- Eddie Scott, *Sheriff*
  - Authorize and approve to renew the Dishwashing Machine Agreement with Auto-Chlor
  - Authorize and approve to execute all the grant paperwork on the Local Law Enforcement Grant, 18LB1131, in the amount of \$5,947.00
- ✍ Amy Berry, *Chancery Clerk*
  - Authorize and approve to spread on the minutes the funding agreement for both the Una Recreation Center and District One Road Monies to be received from the HB 1730, 2020 Regular Session Funding
- M-2  
S-1 ○ Received Notice from the Three Rivers Planning and Development District of (2) more participants under the National Dislocated Worker Grant
- Authorize and approve of the Homestead Exemption Disallowances as received from the MS Department of Revenue for year 2020
- Authorize and approve to go into Executive Session as allowed under Section 25-41-7 of the *Mississippi Code* to discuss a potential litigation matter
- Recess until *Thursday, April 8, 2021, at 9:00 a.m.*

**Amendments**

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# EXHIBIT B

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CLAIM #	VENDOR NAME	AMOUNT
4340	SOUTHERN TELECOMMUNICATIONS	40.89
4341	MISS. ASSOC. OF SUPERVISORS	300.00
4342	JT RAY COMPANY	149.00
4343	JT RAY COMPANY	84.00
4344	SUSAN ALFORD	34.80
4345	CASH & CARRY CLEANERS	20.00
4346	CASH & CARRY CLEANERS	15.00
4347	CASH & CARRY CLEANERS	30.00
4348	BROOKS-JEFFREY MARKETING INC.	300.00
4349	MISS SHERIFF'S ASSOCIATION	1000.00
4350	DIVERSIFIED COMPANIES, LLC	228.30
4351	DIVERSIFIED COMPANIES, LLC	935.09
4352	DIXIE NET	215.00
4354	SUNFLOWER STORE	18.36
4355	CARROT-TOP INDUSTRIES INC.	151.73
4356	PRO-VISION, INC.	1396.00
4357	SIRCHIE ACQUISITION COMPANY LL	89.70
4358	COPYWRITE, INC	169.00
4359	WALMART COMMUNITY BRC	67.62
4360	SUNFLOWER STORE	100.00
4361	WALMART COMMUNITY BRC	18.88
4362	QUILL CORPORATION	159.35
4367	QUILL CORPORATION	186.33
4368	SAFEGUARD BUSINESS SYSTEMS	268.00
4369	QUILL CORPORATION	131.97
4370	CDW GOVERNMENT INC.	145.10
4371	SHI	1507.74
4372	PHILLIP'S HARDWARE	399.98
4374	REFRIGERATION SUPPLY COMPANY	396.82
4375	REFRIGERATION SUPPLY COMPANY	126.64
4376	COLUMBUS FENCE CO.	150.00
4377	KELLOGG HARDWARE & APPLIANCE	7.50
4378	LANN CHEMICAL	342.40
4379	COAST TO COAST COMPUTER	1709.85
4380	MID-SOUTH UNIFORMS	1165.60
4381	METAL CRAFT ID PLATES & LABELS	241.51
4382	DELUXE BUSINESS CHECKS	122.43
4383	QUILL CORPORATION	29.99
4384	CANNON CHRYSLER DODGE JEEP	352.96
4385	GARY'S PAWN & GUN SHOP	69.16
4386	GEORGE'S TIRE SERVICE	532.00
4387	GEORGE'S TIRE SERVICE	306.00
4388	GEORGE'S TIRE SERVICE	772.00
4389	SYSCO FOOD SERVICES, INC.	687.16
4390	BEN E. KEITH COMPANY	1497.68

4391 WOOD FRUITTICHER GROCERY CO	1109.07
4392 US FOOD SERVICE	1934.80
4393 VISTAR CORPORATION	1631.66
4394 MERCHANT CO.	1159.78
4405 FUELMAN	40.74

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CLAIM #	VENDOR NAME	AMOUNT
4406	FUELMAN	1472.88
4415	ROSE DRUG COMPANY	826.81
4416	SOUTHERN TELECOMMUNICATIONS	559.09
4417	SECURITY SOLUTIONS, LLC	276.00
4418	CASH & CARRY CLEANERS	30.00
4419	CASH & CARRY CLEANERS	20.00
4420	CASH & CARRY CLEANERS	15.00
4421	CLAY COUNTY MEDICAL CENTER	188.57
4422	CLAY COUNTY MEDICAL CENTER	75.45
4423	CLAY COUNTY MEDICAL CENTER	241.37
4424	CLAY COUNTY MEDICAL CENTER	74.48
4425	CLAY COUNTY MEDICAL CENTER	141.92
4426	CLAY COUNTY MEDICAL CENTER	144.08
4430	FUELMAN	1413.08
4431	AMY G. BERRY - FEES	1020.00
4432	AMY G. BERRY - FEES	26.00
4433	AMY G. BERRY - FEES	26.00
4434	AUTO-CHLOR SYSTEMS	216.95
4435	COBURN INSURANCE AGENCY, INC.	892.50
4436	GUEST BODY SHOP, LLC	75.00
4437	CITY OF WEST POINT	8178.92
4438	CITY OF WEST POINT	23.99
4439	CITY OF WEST POINT	1582.69
4440	CITY OF WEST POINT	361.76
4441	WEST POINT SCHOOLS	38897.99
4442	WEST POINT SCHOOLS	994.85
4443	WEST POINT SCHOOLS	4352.41
4444	WEST POINT SCHOOLS	66.00
4445	WAUKAWAY DISTRIBUTORS INC.	24.60
4446	CASH & CARRY CLEANERS	20.00
4447	CASH & CARRY CLEANERS	15.00
4448	CASH & CARRY CLEANERS	30.00
4449	AIRGAS SOUTH	186.72
4450	R J YOUNG COMPANY	106.77
4451	GUEST BODY SHOP, LLC	125.00
4452	DELTA COMPUTER SYSTEMS, INC	80.00
4453	DELTA COMPUTER SYSTEMS, INC	764.00
4454	DATA SYSTEMS MANAGEMENT, INC	4191.50
4455	BIGHAM TRUCKING	300.00
4456	CLARISSA N. HARRIS	350.00

4457 H. SCOTT ROSS	350.00
4458 AMY G. BERRY - FEES	156.00
4478 QUILL CORPORATION	14.59
4479 QUILL CORPORATION	56.97
4489 MELISSA GRIMES	40.32
4518 CENTRAL RESTAURANT PRODUCTS	383.57
4519 MS DEPARTMENT OF REVENUE	14.75
4521 QUILL CORPORATION	178.57
4522 JIM'S AUTO PARTS, WEST POINT	391.73
4523 DELUXE BUSINESS CHECKS	271.69
4524 COMCAST CABLE	152.13
4527 KRISTEN WOOD WILLIAMS, PLLC	450.00

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CLAIM #	VENDOR NAME	AMOUNT
4528	TACTICALGEAR.COM	357.00
4529	GUEST BODY SHOP, LLC	500.00
4530	QUILL CORPORATION	20.15
4531	QUILL CORPORATION	327.76
4532	THE POLICE & SHERIFF'S PRESS	108.21
4533	NATIONAL SHERIFFS' ASSOC.	135.00
4534	LOWE'S HOME CENTER, INC.	1971.40
4535	QUILL CORPORATION	413.97
4536	SUNFLOWER STORE	100.00
4537	ALLIANCE HEALTH CENTER	740.00
4538	MEDICAL DIST. GROUP, INC.	226.30
4539	MEDICAL DIST. GROUP, INC.	287.00
4540	PHILLIP'S HARDWARE	2438.35
4541	C SPIRE WIRELESS	102.88
4542	C SPIRE WIRELESS	43.15
4545	CITY WATER & LIGHT DEPT.	484.25
4546	CITY WATER & LIGHT DEPT.	47.58
4547	GOLDEN TRIANGLE WATER	32.50
4548	CARDMEMBER SERVICE	589.78
4549	CARDMEMBER SERVICE	238.00
4550	S.E. CHICKASAW WATER ASSOC.	20.00
4554	ALLEN, ALLEN, BREELAND & ALLEN	7393.05
4555	AMY G. BERRY - FEES	156.00
4556	AMY G. BERRY - FEES	156.00
4557	TIM DOSS	23.52
4558	TOTAL LAWN CARE	395.00
4559	TOTAL LAWN CARE	480.00
4561	TOTAL LAWN CARE	40.00
4562	TOTAL LAWN CARE	100.00
4564	FUELMAN	23.24
4565	FUELMAN	1349.71
4566	LANN CHEMICAL	90.30
4567	ALLMOND PRINTING	46.00

4568 ALLMOND PRINTING	225.00
4569 ALLMOND PRINTING	564.00
4570 ALLMOND PRINTING	320.00
4571 ALLMOND PRINTING	625.00
4572 CARRIE KIMBROUGH	57.12
4573 FOUR-COUNTY ELEC POWER ASSN	73.00
4574 FOUR-COUNTY ELEC POWER ASSN	99.00
4575 FOUR-COUNTY ELEC POWER ASSN	35.00
4576 FOUR-COUNTY ELEC POWER ASSN	80.00
4577 FOUR-COUNTY ELEC POWER ASSN	54.00
4578 FOUR-COUNTY ELEC POWER ASSN	34.00
4580 LANN CHEMICAL	34.40
4581 ITC DELTACOM, INC	1050.21
4586 CASH & CARRY CLEANERS	15.00
4587 CASH & CARRY CLEANERS	20.00
4588 QUILL CORPORATION	13.79
4589 QUILL CORPORATION	27.58
4590 QUILL CORPORATION	14.99-
4591 QUILL CORPORATION	264.92

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CLAIM #	VENDOR NAME	AMOUNT
4592	QUILL CORPORATION	9.69
4593	AMY G. BERRY - FEES	156.00
4595	A-1 CLEANING SERVICE	1500.00
4596	NORTH MS GROUND AMBULANCE LLC	355.67
4598	ALLIANCE HEALTH CENTER	405.00
4599	C SPIRE WIRELESS	702.56
4600	LANN CHEMICAL	275.20
4601	CDW GOVERNMENT INC.	438.91
4608	CASH & CARRY CLEANERS	30.00
4619	SECURITY SOLUTIONS, LLC	276.00
4623	RELIAS ER MED SPEC WEST POINT	61.09
4624	RELIAS ER MED SPEC WEST POINT	156.41
4625	RELIAS ER MED SPEC WEST POINT	217.50
4626	CLAY COUNTY MEDICAL CENTER	75.45
4627	CLAY COUNTY MEDICAL CENTER	241.37
4628	CLAY COUNTY MEDICAL CENTER	141.92
4629	CLAY COUNTY MEDICAL CENTER	239.96
4630	CLAY COUNTY MEDICAL CENTER	75.06
4631	EDMUND MILLER, JR, MD	500.00
4632	MISSISSIPPI VITAL RECORDS	82.00
4633	MISSISSIPPI VITAL RECORDS	57.00
4634	FRANKLIN TELEPHONE COMPANY	2752.65
4655	REGIONS BANK	1988.75
4656	RWJ CONSULTING, LLC	1009.87
4657	COMCAST CABLE	149.64
4658	COMCAST CABLE	219.69

4659	FOUR-COUNTY ELEC POWER ASSN	248.00
4660	FOUR-COUNTY ELEC POWER ASSN	52.00
4661	FOUR-COUNTY ELEC POWER ASSN	36.00
4662	FOUR-COUNTY ELEC POWER ASSN	82.00
4663	FOUR-COUNTY ELEC POWER ASSN	34.00
4664	FOUR-COUNTY ELEC POWER ASSN	46.00
4665	FOUR-COUNTY ELEC POWER ASSN	47.00
4666	FOUR-COUNTY ELEC POWER ASSN	51.00
4668	FOUR-COUNTY ELEC POWER ASSN	51.00
4669	FOUR-COUNTY ELEC POWER ASSN	51.00
4670	COMMUNITY COUNSELING	375.00
4676	SILOAM WATER DISTRICT	25.00
4677	SILOAM WATER DISTRICT	25.00
4678	SILOAM WATER DISTRICT	25.00
4681	ORKIN- TUPELO, MS	91.00
4682	ORKIN- TUPELO, MS	45.00
4683	ORKIN- TUPELO, MS	100.00
4684	ORKIN- TUPELO, MS	57.50
4685	ORKIN- TUPELO, MS	61.00
4686	ORKIN- TUPELO, MS	84.00
4687	CITY WATER & LIGHT DEPT.	133.92
4688	CITY WATER & LIGHT DEPT.	6907.94
4689	CITY WATER & LIGHT DEPT.	1639.23
4690	CITY WATER & LIGHT DEPT.	770.63
4691	CITY WATER & LIGHT DEPT.	586.33
4692	CITY WATER & LIGHT DEPT.	699.32

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CLAIM #	VENDOR NAME	AMOUNT
4693	CITY WATER & LIGHT DEPT.	1628.77
4694	ATMOS ENERGY	41.64
4695	ATMOS ENERGY	136.13
4696	ATMOS ENERGY	119.46
4697	ATMOS ENERGY	406.64
4698	QUILL CORPORATION	274.95
4702	BANCORP SOUTH	4347.01
4704	QUILL CORPORATION	6.36
4705	QUILL CORPORATION	67.37
4706	QUILL CORPORATION	56.97
4709	QUILL CORPORATION	5.39-
4710	QUILL CORPORATION	70.36-
4711	QUILL CORPORATION	17.59-
4712	QUILL CORPORATION	74.70-
4714	ADMINISTRATIVE OFFICE OF COURT	7559.13
4837	OFFICE SUPPLY HUT	106.24
4838	OFFICE SUPPLY HUT	237.99
4839	ALLMOND PRINTING	45.00
4840	CITY OF COLUMBUS	240.00

4848	TEC	39.95
4850	CASH & CARRY CLEANERS	15.00
4851	CASH & CARRY CLEANERS	20.00
4852	CASH & CARRY CLEANERS	30.00
4854	ADAPTS ELECTRONIC MONITORING	225.50
4855	LEXIS NEXIS RISK DATA MNGTMENT	404.46
4857	FUELMAN	40.69
4858	FUELMAN	1501.05
4859	AT & T	1048.65
4860	MS INDUSTRIAL WASTE DISPOSAL	90.00
4861	MS INDUSTRIAL WASTE DISPOSAL	90.00
4862	KELCO SUPPLY CO.	1038.00
4864	WAUKAWAY DISTRIBUTORS INC.	24.60
4865	COMCAST CABLE	554.77
4866	DAYLIGHT DONUT	38.57
4867	LANN CHEMICAL	253.00
4868	LANN CHEMICAL	644.25
4869	MELISSA GRIMES	40.32
4871	COMCAST CABLE	189.64
4872	CDW GOVERNMENT INC.	1162.19
4873	NORTH MS MEDICAL CENTER	5.11
4877	MS JUSTICE COURT CLERKS ASSOC	250.00
4879	EXTENSION CENTER FOR GOVT.&	50.00
4881	LAW OFFICE OF ROBIN L. BROWN	4105.00
4882	STEVE MOORE CONSTRUCTION	2500.00
4883	QUILL CORPORATION	2024.97
4884	QUILL CORPORATION	19.38
4885	QUILL CORPORATION	79.99
4886	QUILL CORPORATION	358.77
4887	QUILL CORPORATION	15.38
4889	LEE COUNTY JUVENILE CENTER	1950.00
4890	ATMOS ENERGY	62.78
4891	MARLIN M STEWART III	750.00

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CLAIM #	VENDOR NAME	AMOUNT
4892	MARLIN M STEWART III	975.00
4893	MARLIN M STEWART III	825.00
4894	MARLIN M STEWART III	600.00
4895	ALLIANCE HEALTH CENTER	5850.00
4896	ALLIANCE HEALTH CENTER	590.00
4908	LOCAL GOVERNMENT RECORDS OFFIC	54.00
4909	TANYA WEST	500.00
4910	CLAY CO.DEPT./SOCIAL SERVICES	316.67
4911	DISTRICT ATTORNEY'S OFFICE	175.00
4912	GOLDEN TRIANGLE AREA	2583.33
4913	INSURANCE CLEARING ACCOUNT	1329.79
4914	HEALTH DEPT. OF CLAY COUNTY	3791.67

4915 M & L BUILDING, LLC	400.00	VOIDED	
4916 COMMUNITY COUNSELLING SERVICE	2000.00		
4917 NATIONAL GUARD OF MISSISSIPPI	200.00		
4918 RESERVE ACCOUNT	2000.00		
4919 CLAY COUNTY SWCD OFFICE	800.00		
4920 UNITED POSTAL SERVICE	625.00		
4921 VICTIM WITNESS PROGRAM	1632.89		
4922 VICTIM WITNESS PROGRAM	443.70		
4923 GOLDEN TRIANGLE DEVELOPMENT	87500.00		
4924 MISSISSIPPI PUBLIC ENTITY	15684.25		
*** FUND TOTALS *** 001 GENERAL COUNTY			304053.62
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CLAIM # VENDOR NAME	AMOUNT		
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4544 COMCAST CABLE	99.00		
4597 EDGAR ROWAN BULLOCK	750.00		
4849 COMCAST CABLE	106.44		
*** FUND TOTALS *** 040 SHERIFF'S INMATE CANTEEN			955.44
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CLAIM # VENDOR NAME	AMOUNT		
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4897 TOMBIGBEE REGIONAL LIBRARY	9625.59		
*** FUND TOTALS *** 095 SPECIAL LIBRARY LEVY			9625.59
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CLAIM # VENDOR NAME	AMOUNT		
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4339 SOUTHERN TELECOMMUNICATIONS	272.59		
4594 BELLSOUTH / ATT	3466.00		
4680 AT&T	107.00		
4701 HANCOCK BANK	2866.94		
4703 BANCORP SOUTH	3013.85		
4707 ECONO SIGNS OF TUPELO	36.00		
4708 ECONO SIGNS OF TUPELO	48.00		
4713 XEROX CORPORATION	23.56		
4847 TEC	3.25		
*** FUND TOTALS *** 097 E911 FUND			9837.19
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CLAIM # VENDOR NAME	AMOUNT		
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4508 LONNIE DAVIDSON	100.00		
4543 C SPIRE WIRELESS	28.20		
4560 TOTAL LAWN CARE	70.00		



4700 MS DEVELOPMENT AUTHORITY 2497.54  
 \*\*\* FUND TOTALS \*\*\* 114 VOLUNTEER FIRE DEPARTMENT  
 7/28/2021 CLAY COUNTY  
 10:55:52 CLAIMS SUMMARY FOR: 4/2021  
 FOR THE PERIOD ENDED APRIL 05, 2021  
 CLAIM # VENDOR NAME AMOUNT

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4699 MS DEVELOPMENT AUTHORITY 2993.38  
 \*\*\* FUND TOTALS \*\*\* 116 INSURANCE REBATE MONIES  
 7/28/2021 CLAY COUNTY  
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 FOR THE PERIOD ENDED APRIL 05, 2021  
 CLAIM # VENDOR NAME AMOUNT

2993.38  
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4461 GEORGE'S TIRE SERVICE 20.40  
 4466 CLAY COUNTY CO-OP 2.00  
 4467 JIM'S AUTO PARTS, WEST POINT 18.99  
 4470 CARQUEST AUTO PARTS, INC. 21.95  
 4471 CARQUEST AUTO PARTS, INC. 6.29  
 4473 CARQUEST AUTO PARTS, INC. 58.99  
 4475 CARQUEST AUTO PARTS, INC. 54.99  
 4477 CARQUEST AUTO PARTS, INC. 5.18

\*\*\* FUND TOTALS \*\*\* 151 DISTRICT 1 ROAD  
 7/28/2021 CLAY COUNTY  
 10:55:52 CLAIMS SUMMARY FOR: 4/2021  
 FOR THE PERIOD ENDED APRIL 05, 2021  
 CLAIM # VENDOR NAME AMOUNT

188.79  
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4396 BACCO MATERIALS, INC. 480.67  
 4397 BACCO MATERIALS, INC. 877.72  
 4398 JIM'S AUTO PARTS, WEST POINT 45.96  
 4399 JIM'S AUTO PARTS, WEST POINT 13.97  
 4400 JIM'S AUTO PARTS, WEST POINT 2.99  
 4401 JIM'S TIRE COMPANY 45.00  
 4403 CARQUEST AUTO PARTS, INC. 70.00  
 4427 COLUMBUS WHOLESALE TIRE 376.64  
 4551 JIM'S AUTO PARTS, WEST POINT 6.99  
 4552 JIM'S AUTO PARTS, WEST POINT 68.48  
 4602 C SPIRE WIRELESS 27.95  
 4603 CITY WATER & LIGHT DEPT. 35.00  
 4604 GOLDEN TRIANGLE WATER 61.38  
 4606 HENRY BACKHOE & DIRT SERVICE 300.00  
 4607 MS INDUSTRIAL WASTE DISPOSAL 106.08  
 4620 GEORGE'S TIRE SERVICE 113.00  
 4843 FOUR-COUNTY ELEC POWER ASSN 52.60  
 4844 FOUR-COUNTY ELEC POWER ASSN 255.00

\*\*\* FUND TOTALS \*\*\* 152 DISTRICT 2 ROAD  
 7/28/2021 CLAY COUNTY  
 10:55:52 CLAIMS SUMMARY FOR: 4/2021  
 FOR THE PERIOD ENDED APRIL 05, 2021

2939.43  
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CLAIM #	VENDOR NAME	AMOUNT
4428	HENRY BACKHOE & DIRT SERVICE	250.00
4485	THOMPSON MACHINERY	184.38
4486	G & O SUPPLY CO, INC	577.50
4487	COLD MIX, INC.	520.30
4585	HENRY BACKHOE & DIRT SERVICE	200.00
4810	BACCO MATERIALS, INC.	1968.05
4811	BACCO MATERIALS, INC.	734.57
4812	BACCO MATERIALS, INC.	1221.29
4813	CLAY COUNTY CO-OP	390.00
4814	TERRY'S GARAGE AND REPAIR	42.88
4815	45 TRUCK AND TRAILER REPAIR	773.22
4816	C SPIRE WIRELESS	47.15
4817	GEORGE'S TIRE SERVICE	347.00
4818	GRAY'S TIRE SERVICE	617.61
4819	FOUR-COUNTY ELEC POWER ASSN	52.60
4820	FOUR-COUNTY ELEC POWER ASSN	76.00
4821	GRAY'S TIRE SERVICE	1018.38
4822	CARQUEST AUTO PARTS, INC.	248.43
4823	CARQUEST AUTO PARTS, INC.	184.20
4824	CARQUEST AUTO PARTS, INC.	38.48
4825	CARQUEST AUTO PARTS, INC.	85.96
4826	CARQUEST AUTO PARTS, INC.	227.97
4827	SILOAM WATER DISTRICT	25.00
4880	INGRAMS GARAGE	292.50

\*\*\* FUND TOTALS \*\*\* 153 DISTRICT 3 ROAD

10123.47

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FOR THE PERIOD ENDED APRIL 05, 2021

CLAIM #	VENDOR NAME	AMOUNT
4363	CARQUEST AUTO PARTS, INC.	154.00
4365	KNOX GROCERY LLC	45.19
4493	COLD MIX, INC.	1992.62
4494	COLD MIX, INC.	2098.40
4497	GEORGE'S TIRE SERVICE	346.00
4498	ARAMARK UNIFORM SERVICES INC	25.96
4501	ARAMARK UNIFORM SERVICES INC	25.96
4611	JIM'S AUTO PARTS, WEST POINT	47.99
4612	JIM'S AUTO PARTS, WEST POINT	56.94
4613	C SPIRE WIRELESS	57.10
4614	WALMART COMMUNITY BRC	19.96
4801	ARAMARK UNIFORM SERVICES INC	25.96
4802	HANCOCK BANK	1158.99
4803	FOUR-COUNTY ELEC POWER ASSN	134.00
4804	FOUR-COUNTY ELEC POWER ASSN	38.00
4805	FOUR-COUNTY ELEC POWER ASSN	78.43
4806	SILOAM WATER DISTRICT	25.00
4808	FOUR-COUNTY ELEC POWER ASSN	52.60

4845 AMERIMAC CHEMICAL 233.00

\*\*\* FUND TOTALS \*\*\* 154 DISTRICT 4 ROAD

7/28/2021 CLAY COUNTY

10:55:52 CLAIMS SUMMARY FOR: 4/2021

FOR THE PERIOD ENDED APRIL 05, 2021

CLAIM # VENDOR NAME AMOUNT

CLAIM #	VENDOR NAME	AMOUNT
4480	PHILLIP'S HARDWARE	8.99
4481	PHILLIP'S HARDWARE	18.05
4482	PHILLIP'S HARDWARE	31.99
4483	PHILLIP'S HARDWARE	6.00
4484	PHILLIP'S HARDWARE	22.76
4488	BK EDWARDS FABRICATION &	1184.00
4490	J P'S EQUIPMENT	265.00
4506	JIM'S AUTO PARTS, WEST POINT	47.88
4635	WARREN PAVING	1826.20
4636	WARREN PAVING	2510.22
4637	WARREN PAVING	1212.51
4638	WARREN PAVING	1735.10
4639	WARREN PAVING	1198.30
4640	WARREN PAVING	1821.58
4641	COLD MIX, INC.	1966.82
4643	BACCO MATERIALS, INC.	744.23
4644	BACCO MATERIALS, INC.	735.25
4645	TERRY'S GARAGE AND REPAIR	62.46
4646	TERRY'S GARAGE AND REPAIR	142.24
4647	TERRY'S GARAGE AND REPAIR	100.01
4648	JIM'S AUTO PARTS, WEST POINT	322.33
4649	C SPIRE WIRELESS	40.56
4650	BACCO MATERIALS, INC.	2931.04
4652	WARREN PAVING	1834.48
4653	WARREN PAVING	1154.37
4654	WARREN PAVING	1160.12
4673	CARQUEST AUTO PARTS, INC.	15.98
4674	CARQUEST AUTO PARTS, INC.	7.23
4828	JIM'S AUTO PARTS, WEST POINT	13.38
4829	HANCOCK BANK	1158.98
4831	BACCO MATERIALS, INC.	246.97
4832	COLUMBUS & GREENVILLE RAILWAY	100.00
4833	FOUR-COUNTY ELEC POWER ASSN	52.60
4834	FOUR-COUNTY ELEC POWER ASSN	102.00
4835	TIPTON'S TRUCK REPAIR LLC	798.76
4836	TIPTON'S TRUCK REPAIR LLC	306.15
4846	T & G MOWER PARTS, LLC	275.41
4874	JIM'S AUTO PARTS, WEST POINT	136.99
4876	DONELL BEAN	75.00
4888	SUN CREEK WATER ASSN.	18.75

\*\*\* FUND TOTALS \*\*\* 155 DISTRICT 5 ROAD

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26390.69  
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FOR THE PERIOD ENDED APRIL 05, 2021

CLAIM #	VENDOR NAME	AMOUNT
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4459	TRAILBOSS TRAILERS, INC.	294.50
4460	GOLDEN TRIANGLE TIRE SVC LLC	90.00
4462	PHILLIP'S HARDWARE	17.98
4463	MCBRAYER QUICK LUBE	53.95
4464	PALMER MACHINE WORKS, INC.	24.08
4465	CLAY COUNTY CO-OP	37.75
4468	CARQUEST AUTO PARTS, INC.	299.99
4469	CARQUEST AUTO PARTS, INC.	46.92
4472	CARQUEST AUTO PARTS, INC.	26.99
4474	CARQUEST AUTO PARTS, INC.	67.18
4476	CARQUEST AUTO PARTS, INC.	146.59
4492	SPEEDCO SPEED	489.70
4503	SOUTHERN TELECOMMUNICATIONS	43.57
4504	ARAMARK UNIFORM SERVICES INC	58.99
4505	FUELMAN	310.19
4507	FUELMAN	267.34
4509	ARAMARK UNIFORM SERVICES INC	58.99
4510	THOMPSON MACHINERY	776.74
4511	THOMPSON MACHINERY	8.80
4512	ARAMARK UNIFORM SERVICES INC	58.99
4513	BACCO MATERIALS, INC.	244.82
4520	TIPTON'S TRUCK REPAIR LLC	333.45
4651	YOUNG WELDING SUPPLY, INC	162.69
4748	COLD MIX, INC.	1988.32
4749	WARREN PAVING	284.94
4750	WARREN PAVING	259.95
4751	FOUR-COUNTY ELEC POWER ASSN	107.00
4752	TIPTON'S TRUCK REPAIR LLC	798.77
4753	STRIBLING EQUIPMENT COMPANY	92081.37
4754	SUNFLOWER STORE	7.58
4755	SUNFLOWER STORE	9.18
4756	SUNFLOWER STORE	7.58
4757	SUNFLOWER STORE	9.18
4758	SUNFLOWER STORE	12.84
4759	SUNFLOWER STORE	6.96
4760	SUNFLOWER STORE	9.18
4761	SUNFLOWER STORE	9.18
4762	SUNFLOWER STORE	7.96
4763	SUNFLOWER STORE	9.18
4764	SUNFLOWER STORE	9.18
4765	SUNFLOWER STORE	9.18
4766	SUNFLOWER STORE	4.59
4767	SUNFLOWER STORE	5.88
4768	SUNFLOWER STORE	7.75
4769	SUNFLOWER STORE	9.18
4770	SUNFLOWER STORE	4.59
4771	SUNFLOWER STORE	9.18

4772 SUNFLOWER STORE	9.18
4773 SUNFLOWER STORE	15.34
4774 SUNFLOWER STORE	12.17
4775 SUNFLOWER STORE	8.87
4776 SUNFLOWER STORE	9.18

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CLAIM #	VENDOR NAME	AMOUNT
4777	SUNFLOWER STORE	9.18
4778	HANCOCK BANK	1158.99
4779	FOUR-COUNTY ELEC POWER ASSN	52.60
4780	TIPTON'S TRUCK REPAIR LLC	306.16
4781	TERRY'S GARAGE AND REPAIR	100.02
4782	BACCO MATERIALS, INC.	243.75
4783	FUELMAN	256.87
4784	C SPIRE WIRELESS	110.09
4785	CLAY COUNTY CO-OP	15.98
4786	SPEEDCO SPEED	36.89
4787	CITY WATER & LIGHT DEPT.	36.08
4788	ARAMARK UNIFORM SERVICES INC	58.99
4789	PHILLIP'S HARDWARE	179.99
4790	BACCO MATERIALS, INC.	2174.54
4791	BACCO MATERIALS, INC.	2423.17
4792	FUELMAN	323.63
4793	CARQUEST AUTO PARTS, INC.	18.34
4794	CARQUEST AUTO PARTS, INC.	18.55
4795	CARQUEST AUTO PARTS, INC.	16.55
4796	CARQUEST AUTO PARTS, INC.	6.79
4797	CARQUEST AUTO PARTS, INC.	13.01
4798	CARQUEST AUTO PARTS, INC.	12.88
4799	CARQUEST AUTO PARTS, INC.	104.07
4800	CARQUEST AUTO PARTS, INC.	40.71
4878	ARAMARK UNIFORM SERVICES INC	58.99

\*\*\* FUND TOTALS \*\*\* 161 DISTRICT 1 BRIDGE

107420.46  
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CLAIM #	VENDOR NAME	AMOUNT
4402	JIM'S TIRE COMPANY	65.00
4404	PHILLIP'S HARDWARE	8.69
4605	COLD MIX, INC.	814.42
4621	CLAY COUNTY CO-OP	390.00
4622	CARQUEST AUTO PARTS, INC.	43.77
4841	WARREN PAVING	530.05
4842	PRESTON DOBBS TRUCKING AND	650.00
4863	POWERSTROKE EQUIPMENT, INC	157.47

\*\*\* FUND TOTALS \*\*\* 162 DISTRICT 2 BRIDGE

2659.40

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CLAIM #	VENDOR NAME	AMOUNT
4364	JIM'S AUTO PARTS, WEST POINT	36.51
4366	SCOTT PETROLEUM CORP.	235.03
4373	BACCO MATERIALS, INC.	2461.11
4491	AMERIMAC CHEMICAL	836.92
4495	WARREN PAVING	1181.77
4496	COLUMBUS WHOLESALE TIRE	915.00
4499	THOMPSON MACHINERY	230.07
4500	H & O TRUCK & TRAILER REPAIR	210.07
4515	WARREN PAVING	1325.00
4516	G & O SUPPLY CO, INC	1091.40
4517	THOMPSON MACHINERY	9861.90
4609	TERRY'S GARAGE AND REPAIR	100.01
4610	G & O SUPPLY CO, INC	717.50
4615	BACCO MATERIALS, INC.	493.74
4616	BACCO MATERIALS, INC.	2215.31
4617	BIG STATE INDUSTRIAL SUPPLY	143.88
4618	ARAMARK UNIFORM SERVICES INC	25.96
4807	TIPTON'S TRUCK REPAIR LLC	798.77
4809	TIPTON'S TRUCK REPAIR LLC	306.15

\*\*\* FUND TOTALS \*\*\* 164 DISTRICT 4 BRIDGE

23186.10

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CLAIM #	VENDOR NAME	AMOUNT
4642	RACKLEY OIL COMPANY, INC	3788.45
4830	HANCOCK BANK	1867.01

\*\*\* FUND TOTALS \*\*\* 165 DISTRICT 5 BRIDGE

5655.46

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CLAIM #	VENDOR NAME	AMOUNT
4353	COLUMBUS WHOLESALE TIRE	1959.68
4395	FUELMAN	760.11
4407	PHILLIP'S HARDWARE	80.93
4408	PHILLIP'S HARDWARE	6.78
4409	PHILLIP'S HARDWARE	9.17
4410	PHILLIP'S HARDWARE	106.16
4411	PHILLIP'S HARDWARE	29.89
4412	PHILLIP'S HARDWARE	37.30
4413	PHILLIP'S HARDWARE	27.98
4414	PHILLIP'S HARDWARE	31.85
4429	FUELMAN	532.91
4502	PHILLIP'S HARDWARE	27.54

4514 TIPTON'S TRUCK REPAIR LLC	1705.00
4525 PHILLIP'S HARDWARE	59.78
4526 PHILLIP'S HARDWARE	5.58
4553 JIM'S AUTO PARTS, WEST POINT	127.03
4563 FUELMAN	733.20
4579 H & O TRUCK & TRAILER REPAIR	306.49
4582 PHILLIP'S HARDWARE	8.18
4583 PHILLIP'S HARDWARE	10.87
4584 PHILLIP'S HARDWARE	71.88
4667 FOUR-COUNTY ELEC POWER ASSN	55.00
4671 TIPTON'S TRUCK REPAIR LLC	245.94
4672 TIPTON'S TRUCK REPAIR LLC	190.00
4675 SILOAM WATER DISTRICT	335.10
4679 GTR SOLID WASTE MGMT AUTHORITY	4740.36
4715 SUNFLOWER STORE	9.18
4716 SUNFLOWER STORE	4.59
4717 SUNFLOWER STORE	14.36
4718 SUNFLOWER STORE	9.18
4719 SUNFLOWER STORE	9.18
4720 SUNFLOWER STORE	9.18
4721 SUNFLOWER STORE	4.59
4722 SUNFLOWER STORE	9.18
4723 SUNFLOWER STORE	11.17
4724 SUNFLOWER STORE	9.18
4725 SUNFLOWER STORE	4.59
4726 SUNFLOWER STORE	4.59
4727 SUNFLOWER STORE	4.59
4728 SUNFLOWER STORE	4.59
4729 SUNFLOWER STORE	4.59
4730 SUNFLOWER STORE	4.59
4731 SUNFLOWER STORE	14.83
4732 SUNFLOWER STORE	12.55
4733 SUNFLOWER STORE	9.18
4734 SUNFLOWER STORE	9.18
4735 SUNFLOWER STORE	7.58
4736 SUNFLOWER STORE	9.40
4737 SUNFLOWER STORE	18.36
4738 SUNFLOWER STORE	9.18
4739 SUNFLOWER STORE	12.84
4740 SUNFLOWER STORE	9.18

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CLAIM #	VENDOR NAME	AMOUNT
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4741 SUNFLOWER STORE	9.18
4742 SUNFLOWER STORE	4.59
4743 SUNFLOWER STORE	9.18
4744 SUNFLOWER STORE	9.18
4745 SUNFLOWER STORE	13.77

4746 SUNFLOWER STORE	9.30	
4747 SUNFLOWER STORE	9.18	
4853 PHILLIP'S HARDWARE	6.78	
4856 FUELMAN	680.67	
4870 TIPTON'S TRUCK REPAIR LLC	2111.48	
4875 JIM'S AUTO PARTS, WEST POINT	17.98	
*** FUND TOTALS *** 400 SANITATION		15315.61
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CLAIM # VENDOR NAME	AMOUNT	
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4898 MS DEPT OF PUBLIC SAFETY	1207.00	
4899 MS DEPT OF PUBLIC SAFETY	160.00	
4900 MS DEPT OF PUBLIC SAFETY	1000.00	
4901 STATE TREASURER	30854.75	
4902 GOLDEN TRIANGLE CRIME STOPPERS	228.50	
*** FUND TOTALS *** 650 JUDICIAL ASSESSMENT CLEARING FUND		33450.25
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CLAIM # VENDOR NAME	AMOUNT	
-----		
4906 EAST MS COMMUNITY COLLEGE	23798.94	
*** FUND TOTALS *** 690 EMJC MAINTENANCE		23798.94
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FOR THE PERIOD ENDED APRIL 05, 2021		
CLAIM # VENDOR NAME	AMOUNT	
-----		
4905 EAST MISS. COMMUNITY COLLEGE	15188.61	
*** FUND TOTALS *** 692 EMCC CAPITAL IMPROVEMENT CAMPAIGN		15188.61
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CLAIM # VENDOR NAME	AMOUNT	
-----		
4904 EAST MISS. COMMUNITY COLLEGE	12995.35	
*** FUND TOTALS *** 697 VO-TECH MAINTENANCE		12995.35
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CLAIM # VENDOR NAME	AMOUNT	
-----		
4903 EAST MISS. COMMUNITY COLLEGE	11476.29	
*** FUND TOTALS *** 698 VO-TECH CAPITAL		11476.29
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CLAIM # VENDOR NAME	AMOUNT	



4907 TOMBIGBEE RIVER WTR MGMT DIST 15018.41

\*\*\* FUND TOTALS \*\*\* 699 TOMBIGBEE RIVER VALLEY WATER MGMT.DIST. 15018.41

\*\*\* DOCKET TOTALS \*\*\* 642584.32

I CERTIFY THAT THE BOARD HAS EXAMINED EACH CLAIM ON THE APRIL, 2021  
DOCKET AND THE BILLS THEY REPRESENT AND FINDS EACH OF THE ABOVE DUE AND  
PAYABLE AND DIRECT THE CLERK TO ISSUE WARRANTS ON THE RESPECTIVE FUNDS.  
THIS THE 05TH DAY OF APRIL 2021



*Walter P. Platter*  
\_\_\_\_\_  
PRESIDENT

# EXHIBIT C

# RWJ Consulting, LLC

## Invoice for: Clay County Floodplain Administration March 1, 2021 – April 5, 2021

Clay County Board of Supervisors  
Attn: The Honorable Shelton Deanes, President  
P.O. Box 815, West Point, MS 39773

ITEM	HOURS	*MILEAGE	TOTAL
03/04/21 Conference, research, travel, letter, Malcolm Williamson Bluff Creek Properties, LLC) Highway 50 West, Maben, MS 39751	1.5 @ \$24.00=\$36.00 1.5 @ \$48.00=\$72.00	See Attachment	\$108.00
03/15/21 Conference, research, travel, letter James Ashford (Jesse Ivy) 137 Douglas Drive, Maben, MS 39750	1.5 @ \$24.00=\$36.00 1.5 @ \$48.00=\$72.00	See Attachment	\$108.00
03/17/21 Conference, research, travel, letter Danielle Jones (Cathylean Darby) 162aba Riddle Road, West Point, MS 39773	1.0 @ \$24.00=\$24.00 0.5 @ \$48.00=\$24.00	See Attachment	\$48.00
03/18/21 Conference, research, travel, letter Pashion Posley (Dorothy Mosley) 508 Webb Road, Mantee, MS 39751	1.0 @ \$24.00=\$24.00 0.5 @ \$48.00=\$24.00	See Attachment	\$48.00
03/19/21 Conference, research, travel, letter Felix Edmonds (Flem Owens Estate) 2066 Mhoon Valley Road, West Point, MS 39773	1.5 @ \$24.00=\$36.00 1.0 @ \$48.00=\$48.00	See Attachment	\$84.00
03/15/21 Conference, research, travel, letter April Tallie (Melissa & Kathleen Tallie) 427 Joe Heard Road, Prairie, MS 39756	1.0 @ \$24.00=\$24.00 1.0 @ \$48.00=\$48.00	See Attachment	\$72.00
03/25/21 Conference, research, travel, letter Joe Willie & Precious Ivy (Vanessa Ivy) 1789 Pruitt Road, West Point, MS 39773	1.0 @ \$24.00=\$24.00 0.5 @ \$48.00=\$24.00	See Attachment	\$48.00
03/30/21 Conference, research, travel, letter, Jessica Spraggins (John L. Hardy Estate) 190 George Walker Road, West Point, MS 39773	1.0 @ \$24.00=\$24.00 1.0 @ \$48.00=\$48.00	See Attachment	\$72.00
03/31/21 Conference, research, travel, letter David Mathews (Sara Lane Estate) 178 Community Center Road, West point, MS 39773	1.0 @ \$24.00=\$24.00 1.0 @ \$48.00=\$48.00	See Attachment	\$72.00
03/01/21 – 04/05/21 Travel Driving time, report and copies for Board of Supervisors, Tax Assessor, Property Owners, & MEMA	6.4 @ \$24.00=\$153.60 2.0 @ \$48.00=\$96.00	208.9 @ \$0.48=\$100.27 See Attachment	\$349.87
<b>TOTALS</b>	<b>\$909.60</b>	<b>\$100.27</b>	<b>\$1009.87</b>

<sup>1</sup> Driving time billed at half technical/research rate. Copies of correspondence, research, and letters are attached.

Respectfully Submitted:



Please mail to: **RWJ Consulting, LLC**  
**P.O. Box 0394**  
**West Point, Mississippi 39773**

RWJ/rj  
Encl as



# Clay County Floodplain Administrator

*Clay County Administrator*

P.O. Box 815  
West Point, Mississippi 39773  
Phone (662) 494-3124  
Fax (662) 492-4059  
E-mail: [supervisors@claycounty.ms.gov](mailto:supervisors@claycounty.ms.gov)

*Randolph "Randy" Jones, CFM*

April 5, 2021

County Board of Supervisors  
The Honorable Shelton Deanes, President  
P.O. Box 815  
West Point, MS 39773

Dear Mr. Deanes,

Enclosed you will find my current summary of actions March 1, 2021 through April 5, 2021 and incurred expense as Clay County Floodplain Administrator for consulting, travel, and inspections for the Board of Supervisors' review. I am attaching a detailed invoice for my actions and expenses as well as file copies of correspondence.

I continued my efforts to locate the property owner or person responsible for illegally placing a manufactured home on Humphries Cove Road, which is also in the 100 Year SFHA. I reported the violations to the Clay County Sheriff and advised that I might need his assistance at some point in time. I received a phone call from an unidentified individual claiming to have placed the mobile home there on behalf of the owner who he claimed had subsequently died. He said he would report to tax assessor's office and make arrangements to remedy the situation. So far there appears to be no apparent action.

I continued investigation for apparent construction in Shirley Subdivision for no record of an SFHAA or MDH wastewater permit. I discovered the property owner had moved from a previous residence on North TVA Road to an address on Highway 50 East and prepared new correspondence for that address, providing another copy of the Stop Work order to landowner and notified him to proceed to Tax Assessor's office to comply with ordinance and permit. To date there has been no response.

Thank you so much for your interest and diligence in attending to issues that protect citizens and property, as well as, saving the tax payers' money. We continue to make considerable progress collating materials and actions to pursue participation in the Community Rating System (CRS).

Sincerely,

A handwritten signature in black ink, appearing to read "Randy Jones".

Randolph W. Jones, CFM  
Clay County Floodplain Administrator

Encl as  
cf. Clay County Chancery Clerk

# EXHIBIT D

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**RESOLUTION OF THE CLAY COUNTY BOARD OF SUPERVISORS AMENDING CERTAIN POLICIES, PRACTICES AND PROCEDURE TO CONTROL THE SPREAD OF INFECTIOUS DISEASE IN RESPONSE TO THE CORONAVIRUS (COVID-19) PANDEMIC**

*(Curfew)*

THERE CAME TO BE HEARD AND WAS HEARD the motion of Supervisor Davis, which motion was seconded by Supervisor Lynnus, to adopt the following resolution, to-wit;

WHEREAS, on this day for consideration came the matter of amending certain policies, practices and procedures to control the spread of infectious disease, more specifically Coronavirus (COVID-19).

WHEREAS, by way of Resolution the Clay County Board of Supervisors voted that the curfew of 11:00 p.m. to 5:00 a.m. remain in effect until March 1, 2021; and

WHEREAS, it appears to the Clay County Board of Supervisors that the Coronavirus pandemic continues to pose a threat to the safety and well-being of County residents such that a curfew continues to be necessary to protect the health of County residents. Taking into consideration executive orders entered by the Governor of the State of Mississippi and other local ordinance(s), the Clay County Board of Supervisors hereby modifies the previously adopted curfew by terminating the curfew currently in place. All ordinances related to the closure of clubs and other meeting places shall remain in full force and effect. Businesses are encouraged, however, to continue to observe social distancing protocols as recommended by the Centers for Disease Control.

The Board reserves the right to implement any further orders as necessary or as required by law, including but not limited to the right to implement orders to prevent or slow the spread of COVID-19.

After due discussion, the motion was called to vote and each Supervisor voted as follows,

to-wit;

Supervisor, D. Lynn Horton, District 1

AYE

Supervisor, Luke Lummus, District 2

AYE

Supervisor, R.B. Davis, District 3

AYE

Supervisor, Shelton L. Deanes, District 4

AYE

Supervisor, Joe Chandler, District 5

AYE

The motion, passing by a majority vote of the Supervisors, was declared carried and this resolution adopted.

SO ORDERED, on this 1<sup>st</sup> day of March 1, 2021.



**CLAY COUNTY, MISSISSIPPI  
BOARD OF SUPERVISORS**

*Shelton L. Deanes*  
\_\_\_\_\_  
**SHELTON L. DEANES, PRESIDENT**

ATTEST:

*Amy G. Berry*  
\_\_\_\_\_  
**AMY G. BERRY  
CLAY COUNTY CHANCERY CLERK**

# **EXHIBIT E**



REQUEST FOR OBLIGATION OF FUNDS

<b>INSTRUCTIONS-TYPE IN CAPITALIZED ELITE TYPE IN SPACES MARKED ( )</b>			
Complete Items 1 through 29 and applicable Items 30 through 34. See FMI.			
1. CASE NUMBER ST CO BORROWER ID 28-013-513317844		LOAN NUMBER	FISCAL YEAR
2. BORROWER NAME Clay County BOS		3. NUMBER NAME FIELDS (1, 2, or 3 from Item 2)	
		4. STATE NAME Mississippi	
		5. COUNTY NAME Clay	
<b>GENERAL BORROWER/LOAN INFORMATION</b>			
6. RACE/ETHNIC CLASSIFICATION 1 - WHITE 2 - BLACK 3 - ASIAN 4 - HISPANIC 5 - API	7. TYPE OF APPLICANT 1 - INDIVIDUAL 2 - PARTNERSHIP 3 - CORPORATION 4 - PUBLIC BODY 5 - ASSOC. OF FARMERS 8 - ORG. OF FARMERS 7 - NONPROFIT-SECULAR 6 - NONPROFIT-FAITH BASED 9 - INDIAN TRIBE 10 - PUBLIC COLLEGE/UNIVERSITY 11 - OTHER		8. COLLATERAL CODE 1 - REAL ESTATE SECURED 2 - REAL ESTATE AND CHATTEL 3 - NOTE ONLY OR CHATTEL ONLY 4 - MACHINERY ONLY 5 - LIVESTOCK ONLY 6 - CROPS ONLY 7 - SECURED BY BONDS 8 - RLF ACCT
9. EMPLOYEE RELATIONSHIP CODE 1 - EMPLOYEE 2 - MEMBER OF FAMILY 3 - CLOSE RELATIVE 4 - ASSOC	10. SEX CODE 1 - MALE 2 - FEMALE 3 - FAMILY UNIT 4 - ORGAN MALE OWNED 5 - ORGAN FEMALE OWNED 6 - PUBLIC BODY	11. MARITAL STATUS 1 - MARRIED 2 - SEPARATED 3 - UNMARRIED (INCLUDES WIDOWED/DIVORCED)	12. VETERAN CODE 1 - YES 2 - NO
13. CREDIT REPORT 1 - YES 2 - NO	14. DIRECT PAYMENT (See FMI)	15. TYPE OF PAYMENT 1 - MONTHLY 2 - ANNUALLY 3 - SEMI-ANNUALLY 4 - QUARTERLY	16. FEE INSPECTION 1 - YES 2 - NO
17. COMMUNITY SIZE 1 - 10,000 OR LESS (FOR SFH AND HPG ONLY) 2 - OVER 10,000	18. USE OF FUNDS CODE (See FMI)		
<b>COMPLETE FOR OBLIGATION OF FUNDS</b>			
19. TYPE OF ASSISTANCE 850 (See FMI)	20. PURPOSE CODE B	21. SOURCE OF FUNDS	22. TYPE OF ACTION 1 - OBLIGATION ONLY 2 - OBLIGATION/CHECK REQUEST 3 - CORRECTION OF OBLIGATION
23. TYPE OF SUBMISSION 1 - INITIAL 2 - SUBSEQUENT	24. AMOUNT OF LOAN	25. AMOUNT OF GRANT \$50,000.00	
26. AMOUNT OF IMMEDIATE ADVANCE	27. DATE OF APPROVAL MO DAY YR	28. INTEREST RATE 0 %	29. REPAYMENT TERMS
<b>COMPLETE FOR COMMUNITY PROGRAM AND CERTAIN MULTIPLE-FAMILY HOUSING LOANS</b>			
30. PROFIT TYPE 1 - FULL PROFIT 2 - LIMITED PROFIT 3 - NONPROFIT			
<b>COMPLETE FOR EM LOANS ONLY</b>		<b>COMPLETE FOR CREDIT SALE-ASSUMPTION</b>	
31. DISASTER DESIGNATION NUMBER (See FMI)	32. TYPE OF SALE 1 - CREDIT SALE ONLY 2 - ASSUMPTION ONLY 3 - CREDIT SALE WITH SUBSEQUENT LOAN 4 - ASSUMPTION WITH SUBSEQUENT LOAN		
<b>FINANCE OFFICE USE ONLY</b>		<b>COMPLETE FOR FP LOANS ONLY</b>	
33. OBLIGATION DATE MO DA YR	34. BEGINNING FARMER/RANCHER (See FMI)		

If the decision contained above in this form results in denial, reduction or cancellation of USDA assistance, you may appeal this decision and have a hearing or you may request a review in lieu of a hearing. Please use the form we have included for this purpose.

Position 2

ORIGINAL - Borrower's Case Folder    COPY 1 - Finance Office    COPY 2 - Applicant/Lender    COPY 3 - State Office

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0570-0062. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

CERTIFICATION APPROVAL

For All Farmers Programs

EM, OL, FO, and SW Loans

This loan is approved subject to the availability of funds. If this loan does not close for any reason within 90 days from the date of approval on this document, the approval official will request updated eligibility information. The undersigned loan applicant agrees that the approval official will have 14 working days to review any updated information prior to submitting this document for obligation of funds. If there have been significant changes that may affect eligibility, a decision as to eligibility and feasibility will be made within 30 days from the time the applicant provides the necessary information.

If this is a loan approval for which a lien and/or title search is necessary, the undersigned applicant agrees that the 15-working-day loan closing requirement may be exceeded for the purposes of the applicant's legal representative completing title work and completing loan closing.

35. COMMENTS AND REQUIREMENTS OF CERTIFYING OFFICIAL

36. I HEREBY CERTIFY that I am unable to obtain sufficient credit elsewhere to finance my actual needs at reasonable rates and terms, taking into consideration prevailing private and cooperative rates and terms in or near my community for loans for similar purposes and periods of time. I agree to use the sum specified herein, subject to and in accordance with regulations applicable to the type of assistance indicated above, and request payment of such sum. I agree to report to USDA any material adverse changes, financial or otherwise, that occur prior to loan closing. I certify that no part of the sum specified herein has been received. I have reviewed the loan approval requirements and comments associated with this loan request and agree to comply with these provisions.

(For FP loans at eligible terms only) If this loan is approved, I elect the interest rate to be charged on my loan to be the lower of the interest rate in effect at the time of loan approval or loan closing. If I check "NO", the interest rate charged on my loan will be the rate specified in Item 28 of this form. \_\_\_\_\_ YES \_\_\_\_\_ NO

WARNING: Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined under this title or imprisoned not more than five years, or both."

Date April 1, 20 21

[Signature of Applicant]
CLAY COUNTY, MISSISSIPPI

(Signature of Applicant)

Date \_\_\_\_\_, 20 \_\_\_\_\_

(Signature of Co-Applicant)

37. I HEREBY CERTIFY that all of the committee and administrative determinations and certifications required by regulations prerequisite to providing assistance of the type indicated above have been made and that evidence thereof is in the docket, and that all requirements of pertinent regulations have been complied with. I hereby approve the above-described assistance in the amount set forth above, and by this document, subject to the availability of funds, the Government agrees to advance such amount to the applicant for the purpose of and subject to the availability prescribed by regulations applicable to this type of assistance.

(Signature of Approving Official)

Typed or Printed Name: \_\_\_\_\_

Date Approved: \_\_\_\_\_ Title: \_\_\_\_\_

38. TO THE APPLICANT: As of this date \_\_\_\_\_, this is notice that your application for financial assistance from the USDA has been approved, as indicated above, subject to the availability of funds and other conditions required by the USDA. If you have any questions contact the appropriate USDA Servicing Office.

REQUEST FOR OBLIGATION OF FUNDS

INSTRUCTIONS-TYPE IN CAPITALIZED ELITE TYPE IN SPACES MARKED ( )			
Complete Items 1 through 29 and applicable items 30 through 34. See FMI.			
1. CASE NUMBER ST CO BORROWER ID 28-013-513317844		LOAN NUMBER	FISCAL YEAR
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COMPLETE FOR COMMUNITY PROGRAM AND CERTAIN MULTIPLE-FAMILY HOUSING LOANS			
30. PROFIT TYPE 1 - FULL PROFIT 2 - LIMITED PROFIT 3 - NONPROFIT			
COMPLETE FOR EM LOANS ONLY		COMPLETE FOR CREDIT SALE-ASSUMPTION	
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FINANCE OFFICE USE ONLY		COMPLETE FOR FP LOANS ONLY	
33. OBLIGATION DATE MO DA YR		34. BEGINNING FARMER/RANCHER (See FMI)	

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WARNING: Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined under this title or imprisoned not more than five years, or both."

Date April 1, 20 21

Signature of Applicant with Clay County, MS seal

(Signature of Applicant)

Date \_\_\_\_\_, 20 \_\_\_\_\_

(Signature of Co-Applicant)

37. I HEREBY CERTIFY that all of the committee and administrative determinations and certifications required by regulations prerequisite to providing assistance of the type indicated above have been made and that evidence thereof is in the docket, and that all requirements of pertinent regulations have been complied with. I hereby approve the above-described assistance in the amount set forth above, and by this document, subject to the availability of funds, the Government agrees to advance such amount to the applicant for the purpose of and subject to the availability prescribed by regulations applicable to this type of assistance.

(Signature of Approving Official)

Typed or Printed Name: \_\_\_\_\_

Date Approved: \_\_\_\_\_ Title: \_\_\_\_\_

38. TO THE APPLICANT: As of this date \_\_\_\_\_, this is notice that your application for financial assistance from the USDA has been approved, as indicated above, subject to the availability of funds and other conditions required by the USDA. If you have any questions contact the appropriate USDA Servicing Office.

(Rev. 07-20)

COMMUNITY FACILITIES GRANT AGREEMENT

**Grantee and Agency**

This Grant Agreement (Agreement) dated 04/01/2021, is a contract for receipt of grant funds under the Community Facility Grant program (7 C.F.R. part 3570, subpart B). These requirements do not supersede the applicable requirements for receipt of Federal funds stated in 2 C.F.R. Part 200, "UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS FOR FEDERAL AWARDS", which are incorporated by reference into this Agreement. Further, 7 C.F.R. part 3570, subpart B, and all relevant regulatory requirements apply to applicants and are also incorporated by reference into this Agreement.

This Agreement for the Project and Amount described below (the "Project Description") and for the Community Facilities grant, CFDA Number 10.766, is between the Grantee, a public body, nonprofit corporation or Indian tribe (you), and the United States of America acting through the Rural Housing Service (RHS or Agency).

**I. GENERAL AWARD INFORMATION**

1. Grantee Name & Address Clay County BOS	2. DUNS No. 079117719	3. SAM No. 5YT63
P. O. Box 815 West Point, MS 39773-	4. Case No. 28-013-*****0252	
5. Federal Award Identification Number (FAIN)	6. Award Date	
7. Performance Start Date	8. Performance End Date	
9. Amount of Federal Funds Obligated for this Action, and Total Amount of Federal Funds Obligated 50,000.00	10. Amount of Matching/Other Funds (if applicable) 35,548.00	
11. Total Project Cost (Budget Approved Amount) 85,548.00	12. Award as Percentage of Total Project Cost 75 %	
13. Grantee Contact (Name, Title, Contact Info) Luke Lummus, President. 662-494-3124	14. Agency Contact (Name, Title, Contact Info) Clifton Russell, AD, 662-320-4009	
15. Description of Real Property covered by the grant N/A	16. Description of Equipment covered by the grant Proposing the funding for a backhoe for District 1.	

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is [0570-0050]. The time required to complete this information collection is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The Agency has agreed to give the Grantee the Grant Funds, subject to the terms and conditions established by the Agency. Provided, however, that any Grant Funds actually advanced and not needed for grant purposes shall be returned immediately to the Agency. The Agency may terminate the grant in whole, or in part, at any time before the date of completion, whenever it is determined that the Grantee has failed to comply with the conditions of this Agreement or the applicable regulation.

**II. RESPONSIBILITIES**

**A. Grantee.** The Grantee shall cause said project to be completed within the total sums available to it, including Grant Funds, in accordance with any architectural or engineering reports, and any necessary modifications, prepared by Grantee and approved by the Agency as required by 7 C.F.R. part 3570. The Grantee will remain in compliance with all applicable laws, regulations, Executive Orders, and other generally applicable requirements for the duration of the Agreement including 7 C.F.R. part 3570, subpart B and 2 C.F.R. parts 200, 400, 415, 416, 417, 418, 421, and 422. The most commonly-referenced provisions are identified below.

1. **Financial and Program Management.** You must follow the financial and performance management requirements in 2 C.F.R. § 200.300-.309.
  - a. **Financial Management.** You must maintain a financial management system in compliance with 2 C.F.R. § 200.302.
  - b. **Internal Controls.** You must maintain internal controls in compliance with 2 C.F.R. § 200.303.
  - c. **Payments.** You must comply with the payment requirements described in 2 C.F.R. § 200.305. Payment must be requested by using the SF-270, "Request for Advance or Reimbursement" or SF-271, "Request for Reimbursement for Construction Programs" (as applicable). Receipts, hourly wage rate, personnel payroll records, or other documentation must be provided upon request from RHS if the request is for an advance; otherwise, the documentation must be provided at the time of the request. Requests for payment must be sent to the Agency contact listed in Section I.14.
  - d. **Revisions of the Work Plan and Budget.** You must complete all elements of the Work Plan in Attachment A in accordance with that Attachment and must use project funds only for the purposes and activities specified in Attachment A - Approved Work Plan and Budget. You must further complete the outcomes shown for each Work Plan items within the time and scope constraints shown in Attachment A. You must report any changes and request prior approvals in accordance with 2 C.F.R. § 200.308.
  - e. **Period of Performance.** You may only incur costs chargeable to the award in accordance with 2 C.F.R. § 200.309.
  - f. **Bonding.** You must maintain your fidelity bond coverage in the amount of \$ 0.00 for the Period of Performance of the award. (See 2 C.F.R. § 200.304)

- g. **Program Income.** You must comply with the requirements of 2 C.F.R. § 200.307. Additionally, if program income is earned during the period of performance, you may use it in accordance with 2 C.F.R. § 200.307(e)(2), provided that you inform us in writing of your intent prior to the award date. However, if you earn program income in excess of what can be used under 2 C.F.R. § 200.307(e)(2) or if you earn unanticipated program income, you must comply with 2 C.F.R. § 200.307(e)(1). Costs incidental to the generation of program income may be deducted from gross income to determine program income, provided these costs have not been charged to the award.
- 2. **Procurement and Property Standards.** You must follow the procurement standards requirements in 2 C.F.R. § 200.310-.326.
- 3. **Performance and Financial Monitoring and Reporting.** You must follow the requirements in 2 C.F.R. Part 170, including Appendix A, and 2 C.F.R. § 200.327-.329, and submit reports as outlined below. Unless otherwise directed in the addendum to this Agreement, the reports are due as indicated below.

- a. **Form SF-425, "Financial Status Report."** Reports are due 30 calendar days after the reporting period ends. A final report is due within 90 days after the Performance End Date specified in Section I.8. of this Agreement or at the completion of your project, whichever date is sooner. Your reporting periods are below (mark one):

Semi-Annually: January 1 – June 30 and July 1 – December 31

Semi-Annually: April 1 – September 30 and October 1 – March 31

Quarterly: January 1 – March 31, April 1 – June 30, July 1 – September 30, October 1 – December 31

- b. **Performance Reports. SF-PPR, "Performance Progress Report"** is due 30 calendar days after the reporting period ends. A final report is due within 90 days after the Performance End Date specified in Section I.8. of this Agreement or at the completion of your project, whichever date is sooner. Your reporting periods are below (mark one):

Semi-Annually: January 1 – June 30 and July 1 – December 31

Semi-Annually: April 1 – September 30 and October 1 – March 31

Quarterly: January 1 – March 31, April 1 – June 30, July 1 – September 30, October 1 – December 31

The performance narrative on the Performance Project Report shall include, but is not limited to, the following:

- i. Describe the activities that the funds reflected in the financial status report were used for;

- ii. A comparison of actual accomplishments to the objectives established for that period;
- iii. Reasons why established objectives were not met, if applicable;
- iv. Problems, delays, or adverse conditions which will affect attainment of overall project objectives, prevent meeting time schedules or objectives, or preclude the attainment of project work elements during established time periods. This disclosure shall be accompanied by a statement of the action taken or planned to resolve the situation;
- v. Objectives and timetables established for the next reporting period;

The final report (due 90 calendar days after the period of performance end date) will also address the following:

- i. What have been the most challenging or unexpected aspects of this program?
  - ii. What advice, best practices, and actions would you recommend to other organizations planning a similar program that would increase the success of their program? Please include strengths and limitations of the program. If you had the opportunity, what would you have done differently?
4. **Operations.** The Grantee will manage, operate and maintain the facility, including this project if less than the whole of said facility, continuously in an efficient and economical manner in accordance with 7 C.F.R. § 3570.61(e).
5. **Funding.** The Grantee will not use grant funds to replace any financial support previously provided or assured from any other source. The Grantee agrees that the Grantee's level of expenditure for the Project shall be maintained and not reduced as a result of Grant Funds in accordance with 7 C.F.R. § 3570.66.
6. **Default.** Upon any default under its representations or agreements contained in this instrument, 2 C.F.R. Part 200, or 7 C.F.R. Part 3570, Grantee, at the option and demand of the Agency, will immediately repay to the Agency the Grant Funds with any legally permitted interest from the date of the default. Default by the Grantee will constitute termination of the grant thereby causing cancellation of Federal assistance under the grant. The provisions of this Agreement may be enforced by the Agency, at its option and without regard to prior waivers of previous defaults by Grantee, by judicial proceedings to require specific performance of the terms of this Agreement or by such other proceedings in law or equity, in either Federal or State courts, as may be deemed necessary by the Agency to assure compliance with the provisions of this Agreement and the laws and regulations under which this grant is made.



7. **Real Property.** Use the real property including land, improvements, structures, and appurtenances thereto, for authorized purposes of the grant as long as needed and in accordance with 2 C.F.R. § 200.311; 2 C.F.R. § 200.312; 7 C.F.R. § 15.4(a)(2) and 7 C.F.R. § 3570.92. In accordance with Title VI of the Civil Rights Act of 1964, deeds for real property must comply with the requirements for the Reverter and Habendum clauses.
- a. Title to real property shall vest in the Grantee subject to the condition that the Grantee shall use the real property for the authorized purpose of the original grant as long as needed.
  - b. The Grantee shall obtain the Agency's approval to use the real property in other projects when the Grantee determines that the property is no longer needed for the original grant purposes. Use in other projects shall be limited to those under other Federal grant programs or programs that have purposes consistent with those authorized for support by the Agency.
  - c. When the real property is no longer needed, as provided in paragraphs (a) and (b) above, the Grantee shall request disposition instructions from the Agency. The Agency will observe the following rules in the disposition instructions:
    - i. The Grantee may be permitted to retain title after it compensates the Federal government in an amount computed by applying the Federal percentage of participation in the cost of the original Project to the fair market value of the property;
    - ii. The Grantee may be directed to sell the property under guidelines provided by the Agency and pay the Federal government an amount computed by applying the Federal percentage of participation in the cost of the original Project to the proceeds from sale (after deducting actual and reasonable selling and fix-up expenses, if any, from the sales proceeds). When the Grantee is authorized or required to sell the property, proper sales procedures shall be established that provide for competition to the extent practical and result in the highest possible return;
    - iii. The Grantee may be directed to transfer title to the property to the Federal government provided that in such cases the Grantee shall be entitled to compensation computed by applying the Grantee's percentage of participation in the cost of the program or Project to the current fair market value of the property;

**Equipment.** Abide by the following conditions pertaining to equipment which is furnished by the Agency or acquired wholly or in part with Grant Funds. Equipment is defined at 2 C.F.R. § 200.33 and is tangible, non-expendable personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit.

- d. **Use of equipment.** The Grantee shall use the equipment in the Project for which it was acquired as long as needed. When no longer needed for the original project, the Grantee shall use the equipment in connection with its other federally sponsored activities, if any, in the following order of priority:
  - i. Activities sponsored by the Agency.
  - ii. Activities sponsored by other Federal agencies.
  
- b. **Use of equipment.** During the time that equipment is held for use on the project for which it was acquired, the Grantee shall make it available for use on other projects if such other use will not interfere with the work on the project for which the property was originally acquired. First preference for such other use shall be given to the Agency sponsored projects. Second preference will be given to other federally sponsored projects.
  
- c. **Disposition of equipment.** When the Grantee no longer needs the property as provided in paragraph 1 (a) and (b) above, the equipment may be sold or used for other activities in accordance with 2 C.F.R. § 200.313 and 7 C.F.R. §15.4(a)(3) :
  - i. Equipment with a current fair market value of less than \$5,000. The Grantee may use the property for other activities without reimbursement to the Federal government or sell the property and retain the proceeds.
  
  - ii. Equipment with a current fair market value of \$5,000 or more. The Grantee may retain the property for other uses provided that compensation is made to the Agency. The amount of compensation shall be computed by applying the percentage of Federal participation in the cost of the original Project to the current fair market value of the property. If the Grantee has no need for the equipment and the equipment has further use value, the Grantee shall request disposition instructions from the Agency.
  
  - iii. The Agency shall determine whether the equipment can be used to meet RHS or its successor agency's requirements. If no such requirements exist, the availability of the property shall be reported, in accordance with the guidelines of the Federal Property Management Regulations (FPMR), to the General Services Administration by the Agency to determine whether a requirement for the equipment exists in other Federal agencies. They shall issue instructions to the Grantee no later than 120 days after the Grantee's request and the following procedures shall govern:

- If so instructed or if disposition instructions are not issued within 120 calendar days after the Grantee's request, the Grantee shall sell the equipment and reimburse the Agency an amount computed by applying to the sales proceeds the percentage of Federal participation in the cost of the original project or program. However, the Grantee shall be permitted to deduct and retain from the Federal share 10 percent of the proceeds or \$500, whichever is less, for the Grantee's selling and handling expenses.
- If the Grantee is instructed to ship the property elsewhere, the Grantee shall be reimbursed by the benefiting Federal agency with an amount which is computed by applying the percentage of the Grantee participation in the cost of the original grant Project or program to the current fair market value of the equipment plus any reasonable shipping or interim storage costs incurred.
- If the Grantee is instructed to otherwise dispose of the equipment, the Grantee shall be reimbursed by the Agency for such costs incurred in its disposition.

d. The Grantee's property management standards for equipment shall be in accordance with 2 CFR § 200.313 and shall include:

- i. Property records which accurately provide for: a description of the equipment; manufacturer's serial number or other identification number; acquisition date and cost; source of the equipment; percentage (at the end of budget year) of Federal participation in the cost of the Project for which the equipment was acquired; location, use, and condition of the equipment and the date the information was reported; and ultimate disposition data including sales price, or the method used to determine current fair market value if the Grantee reimburses the Agency for its share.
- ii. A physical inventory of equipment shall be taken, and the results reconciled with the equipment records at least once every two years to verify the existence, current utilization, and continued need for the equipment.
- iii. A control system shall be in effect to ensure adequate safeguards to prevent loss, damage, or theft of the equipment. Any loss, damage, or theft of equipment shall be investigated and fully documented.
- iv. Adequate maintenance procedures shall be implemented to keep the equipment in good condition.
- v. Proper sales procedures shall be established for unneeded equipment which would provide for competition to the extent practicable and result in the highest possible return;

9. **Earned Interest.** Grantee agree to account for and to return to Agency interest earned on grant funds pending their disbursement for program purposes when the Grantee is a unit of local government. States and agencies or an instrumentality of a State shall not be held accountable for interest earned on Grant Funds pending their disbursement.
10. **Record Retention and Access.** You must retain records related to this work performed under this Agreement and allow access to them in accordance with 2 C.F.R. § 200.333-.337.
11. **Closeout.** You must comply with the closeout requirements in 2 C.F.R. § 200.343.
12. **Post-Closeout Adjustments and Continuing Responsibilities.** You must continue to comply with the requirements in 2 C.F.R. § 200.344 even after the Period of Performance for this Agreement has ended.
13. **Cost Principles.** You must comply with the provisions in 2 C.F.R. Part 200, Subpart E.
14. **Audits.** You must comply with the provisions in 2 C.F.R. Part 200, Subpart F.
15. **Civil Rights Compliance.** Unless otherwise provided in the addendum, you must comply with Executive Order 12898, Executive Order 13166- Limited English Proficient, the Americans with Disabilities Act of 1990, Title VI of the Civil Rights Act of 1964, and Section 504 of the Rehabilitation Act of 1973 as applicable. You must make the public facility or services available to all persons in the Grantee's service area without discrimination as to race, color, religion, sex, national origin, age, marital status or physical or mental disability at reasonable rates, including assessments, taxes, or fees. You may make modifications as long as they are reasonable and nondiscriminatory. Your compliance shall include collection and maintenance of data on race, sex, and national origin of your membership, ownership, and employees. This data must be available to us for Civil Rights Compliance Reviews. You must submit to a post-award compliance review conducted after the final disbursement of grant funds has occurred.
16. **Execute Agreements.** The Grantee will execute any agreements required by the Agency which the Grantee is legally authorized to execute. If any such agreement has been executed by the Grantee as a result of a loan being made to the Grantee by the Agency contemporaneously with the making of this grant, that agreement applies equally to the grant and another identical agreement need not be executed in connection with this grant.

17. **Universal Identifier and Central Contractor Registration.** The Grantee must have a Dun & Bradstreet Universal Numbering System (DUNS) number in order to apply for, receive, and report on a Federal award. Additionally, the Grantee must comply with the additional requirements set forth in Attachment C regarding the DUNS Requirements and the Central Contractor Registry (CCR) Requirements found at 2 CFR Part 25, including Appendix A. For the purposes of this Agreement, "you" in Attachment B shall mean "Grantee" as defined hereunder;
  18. **Federal Funding Accountability and Transparency Act.** The Grantee is responsible for complying with all requirements of the Federal award. For all Federal awards, this includes the provisions of the Federal Funding Accountability and Transparency Act (FFATA), which includes requirements on executive compensation, and also requirements implementing the Act for the Grantee at 2 CFR Part 25 Financial Assistance Use of Universal Identifier and Central Contractor Registration and 2 CFR Part 170 Reporting Subaward and Executive Compensation Information. See also statutory requirements for whistleblower protections at 10 U.S.C. 2409, 41 U.S.C. 4712, 10 U.S.C. 2324, 41 U.S.C. 4304 and 4310. See also 2 C.F.R. § 200.11-200.113.
  19. Not encumber, transfer or dispose of the property or any part thereof, furnished by the Agency or acquired wholly or in part with Agency funds without the written consent of the Agency except as provided in paragraph 8 (c).
  20. Not duplicate other Project purposes for which monies have been received, are committed, or are applied to from other sources (public or private).
- B. Rural Housing Service (RHS).** RHS has agreed to give the Grantee the grant funds, subject to the terms and conditions established by RHS. Provided, however, that any grant funds actually advance and not needed for grant purposes shall be returned immediately to RHS. RHS may terminate the grant in whole, or in part, at any time before the date of completion, whenever it is determined that the Grantee has failed to comply with the conditions of this Agreement or the applicable regulation. RHS shall remain in compliance with all applicable laws, regulations, Executive Orders, and other generally applicable requirements for the duration of the Agreement. The most commonly-referenced provisions are identified below.
1. **Payments.** We will advance or reimburse funds up to the Award Amount identified in Section I.9 upon the Grantee's proper request according to Section II.A.1.c.
  2. **Monitoring and Enforcement.** We will monitor the project to ensure that you are in compliance with the terms of the award. If we find that you are not in

compliance, we will enforce the terms of this Agreement using the provisions of 2 C.F.R. § 200.338-.342.

- a. Will assist Grantee, within available appropriations, with such technical assistance as Agency deems appropriate in planning the Project and coordinating the plan with local official comprehensive plans for essential community facilities and with any State or area plans for the area in which the project is located.
  - b. At its sole discretion and at any time may give any consent, deferment, subordination, release, satisfaction, or termination of any or all of Grantee's grant obligations, with or without valuable consideration, upon such terms and conditions as Agency may determine to be (1) advisable to further the purpose of the grant or to protect Agency's financial interest therein and (2) consistent with both the statutory purposes of the grant and the limitations of the statutory authority under which it is made.
3. **Termination of This Agreement.** This Agreement may be terminated for cause in the event of default on the part of the Grantee or for convenience of the Agency and Grantee prior to the date of completion of the grant purpose. Termination for convenience will occur when both the Grantee and Agency agree that the continuation of the Project will not produce beneficial results commensurate with the further expenditure of funds. In all cases termination and notification will be in accordance with 2 C.F.R. § 200.339 and 200.340.

**C. Both Parties.** The Grantee and RHS agree to the following:

1. **Invalid Clauses.** The invalidity of any one or more phrases, clauses, sentences, paragraphs, or provisions of this Agreement shall not affect the remaining portions of the Agreement.
2. **Conflict between this Agreement and Other Applicable Regulations or Laws.** If there is a conflict between this Agreement and the applicable Program Regulation, the applicable Program Regulation shall prevail. If there is a conflict between this Agreement and another law or regulation, RHS shall seek a legal opinion to determine which provision applies.
3. **Dates.** When the date fixed for the performance of an act under this Agreement is on a weekend or Federal holiday, then the performance by the close of business on the next Federal work day shall have the same force and effect as if made performed or exercised on the specified date.

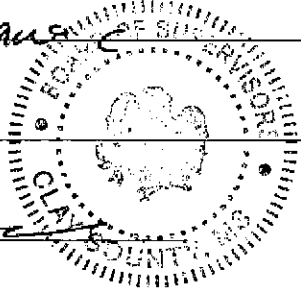
The signatories below certify that they have authority to enter into this Agreement.

Approved by an Authorized Representative of the Grantee:

X Shelton L. Deane  
Name (Please Print)

X President  
Title (Please Print)

X Shelton L. Deane      X 4/5/2021  
Signature      Date



Approved by the United States of America, Rural Housing Service by:

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Title (Please Print)

\_\_\_\_\_  
Signature      Date

**Attachment A**

**Approved Work Plan and Budget**

(The work plan must have time, scope, and outcome entries for each task.)



**ATTACHMENT B**

**I. Reporting Subawards and Executive Compensation.**

**A. Reporting of first-tier subawards.**

1. *Applicability.* Unless you are exempt as provided in paragraph d. of this award term, you must report each action that obligates \$25,000 or more in Federal funds that does not include Recovery funds (as defined in section 1512(a)(2) of the American Recovery and Reinvestment Act of 2009, Pub. L. 111-5) for a subaward to an entity (see definitions in paragraph e. of this award term).
2. *Where and when to report.*
  - a. You must report each obligating action described in paragraph a.1. of this award term to <http://www.fsrs.gov>.
  - b. For subaward information, report no later than the end of the month following the month in which the obligation was made. (For example, if the obligation was made on November 7, 2010, the obligation must be reported by no later than December 31, 2010.)
3. *What to report.* You must report the information about each obligating action that the submission instructions posted at <http://www.fsrs.gov> specify.

**B. Reporting Total Compensation of Recipient Executives.**

1. *Applicability and what to report.* You must report total compensation for each of your five most highly compensated executives for the preceding completed fiscal year, if:
  - a. the total Federal funding authorized to date under this award is \$25,000 or more;
  - b. in the preceding fiscal year, you received
    - i. 80 percent or more of your annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and
    - ii. \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards);
  - c. The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/execomp.html>)
2. *Where and when to report.* You must report executive total compensation described in paragraph b.1. of this award term:
  - a. As part of your registration profile at <http://www.ccr.gov>.
  - b. By the end of the month following the month in which this award is made, and annually thereafter.

**C. Reporting of Total Compensation of Subrecipient Executives.**

1. **Applicability and what to report.** Unless you are exempt as provided in paragraph d. of this award term, for each first-tier subrecipient under this award, you shall report the names and total compensation of each of the subrecipient's five most highly compensated executives for the subrecipient's preceding completed fiscal year, if
  - a. in the subrecipient's preceding fiscal year, the subrecipient received—
    - i. 80 percent or more of its annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 C.F.R. § 170.320 (and subawards); and
    - ii. \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts), and Federal financial assistance subject to the Transparency Act (and subawards); and
  - b. The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/execomp.htm>.)
2. **Where and when to report.** You must report subrecipient executive total compensation described in paragraph c.1. of this award term:
  - a. To the recipient.
  - b. By the end of the month following the month during which you make the subaward. For example, if a subaward is obligated on any date during the month of October of a given year ( *i.e.*, between October 1 and 31), you must report any required compensation information of the subrecipient by November 30 of that year.

**D. Exemptions.** If, in the previous tax year, you had gross income, from all sources, under \$300,000, you are exempt from the requirements to report:

1. Subawards, and
2. The total compensation of the five most highly compensated executives of any subrecipient.

**E. Definitions.** For purposes of this award term:

1. **Entity** means all of the following, as defined in 2 CFR part 25:
  - a. A Governmental organization, which is a State, local government, or Indian tribe;
  - b. A foreign public entity;
  - c. A domestic or foreign nonprofit organization;
  - d. A domestic or foreign for-profit organization;
  - e. A Federal agency, but only as a subrecipient under an award or subaward to a
  - f. non-Federal entity.
2. **Executive** means officers, managing partners, or any other employees in management positions.
3. **Subaward:**
  - a. This term means a legal instrument to provide support for the performance of any portion of the substantive project or program for which you received this award and that you as the recipient award to an eligible subrecipient.
  - b. The term does not include your procurement of property and services needed to carry out the project or program.

- c. A subaward may be provided through any legal agreement, including an agreement that you or a subrecipient considers a contract.
- 4. *Subrecipient* means an entity that:
  - a. Receives a subaward from you (the recipient) under this award; and
  - b. Is accountable to you for the use of the Federal funds provided by the subaward.
- 5. *Total compensation* means the cash and noncash dollar value earned by the executive during the recipient's or subrecipient's preceding fiscal year and includes the following (for more information see 17 C.F.R. § 229.402(c)(2)):
  - a. *Salary and bonus.*
  - b. *Awards of stock, stock options, and stock appreciation rights.* Use the dollar amount recognized for financial statement reporting purposes with respect to the fiscal year in accordance with the Statement of Financial Accounting Standards No. 123 (Revised 2004) (FAS 123R), Shared Based Payments.
  - c. *Earnings for services under non-equity incentive plans.* This does not include group life, health, hospitalization or medical reimbursement plans that do not discriminate in favor of executives, and are available generally to all salaried employees.
  - d. *Change in pension value.* This is the change in present value of defined benefit and actuarial pension plans.
  - e. *Above-market earnings on deferred compensation which is not tax-qualified.*
  - f. *Other compensation, if the aggregate value of all such other compensation (e.g. severance, termination payments, value of life insurance paid on behalf of the employee, perquisites or property) for the executive exceeds \$10,000.*

## ATTACHMENT C

### I. System for Award Management and Universal Identifier Requirements

- A. Requirement for Registration with the General Services Administration's System for Award Management. Unless you are exempted from this requirement under 2 CFR 25.110, you as the recipient must maintain the currency of your information in the CCR until you submit the final financial report required under this award or receive the final payment, whichever is later. This requires that you review and update the information at least annually after the initial registration, and more frequently if required by changes in your information or another award term.
- B. Requirement for Data Universal Numbering System (DUNS) Numbers.  
The Grantee must have a Dun & Bradstreet Universal Numbering System (DUNS) number in order to apply for, receive, and report on a Federal award.
- C. Definitions. For purposes of this award term:
  1. System for Award Management (SAM) means the Federal repository into which an entity must provide information required for the conduct of business as a recipient. Additional information about registration procedures may be found at the SAM Internet site (currently at <http://www.sam.gov>).
  2. Data Universal Numbering System (DUNS) number means the nine-digit number established and assigned by Dun and Bradstreet, Inc. (D & B) to uniquely identify business entities. A DUNS number may be obtained from D & B by telephone (currently 866-705-5711) or the Internet (currently at <http://fedgov.dnb.com/webform>).
  3. Entity, as it is used in this award term, means all of the following, as defined at 2 CFR part 25, subpart C:
    - a. A Governmental organization, which is a State, local government, or Indian Tribe;
    - b. A foreign public entity;
    - c. A domestic or foreign nonprofit organization;
    - d. A domestic or foreign for-profit organization; and
    - e. A Federal agency, but only as a subrecipient under an award or subaward to a non-Federal entity.
  4. Subaward:
    - a. This term means a legal instrument to provide support for the performance of any portion of the substantive project or program for which you received this award and that you as the recipient award to an eligible subrecipient.
    - b. The term does not include your procurement of property and services needed to carry out the project or program.
    - c. A subaward may be provided through any legal agreement, including an agreement that you consider a contract.

**LETTER OF INTENT TO MEET CONDITIONS**

Date 04-01-2021

TO: United States Department of Agriculture

USDA Rural Development

(Name of USDA Agency)

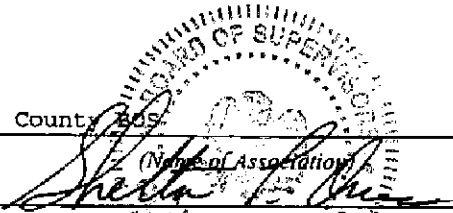
510 HWY 25 N Suite 3  
Starkville, MS 39759

(USDA Agency Office Address)

We have reviewed and understand the conditions set forth in your letter dated 04-01-2021. It is our intent to meet all of them not later than 05-31-2021.

Clay County, MS

BY X



(Name of Association)

President

(Title)



According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a persons is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0015 and 0570-0062. The time required to complete this information collection is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data, needed, and completing and reviewing the collection of information.

UNITED STATES DEPARTMENT OF AGRICULTURE  
 Rural Development Area Office  
 510 Highway 25 North, Suite 3  
 Starkville, Mississippi 39759

04/01/2021

Clay County BOS  
 Mr. Luke Lummus, President  
 P.O. Box 815  
 West Point, MS 39773-0815

Dear Mr. Lummus:

This letter establishes conditions that must be understood and agreed to by you before further consideration may be given to the Application for Federal Assistance. Any changes in project cost, source of funds, scope of services or any other significant changes (this includes significant changes in the Borrower's financial condition, operation, organizational structure or executive leadership) in the project or applicant must be reported to and approved by the Rural Development (RD) by written amendment to this letter. Any changes not approved by RD shall be cause for discontinuing processing of the application.

This letter is not to be considered as grant approval or as a representation as to the availability of funds. The docket must be completed on the basis of a grant not to exceed \$50,000.00.

If you desire that further consideration be given your application, please complete and return the following forms within 15 calendar days:

- A. Form RD 1942-46, "Letter of Intent to Meet Conditions."
- B. Form RD 1910-11, "Applicant Certification, Federal Collection Policies for Consumer or Commercial Debts."
- C. Form RD 3570-3, "Agreement for Administrative Requirements for Community Facility Grants" is enclosed for your review (you will be required to execute the agreement at the time of grant closing).

If the conditions set forth in this letter are not met within 90 calendar days from the date hereof, RD may rescind its offer.

1. Maximum Amount:

RD Grant: \$50,000.00

2. Contributions:

The applicant shall have contributed \$35,548.00 cash toward development of the project which shall be:

- a. X deposited in a special bank account for verification of your matching funds.

The applicant's contribution will be considered as the first funds expended, except State fire Rebate Funds. After providing for all authorized cost, any remaining RD grant funds will be refunded to RD.

### 3. Insurance and Bonding:

#### a. General

(1) You must provide evidence of adequate insurance and fidelity bond coverage by grant closing.

#### b. Fidelity Bond.

(1) Fidelity bond coverage must be provided for all persons who have access to funds. **If the grant funds will go directly to the provider at grant closing, no Fidelity Bond will be required.**

(2) The amount of coverage will normally approximate the total annual debt service requirements for the RD grant.

#### c. Insurance.

The following types of coverage must be maintained if appropriate for the type of project and entity involved:

(1) Liability and property damage insurance, **including vehicular coverage.**

(2) Worker's compensation in accordance with State laws.

### 4. Organization:

Evidence must be furnished that the organization is legally incorporated. Also, a list of the officials by name, title, and expiration dates of office terms must be furnished to RD.

### 5. Contract Documents and Bidding:

a. Specifications will be written to include all types of equipment available. Final specifications will be approved by RD and the State.

b. Qualified small, minority, and women's businesses should be utilized when possible.

c. Owner's procurement regulations must comply with the following standards:

(i) Owners shall maintain a written code or standards of conduct which shall govern the performance of their officers, employees, or agents engaged in the award and administration of contracts supported by RD funds. No employee, officer, or agent of the owner shall participate in the selection, award, or administration of a contract supported by RD funds if a conflict of interest, real or apparent, would be involved.

(ii) The owner's officers, employees, or agents shall neither solicit nor accept gratuities, favors, or anything of monetary value from contractors, potential contractors, or parties to sub agreements.

(iii) To the extent permitted by State or local law or regulations, the owner's standards of conduct shall provide for penalties, sanctions, or other disciplinary actions for violations of such standards by the owner's officers, employees, agents, or by contractors or their agents.

d. All procurement transactions, regardless of whether by sealed bids or by negotiation and without regard to dollar value, shall be conducted in a manner that provides maximum open and free competition. Procurement procedures shall not restrict or eliminate competition. Examples of actions that are considered to be restrictive of competition include, but are not limited to: Placing unreasonable requirements on firms in order for them to qualify to do business, noncompetitive practices between firms, organizational conflicts of interest, and unnecessary experience and bonding requirements. In specifying material(s), you and your consultant must consider all materials normally suitable for the project commensurate with sound engineering practices and project requirements.

e. Payment for major equipment should generally coincide with delivery of the usable equipment, along with any necessary title or certifications, to the borrower. Borrowers may not use RHS grant funds to make deposits on equipment not ready for delivery.

#### 6. Accounts, Records, Audits, and Reports Required:

- a. **Audits** – An annual audit under the Single Audit Act is required if you expend \$750,000 or more in Federal financial assistance per fiscal year. The total Federal funds expended from all sources shall be used to determine Federal financial assistance expended. Expenditures of interim financing are considered Federal expenditures.

All audits are to be performed in accordance with 2 CFR Part 200, as adopted by USDA through 2 CFR Part 400. Further guidance on preparing an acceptable audit can be obtained from the Agency. It is not intended that audits required by this part be separate and apart from audits performed in accordance with State and local laws. To the extent feasible, the audit work should be done in conjunction with those audits. The audit must be prepared by an independent licensed Certified Public Accountant, or a State or Federal auditor if allowed by State law, and must be submitted within 9 months of your fiscal year end.

If an audit is required, you must enter into a written agreement with the auditor and submit a copy to the Agency prior to the advertisement of bids. The audit agreement may include terms and conditions that the borrower and auditor deem appropriate; however, the agreement should include the type of audit or financial statements to be completed, the time frame in which the audit or financial statements will be completed, what type of reports will be generated from the services provided, and how irregularities will be reported.

#### 7. Other Conditions and Requirements:

a. You must execute Form AD-1049, "Certification Regarding Drug-Free Workplace Requirements (Grants) Alternative I - For Grantees Other than Individuals," to certify that you will provide a drug-free awareness program for employees.

b. You must execute Form AD-1047, "Certification Regarding Debarment, Suspension, and Other Responsibility Matters - Primary Covered Transaction," to certify that your organization is not debarred or suspended from Government assistance. You also must obtain a certification on Form AD-1048, "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," from any person or entity you do business with if the procurement contract is expected to equal or exceed \$25,000 as a result of this Government assistance. Form AD-1048 certifies that the parties involved are not debarred or suspended from Government assistance.



c. The Grantee understands that any property acquired or improved with federal grant funds may have use and disposition conditions which apply to the property as provided by 7 CFR parts 3015, 3016, or 3019 in effect at this time and as may be subsequently modified.

d. The Grantee understands that any sale or transfer of property is subject to the interest of the United States government in the market value in proportion to its participation in the project as provided by 7 CFR parts 3015, 3016, or 3019 in effect at this time and as may be subsequently modified.

8. Closing Instructions:

The grant will be closed in accordance with instructions to be furnished by RD, under the supervision of your attorney.

You should arrange a meeting as soon as practical and advise RD of the date, time, and place that the above conditions can be discussed with you and the City Council.

Sincerely,



for CLIFTON F. RUSSELL  
Area Director

Attachments

# **EXHIBIT F**

**RESOLUTION**

**Authorizing the Golden Triangle Planning and  
Development District  
to Prepare and Submit a  
Multimodal Capital Improvement Fund Application  
for Clay County Mississippi**

WHEREAS, Clay County, Mississippi has certain pressing Community Development needs; and

WHEREAS, the Mississippi Department of Transportation (Freight, Rails, Ports and Waterways Division) has available funds under the FY-2021 Multimodal Capital Improvement Fund (MCIF) Program; and

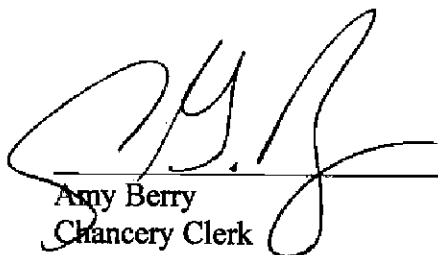
WHEREAS, Clay County, Mississippi is eligible to apply for said MCIF assistance; and

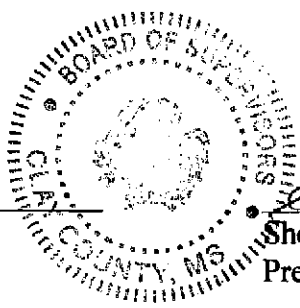
WHEREAS, the Golden Triangle Planning and Development District (GTPDD) has sufficient, experienced professional staff to prepare necessary application documents, and upon approval, to administer said MCIF projects;

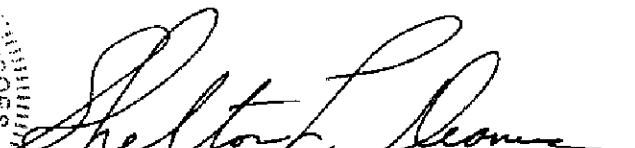
THEREFORE, BE IT RESOLVED, by the Clay County Board of Supervisors:

- (1) That the Golden Triangle Planning and Development District is hereby authorized to prepare an FY-2021 MCIF Application on behalf of the Clay County Board of Supervisors for the acquisition of material handling equipment for the bridge dock to be installed at the Clay County Port with Tom Soya Grain providing all matching funds; and
- (2) That, upon approval of said application, the Golden Triangle Planning and Development District is hereby authorized to administer said MCIF Project; and
- (3) That Shelton Deanes, in his official capacity as the President of the Clay County Board of Supervisors, is hereby authorized to sign all necessary documents, including Grant Agreements with the State of Mississippi, upon approval of said application by the Mississippi Department of Transportation.

SO ORDERED THIS THE 5th day of April, by the Clay County Board of Supervisors in a Regular Scheduled Meeting.

  
Amy Berry  
Chancery Clerk



  
Shelton Deanes  
President

# EXHIBIT G

11/12

800/27255  
Dishwashing Machine Agreement



AGREEMENT, made this date 2-23-21

between Auto Chlor System of MID SOUTH, LLC  
and Clay Co. Sheriff Dept DBA  
at West Broad St West Point MS 39773 hereinafter called "Customer."

1. Auto-Chlor System agrees to furnish an automatic dishwashing machine, Model AC A5, Serial No. C 11913 and all Detergent, Rinse Aid and Sanitizing compounds necessary for washing dishes. Any excess Detergent and Sanitizing compounds used will be charged to Customer at current prices and Customer further agrees to return all empty chemical containers or pay for them at current prices. Customer agrees to pay a fixed amount of \$210.00 at the beginning of each four (4) week period. Customer further agrees to pay an additional amount of 7.9 cents per cycle for all cycles washed in excess of 1000 during the four (4) week period (determined by counter attached to machine). Customer agrees to pay applicable sales taxes. This agreement shall last for 65 four-week periods (5 years). At the end of the total term, this agreement automatically renews itself for another period of 52 weeks on each annual anniversary unless either party gives the other party at least 2 four-week periods (56 days) notice in writing of its election not to renew the agreement.
2. Auto-Chlor System reserves the right to adjust prices if necessary. However, if Auto-Chlor System adjusts prices, the Customer may terminate this agreement by giving Auto-Chlor System 2 four-week periods (56 days) notice in writing to that effect, so long as that notice is given within twenty-eight (28) days after the price increase takes effect. If customer becomes delinquent in payment, Auto-Chlor System may, at its option, elect to interrupt the operation of the automatic dishwashing machine without notice, and/or, may elect to terminate this agreement by giving the customer seven days written notice of its election to do so. Upon such election, Customer shall owe Auto-Chlor System all back payments plus liquidated damages in the amount of 75% of the remaining rentals due to the end of this agreement. Upon Auto-Chlor System's election to terminate this agreement for non-payment, the Customer agrees voluntarily to surrender possession of the automatic dishwashing machine to Auto-Chlor System, and Auto-Chlor System shall have the right to remove the automatic dishwashing machine from the Customer's premises. Auto-Chlor System's election to terminate should not be construed as a waiver of any other rights Auto-Chlor System may have under this Agreement.
3. Auto-Chlor System will deliver the machine to Customer's place of business and will advise as to installation of the unit but Customer must arrange for necessary plumbing connections, sheet metal work, electrical work and racks at his own expense. Auto-Chlor System will thoroughly service the machine at regular intervals and supply all parts necessary for proper maintenance. Emergency service will be furnished free of charge.
4. The automatic dishwashing machine shall remain the property of Auto-Chlor System and Customer shall not transfer or encumber the machine, deliberately deface or damage the machine, assign this agreement, remove, alter or deface any numbers or description of the machine, or remove the machine from the location specified above or permit anyone other than its regular employees in the regular course of its business to use the machine.
5. Auto-Chlor System shall not be held liable for any damages by reason of failure of equipment to operate or faulty operation of equipment, nor be responsible for any direct consequential damage or losses resulting from this use or operation of furnished equipment.
6. In the event that it becomes necessary for Auto-Chlor System to employ attorney(s) to enforce collection of the sums due hereunder, or to enforce any of the agreements herein contained or to remove the dishwashing machine, Customer agrees to pay the reasonable attorney's fees, costs and expenses incurred by Auto-Chlor System in connection therewith. Should any part of this agreement be deemed unenforceable by a Court, the remainder of this Agreement remains in full force and effect.
7. Should Customer disconnect or remove automatic dishwashing machine or otherwise attempt to unilaterally terminate this agreement, except as set forth above, then Customer shall remain responsible for the payment of the fixed amount set forth above for the entire term of this Agreement.
8. Customer agrees to provide Auto-Chlor System with the name and address of the owner of the property upon which Customer's business is located and inform Auto-Chlor System of any change of ownership of the property so that Auto-Chlor System can give written notice to the landlord of Auto-Chlor System's ownership of the automatic dishwashing machine.
9. Auto-Chlor System may impose an energy surcharge on each invoice to offset petroleum or utility based increases in its cost of goods, vendor or transport energy surcharges, and/or fuel cost increases. Energy surcharges may be adjusted periodically depending on market conditions.

210.00  
Price

Clay Co. Sheriff Dept  
Customer Name  
[Signature]  
by (signature)  
L. Shelton L. Deaves  
Print Name & Title  
(662) 494-2896  
Customer's Phone Number  
604-6000252  
Customer's Social Security Number  
Local Box 11  
Type-Sole Prop., Partnership, or Corp.

Auto-Chlor System of MID SOUTH, LLC  
[Signature]  
by (signature)  
662-434-0205  
Local Sales & Service Phone Number  
 Customer's Building Owner's Name  
 Customer's Building Owner's Address  
 Customer's Building Owner's Phone Number

**Guaranty**

For consideration received, the undersigned (Guarantor) hereby guarantees to Lessor timely payment and full performance by Lessee of all obligations of Lessee under the above lease including expenses of collection thereof, including attorney's fees and court costs and also of all expenses including attorney's fees and court costs incurred in enforcing this guaranty. Guarantor further authorizes Lessor to investigate Guarantor's credit capacity and history. Lessor and Lessee may by subsequent agreement add, delete, increase, decrease, or otherwise alter any of their rights and obligations as to each other without notice to or consent from guarantor and without in any way affecting the liability of Guarantor hereunder, nor shall Guarantor's liability be affected by Lessee's assignment of the lease or sublease of any Equipment. Notice of acceptance of this guaranty as well as all demands, presentments, notices of protest and notices of every kind or nature including those of any action or nonaction on the part of Lessee, Lessor or any other party are hereby waived upon any default of Lessee. Lessor may, at its option proceed directly and at once, without notice against Guarantor to collect and recover the full amount hereby guaranteed or any portion thereof, without proceeding against Lessee or any other person or exercising of any other remedy available to Lessor whatsoever. Guarantor thereby waives the pleading of any statute of limitations as a defense to Guarantor's obligations hereunder to the full extent permitted by law. The invalidity or unenforceability of the above lease as to Lessee for whatever reason shall not affect the enforceability of this guaranty. If more than one guarantor, obligation of each shall be joint and several.

If the equipment is not returned at the end of the term of the lease, or if the equipment is not returned after Lessee has defaulted in any manner specified in the lease, and has failed to cure such default after a reasonable period of time, the undersigned personally guarantees the fair market value of said equipment at the commencement of the lease which is \$4,800.00, to be decreased 0.5% for each month paid under the lease.

Dated as of the date of the lease

[Signature] WITNESS  
[Signature] GUARANTOR (Individual) SIGNATURE  
[Signature] GUARANTOR (Individual) PRINT

# **EXHIBIT H**



STATE OF MISSISSIPPI  
DEPARTMENT OF PUBLIC SAFETY  
DIVISION OF PUBLIC SAFETY PLANNING

TATE REEVES  
GOVERNOR

SEAN J. TINDELL  
COMMISSIONER

March 30, 2021

Shelton L. Deanes, President  
Clay County Board of Supervisors  
348 W. Broad St.  
West Point, MS 39773

Subject: Project Number: 18LB1131  
Effective Date: 04/1/2021

Dear President Deanes:

We are pleased to inform you that the Division of Public Safety Planning has approved your sub-grant application for the **Local Law Enforcement Grant** in the amount of **\$4,460.00**. Enclosed are the following contractual items. Please read these documents to determine your requirements under the sub-grant.

1. Sub-grant Signature Sheet (1 copy)
2. Budget Summary (initial)
3. Cost Summary Support Sheet(s) (initial)
4. OJP Statement of Special Conditions (initial)
5. OJP Sub-grant Standard Assurances; (Attachment A)
6. Certification of Equal Employment Opportunity (Attachment B)
7. Federal Civil Rights Compliance Checklist (Attachment C-1)
8. Civil Rights Training Certification Form (Attachment C-2)
9. Certification Regarding Debarment (Attachment F)
10. Certification Regarding Lobbying (Attachment G)
11. Match Certification (Attachment H)
12. Discrimination Complaint Policies and Procedures (Attachment E)

We particularly want to bring to your attention to the requirement that **items 1-11 should be signed or initialed in blue ink and returned to this office no later than April 20, 2021**. Please retain a copy for your files. If there are questions concerning this award, please contact Melinda Padfield at (601) 977-3757.

Sincerely,

  
Emberly K. Holmes  
Office Director

Enclosures

**SUBGRANT SIGNATURE SHEET**  
**DIVISION OF PUBLIC SAFETY PLANNING**  
**OFFICE OF JUSTICE PROGRAMS**  
 1025 Northpark Drive  
 Ridgeland, MS 39157  
 Phone: (601) 977-3700 Fax: (601) 977-3764

<b>1. Name, Address, &amp; Phone Number:</b>  Clay County Sheriff 348 W. Broad St. West Point, MS 39773 662-494-2896 cwilson@claysheriffms.org	<b>2. Effective Date:</b> 04/01/21
	<b>3. Sub-grant Number:</b> 18LB1131
	<b>4. Grant Identifier:</b> 2018-MU-BX-0165
	<b>5. Beginning &amp; Ending Dates:</b> 04/01/21 to 09/30/21
	<b>6. Sub-grant Payment Method:</b> Cost Reimbursement <input checked="" type="checkbox"/> Other:

**7. The following funds are obligated:**

Budget Category	Source of Funds						Total Program Budget
	Federal	%	State/Local	%	In-Kind	%	
Personnel							
Fringe Benefits							
Equipment							
Travel							
Commodities	\$4,460.00	75	\$1,487.00	25			\$5,947.00
Contractual Services							
Miscellaneous							
Indirect Costs							
<b>TOTAL</b>	<b>\$4,460.00</b>		<b>\$1,487.00</b>				<b>\$5,947.00</b>

**8. The Sub-grantee agrees to operate the program outlined in this sub-grant in accordance with all provisions of this sub-grant as included herein. The following sections are attached and incorporated into this agreement.**

Statement of Special Conditions	Civil Rights Training Certification
Standard Assurances	Certification Regarding Debarment
Certification Regarding Equal Employment	Certification Regarding Lobbying
Civil Rights Compliance Checklist	Match Certification Form (if applicable)

<b>AGENCY APPROVAL</b>	<b>SUBGRANTEE ACCEPTANCE</b>
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<b>9. Typed Name &amp; Title of Approving DPSP Official:</b> Emberly K. Holmes Office Director	<b>10. Typed Name &amp; Title of Authorized Sub-grantee Official:</b> Shelton L. Deanes, President Clay County BOS
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<b>11. Signature:</b> 	<b>Date:</b> 03/30/2021	<b>12. Signature:</b> 	<b>Date:</b>
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**DIVISION OF PUBLIC SAFETY PLANNING  
BUDGET SUMMARY SHEET**

<b>1. Applicant Agency: Clay County Sheriff</b>			
<b>2. Sub-grant Number</b>	<b>3. Grant Identification Number</b>	<b>4. Beginning Date</b>	<b>Ending Date</b>
18LB1311	2018-MU-BX-0165	04/01/21	09/30/21
<b>6. Submitted as part of (Check One)</b>	<b>A. Funding Request:</b> X	<b>B. Modification Number:</b>	<b>C. Modification Effective Date:</b>

<b>Funding Sources</b>						
<b>8. For DPSP Use Only</b>	<b>9. Activity</b>	<b>Federal</b>	<b>State</b>	<b>Program Income</b>	<b>Other (Local-Private)</b>	<b>Total</b>
	Byrne/JAG Local Law	\$4,460.00			\$1,487.00	\$5,947.00
<b>TOTAL</b>		\$4,460.00			\$1,487.00	\$5,947.00

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**DIVISION OF PUBLIC SAFETY PLANNING  
COST SUMMARY SUPPORT SHEET**

<b>1. Applicant Agency: Clay County Sheriff</b>					<b>Page 1 of 1</b>		
<b>2. Sub-grant Number</b>	<b>3. Grant Identifier Number</b>	<b>4. Beginning Date</b>	<b>5. Ending Date</b>				
18LB1311	2018-MU-BX-0165	04/01/21	09/30/21				
<b>6. Activity: Byrne JAG Local Law</b>							
<b>7. DSP - Use Only</b>	<b>8. Category</b>	<b>10. Description of item and/or Basis for Valuation</b>			<b>11. Budget</b>		
	<b>9. Line Item</b>		<b>Federal</b>	<b>All Other</b>	<b>Total</b>		
	<b>Commodities</b>	24 – duty boots @ \$105.80ea. = \$2,539.00 24 – dress boots @ \$142.00 ea. = \$3,408.00			<b>\$4,460.00</b>	<b>\$1,487.00</b>	<b>\$5,947.00</b>
		<b>Total</b>	<b>\$4,460.00</b>	<b>\$1,487.00</b>	<b>\$5,947.00</b>		

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**Mississippi Department of Public Safety Planning  
Office of Justice Programs (OJP)  
JAG Standard Award Policy and Special Conditions**

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Pursuant to subgrantee management policies, the following special conditions are mandatory and are hereby made a part of this subgrant award:

**Acceptance Procedures** - The Subcontract Signature Sheet constitutes the operative document obligating and reserving Federal funds for use by the subgrantee in execution of the program or project covered by the award. Such obligation may be terminated without further cause if the subgrantee fails to affirm its timely utilization of the grant by signing and returning the signed acceptance to the Division of Public Safety Planning (DPSP) **WITHIN 21 DAYS** from the date of award. No federal funds shall be disbursed to the recipient until the signed acceptance has been received.

The recipient agrees to sign and submit the following forms along with the Subcontract Signature Sheet:

- Budget and Cost Summary Sheets – (each sheet initialed)
- FY 2019 Certification & Assurance by Chief Executive of the Applicant Government
- OJP JAG Statement of Special Conditions
- Subgrant Standard Assurances (attachment A)
- Nondiscrimination and Equal Employment Opportunity (attachment B)
- Civil Rights Certification Form Check List (attachment C)
- Certificate of Exemption for Hiring Practices (attachment D)
- Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions (attachment F)
- Certification Regarding Lobbying (attachment G)
- Match Verification Requirement Form (attachment H)

The recipient also, agrees to comply with the financial and administrative requirements set forth in the current edition of the Office of Justice Programs (OJP) Financial Guide.

[www.ojp.gov](http://www.ojp.gov)

**Special Cancellation Condition for Subgrantees:**

- (1) **Commencement with 60 Days.** If a project is not operational within 60 days of the original starting date of the grant period, the subgrantee must report by letter to the DPSP the steps taken to initiate the project, the reasons for the delay, and the expected starting date.
- (2) **Operational within 90 Days.** If a project is not operational within 90 days of the original starting date of the grant period, the subgrantee must submit a



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## **Mississippi Department of Public Safety Planning Office of Justice Programs (OJP) JAG Standard Award Policy and Special Conditions**

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of program/project point of contact with phone number and e-mail; amount of JAG funding received and in which fiscal year; and a brief summary describing the program/project and its impact.

### **Prior Approval for Travel Request**

Subgrantee agrees to request in writing prior approval to attend any related training or conferences within 45 days of the event. Such training should be program related. Travel request should identify those who will be in attendance, a detailed budget of the estimated cost and contain a justification for the training. When seeking reimbursement all receipts must be submitted to reflect the cost of the assigned trip such as: hotel receipts minus any incidentals outside of the room cost, meal receipts, parking receipts, transposition receipts, gas receipts, (1) baggage receipt per traveler and any other approved travel cost's associated.

**Use of Federal Funds** - The recipient understands and agrees that it cannot use any federal funds, either directly or indirectly, in support of the enactment, repeal, modification or adoption of any law, regulation or policy, at any level of government, without written approval of DPSP.

### **Certifications of Compliance with 8 U.S.C. § 1373 and 1644**

No State, unit of local government or official that receives an award under the FY 2019 Byrne JAG Program may prohibit or in any way restrict any government entity or official from sending or receiving information regarding citizenship or immigration status as described in 8 U.S.C. 1373 (a); or (2) a government entity or agency from sending, requesting, or receiving, maintaining, or exchanging information regarding immigration status as described in either 8 U.S.C. 1373(b) or 1644. Any prohibition (or restriction) that violates this condition is an "information-communication restriction" under this award.

### **JAG – Subrecipient DHS question requirement**

The sub-recipient agrees to obtain a properly executed certification of compliance with 8 U.S.C. 1373 along with responses to the questions identified in the program solicitation as "Information regarding Communication with the Department of Homeland Security (DHS) and/or Immigration and customs enforcement (ICE), and that certification and question responses have been submitted to BJA and BJA approves the subaward or that certification and question responses have been submitted to BJA and 30 days have passed since the submission without a denial from BJA.



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## **Mississippi Department of Public Safety Planning Office of Justice Programs (OJP) JAG Standard Award Policy and Special Conditions**

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the applicable special conditions of this award. The OJP Programs will review the oversight of the grantees financial and programmatic activities, files and will monitor the specific outcomes and benefits attributable to the use of grant funds by subrecipients. In addition, the recipient agrees to submit, upon request, all documentation of its policies and procedures.

**Subawards – DUNS and CCR for Reporting** - The recipient agrees to submit with the award document, documentations of a valid DUNS profile and an active registration with the Central Contractor Registration (CCR) database. A printed copy of the DUNS and CCR is required for grant funding. If the CCR expires within the awarding cycle, the grantee agrees to submit an updated CCR no later than 15 days after the expiration date to the designated awarding program under the Office of Justice Programs.

**System for Award Management – (SAM)** – The recipient must comply with applicable requirements regarding the System for Award Management (SAM), currently accessible at <https://www.sam.gov/>. This includes applicable requirements regarding registration with SAM, as well as maintain the currency of information in SAM.

**Employment Eligibility Verification for hiring under the award** – The recipient must ensure that, as part of the hiring process for any position within the United States that is or will be funded in whole or in part with award funds, the recipient properly verifies the employment eligibility of the individual who is being hired, consistent with the provisions of 8 U.S.C. 1324a(a)(1) and (2).

As part of the recordkeeping for the award (including pursuant to the Part 200 Uniform Requirements), maintain records of all employment eligibility verifications pertinent to compliance with this award condition in accordance with Form I-9 record retention requirements, as well as records of all pertinent notifications and trainings.

**Staff involved in the hiring process** - For purposes of this condition, persons “who are or will be involved in activities under this award” specifically includes (without limitation) any and all recipient officials or other staff who are or will be involved in the hiring process with respect to a position that is or will be funded (in whole or in part) with award funds.

**Employment eligibility confirmation with E-Verify** - For purposes of satisfying the requirement of this condition regarding verification of employment eligibility, the recipient may choose to participate in, and use, E-Verify ([www.e-verify.gov](http://www.e-verify.gov)), provided an appropriate person authorized to act on behalf of the recipient uses E-Verify and follows the proper E-Verify procedures, including in the event of a “Tentative Nonconfirmation” or a “Final



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## Mississippi Department of Public Safety Planning Office of Justice Programs (OJP) JAG Standard Award Policy and Special Conditions

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**Imminent Breach of Personally Identifiable Information (PII)** – The recipient must have written procedures in place to respond in the event of an actual or imminent “breach” (OMB M-17-12) if it (1) creates, collects, uses, processes, stores, maintains, disseminates, discloses, or disposes of “personally identifiable information (PII)” (2 CFR 200.79) within the scope of an OJP grant-funded program or activity, or (2) uses or operates a Federal information system” (OMB Circular A-130). The recipient’s breach procedures must include a requirement to report actual or imminent breach of PII to an OJP Program Manager no later than 24 hours after an occurrence of an actual breach, or the detection of an imminent breach.

**Requirements pertaining to prohibited conduct related to trafficking in persons** – The recipient must comply with all applicable requirements (including requirements to report allegations) pertaining to prohibited conduct related to the trafficking of persons, whether on the part of recipients or individuals defined as employees of the recipient.

The details of the recipient’s obligations related to prohibited conduct related to trafficking in persons are posted on the OJP website at [https://ojp.gov/funding/Explore/ProhibitedConduct - Trafficking.htm](https://ojp.gov/funding/Explore/ProhibitedConduct-Trafficking.htm) (Award condition: Prohibited conduct by recipients and subrecipients related to trafficking in persons (including reporting requirements and OJP authority to terminate award), and are incorporated by reference here.

**Misuse of award funds** - The recipient understands and agrees that misuse of award funds may result in a range of penalties, including suspension of current and future funds, suspension or debarment from federal grants, recoupment of monies provided under an award, and civil and/or criminal penalties.

**Texting While Driving** - Pursuant to Executive Order 13513, “Federal Leadership on Reducing Text Messaging While Driving.” 74 Fed. Reg. 51225 (October 1, 2009), the department encourages recipients to adopt and enforce policies banning employees from text messaging while driving any vehicle during the course of performing work funded by this grant, and to establish workshop safety policies and conduct education, awareness, and other outreach to decrease crashes caused by distracted drivers.

**Reporting Potential Fraud, Waste, and Abuse, and Similar Misconduct** - The recipient must promptly refer to the DPSP and DOJ-OIG any credible evidence that a principal, employee, agent, contractor, subgrantee, subcontractor, or other person has either 1) submitted a false claim for grant funds under the False Claims Act; or 2) committed a criminal or civil violation of laws pertaining to fraud, conflict of interest, bribery, gratuity, or similar misconduct involving grant funds. This condition also applies to any subrecipients. Potential fraud, waste, abuse, or misconduct should be reported to the DPSP by mail:



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**Mississippi Department of Public Safety Planning  
Office of Justice Programs (OJP)  
JAG Standard Award Policy and Special Conditions**

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**Law Enforcement Task Forces – Required Training**

Within 120 days of award acceptance, each current member of a law enforcement task force funded with award funds who is a task force commander, agency executive, task force officer, or other task force member of equivalent rank, must complete required online (internet-based) task force training. Additionally, all future task force members must complete this training once during the period of performance for this award, or once every four years if multiple OJP awards include this requirement.

The required training is available free of charge online through the BJA-funded Center for Task Force Integrity and Leadership ([www.ctfli.org](http://www.ctfli.org)). The training addresses task force effectiveness, as well as other key issues including privacy and civil liberties/rights, task force performance measurement, personnel selection, and task force oversight and accountability. If award funds are used to support a task force, the recipient must compile and maintain a task force personnel roster, along with course completion certificates.

Additional information regarding the training is available through BJA's web site and the Center for Task Force Integrity and Leadership ([www.ctfli.org](http://www.ctfli.org)).

**Certification of Body Armor “Mandatory Wear” Policies**

The recipient agrees to submit a signed certification that all law enforcement agencies receiving body armor purchased with funds from this award have a written “mandatory wear” policy in effect. The recipient must keep signed certifications on file for any subrecipients planning to utilize funds from this award for ballistic-resistant and stab-resistant body armor purchases. This policy must be in place for at least all uniformed officers before any funds from this award may be used by an agency for body armor. There are no requirements regarding the nature of the policy other than it be a mandatory wear policy for all uniformed officers while on duty.

**Body Armor – Compliance with NIJ Standards**

Ballistic-resistant and stab-resistant body armor purchased with JAG award funds may be purchased at any threat level, make or model, from any distributor or manufacturer, as long as the body armor has been tested and found to comply with applicable National Institute of Justice ballistic or stab standards and is listed on the NIJ Compliant Body Armor Model List (<https://nij.gov/>). In addition, ballistic-resistant and stab-resistant body armor purchased must be American-made. The latest NIJ standard information can be found here: <https://nij.gov/topics/technology/body-armor/pages/safety-initiative.aspx>.



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**Mississippi Department of Public Safety Planning  
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Compliance with these requirements will be monitored during the annually programmatic onsite monitoring visit or during a programmatic desk audit.

By initialing and signing, your agency agrees to comply and adhere to all federal and state guidelines established governing the Mississippi Department of Public Safety, Office of Justice Grant Programs.


Clay County MS  
Agency's Name

18LB1131  
Subgrant Award Number

Shelton L. Deaves  
Authorized Official (Please Print)

President  
Authorized Official Title

Shelton L. Deaves  
Authorized Official (Signature)



4/5/2021  
Date



## ATTACHMENT A

### OFFICE OF JUSTICE PROGRAMS SUBGRANT STANDARD ASSURANCES

The applicant/subgrantee assured and certified that:

1. It possesses legal authority to apply for and receive the grant; that a resolution, motion or similar action has been duly adopted or passed as an official act of the applicant's governing body, authorizing the filing of the application, including all understanding and assurances contained therein, and directing and authorizing the person identified as the official representative of the applicant to act in connection with the application and to provide such additional information as may be required.
2. It will comply with Title VI of the Civil Rights Act of 1964 (P.L. 88-352). Recipient will comply (and will require any subgrantees or contractors to comply) with any applicable federal nondiscrimination requirements, which may include the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. § 3789d); the Victims of Crime Act (42 U.S.C. § 10604(e)); the Violence Against Women Act (42 U.S.C. § 3796(gg)); the Juvenile Justice and Delinquency Prevention Act of 2002 (42 U.S.C. § 5672(b)); the Civil Rights Act of 1964 (42 U.S.C. § 2000d); the Rehabilitation Act of 1973 (29 U.S.C. § 794); the Americans with Disabilities Act of 1990 (42 U.S.C. §§ 12131-34); the Education Amendments of 1972 (20 U.S.C. §§ 1681, 1683, 1685-86); the Age Discrimination Act of 1975 (42 U.S.C. §§ 6101-07); 28 C.F.R. pt. 31 (U.S. Department of Justice Regulations – OJJDP Grant Programs); 28 C.F.R. pt. 42 (U.S. Department of Justice Regulations – Nondiscrimination; Equal Employment Opportunity; Policies and Procedures); Ex. Order 13279 (equal protection of the laws for faith-based and community organizations); and 28 C.F.R. pt. 38 (U.S. Department of Justice Regulations – Equal Treatment for Faith-Based Organizations). Additional information about civil rights obligations of grantees can be found at <http://www.ojp.usdoj.gov/ocr/>.

In the event a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, national origin, religion, sex, or disability against a recipient of funds, the recipient will forward a copy of the finding to the U.S. Department of Justice, Office of Justice Programs, Office for Civil Rights (OCR), and the Mississippi Department of Public Safety, Division of Public Safety Planning, Office of Justice Programs (MDPS DPSP OJP).

Recipient will complete MDPS's *Standard Assurance Conditions for Subgrantees* document regarding its Equal Employment Opportunity Plan (EEOP) obligations.

The recipient will determine whether it is required to formulate an EEOP in accordance with 28 CFR 42.301 *et. seq.* If the applicant is not required to formulate an EEOP, it will submit a certification form to the U.S. Department of Justice, Office of Justice Programs, Office for Civil Rights (OCR), and the MDPS DPSP OJP indicating that it is not required to develop an EEOP. If the applicant is required to develop an EEOP, but is not required to submit the EEOP to the OCR, the applicant will submit a certification form to the OCR and the MDPS certifying that it has an EEOP on file which meets the applicable requirements. If the applicant is awarded a grant of \$500,000 or more and has fifty or more employees, it will submit a copy of its EEOP to the OCR and the MDPS. Non-profit organizations, Indian Tribes, and medical and education institutions are exempt from the EEOP requirement, but are required to submit a certification form to the OCR to claim the exemption (a copy should also be submitted to the MDPS).

Additional information regarding a grantee's EEOP requirements can be found at [http://www.ojp.usdoj.gov/about/ocr/eeop\\_comply.htm](http://www.ojp.usdoj.gov/about/ocr/eeop_comply.htm).

As clarified by Executive Order 13166, Improving Access to Services for Persons with Limited English

9. It will insure that the facilities under its ownership, lease or supervision which shall be utilized in the accomplishment of the project are not listed on the Environmental Protection Agency's (EPA) list of Violating Facilities and that it will notify the federal agency and the state grantor agency of the receipt of any communication from the Director of the EPA Office of Federal Activities indicating that a facility to be used in the project is under consideration for listing by the EPA.
10. It will comply with the flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234, 87 Stat. 975). Section 102(a) requires, on and after March 2, 1975, the purchase of flood insurance in communities where such insurances is available as a condition for the receipt of any federal financial assistance for construction or acquisition purposes for use in any area that has been identified by the Secretary of the Department of Housing and Urban Development as an area having special flood hazards. The phrase "federal financial assistance" includes any form of loan, grant, guaranty, insurance payment rebate, subsidy, disaster assistance loan or grant, or any other form of direct or indirect federal assistance.
11. It will assist the federal grantor agency in its compliance with Section 106 of the National Historic Preservation Act of 1966 as amended (16 U.S.C. 470), Executive Order 11593, and the Archaeological and Historic Preservation Act of 1966 (16 U.C.S. 469a-1 et seq.) by (a) consulting with the State Historic Preservation Officer on the conduct of investigations, as necessary, to identify properties listed in or eligible for inclusion in the National Register of Historic Places that are subject to adverse effects (see CFR Part 800.8) by the activity, and notifying the federal grantor agency of the existence of any such properties, and by (b) complying with all requirements established by the federal grantor agency and the state grantor agency to avoid or mitigate adverse effects upon such properties.
12. It will insure that no member of the governing or policymaking body of applicant/grantee shall cast a vote or influence any matter which has a direct bearing on services to be provided by that member or any organization which such member directly or indirectly represents, or on any matter that would financially benefit such member or any organization such member represents.
13. It will comply with the provisions of the Single Audit Act of 1984 (P.L. 98-502) and if it does not meet minimum requirements as established in the Single Audit Act of 1984, it will consult with the OMSA, DFA, in regard to audit requirements.

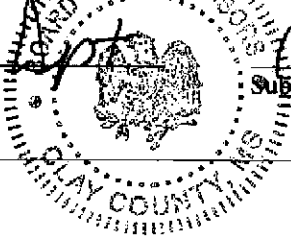
We have read and understand all Subgrantee Standard Assurances as shown above and agree to fully comply with these conditions in the operation of the subgrant.

Clay Co Sheriff  
 Name of Agency or Organization

Shelton L. Dean  
 Chief Administrative Officer

Sept 18 2021  
 Date

FLB1131  
 Subgrant Number



**ATTACHMENT B**

**STANDARD ASSURANCE CONDITIONS FOR SUBGRANTEES**

**CERTIFICATION OF COMPLIANCE WITH REGULATIONS  
NONDISCRIMINATION; EQUAL EMPLOYMENT OPPORTUNITY**

**IN COOPERATION WITH THE FEDERAL  
OFFICE FOR CIVIL RIGHTS, OFFICE OF JUSTICE PROGRAMS,  
UNITED STATES DEPARTMENT OF JUSTICE**

**Instructions:** Complete the blank lines below by entering identifying information which is found on the Subgrant Signature Sheet. Also, read this form completely, identify and enter, under Part I, the name of the organization's designated person responsible for reporting civil rights findings; and then in Part II, mark or check only one box which indicates the appropriate certification that applies to your organization. The organization's Authorized Official must sign this form on page 3. Please return the original form to the Office of Justice Programs, Division of Public Safety Planning, 1025 Northpark Drive, Ridgeland, Mississippi 39157, within 45 days of the grant award or implementation date. You must also forward a copy of the completed form to the organization's civil rights representative whom you have identified.

Subgrant Number: 18LB1131 Award Amount \$ 5,947.00

Subgrant Project Title:  
\_\_\_\_\_  
\_\_\_\_\_

Organizational Name (Subgrantee or Funded Entity):  
Clay County Sheriff  
\_\_\_\_\_

Address:  
348 W. Broad Street  
West Point, MS 39073  
\_\_\_\_\_  
\_\_\_\_\_

Telephone Number: (662) 494-2896

Subgrantee Duration:

Beginning Date: 04/01/2021 Ending Date: 09/30/2021

Project Director's Name, Address and Telephone Number:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**AUTHORIZED OFFICIAL'S CERTIFICATION**

As the Authorized Official for the above identified Subgrantee, I certify, by my signature below, that I have read and am fully cognizant of our duties and responsibilities under this Certification.

**PART I. Requirements of Subgrant Recipients:** All subgrant recipients (regardless of the type of entity or the amount awarded) are subject to prohibitions against discrimination in any program or activity, and must take reasonable steps to provide meaningful access for persons with limited English proficiency.

I certify that this agency will maintain data (and submit when required) to ensure that: our services are delivered in an equitable manner to all segments of the service population; our employment practices comply with Equal Opportunity Requirements, 28 CFR 42.207 and 42.301 et. seq.; our projects and activities provide meaningful access for people with limited English proficiency as required by Title VI of the Civil Rights Act, (See also, 2000 Executive Order #13166).

I also certify that the person in this agency or unit of government who is responsible for reporting civil rights findings of discrimination will submit these findings, if any, to the Office of Justice Programs, Division of Public Safety Planning (DPSP), Mississippi Department of Public Safety, within 45 days of the finding, and/or if the finding occurred prior to the grant award beginning date. A copy of this Certification will be provided to this person, as identified here:

The person responsible for reporting civil rights findings of discrimination is:  
(Name, address and telephone number)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PART II. Equal Employment Opportunity Plan (EEOP) Certifications:** Check the one box that applies to this subgrantee agency during the period of the grant duration noted above. (Check only the one appropriate certification (A, B, C1 or C2 below).

**CERTIFICATION "A" [NO EEOP IS REQUIRED IF (1), (2) OR (3) APPLY]** This is the Certification that most non-profits and small agencies will use. Check (1), (2) and/or (3) as they apply to your entity: (Here, more than one may apply)

- \_\_\_\_\_ (1) is an educational, medical or non-profit institution or an Indian Tribe; and/or
- \_\_\_\_\_ (2) has less than 50 employees; and/or;
- \_\_\_\_\_ (3) was awarded through this grant from the Office of Justice Programs, DPSP, less than \$25,000 in federal U.S. Department of Justice funds.

Therefore, I hereby certify that this funded entity is not required to maintain an EEOP, pursuant to 28 CFR 42.301, et. seq.

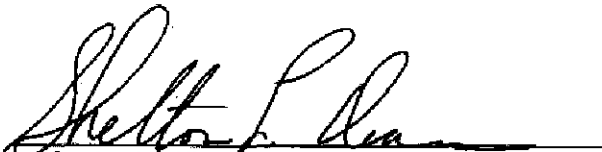
- CERTIFICATION "B" (EEOP MUST BE ON FILE)** This funded entity, as a for-profit entity or a state or local government having 50 or more employees, was awarded, through this grant from the Office of Justice Programs, DPSP, more than \$25,000, but less than \$500,000 in federal U.S. Department of Justice funds.

Therefore, I hereby certify that the funded entity has formulated an Equal Employment Opportunity Plan in accordance with 28 CFR 42.301, et.seq., subpart E, that it has been signed into effect by the proper authority and disseminated to all employees, and that it is on file for review or audit by officials of the Office of Justice Programs, DPSP, or the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice, as required by relevant laws and regulations.

- CERTIFICATION "C" (EEOP MUST BE SUBMITTED)** This funded entity, as a for-profit entity or a state or local government having 50 or more employees, was awarded, through this grant from the Office of Justice Programs, DPSP, more than \$500,000 in federal U.S. Department of Justice funds.

Therefore, I hereby certify that the funded entity will submit, within 45 days of the award, an EEOP or an EEOP Short Form, that will include a section specifically analyzing the subgrantee (implementing) agency.

As the Authorized Official for the above Subgrantee, I certify, by my signature below, that I have read and am fully cognizant of our duties and responsibilities under this Certification.

  
Authorized Official's Signature  
(Subgrantee)

4/5/2021  
Date

Shelton L. Deaves  
Typed or Printed Name

President  
Person's Organizational Title

.....

*This original signed form must be returned to the Office of Justice Programs, Division of Public Safety Planning, Department of Public Safety, within 45 days of the grant award beginning date. You must also forward a signed copy to the person you identified under "Part 1" on page 1. The Office of Justice Programs, DPSP will forward a copy to the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice.*

**ATTACHMENT C-1**

**Federal Civil Rights Compliance Checklist**

1. If the sub-recipient is required to prepare an Equal Employment Opportunity Plan (EEO) in accordance with 28 C.F.R. §§42.301-.308, does the sub-recipient have an EEO on file for review?

- Yes
- No

If yes, on what date did the sub-recipient prepare the EEO? \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

*Please attach a copy of the EEO to this document.*

2. Has the sub-recipient submitted an EEO Short Form to the Office for Civil Rights (OCR), Office of Justice Programs (OJP), U.S. Department of Justice (DOJ), if required by 28 C.F.R. 42.301-.308? If the sub-recipient is not required to submit an EEO Short Form to the OCR, has it submitted a certification form to the OCR claiming a partial or complete exemption from the EEO requirements?

- Yes – submitted an EEO Short Form
- Yes – submitted a certification
- No

If the sub-recipient prepared an EEO Short Form, on what date did the sub-recipient prepare it?

\_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

3. How does the sub-recipient notify program participants and beneficiaries that it does not discriminate on the basis of race, color, national origin, religion, sex, disability, and age in the delivery of services (e.g. posters, inclusion in brochures or other program materials, etc.)?

Comments:

4. How does the sub-recipient notify employees that it does not discriminate on the basis of race, color, national origin, religion, sex and disability in employment practices (e.g. posters, dissemination of relevant orders or policies, inclusion in recruitment materials, etc.)?

Comments:

5. Does the agency have written policies or procedures in place for notifying program beneficiaries how to file complaints alleging discrimination by the sub-recipient with the {State Administering Agency (DPSP)} or the OCR?

Yes

No

If yes, an explanation of these policies and procedures:

6. If the sub-recipient has 50 or more employees and receives DOJ funding of \$25,000 or more, has the sub-recipient taken the following actions:

a. Adopted grievance procedures that incorporate due process standards and provide for the prompt and equitable resolution of complaints alleging a violation of the DOJ regulations implementing Section 504 of the Rehabilitation Act of 1973, found at 28 C.F.R. Part 42, Subpart G, which prohibit discrimination on the basis of a disability in employment practices and the delivery of services?

Yes

No

b. Designated a person to coordinate compliance with the prohibitions against disability discrimination contained in 28 C.F.R. Part 42, Subpart G?

Yes

No

c. Notified participants, beneficiaries, employees, applicants, and others that the program does not discriminate on the basis of disability?

Yes

No

If sub-recipient does not have 50 or more employees and receives less than \$25,000 in DOJ funding, indicate this in the comments here.

Comments:

7. If the sub-recipient operates an education program or activity, has the sub-recipient taken the following actions:

a. Adopted grievance procedures that provide for the prompt and equitable resolution of complaints alleging a violation of the DOJ regulations implementing Title IX of the Education Amendments of 1972, found at 28 C.F.R. Part 54, which prohibit discrimination on the basis of sex.

- Yes
- No

b. Designated a person to coordinate compliance with the prohibitions against sex discrimination contained in 28 C.F.R. Part 54?

- Yes
- No

c. Notified participants for admission and employment, employees, students, parents, and others that the agency does not discriminate on the basis of sex in its educational programs or activities?

- Yes
- No

If the sub-recipient does not operate an education program or activity indicate this in the comments here.

Comments:

8. Has the sub-recipient complied with the requirement to submit to the OCR any findings of discrimination against the agency issued by a federal or state court or federal or state administrative agency on the grounds of race, color, religion, national origin, or sex?

- Yes
- No

Comments:



9. What steps has the sub-recipient taken to provide meaningful access to its programs and activities to persons who have limited English proficiency (LEP)?

Comments, including an indication of whether the sub-recipient has developed a written policy on providing language access services to LEP person(s):

10. Does the sub-recipient conduct any training for its employees on the requirements under federal civil rights laws?

- Yes  
 No

Comments:

11. If the sub-recipient conducts religious activities as part of its programs or services, does the sub-recipient do the following:

- a. Provide services to everyone regardless of religion or religious belief?

- Yes  
 No

- b. Ensure that it does not use federal funds to conduct inherently religious activities, such as prayer, religious instructions, or proselytization, and that such activities are kept separate in time or place from federally-funded activities?

- Yes  
 No

- c. Ensure that participation in religious activities is voluntary for beneficiaries of federally-funded programs?

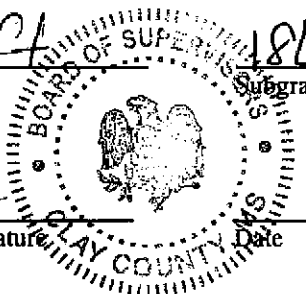
- Yes  
 No

12. Was a copy of the Mississippi Office of Justice Program Civil Rights Compliance PowerPoint Presentation provided to your agency?

- Yes  
 No

Federal Civil Rights Compliance Checklist Signature Page

<u>Clay County Sheriff</u> Name of Agency or Organization (Please Print)	<u>18LB1131</u> Subgrant Number
<u>Shelton L. Dean</u> Authorized Official or Authorized Designee Signature	<u>4/5/2021</u> Date
_____ Office of Justice Programs Monitor's Signature	_____ Date



Attachment C-2

Office of Justice Programs  
Division of Public Safety Planning

Civil Rights Training Certification Form

The, \_\_\_\_\_, hereby certifies that our agency has received Civil Rights Training required by the Office of Civil Rights and the Mississippi Division of Public Safety Planning in order to administer federal funds according to federal guidelines. Our agency further certifies that we have and/or will notify all employees, clients, customers, and program participants that discrimination is prohibited and the procedures for filing a complaint of discrimination.

State of \_\_\_\_\_  
[County] of \_\_\_\_\_  
Signed [or attested] before me on \_\_\_\_\_ by \_\_\_\_\_

(Date) (Names(s) of Individual(s)) \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of notarial officer  
Stamp

\_\_\_\_\_  
Title of office  
[My commission expires: \_\_\_\_\_.]

\_\_\_\_\_  
Authorized Signatory Official

## **ATTACHMENT E**

### **OFFICE OF JUSTICE PROGRAMS DISCRIMINATION COMPLAINT POLICIES AND PROCEDURES**

#### **I. PURPOSE**

These policy and procedures establish requirements for all clients, customers, program participants, or consumers of the Division of Public Safety Planning (DPSP) and the DPSP's subrecipients to administer programs designed to recruit, select, and promote employees on the basis of their relative ability, knowledge, and skills. The selection process and criteria shall assure the fair and equitable treatment of all applicants and employees without regards to political affiliation, race, color, national origin, marital status, sex, religion, creed, age, or handicap. The DPSP will ensure the subrecipients comply with all applicable federal laws regarding employment discrimination.

#### **II. POLICY**

It is the policy of the DPSP to provide equal employment opportunity for all individuals regardless of race, color, national origin, marital status, sex, religion, creed, age, physical handicap, disability, or political affiliation. In order to assure non-discriminatory grant administration, DPSP promotes non-discriminatory practices and procedures in all phases of federal-state grant administration. Furthermore, DPSP's equal employment policy prohibits any form of unlawful discrimination based on the foregoing and other considerations made unlawful by federal or state laws.

All individuals have the right to participate in programs and activities operated by the DPSP and DPSP subrecipients regardless of race, color, national origin, sex, religion, disability, and age. The DPSP will ensure that the DPSP and its subrecipients are in compliance with the following statutes and regulations:

- Title VI of the Civil Rights Act of 1964, which prohibits discrimination on the basis of race, color or national origin in the delivery of services (42 U.S.C. & 2000d), and the DOJ implementing regulations at 28 C.F.R. Part 42, Subpart C;
- The Omnibus Crime Control and Safe Streets of Act of 1968, which prohibits discrimination on the basis of race, color, national origin, religion, or sex in the delivery of services and employment practices (42 U.S.C. & 3789d(c)(1), and the DOJ implementing regulations at 28 C.F.R. Part 42, Subpart D;
- Section 504 of the Rehabilitation Act of 1973, which prohibits discrimination on the basis of disability in the delivery of services and employment practices (29 U.S.C. & 794), and the DOJ implementing regulations at 28 C.F.R. Part 42, Subpart G;
- Title II of the Americans with Disabilities Act of 1990, which prohibits discrimination on the basis of disability in the delivery of services and employment practices (42 U.S.C. & 12132), and the DOJ implementing regulations at 28 C.F.R. Part 35;

- Title IX of the Education Amendments of 1972, which prohibit discrimination on the basis of sex in educational programs (20 U.S.C. & 1681), and the DOJ implementing regulations at 28 C.F.R. Part 54; and
- The Age Discrimination Act of 1975, which prohibits discrimination on the basis of age in the delivery of services (42 U.S.C. & 6102), and the DOJ implementing regulations at 28 C.F.R. Part 42, Subpart I.
- The DOJ regulations on the Equal Treatment for Faith-Based Organizations, which prohibit organizations from using DOJ funding on inherently religious activities (28 C.F.R. Part 38).

\*\*These laws prohibit any agency from retaliating against an individual for taking action or participating in action to secure rights protected by these laws.

The Americans with Disabilities Act of 1990 (ADA) requires state agencies to make reasonable accommodations for the known physical and mental limitations of otherwise qualified individuals with disabilities who are employees, clients, customers, program participants or consumers provided such accommodations do not cause undue hardships to state agency operations. It is the policy of DPSP that the above stated individuals are provided equal employment and grant opportunities and have access to the same privileges and benefits as individuals without disabilities.

### III. DEFINITIONS

#### Discrimination

To make a difference in treatment or favor on a basis other than individual merit.

#### Retaliation

It is against the law for someone to penalize or discriminate against an individual because:

- A discrimination complaint has been filed;
- The complainant cooperates with the discrimination complaint;
- The complainant cooperates with the enforcement of a discrimination complaint;
- The complainant complies with anti-discrimination laws.

#### Harassment

Harassment is conduct that is directed at an individual because of race, religion, gender, sexual orientation, disability, national origin, etc.

Harassment can include:

Threats;  
Slurs or epithets;  
Threatening acts;  
Posting offensive materials on walls, bulletin boards, e-mails, etc.

To be considered harassment, conduct must:

Be serious and frequent enough to create a hostile environment;  
Interfere with the ability to work, live, or enjoy a public place.

#### Complaint Coordinator

The DPSP staff member designated to maintain records of all complaints received including complaints forms, supporting documentation, acknowledgement of complaint receipt letters and resolution letters. All complaint records will be filed in a secured cabinet and access will be restricted to the Complaint Coordinator (Steve Coleman, DPSP Attorney) and Office of Justice Program's Office Director.

#### **IV. COMPLAINT PROCEDURES**

If you believe you have been discriminated against because of your race, color, or national origin, including limited English proficiency (LEP), by programs or activities receiving federal financial assistance, please contact the DPSP Complaint Coordinator or designee administering federal-state programs.

If you believe that you have been excluded from participation in, denied the benefits of, or subjected to discrimination on the basis of your gender by any Office of Justice Program or activity receiving federal financial assistance, contact the DPSP Complaint Coordinator or designee administering federal-state programs.

The following complaint policies and procedures will be adhered to:

- A. Any applicant for an employment position or employee who has reason to believe that they have been unlawfully discriminated against by the subrecipients of federal funds may file a complaint in accordance with the DPSP complaint procedures.
- B. The Complaint Procedure begins with the individual who is filing the complaint, by completing the Title VI Form and/or preparing and submitting a written statement. The statement should contain the name, address, and telephone number of the individual or authorized representative filing the complaint; a thorough and specific description of the situation, incident, or condition; identity of witnesses, if any; the resolution the individual is seeking; and the signature of the individual filing the complaint properly dated by the complainant.

- C. The complaint will be submitted to the Complaint Coordinator of the DPSP within seven (7) business days after the alleged violation occurred.
- D. The Complaint Coordinator will have three (3) business days to provide the complainant written acknowledgement of the complaint.
- E. The Complaint Coordinator will promptly conduct a review of the issues involved in the complaint to ascertain whether or not an information resolution of the complaint can be achieved. If an information resolution is possible and mutually agreeable by the parties involved, the coordinator will facilitate arrangement of the resolution and make a record of this agreement. If no informal resolution is possible, the coordinator will conduct an investigation of the complaint and provide a written response to the complaint outlining possible accommodations, if any, for resolution of the complaint. This response shall be approved by the agency head or appointing authority and must be completed no later than fifteen (15) business days of the DPSP's receipt of the complaint, when possible.
- F. If a complaint is not presented within the timeframe as set forth, the complaint will be considered waived absent and extended by written mutual consent. If the Complaint Coordinator does not answer or acknowledge receipt of the complaint within the specified timeframe, the complainant may elect to treat the complaint as denied at that point and immediately appeal the complaint to Equal Employment Opportunity Commission (EEOC) or the appropriate state or local fair employment practices agency or human rights commission unless an extension of time is granted to the coordinator to respond by written mutual agreement.
- G. The DPS shall notify employees and subrecipients of their rights regarding discrimination and make available copies of complaint procedures, policies, and forms. Complaints of discrimination can be filed directly with the DPS or with the Office of Civil Rights (OCR).

To file a complaint alleging discrimination in programs or activities administered by the DPS, please print and fill out the appropriate complaint form:

## Title VI Complaint Form

Please review and complete the Title VI Complaint form. This form provides DPSP with information to be reviewed. **It is not a formal complaint.** Once we receive your completed questionnaire, we will review it and then contact you for more information.

To avoid delays in processing, please submit only one complaint form to SOCR (either by mail, , or in person) regarding the said matter.

First Name:

Last Name:

Middle Initial:

Street Address:

City:

State:

Zip Code:

County:

Home Phone: ( )

Work Phone: ( )

Cell Phone: ( )

Which telephone number is preferred to contact you?    Home            Work            Cell

Email Address:

---

How did you hear about SOCR?

Do you require language interpretation?    No            Yes

If yes, what kind:

Do you require sign language interpretation?    No    Yes

If yes, what kind:

Who can we contact if we are unable to reach you?

Name:



Daytime Phone: ( )

Relationship:

---

Name of person(s) whom you believe discriminated against you:

When did this occur (please select a date)?

Where did this occur?

Please provide detailed account of alleged discrimination? (1,000 characters max)

Have you tried to resolve the issue through a grievance process, due process hearing, or some other method? No Yes

If yes, what method:

What is the status of that process:

Have you filed the same complaint with anyone else? No Yes

If yes, please provide date:

---

Signature of Complainant

---

Date

## V. TRAINING

The DPSP will provide periodic training for subrecipients on the complaint policies and procedures, including an employee's responsibility to refer discrimination complaints from employees or applicants of the DPSP subrecipients to the Complaint Coordinator.

The DPSP provide PowerPoint presentations of OCR training materials to subrecipients at Annual Implementation Conferences, as well as provide these materials along with technical assistance to subrecipients during project monitoring visits.

The DPSP can be contacted by submitting correspondence to:

The Division of Public Safety Planning  
Office of Justice Programs (OJP)  
ATTN: OJP Office Director  
1025 Northpark Drive  
Ridgeland, MS 39157

**ATTACHMENT F**

**U.S. DEPARTMENT OF JUSTICE  
OFFICE OF JUSTICE PROGRAMS  
OFFICE OF THE COMPTROLLER**

Certification Regarding  
Debarment, Suspension, Ineligibility and Voluntary Exclusion  
Lower Tier Covered Transactions  
(Sub-Recipient)

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 28 CFR Part 67, Section 67.510, Participants' responsibilities. The regulations were published as Part VII of the May 26, 1988 Federal Register (pages 19160-19211).

(BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS ON REVERSE)

- (1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- (2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Name and Title of Authorized Representative

Signature

Date

Name of Organization

Address of Organization

*Revised May 2012*

## Instructions for Certification

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction", "debarred", "suspended", "ineligible", "lower tier covered transaction", "participant", "person", "primary covered transaction", "principal", "proposal", and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549.
5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion—Lower Tier Covered Transactions," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may check the Non-procurement List.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant are not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation on this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

*Revised May 2012*

**ATTACHMENT G**

**CERTIFICATION REGARDING LOBBYING**

Each person shall file the most current edition of this certification and disclosure form, if applicable, with each submission that initiates agency consideration of such person for an award of a federal contract, grant, or cooperative agreement of \$100,000 or more; or Federal loan of \$150,000 or more.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 or not more than \$100,000 for each such failure.

The undersigned certifies, to the best of his or her knowledge and belief, that;

- (1) No Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any Federal agency, a Member of Congress, an officer or employee of Congress, or any employee of a member of Congress, in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan or cooperative agreement.
- (2) If any non-Federal funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any Federal agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall initial here \_\_\_\_\_ and complete and submit "Disclosure of Lobbying Activities", in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers and that all sub-recipients shall certify and disclose accordingly.

\_\_\_\_\_  
Name and Address of Organization

\_\_\_\_\_  
Name of Authorized Individual  
Signature and Date

\_\_\_\_\_  
Subgrant Number

*Revised May 2012*

**ATTACHMENT H**

**Office of Justice Programs  
Division of Public Safety Planning**

**Match Certification Form**

Name of Organization or Unit of Government: \_\_\_\_\_

Program for which Match is being certified under: \_\_\_\_\_

Grant Award # \_\_\_\_\_

The \_\_\_\_\_, hereby certifies that it will provide the matching funds or services in the amount required for this subgrant according to federal guidelines. It further certifies that the match is from a non-federal source that is not being used to match other federal grants. The match will be derived from the following source(s):

Source(s)	Amount	Type (Cash/In-kind)
1. _____	\$ _____	_____
2. _____	\$ _____	_____
3. _____	\$ _____	_____
4. _____	\$ _____	_____

\_\_\_\_\_  
Signature

Date

**Note: If in-kind match will be used, the agency must provide the Division of Public Safety Planning with an analysis that shows how the value of the match was determined.**

Revised May 2012

## JAG AWARD PACKET RETURN CHECKLIST

Please check the list below against the items you are returning to ensure that all pertinent information is enclosed. **Do not return Attachment E. It is intended as an example of what complaint policies and forms should look like.**

- One Signature Sheet signed in blue ink.
- Budget Summary Sheet (initialed)
- Cost Summary Sheet (initialed)
- OJP JAG Statement of Special Conditions
- OJP Sub-grant Standard Assurances (Attachment A)
- Certification of Equal Employment Opportunity (Attachment B)
- Federal Civil Rights Compliance Checklist (Attachment C-1)
- Civil Rights Training Certification Form (Attachment C-2)
- Certification Regarding Debarment (Attachment F)
- Certification Regarding Lobbying (Attachment G)
- Match Certification (Attachment H)
- Document Return Checklist

All of the above award documents (**signed in blue ink**) are enclosed and returned by:

---

Sub-grant Contact Person

---

Date

# EXHIBIT I



**FUNDING GRANT AGREEMENT**

This Funding Grant Agreement (hereinafter the "Grant") is entered into between the Department of Finance and Administration (hereinafter the "DFA") and Clay County for the purpose of establishing the agreed upon conditions under which the DFA may disburse funds to assist Clay County in paying costs associated with the local project (hereinafter the "Project") specified in Section 45 of House Bill 1730, 2020 Regular Legislative Session, Laws of 2020 (hereinafter the "Act"). This Grant is entered into pursuant to, and subject to the terms of the Act, which authorizes a Grant not to exceed \$100,000.00 for the Project (the "Grant Funds"). (PLEASE NOTE THAT IT IS YOUR RESPONSIBILITY TO SPEND THE GRANT FUNDS RECEIVED FROM THE STATE IN ACCORDANCE WITH THE ACT.)

**RECITALS**

**WHEREAS**, the Act establishes the 2020 Clay County - Una Community Center and Park Improvements Fund for the purpose of providing funds to Clay County to pay the costs of the Project; and

**WHEREAS**, pursuant to the Act, the State Bond Commission, on behalf of the State of Mississippi (hereinafter the "State"), issued general obligation bonds of the State (hereinafter the "Bonds") to fund the Project and certain other projects and programs; and

**WHEREAS**, Clay County shall maintain the Grant Funds in a separate bank account; and

**WHEREAS**, the Act authorizes the DFA, within its discretion, to utilize funds in the 2020 Clay County - Una Community Center and Park Improvements Fund for purposes of entering into this Grant to finance all or a portion of the Project; and

**WHEREAS**, the DFA has requested Clay County to maintain on file the documentation listed in "Exhibit A" attached hereto and incorporated herein by reference, to the extent required by the State's bidding laws; and

**WHEREAS**, Clay County agrees to make every effort to expend the Grant Funds within thirty-six (36) months from the date of receipt from the State; and

**WHEREAS**, Clay County agrees that if Grant Funds are remaining at the completion of the Project, said funds shall be returned to the State to be applied to debt service on the Bonds; and

**WHEREAS**, Clay County agrees to provide quarterly reports to the DFA that summarize the expenditure of the Grant Funds and also provide an update on the status of the Project. The quarterly reports must be provided on a form prescribed by the DFA and must include all invoices and bank statements associated with the reported expenditures. The first quarterly report shall be provided within ninety (90) days of the effective date of this Grant, and thereafter within thirty (30) days of each calendar quarter end. Clay County shall also provide to the DFA a final report no more than thirty (30) days after final expenditure of the Grant Funds, summarizing the

expenditures and use of the proceeds upon completion of the Project and include all invoices that have not previously been submitted; and

**WHEREAS**, the DFA finds, consistent with the Act, that it is in the best interest of the DFA and Clay County that the Grant Funds on deposit in the **2020 Clay County - Una Community Center and Park Improvements Fund** for Clay County should be disbursed to Clay County and that Clay County shall directly administer the expenditure of such Grant Funds for the Project.

**NOW THEREFORE, IT IS MUTUALLY AGREED BY THE DEPARTMENT OF FINANCE AND ADMINISTRATION AND CLAY COUNTY AS FOLLOWS:**

Each and all of the facts and findings set forth in the preamble clauses of this memorandum are hereby found and determined to be true and accurate and are incorporated herein by this reference thereto as though set forth again in words and figures.

The DFA, pursuant to the Act, shall disburse the Grant Funds from the **2020 Clay County - Una Community Center and Park Improvements Fund** upon the written request of Clay County to pay the costs associated with the Project.

Clay County certifies and agrees to use all Grant Funds received from the **2020 Clay County - Una Community Center and Park Improvements Fund** solely for the costs of the Project as set forth in the Act and upon the terms and provisions of this Grant. Failure on the part of Clay County to adhere to this provision of the Grant may result in immediate action by the State to revoke the Grant and seek return of the Grant Funds.

Clay County agrees to spend the Grant Funds within thirty-six (36) months from the date of receipt. Failure on the part of Clay County to adhere to this provision of the Grant may result in immediate action by the State to revoke the Grant and seek return of the Grant Funds.

Clay County agrees to properly and competitively execute procurements in accordance with State law. Failure to adhere may cause the DFA to revoke the Grant and seek return of the Grant Funds. Further, Clay County agrees to maintain on file the documentation listed in Exhibit A attached hereto and incorporated herein, in accordance with the law and the recitals of this Grant.

Clay County agrees to provide the DFA quarterly notarized reports as set forth hereinabove, in a format prescribed by the DFA. The first quarterly report shall be provided within ninety (90) days of the effective date of this Grant, and thereafter within thirty (30) days of each calendar quarter end. Clay County shall also provide the DFA with a final report summarizing the expenditures and use of the Grant Funds proceeds no more than thirty (30) days after final expenditure of the Grant Funds.

Clay County agrees to maintain copies of all invoices, bank statements and similar documentation for each expenditure of all funds received from the **2020 Clay County - Una Community Center and Park Improvements Fund** sufficient to satisfy and confirm, to DFA's satisfaction, that such Grant Funds have been expended solely for the costs of the Project as authorized and provided by the Act

Clay County agrees to administer the Project with respect to construction to be completed in accordance with the state procurement laws.

Clay County agrees that if any Grant Funds are remaining at the completion of the Project, the remaining Grant Funds shall be returned to the State to be applied to debt service.

All notices or information pursuant to this Grant shall be provided as follows:

**Clay County**

**Attn: Shelton L. Deanes, Board President**  
Post Office Box 815  
West Point, Mississippi 39773  
Phone: 662-494-3124  
Email: [aberry@claycounty.ms.gov](mailto:aberry@claycounty.ms.gov)

**Department of Finance and Administration**

**Attention: Bond Advisory Division**  
501 North West Street, Suite 1301A  
Jackson, Mississippi 39201  
Phone: (601) 359-3402  
Fax: (601) 359-2405  
Email: [BondAdvisory@dfa.ms.gov](mailto:BondAdvisory@dfa.ms.gov)

This GRANT shall be effective from and after the final signature date.

IN WITNESS WHEREOF, the parties have affixed their signatures on the dates indicated below.

**MISSISSIPPI DEPARTMENT OF FINANCE AND ADMINISTRATION**

By:  3/23/21  
Liz Welch, Executive Director Date

**CLAY COUNTY**

By:  3/8/2021  
Shelton L. Deanes, Board President Date

## EXHIBIT A

**Clay County** shall maintain on file, the following items in relation to Project:

1. Proof of Advertisement (i.e. copy of the advertisement, MPTAP and/or procurement portal posting, etc.) for any Request for Qualifications (RFQ), Request for Proposals (RFP) or Invitation for Bid (IFB).
2. A copy of the Program of Work for project.
3. A copy of the Construction Documents and Invitation for Bid Documents and any other IFB, RFQ, RFP Documents including resultant Contracts for which funds will be expended.
4. A list of bidders/respondents, including the Bid Tabulation Form/Register of Proposals. For construction awards, include recommendation of the Professional for the award of contract. For items procured by RFQ or RFP, include evaluation committee tally sheets/overall scoring in support of award decision.
5. A copy of Contract award for construction of project.
6. A copy of all contractor pay requests and professional pay requests and approval of payments for said services.
7. All invoices.
8. All bank statements.

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**FUNDING GRANT AGREEMENT**

This Funding Grant Agreement (hereinafter the "Grant") is entered into between the Department of Finance and Administration (hereinafter the "DFA") and Clay County for the purpose of establishing the agreed upon conditions under which the DFA may disburse funds to assist Clay County in paying costs associated with the local project (hereinafter the "Project") specified in Section 47 of House Bill 1730, 2020 Regular Legislative Session, Laws of 2020 (hereinafter the "Act"). This Grant is entered into pursuant to, and subject to the terms of the Act, which authorizes a Grant not to exceed \$500,000.00 for the Project (the "Grant Funds"). **(PLEASE NOTE THAT IT IS YOUR RESPONSIBILITY TO SPEND THE GRANT FUNDS RECEIVED FROM THE STATE IN ACCORDANCE WITH THE ACT.)**

**RECITALS**

**WHEREAS**, the Act establishes the **2020 Clay County - Road and Bridge Improvements Fund** for the purpose of providing funds to Clay County to pay the costs of the Project; and

**WHEREAS**, pursuant to the Act, the State Bond Commission, on behalf of the State of Mississippi (hereinafter the "State"), issued general obligation bonds of the State (hereinafter the "Bonds") to fund the Project and certain other projects and programs; and

**WHEREAS**, Clay County shall maintain the Grant Funds in a separate bank account; and

**WHEREAS**, the Act authorizes the DFA, within its discretion, to utilize funds in the **2020 Clay County - Road and Bridge Improvements Fund** for purposes of entering into this Grant to finance all or a portion of the Project; and

**WHEREAS**, the DFA has requested Clay County to maintain on file the documentation listed in "Exhibit A" attached hereto and incorporated herein by reference, to the extent required by the State's bidding laws; and

**WHEREAS**, Clay County agrees to make every effort to expend the Grant Funds within thirty-six (36) months from the date of receipt from the State; and

**WHEREAS**, Clay County agrees that if Grant Funds are remaining at the completion of the Project, said funds shall be returned to the State to be applied to debt service on the Bonds; and

**WHEREAS**, Clay County agrees to provide quarterly reports to the DFA that summarize the expenditure of the Grant Funds and also provide an update on the status of the Project. The quarterly reports must be provided on a form prescribed by the DFA and must include all invoices and bank statements associated with the reported expenditures. The first quarterly report shall be provided within ninety (90) days of the effective date of this Grant, and thereafter within thirty (30) days of each calendar quarter end. Clay County shall also provide to the DFA a final report no more than thirty (30) days after final expenditure of the Grant Funds, summarizing the

expenditures and use of the proceeds upon completion of the Project and include all invoices that have not previously been submitted; and

**WHEREAS**, the DFA finds, consistent with the Act, that it is in the best interest of the DFA and **Clay County** that the Grant Funds on deposit in the **2020 Clay County - Road and Bridge Improvements Fund for Clay County** should be disbursed to **Clay County** and that **Clay County** shall directly administer the expenditure of such Grant Funds for the Project.

**NOW THEREFORE, IT IS MUTUALLY AGREED BY THE DEPARTMENT OF FINANCE AND ADMINISTRATION AND CLAY COUNTY AS FOLLOWS:**

Each and all of the facts and findings set forth in the preamble clauses of this memorandum are hereby found and determined to be true and accurate and are incorporated herein by this reference thereto as though set forth again in words and figures.

The DFA, pursuant to the Act, shall disburse the Grant Funds from the **2020 Clay County - Road and Bridge Improvements Fund** upon the written request of **Clay County** to pay the costs associated with the Project.

**Clay County** certifies and agrees to use all Grant Funds received from the **2020 Clay County - Road and Bridge Improvements Fund** solely for the costs of the Project as set forth in the Act and upon the terms and provisions of this Grant. Failure on the part of **Clay County** to adhere to this provision of the Grant may result in immediate action by the State to revoke the Grant and seek return of the Grant Funds.

**Clay County** agrees to spend the Grant Funds within thirty-six (36) months from the date of receipt. Failure on the part of **Clay County** to adhere to this provision of the Grant may result in immediate action by the State to revoke the Grant and seek return of the Grant Funds.

**Clay County** agrees to properly and competitively execute procurements in accordance with State law. Failure to adhere may cause the DFA to revoke the Grant and seek return of the Grant Funds. Further, **Clay County** agrees to maintain on file the documentation listed in Exhibit A attached hereto and incorporated herein, in accordance with the law and the recitals of this Grant.

**Clay County** agrees to provide the DFA quarterly notarized reports as set forth hereinabove, in a format prescribed by the DFA. The first quarterly report shall be provided within ninety (90) days of the effective date of this Grant, and thereafter within thirty (30) days of each calendar quarter end. **Clay County** shall also provide the DFA with a final report summarizing the expenditures and use of the Grant Funds proceeds no more than thirty (30) days after final expenditure of the Grant Funds.

**Clay County** agrees to maintain copies of all invoices, bank statements and similar documentation for each expenditure of all funds received from the **2020 Clay County - Road and Bridge Improvements Fund** sufficient to satisfy and confirm, to DFA's satisfaction, that such Grant Funds have been expended solely for the costs of the Project as authorized and provided by the Act

Clay County agrees to administer the Project with respect to construction to be completed in accordance with the state procurement laws.

Clay County agrees that if any Grant Funds are remaining at the completion of the Project, the remaining Grant Funds shall be returned to the State to be applied to debt service.

All notices or information pursuant to this Grant shall be provided as follows:


**Clay County**  
**Attn: Shelton L. Deanes, Board President**  
Post Office Box 815  
West Point, Mississippi 39773  
Phone: 662-494-3124  
Email: [aberry@claycountymiss.gov](mailto:aberry@claycountymiss.gov)

**Department of Finance and Administration**  
**Attention: Bond Advisory Division**  
501 North West Street, Suite 1301A  
Jackson, Mississippi 39201  
Phone: (601) 359-3402  
Fax: (601) 359-2405  
Email: [BondAdvisory@dfa.ms.gov](mailto:BondAdvisory@dfa.ms.gov)

This GRANT shall be effective from and after the final signature date.

IN WITNESS WHEREOF, the parties have affixed their signatures on the dates indicated below.

**MISSISSIPPI DEPARTMENT OF FINANCE AND ADMINISTRATION**

By:   
Liz Welch, Executive Director

3/25/21  
Date

**CLAY COUNTY**

By:   
Shelton L. Deanes, Board President

3/8/2021  
Date

## **EXHIBIT A**

**Clay County** shall maintain on file, the following items in relation to Project:

1. Proof of Advertisement (i.e. copy of the advertisement, MPTAP and/or procurement portal posting, etc.) for any Request for Qualifications (RFQ), Request for Proposals (RFP) or Invitation for Bid (IFB).
2. A copy of the Program of Work for project.
3. A copy of the Construction Documents and Invitation for Bid Documents and any other IFB, RFQ, RFP Documents including resultant Contracts for which funds will be expended.
4. A list of bidders/respondents, including the Bid Tabulation Form/Register of Proposals. For construction awards, include recommendation of the Professional for the award of contract. For items procured by RFQ or RFP, include evaluation committee tally sheets/overall scoring in support of award decision.
5. A copy of Contract award for construction of project.
6. A copy of all contractor pay requests and professional pay requests and approval of payments for said services.
7. All invoices.
8. All bank statements.

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# EXHIBIT J

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**WORKSITE AGREEMENT**

This worksite agreement is between \_\_\_\_\_, a Gateway Workforce Services Programs and \_\_\_\_\_, the Worksite Agency. The purpose of this agreement is to set forth the guidelines to provide eligible individuals with basic work skills and career exploration in order that they will be better able to compete for available jobs in the local labor market.

The Gateway Workforce Services Programs are provided in The Mississippi Partnership Workforce Area and are funded with various federal and state funding streams including but not limited to:

- Workforce Innovation & Opportunity Act (WIOA) Funds for Adult, Dislocated Workers, Youth, & National Dislocated Worker Grant
- Mississippi Department of Human Services (MDHS) Funds

The Gateway Workforce Services Program Providers for \_\_\_\_\_ county are:

Program	Gateway Workforce Services Provider	Contact Person	Phone Number
WIOA Adult			
WIOA In-School Youth			
WIOA Out-of-School Youth			
Career STEP Program			

**Section I. Worksite Agency Information**

<b>Worksite Agency Name:</b>			
<b>Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Contact Person:</b>	<b>Contact Email:</b>	<b>Contact Phone Number:</b>	
<b>Worksite Regular Functions:</b>		<b>Worksite Hours:</b>	
<b>Does the Worksite Agency have an employee that currently serves or who served during the past year on the Mississippi Partnership Local Workforce Development Board?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Section II. – Regulations for Worksite Agency**

1. The Worksite Agency ensures that:
  - a. Sufficient work is available to occupy the intern,
  - b. Working conditions are sanitary and safe, and each intern will work in a safe manner
  - c. Interns will be utilized only in the agreed upon job(s) with each Gateway Workforce Services Provider. Interns may not be employed on construction jobs or operation or maintenance of a facility that is used for religious instruction or worship.
  - d. Regulations regarding Child Labor Laws will be followed when applicable.
  - e. No currently employed worker shall be displaced by any intern participant, including partial displacement such as reduction in hours of non-overtime work, wages, or employment benefits.
  - f. No intern shall, on the grounds of race, color, religion, sex, national origin, disability, or political affiliation or belief, be discriminated against or denied employment as a participant.
  
2. The worksite will comply with the regulations of the Workforce Innovation and Opportunity Act, The Mississippi Partnership, and/or Gateway Workforce Services Provider.

3. The Worksite Agency agrees to:
  - a. Notify the Gateway Workforce Services Provider if an intern quits, fails to report to work for two consecutive days, or has excessive unexcused absences from work.
  - b. Notify the Gateway Workforce Services Provider if a problem arises with an intern so that the problem may be solved or the intern removed from the worksite.
  - c. Have a sign-out procedure at the Worksite Agency's main office if the intern will be working in different Worksite Agency locations.
  - d. Provide supervision by a competent adult that will not exceed a 1:5 supervisor to Gateway Intern ratio.
  - e. Complete timesheets for each intern and submit it to the Gateway Workforce Services Provider.
  - f. Notify the Gateway Workforce Services Provider of any written or oral complaint relating to the conditions of this agreement and will assist in any investigation undertaken, whether by the Mississippi Department of Employment Security, the Mississippi Partnership Local Workforce Development Area, or the Mississippi Department of Human Services to ascertain facts relevant to the complaint.
  
4. The Worksite Agency understands that:
  - a. Hours each intern may work will be negotiated between the Worksite Agency and the Gateway Workforce Services Providers. If the intern is permitted to work beyond the negotiated limit, the wages for hours worked in excess of the limit will become the responsibility of the worksite agency.
  - b. Three Rivers Planning & Development District and/or other state or federal representatives may monitor the worksite to ensure that both the Gateway Workforce Services Provider and the worksite agency are in compliance with this agreement.

**Section II. Regulations for the Gateway Workforce Services Provider**

1. The Gateway Workforce Services Provider will provide forms to be used to record time and attendance, which must be signed by the intern and Worksite Agency and submitted to the Gateway Workforce Services Provider.
2. The Gateway Workforce Services Provider, in conjunction with the Worksite Agency, will determine the number of hours the intern may work and the intern's pay rate.
3. The Gateway Workforce Services Providers will maintain Worker's Compensation Insurance for work related accidents. Each Gateway Services Provider will provide the Worksite Agency information regarding procedures for work related accidents and Worker's Compensation
4. The Gateway Workforce Services Providers will monitor all job site(s) in conjunction with the Mississippi Partnership Local Workforce Development Area's requirements in order to ensure compliance with this agreement.

**Section III. Effective Date**

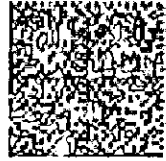
This Worksite Employer and the Gateway Workforce Service Providers will adhere to the above criteria and all guidelines of the Rules and Regulations governing the internship program. This agreement shall become effective when signed by the Worksite Agency and Gateway Services Provider and shall remain in effect June 30, 2021, unless terminated by one of the two parties.

Worksite Agency:    <hr/> Signature _____ Date _____ Name: _____ Title: _____	_____, a Gateway Workforce Services Provider and agent of Three Rivers PDD Division of Workforce Development:    <hr/> Signature _____ Date _____ Name: _____ Title: _____
---	--

# EXHIBIT K

CLAY COUNTY CHANCERY CLERK  
AMY G. BERRY  
P.O. BOX 815  
WEST POINT, MS 39773

FIRST-CLASS



US POSTAGE  
02 7H \$ 000.510  
9801301055 MAR 10 2021  
MAILED FROM ZIP CODE 39773

Murray White  
291 Barksdale Dr.  
West Point

NIXIE 392 SE 1 2204/02/21

RETURN TO SENDER  
NOT DELIVERABLE AS ADDRESSED  
UNABLE TO FORWARD

JTF  
39773>0815

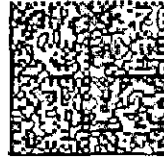
BC: 39773081515 \*2666-66235-62-26



607

CLAY COUNTY CHANCERY CLERK  
AMY G. BERRY  
P.O. BOX 815  
WEST POINT, MS 39773

FIRST-CLASS



US POSTAGE  
\$ 000.51<sup>0</sup>  
02 7H MAR 10 2021  
00D1301055  
MAILED FROM ZIP CODE 39773

Joanne C. Westbrook Estate

90 Shelley W. Morgan

30034 Hig

West Point

JTE

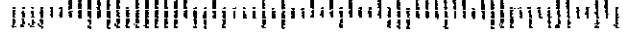
39773-0815

39773-5593 R00

RIXIE 392 7E 1 2203/14/21

RETURN TO SENDER  
NOT DELIVERABLE AS ADDRESSED  
UNABLE TO FORWARD

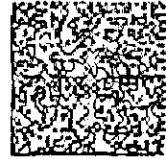
BC: 59773081515 \*1766-00286-10-43



608

CLAY COUNTY CHANCERY CLERK  
AMY G. BERRY  
P.O. BOX 815  
WEST POINT, MS 39773

FIRST-CLASS



PP 7H \$ 000.510  
#001061055 MAR 10 2021  
MAILED FROM ZIP CODE 39773

*Tina O'Brian Smith*  
*250 Seitz Subdivision*  
*West Point*

#00  
39773>0815  
39773\$8711 R001

392 NYE 1 120C2203/15/21  
FORWARD TIME EXP RTN TO SEND  
GERIAN, TINA  
1500 HIGHWAY 45 ALT 5  
WEST POINT MS 39773-0420  
RETURN TO SENDER  
[Barcode]

609

Homestead Notice of Adjustment

DEPARTMENT OF  
**REVENUE**  
STATE OF MISSISSIPPI



Date: February 22, 2021  
Letter ID: L0923642048  
Period: December 31, 2020  
Account #: 1027-8052



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

BROWN RENADA RENAE  
1919 ROGER ROAD  
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 061D103C 0210000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at [www.dor.ms.gov](http://www.dor.ms.gov). If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: \_\_\_\_\_ T: \_\_\_\_\_ R: \_\_\_\_\_

Indexing Instructions: \_\_\_\_\_

North Gate Sub Pt II

Lot: 13 Block: \_\_\_\_\_

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

Form # rL0011 v. 10.3

Visit [www.dor.ms.gov](http://www.dor.ms.gov) for tax information and online filing. If you call, please have this letter with you.



**Notice Certification**

Date: February 22, 2021  
Letter ID: L0923642048  
Period: December 31, 2020

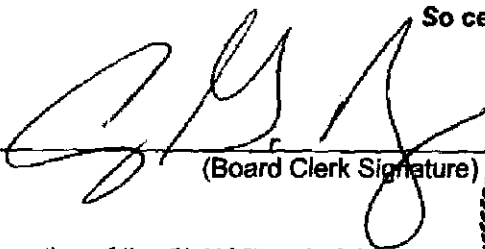
This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

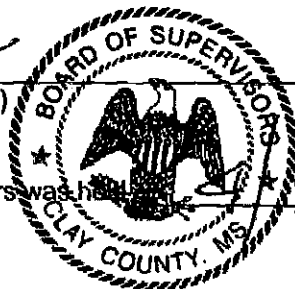
<b>Applicant Name</b>	<b>Parcel #</b>	<b>School District</b>
BROWN RENADA RENAE 1919 ROGER ROAD WEST POINT MS 397730000	061D103C 0210000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk   
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 2/25/2021  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L0647600320
Period: December 31, 2020
Account #: 1027-8052



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

BYNUM WILLIAM
541 SMITH ST
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 083C214H 0270000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

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If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: T: R:
Indexing Instructions:
Lot in SE Pt
Lot: 1 Block: 51

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

Form # rL0011 v. 10.3

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

**NOTICE Certification**

Date: February 22, 2021  
Letter ID: L0647600320  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

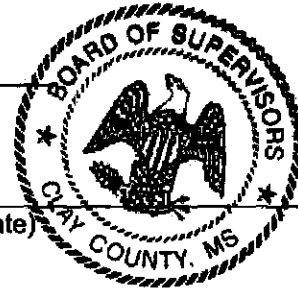
Applicant Name	Parcel #	School District
BYNUM WILLIAM 541 SMITH ST WEST POINT MS 397730000	083C214H 0270000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Betty ; By: Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L2113120448
Period: December 31, 2020
Account #: 1027-8052



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

CLIETT MARK A
430 COURT ST
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 083C214D 0190000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 14 T: 17 R: D6E
Indexing Instructions:

Lot: 4 Block: 14

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

Form # st.0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L2113120448  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

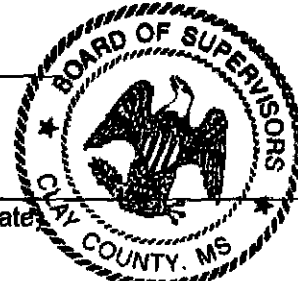
Applicant Name	Parcel #	School District
CLIETT MARK A 430 COURT ST WEST POINT MS 397730000	083C214D 0190000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry ; By: Maggie Gall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L1867720896
Period: December 31, 2020
Account #: 1027-8052



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

COX CAREY G
424 CRITZ ST
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 082A410C 0040200

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 10 T: 17 R: OOE
Indexing Instructions:
Morgan-critz 54b
Lot: 1 Block:

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

Form # rL0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L1867720896  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

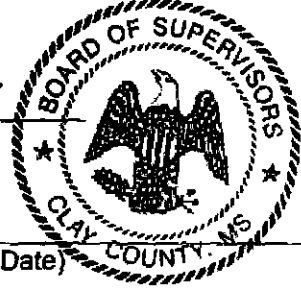
Applicant Name	Parcel #	School District
COX CAREY G 424 CRITZ ST WEST POINT MS 397730000	082A410C 0040200	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry; By: Maggie Gall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L0232990912
Period: December 31, 2020
Account #: 1027-8052



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

DAVIS WALTER LEE
1288 PINE GROVE RD
CEDAR BLUFF MS 397410000

Reimbursement Year: 2020

Parcel#: 078 08 0300000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 8 T: 17 R: 5
Indexing Instructions: 2.4 AC
In SW 1/4 NE 1/4
Lot: Block:

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

Form # RL0011 v. 10.3

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



**notice Certification**

Date: February 22, 2021  
Letter ID: L0232990912  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

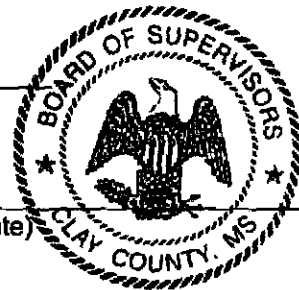
Applicant Name	Parcel #	School District
DAVIS WALTER LEE 1288 PINE GROVE RD CEDAR BLUFF MS 397410000	078 08 0300000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

**So certified and confirmed by the Clerk of the CLAY Board of Supervisors,**

Clerk Amy G. Berry; By Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/9/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

**So certified and confirmed by the Clerk of the CLAY Board of Supervisors,**

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L0834873536
Period: December 31, 2020
Account #: 1027-8052



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

DAVIS WILLIE C
829 HILL ST
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 083B211C 0890000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 11 T: 17 R: OWE
Indexing Instructions:
Weathersby & McCord Sub
Lot: 10 & 11 Block:

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

Form # IL0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L0834873536  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

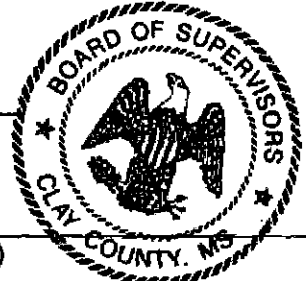
<b>Applicant Name</b>	<b>Parcel #</b>	<b>School District</b>
DAVIS WILLIE C 829 HILL ST WEST POINT MS 397730000	083B211C 0890000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry ; By: Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment



Date: February 22, 2021
Letter ID: L1246701760
Period: December 31, 2020
Account #: 1027-8052



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

FARR ROBERT PERRY
720 NORTHWOOD FOREST
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 050 28 0500000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 28 T: 16 R: 6
Indexing Instructions:
2 A N Side NE 1/4
Lot: Block:

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

Form # rL0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L1246701760  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

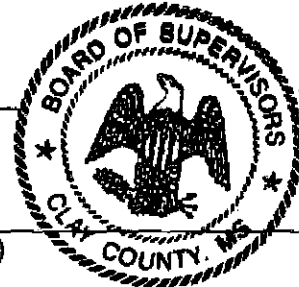
Applicant Name	Parcel #	School District
FARR ROBERT PERRY 720 NORTHWOOD FOREST WEST POINT MS 397730000	050 28    0500000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry; By: Maggie Gall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*



Date: February 22, 2021  
Letter ID: L1623353536  
Period: December 31, 2020  
Account #: 1027-8052



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

GIBSON WILLIE AL  
820 E MORROW ST  
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 083B411C 0130000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at [www.dor.ms.gov](http://www.dor.ms.gov). If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 11 T: 17 R: DGE  
Indexing Instructions: \_\_\_\_\_  
Holcomb Sub  
Lot: 3 Block: A

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

Form # rL0011 v. 10.3

Visit [www.dor.ms.gov](http://www.dor.ms.gov) for tax information and online filing. If you call, please have this letter with you.

**Notice Certification**

Date: February 22, 2021  
Letter ID: L1623353536  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

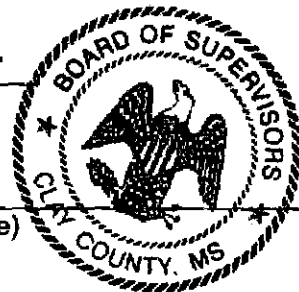
Applicant Name	Parcel #	School District
GIBSON WILLIE AL 820 E MORROW ST WEST POINT MS 397730000	083B411C 0130000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry ; By: Maggie Gall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment



Date: February 22, 2021
Letter ID: L1003432128
Period: December 31, 2020
Account #: 1027-8052



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

HEARD EDDIE F
5937 HWY 45 N
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 050 21 0050000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 21 T: 110 R: 00
Indexing Instructions: 208 SF
N&S X 278FF E&W In
Lot: Block:

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

Form # r.0011 v. 10.3

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



**notice Certification**

Date: February 22, 2021  
Letter ID: L1003432128  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

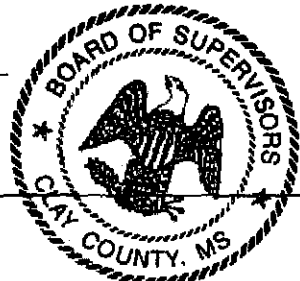
Applicant Name	Parcel #	School District
HEARD EDDIE F 5937 HWY 45 N WEST POINT MS 397730000	050 21 0050000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Bozay; By: Maggi Gall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF  
**REVENUE**  
STATE OF MISSISSIPPI



Date: February 22, 2021  
Letter ID: L0734718144  
Period: December 31, 2020  
Account #: 1027-8052



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

JERNIGAN JOHN D  
799 SHIRLEY SUB  
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 084C 18A 0400000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at [www.dor.ms.gov](http://www.dor.ms.gov). If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 18 T: 17 R: 7  
Indexing Instructions: 1.7 AC  
on side NE 1/4 SW 1/4  
Lot: \_\_\_\_\_ Block: \_\_\_\_\_

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

Form # rL0011 v. 10.3

Visit [www.dor.ms.gov](http://www.dor.ms.gov) for tax information and online filing. If you call, please have this letter with you.

**Notice Certification**

Date: February 22, 2021  
Letter ID: L0734718144  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

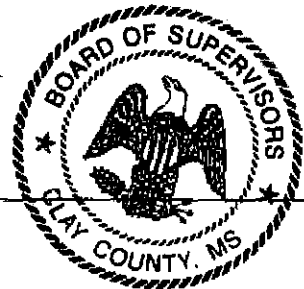
Applicant Name	Parcel #	School District
JERNIGAN JOHN D 799 SHIRLEY SUB WEST POINT MS 397730000	084C 18A 0400000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry ; By: Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/9/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L0811935936
Period: December 31, 2020
Account #: 1027-8052



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

JOHNSON ROGER LEE
15954 LENOIR RD
PRAIRIE MS 397560000

Reimbursement Year: 2020

Parcel#: 002 04 0240000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 4 T: 15 R: 5
Indexing Instructions: 1AC
SW 1/4 NE 1/4 SW 1/4
Lot: Block:

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

Form # rt.0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L0811935936  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

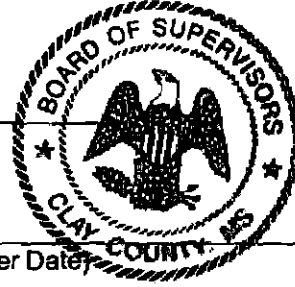
Applicant Name	Parcel #	School District
JOHNSON ROGER LEE 15954 LENOIR RD PRAIRIE MS 397560000	002 04 0240000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry; By: Maggie Gall  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/9/21

(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L0651110592
Period: December 31, 2020
Account #: 1027-8052



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

JONES MARCUS LAMONT
470 GRIFFITH RD
CEDAR BLUFF MS 397410000

Reimbursement Year: 2020

Parcel#: 065 06 0200500

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 6 T: 17 R: 05E
Indexing Instructions: 3.30 AC
IN N 1/2 NE 1/4 NW 1/4
Lot: Block:

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

Form # rL0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L0651110592  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

Applicant Name	Parcel #	School District
JONES MARCUS LAMONT 470 GRIFFITH RD CEDAR BLUFF MS 397410000	065 06 0200500	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes: The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry; By: Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/9/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*



Date: February 22, 2021  
Letter ID: L0247670976  
Period: December 31, 2020  
Account #: 1027-8052



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

KIMBRELL EMILY GOODE  
187 TOM GOODE RD  
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 027 02 0010000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at [www.dor.ms.gov](http://www.dor.ms.gov). If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 2 T: 1/4 R: 4  
Indexing Instructions: N 1/2 NE 1/4  
OR CRK & NW 1/4  
Lot: \_\_\_\_\_ Block: \_\_\_\_\_

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

Form # 1L0011 v. 10.3

Visit [www.dor.ms.gov](http://www.dor.ms.gov) for tax information and online filing. If you call, please have this letter with you.



**Notice Certification**

Date: February 22, 2021  
Letter ID: L0247670976  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

Applicant Name	Parcel #	School District
KIMBRELL EMILY GOODE 187 TOM GOODE RD WEST POINT MS 397730000	027 02 0010000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry ; By: Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L0156047552
Period: December 31, 2020
Account #: 1027-8052



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

LONDON FREDERICK
8338 LONE OAK RD
WEST POINT MS 397730000

Reimbursement Year: 2020
Parcel#: 049 20 0090100
School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 20 T: 16 R: 06
Indexing Instructions: PT NE 1/4
SW 1/4 E OF RD
Lot: Block:

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

Form # rL0011 v. 10.3

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

**NOTICE Certification**

Date: February 22, 2021  
Letter ID: L0156047552  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

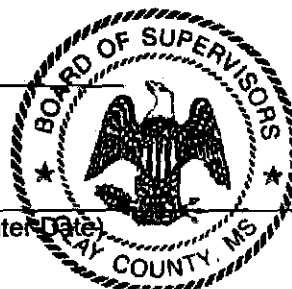
Applicant Name	Parcel #	School District
LANDON FREDERICK 8338 LONE OAK RD WEST POINT MS 397730000	049 20 0090100	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry; By: Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment



Date: February 22, 2021
Letter ID: L1564305600
Period: December 31, 2020
Account #: 1027-8052



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

MCCRARY JULIAN J
732 BARTON FERRY RD
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 084A 08A 0060100

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 8 T: 17 R: 7

Indexing Instructions: LOT IN

SW 1/4 NW 1/4

Lot: Block:

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

Form # rL0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L1564305600  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

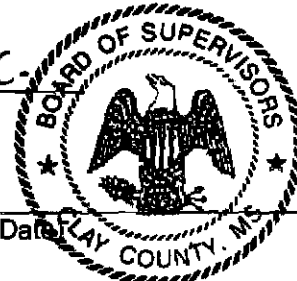
Applicant Name	Parcel #	School District
MCCRARY JULIAN J 732 BARTON FERRY RD WEST POINT MS 397730000	084A 08A 0060100	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry ; By: Maggie Gall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L1761450176
Period: December 31, 2020
Account #: 1027-8052



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

MCFARLAND DIANE
62 INDUSTRIAL ROAD
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 061D403C 0060300

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 3 T: 17 R: OLE
Indexing Instructions:
Sellers Sub
Lot: 214,22 Block:

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

Form # rL0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L1761450176  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

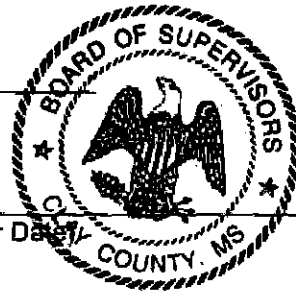
Applicant Name	Parcel #	School District
MCFARLAND DIANE 62 INDUSTRIAL ROAD WEST POINT MS 397730000	061D403C 0060300	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry; By: Maggie Gall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment



Date: February 22, 2021
Letter ID: L0993618112
Period: December 31, 2020
Account #: 1027-8052



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

MCKIBBEN PRENTICE JR
207 GARDEN CT COVE
WEST POINT MS 397730000

Reimbursement Year: 2020
Parcel#: 091C 30A 0183600
School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

02. Applicant or applicant's spouse claims to be a resident of another state when assessed with income tax. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 30 T: 17 R: 07E
Indexing Instructions: Garden
Court Phase V old Waverly Golf Dev
Lot: 7 Block: \_\_\_\_\_

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

Form # rL0011 v. 10-3

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



**Notice Certification**

Date: February 22, 2021  
Letter ID: L0993618112  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

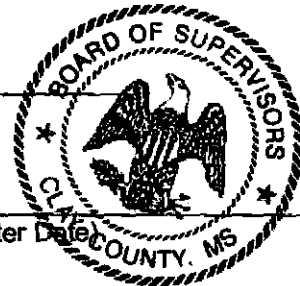
Applicant Name	Parcel #	School District
MCKIBBEN PRENTICE JR 207 GARDEN CT COVE WEST POINT MS 397730000	091C 30A 0183600	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry; By: Maggie Gall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L0238643392
Period: December 31, 2020
Account #: 1027-8052



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

MILLER THOMAS WILLIAM
2267 WAVERLY DR
WEST POINT MS 397730000

Reimbursement Year: 2020
Parcel#: 091C 30A 0149100
School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 30 T: 17 R: 07E
Indexing Instructions: Old
Waverly Golf Dev
Lot: 91 Block:

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

Form # rL0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L0238643392  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

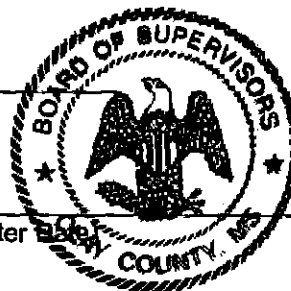
Applicant Name	Parcel #	School District
MILLER THOMAS WILLIAM 2267 WAVERLY DR WEST POINT MS 397730000	091C 30A 0149100	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry; By: Maggie Galle D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*



Date: February 22, 2021  
Letter ID: L0107030720  
Period: December 31, 2020  
Account #: 1027-8052



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

MORGAN SHELLEY W  
30034 HWY 50 E  
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 084D 17A 0010000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at [www.dor.ms.gov](http://www.dor.ms.gov). If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 17 T: 17 R: 07  
Indexing Instructions: w 1/2  
NE 1/4  
Lot: \_\_\_\_\_ Block: \_\_\_\_\_

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

Form # rLD011 v. 10.3

Visit [www.dor.ms.gov](http://www.dor.ms.gov) for tax information and online filing. If you call, please have this letter with you.

# Notice Certification

Date: February 22, 2021  
Letter ID: L0107030720  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

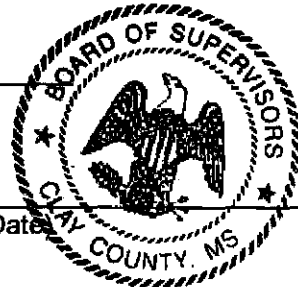
Applicant Name	Parcel #	School District
MORGAN SHELLEY W 30034 HWY 50 E WEST POINT MS 397730000	084D 17A 0010000	West Point Consolidated School District

### Agree and Accept

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Beatty ; By: Maggie Gall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21

(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

### Disagree and Object

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment



Date: February 22, 2021
Letter ID: L0187902144
Period: December 31, 2020
Account #: 1027-8052



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

O'HARA ROGER HAMPTON JR
930 MOSLEY AVE
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 083C414B 0050200

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 14 T: 17 R: OAE
Indexing Instructions:
Moseley Lagrone Sub
Lot: 344 Block: 6

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

Form # R0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L0187902144  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

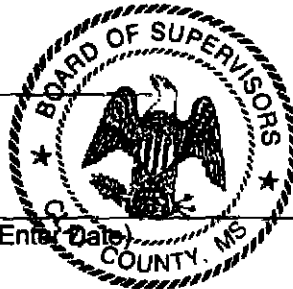
Applicant Name	Parcel #	School District
O'HARA ROGER HAMPTON JR 930 MOSLEY AVE WEST POINT MS 397730000	083C414B 0050200	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry ; Maggi Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment



Date: February 22, 2021
Letter ID: L2041096384
Period: December 31, 2020
Account #: 1027-8052



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

PETTY PEYTON JR
5238 HOPEWELL RD
CEDAR BLUFF MS 397410000

Reimbursement Year: 2020

Parcel#: 045 23 0090000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 23 T: 10 R: 04
Indexing Instructions: 39AC
SW 1/4 SE 1/4
Lot: Block:

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

Form # rL0011 v. 10.3

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



**Notice Certification**

Date: February 22, 2021  
Letter ID: L2041096384  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

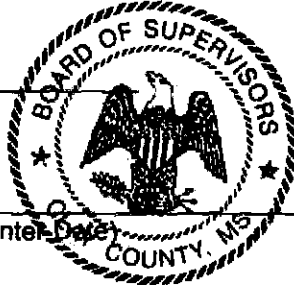
Applicant Name	Parcel #	School District
PETTY PEYTON JR 5238 HOPEWELL RD CEDAR BLUFF MS 397410000	045 23    0090000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Boozy; Maggie Galt D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21

(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L1419421888
Period: December 31, 2020
Account #: 1027-8052



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

QUINN WILLIAM
1003 LONE OAK RD
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 081 07 0010000 081
07 0010100

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 1 T: 17 R: Ole
Indexing Instructions: PT
N 1/2 N 1/2
Lot: Block:

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

Form # rL0011 v. 10.3

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

# Notice Certification

Date: February 22, 2021  
Letter ID: L1419421888  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

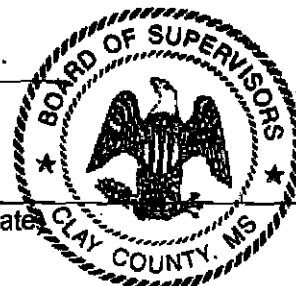
Applicant Name	Parcel #	School District
QUINN WILLIAM 1003 LONE OAK RD WEST POINT MS 397730000	081 07    0010000 081 07    0010100	West Point Consolidated School District

### Agree and Accept

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

**So certified and confirmed by the Clerk of the CLAY Board of Supervisors,**

Clerk Amy G. Berry; By: Maggie Gall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

### Disagree and Object

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

**So certified and confirmed by the Clerk of the CLAY Board of Supervisors,**

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*



Date: February 22, 2021
Letter ID: L1920198848
Period: December 31, 2020
Account #: 1027-8052



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

RAINEY ANTHONY
1313 GUYTON CIRCLE
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 060C302A 0070000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 02 T: 17 R: OUE
Indexing Instructions:
Hickory Knoll Sub
Lot: 1 Block:

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

Form # rL0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L1920198848  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

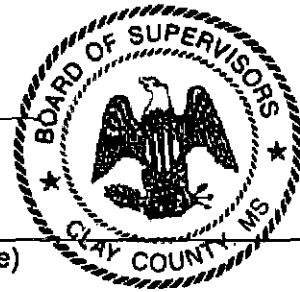
Applicant Name	Parcel #	School District
RAINEY ANTHONY 1313 GUYTON CIRCLE WEST POINT MS 397730000	060C302A 0070000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry; By: Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L0135473344
Period: December 31, 2020
Account #: 1027-8052



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

RAMBUS DARREN
85 RICH ST
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 083C114F 0120000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 14 T: 17 R: OLE
Indexing Instructions: WL
Mccord Sub
Lot: 344 Block: D

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

Form # R0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L0135473344  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

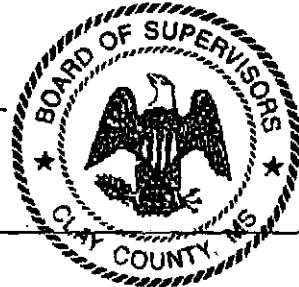
Applicant Name	Parcel #	School District
RAMBUS DARREN 85 RICH ST WEST POINT MS 397730000	083C114F 0120000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry; By: Maggie Gall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/9/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment



Date: February 22, 2021
Letter ID: L0694036672
Period: December 31, 2020
Account #: 1027-8052



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

RAMBUS JAMES L
5139 JUDGE THOMAS RD
WEST POINT MS 397730000

Reimbursement Year: 2020
Parcel#: 085B 09A 0220100
School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 9 T: 17 R: 7
Indexing Instructions: PT
N 1/2 NE 1/4 SW 1/4
Lot: Block:

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

Form # rL0011 v. 10.3

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



**Notice Certification**

Date: February 22, 2021  
Letter ID: L0694036672  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

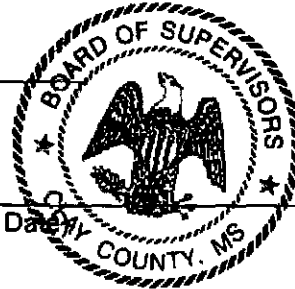
Applicant Name	Parcel #	School District
RAMBUS JAMES L 5139 JUDGE THOMAS RD WEST POINT MS 397730000	085B 09A 0220100	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Bostick; By: Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21

(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L1262643392
Period: December 31, 2020
Account #: 1027-8052



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

ROBINSON REGINA M
1799 DOUGHTY CIRCLE
WEST POINT MS 397730000

Reimbursement Year: 2020
Parcel#: 082C116D 0110000
School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 110 T: 17 R: OCE
Indexing Instructions:
Westwood Sub PT2
Lot: 30 Block:

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

Form # r10q11 v. 10.3

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

# Notice Certification

Date: February 22, 2021  
Letter ID: L1262643392  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

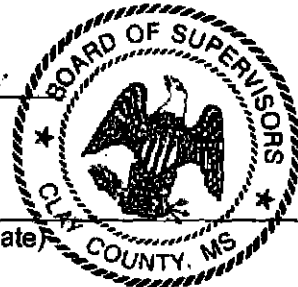
Applicant Name	Parcel #	School District
ROBINSON REGINA M 1799 DOUGHTY CIRCLE WEST POINT MS 397730000	082C116D 0110000	West Point Consolidated School District

### Agree and Accept

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Boddy; By: Maggie Hall DC  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

### Disagree and Object

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF  
**REVENUE**  
STATE OF MISSISSIPPI



Date: February 22, 2021  
Letter ID: L0648747200  
Period: December 31, 2020  
Account #: 1027-8052



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

ROSE MATTHEW CARL  
174 TOURNAMNET ST  
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 083C214E 0020000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at [www.dor.ms.gov](http://www.dor.ms.gov). If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 14 T: 17 R: OLE  
Indexing Instructions: DB  
296/643 & 296/645  
Lot: 3 Block: 25

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

Form # 10011 v. 10.3

Visit [www.dor.ms.gov](http://www.dor.ms.gov) for tax information and online filing. If you call, please have this letter with you.

# Notice Certification

Date: February 22, 2021  
Letter ID: L0648747200  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

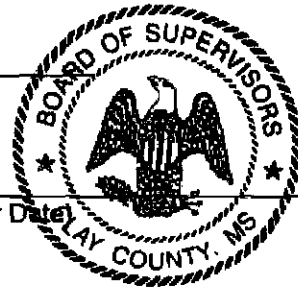
Applicant Name	Parcel #	School District
ROSE MATTHEW CARL 174 TOURNAMNET ST WEST POINT MS 397730000	083C214E 0020000	West Point Consolidated School District

### Agree and Accept

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

**So certified and confirmed by the Clerk of the CLAY Board of Supervisors,**

Clerk Amy G. Bozuy ; By: Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/9/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

### Disagree and Object

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

**So certified and confirmed by the Clerk of the CLAY Board of Supervisors,**

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment



Date: February 22, 2021
Letter ID: L1710598336
Period: December 31, 2020
Account #: 1027-8052



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

SMITH TINA O'BRIAN
1200 SEITZ SUB
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 081A308B 0100000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

36. Property with no residence is not eligible. §27-33-19

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 08 T: 17 R: 06
Indexing Instructions: .6 AC
IN W 1/2 SE 1/4 SW 1/4
Lot: Block:

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

Form # rL0011 v. 10.3

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

# Notice Certification

Date: February 22, 2021  
Letter ID: L1710598336  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

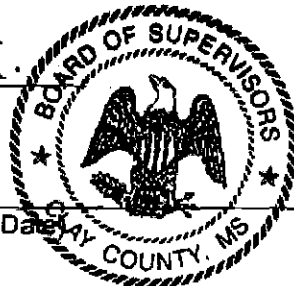
Applicant Name	Parcel #	School District
SMITH TINA O'BRIAN 1200 SEITZ SUB WEST POINT MS 397730000	081A308B 0100000	West Point Consolidated School District

### Agree and Accept

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry; By: Maggie Gale D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held

4/5/21

(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

### Disagree and Object

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_

(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L0476391616
Period: December 31, 2020
Account #: 1027-8052



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

SPENCER DOLLIE F
404 BASKIN ST
WEST POINT MS 397730000

Reimbursement Year: 2020
Parcel#: 083B211D 0230000
School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 11 T: 17 R: OGC
Indexing Instructions:
Scott Street Sub
Lot: 4 Block:

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

Form # rL0011 v. 10.3

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



# Notice Certification

Date: February 22, 2021  
Letter ID: L0476391616  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

Applicant Name	Parcel #	School District
SPENCER DOLLIE F 404 BASKIN ST WEST POINT MS 397730000	083B211D 0230000	West Point Consolidated School District

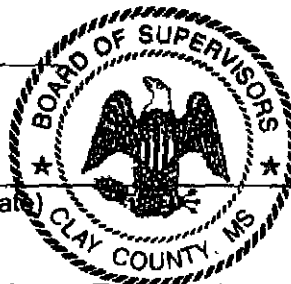
### Agree and Accept

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

**So certified and confirmed by the Clerk of the CLAY Board of Supervisors,**

Clerk Amy G. Berry; By: Maggie Hall D.C.  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held 4/9/21  
(Enter Date)



*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

### Disagree and Object

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

**So certified and confirmed by the Clerk of the CLAY Board of Supervisors,**

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*



Date: February 22, 2021
Letter ID: L1422256320
Period: December 31, 2020
Account #: 1027-8052



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

STARKS LACOREY MONTRELL
300 OLD HWY 46
MANTEE MS 397510000

Reimbursement Year: 2020

Parcel#: 022 06 0130000

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 06 T: 10 R: 03
Indexing Instructions: 1.5 AC
INSE 114 NE 114
Lot: Block:

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

Form # rL0011 v. 10.3

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

# Notice Certification

Date: February 22, 2021  
Letter ID: L1422256320  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

Applicant Name	Parcel #	School District
STARKS LACOREY MONTRELL 300 OLD HWY 46 MANTEE MS 397510000	022 06 0130000	West Point Consolidated School District

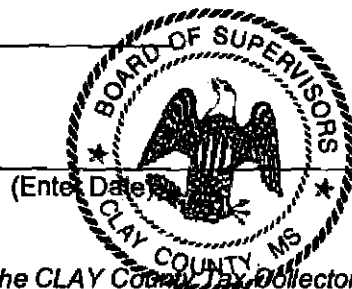
### Agree and Accept

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Beout; Maggie Hall D.C.  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held 4/9/21



*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

### Disagree and Object

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF REVENUE STATE OF MISSISSIPPI



Date: February 22, 2021
Letter ID: L1681074368
Period: December 31, 2020
Account #: 1027-8052



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

STEWART COLEMAN SHEA
4332 HWY 45 ALT S
WEST POINT MS 397730000

Reimbursement Year: 2020
Parcel#: 093 27 0110000
School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 27 T: 17 R: 06
Indexing Instructions: 6.08 AC
N 1/2 N 1/2 SE 1/4
Lot: Block:

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

Form # rL0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L1681074368  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

Applicant Name	Parcel #	School District
STEWART COLEMAN SHEA 4332 HWY 45 ALT S WEST POINT MS 397730000	093 27 0110000	West Point Consolidated School District

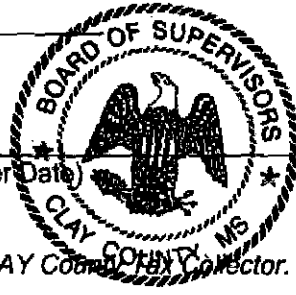
**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry; Maggie Hall D.C.  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)



*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment



Date: February 22, 2021
Letter ID: L0332392640
Period: December 31, 2020
Account #: 1027-8052



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

WHITE ALICE L
1081 LONE OAK PARK
WEST POINT MS 397730000

Reimbursement Year: 2020
Parcel#: 081A308A 0320000
School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 08 T: 17 R: OAE
Indexing Instructions: Lone
Oak Park Dev Pt 1
Lot: 10 Block:

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

Form # RL0011 v. 10.3

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

# Notice Certification

Date: February 22, 2021  
Letter ID: L0332392640  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

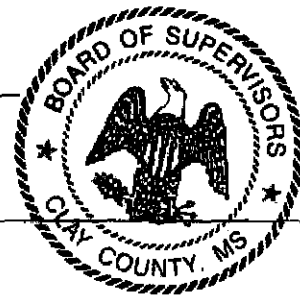
Applicant Name	Parcel #	School District
WHITE ALICE L 1081 LONE OAK PARK WEST POINT MS 397730000	081A308A 0320000	West Point Consolidated School District

### Agree and Accept

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

**So certified and confirmed by the Clerk of the CLAY Board of Supervisors,**

Clerk Amy G. Bozuy; By: Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/9/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

### Disagree and Object

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

**So certified and confirmed by the Clerk of the CLAY Board of Supervisors,**

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment



Date: February 22, 2021
Letter ID: L1793124544
Period: December 31, 2020
Account #: 1027-8052



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

WHITE MURRAY
1477 BARKSDALE DR
WEST POINT MS 397730000

Reimbursement Year: 2020
Parcel#: 061D303B 0060000
School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 03 T: 17 R: 06
Indexing Instructions: SE 1/4
NE 1/4 SW 1/4
Lot: Block:

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

Form # r.0011 v. 10.3

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



**Notice Certification**

Date: February 22, 2021  
Letter ID: L1793124544  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

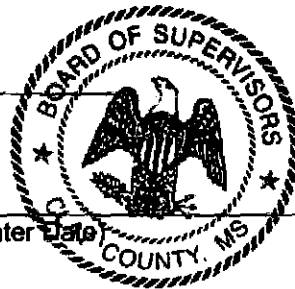
Applicant Name	Parcel #	School District
WHITE MURRAY 1477 BARKSDALE DR WEST POINT MS 397730000	061D303B 0060000	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berou; Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment

DEPARTMENT OF  
**REVENUE**  
STATE OF MISSISSIPPI



Date: February 22, 2021  
Letter ID: L2097682624  
Period: December 31, 2020  
Account #: 1027-8052



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

WHITT LEONARD E JR  
4760 HWY 47  
WEST POINT MS 397730000

Reimbursement Year: 2020

Parcel#: 048 23 0040100

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at [www.dor.ms.gov](http://www.dor.ms.gov). If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 23 T: 112 R: 05  
Indexing Instructions: 5 AC  
IN SW 1/4 NW 1/4  
Lot: \_\_\_\_\_ Block: \_\_\_\_\_

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

Form # rL0011 v. 10.3

Visit [www.dor.ms.gov](http://www.dor.ms.gov) for tax information and online filing. If you call, please have this letter with you.

**Notice Certification**

Date: February 22, 2021  
Letter ID: L2097682624  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

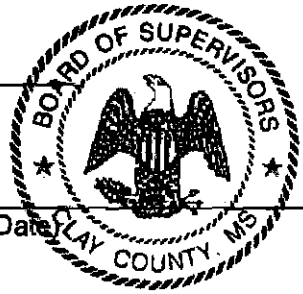
Applicant Name	Parcel #	School District
WHITT LEONARD E JR 4760 HWY 47 WEST POINT MS 397730000	048 23 0040100	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Berry; By: Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

Homestead Notice of Adjustment



Date: February 22, 2021
Letter ID: L2023827648
Period: December 31, 2020
Account #: 1027-8052



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

WINFIELD ADAM LANCE
720 OLD HWY 10
CEDAR BLUFF MS 397410000

Reimbursement Year: 2020

Parcel#: 079 09 0220300

School District: West Point Consolidated School District

This is notice that the Department is making an adjustment to the County's Homestead Exemption reimbursement. The above applicant is not qualified for Homestead Exemption.

35. Applicant or applicant's spouse has failed to comply with the income tax laws of Mississippi. §27-33-63 (2)

If the applicant has any questions about an income tax debt, they may review their account information online through the Taxpayer Access Point at www.dor.ms.gov. If the applicant has any questions about residency status or does not have internet access, they may call 601-923-7618 for assistance.

Please complete the enclosed Notice Certification and forward to the appropriate offices as directed.

You may provide a copy of this notice to the applicant. Please note that the applicant must file any objection to this action with the Clerk of the CLAY County Board of Supervisors (Chancery Clerk's office), not the Department. The applicant has 30 days from the date of this letter to file the objection with the Clerk. If not filed in the time provided, the decision to disallow the applicants homestead exemption is final.

Sincerely,

Tax Administrator

Enclosure: Notice Certification

S: 09 T: 17 R: 05
Indexing Instructions: :7AC
E SIDE SE 1/4 S OF HWY
Lot: Block:

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

Form # rL0011 v. 10.3

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

**Notice Certification**

Date: February 22, 2021  
Letter ID: L2023827648  
Period: December 31, 2020

This certifies that the Board of Supervisors for CLAY County considered the Notice of the Department of Revenue of its disallowance of the Homestead Exemption for the below applicant. The Board entered into its minutes its determination concerning whether to accept or object to this action.

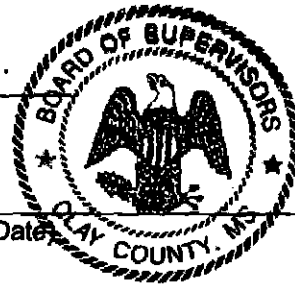
Applicant Name	Parcel #	School District
WINFIELD ADAM LANCE 720 OLD HWY 10 CEDAR BLUFF MS 397410000	079 09 0220300	West Point Consolidated School District

**Agree and Accept**

The Board has met and entered into its minutes an order directing that the CLAY County Tax Collector re-assess and list the above property as subject to all taxes. The tax is due and payable on or before the next February 1, following the date of this notice.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk Amy G. Boddy; By: Maggie Hall D.C.  
(Board Clerk Signature)



The meeting of the CLAY Board of Supervisors was held 4/5/21  
(Enter Date)

*If in agreement, a copy of this completed document must be provided to the CLAY County Tax Collector.*

**Disagree and Object**

The Board has met and entered into its minutes an order of its intent to file an objection with the Department of Revenue concerning this action.

*So certified and confirmed by the Clerk of the CLAY Board of Supervisors,*

Clerk \_\_\_\_\_  
(Board Clerk Signature)

The meeting of the CLAY Board of Supervisors was held \_\_\_\_\_  
(Enter Date)

*If in disagreement, a copy of this completed document must be provided to the Department of Revenue, Office of Property Tax. A copy of the order of the Board of Supervisors providing the reason for the objection must be attached along with any documentation necessary to support the objection.*

