Minutes of Clay County Board of Supervisors Regular Meeting Thursday, August 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 Thursday, August 5, 2021.

PRESENT:

Lynn D. Horton, Supervisor District 1 Luke Lummus, Supervisor District 2 Shelton Deanes, Supervisor District 4, Presiding

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

County Residents

The following proceedings were had:

CALL TO ORDER/INVOCATION

The meeting was called to order by Sheriff Eddie Scott. The welcome was given by Supervisor Deanes with the invocation given by Supervisor Lynn Horton.

ADOPTION OF AGENDA

Supervisor Lummus moved to adopt the agenda as presented.

The motion was seconded by Supervisor Horton.

(Exhibit "A")

AMENDMENT OF AGENDA

Supervisor Horton moved to amend the agenda as presented.

The motion was seconded by Supervisor Lummus.

AMMENDMENTS TO BE APPROVED AND ADDED TO THE AGENDA

The amendments to be added to the agenda for further consideration and discussion were as follows:

- Authorize and approve the submission of the E911 Grant in the amount of \$69,771.60 from the National Telecommunication and Information Administration (NTIA) Department of Commerce/National Highway Traffic to purchase E911 Equipment upgrades
- Authorize and approve the Lease Purchase financing for the remaining balance of the E911 equipment
- Torrey Williams regarding renewal of Emergency Proclamations as declared by the Governor
- Luke Lummus regarding Williams Equipment
- Eddie Scott regarding
 - Cannon Motors invoice for SD1629 in the amount of \$2,961.17
 - Four County Foundation Grant for the Sheriff's Office
 - Authorize and approve the appointment to serve as the County representative on the Road House Permit Regulation Committee

AUTHORIZE AND APPROVE THE RESOLUTION ORDERING THE GOLDEN TRIANGLE PLANNING AND DEVELOPMENT DISTRICT TO PREPARE AND SUBMIT GRANT APPLICATION TO ARC FOR *PROJECT HYDRAULIC*

Supervisor Horton moved to authorize and approve the Resolution ordering the Golden Triangle Planning and Development District to assist the County in preparing and submitting a grant application to ARC for *Project Hydraulic* for the Port.

The motion was made by Supervisor Lummus.

(Exhibit "B")

AUTHORIZE AND APPROVE TO TABLE THE GOLDEN TRIANGLE LINK APPOINTMENTS TO SERVE ON THE BOARD OF DIRECTORS FOR A TWO-YEAR TERM BEGINNING OCTOBER 2021

Supervisor Horton moved to authorize and approve to table the *Golden Triangle LINK* appointments to serve on the Board of Directors for a two-year term beginning October 1, 2021 through September 30, 2023.

The motion was seconded by Supervisor Lummus.

(Exhibit "C")

AUTHORIZE AND APPROVE TO DESIGNATE MITCHELL SMITH AS AN AUTHORIZED EMPLOYEE TO COMPLETE REQUISITIONS ON BEHALF OF THE SHERIFF'S DEPARTMENT AND BUILDING MAINTENANCE AND GROUNDS

Supervisor Lummus moved to authorize and approve to designate Mitchell Smith as an authorized employee to complete requisitions on behalf of the Sheriff's Department and Building Maintenance & Grounds.

The motion was seconded by Supervisor Horton.

AUTHORIZE AND APPROVE TO DESIGNATE JENNIFER DUKE AS AN AUTHORIZED EMPLOYEE TO COMPLETE REQUISITIONS ON BEHALF OF THE MSU/CLAY COUNTY EXTENSION OFFICE

Supervisor Lummus moved to authorize and approve to designate Jennifer Duke as an authorized employee to complete requisitions on behalf of the MSU/Clay County Extension Office.

The motion was seconded by Supervisor Horton.

(Exhibit "D")

AUTHORIZE AND APPROVE TO TABLE THE REQUEST OF TREVA HODGE, I/T MANAGER, TO CONSIDER THE LEXIS NEXIS BATCH SERVICES

Supervisor Horton moved to authorize and approve to table the request of Treva Hodge, I/T Manager, to consider the Lexis Nexis Batch Services.

The motion was seconded by Supervisor Lummus.

AUTHORIZE AND APPROVE MONTHLY DEPARTMENTAL REPORTS AS PRESENTED IN PERSON AND IN WRITING FOR THE MONTH OF JULY 2021

Supervisor Lummus moved to approve the monthly departmental reports as presented in person by, Chancery Clerk, Amy Berry, Circuit Court Drug Court, Susan Lippincott, and Volunteer Fire Department and Clay County Extension Office Manager, B J McClenton and for the monthly personnel report as submitted in writing by the Personnel Manager, Treva Hodge.

The motion was seconded by Supervisor Horton.

(Exhibit "E")

AUTHORIZE AND APPROVE THE MONTHLY E911 REPORT FOR THE MONTH OF JULY 2021

Supervisor Lummus moved to authorize and approve the monthly E911 Report for the month of July 2021.

The motion was seconded by Supervisor Horton.

(Exhibit "F")

AUTHORIZE AND APPROVE THE RENEWAL OF THE EMERGENCY PROCLAMATIONS AS DECLARED BY THE GOVERNOR

Supervisor Lummus moved to authorize and approve the renewal of the Emergency Proclamations as declared by the Governor.

The motion was seconded by Supervisor Horton.

(Exhibit "G")

AUTHORIZE AND APPROVE THE PURCHASE OF E911 EQUIPMENT UPDATES AND TO FURTHER AUTHORIZE AND APPROVE TO ENTER INTO A LEASE PURCHASE AGREEMENT FOR THE EQUIPMENT

Supervisor Lummus moved to authorize and approve the purchase of E911 Equipment updates and to further, authorize and approve to enter into a lease purchase agreement for the said equipment.

The motion was seconded by Supervisor Horton.

(Exhibit "H")

AUTHORIZE AND APPROVE TO SUBMIT A REQUEST REQUESTING FUNDING FROM THE NATIONAL TELECOMMUNICATIONS AND INFORMATION ADMINISTRATION FOR THE PURCHASE OF E911 EQUIPMENT UPDATES

Supervisor Lummus moved to authorize and approve to submit a request requesting funding from the National Telecommunications and Information Administration in the amount of \$69,771.60 for the purchase of E911 Equipment updates.

The motion was seconded by Supervisor Horton.

(Exhibit "I")

AUTHORIZE AND APPROVE FOR PAYMENT THE INVOICE FROM CANNON MOTORS IN THE AMOUNT OF \$2,961.17 FOR REPAIRS TO SD1629

Supervisor Horton moved to authorize and approve for payment the invoice from Cannon Motors in the amount of \$2,961.17 for repairs to SD1629, 2016 Charger.

The motion was seconded by Supervisor Lummus.

(Exhibit "J")

AUTHORIZE AND APPROVE THE SHERIFF TO SUBMIT A GRANT APPLICATION TO THE FOUR COUNTY FOUNDATION TO PURCHASE EQUIPMENT FOR SRT TEAM

Supervisor Lummus moved to authorize and approve the Sheriff to submit a grant application to the Four County Foundation to purchase Helmets and Body Cameras for the SRT Team.

The motion was seconded by Supervisor Horton.

(Exhibit "K")

AUTHORIZE AND APPROVE TO APPOINT ACIE VANCE TO SERVE AS THE COUNTY REPRESENTATIVE ON THE ROAD HOUSE PERMIT REGULATION COMMITTEE

Supervisor Horton moved to authorize and approve to appoint Acie Vance to serve as the County Representative on the Road House Permit Regulation Committee.

The motion was seconded by Supervisor Lummus.

(Exhibit "L")

AUTHORIZE AND APPROVE TO GO INTO CLOSED SESSION

Supervisor Lummus moved to go into closed session.

The motion was seconded by Supervisor Horton.

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

Supervisor Lummus moved to go from closed session to executive session as allowed under Section 25-41-7 of *the Mississippi Code of 1972* to discuss a security matter.

The motion was seconded by Supervisor Horton.

AUTHORIZE AND APPROVE TO COME OUT OF EXECUTIVE SESSION

Supervisor Lummus move to come out of Executive Session

The motion was seconded by Supervisor Horton.

RECESS

Supervisor Deanes moved to recess until Tuesday, August 10, 2021 at 9:00 a.m. at the Clay County Courthouse.

The motion was seconded by Supervisor Lummus.

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

SO ORDERED, this the 5th day of August, 2021.



Seanes

SHELTON L. DEANES, PRESIDENT CLAY COUNTY BOARD OF SUPERVISORS

ATJEST: AMY G. BERRY, CHANCERY CLERK CLERK OF THE BOARD



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Clay County Board of Supervisors Agenda for Meeting Thursday, August 5, 2021, at 9:00 a.m.

- Call to Order
- Welcome and Prayer
- Adopt and Amend Agenda
- Phyllis Benson, Golden Triangle Planning and Development
 - Authorize and approve the GTRPDD to prepare and submit a grant application on behalf of the County to ARC
- Authorize and approve appointments to serve on the LINK Board of Directors for two-year term beginning October 2021
- Authorize and approve Mitchell Smith as a Requisition Clerk for the Sheriff's Department
- Authorize and approve Jennifer Duke as a Requisition Clerk for the Extension Department
- Treva Hodge, Personnel and I/T Manager
 - o Request consideration of Lexis Nexis Batch Services
- Monthly Departmental Reports
 - o Authorize and approve after all completed both presented in person and submitted reports
- Request to go into Executive Session as allowed under Section 25-41-7 of the Mississippi Code to discuss a security matter.
- Recess until Tuesday, August 10, 2021 at 9:00 a.m. at the Clay County Courthouse

Amendments



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RESOLUTION

Authorizing the Golden Triangle Planning and Development District to Prepare and Submit An Appalachian Regional Commission Application (ARC) for Clay County, Mississippi

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

WHEREAS, the Mississippi Development Authority has available funds under the FY-2022 Appalachian Regional Commission (ARC) Program; and

WHEREAS, Clay County is eligible to apply for said ARC 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 ARC projects;

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

- That the Golden Triangle Planning and Development District is hereby authorized to prepare an FY-2022 ARC Area Development Application on behalf of Clay County for infrastructure improvements to serve "Project Hydraulic"; and
- That, upon approval of said application, the Golden Triangle Planning and Development District is hereby authorized to administer said ARC Project; and
- 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 Appalachian Regional Commission.

SO ORDERED THIS THE 5th day of August 2021, by the Board of Supervisors of Clay County, Mississippi in a Regular Scheduled Meeting.

Shelton Deanes President

EXHIBIT C

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July 20, 2021

1102 Main Street F.O. Box 1026

inlumbus, M5 39701

P - 052 328.6569

F 662.327.3417 www.gbflink.org Mr. R.B. Davis President, Clay County Board of Supervisors P.O. Box 815 West Point, MS 39773

Dear President Davis,

This letter serves as notice to the Clay County Board of Supervisors to appoint two (2) representatives to the Board of Directors of the Golden Triangle Development LINK (LINK). This appointment, as defined in the contractual agreement between the LINK and the Board, will serve a two-year term beginning October 2021 unless selected for leadership on our Executive Committee. In the the case of selection to the Executive Committee, members serve two-year terms.

The 2022-2024 Executive Committee will be selected no later than October 1, 2022. All four appointees from Clay County are eligible, however only two will be selected for this committee.

The LINK Executive Committee reserves the right to deny appointments and request new appointees should a conflict arise.

Traditionally, the LINK Board of Directors has been an elite group comprised of qualified, decision-making individuals. The charge of the board has a dramatic impact on the economic health of our community. It is imperative that individuals selected to serve must be capable and willing to take an active role in the growth and development of the Golden Triangle region.

If your community has inter-local an agreement for the appointment of representatives, please submit all appointees together in the same document using the format on the following page.

Sincerely,

Joe Max Higgins, Jr. CEO, Golden Triangle Development LINK



| Name | Organization/Occupatio | on Phone | Email |
|------|------------------------|----------|-------|
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Submit your nominees and their information in the following format:

Mail to: Golden Triangle Development LINK c/o Joe Max Higgins, Jr. P.O. Box 1328 Columbus, MS 39703

All nominees MUST be received by Friday, September 3, 2021.

Members with terms expiring: Jimmy Davidson, Board of Directors, 2020-2021 Carolyn Poston, Board of Directors, 2020-2021

Members still serving their terms: LaDonna Helveston, Executive Committee, expiring 2021-2022 Bruff Sanders, Executive Committee, expiring 2021-2022

Inder penalty of perjury, I, the undersigned authority, swear and affirm that the above information is true and Forrect to the best of my knowledge.

| Signature of Applic | ant |
|--|----------------|
| Printed Name | |
| Title | |
| Date | |
| | |
| worn to and subscribed before me t | thisday of, 20 |
| worn to and subscribed before me t tate of Mississippi ounty of: | thisday of, 20 |
| tate of Mississippi ounty of: | thisday of, 20 |

Page 5 of 5[°]

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EXHIBIT D

No.____

AUTHORIZE AND APPROVE TO DESIGNATE JENNIFER DUKE AS AN AUTHORIZED EMPLOYEE TO COMPLETE PURCHASE REQUISITIONS ON BEHALF OF THE **MSU/CLAY COUNTY EXTENTION OFFICE**

There came on this day for consideration the matter of authorizing and approve to designate Jennifer Duke as an authorized employee to complete purchase requisitions on behalf of the MSU/Clay County Extension Office.

Supervisor Lummus moved to authorize and approve Jennifer Duke to serve as an alternate designatee to complete purchase requisitions for the MSU/Clay County Extension Office. The motion was seconded by Supervisor Horton. The motion carried unanimously.

SO ORDERED, this the 5th day of August, 2021.

<u>Shelton L. Deanes, President</u>

ATTEST Amy G. Berry, Chancery Clerk Clerk of the Board





PERSONNEL MONTHLY REPORT TO BOS FOR JULY 2021 Presented August 5, 2021

LIST OF NEW HIRES:

| Department | Last Name | First Name | Date of Hire |
|------------|-----------|------------|--------------|
| District 2 | Gibson | Andy | 7/12/2021 |
| District 4 | Smith | Joe | 7/15/2021 |

TOTAL PAYROLL AMOUNTS BY DEPT:

See attached sheet for details

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Wages-Matching per Fund-Dept by Check Date Range CLAY COUNTY From Check Date: 07/01/2021 To Check Date: 07/31/2021 A - All Employer Matching Records Selected

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| Fund/Dept | Paid Amt | Matching | Total |
|---|-----------|-----------|------------|
| 001100 - BOARD OF SUPERVISORS | 27,637.55 | 12,849.79 | 40,487.34 |
| 001101 - CHANCERY CLERK | 7,208.05 | 5,331,75 | 12,539.80 |
| 001102 - CIRCUIT CLERK | 7,660.28 | 3,884.05 | 11,544.33 |
| 001105 - TAX ASSESSOR-COLLECTOR | 15,183.10 | 7,537.59 | 22,720.69 |
| 001122 - PURCHASING DEPARTMENT | 1,388.00 | 1,713.67 | 3,101.67 |
| 001123 - INVENTORY CLERK | 2,073.11 | \$13.25 | 2,586.36 |
| 001124 - RECEIVING DEPARTMENT | 1,019.96 | 248.26 | 1.268.22 |
| 001151 - MAINTENANCE OF BLDGS.& GROUNDS | 10,285.47 | 3,890.94 | 14,176.41 |
| 001152 - DATA PROCESSING | 917.56 | 226.68 | 1.144.24 |
| 001154 - OTHER ADMINISTRATIVE DEPT | 708.33 | 54.19 | 762.52 |
| 001160 - CHANCERY COURT | 110.00 | 17.84 | 127.84 |
| 001161 - CIRCUIT COURT | 1,847.67 | 393.06 | 2,240.73 |
| 001163 - YOUTH COURT | 3,562.96 | 1,401.32 | 4,964.28 |
| 001164 - 16TH CIR COURT DRUG COURT | 4,041.66 | 1,672.66 | 5,714.32 |
| 001165 - LUNACY COURT | 1,808.54 | 1,756.92 | 3,565.46 |
| 001166 - JUSTICE COURT | 14,330.18 | 6,972.34 | 21,302.52 |
| 001167 - CORONER/MEDICAL EXAMINER | 3,575.00 | 1,446.88 | 5,021.88 |
| 001169 - COUNTY ATTORNEY | 3,467.67 | 2,249.09 | 5,716.76 |
| 001170 - PUBLIC DEFENDER | 6,303.60 | 2,224.99 | 8,528.59 |
| 001180 - ELECTION EXPENSE | 3,700.00 | 375.59 | 4.075.59 |
| 001200 - SHERIFF | 73,486.26 | 34,788.05 | 108,274.31 |
| 001210 - MTC TRANSPORT OFFICER | 1,864.30 | 797.27 | 2,661.57 |
| 001220 - JAIL | 39,701.70 | 19,973.18 | 59,674.88 |
| 001260 - CIVIL DEFENSE / EMA | 425.00 | 104.98 | 529.98 |
| 097230 - DISPATCHERS | 21,001.30 | 10,524.94 | 31,526.24 |
| 104131 - LAW LIBRARY | 136.22 | 32.35 | 168.57 |
| 114250 - VOLUNTEER FIRE FUND | 375.09 | 93.97 | 469.06 |
| 151301 - DISTRICT I ROAD | 1,698.94 | 416.95 | 2,115.89 |
| 152302 - DISTRICT 2 ROAD | 1,800.00 | 377.36 | 2,177.36 |
| 153303 - DISTRICT 3 ROAD | 4,146.48 | 751.89 | 4,898.37 |
| 154304 - DISTRICT 4 ROAD | 1,615.00 | 318.09 | 1,933.09 |
| 155305 - DISTRICT 5 ROAD | 3,777.20 | 732.50 | 4,509.70 |
| 161301 - DISTRICT 1 BRIDGE | 1,658.88 | 1,072.40 | 2,731.28 |
| 162302 - DISTRICT 2 BRIDGE | 2,960.00 | 1,287.61 | 4,247.61 |

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Wages-Matching per Fund-Dept by Check Date Range CLAY COUNTY From Check Date: 07/01/2021 To Check Date: 07/31/2021 A - All Employer Matching Records Selected

| Fund/Dept | Paid Amt | Matching | Total |
|----------------------------|------------|------------|------------|
| 163303 - DISTRICT 3 BRIDGE | 7,048.11 | 3,058.09 | 10,106.20 |
| 164304 - DISTRICT 4 BRIDGE | 4,750.96 | 3,059.94 | 7,810.90 |
| 165305 - DISTRICT 5 BRIDGE | 3,053.80 | 1,279.41 | 4,333.21 |
| 400340 - SANITATION | 8,800.87 | 4,106.42 | 12,907.29 |
| | 295,128.80 | 137,536.26 | 432,665.06 |

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DATA PROCESSING MONTHLY REPORT TO BOS FOR JULY, 2021 Presented August 5, 2021

7/1/2021

- Verified backup of AS400 data
- Setup up new copier at Drug Court for printing and emailing

7/2/2021

• Verified backup of AS400 data

7/6/2021

- Verified backup of AS400 data
- Assisted Fred with print issue

7/7/2021

- Verified backup of AS400 data
- Assisted with JC projects
- Fixed email issue on Joe's phone

7/8/2021

- Verified backup of AS400 data
- Assisted with JC projects

7/12/2021

• Attended training in Jackson for JC/DSO project

7/13/2021

- Verified backup of AS400 data
- Setup workstation and credentials for new grant employee

7/14/2021

Verified backup of AS400 data

7/15/2021

- Verified backup of AS400 data
- Setup email and reset AppleID on Joe's new phone

7/16/2021

- Verified backup of AS400 data
- Worked on JC projects

7/19/2021

- Verified backup of AS400 data
- Worked on email issue for Amy

7/20/2021

- Verified backup of AS400 data
- Worked on JC projects
- Spoke with DOR regarding POD issue

7/21/2021

- Verified backup of AS400 data
- Worked on JC projects
- Fixed copier email issue for Porsha

/22/2021

- Verified backup of AS400 data
- Updated events on website

/26/2021

- Verified backup of AS400 data
- Worked on JC projects

/27/2021

- Verified backup of AS400 data
- Worked on JC projects

/28/2021

- Verified backup of AS400 data
- Worked on JC projects

/29/2021

- Verified backup of AS400 data
- Worked on JC projects
- Worked on equipment quotes for grant possibility

/30/2021

• Verified backup of AS400 data

EXHIBIT F

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West Point - Clay County **Emergency Management Agency**

Post Office Box 1117 761 E. Brame Avenue West Point, Mississippi 39773



Torrey J Williams, Director (662) 494-2088 (Office) * (662) 295-5278 (Cell) * (662) 494-2105 (Fax) twilliams@wpnet.org

July 2021

<u>Rainfall</u> The amount of rainfall for the month was

Temperature

The average temperature for the month taken at 6:30 a.m. was degrees.

Vehicle **Mileage EMA**

AMBU

Monthly Overview:

- EMA Office Started Moving and Renovating Church Hill Location
- Vaccination Event Northside Christian Church
- . Vaccination Event - Una
- Vaccination Event Pheba
- **Applicant Briefing**
- Mass Fatality Response Class
- **Disaster Exercise Meetings**
- 4598DR-MS Kickoff Meetings

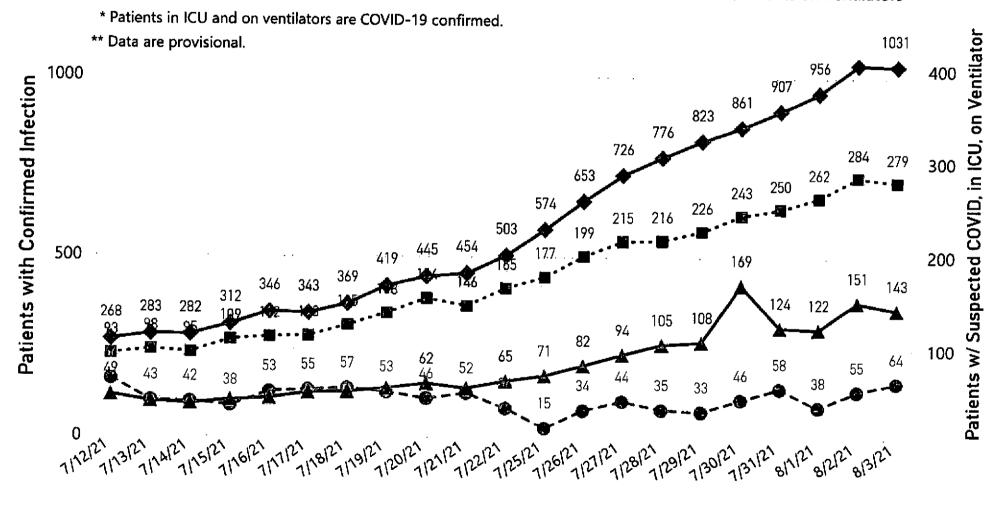
On-Going Meetings Once a Week

- o National Weather Service
 - MEMA/MSDH Meeting ο
 - 4536DR-MS City 0
 - 4536DR-MS County 0
 - 4478DR-MS City 0
 - 0 4478DR-MS County
 - 4538DR-MS City 0
 - 0 4538DR-MS County
 - 4598DR-MS City 0
 - 4598DR-MS County 0
- Monthly
 - ESF#8 Healthcare Facilities Update 0

Torrey J Williams, Director West Point Clay County EMA

COVID-19 Hospitalizations Reported by MS Hospitals, 7/14/21-8/3/21 *,**

◆ Patients with Confirmed Infection ● Patients with Suspected Infection ■ Patients in an ICU ▲ Patients on Ventilators



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COVID-19 Hospitalizations Trends, Reported by MS Hospitals as of 8/2/21 *,** -Patients with Confirmed Infection - Patients with Suspected Infection - Patients in an ICU - Patients on Ventilators 600 1400 Ventilato Patients with Confirmed Infection 1200 500 1035 1000 in ICU, 400 360 800 COVID, 300 600 uspected 200 400 ភ Patients w/ 100 200 0 0 Jul 2020 Oct 2020 Jan 2021 Apr 2021 Jul 2021 * Patients in ICU and on ventilators are COVID-19 confirmed. 4/3/2020 8/2/2021 ** Data are provisional.

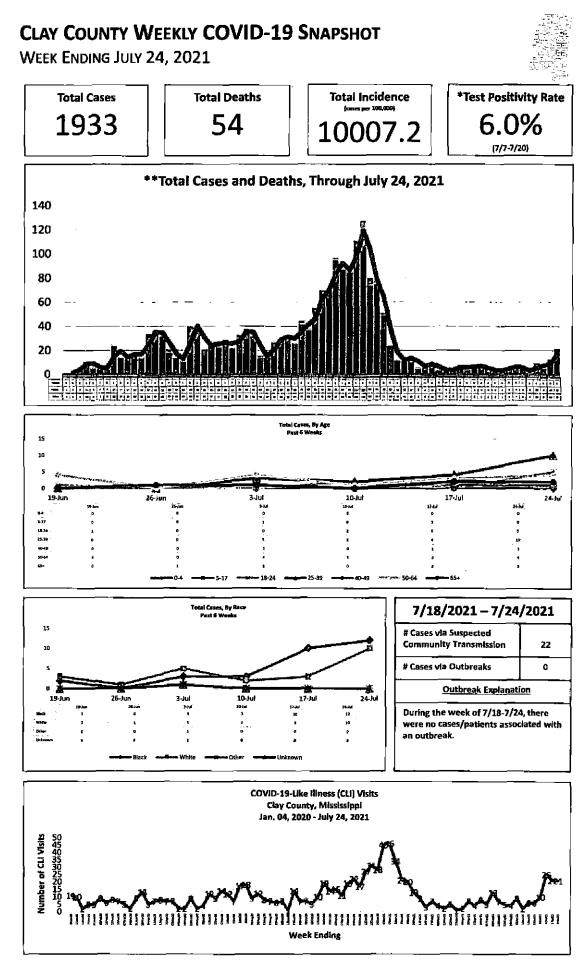
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*Counties with test percent positivity <5.0% or with <20 tests in past 14 days: Green; test percent positivity 5.0%-10.0% or with <500 tests and <2000 tests/100k and >10% positivity over 14 days: Vellow; >10.0% and not meeting the criteria for "Green" or "Yellow": Red. Test positivity is rounded to the nearest tenth of a percent before classifying. Reference: <u>Centers for Medicare and Medicald Services</u>

**Provisional Data: Illnesses occurring during the last two weeks may not yet have been reported and/or represented.

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| | NTIA/NHTSA 911 GRANT PROGRAM PROGRAM AGREEMENT |
|-------------------|---|
| GRANTOR: | National Telecommunications and Information Administration (NTIA), Department of Commerce/National Highway Traffic Safety Administration (NHTSA), Department of Transportation |
| RECIPIENT: | Mississippi Emergency Management Agency |
| SUB-RECIPIENT: | Clay County 911 |
| GRANT PERIOD: | June 1, 2021 – December 31, 2021 |
| AWARD AMOUNT: | \$ 69,771.60 |
| | |

As the State of Mississippi's recipient of the NHTSA-NTIA-911 Grant Program, the Mississippi Emergency Management Agency (MEMA) hereby awards 911 Grant funds to the above Sub-recipient. The interest and responsibilities of the Sub-recipient will be executed by the Sub-recipient's designated applicant's agent.

The Sub-recipient agrees and understands that:

- 1. He/She has legal authority to apply for these funds on behalf of the Sub-recipient.
- 2. The Sub-recipients must provide the required 40% matching funds.
- 3. The Sub-recipient will use 911 grant funds solely for the purposes for which these funds are provided and as approved by the Executive Director of MEMA.
- 4. Costs incurred under this funding opportunity must be specifically for this federal award and must be incurred during the period June 1, 2021 December 31, 2021.
- 5. The length or term of any maintenance agreement purchased may not exceed the period of performance of the grant funding with which the maintenance agreement is being purchased.
- 6. Any equipment purchased with the 911 Grant must be delivered by December 31, 2021.
- 7. All services, to include training on the NG911 system, must be completed by December 31, 2021. Service agreements rendering services beyond December 31, 2021, will not qualify for reimbursement.

- 8. All reimbursement payments will be made after MEMA receives all required reimbursement documentation.
- 9. If applicable, the Sub-recipient will complete the Federal Funding Accountability and Transparency Act (FFATA) form and return it to MEMA.
- 10. The Sub-recipient will give state and federal agencies access to and the right to determine all records and documents related to the use of 911 funds.
- 11. The Sub-recipient will comply with all applicable provisions of federal and state laws and regulations in regard to procurement of goods and services.
- 12. The Sub-recipient will provide the recipient copies of audit reports that include funds provided under this agreement.
- 13. The Sub-recipient agrees all expenditures incurred will be during the period of performance as listed.
- 14. There shall be no changes to this agreement unless mutually agreed upon, in writing, by both parties to the agreement.

If the Sub-recipient violates any of the conditions of the agreement, or applicable federal and state regulations, the State shall notify the Sub-recipient that 911 funds will be withheld until such violation has been corrected to the satisfaction of the State.

The undersigned does hereby agree with all terms and conditions of this agreement.

Sub-recipient's Designated Applicant's Agent

Date

Stephen C. McCraney, Executive Director Mississippi Emergency Management Agency

8-4-2021

Date



Type Total Report

| Print Date: | 04-Aug-21 |
|-------------|-------------|
| Print Time: | 07:49:37 AM |
| User Name: | twilliams |

Incidents Created From: 01-Jul-21 00:00:00 AM To: 31-Jul-21 23:59:59 PM; Unit Org: All; Unit(s): All; Source: All; Community: All

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|----------|----------------------|----------------------------|-----------|
| 100 | FIRE DWELLING | FIRE DWELLING | 1 |
| 100 | FIRE GRASS BRUSH | FIRE GRASS BRUSH | 1 |
| 100 | TS | TRAFFIC STOP | 1 |
| | | Type Count -100: | 3 |
| 200 | ACC WITH INJURIES | ACCIDENT WITH INJURIES | 2 |
| 200 | ALARM FIRE | ALARM FIRE | 1 |
| 200 | FIRE DWELLING | FIRE DWELLING | 1 |
| | | Type Count -200: | 4 |
| 300 | AMB-FALL | FALL | 1 |
| | | Type Count -300: | 1 |
| 400 | ALARM FIRE | ALARM FIRE | 2 |
| 400 | FIRE CONTROL BURN | FIRE CONTROL BURN | 1 |
| | | | 3 |
| 500 | ACC UNKNOWN INJURIES | ACCIDENT UNKNOWN INJURIES | 1 |
| 500 | FIRE CONTROL BURN | FIRE CONTROL BURN | 1 |
| 500 | FIRE GRASS BRUSH | FIRE GRASS BRUSH | 1 |
| | | Type Count -500: | 3 |
| 600 | ACC UNKNOWN INJURIES | ACCIDENT UNKNOWN INJURIES | 1 |
| 600 | FIRE GRASS BRUSH | FIRE GRASS BRUSH | 1 |
| | | Type Count -600: | 2 |
| 700 | ACC WITH INJURIES | ACCIDENT WITH INJURIES | 3 |
| 700 | FIRE DWELLING | FIRE DWELLING | 1 |
| 700 | FIRE GRASS BRUSH | FIRE GRASS BRUSH | 1 |
| | | For Official Use Only Page | 1 of 14 |



| Print Date: | 04-Aug-21 |
|-------------|-------------|
| Print Time: | 07:49:37 AM |
| User Name: | twilliams |

Incidents Created From: 01-Jul-21 00:00:00 AM To: 31-Jul-21 23:59:59 PM; Unit Org: Ali; Unit(s): All; Source: Ali; Community: Ali

| | | Type Count -700: | 5 |
|------------|-----------------------------------|--------------------------------------|----|
| C&G TOWING | ABANDONEDVEHICLE | ABANDONED VEHICLE | 3 |
| C&G TOWING | ACC NO INJURIES | ACCIDENT NO INJURIES | 1 |
| C&G TOWING | ACC UNKNOWN INJURIES | ACCIDENT UNKNOWN INJURIES | 4 |
| C&G TOWING | ACC WITH INJURIES | ACCIDENT WITH INJURIES | 3 |
| C&G TOWING | ASSIST MOTORIST | ASSIST MOTORIST OR STRANDED MOTORIST | 1 |
| C&G TOWING | DISTURBANCE OTHER | DISTURBANCE OTHER | 1 |
| C&G TOWING | SUSPICIOUS ACTIVITY | SUSPICIOUS ACTIVITY | 1 |
| C&G TOWING | TS | TRAFFIC STOP | 2 |
| | | | 16 |
| cso | 911HANGUP | 911 HANGUP | 1 |
| CSO | 9110PENLINE | 911 OPEN LINE | 4 |
| ccso | ABANDONEDVEHICLE | ABANDONED VEHICLE | 4 |
| CSO | ACC NO INJURIES | ACCIDENT NO INJURIES | 14 |
| CCSO | ACC NON AUTO RELATED | ACCIDENT NON AUTO RELATED | 3 |
| CCSO | ACC UNKNOWN INJURIES | ACCIDENT UNKNOWN INJURIES | 2 |
| CSO | ACC WITH INJURIES | ACCIDENT WITH INJURIES | 5 |
| CSO | ALARM BUSINESS | ALARM BUSINESS | 6 |
| CCSO | ALARM FIRE | ALARM FIRE | 2 |
| CCSO | ALARM RESIDENTIAL | ALARM RESIDENTIAL | 15 |
| CSO | AMB-BREATHING PROBLEM | BREATHING PROBLEM | 1 |
| CSO | AMB-UNRESPONSIVE NOT BREATHING | UNRESPONSIVE NOT BREATHING | 2 |
| CSO | ANIMAL LOST STOLEN | ANIMAL LOST STOLEN | 1 |
| ccso | ANIMAL MISC | ANIMAL MISC | 6 |
| ccso | ANIMAL NEAR ROAD | ANIMAL NEAR ROAD | 7 |

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| at the | Gran - | | ালচনত ল <i>উ</i> ন্দি ন |
|--------|--------------------------|--------------------------------------|----------------------------|
| CCSO | ANIMAL STRAY | ANIMAL STRAY | 4 |
| CCSO | AREA CHECK | AREA CHECK | 42 |
| CCSO | ASSIST AGENCY | ASSIST OTH AGENCY | 3 |
| CCSO | ASSIST CITIZEN | ASSIST CITIZEN | 1 |
| CCSO | ASSIST MOTORIST | ASSIST MOTORIST OR STRANDED MOTORIST | 17 |
| CCSO | BOLO | BOLO | 7 |
| CCSO | BUILDING CHECK | BUILDING CHECK | 211 |
| CCSO | BURGLARY DWELLING | BURGLARY DWELLING | 1 |
| CCSO | CARELESS DRIVING | CARELESS DRIVING | 8 |
| CCSO | CHILD RUN AWAY | CHILD RUN AWAY | 1 |
| CCSO | COMMITMENT ORDER | COMMITMENT ORDER | 7 |
| CCSO | CORONER NEEDED | CORONER NEEDED | 3 |
| CCSO | DISTURBANCE DOMESTIC | DISTURBANCE DOMESTIC | 3 |
| CCSO | DISTURBANCE MUSIC | DISTURBANCE MUSIC | 2 |
| CCSO | DISTURBANCE OTHER | DISTURBANCE OTHER | 25 |
| CCSO | DISTURBANCE WEAPON | DISTURBANCE WEAPON | 4 |
| CCSO | ELECTRIC NEEDED | ELECTRIC NEEDED | 1 |
| CCSO | ESCORT FUNERAL | ESCORT FUNERAL | 5 |
| CCSO | ESCORT GENERAL | ESCORT GENERAL | 4 |
| CCSO | FIGHT UNKNOWN WEAPONS | FIGHT UNKNOWN WEAPONS | 2 |
| CCSO | FIRE DWELLING | FIRE DWELLING | 1 |
| CCSO | FIRE GRASS BRUSH | FIRE GRASS BRUSH | 1 |
| CCSO | FIREWORKS | FIREWORKS | 2 |
| CCSO | FRAUD SCAM | FRAUD SCAM | 3 |
| CCSO | GAS CO NEEDED | GAS CO NEEDED | 1 |
| CCSO | GUNSHOTS HEARD | GUNSHOTS HEARD | 6 |
| CCSO | HARASSMENT | HARASSMENT | 6 |

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| Unit Org | | -Event Description | Type Count |
|----------|----------------------------|--------------------------|------------|
| CCSO | HARASSMENT TELEPHONE | HARASSMENT TELEPHONE | 1 |
| CCSO | HOUSE CHECK | HOUSE CHECK | 7 |
| CCSO | IDENTITY THEFT | IDENTITY THEFT | 1 |
| CCSO | ILLEGAL DUMPING | ILLEGAL DUMPING | 3 |
| CCSO | LOST-STOLEN ITEM | LOST-STOLEN ITEM | 2 |
| CCSO | MISSING PERSON | MISSING PERSON | 1 |
| CCSO | NCIC DL | NCIC DL | 4 |
| CCSO | NCIC OTHER | NCIC OTHER | 1 |
| CCSO | NCIC TAG | NCIC TAG | 55 |
| CCSO | OFFICER NEEDED | OFFICER NEEDED | 55 |
| CCSO | OVERDOSE | OVERDOSE | 1 |
| CCSO | RACING | RACING | 5 |
| CCSO | ROAD BLOCKED | ROAD BLOCKED OBJ IN ROAD | 2 |
| CCSO | ROAD CHECK | ROAD CHECK | 2 |
| CCSO | ROAD CLOSED | ROAD CLOSED | 1 |
| CCSO | SERVING WARRANT | SERVING WARRANT | 14 |
| CCSO | SUSPICIOUS ACTIVITY | SUSPICIOUS ACTIVITY | 22 |
| CCSO | SUSPICIOUS VEHICLE | SUSPICIOUS VEHICLE | 19 |
| CCSO | TAG LOG | TAG LOG | 1 |
| CCSO | THEFT | THEFT | 11 |
| CCSO | THEFT AUTO | THEFT AUTO | 1 |
| CCSO | THEFT PROPERTY | THEFT PROPERTY | 2 |
| CCSO | TRANSPORT | TRANSPORT | 27 |
| CCSO | TREE DOWN | TREE DOWN | 4 |
| CCSO | TRESPASSING | TRESPASSING | 8 |
| CCSO | TS | TRAFFIC STOP | 124 |
| CCSO | UNAUTHORIZE USE VEHICLE | UNAUTHORIZE USE VEHICLE | 1 |

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| MD Good I | JAN AND . | Bara a stastica for a start and a start | | | McCould |
|-----------|--------------------------------|---|---|---------------|----------|
| CCSO | VANDALISM DWELLING | VANDALISM DWELLING | - | | 1 |
| CCSO | VANDALISM OTHER | VANDALISM OTHER | | | 3 |
| CCSO | VANDALISM VEHICLE | VANDALISM VEHICLE | | | 2 |
| CCSO | VEHICLE PURSUIT | VEHICLE PURSUIT CAR CHASE | | | 1 |
| CCSO | WELFARE CHECK | WELFARE CHECK | | | 6 |
| | | | | Type Count -C | CSO: 832 |
| E911 | 911HANGUP | 911 HANGUP | | | 86 |
| E911 | 911NODISPATCH | 911 NO DISPATCH | | | 353 |
| E911 | 9110PENLINE | 911 OPEN LINE | | | 40 |
| E911 | 911TEST | 911 TEST CALL | | | 3 |
| E911 | 911TRANSFER TO OTHER AGENCY | R 911 TRANSFER TO OTHER AGENCY | | | 53 |
| E911 | ACC NO INJURIES | ACCIDENT NO INJURIES | | | 1 |
| E911 | AMB-CHEST PAIN | CHEST PAIN | | | 1 |
| E911 | AMB-FALL | FALL | | | 1 |
| E911 | ANIMAL MISC | ANIMAL MISC | | | 2 |
| E911 | CARELESS DRIVING | CARELESS DRIVING | | | 1 |
| E911 | CIVIL MATTER | CIVIL MATTER | | | 1 |
| E911 | DISTURBANCE OTHER | DISTURBANCE OTHER | | | 1 |
| E911 | ELECTRIC NEEDED | ELECTRIC NEEDED | | | 1 |
| E911 | FIRE GRASS BRUSH | FIRE GRASS BRUSH | | | 1 |
| E911 | FIREWORKS | FIREWORKS | | | 1 |
| E911 | OFFICER NEEDED | OFFICER NEEDED | | | 3 |
| E911 | REPO | REPO | | | 6 |
| E911 | ROAD BLOCKED | ROAD BLOCKED OBJ IN ROAD | | | 1 |
| E911 | SHOPLIFTING | SHOPLIFTING | | | 1 |
| E911 | SICK PATIENT | SICK PATIENT | | | 1 |
| E911 | SUSPICIOUS ACTIVITY | SUSPICIOUS ACTIVITY | | | 1 |



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| E911 | WELFARE CHECK | WELFARE CHECK | | 4 |
|--------------|--------------------------------|--------------------------------------|--------------------------------|-----|
| | | WELFARE CHECK | | 7 |
| | | | Type Count -E911: | 560 |
| EMA | 911NODISPATCH | 911 NO DISPATCH | | 1 |
| EMA | ACC WITH INJURIES | ACCIDENT WITH INJURIES | | 1 |
| EMA | BOLO | BOLO | | 1 |
| EMA | CHILD RUN AWAY | CHILD RUN AWAY | | 1 |
| EMA | DISTURBANCE WEAPON | DISTURBANCE WEAPON | | 1 |
| EMA | FIRE DPT NO FIRE | FIRE DPT NEEDED NO FIRE | | 1 |
| EMA | MISSING PERSON | MISSING PERSON | | 2 |
| EMA | OFFICER NEEDED | OFFICER NEEDED | | 1 |
| EMA | VANDALISM OTHER | VANDALISM OTHER | | 1 |
| | | | Type Count -EMA: | 10 |
| GUEST TOWING | ABANDONEDVEHICLE | ABANDONED VEHICLE | | 2 |
| BUEST TOWING | ACC NO INJURIES | ACCIDENT NO INJURIES | | 2 |
| BUEST TOWING | ACC UNKNOWN INJURIES | ACCIDENT UNKNOWN INJURIES | | 4 |
| GUEST TOWING | ACC WITH INJURIES | ACCIDENT WITH INJURIES | | 4 |
| SUEST TOWING | ASSIST MOTORIST | ASSIST MOTORIST OR STRANDED MOTORIST | | 1 |
| GUEST TOWING | DISTURBANCE OTHER | DISTURBANCE OTHER | | 1 |
| SUEST TOWING | TS | TRAFFIC STOP | | 5 |
| | | | _ Type Count -GUEST TOWING: | 19 |
| | 911TRANSFER TO OTHER AGENCY | 911 TRANSFER TO OTHER AGENCY | | 2 |
| AISC | ACC NO INJURIES | ACCIDENT NO INJURIES | | 6 |
| AISC | ACC NON AUTO RELATED | ACCIDENT NON AUTO RELATED | | 2 |
| AISC | ACC UNKNOWN INJURIES | ACCIDENT UNKNOWN INJURIES | | 1 |
| MISC | ACC WITH INJURIES | ACCIDENT WITH INJURIES | | 2 |
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|---------------|---------------------|--------------------------------------|--------------|
| MISC | AMB-LIFT ASSIST | LIFT ASSIST | 1 |
| MISC | ANIMAL MISC | ANIMAL MISC | 3 |
| MISC | ANIMAL STRAY | ANIMAL STRAY | 1 |
| MISC | ASSIST MOTORIST | ASSIST MOTORIST OR STRANDED MOTORIST | 3 |
| MISC | CARBON MONOXIDE | CARBON MONOXIDE | 1 |
| MISC | CARELESS DRIVING | CARELESS DRIVING | 3 |
| MISC | ELECTRIC NEEDED | ELECTRIC NEEDED | 9 |
| MISC | ESCORT GENERAL | ESCORT GENERAL | 1 |
| MISC | FIRE ELECTRICAL | FIRE ELECTRICAL | 1 |
| MISC | FIRE GRASS BRUSH | FIRE GRASS BRUSH | 1 |
| MISC | GAS CO NEEDED | GAS CO NEEDED | 1 |
| MISC | MISSING PERSON | MISSING PERSON | 1 |
| MISC | NCIC DL | NCIC DL | 3 |
| MISC | OFFICER NEEDED | OFFICER NEEDED | 2 |
| MISC | ROAD BLOCKED | ROAD BLOCKED OBJ IN ROAD | 4 |
| MISC | ROAD CLOSED | ROAD CLOSED | 1 |
| MISC | SERVING WARRANT | SERVING WARRANT | 6 |
| MISC | SEWER PROBLEM | SEWER PROBLEM | 1 |
| MISC | SUSPICIOUS ACTIVITY | SUSPICIOUS ACTIVITY | 2 |
| MISC | SUSPICIOUS OBJECT | SUSPICIOUS OBJECT | 2 |
| MISC | THEFT AUTO | THEFT AUTO | 1 |
| MISC | TRAFFIC LIGHT OUT | TRAFFIC LIGHT OUT | 2 |
| MISC | TRANSPORT | TRANSPORT | 2 |
| MISC | TREE DOWN | TREE DOWN | 7 |
| MISC | WATER DEPT NEEDED | WATER DEPT NEEDED | 15 |
| MISC | WATER LINE PROBLEM | WATER LINE PROBLEM | 1 |
| | | Туре Соц | t -MISC: 88 |
| RUPERT TOWING | ABANDONEDVEHICLE | ABANDONED VEHICLE | 2 |
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| Unit Org | Event | EventiDescriptions and the second s | vpé Co |
|---------------|----------------------------|---|--------|
| RUPERT TOWING | ACC NO INJURIES | ACCIDENT NO INJURIES | 1 |
| RUPERT TOWING | ACC UNKNOWN INJURIES | ACCIDENT UNKNOWN INJURIES | 4 |
| RUPERT TOWING | ACC WITH INJURIES | ACCIDENT WITH INJURIES | 2 |
| RUPERT TOWING | ASSIST MOTORIST | ASSIST MOTORIST OR STRANDED MOTORIST | 1 |
| RUPERT TOWING | DISTURBANCE OTHER | DISTURBANCE OTHER | 1 |
| RUPERT TOWING | FIGHT UNKNOWN WEAPONS | FIGHT UNKNOWN WEAPONS | 1 |
| RUPERT TOWING | TS | TRAFFIC STOP | 1 |
| | | - Type Count -RUPERT TOWING: | 13 |
| VEST POINT FD | 911NODISPATCH | 911 NO DISPATCH | 1 |
| WEST POINT FD | ACC UNKNOWN INJURIES | ACCIDENT UNKNOWN INJURIES | 1 |
| WEST POINT FD | ACC WITH INJURIES | ACCIDENT WITH INJURIES | 2 |
| VEST POINT FD | ALARM BUSINESS | ALARM BUSINESS | 2 |
| VEST POINT FD | ALARM FIRE | ALARM FIRE | 10 |
| WEST POINT FD | AMB-BLEEDING | BLEEDING | 1 |
| WEST POINT FD | AMB-FALL | FALL | 1 |
| VEST POINT FD | AMB-LIFT ASSIST | LIFT ASSIST | 3 |
| WEST POINT FD | AMB-POSS MENTAL PATIENT | POSSIBLE MENTAL PATIENT | 1 |
| WEST POINT FD | AMB-UNRESPONSIVE | UNRESPONSIVE NOT BREATHING | 1 |
| VEST POINT FD | CARBON MONOXIDE | CARBON MONOXIDE | 1 |
| WEST POINT FD | ELECTRIC NEEDED | ELECTRIC NEEDED | 1 |
| WEST POINT FD | FIRE AUTO | FIRE AUTO | 1 |
| WEST POINT FD | FIRE BUSINESS | FIRE BUSINESS | 1 |
| WEST POINT FD | FIRE CONTROL BURN | FIRE CONTROL BURN | 2 |
| WEST POINT FD | FIRE DPT NO FIRE | FIRE DPT NEEDED NO FIRE | 3 |
| WEST POINT FD | FIRE DWELLING | FIRE DWELLING | 1 |

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|---------------|--------------------------------|------------------------------|---------|
| WEST POINT FD | FIRE ELECTRICAL | FIRE ELECTRICAL | 1 |
| WEST POINT FD | FIRE OTHER | FIRE OTHER | 3 |
| WEST POINT FD | GAS CO NEEDED | GAS CO NEEDED | 2 |
| WEST POINT FD | OFFICER NEEDED | OFFICER NEEDED | 1 |
| WEST POINT FD | SICK PATIENT | SICK PATIENT | 2 |
| | | Type Count -WEST POINT FD: | 42 |
| WPAS | 911NODISPATCH | 911 NO DISPATCH | 3 |
| WPAS | 911TRANSFER TO OTHER AGENCY | 911 TRANSFER TO OTHER AGENCY | 1 |
| WPAS | ACC HIT&RUN | ACCIDENT HIT & RUN | 1 |
| WPAS | ACC NO INJURIES | ACCIDENT NO INJURIES | 2 |
| WPAS | ACC UNKNOWN INJURIES | ACCIDENT UNKNOWN INJURIES | 5 |
| WPAS | ACC WITH INJURIES | ACCIDENT WITH INJURIES | 8 |
| WPAS | AMB-ABDOMINAL PAIN | ABDOMINAL PAIN | 2 |
| WPAS | AMB-BLEEDING | BLEEDING | 6 |
| WPAS | AMB-BREATHING PROBLEM | BREATHING PROBLEM | 25 |
| WPAS | AMB-BROKEN BONE | BROKEN BONE | 1 |
| WPAS | AMB-CHEST PAIN | CHEST PAIN | 6 |
| WPAS | AMB-DIABETIC PROBLEM | DIABETIC PROBLEM | 4 |
| WPAS | AMB-FALL | FALL | 25 |
| WPAS | AMB-HEADACHE | HEADACHE | 1 |
| WPAS | AMB-LIFT ASSIST | LIFT ASSIST | 10 |
| WPAS | AMB-POSS MENTAL PATIENT | POSSIBLE MENTAL PATIENT | 3 |
| WPAS | AMB-POSS SEIZURE | POSSIBLE SEIZURE | 5 |
| WPAS | AMB-POSS STROKE | POSSIBLE STROKE | 4 |
| WPAS | AMB-POSTING AT | POSTING AT COUNTY LINE | 7 |



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| UnitOrga | | Event Description | Type Count |
|----------|-------------------------------|----------------------------|------------|
| | COUNTY LINE | | |
| WPAS | AMB-TRANSFER IN COUNTY | AMB TRANSFER IN THE COUNTY | 13 |
| WPAS | AMB-TRANSFER OUT COUNTY | AMB TRANSFER OUT OF COUNTY | 58 |
| WPAS | AMB-UNRESPONSIVE BREATHING | UNRESPONSIVE BREATHING | 4 |
| WPAS | AMB-UNRESPONSIVE | UNRESPONSIVE NOT BREATHING | 2 |
| WPAS | AMB-VOMITTING | VOMITTING | 7 |
| WPAS | CARBON MONOXIDE | CARBON MONOXIDE | 1 |
| WPAS | DISTURBANCE OTHER | DISTURBANCE OTHER | 2 |
| WPAS | DISTURBANCE WEAPON | DISTURBANCE WEAPON | 1 |
| WPAS | FIGHT UNKNOWN WEAPONS | FIGHT UNKNOWN WEAPONS | 1 |
| WPAS | FIRE DPT NO FIRE | FIRE DPT NEEDED NO FIRE | 1 |
| WPAS | GUNSHOTS HEARD | GUNSHOTS HEARD | 2 |
| WPAS | OFFICER NEEDED | OFFICER NEEDED | 5 |
| WPAS | OVERDOSE | OVERDOSE | 2 |
| WPAS | SHOOTING | SHOOTING | 1 |
| WPAS | SICK PATIENT | SICK PATIENT | 76 |
| WPAS | SUICIDE THREATENED | SUICIDE THREATENED | 1 |
| WPAS | SUSPICIOUS ACTIVITY | SUSPICIOUS ACTIVITY | 2 |
| WPAS | THEFT | THEFT | 1 |
| WPAS | TRANSPORT | TRANSPORT | 13 |
| WPAS | TS | TRAFFIC STOP | 1 |
| WPAS | WELFARE CHECK | WELFARE CHECK | 3 |

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Type Count -WPAS: 316

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|--|-----------------------------------|--------------------------------------|-------------|
| WPPD | 911HANGUP | 911 HANGUP | 5 |
| WPPD | 911NODISPATCH | 911 NO DISPATCH | 4 |
| WPPD | 9110PENLINE | 911 OPEN LINE | 5 |
| WPPD | 911TEST | 911 TEST CALL | 1 |
| WPPD | ABANDONEDVEHICLE | ABANDONED VEHICLE | 3 |
| WPPD | ACC HIT&RUN | ACCIDENT HIT & RUN | 10 |
| WPPD | ACC NO INJURIES | ACCIDENT NO INJURIES | 38 |
| WPPD | ACC NON AUTO RELATED | ACCIDENT NON AUTO RELATED | 2 |
| WPPD | ACC UNKNOWN INJURIES | ACCIDENT UNKNOWN INJURIES | 8 |
| WPPD | ACC WITH INJURIES | ACCIDENT WITH INJURIES | 4 |
| WPPD | ALARM BUSINESS | ALARM BUSINESS | 34 |
| WPPD | ALARM FIRE | ALARM FIRE | 2 |
| WPPD | ALARM RESIDENTIAL | ALARM RESIDENTIAL | 23 |
| WPPD | ALARM SCHOOL | ALARM SCHOOL | 4 |
| WPPD | AMB-BLEEDING | BLEEDING | 2 |
| WPPD | AMB-FALL | FALL | 2 |
| WPPD | AMB-POSS MENTAL PATIENT | POSSIBLE MENTAL PATIENT | 2 |
| WPPD | AMB-UNRESPONSIVE NOT BREATHING | UNRESPONSIVE NOT BREATHING | 1 |
| WPPD | ANIMAL MISC | ANIMAL MISC | 25 |
| WPPD | ANIMAL NEAR ROAD | ANIMAL NEAR ROAD | 4 |
| WPPD | ANIMAL STRAY | ANIMAL STRAY | 21 |
| WPPD | AREA CHECK | AREA CHECK | 113 |
| WPPD | ASSIST AGENCY | ASSIST OTH AGENCY | 3 |
| WPPD | ASSIST CITIZEN | ASSIST CITIZEN | 6 |
| WPPD | ASSIST MOTORIST | ASSIST MOTORIST OR STRANDED MOTORIST | 35 |
| WPPD | BOLO | BOLO | 7 |
| WPPD | BUILDING CHECK | BUILDING CHECK | 154 |

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| Unit Org | | Event Description | Cive Count |
|----------|----------------------------|-------------------------|------------|
| WPPD | BURGLARY DWELLING | BURGLARY DWELLING | 4 |
| WPPD | BURLGARY AUTO | BURGLARY FROM AN AUTO | 1 |
| WPPD | CARELESS DRIVING | CARELESS DRIVING | 17 |
| WPPD | CIVIL MATTER | CIVIL MATTER | 2 |
| WPPD | CLEAR PARKING LOT | CLEAR PARKING LOT | 18 |
| WPPD | COMMITMENT ORDER | COMMITMENT ORDER | 1 |
| WPPD | DISTURBANCE DOMESTIC | DISTURBANCE DOMESTIC | 9 |
| WPPD | DISTURBANCE INTOXICATED | DISTURBANCE INTOXICATED | 1 |
| WPPD | DISTURBANCE MUSIC | DISTURBANCE MUSIC | 12 |
| WPPD | DISTURBANCE OTHER | DISTURBANCE OTHER | 57 |
| WPPD | DISTURBANCE WEAPON | DISTURBANCE WEAPON | 5 |
| WPPD | ELECTRIC NEEDED | ELECTRIC NEEDED | 3 |
| WPPD | ESCORT BANK | ESCORT BANK | 11 |
| WPPD | ESCORT FUNERAL | ESCORT FUNERAL | 7 |
| WPPD | ESCORT GENERAL | ESCORT GENERAL | 6 |
| WPPD | FIGHT UNKNOWN WEAPONS | FIGHT UNKNOWN WEAPONS | 7 |
| WPPD | FIRE AUTO | FIRE AUTO | 1 |
| WPPD | FIRE CONTROL BURN | FIRE CONTROL BURN | 1 |
| WPPD | FIRE DPT NO FIRE | FIRE DPT NEEDED NO FIRE | 2 |
| WPPD | FIRE DWELLING | FIRE DWELLING | 1 |
| WPPD | FIREWORKS | FIREWORKS | 20 |
| WPPD | FRAUD SCAM | FRAUD SCAM | 7 |
| WPPD | GUNSHOTS HEARD | GUNSHOTS HEARD | 24 |
| WPPD | HARASSMENT | HARASSMENT | 8 |
| WPPD | HARASSMENT TELEPHONE | HARASSMENT TELEPHONE | 3 |

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|---------|---------------------|--------------------------|-----------------|
| WPPD | HOUSE CHECK | HOUSE CHECK | 3 |
| WPPD | IDENTITY THEFT | IDENTITY THEFT | 3 |
| WPPD | LOST AND FOUND | LOST AND FOUND | 2 |
| WPPD | LOST-STOLEN ITEM | LOST-STOLEN ITEM | 4 |
| WPPD | MISSING PERSON | MISSING PERSON | 3 |
| WPPD | NCIC DL | NCIC DL | 11 |
| WPPD | NCIC ENTRY | NCIC ENTRY | 1 |
| WPPD | NCIC TAG | NCIC TAG | 55 |
| WPPD | OFFICER NEEDED | OFFICER NEEDED | 163 |
| WPPD | OVERDOSE | OVERDOSE | 1 |
| WPPD | PARKING VIOLATION | PARKING VIOLATION | 1 |
| WPPD | RACING | RACING | 8 |
| WPPD | ROAD BLOCKED | ROAD BLOCKED OBJ IN ROAD | 6 |
| WPPD | SAFETY CHECKPOINT | SAFETY CHECKPOINT DETAIL | 5 |
| WPPD | SERVING WARRANT | SERVING WARRANT | 31 |
| WPPD | SHOOTING | SHOOTING | 2 |
| WPPD | SHOPLIFTING | SHOPLIFTING | 6 |
| WPPD | SICK PATIENT | SICK PATIENT | 4 |
| WPPD | SUICIDE THREATENED | SUICIDE THREATENED | 1 |
| WPPD | SUSPICIOUS ACTIVITY | SUSPICIOUS ACTIVITY | 59 |
| WPPD | SUSPICIOUS OBJECT | SUSPICIOUS OBJECT | 3 |
| WPPD | SUSPICIOUS VEHICLE | SUSPICIOUS VEHICLE | 28 |
| WPPD | TAG LOG | TAG LOG | 18 |
| WPPD | THEFT | THEFT | 14 |
| WPPD | THEFT AUTO | THEFT AUTO | 1 |
| WPPD | TRANSPORT | TRANSPORT | 6 |
| WPPD | TREE DOWN | TREE DOWN | 2 |
| WPPD | TRESPASSING | TRESPASSING | 5 |
| WPPD | TS | TRAFFIC STOP | 356 |
| | | | |

Page 13 of 14



Type Total Report

| Print Date: | 04-Aug-21 |
|-------------|-------------|
| Print Time: | 07:49:37 AM |
| User Name: | twilliams |

Incidents Created From: 01-Jul-21 00:00:00 AM To: 31-Jul-21 23:59:59 PM; Unit Org: All; Unit(s): All; Source: All; Community: All

| | on Event | Event Description: | |
|--------------|--------------------------|--------------------------------------|------|
| VPPD | VANDALISM BUSINESS | VANDALISM BUSINESS | 1 |
| VPPD | VANDALISM DWELLING | VANDALISM DWELLING | 3 |
| VPPD | VANDALISM VEHICLE | VANDALISM VEHICLE | 5 |
| /PPD | VEHICLE PURSUIT | VEHICLE PURSUIT CAR CHASE | 4 |
| VPPD | WELFARE CHECK | WELFARE CHECK | 17 |
| | | Type Count -WPPD: | 1578 |
| RECKER WORKS | ABANDONEDVEHICLE | ABANDONED VEHICLE | 1 |
| RECKER WORKS | ACC NO INJURIES | ACCIDENT NO INJURIES | 3 |
| RECKER WORKS | ACC UNKNOWN INJURIES | ACCIDENT UNKNOWN INJURIES | 4 |
| RECKER WORKS | ASSIST MOTORIST | ASSIST MOTORIST OR STRANDED MOTORIST | 2 |
| RECKER WORKS | FIGHT UNKNOWN WEAPONS | FIGHT UNKNOWN WEAPONS | 1 |
| RECKER WORKS | SUSPICIOUS ACTIVITY | SUSPICIOUS ACTIVITY | 1 |
| RECKER WORKS | тѕ | TRAFFIC STOP | 3 |
| RECKER WORKS | VEHICLE PURSUIT | VEHICLE PURSUIT CAR CHASE | 1 |

Type Count -WRECKER WORKS: 16

Total Incidents: 3234



Type Total Report

| Print Date: | 04-Aug-21 |
|-------------|-------------|
| Print Time: | 07:58:59 AM |
| User Name: | twilliams |

Incidents Created From: 01-Jul-21 00:00:00 AM To: 31-Jul-21 23:59:59 PM; Unit Org: Clay.EMS.WPAS; Unit(s): All; Source: All; Community: All

| | | Fry. Mespiller | Ngha Ferebil |
|------|--------------------------------|------------------------------|--------------|
| WPAS | 911NODISPATCH | 911 NO DISPATCH | 3 |
| WPAS | 911TRANSFER TO OTHER AGENCY | 911 TRANSFER TO OTHER AGENCY | 1 |
| WPAS | ACC HIT&RUN | ACCIDENT HIT & RUN | 1 |
| WPAS | ACC NO INJURIES | ACCIDENT NO INJURIES | 2 |
| WPAS | ACC UNKNOWN INJURIES | ACCIDENT UNKNOWN INJURIES | 5 |
| WPAS | ACC WITH INJURIES | ACCIDENT WITH INJURIES | 8 |
| WPAS | AMB-ABDOMINAL PAIN | ABDOMINAL PAIN | 2 |
| WPAS | AMB-BLEEDING | BLEEDING | 6 |
| WPAS | AMB-BREATHING PROBLEM | BREATHING PROBLEM | 25 |
| WPAS | AMB-BROKEN BONE | BROKEN BONE | 1 |
| WPAS | AMB-CHEST PAIN | CHEST PAIN | 6 |
| WPAS | AMB-DIABETIC PROBLEM | DIABETIC PROBLEM | 4 |
| WPAS | AMB-FALL | FALL | 25 |
| WPAS | AMB-HEADACHE | HEADACHE | 1 |
| WPAS | AMB-LIFT ASSIST | LIFT ASSIST | 10 |
| WPAS | AMB-POSS MENTAL PATIENT | POSSIBLE MENTAL PATIENT | 3 |
| WPAS | AMB-POSS SEIZURE | POSSIBLE SEIZURE | 5 |
| WPAS | AMB-POSS STROKE | POSSIBLE STROKE | 4 |
| WPAS | AMB-POSTING AT COUNTY LINE | POSTING AT COUNTY LINE | 7 |
| WPAS | AMB-TRANSFER IN COUNTY | AMB TRANSFER IN THE COUNTY | 13 |
| WPAS | AMB-TRANSFER OUT COUNTY | AMB TRANSFER OUT OF COUNTY | 58 |
| WPAS | AMB-UNRESPONSIVE BREATHING | UNRESPONSIVE BREATHING | 4 |
| WPAS | AMB-UNRESPONSIVE | UNRESPONSIVE NOT BREATHING | 2 |
| | | For Official Use Only | Page 1 of 2 |



Type Total Report

Print Date:04-Aug-21Print Time:07:58:59 AMUser Name:twilliams

Incidents Created From: 01-Jul-21 00:00:00 AM To: 31-Jul-21 23:59:59 PM; Unit Org: Clay.EMS.WPAS; Unit(s): All; Source: All; Community: All

| | | Event Description | |
|------|--------------------------|-------------------------|-----|
| | NOT BREATHING | | |
| VPAS | AMB-VOMITTING | VOMITTING | 7 |
| /PAS | CARBON MONOXIDE | CARBON MONOXIDE | 1 |
| /PAS | DISTURBANCE OTHER | DISTURBANCE OTHER | 2 |
| /PAS | DISTURBANCE WEAPON | DISTURBANCE WEAPON | 1 |
| VPAS | FIGHT UNKNOWN WEAPONS | FIGHT UNKNOWN WEAPONS | 1 |
| /PAS | FIRE DPT NO FIRE | FIRE DPT NEEDED NO FIRE | 1 |
| /PAS | GUNSHOTS HEARD | GUNSHOTS HEARD | 2 |
| /PAS | OFFICER NEEDED | OFFICER NEEDED | - 5 |
| 'PAS | OVERDOSE | OVERDOSE | 2 |
| 'PAS | SHOOTING | SHOOTING | - 1 |
| 'PAS | SICK PATIENT | SICK PATIENT | 76 |
| PAS | SUICIDE THREATENED | SUICIDE THREATENED | 1 |
| PAS | SUSPICIOUS ACTIVITY | SUSPICIOUS ACTIVITY | 2 |
| PAS | THEFT | THEFT | - 1 |
| PAS | TRANSPORT | TRANSPORT | 13 |
| PAS | TS | TRAFFIC STOP | 1 |
| PAS | WELFARE CHECK | WELFARE CHECK | 3 |

Type Count -WPAS: 316

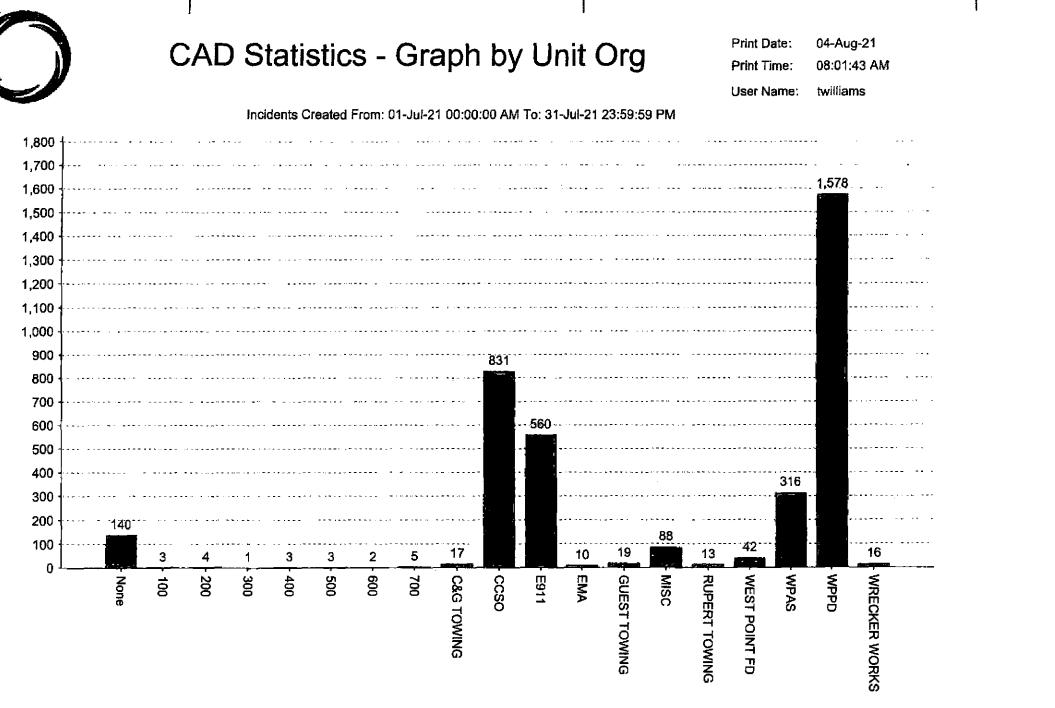
Total Incidents: 316

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For Official Use Only

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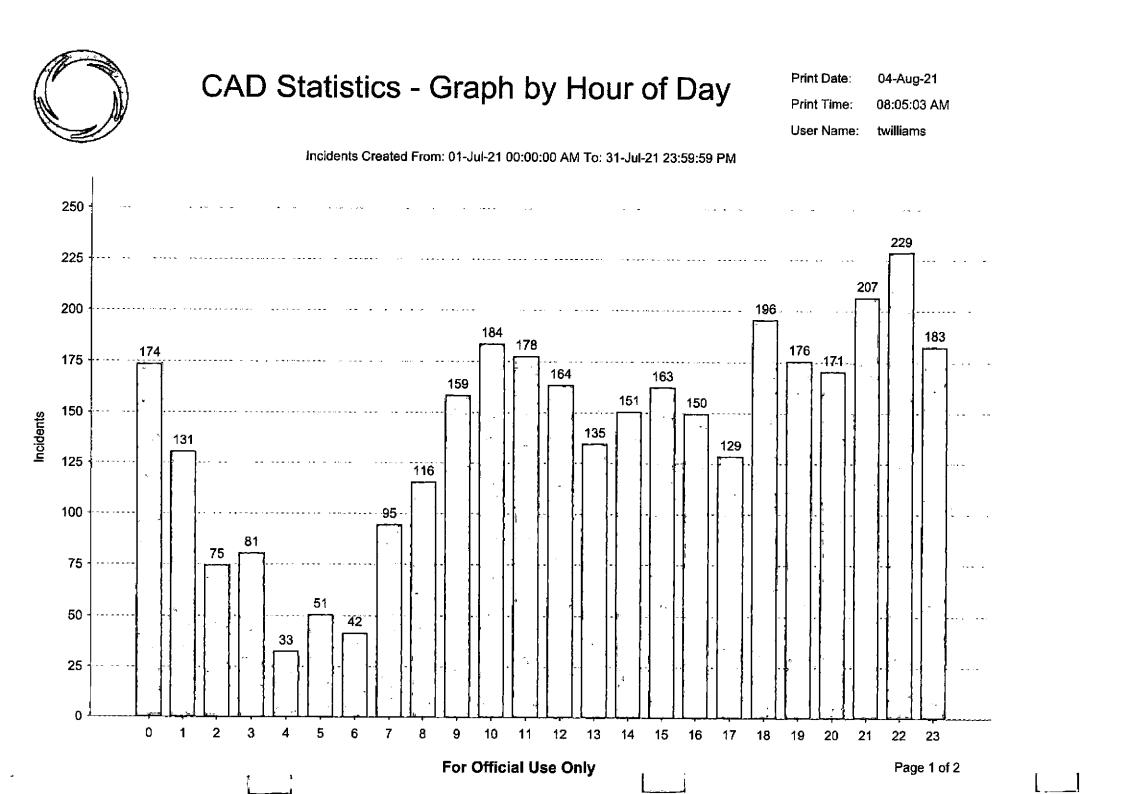
• •----



For Official Use Only

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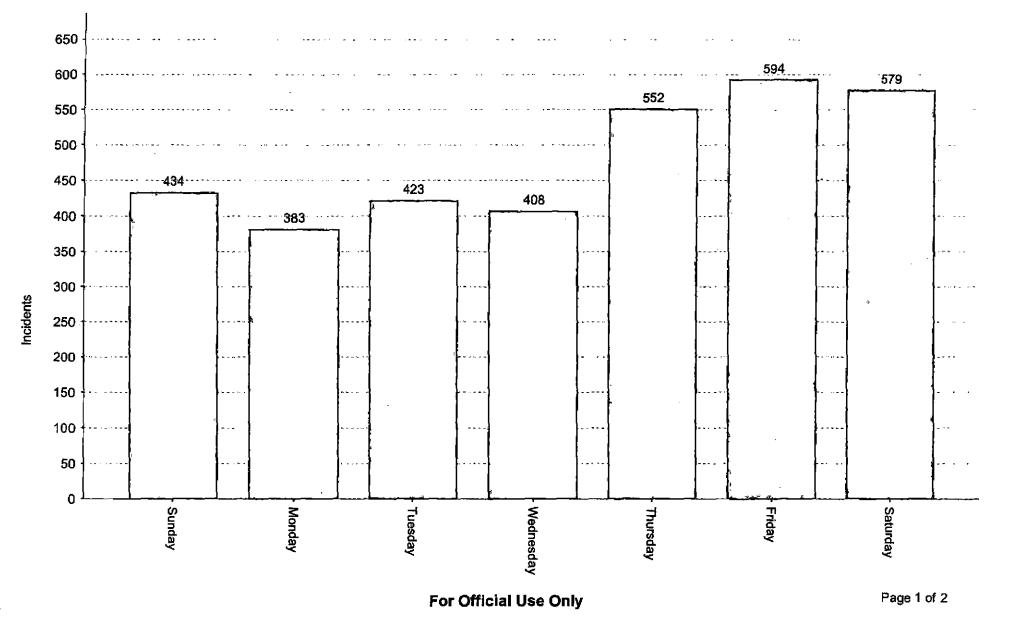




CAD Statistics - Graph by Day of Week

Print Date:04-Aug-21Print Time:08:08:33 AMUser Name:twilliams

Incidents Created From: 01-Jul-21 00:00:00 AM To: 31-Jul-21 23:59:59 PM







RESOLUTION REQUESTING GOVERNOR TO PROCLAIM

A STATE OF EMERGENCY WHEREAS, on April 12th , 20 20, the Board of Supervisors (City Council) Clay of the County of found that due to the impact (or imminent threat) a condition of extreme peril of (earthquake, flood, hazmat, hurricane, severe storm, other) to life and property did exist in $\underline{C}\alpha \gamma$ County; and WHEREAS, on Aug 5th, 2020, in accordance with State Law 33-15-17(d) the Board of Supervisors declared that an emergency does exist throughout said county; and WHEREAS, it has now been found that local resources are unable to cope with the effects of said emergency; NOW, THEREFORE, IT IS HEREBY DECLARED AND ORDERED that a copy of this declaration be forwarded to the Governor of Mississippi with the request that he proclaim the County (City) of _____ _ to be in a State of Emergency; and EMA Director IT IS FURTHER RESOLVED that _____ Jorrey Williams (Person) (Title) is thereby designated as the authorized representative of the County (City) of Clay _ for the purpose of receipt, processing, and coordination of all inquiries State and Federal assistance. and requirements necessary to glorain available DATE: or (Board Fresident) ATTEST Clerk of the Board of Board Member Supervisors (or City), **Board Member** County of **Board Member** State of M

MEMA DR-4 (Rev. 12/01)

RESOLUTION REQUESTING GOVERNOR TO PROCLAIM

A STATE OF EMERGENCY

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| WHEREAS, on <u>Feb 22nd</u> , 20 <u>19</u> , the Board of Supervisors (City Council) of the County of <u>Clay</u> found that due to the impact (or imminent threat) |
|---|
| of the County of <u>Clay</u> found that due to the impact (or imminent threat) |
| of a condition of extreme peril (earthquake, flood, hazmat, hurricane, severe storm, other) |
| (earthquake, flood, hazmat, hurricane, severe storm, other) |
| to life and property did exist in County; and |
| WHEREAS, on Aug_54 , 2021, in accordance with State Law 33-15-17(d) the |
| Board of Supervisors declared that an emergency does exist throughout said county; and |
| WHEREAS, it has now been found that local resources are unable to cope with the |
| effects of said emergency; |
| NOW, THEREFORE, IT IS HEREBY DECLARED AND ORDERED that a copy of |
| this declaration be forwarded to the Governor of Mississippi with the request that he proclaim |
| the County (City) of <u>Clay</u> to be in a State of Emergency; and |
| IT IS FURTHER RESOLVED that Jorrey Williams, EMA Director |
| IT IS FURTHER RESOLVED that <u>lorrey Will, ans</u> , <u>FMA</u> <u>Drector</u> (Person) (Title) is thereby designated as the authorized representative of the County (City) of |
| <u><u>Clay</u> for the purpose of receipt, processing, and coordination of all inquiries</u> |
| and requirements necessary population available state and Federal assistance? |
| DATE: SS 200 Start Board President) |
| ATTEST: |
| - formand famous |
| Clerk of the Board of Supervisors (or City), Board Member |
| County of: Board Member |
| State of Mississippi Board Member |
| MEMA DR-4 (Rev. 12/01) |

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PROCLAMATION OF EXISTENCE OF A LOCAL EMERGENCY (by City Council or County Board of Supervisors)

| WHEREAS, Clay | the City Council /or Board of |
|---|--|
| Supervisors does hereby find that cor | the City Council /or Board of aditions of extreme peril to the safety of persons and property |
| have arisen within said City /County, | caused by Flooding |
| (Scvere storm, to | rnado, damaging winds, flash flooding, river flooding |
| | zardous material incident, epidemic, hurricanc, earthquake, other) |
| WHEREAS, the aforesaid con | \widehat{M} PM on the <u>22</u> day of <u>Febrary</u> , 20 <u>19</u> ; and nditions of extreme peril warrant and necessitate the l emergency in order to provide for the health and safety of the perty within the affected jurisdiction; |
| 33-15-17(d), Mississippi Code of 1972 City /County; and shall be reviewed ev | CHEREBY PROCLAIMED that in accordance with Section 2, as amended, a local emergency now exists throughout said very thirty (30) days until such local emergency is no longer by the City Council / Board of Supervisors of the City / State of Mississippi. |
| IT IS FURTHER PROCLA | IMED AND ORDERED that all City / County agencies and |
| | ssistance and discharge their emergency responsibilities as set |
| forth in the City / County Emergency | Operations Plan. |
| DATE: \$\5\2.2\ 1000 | OF SUPER The Think |
| APTESP. | President of Board of Supervisors |
| Clerk of City / Chancery | |
| Clerk for Board of Supervisors | AV COUNT Luke Lunnus |
| | Councilperson / Supervisor |
| City / or County, State of MS | Councilperson / Supervisor |
| v | Councilperson / Supervisor |

MEMA DR-3 (Rev.12.01)

RESOLUTION REQUESTING GOVERNOR TO PROCLAIM

A STATE OF EMERGENCY

| WHEREAS, on Feb 10 ^H , 2020, the Board of Supervisors (City Council) |
|---|
| of the County of $\underline{C \mid a \gamma}$ found that due to the impact (or imminent threat) |
| of <u>Flooding / Severe Weather</u> a condition of extreme peril (earthquake, flood, harmat, hurricane, severe storm, other) |
| to life and property did exist in <u>Clay</u> County; and |
| WHEREAS, on Aug_5^{\ddagger} , 20 ZI, in accordance with State Law 33-15-17(d) the |
| Board of Supervisors declared that an emergency does exist throughout said county; and |
| WHEREAS, it has now been found that local resources are unable to cope with the |
| effects of said emergency; |
| NOW, THEREFORE, IT IS HEREBY DECLARED AND ORDERED that a copy of |
| this declaration be forwarded to the Governor of Mississippi with the request that he proclaim |
| the County (City) of <u>Clay</u> to be in a State of Emergency; and |
| IT IS FURTHER RESOLVED that <u>lorrey Williams</u> , <u>EMA Director</u> (Person) (Title) |
| is thereby designated as the authorized representative of the County (City) of |
| $\underline{(a)}$ for the purpose of receipt, processing, and coordination of all inquiries |
| and requirements necessary to obtain sound and Federal assistance. |
| DATE: 85 2081 State lun |
| ATTEST: CAV COUNT & Bobed Member Amount |
| Clerk of the Board of Board Member Supervisors (or City), |
| County of: Board Member |
| State of Mississippi Board Member |

MEMA DR-4 (Rev. 12/01)

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RESOLUTION REQUESTING GOVERNOR TO PROCLAIM

A STATE OF EMERGENCY

| WHEREAS, on $\underline{Jan 20^{4}}$, 20 <u>20</u> , the Board of Supervisors (City Council) |
|--|
| WHEREAS, on <u>Jan 20⁴</u> , 20 <u>20</u> , the Board of Supervisors (City Council) of the County of <u>Clay</u> found that due to the impact (or imminent threat) |
| of <u>COVID19</u> Pandemic a condition of extreme peril (earthquake, flood, hazmat, hurricane, severe storm, other) |
| to life and property did exist in <u>Clay</u> County; and |
| to life and property did exist in <u>Clay</u> County, and WHEREAS, on <u>Aug</u> $5^{\pm h}$, 20 <u>21</u> , in accordance with State Law 33-15-17(d) the |
| Board of Supervisors declared that an emergency does exist throughout said county; and |
| WHEREAS, it has now been found that local resources are unable to cope with the |
| effects of said emergency; |
| NOW, THEREFORE, IT IS HEREBY DECLARED AND ORDERED that a copy of |
| this declaration be forwarded to the Governor of Mississippi with the request that he proclaim |
| the County (City) of <u>Clay</u> to be in a State of Emergency; and IT IS FURTHER RESOLVED that <u>Torrey Williams</u> , <u>EMA Director</u> (Person) (Title) |
| IT IS FURTHER RESOLVED that <u>Jorrey Williams</u> , <u>EMA</u> <u>Director</u> (Person) (Title) |
| is thereby designated as the authorized representative of the County (City) of |
| $- \underline{C(ay)}_{ay}$ for the purpose of receipt, processing, and coordination of all inquiries |
| and requirements necessary to obtain available State and Federal assistance. |
| DATE: 8 S 2021 Abella (Board President) |
| ATTEST: Mayor (Board President) |
| Clerk of the Board of Supervisors (or Cita) |
| Supervisors (or City), Board Member |
| State of Mississippi Board Member |

State of Mississippi

MEMA DR-4 (Rev. 12/01)

PROCLAMATION OF EXISTENCE OF A LOCAL EMERGENCY (by City Council or County Board of Supervisors)

| WHEREAS, Clay | the Gity Council /or Board of |
|--|--|
| | of extreme peril to the safety of persons and property |
| have arisen within said City /County, caused | l hy |
| | WinterStorm |
| (Severe storm, tornado, dan | naging winds, flash flooding, river flooding |
| drought, wildland fire, structural fire, hail, hazardous m | aterial incident, epidemic, hurricane, earthquake, other) |
| commencing on or about <u></u> S <u>A</u> MPM of | the the second and |
| | |
| · · · · · · · · · · · · · · · · · · · | of extreme peril warrant and necessitate the |
| | ncy in order to provide for the health and safety of the |
| citizens and the protection of their property wit | nin the affected jurisdiction; |
| NOW, THEREFORE, IT IS HEREI | BY PROCLAIMED that in accordance with Section |
| | nded, a local emergency now exists throughout said |
| | ty (30) days until such local emergency is no longer |
| | ity Council / Board of Supervisors of the City / |
| County of <u>(au</u> , State of) | • • • • |
| | The second s |
| IT IS FURTHER PROCLAIMED A | ND ORDERED that all City / County agencies and |
| | and discharge their emergency responsibilities as set |
| forth in the City / County Emergency Operation | |
| dela | XVIL-I |
| DATE: $8/1/202/$ | thetto A. M. |
| | Mayor / President of Board of Supervisors |
| | TAA |
| ATPEST / / / / | VVX I |
| | Councilperson / Supervisor |
| Clerk of City / Chancery | |
| Clerk for Board of Supervisors | the famained |
| | |
| | Councilperson / Supervisor |
| | |
| | Councilperson / Supervisor |
| City / or County/State of MS | Counciperson / Supervisor |
| | |
| V | Councilperson / Supervisor |
| | Sourceperson / Duporvisor |
| | |
| | |

MEMA DR-3 (Rev.12.01)

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RESOLUTION REQUESTING GOVERNOR TO PROCLAIM

A STATE OF EMERGENCY

| | WHEREAS, on Feb 9th, 2021, the Board of Supervisors (City Council) |
|----------|---|
| 0 | f the County of <u>()ay</u> found that due to the impact (or imminent threat) |
| O | f a condition of extreme peril (earthquake, flood, hazmat, hurricane, severe storm, other) |
| to | b life and property did exist in (1 a 4 County; and |
| | WHEREAS, on Aug 5 ⁴ , 2021, in accordance with State Law 33-15-17(d) the |
| В | oard of Supervisors declared that an emergency does exist throughout said county; and |
| | WHEREAS, it has now been found that local resources are unable to cope with the |
| et | ffects of said emergency; |
| | NOW, THEREFORE, IT IS HEREBY DECLARED AND ORDERED that a copy of |
| tł | nis declaration be forwarded to the Governor of Mississippi with the request that he proclaim |
| tł | to be in a State of Emergency; and to be in a State of Emergency; and |
| Ľ | The County (Cify) of $Clay$ to be in a State of Emergency; and T IS FURTHER RESOLVED that \overline{forrey} Williams, EMA Director (Person) (Title) |
| is | thereby designated as the authorized representative of the County (City) of |
| | $\underline{\mathcal{C}}$ for the purpose of receipt, processing, and coordination of all inquiries |
| a | nd requirements necessary to obtain available State and Federal assistance. |
| Е | DATE: SST2021 Abelto I May |
| - | (A President) |
| A | Board Member |
| | Clerk of the Board of Board Member |
| <u>}</u> | Supervisors (or City), |
| Ŭ(| County of Board Member |
| S | tate of Mississippi Board Member |
| N | (EMA DR-4 (Rev. 12/01) |
| ••• | |

PROCLAMATION OF EXISTENCE OF A LOCAL EMERGENCY (by City Council or County Board of Supervisors)

| WHEREAS, Clay | the City Council /or Board of |
|---|--|
| Supervisors does hereby find that conditions of extr | eme peril to the safety of persons and property |
| have arisen within said City/County, caused by | Flooding / wind |
| (Severe storm, tornado, damaging | winds, flash flowding, river flooding |
| drought, wildland fire, structural fire, hail, hazardous material i | ncident, epidemic, hurricane, earthquake, other) |
| commencing on or about <u>S</u> AM/PM on the WHEREAS, the aforesaid conditions of extr | 12th day of April ,20,20; and |
| WHEREAS, the aforesaid conditions of extr | eme peril warrant and necessitate the |
| proclamation of the existence of a local emergency in | |
| citizens and the protection of their property within the | e affected jurisdiction; |
| | COCLAIMED that in accordance with Section |
| 33-15-17(d), Mississippi Code of 1972, as amended, | |
| City/County; and shall be reviewed every thirty (30) | |
| in effect and proclaimed terminated by the City Cor | |
| County of <u>Clay</u> , State of Missis | sippi. |
| departments shall render all possible assistance and di forth in the City / County Emergency Operations Plat DATE: $85/202$ | helton I Man |
| Mayo | r / President of Board of Supervisors |
| ATTEST / / / | mit |
| | cilperson / Supervisor |
| Clerk of City / Chancery Clerk for Board of Supervisors | m HH |
| Conn | silnerson F. Supervisor |
| Lola | Conserved 2 |
| City/or Count, State of MS | cilperson / Supervisor |
| eny/or could, state of Mis | |
| Coun | cilperson / Supervisor |
| | |

MEMA DR-3 (Rev. 12.01)

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RESOLUTION REQUESTING GOVERNOR TO PROCLAIM

A STATE OF EMERGENCY

| WHEREAS, on $\int a_{10} \frac{10^{10}}{10}$, 2020, the Board of Supervisors (City Council) |
|---|
| of the County of found that due to the impact (or imminent threat) |
| of a condition of extreme peril (earthquake, flood, hazmat, hurricane, severe storm, other) a |
| to life and property did exist in $\underline{(ay)}$ County; and |
| WHEREAS, on Aug_5^{++} , 2021 , in accordance with State Law 33-15-17(d) the |
| Board of Supervisors declared that an emergency does exist throughout said county; and |
| WHEREAS, it has now been found that local resources are unable to cope with the |
| effects of said emergency; |
| NOW, THEREFORE, IT IS HEREBY DECLARED AND ORDERED that a copy of |
| this declaration be forwarded to the Governor of Mississippi with the request that he proclaim |
| the County (City) of <u>Clay</u> to be in a State of Emergency; and IT IS FURTHER RESOLVED that <u>Torrey Williams</u> , <u>EMA Director</u> (Person) (Title) |
| IT IS FURTHER RESOLVED that Torrey Williams, EMA Director |
| (Person) (Title) is thereby designated as the authorized representative of the County (City) of |
| \underline{Clay} for the purpose of receipt, processing, and coordination of all inquiries |
| and requirements necessary to obtain available State and Federal assistance |
| DATE: 8 5 2021 OF SUBERIA |
| Board Brance Limmun |
| Sterk of the Board of CLAY COUNTRY Member |
| County of: Board Member |
| State of Mississippi Board Member |

MEMA DR-4 (Rcv. 12/01)

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PROCLAMATION OF EXISTENCE OF A LOCAL EMERGENCY (by City Council or County Board of Supervisors)

| WHEREAS, Clay | the C ity Counc il /or Board of |
|--|--|
| Supervisors does hereby find that conditions of extreme per | |
| 1 | ding Severe Weather |
| (Severe storm, tornado, damaging winds, flas | h flooting river flooding |
| (Devere storm, tornado, bathaging winds, has | in hooding, five housing |
| drought, wildland fire, structural fire, hail, hazardous material incident, ep | |
| commencing on or about $\underline{3}$ AM/PM on the $\underline{/0^{+}}$ | deviat Calance 20 20 cond |
| WHEREAS, the aforesaid conditions of extreme peri | _ day of and, 20, and |
| proclamation of the existence of a local emergency in order to | |
| citizens and the protection of their property within the affected | |
| | . J |
| NOW, THEREFORE, IT IS HEREBY PROCLAI | |
| 33-15-17(d), Mississippi Code of 1972, as amended, a local er | |
| City/County; and shall be reviewed every thirty (30) days ur | |
| in effect and proclaimed terminated by the City Council / B | oard of Supervisors of the City / |
| County of <u>Clay</u> , State of Mississippi. | |
| IT IS FURTHER PROCLAIMED AND ORDER | CD that all City / County agencies and |
| departments shall render all possible assistance and discharge t | |
| forth in the City / County Emergency Operations Play. | |
| | -10 |
| DATE: 85 202 | - China - |
| | lent of Board of Supervisors |
| | |
| APTEST / 8 | 14- |
| | / Supervisor |
| Clerk of City / Chancery | |
| Clerk for Board of Supervisors | Low |
| Councilperson | / Supervisor |
| Coulciperson | / Supervisor |
| | |
| <u> </u> | / Supervisor |
| City / or County, State of MS | ~ |
| <u> </u> | |
| Councilperson | / Supervisor |
| | |
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| MEMA DR-3 (Rev. 12.01) | |
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| | |

PROCLAMATION OF EXISTENCE OF A LOCAL EMERGENCY

(by City Council or County Board of Supervisors)

| WHEREAS, | Clay | | the City Council /or Board of |
|----------------------------------|----------------------------|--|--|
| Supervisors does hereby t | find that conditions | of extreme per | il to the safety of persons and property |
| have arisen within said C | | ibv 🧸 🗍 | D-19 |
| (Se | evere storm, tornado, dar | naging winds, flas | sh flooding, river flooding |
| drought, wildland fire, structur | al fire, hail, hazardous m | aterial incident, e | pidemic, hurricane, earthquake, other) |
| | | <i>f</i> L | |
| commencing on or about | <u> </u> | on the 20^{\sim} | day of January 20, 20; and |
| WHEREAS, the | aforesaid conditions | of extreme peri | l warrant and necessitate the |
| proclamation of the existe | nce of a local emerge | ncy in order to | provide for the health and safety of the |
| citizens and the protection | of their property wi | thin the affected | l jurisdiction; |
| NOW. THEREF | ORE. IT IS HERE | BY PROCLA | IMED that in accordance with Section |
| - | | | mergency now exists throughout said |
| | • | • | ntil such local emergency is no longer |
| • • • | - | | loard of Supervisors of the City / |
| County of Clay | | | |
| · | | •• | |
| IT IS FURTHER | R PROCLAIMED A | AND ORDER | ED that all City / County agencies and |
| | | | their emergency responsibilities as set |
| forth in the City / County | | | |
| · · · | • • • | \overline{X} | 11 - 1 A |
| DATE: 8/5/20 | 71 | Ch / | t Man |
| | OF SUP | Slover / Presi | dent of Board of Supervisors |
| \square | | | |
| ATTEST! | / / 8/ a) 1 | ngin - | LIT |
| ~~~//). / | § 9 [6638 | Councilnerson | a/ Supervisor |
| Clerk of City / Chancery | | W) * } | we water and |
| Clerk for Board of Super | ISOTA A | Sta MIS DI | |
| Call for Board of Supp | Ay " | Not Kith | e Kanan |
| | COUNT COUNT | Councilnerson | n / Supervisor |
| | | would here and here a | |
| ΩI | | | |
| (las | | Councilocrse | n / Supervisor |
| City / or Coupty, State of | MS | - | |
| U, | | | |
| | | Councilperson | n/Supervisor |
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MEMA DR-3 (Rev.12.01)

PROCLAMATION OF EXISTENCE OF A LOCAL EMERGENCY (by City Council or County Board of Supervisors)

| WHEREAS, <u>Cay</u> Supervisors does hereby find that conditions have arisen within said City/County, cause | the City Council /or Board of s of extreme peril to the safety of persons and property |
|---|--|
| | amaging winds, flash flooding, river flooding |
| (Severe sum, urnauo, u | inaging winds, hash hooding, river hooding |
| drought, wildland fire, structural fire, h | nic, hurricane, earthquake, other) |
| commencing on or about <u>4</u> WHEREAS, the aforesa proclamation of the existence of a citizens and the protection of their | y of $\underline{\text{Tan}}_{,20,20}$; and rrant and necessitate the ride for the health and safety of the sdiction; |
| 33-15-17(d), Mississippi Code of 1972, as an City /County; and shall be reviewed every thi | CBY PROCLAIMED that in accordance with Section bended, a local emergency now exists throughout said arty (30) days until such local emergency is no longer City Council / Board of Supervisors of the City / f Mississippi. |
| | AND ORDERED that all City / County agencies and e and discharge their emergency responsibilities as set ons Plan |
| ATTEST: Clerk of City / Chancery Clerk for Board of Supervisors | Councilperson / Supervisor |
| | Councilperson / Supervisor |
| <u>City / or County, State of MS</u> | Councilperson / Supervisor |
| | Councilperson / Supervisor |
| MEMA DR-3 (Rev.12.01) | |

EXHIBIT H

| Bodgetary: Phone Software Upgrade; 50 Month Term Description | Uardware Refresb; Add Text to 9-1-1, Laptop | oplice and CAD optices: CJIS/NCIC, Mobile, Rapid SOS 8/31/202 Monthly Maintenance Charge (60 month Extended Warranty) |
|--|---|---|
| | | or Monthly Fee |
| | SUMMARY | |
| Vesta E911 Phone System - Software | | |
| Upgrade/Hardware Refresh | 598,187.00 | \$ <u>913.0</u> |
| Phone Optional: | | |
| TXT2911* | \$18,099,00 | \$309,0 |
| Laptop (Qty 1) | S17,102.00 | \$111.0 |
| TOTAL | \$133,388.00 | \$1,333.0 |
| CAD Options: | | |
| CAD CJIS and WEBCAD (Qty 5) | \$24,633.00 | \$646,0 |
| CAD Mobile-10 Users | \$60,718.00 | \$674.0 |
| Travéi | \$4,855.00 | \$0.0 |
| CAD TOTAL | \$90,206,00 | \$1,320,0 |
| GRAND TOTAL | \$223,594.00 | 52,653.0 |
| | Lease-purchase rate available upo | m request |
| * Text2-911 2 Public IP addresses and internet connectivity | Renes are valid for 60 days y thru AT&T Firewall 5 Meg needed (Not include | led in the quote) |
| | MAINTENANCE PLAN INCLU | 107¢- |

On Site Maintenance - 24x7:

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AT&T Propriotary (Internal Uso Only) Not for use or disclosure outside the AT&T companies except under written agreement



MOTOROLA SOLUTIONS

Motorola Solutions, Inc. 500 W Manroe Street, Ste 4400 Chicago, IL 60661-3781 USA

July 8, 2021

West Point-Clay County EMA PO Box 1117 West Point, MS. 39773

Re: Sole Source

Motorola is pleased to confirm that it is the original manufacturer and provider of the VESTA Call Handling suite of products. AT&T is our reseller and maintenance provider for Clay County's existing Motorola Vesta application and will be your sole source and maintenance provider for the proposed platform migration to the VESTA 9-1-1 NG Call Handling suite. The VESTA 9-1-1 product upgrade provided by our trusted partners at AT&T is not available from any other manufacturer and provides considerable savings in terms of costs and training time.

Sincerely,

Jeffrey RHolshouser

Jeffrey R Holshouser Senior Account Manager Motorola Solutions, Inc

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| N | TIA/NHTSA 911 GRANT PROGRAM PROGRAM AGREEMENT |
|-------------------|---|
| GRANTOR: | National Telecommunications and Information Administration (NTIA), Department of Commerce/National Higbway Traffic Safety Administration (NHTSA), Department of Transportation |
| RECIPIENT: | Mississippi Emergency Management Agency |
| SUB-RECIPIENT: | Clay County 911 |
| GRANT PERIOD: | June 1, 2021 – December 31, 2021 |
| AWARD AMOUNT: | \$ 69,771.60 |

As the State of Mississippi's recipient of the NHTSA-NTIA-911 Grant Program, the Mississippi Emergency Management Agency (MEMA) hereby awards 911 Grant funds to the above Sub-recipient. The interest and responsibilities of the Sub-recipient will be executed by the Sub-recipient's designated applicant's agent.

The Sub-recipient agrees and understands that:

- 1. He/She has legal authority to apply for these funds on behalf of the Sub-recipient.
- 2. The Sub-recipients must provide the required 40% matching funds.
- 3. The Sub-recipient will use 911 grant funds solely for the purposes for which these funds are provided and as approved by the Executive Director of MEMA.
- 4. Costs incurred under this funding opportunity must be specifically for this federal award and must be incurred during the period June 1, 2021 December 31, 2021.
- 5. The length or term of any maintenance agreement purchased may not exceed the period of performance of the grant funding with which the maintenance agreement is being purchased.
- 6. Any equipment purchased with the 911 Grant must be delivered by December 31, 2021.
- 7. All services, to include training on the NG911 system, must be completed by December 31, 2021. Service agreements rendering services beyond December 31, 2021, will not qualify for reimbursement.

- 8. All reimbursement payments will be made after MEMA receives all required reimbursement documentation.
- 9. If applicable, the Sub-recipient will complete the Federal Funding Accountability and Transparency Act (FFATA) form and return it to MEMA.
- 10. The Sub-recipient will give state and federal agencies access to and the right to determine all records and documents related to the use of 911 funds.
- 11. The Sub-recipient will comply with all applicable provisions of federal and state laws and regulations in regard to procurement of goods and services.
- 12. The Sub-recipient will provide the recipient copies of audit reports that include funds provided under this agreement.
- 13. The Sub-recipient agrees all expenditures incurred will be during the period of performance as listed.
- 14. There shall be no changes to this agreement unless mutually agreed upon, in writing, by both parties to the agreement.

If the Sub-recipient violates any of the conditions of the agreement, or applicable federal and state regulations, the State shall notify the Sub-recipient that 911 funds will be withheld until such violation has been corrected to the satisfaction of the State.

The undersigned does hereby agree with all terms and conditions of this agreement.

Subrecipient's Designated Applicant's Agent

9/1/2021 Date / 8-4-2021

Stephen C. McCraney, Executive Director Mississippi Emergency Management Agency

COMPLETE PROJECT BREAKDOWN

| Total Upfront Cost: | \$199,771.60 |
|----------------------|--------------|
| Reimbursed By State: | \$69,771.60 |

| Matching Grant portion 40% and | |
|--------------------------------|--|
| added Needed Items: | |

\$123,724,40 \$7,423.46 @6% Finance

Total Request Finance: Items Includes:

\$131,147.86

Over 6 years per yr: \$21,857.98

- 1. "System Refresh" Phone and Server Computer Replacement
- 2. Text2911 Modules
- 3. Laptop Phone Backup
- 4. CJIS & Webcad (10 Virtual Stations)
- 5. RapidSOS Integration
- 6. Mobile CAD & CJIS (8 Licenses, No Equipment)

Maintenance and Associated Cost Breakdown

Total Maintenance Line Item:

\$68,009

- Items Includes Maintenace Costs For:
 - 1. System Refresh Phone and Server Computer Replacement
 - 2. Text2911 Modules
 - 3. Laptop Phone Backup

 - CJIS & Webcad
 RapidSOS Integration
 Mobile CAD & CJIS

 - 7. ATT Line
 - 8. ATT CAD
 - 9. Recorder
 - 10. ESRI Mapping
 - 11. Xerox Copier

Total Internet Line Item:

\$4,740

Items Includes Costs For

- 1. ATT Server Internet
- 2. Fiber Internet Line for modules, CJIS and WebCad
- 3. 8 IP Addresses



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| CANNON CDJR 662-441-1950 | |
|--|--------------------|
| Repair Order Number Advisor: SHANE | |
| Customer Name: CLAY COUNTY S.O. Mileage: | <u></u> |
| | |
| Needs Related to Original Concern | Total |
| DIAG | |
| | |
| ADDITIONAL DIAG | <u> </u> |
| | ┞╸╴╴╸──── |
| REPLACE HEATER CORE, EVAP CORE, & HOSES | |
| EVAC & RECHARGE Related Repairs Total | \$2,961.17 |
| Immediate Needs | Total |
| | |
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| 20Ha Charapp | |
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| immediate Needs Total | ╇ <u>╾</u> ╤╼╴╴╴╴╸ |
| Related and Immediate Needs Total | \$2,961.17 |
| Maintenance Needs | Total |
| | |
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| | <u> </u> |
| Maintenance Needs Total Labor Parts | Total |
| Total Investment | T |
| | \$2,961.17 |
| Approved By: | |
| | - |
| Date/Time: | - |

Date Originated: 06/09/2005 Date Revised: 06/09/2005

MSX International CANNON RIM 1

EXHIBIT K

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4-County Foundation, INC. Application for Organization



The 4-County Foundation was formed to give back to our members and the communities in which they live and work. Funds are distributed to tax exempt organizations as defined under Section 501(c) of the Internal Revenue Code and which are providing services or operating within the area served by 4-County Electric Power Association.

The Foundation Board of Directors meets approximately every two months to consider applications (subject to change). Applications must be received by the end of the month prior to the next scheduled board meeting. For example, applications for a January meeting must be received by 4-County no later than December 31. Applications received after the deadline will be held until the next board meeting.

Applications may be sent electronically to <u>4countyfoundation@4county.org</u>, mailed to 4-County Foundation, PO Box 351, Columbus, MS 39703, or delivered to one of our offices.

Our goal is to support every eligible entity, but we cannot consider incomplete applications. This checklist will help make sure your organization's application has all the necessary items required for consideration. Please be as specific as possible in the information provided. If you have questions, please contact us at <u>4countyfoundation@4county.org</u> or call at 662-327-8900.

| Requirements | | | |
|--|--|--|--|
| The following must be included in application package to be considered complete: | | | |
| 501(c) Exemption letter from IRS | | | |
| Tax ID/EIN number | | | |
| Current Audited Financial Statement for Organization or IRS Form 990. If an audited financial is not | | | |
| available, attach detailed statement showing revenue, sources of revenue, program expenditures and | | | |
| cash/assets on hand | | | |
| Information on how grant funds will be used along with sources and uses of existing program funds, and | | | |
| itemized requests including quotes from vendors or pricing from retailers and total amount of Foundation | | | |
| grant requested. Special emphasis will be placed on benefit to 4-County members. | | | |
| All questions must be answered (please include additional pages if needed) | | | |
| Application must be signed. | | | |
| | | | |

Applications will be evaluated on several factors including:

- Potential benefit to residents/communities in 4-County service territory, with special emphasis on impact to 4-County members
- Whether person making application is a 4-County member and participates in Operation Roundup[®]
- Results that are predictable and can be evaluated
- Examples of funding sources for your project other than the 4-County Foundation
- Proper documentation and post grant reporting for organizations who have received a prior Foundation award

| If the space provided for answers is not enough, please feel free to add additional pages. The mo | re |
|--|--------|
| detail, the better for the Foundation Board when considering applications. Incomplete applications | s will |
| not be accepted. | • |

| | Complete Legal Name of | | | |
|-----|---|---------------------------------|-------------------------|-------------------|
| 1. | Organization/Agency: | | | |
| | Official name of org/agency & must match name associated with Tax ID (line | | th Tax ID (line #7) | |
| 2. | | | - <u></u> | |
| | | ····· | | |
| | City or Town | | State | Zip Co |
| | | | | - |
| 3. | Phone Number: Office | Cell | | |
| | | | | |
| 4. | Contact Person: | | Title | |
| | Name | | 1 [114 | |
| 5. | Contact Email: | | | |
| 6. | Is the person completing this applica | ution a member of 4-County | Electric Power Associa | ation? |
| | a. If so, are you participating in | • | | |
| | | | | |
| 7. | Tax ID Number | Drganization/Agency listed in L | ine #1 | |
| | | | | |
| 8. | Please give a brief description of Or | ganization/Agency's core p | urpose and focus (Missi | ion Statement): |
| | ····· | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 'n | 11 | ········· | - | .1 |
| 9. | Has your organization received a pr and date(s) received. (Organizations | | | blease list award |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 10. | Please provide a copy of Organization | on's most current financial s | statement or IRS Form | 990. |
| | | | | |
| | Number of individuals, families, or | groups served in each of the | following counties in t | he last vear: |
| 1. | Chickasaw , Choctaw | | _ | Monroe |
| | Unickasaw, Unickaw_ | , viay, | , LUWIIGUS, I | |

Noxubee_____, Oktibbeha _____, Webster _____, Winston _____.

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| | Yes No |
|------------|---|
| | a. If yes, please provide information on number served and location: |
| A. | State the <i>purpose</i> of Organization/Agency's funding request (<i>explain how funds are to be used and how they benefit the Community/Area</i>). If Organization has sufficient resources to complete this project without Foundation aid, please explain why this grant is being requested. Please include othe sources of funding your Organization will be utilizing for this request/project: |
| | |
| B | State the <i>total amount</i> of funding this application requests from the Foundation: \$ (do not leave blank). |
| C. | Include itemized list with pricing, including quotes. For example: "After school program support: |
| | 50 workbooks @ \$5.00 each; 50 boxes of crayons @ \$3.95 each = <u>\$447.50</u> ". (Attach additional page(s) if need |
| | |
| Ho | |
| Ho | 50 workbooks @ \$5.00 each; 50 boxes of crayons @ \$3.95 each = <u>\$447.50</u> ". (Attach additional page(s) if nee |

2/20

15. Please list three references:

| Name | Phon | e |
|---------|------|-----------|
| Address | City | State Zip |
| Name | Phor | ne |
| Address | City | State Zip |
| Name | Phor | le |
| Address | City | State Zip |

The information contained in this statement is for the purpose of obtaining funding from the 4-County Foundation, Inc., on behalf of the undersigned. Each undersigned understands that the information provided herein is used in deciding to grant funding, and each undersigned represents and warrants that the information provided is true and complete and that the 4-County Foundation, Inc. may consider this statement as continuing to be true and correct until a written notice of a change is provided. The 4-County Foundation, Inc. is authorized to make all inquiries deemed necessary to verify the accuracy of the statements made herein. In accepting this award, the undersigned authorizes the release of basic information including name and likeness in written, photographic, video or electronic form for publicity use by the 4-County Foundation, Inc. and 4-County Electric Power Association. The undersigned also agrees, when applicable, to recognizing contribution of the 4-County Foundation by using provided signage on items funded or built with Foundation grants.

Name of Organization

Signature of Representative

Date

Please make sure that your application is complete using the checklist on the first page. Incomplete applications will NOT be considered. It is the responsibility of applicant to supply a complete application.

EXHIBIT L

IN THE MATTER OF AUTHORIZING AND APPROVING TO APPOINT ACIE VANCE TO SERVE AS THE BOARD OF SUPERVISORS DESIGNEE ON THE ROAD HOUSE REGULATION PERMIT COMMITTEE

There came on this day for consideration the matter of authorizing and approving to appoint Acie Vance to serve as the Board of Supervisors designee on the Road House Regulation Permit Committee.

It appears to this Board an appointment by this Board is needed to be made designating a citizen of the County to serve on the Road House Regulation Permit Committee as a representative of the Board of Supervisors, pursuant to the *Road House Ordinance, Article V, Section A*.

NOW, THEREFORE, Supervisor Horton moved to appoint Acie Vance to serve as the Board of Supervisor designee to serve on the Road House Regulation Permit Committee. The motion was seconded by Supervisor Lummus. The motion carried unanimously.

SO ORDERED, this the 5th day of August, 202

helton L. Deanes, President

Attest: Any G. Berry, Chancery Clerk

Clerk of the Board

at the establishment. Should the security guard fail to have a permit from the Department of Public Safety and/or been approved by the Sheriff and/or his designee prior to providing such service shall constitute a misdemeanor under this ordinance.

- 2) Bonded security guards shall utilize a hand wand metal detector on all persons entering the premises.
- 3) The owners or permittees shall install security cameras and record events in each of the several areas of the interior premises, as well as the parking lot, which will be subject to inspection at any time by the Clay County Sheriff's Department or fire officials.
- 4) Restaurant establishments may apply for an exemption under the following conditions: (a) submission of a seating plan for approval by the Regulations Committee; (b) if approved, the seating plan must be posted in the establishment along with the occupant capacity certification and the tables and chairs must be in place according to the plan during all hours of restaurant operation; and (c) the establishment may be exempt from the security guard requirement if approved by the Regulations Committee.
- (M) Independent Contractors/Food Vendors.
- 1) Any independent contractor or food vendor inside or outside the premises must follow the Mississippi Department of Health Codes and have the required certifications to serve food.
- 2) Such contractor or vendor must all also follow the same time requirements as the bar, nightclub, roadhouse, etc., meaning that all sales must be final by 1:00 a.m. The contractors/vendors must be off the premises by 1:30 a.m.

Article V <u>Regulations Committee</u>

(A) There is hereby established a Regulations Committee composed of the following members: (a) County Sheriff and/or his designee; (b) County Fire Coordinator and/or his designee; (c) a citizen of Clay County duly appointed by the Clay County Board of Supervisors; (d) the County Administrator and/or his designee; and (e) the County Attorney.

(B) The committee shall meet on an "as needed" basis. A three-fifths (3/5ths) majority present at a meeting shall constitute a quorum. The committee shall elect a president, vice president and secretary. The president shall preside at meetings. In the absence of the president, the vice president shall preside. In

Page 11 of 14

the absence of the president and vice president, the secretary shall preside. The presiding officer shall conduct the meeting in accordance with common law rules of parliamentary procedure. The committee shall have the following duties and authority:

- 1) To render interpretations of this ordinance when an interpretation of a regulating authority is challenged as outlined in Article I;
- 2) The authority to suspend or revoke the license by the procedure described in the paragraph below of any establishment found guilty of any two of the same or separate violations during a twelve (12) month period of any county, state or federal regulation, including but not limited to, the regulations contained in this ordinance or a total of any three violations. This authority shall not affect the authority of any other officer or entity to exercise a legal right to close the operation;
- 3) To make rules for conducting the business of the committee;
- 4) Members of the committee shall report any violations to the secretary. The secretary shall keep an accounting of reported violations and report to the other members of the committee when a business accumulates three violations. For the purpose of this, a guilty verdict rendered by a local, state or federal court shall constitute a violation;
- 5) Any member of the committee may ask for a meeting of the committee to determine what, if any, action should be taken relative to a business which has been found guilty of any three violations;
- 6) The committee shall give written notice of a meeting to the subject business owner, lessee, operator, host, etc., at least ten (10) calendar days in advance of the meeting by registered mail to the address of the operation contained in the application and/or permit in order to afford them the right to appear and give testimony at said meeting;
- 7) Action by the committee shall be decided by a majority vote of the members present at such meeting. The committee shall give written notice of the decision to the affected party by sending same by registered mail to the address contained in the application/permit;
- 8) The owner, permittee, etc. may appeal the decision of the committee by filing a written appeal with the Clay County Board of Supervisors within ten (10) calendar days following the postmark date on the notice from the committee with the Chancery Clerk of Clay County;

Page 12 of 14