

**AGENDA**

**VANCE COUNTY BOARD OF COMMISSIONERS**

**May 6, 2024**

**Invocation** **Associate Minister Mary Anderson**  
**Shiloh Baptist Church**

1. **Public Comments** (for those registered to speak by 5:45 p.m. - speakers are limited to five minutes)

2. **Appointment** **6:00 p.m.** **Frankie Nobles, Employee Engagement Team**  
**Employee of the Month Recognition**

3. **Board of Equalization and Review**

<u>Name</u>	<u>Property Address</u>
1. Charles Williams	123 S. College Street Parcel: 0025 10013
2. Russell Wayne Pulley	716 Foster Road Extension Parcel: 0459A01002
3. Patricia Barry	105 Sandy Lane Parcel: 0613 04034
4. Ben Hicks	318 Pinecrest Road Parcel: 0037A02009
5. Angela Crudup Archie	1514 S. Williams Street Parcel: 0086 01004A
6. Brenda Watkins	271 South Lake Lodge Ext. Rd. Parcel: 0462A01003

4. **Appointment** **Logan Parsons, LKC Engineering**  
**2023 Appropriations Act Directed Projects Grant**  
**Resolution – Acceptance of Grant Funding**

5. **Water District Board**  
a. **Phase 1B Contract 2 – SCADA Proposal**  
b. **Monthly Operations Report**

6. **Committee Reports and Recommendations**  
a. **Intergovernmental Committee**  
    - Fire/EMS Complex

7. **Finance Director’s Report**  
a. **Quarterly Financial Report**

8. **County Manager's Report**
  - a. **Fireworks Permit – Tourism**
  - b. **Ambulance Franchise Application – North Central Medical Transport**
  - c. **Ambulance Franchise Application – North State Medical Transport**
  - d. **Revised Budget Calendar**
  - e. **Board of E&R Meetings**
  - f. **Opioid PBM Update**
  
9. **County Attorney's Report**
  - a. **REO Property – New Offer**  
- Red Clay Lane Lot – Parcel 0352A01029
  
10. **Consent Agenda Items**
  - a. **Budget Amendments**
  - b. **Tax Refunds and Releases**
  - c. **Monthly Reports**
  - d. **Minutes**
  
11. **Miscellaneous**
  - a. **Appointments**
  
12. **Closed Session**
  - b. **Property Matter**

***AGENDA APPOINTMENT FORM***  
*May 6, 2024*

***Name:*** Frankie Nobles, Chair

***Name of Organization:*** Vance County Employee Engagement Team

***Purpose of Appearance:*** Recognition of Employee of the Month

***AGENDA APPOINTMENT FORM***

*May 6, 2024*

***Name:*** Logan Parsons

***Name of Organization:*** LKC Engineering

***Purpose of Appearance:*** Present Resolution for 2023 Appropriations Act  
Directed Projects Grant

***Request of Board:*** Adopt Resolution

**R E S O L U T I O N**  
by the  
**Vance County Board of Commissioners**  
*Funding Project No. SRP-D-134-0054*

**WHEREAS**, Vance County has received a Directed Projects grant from the 2023 Appropriations Act, Session Law 2023-134, administered through the Drinking Water Reserve and Wastewater Reserve to assist eligible units of government with meeting their water/wastewater infrastructure needs; and

**WHEREAS**, the North Carolina Department of Environmental Quality has offered 2023 Appropriations Act funding in the amount of \$3,880,000 to perform work detailed in the submitted application; and

**WHEREAS**, Vance County intends to perform said project in accordance with the agreed scope of work.

**NOW, THEREFORE, BE IT RESOLVED BY THE VANCE COUNTY BOARD OF COMMISSIONERS:**

1. That Vance County does hereby accept the 2023 Appropriations Act Directed Projects Grant offer of \$3,880,000 (Project No. SRP-D-134-0054).
2. That Vance County does hereby give assurance to the North Carolina Department of Environmental Quality that any Conditions or Assurances contained in the Award Offer will be adhered to.
3. That County Manager C. Renee Perry, and successors so titled, is hereby authorized and directed to furnish such information as the appropriate State agency may request in connection with this project; to make the assurances as contained above; and to execute such other documents as may be required by the Division of Water Infrastructure.

**This, the 6<sup>th</sup> day of May, 2024.**

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**R. Dan Brummitt, Chair**  
**Vance County Board of Commissioners**

**STATE OF NORTH CAROLINA  
DEPARTMENT OF ENVIRONMENTAL QUALITY  
DIVISION OF WATER INFRASTRUCTURE**

**Funding Offer and Acceptance**

**Legal Name and Address of Award Recipient**

Vance County  
122 Young Street, Suite B  
Henderson, North Carolina 27536

**Project Number(s):** SRP-D-134-0054

**Assistance Listing Number:** N/A  
**Unique Entity ID Number:** JBBUQ7K4J4D5

**Funding Program**

	<input type="checkbox"/>	<b>Additional Amount for Funding Increases</b>	<b>Previous Total</b>	<b>Total Offered</b>
<b>Drinking Water</b>	<input checked="" type="checkbox"/>			
<b>Stormwater</b>	<input type="checkbox"/>			
<b>Wastewater</b>	<input type="checkbox"/>			
State Revolving Fund-Repayable Loan	<input type="checkbox"/>			
State Revolving Fund-Principal Forgiveness	<input type="checkbox"/>			
State Reserve Loan	<input type="checkbox"/>			
State Reserve Grant	<input type="checkbox"/>			
State Reserve Earmark (S.L. 2023-134)	<input checked="" type="checkbox"/>			\$3,880,000
American Rescue Plan Act - <i>Choose an item.</i>	<input type="checkbox"/>			

**Project Description:**

Vance County Water District-Phase 1B

**Total Financial Assistance Offer:** **\$ 3,880,000**  
**Total Project Cost:** \$10,378,200  
**Estimated Closing Fee\*:** \$0  
*For Loans*  
**Interest Rate:** -- Per Annum  
**Maximum Loan Term:** -- Years

*\*Estimated closing fee calculated based on grant and loan amount.*

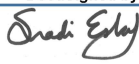
Pursuant to North Carolina General Statute 159G:

- The applicant is eligible under Federal and State law,
- The project is eligible under Federal and State law, and
- The project has been approved by the Department of Environmental Quality as having sufficient priority to receive financial assistance.

The Department of Environmental Quality, acting on behalf of the State of North Carolina, hereby offers the financial assistance described in this document.

For The State of North Carolina:

**Shadi Eskaf, Director, Division of Water Infrastructure  
North Carolina Department of Environmental Quality**

DocuSigned by:  6300A872077B4C5... Signature	3/27/2024 Date
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On Behalf of:

Name of Representative in Resolution:

Title (Type or Print):

Vance County  
C. Renee Perry  
County Manager

I, the undersigned, being duly authorized to take such action, as evidenced by the attached CERTIFIED COPY OF AUTHORIZATION BY THE APPLICANT'S GOVERNING BODY, do hereby accept this Financial Award Offer and will comply with the attached Assurances and the Standard Conditions.

..... Signature	..... Date
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**STANDARD CONDITIONS & ASSURANCES FOR STATE RESERVE PROJECTS**

**Project Applicant: Vance County**

**Project Number: SRP-D-134-0054**

1. The Applicant intends to construct the project or cause it to be constructed to final completion in accordance with the Application approved for financial assistance by the Division.  
The recipient acknowledges that in the event a milestone contained in the most recent Clean Water State Revolving Fund Intended Use Plan and/or the Letter of Intent to Fund is missed, the Department of Environmental Quality will rescind this Funding Offer.
2. The Applicant is responsible for paying for the costs ineligible for DWI funding.
3. The construction of the project, including the letting of contracts in connection therewith, conforms to the applicable requirements of State and local laws and ordinances.
4. As of the acceptance of this Funding Award Offer, steps A-D in the SRP Guidance will be complete. These Assurances, likewise, incorporate the most recent version of the SRP Guidance, and the Applicant hereby certifies by accepting this Funding Award Offer that it will adhere to the subsequent steps in the SRP Guidance document. The remaining steps generally govern project design, bidding, contracting, inspection, disbursements, closeout and repayment.
5. The Applicant will provide and maintain adequate engineering supervision and inspection.
6. The recipient agrees to establish and maintain a financial management system that adequately accounts for revenues and expenditures. Adequate accounting and fiscal records will be maintained during the construction of the project and these records will be retained and made available for a period of at least three years following completion of the project.
7. All SRP funds must be expended solely for carrying out the approved project, and an audit shall be performed in accordance with G.S. 159-34. Partial disbursements on this loan will be made promptly upon request, subject to adequate documentation of incurred eligible costs, and subject to the recipient's compliance with the Standard Conditions of this Award. The Applicant agrees to make prompt payment to its contractor, and to retain only such amount as allowed by North Carolina General Statute.
8. The applicant will expend all of the requisitioned funds for the purpose of paying the costs of the project within three (3) banking days following the receipt of the funds from the State. Please note that the State is not a party to the construction contract(s) and the Applicant is expected to uphold its contract obligations regarding timely payment.
9. The applicant acknowledges that any loan funds contained in this Funding Offer requires approval from the North Carolina Local Government Commission before they can be disbursed.

# *Water District Board*



# Vance County Water District

## SCADA System Upgrade – Kittrell

### Summary of Options – 5/1/24

#### **Purpose / Need**

Currently, Vance County Water District does not have the ability to monitor the existing elevated tank located in Kittrell. Since VCWD acquired the Kittrell Water System and associated Phase 1B expansion project, the addition of a monitoring and control system has been in discussion with operations and management staff. The Phase 1B project includes modifications to the master control valve located along US-1 in Kittrell which requires SCADA connection for full functionality and control. The decision was made to exclude the SCADA work from the USDA project funding and select the vendor outside of the project scope. Since the Phase 1B project is now under construction, this summary is to provide options to current VCWD leadership and seek a decision on the best route going forward to meet the SCADA needs that are currently required for the Phase 1B project and ability to scale to incorporate all other VCWD system infrastructure.

#### **Option 1 – Custom Controls Unlimited, LLC (CCU)**

CCU has offers a complete remote monitoring and control SCADA system via a hosted cellular network and RTU panels installed at both the tank site and control valve site. CCU builds their RTU panels in house and will handle all necessary panel fabrication, programming, installation, and setup as part of their scope of work. CCU has an excellent reputation with providing quality work on similar system across North Carolina and more.

Delivery Time from Approved Quote: Four (4) to Six (6) weeks depending on availability of parts

Pricing: \$31,064.25 (see attached quote)

#### **Option 2 – LKC Services, LLC**

LKC Services offers a quote for a complete remote monitoring and control SCADA system utilizing Mission Communications system with cellular network for hosting and access. A Mission unit will be installed at both the tank site and control valve site with this proposal as well. Mission offers turn-key systems that do not require PLC programing or fabrication. The Mission name and platform is well known in the industry and has decades of proven service with their simplified approach and low cost. LKC Services will purchase the equipment and provide all necessary installation and setup for operation.

Delivery Time from Approved Quote: Two (2) weeks

Pricing: \$18,512.10 (see attached quote)

4/25/2024

To: Logan Parsons  
LKC

QUOTE: Q042524KM - Kittrell SCADA

Valid Until: 60 Days

Scope: Includes items related to:

**A. Kittrell Hosted SCADA system**

Custom Controls Unlimited (CCU) is pleased to offer the following **SCOPE** based on the below equipment and services.

**A. Kittrell Hosted SCADA System**

**a. New Hosted SCADA System**

The new Kittrell SCADA system shall consist of remote monitoring and control of the Kittrell Water Tank and the Kittrell Control Valve maintained by Vance County. The tank pressure will be monitored with a pressure transducer located at the base of the tank and converted to show feet of water in the tank. User setpoints shall be entered for automatic valve open and close control. All information from the two sites shall be sent to a hosted scada system via a private cellular network. Remote access to the scada system will be available from any PC / Smart Phone's internet browser.

**1. RTU Hardware** Provided by CCU, LLC:

- Quantity (2) RTU Panels
  - Kittrell Tank
  - Kittrell Control Valve
- NEMA 4 Painted Steel Enclosures
- Allen Bradley Micrologix 870 PLC's
- 5G Cellular Modems
- 24VDC Power Supplies
- UPS (Battery Backup)
- Relays, Fuses, Terminal Blocks
- UL 508A Labeling
- 0-80 PSI Pressure Transducer

**2. Services** Provided by CCU, LLC:

- RTU Manufacturing and labeling under UL508A
- PLC Programming
- Hosted Cloud based SCADA Software
- 24/7 Remote connectivity
- Turnkey Installation
  - Panel Mounting
  - Conduits
  - Wiring
- Commissioning

**3. Services NOT** Provided by CCU, LLC:

- Cellular data charges not included
- Instrumentation not listed above
- Pipe Taps not included

**Notes and Exceptions:**

- SCADA software upgrades or programming on existing SCADA not included unless explicitly listed above.
- CCU assumes existing equipment (electrical service, level instruments, flow meters, etc.) to be in good working order. Items found to be malfunctioning or damaged will need to be replaced at the expense of the client.
- Programming software not included.
- All plant operations will be done by plant operations staff throughout the installation and startup process. CCU staff are not licensed for plant operations.
- Please confirm the sales tax rate. If you are tax-exempt, please provide an exemption certificate.

**Pricing and Payment Terms**

Custom Controls Unlimited, LLC will provide the materials and services listed above for a cost of:

Total before tax:	\$29,100.00
Sales Tax (6.75%):	\$1,964.25
<b>Grand Total:</b>	<b>\$31,064.25</b>

**Acceptance of Quote:**

We have read and understand all pages of this agreement and hereby acknowledge receipt of a copy hereof and realize the attached CUSTOM CONTROLS UNLIMITED, LLC Conditions of Sale are part of this agreement. You are authorized to do the work as specified. *Circle and initial by the prices above to accept and authorize Notice to proceed.*

WITNESS OUR SIGNATURES, this the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

OWNER

Company Name: \_\_\_\_\_

Signed by: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

FOR CUSTOM CONTROLS UNLIMITED, LLC

Signed by: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

## INFRAMARK, LLC

### A&I DIVISION TERMS AND CONDITIONS OF SALE

1. Performance of Obligations. The manner in which INFRAMARK's obligations are to be performed and the specific hours during which the obligations are to be performed shall be determined solely by INFRAMARK. INFRAMARK shall supply at INFRAMARK's expense any instrumentalities required by INFRAMARK for the performance of INFRAMARK's obligations hereunder.
2. Term. The term of this Agreement will commence on the date the last of the parties' executes this Agreement and continue until all obligations of the Parties hereunder are completed or is otherwise terminated in accordance with paragraph 11 of this Agreement.
3. Compensation. The compensation due to INFRAMARK from Client shall be as stated on the applicable Purchase Order or Quote. Any amount due from Client hereunder which is not paid when due shall bear interest at a rate equal to 1.5% per month, 18% per annum, (but in no event more than the maximum rate permitted by law) from the date due until paid. Compensation paid pursuant to this Agreement shall not be subject to the customary withholding of income taxes and other employment taxes. INFRAMARK shall be solely responsible for reporting and paying any such taxes. Client shall notify Operator of any dispute with an invoice within ten (10) business days from receipt of said invoice. In the event that Client has a dispute with any charges, all undisputed charges on said invoice(s) will be due in accordance with the above times and the Parties shall negotiate in good faith to resolve any such dispute in a timely manner. If there is a change in law, change in the interpretation of law, or other factor which causes an increase in INFRAMARK's cost of providing the Services, INFRAMARK may provide notice to the Client and the parties shall negotiate in good faith to adjust the compensation to account for such change in INFRAMARK's costs. If the parties are unable to reach a negotiated agreement within thirty (30) days of the date of notice, then the contract may be terminated immediately by INFRAMARK.
4. Indemnification and Release. **EACH PARTY SHALL INDEMNIFY, DEFEND, AND HOLD THE OTHER, AND ITS PARENTS, SUBSIDIARIES, AFFILIATES, OFFICERS, EMPLOYEES, AND LICENSORS, HARMLESS FROM ANY AND ALL CLAIMS, DEMANDS, ACTIONS, DAMAGES, LOSSES, LIABILITY, COSTS, AND EXPENSES, INCLUDING ACTUAL ATTORNEY FEES, BROUGHT BY ANY THIRD PARTY FOR BODILY INJURY, INCLUDING DEATH, OR PROPERTY DAMAGE, TO THE EXTENT CAUSED BY OR ARISING OUT OF THE INDEMNIFYING PARTY'S, OR ITS EMPLOYEES', SUBCONTRACTORS' OR AGENTS' NEGLIGENCE.**
5. Warranty: INFRAMARK warrants to the Client that: (i) the Services will be performed by appropriately qualified, trained, experienced, and when applicable licensed and/or certified personnel, with due care, skill and diligence, and in accordance with all terms of this agreement, applicable law and industry standards. INFRAMARK warrants the products shall conform to the description contained in this agreement and be free from defects in material and workmanship for a period of one (1) year from the date the products are initially placed in operation, or 18 months from when the products are shipped, whichever occurs first, provided that the products are stored, maintained and operated so as to protect the products from harm or damage due to any cause but not limited to fire, water, inclement weather, lightning, extreme temperatures, and not subjected to misuse, neglect or accident. Upon prompt written notice of and determination that such defect is covered under the foregoing warranty, INFRAMARK's responsibility is limited to correction of the defect by, at INFRAMARK's option, repair or replacement of the defective part, parts, or services. **Unless stated elsewhere herein, INFRAMARK provides no warranty of product performance or process results. The foregoing warranties are exclusive and INFRAMARK hereby disclaims all other warranties of any kind, including any implied warranty of merchantability or fitness for a particular purpose.** The warranties provided herein shall not apply to any Client product which shall

have been; (a) repaired or altered other than by Client or the Client's personnel, representatives, or agents; (b) subjected to physical or electrical abuse or misuse; or (c) operated in any manner inconsistent with the applicable Client instructions for use.

6. Shipment and Loss or Damage to Goods and Materials: All shipments will be made F.O.B. shipping point unless otherwise specified herein. In the absence of specific instructions, INFRAMARK will select the carrier. Title to and risk of loss for the material shall pass to the Client upon delivery to the carrier or delivery service. Materials held for the Client or stored for the Client shall be at the risk and expense of the Client. Title and risk of loss for all parts, materials, and equipment provided hereunder shall pass when such parts, materials, and equipment are shipped.
7. Software. Software created on this project by INFRAMARK is owned by INFRAMARK. If noted in the scope of work, INFRAMARK may authorize use of this software inside the Client's organization only. Authorized use includes ability to modify the software, by the Client at the Client's risk. Under no circumstance is the Client, agent or third-party contractor of the Client authorized to distribute or use software created by INFRAMARK at locations other than the Client's facilities.
8. Limitation on Damages. In no event shall either Party be liable under any circumstances for any special, consequential, indirect, or incidental damages arising out of or in any way connected with this Agreement or the services provided, including, but not limited to, damages for lost profits, anticipated sales, compensation, reimbursement, good will for expenditures, investments, leases, or any other commitments in connection with the business of Client, or damages to third parties. Except for liability arising out of INFRAMARK'S gross negligence or willful misconduct, INFRAMARK's total liability for any cause shall be limited to the compensation paid to INFRAMARK by the Client under this Agreement.
9. Cyber Security. INFRAMARK shall not be liable for any liabilities, losses, damages, expenses, fines, or penalties incurred by the Client or any third party as a result of a data security breach or other cyber security breach to the Client's computer systems, operating systems, and all other technological or information systems related to the Services provided hereunder, except to the extent such liability, loss, damage, expense, fine, or penalty is the direct result of INFRAMARK's willful or negligent acts or omissions.
10. Client Information. If any information, opinions, recommendations, advice, or other work product or any data, information, procedures, charts, spreadsheets, logs, instruments, documents, plans, designs, specifications, operating manuals and specifications, customer data, billing information, regulatory filings, permits, authorizations, licenses, operation and maintenance records, or other records are provided by the Client or any third party acting on behalf the Client are provide to and used or relied on by INFRAMARK, INFRAMARK shall not be liable for any damages resulting directly or indirectly from such use and reliance.
11. No Third-Party Beneficiary. It is the explicit intention of the parties hereto, that no person or entity, other than the parties, is or shall be entitled to bring any action to enforce any provision of this Agreement against either of the parties, and the covenants, undertakings, and agreements set forth in this Agreement shall be solely for the benefit of and shall be enforceable only by the parties hereto or their respective permitted successors or assigns hereunder.
12. Termination. This agreement may be terminated by INFRAMARK, in whole or in part, (a) whenever Client defaults in its performance in any manner and fails to remedy same within ten (10) days after receipt of notice setting forth the default. In the event of such termination, Client shall pay INFRAMARK for all services performed and all parts, materials, and equipment ordered by INFRAMARK up to the effective date of termination. Client may terminate this agreement if INFRAMARK is in default, provided that Client has provided INFRAMARK with written notice, including sufficient information regarding the

alleged default, and INFRAMARK shall have thirty (30) days from the date of written notice to cure any such default.

13. Independent Contractor. The parties acknowledge that INFRAMARK is an independent contractor and is not an agent, partner, joint venturer, nor employee Client. Nothing shall operate to change or alter that relationship except further agreement between the parties in writing and specifically addressing the issue. Neither party shall have authority to bind or otherwise obligate the other in any manner nor shall either party represent to anyone that it has a right to do so.
14. Force Majeure. Under no circumstances shall either party be held liable for any delay or failure in performance resulting directly or indirectly by acts of nature, forces, or causes beyond its reasonable control, including, without limitation: internet, computer equipment, telecommunication equipment, other equipment, or electrical power failures; riots; insurrections; pandemics/epidemics; civil disturbances; fires; floods; storms; explosions; acts of God; war; governmental actions; actions, embargoes or blockades in effect on or after the date of this Agreement; orders or law of domestic or foreign courts or tribunals or other governmental authorities; loss of or fluctuations in heat, light, or air conditioning; or strikes, labor stoppages or slowdowns or other industrial disturbances, other than those involving the affected parties employees.
15. Binding Agreement. The provisions of this Agreement shall be binding upon and inure to the benefit of the heirs, personal representatives, successors, and assigns of the parties. Any provision hereof which imposes upon a party an obligation after termination or expiration of this Agreement shall survive termination or expiration hereof and be binding upon the party.
16. Choice of Law. The laws of the State of in which the work is performed shall govern the validity, performance, construction, and enforcement of this Agreement without regard to choice of law provisions. No litigation concerning a dispute or arising out of this agreement may be commenced by Client more than one year after completion of work by INFRAMARK.
17. Mediation and Arbitration. If any controversy or claim arising out of this Agreement cannot be settled by the Parties hereto through good faith discussions, the Parties shall mediate their dispute before a mediator acceptable to both parties. If they cannot agree on a mediator, they shall ask the Director of the Federal Mediation and Conciliation Service to nominate a mediator. The parties shall bear their own costs of the mediation, but the parties shall share equally the costs of the mediator and the mediation facilities. If the controversy or claim cannot be resolved through mediation, the controversy or claim shall be settled by arbitration in accordance with the rules of the American Arbitration Association then in effect. Any such controversy or claim shall be arbitrated on an individual basis and shall not be consolidated in any arbitration with any claim or controversy of any other party unless otherwise agreed by the Parties.
18. Amendment. This Agreement may only be altered or amended in an instrument, in writing, signed by all the parties hereto.
19. Waiver. No waiver of any provision of this Agreement shall be deemed, or shall constitute, a waiver of any other provision, whether or not similar, nor shall any waiver constitute a continuing waiver. No waiver shall be binding unless executed in writing by the party making the waiver.
20. Severability. The invalidity of any portion of this Agreement will and shall not be deemed to affect the validity of any other provision. In the event that any provision of this Agreement is held to be invalid, the parties agree that the remaining provisions shall be deemed to be in full force and effect as if they had been executed by both parties subsequent to the expungement of the invalid provision.

21. Non-Solicitation. Neither party may actively solicit, for hire, the employees of the other party during the term of this Agreement or for one year following the termination of this Agreement.
22. Assignment. This Agreement shall not be assigned by either party without the prior written consent of the other party, which consent shall not be unreasonably withheld, unless such assignment shall be to a parent, subsidiary, affiliate, or successor of either Party.
23. Notice. All notices will be in writing and shall be deemed given when delivered in person or mailed by certified or registered mail, return receipt required, with postage prepaid. Notices required to be given to the parties by each other will be addressed to the parties at the address set forth on the first page of this Agreement.
24. Entire Agreement. This Agreement constitutes the entire agreement between the parties pertaining to its subject matter and supersedes all prior contemporaneous agreements, representations, and understandings of the parties.
25. Counterparts and Copies. This Agreement may be executed in two or more counterparts, each of which shall be deemed an original. An electronic copy or photocopy of this Agreement containing electronic copies or photocopies of the signatures or initials of any Party shall be binding.

# Option 2

## LKC Services

## Quotation

140 Aqua Shed Court  
Aberdeen, NC 28315  
Phone: 910-420-1437 Fax:910-637-0096

**DATE** 4/23/2024  
**Quotation #** 2439  
**Customer ID** Vance Co.

**Quotation For:**

Vance County

*Quotation valid until: 5/15/2024*

*Prepared by: Jason Caviness*

**Comments or Special Instructions:** This quote is for two Mission 850 Mydro Units with Well control, and Labor to install, set up and training.

SALESPERSON	P.O. NUMBER	SHIP DATE	SHIP VIA	F.O.B. POINT	TERMS
					Due upon Completion

QUANTITY	DESCRIPTION	UNIT PRICE	TAXABLE?	AMOUNT
1	Mission well system	\$ 17,254.30	T	\$ 17,254.30

SUBTOTAL	\$ 17,254.30
TAX RATE	7.00%
SALES TAX	\$ 1,207.80
SHIPPING CHGS	\$ 50.00
TOTAL	\$ 18,512.10

If you have any questions concerning this quotation, Jason Caviness, phone 910-638-1428, [jason@lkceengineering.com](mailto:jason@lkceengineering.com).

**THANK YOU FOR YOUR BUSINESS!**



# Automated Remote Control for Water Systems

The Mission Tank and Well System maintains the water level in a storage tank by automatically sending commands that signal remote well or booster pumps to turn on and off. The system relies on standard Mission 800 series remote terminal units (RTUs) and a transducer to measure the tank level. There are no radio networks, computers or programmable logic controllers (PLCs) to maintain. It is low cost and easy to set up.

### How It Works

The RTU at the water tank continuously transmits level information to a nearby cellular tower. This RTU may be connected to other equipment such as chlorine monitors or other alarm inputs and can be solar powered. Status data packets are transmitted through a secure private network connection to Mission servers. When the tank level is outside the user configurable level boundaries, a command is automatically sent to output relays on the same RTU or remote RTUs to energize pumps or valves and refill the tank. The Tank and Well software supports up to five pumps.

Real-time notifications and reports inform operators of high pump starts, excessive pump runtimes, AC failure, low battery, and more. The 123SCADA web portal allows an operator with appropriate security credentials to adjust the pump on/off trigger levels and view current level readings. Trending graphs and reports are accessible on desktops and through the 123SCADA app on smart phones and tablets.

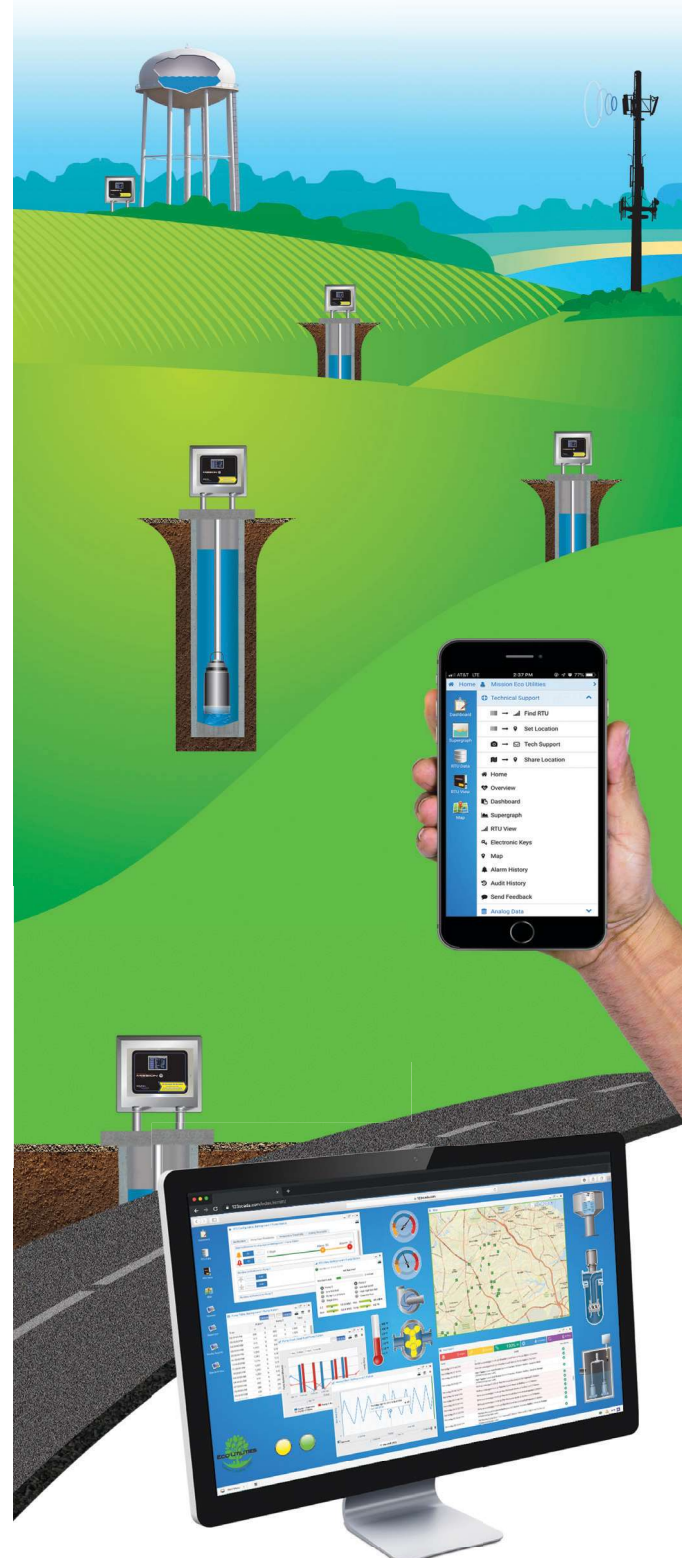
### Optimization and Money Saving Features

The software includes a virtual pump alternator feature which cycles through each well pump connected to a Tank and Well system. It can be set up to evenly distribute pump runtimes across all wells or alternate the lead pump to favor the well that has had the least water production in the last one to seven days.

Maximum runtimes can be set for each pump, and the system will alternate to the next pump once the maximum runtime is reached. This reduces the risk of damaging the water table by over pumping.

An off-peak force fill feature is available to save money by filling a tank when electricity rates are lower than peak hour rates.

Behind-the-scenes business logic is available to notify of abnormal situations that can affect system performance. For example, a “call-to-run fail-to-run” alarm notification can be dispatched by the system if the well pump does not run when instructed. This could happen if the well is without AC power, an operator has locked the pump out locally — typically with the hand-off-auto (HOA) switch, or the pump requires service (motor burnt out). More information is available in our document Best Practices for Remote Control, which can be found on the 123SCADA web portal.





On the 123SCADA web portal the customer can view:

- Current and historic tank levels
- Real-time well call and run status

With administrator credentials the operator can:

- Set well control points
- Enable and disable alternation
- Manually run or lock out individual wells via virtual HOA switch
- Set high and low alarm points

What is needed:

At the tank

- MyDro 850 RTU (PN M851, M852, M852L, M853)
- 800 Series Service Package for real-time alarms and streaming data (PN SP850–12/24/36)
- Tank and Well Control Package (PN SW587)
- 4–20 mA or 0–5 V analog level sensor, various PSI ranges (PN IT47X)
- Level sensor surge suppressor (PN IT482)
- Antenna extension kit, various lengths, optional (PN RF41X)

At each well

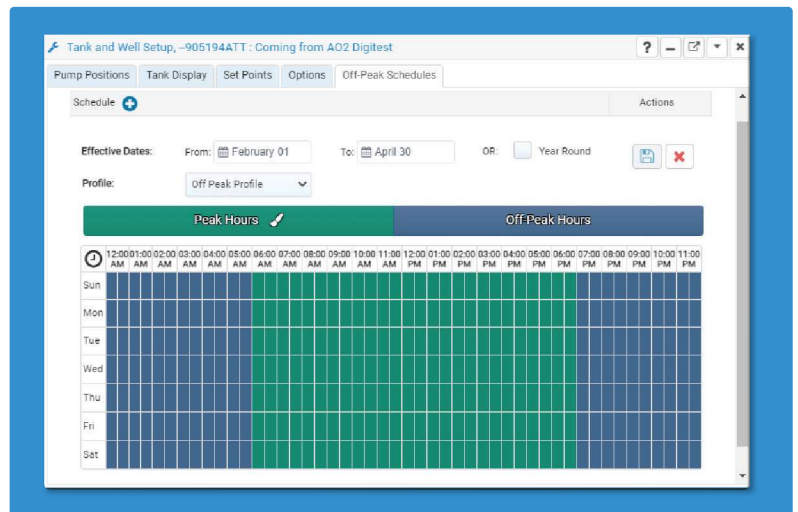
- MyDro 850 RTU (PN M851, M852, M852L, M853)
- 800 Series Service Package for real-time alarms and streaming data (PN SP850–12/24/36)
- Interposing relays (PN PW479 or PW480)
- Antenna extension kit, various lengths, optional (PN RF41X)

Refer to the MyDro data sheet, the accessories catalog, and Best Practices for Remote Control document for more information.

## Off–Peak Schedules

Off-Peak Schedules allow users to control the filling of their tanks to a different level during off-peak hours to take advantage of lower utility costs. By keeping the levels high during the off-peak period the tank will be nearly full at the start of the peak period where energy costs are higher. Depending on the size of the tank and demand for water the pumps may not need to run at all during the peak period.

Configure off-peak schedules from the 123SCADA web portal using the following navigation path: Start Menu > Applications > Tank and Well > Wrench > Off-Peak Schedules



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Vance County Water District  
Operations Report  
March 2024

=	Operation Highlights	Fiscal Year-to-Date	March 2024
<b>Work Order Completions:</b>			
	Discolored Water / Air in Line	9	1
	Install Meter	56	5
	Replace Meter / ERT	45	0
	Repaired/Replaced ERTs	43	0
	Remove Meter	4	0
	Locate Line/Main	915	39
	Odor in Water / Chlorine Check	9	1
	Check for Usage / Leaks	370	10
	Replace Meter Lid / Box	39	1
	Low Pressure / No Water	7	1
	Water Main/Service Line Break	14	1
	Distribute Boil Water Notices	0	0
	Distribute Rescind Notices	0	0
	Move In / Move Out	243	14
	Kittrell/Vance Water Tower Response	3	0
	Repair Water Main / Water Service	33	1
	Actual Shut Offs	559	23
	Restores	440	18
	Cross Connection Checks	14	0
	Installed Taps	55	5
	Hydrant / Site Care / Mowing	7	1
	Delivered Return Mail	0	0
	Water Tap Requests / Checks	20	1
	Recheck	202	7
	Meter Lock	6	0
	Corrective Maintenance	21	0
	Pothole/Road Repair- PW	2	0
	Meter Read	1566	128
	Install ERT	8	0
	Meter Locate	22	0
<b>Satellite Office Activity:</b>			
	Information Requests	69	6
	Bill Pays	4997	376
	Applications Received	170	14

<b>Billing Summaries:</b>	Active Customers	Metered Services	Gallons Billed	Average Usage	
December Billing 12/01/2023-12/31/2023	1875	1491	4,834,429	3,242	@.01033 = \$33.49 +\$30 Base = \$63.49
January Billing 01/01/2024-01/31/2024	1879	1494	4,638,081	3,104	@.01033 = \$32.07 +\$30 Base = \$62.07
February Billing 02/01/2024-02/29/2024	1890	1499	5,158,234	3,441	@.01033 = 35.55 +\$30 Base = \$65.55
March Billing 03/01/2024-03-31-2024	1886	1495	4,344,111	2,906	@.01033=30.02 +30 Base = \$60.02

The above numbers include all three systems.

**Water System Overview:**

The current residential customer count is as follows:

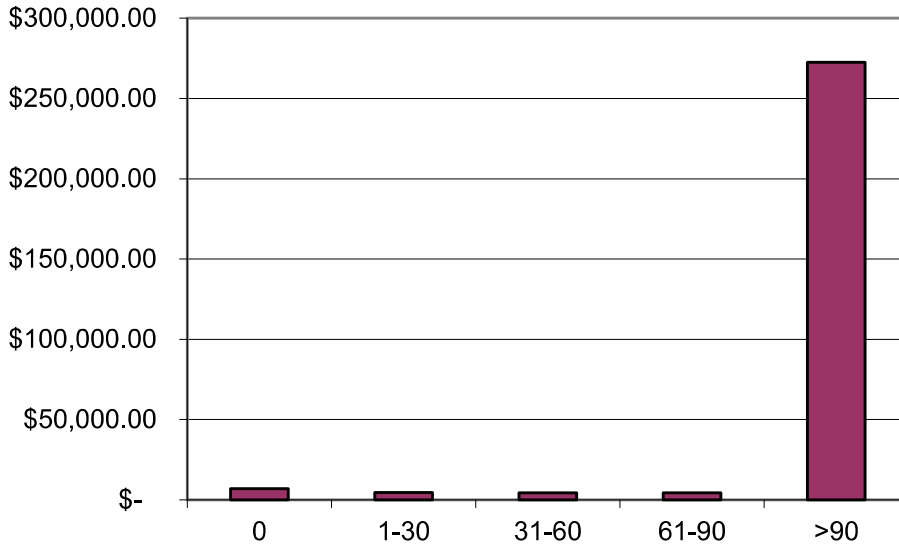
- Phase 1 – 825 total customers; 209 availability accounts and 616 metered accounts.
- Phase 2 – 700 total customers; 182 availability accounts and 518 metered accounts.
- Kittrell – 361 total customers; 0 availability and 361 metered accounts.

There is a total of 1886 VCWD customers committed to the system with 1495 metered customers.

\* Information as of March 31, 2024

Vance County Water District  
 Operations Report  
 March 2024

**Availability Aging Report for VANCE COUNTY**



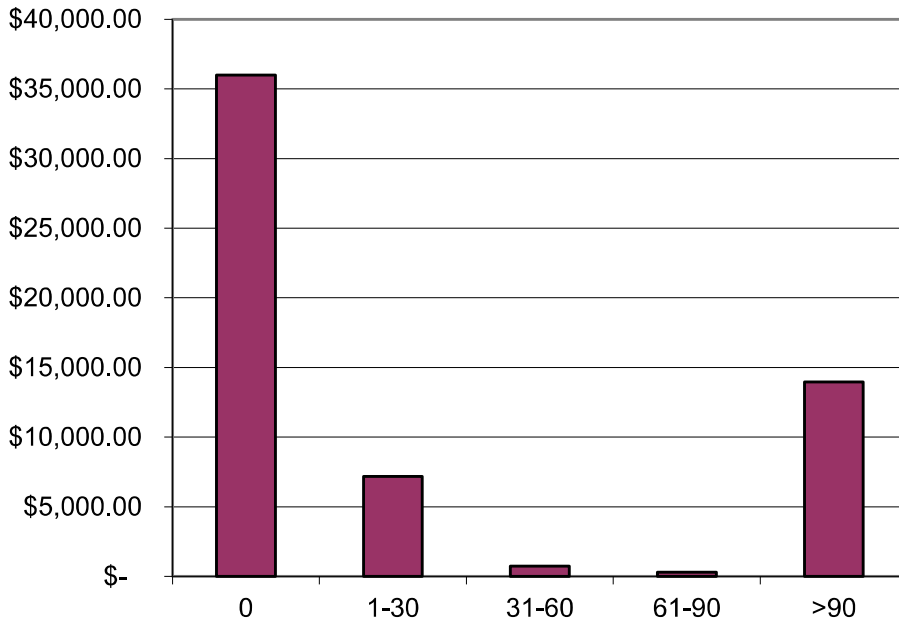
**Vance County  
 Availability Accounts AR\***

Age	Current Month
0	\$7,038.08
1-30	\$4,647.00
31-60	\$4,377.00
61-90	\$4,420.40
>90	\$272,562.65

**Total Availability AR to Date:**  
 \$293,046.13

No. of Customers:      78                  10                  2                  1                  142

**Metered Aging Report for VANCE COUNTY**



**Vance County  
 Metered Accounts AR\***

Age	Current Month
0	\$35,987.33
1-30	\$7,174.35
31-60	\$ 742.38
61-90	\$ 302.80
>90	\$13,952.14

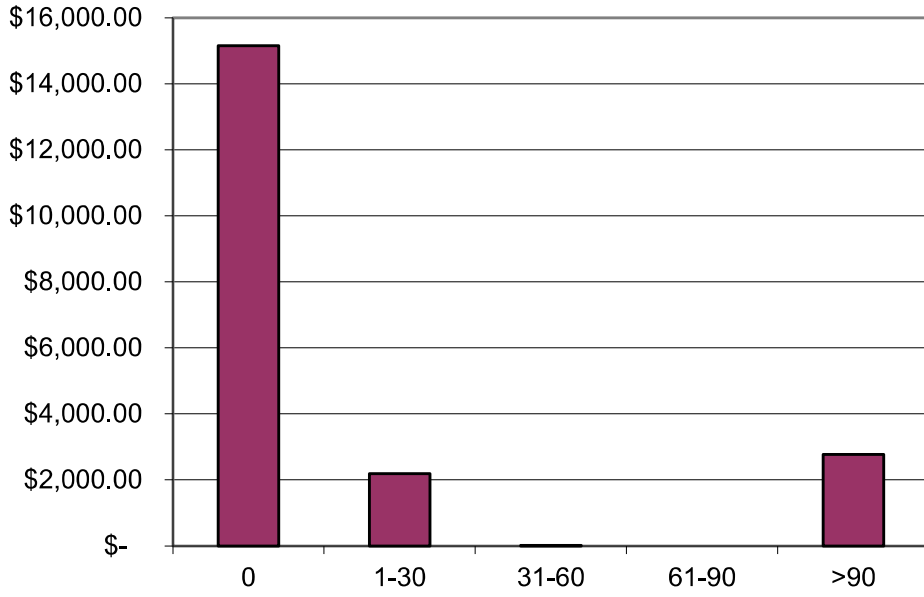
**Total Metered AR to Date:**  
 \$58,159.00

No. of Customers      464                  108                  9                  4                  59

\* Information as of March 31, 2024

Vance County Water District  
 Operations Report  
 March 2024

**Metered Aging Report for KITTRELL-VANCE**



**Kittrell  
 Metered Accounts AR\***

Age	Current Month
0	\$ 15,150.50
1-30	\$ 2,186.00
31-60	\$ 17.99
61-90	\$ .00
>90	\$ 2,773.23

**Total Metered AR to Date:**  
 \$20,127.72

No. of Customers: 162      40      3      0      19

\* Information as of March 31, 2024

Account Id	Account Description	Budgeted	Current Period		Balance	%Used
			3/01/24 to 03/31/24	YTD		
16-329-432900	INVESTMENT EARNINGS	15,000.00	40,349.58	40,349.58	25,349.58	269.0000
16-367-436701	WATER LINE REIMB-CITY	16,504.00	17,991.88	17,991.88	1,487.88	109.0200
16-375-437500	METERED WATER SALES	1,100,000.00	858,115.22	858,115.22	-241,884.78	78.0100
16-375-437501	NON-METERED WATER REVENUE	100,000.00	71,218.42	71,218.42	-28,781.58	71.2200
16-375-437502	WATER - DEBT SETOFF REVENUE	5,000.00	360.73	360.73	-4,639.27	7.2100
16-376-437005	MISCELLANEOUS REVENUES	3,500.00	3,116.26	3,116.26	-383.74	89.0400
16-376-437505	CONNECTION FEES	20,000.00	24,935.00	24,935.00	4,935.00	124.6800
16-376-437506	RECONNECT FEES	6,000.00	9,937.06	9,937.06	3,937.06	165.6200
16-376-437507	NSF CHECK FEES	-800.00	-1,287.34	-1,287.34	-487.34	0.0000
16-376-437508	LATE PAYMENT FEES	18,500.00	14,531.60	14,531.60	-3,968.40	78.5500
16-397-439710	TRANSFER FROM GENERAL FUND	29,312.00	0	0	-29,312.00	0.0000
<b>WATER DISTRICT FUND Revenue Totals</b>		<b>1,313,016.00</b>	<b>1,039,268.41</b>	<b>1,039,268.41</b>	<b>-273,747.59</b>	

Account Id	Account Description	Budgeted	Current Period		Balance	%Used
			3/01/24 to 03/31/24	YTD		
16-660-500621	BOND PRINCIPAL - WATER	228,688.00	0	0	228,688.00	0.0000
16-660-500622	BOND INTEREST - WATER	315,940.00	0	0	315,940.00	0.0000
16-665-500011	TELEPHONE & POSTAGE	2,200.00	1,463.43	1,463.43	736.57	66.5200
16-665-500013	UTILITIES	4,900.00	3,277.86	3,277.86	1,622.14	66.9000
16-665-500026	ADVERTISING	1,200.00	0	0	1,200.00	0.0000
16-665-500033	DEPARTMENTAL SUPPLIES	55,000.00	25,703.12	25,703.12	29,296.88	46.7300
16-665-500044	SPECIAL CONTRACTED SERVICES	0.00	312.92	312.92	-312.92	0
16-665-500045	CONTRACTED SERVICES	280,000.00	196,832.69	196,832.69	83,167.31	70.3000
16-665-500054	INSURANCE & BONDS	3,182.00	3,019.90	3,019.90	162.10	94.9100
16-665-500079	PURCHASED WATER	270,000.00	186,801.63	186,801.63	83,198.37	69.1900
16-665-500088	BANK SERVICE CHARGES	2,500.00	2,081.82	2,081.82	418.18	83.2700
16-665-500130	VCWD WATER AIA ASSESSMENT	0.00	5,200.00	5,200.00	-5,200.00	0
16-665-500283	DEBT SERVICE RESERVE	55,130.00	0	0	55,130.00	0.0000
16-665-500286	SYSTEM MAINTENANCE	68,000.00	18,749.99	18,749.99	49,250.01	27.5700
16-665-500347	PERMITS	2,700.00	3,150.00	3,150.00	-450.00	116.6700
16-665-500390	DEPRECIATION EXPENSE	23,576.00	0	0	23,576.00	0.0000
<b>WATER DISTRICT FUND Expenditure Totals</b>		<b>1,313,016.00</b>	<b>446,593.36</b>	<b>446,593.36</b>	<b>866,422.64</b>	

*Committee Reports  
and Recommendations*

# Vance County

## Committee Reports and Recommendations

### May 6, 2024

#### Intergovernmental Committee

The committee (Taylor, Kelly and Alston/absent); Brummitt attending and County staff, met with the City of Henderson council members (Noel, Seifert) and City staff on Wednesday, April 24, 2024 to discuss a potential co-location of County EMS and a City Fire Department. The intergovernmental committee recommends creating another committee to further vet the potential partnership and bring recommendations back to the intergovernmental committee. Chairman Brummitt has assigned the public safety committee (Alston, Brummitt, and Faines) as well as Javier Plummer, EMS Director as the County's committee members. Future meetings will be scheduled after the County's FY24-25 budget is passed. *For your information.*



*Finance Director's  
Report*



# VANCE COUNTY FINANCE OFFICE

122 YOUNG STREET, SUITE B  
HENDERSON, NORTH CAROLINA 27536

## Budget and Finance Director's Report for the Period Beginning July 1, 2023 through April 30, 2024

According to the Financial Policy Guidelines Adopted, July 11, 2016, you are to receive a financial report at least quarterly showing year-to-date revenues and expenditures and comparing each amount to the budget as amended. From this point forward, you will begin receiving this report at the BOCC meeting after the end of each quarter.

The attached financial report captures this information and below is a summarization of the report with some highlights.

- **Revenues**
  - The Difference Column:
    - Positive Amount – Represents what is left to be collected in order to achieve the budget.
    - Negative Amount – Represents the amount received over the amount budgeted.
  - The Percentage of Budget:
    - Less than 100% - represents that we have not collected enough to meet the budget amount.
    - Greater than 100% - represents that our collections have exceeded the budget amount.
  - NOTES:
    - We are at a 96.33 % collection of our Ad Valorem Taxes.
    - The following accounts have received over the amount of revenue budgeted:
      - 315 – Vehicle Rental Tax
      - 329 – Investments
      - 334 - 4H Revenue
      - 347 - ABC Revenues
      - 357 – Inspection Fees
      - 380 - Grants
    - Overall, we have collected 76.84% of the revenue budgeted.
    - Revenue collected as of April 30, 2024 is \$5,357,475 over expenses.

- **Expenses**
  - The Difference Column:
    - Positive Amount – Represents the amount of funds we have left available to spend.
    - Negative Amount – Would represent that we have overspent.
  - The Percentage of Budget:
    - Less than 100% - Represents that we have NOT spent over the amount budgeted.
    - Greater than 100% - Would represent that we have overspent.
  - NOTES:
    - There are no negative ending department budget balances.
    - Budget Amendments are being brought to the BOCC timely.
    - Departments are spending within the original and/or amended budget.
    - We have spent 67.72 % of the amount budgeted for expenses.

Respectfully submitted:

Stephanie Williams  
Budget & Finance Director

BUDGET & FINANCE DIRECTOR'S REPORT				
Period beginning July 1, 2023 through April 30, 2024				
Account Description	2024 Budgeted	2024 Actual	Difference	Percentage of Budget
<b>REVENUES:</b>				
301 - AD Valorem Taxes	\$26,768,477.00	\$25,785,007.04	\$983,469.96	96.33%
315 -VEHICLE RENTAL TAX	\$35,000.00	\$36,954.85	(\$1,954.85)	105.59%
325 - PRIVILEGE LICENSE	\$2,750.00	\$947.50	\$1,802.50	34.45%
329 -INVESTMENT EARNINGS	\$305,000.00	\$885,769.28	(\$580,769.28)	290.42%
332 -ANIMAL CONTROL FEES	\$118,600.00	\$78,251.70	\$40,348.30	65.98%
333 -CO-OPERATIVE EXTENSION	\$11,500.00	\$8,761.20	\$2,738.80	76.18%
334 -4-H REVENUE	\$5,500.00	\$5,690.00	(\$190.00)	103.45%
342 -PLANNING FEES	\$30,000.00	\$18,960.00	\$11,040.00	63.20%
345 -LOCAL GOVERNMENT SALES TAX	\$12,310,000.00	\$8,474,846.12	\$3,835,153.88	68.85%
346 -STATE REVENUES	\$166,600.00	\$10,257.02	\$156,342.98	6.16%
347 -ABC REVENUES	\$152,000.00	\$275,888.92	(\$123,888.92)	181.51%
348 -DSS STATE REVENUES	\$6,719,774.00	\$3,252,997.81	\$3,466,776.19	48.41%
349 -DSS FEDERAL REVENUES	\$488,842.00	\$357,912.77	\$130,929.23	73.22%
350 -DSS LOCAL REVENUES	\$52,421.00	\$37,534.65	\$14,886.35	71.60%
353 -PAYMENT IN LIEU OF TAXES	\$59,000.00	\$0.00	\$59,000.00	0.00%

Account Description	2024 Budgeted	2024 Actual	Difference	Percentage of Budget
356 - REGISTER OF DEEDS REVENUE	\$355,500.00	\$257,820.75	\$97,679.25	72.52%
357 -INSPECTION FEES	\$325,000.00	\$348,699.26	(\$23,699.26)	107.29%
358 -JAIL REVENUES	\$331,100.00	\$227,130.38	\$103,969.62	68.60%
359 -SHERIFF REVENUE	\$232,618.00	\$199,830.38	\$32,787.62	85.90%
360 -AMBULANCE REVENUE	\$2,403,600.00	\$1,524,951.48	\$878,648.52	63.44%
367 -REFUNDS AND REIMBURSEMENTS	\$1,378,910.00	\$1,074,744.69	\$304,165.31	77.94%
369 - REVENUE FROM CITY OF HENDERSON	\$1,266,856.00	\$802,957.79	\$463,898.21	63.38%
370 -MISCELLANEOUS	\$546,832.00	\$371,136.78	\$175,695.22	67.87%
380 -GRANTS	\$306,340.00	\$982,841.65	(\$676,501.65)	320.83%
397 -TRANSFERS FROM OTHER FUNDS	\$2,197,101.00	\$133,900.00	\$2,063,201.00	6.09%
399 -FUND BALANCE APPROPRIATED	\$2,197,695.00	\$0.00	\$2,197,695.00	0.00%
<b>GENERAL FUND Revenue Totals</b>	<b>\$58,767,016.00</b>	<b>\$45,153,792.02</b>	<b>\$13,613,223.98</b>	<b>76.84%</b>
<b>EXPENSES:</b>				
410 -GOVERNING BODY	\$418,482.00	\$322,595.46	\$95,886.54	77.09%
430 - ELECTIONS	\$392,539.00	\$270,178.10	\$122,360.90	68.83%
440 -ADMINISTRATION/FINANCE	\$1,184,294.00	\$911,720.76	\$272,573.24	76.98%
450 -TAX OFFICE	\$818,391.00	\$614,145.58	\$204,245.42	75.04%

Account Description	2024 Budgeted	2024 Actual	Difference	Percentage of Budget
470 - LEGAL SERVICES	\$82,592.00	\$53,127.06	\$29,464.94	64.32%
480 -REGISTER DEEDS	\$332,035.00	\$267,017.46	\$65,017.54	80.42%
490 -INFORMATION TECHNOLOGY	\$445,926.00	\$253,259.46	\$192,666.54	56.79%
491 -ECONOMIC DEVELOPMENT	\$261,586.00	\$170,358.42	\$91,227.58	65.13%
500 -COUNTY ADMINISTRATION BUILDING	\$236,119.00	\$208,029.56	\$28,089.44	88.10%
501 - COUNTY OFFICE BUILDING	\$233,921.00	\$171,192.36	\$62,728.64	73.18%
502 - HA DENNIS BUILDING	\$84,442.00	\$58,427.87	\$26,014.13	69.19%
505 - COURTHOUSE	\$617,730.00	\$328,617.68	\$289,112.32	53.20%
506 - RUIN CREEK ROAD BUILDING	\$6,000.00	\$5,846.81	\$153.19	97.45%
510 - SHERIFF'S OFFICE	\$4,871,815.00	\$3,948,832.53	\$922,982.47	81.05%
514 - NON CAPITALIZED ASSETS	\$7,000.00	\$0.00	\$7,000.00	0.00%
517 - SHERIFF'S INTERDICTION FUNDS	\$2,118.00	\$0.00	\$2,118.00	0.00%
518 - SCHOOL RESOURCE OFFICERS	\$356,594.00	\$169,112.91	\$187,481.09	47.42%
519 - EATON JOHNSON BUILDING	\$1,036,502.00	\$816,712.66	\$219,789.34	78.80%
520 - JAIL	\$5,612,603.00	\$3,449,615.13	\$2,162,987.87	61.46%
525 - ENVRIONMENTAL SERVICES	\$55,000.00	\$32,800.00	\$22,200.00	59.64%

Account Description	2024 Budgeted	2024 Actual	Difference	Percentage of Budget
530 - AMBULANCE	\$4,253,571.00	\$3,215,941.10	\$1,037,629.90	75.61%
531 - FIRE	\$1,603,289.00	\$1,061,525.31	\$541,763.69	66.21%
541 - PLANNING & DEVELOPMENT	\$852,533.96	\$369,309.95	\$483,224.01	43.32%
555 - CENTRAL SERVICES	\$685,579.00	\$392,563.34	\$293,015.66	57.26%
576 - SOIL & WATER CONSERVATION	\$136,530.00	\$100,907.09	\$35,622.91	73.91%
580 - MENTAL HEALTH	\$280,060.00	\$229,313.09	\$50,746.91	81.88%
590 - PUBLIC HEALTH	\$983,380.00	\$847,974.63	\$135,405.37	86.23%
599 - ANIMAL SERVICES	\$665,883.00	\$518,399.91	\$147,483.09	77.85%
600 - CONTRIBUTIONS TO OTHER AGENCIES	\$2,557,541.00	\$1,564,502.56	\$993,038.44	61.17%
601 - SMART START	\$76,051.00	\$49,019.20	\$27,031.80	64.46%
604 - 4H	\$13,000.00	\$6,679.23	\$6,320.77	51.38%
605 - COPERATIVE EDUCATION	\$221,865.11	\$103,037.18	\$118,827.93	46.44%
607 - VETERANS SERVICES	\$134,548.00	\$99,894.09	\$34,653.91	74.24%
610 - SOCIAL SERVICES	\$10,265,169.00	\$5,540,604.81	\$4,724,564.19	53.97%
611 - PROGRAM ON AGING	\$771,460.00	\$580,595.73	\$190,864.27	75.26%
613 - DSS VENDING	\$8,421.00	\$4,440.24	\$3,980.76	52.73%
615 - NUTRITIONAL MEALS	\$110,739.00	\$84,513.31	\$26,225.69	76.32%

Account Description	2024 Budgeted	2024 Actual	Difference	Percentage of Budget
619 - YOUTH SERVICES	\$169,237.00	\$73,435.68	\$95,801.32	43.39%
620 - FRIENDS OF YOUTH/TEEN COURT	\$61,800.00	\$37,537.74	\$24,262.26	60.74%
621 - EMERGENCY COMMUNICATIONS	\$1,869,972.00	\$1,345,419.46	\$524,552.54	71.95%
622 - FARMERS MARKET	\$36,813.00	\$27,289.46	\$9,523.54	74.13%
629 - FLOW THRU DEPTS	\$700,000.00	\$541,342.94	\$158,657.06	77.33%
630 - VC HOUSING AUTHORITY	\$250,000.00	\$196,786.09	\$53,213.91	78.71%
681 - PUBLIC SCHOOLS	\$9,470,865.00	\$7,892,387.50	\$1,578,477.50	83.33%
683 - VANCE-GRANVILLE COMMUNITY COLLEGE	\$1,530,216.00	\$1,277,994.37	\$252,221.63	83.52%
696 - TRANSFER TO OTHER FUNDS	\$3,856,959.00	\$1,540,439.87	\$2,316,519.13	39.94%
999 CONTINGENCY	\$145,843.93	\$42,873.34	\$102,970.59	29.40%
<b>GENERAL FUND Expenditure Totals</b>	<b>\$58,767,015.00</b>	<b>\$39,796,317.03</b>	<b>\$18,970,697.97</b>	<b>67.72%</b>
<b>ACTUAL REVENUE OVER ACTUAL EXPENSES:</b>		<b>\$5,357,474.99</b>		



*County Manager's  
Report*

**Vance County**  
**County Manager's Report to the Board**  
**May 6, 2024**

- A. Fireworks Permit – Tourism.** The Vance County Tourism Department is requesting approval of a fireworks permit for its Independence Day celebration at Satterwhite Point Park at Kerr Lake on Saturday, July 6, 2024. According to Tourism Director Pam Hester, the TDA has obtained the necessary permits and approvals from NC State Parks and the Corps of Engineers and the show will be contracted with a professional pyrotechnics firm which has the appropriate credentials and insurance coverage. *Recommendation: Approve the request from Tourism for a permit and fee waiver to discharge fireworks at its Independence Day celebration at Satterwhite Point at Kerr Lake planned for Saturday, July 6, 2024, contingent upon the necessary approvals from the fire marshal.*
- B. Ambulance Franchise Application – North Central Medical Transport.** The county's ordinance requires providers to be certified at the Basic Life Support (BLS) and Advance Life Support (ALS) levels and requires them to provide backup emergency services as needed under the Vance County EMS system plan. At this time, North Central Medical Transport is operating at the BLS level and is unable to provide ALS level service. The current franchise ordinance requires franchisees to provide both BLS/ALS level service, with the ability to back up Vance County EMS for 911 response. North Central Medical Transport is unable to meet these requirements at this time. *For your Information.*
- C. Ambulance Franchise Application – North State Medical Transport.** North State Medical Transport has reapplied for their ambulance franchise. Their application appears to meet the ordinance requirements and they currently operate from a Vance County location. State law requires consideration of the franchise application at two separate meetings with the final consideration planned for the June 3<sup>rd</sup> meeting. *Recommendation: Approve and grant ambulance franchise agreement allowing North State Medical Transport, Inc. to provide ALS and BLS service in Vance County, subject to a second approval as required by NC General Statutes.*
- D. Revised Budget Calendar.** Chapter 159 of the NC General Statutes, the Local Government Finance Act, requires presentation of a proposed budget to the Board of County Commissioners by June 1, 2024. The proposed budget will be presented to the Board of County Commissioners on May 16, 2024 at 4:00 p.m. Budget work sessions will be scheduled between May 20<sup>th</sup> and June 15<sup>th</sup>. *Recommendation: Review and consider revised budget calendar and schedule dates for budget work sessions.*
- E. Board of E&R Meetings.** The board of equalization and review will adjourn on June 3, 2024. This is the last day for property owners to file an appeal for real property. There is a chance of an increased influx of appeals through June 3, 2024. There may be a need for additional days for the board of equalization and review. *Recommendation: Consider scheduling additional days for the board of equalization and review.*
- F. Opioid PBM Update:** The opioid consortium has recovered funds for NC over the past 8 years. There is an option to amend our complaint to include PBM (pharmacy benefit managers) in the national opioid litigation. If the County amends our complaint, the county will have the opportunity to participate in additional recovery if there is a favorable resolution. *Recommendation: Approve the amendment of the county's complaint to add the PBM Defendants, including subsidiaries.*



To: Vance County Board of Commissioners

From: Pam Hester, Executive Director  
Vance County Tourism Development Authority

Subject: Independence Day Fireworks - Satterwhite Point, Kerr Lake

Date: April 22, 2024

Please let this memo serve as my request to hold our annual Independence Day Celebration featuring a fireworks exhibition at Satterwhite Point Park at Kerr Lake. The date will be **Saturday, July 6, 2024**. We have obtained the necessary permits and approvals from NC State Parks and the Corp of Engineers and are presently notifying NCDOT, NC Highway Patrol, Vance County Sheriff's Office, the Vance County Fire Chief along with numerous other agencies that provide support. We use a professional pyrotechnic company that is fully licensed and insured. They have provided our show for over twenty years.



**Give a full description of the type and level of service to be provided:**

NCMT will provide state-inspected ambulances with **Basic Life Support** and **Advanced Life Support**.

The services will be provided by North Carolina certified EMT and Paramedic staff.

**Specify the location of the place(s) from which it is intended to operate:**

We are located at 132 Market Street, Henderson, NC 27537.

**Explain how the vehicles will be dispatched:**

The method of contact will be public service telephone, both land line and cell phone located at the office in Vance County.

**Explain the manner in which the public and other emergency service agencies will be able to obtain assistance:**

The method of contact will be public service telephone, both land line and cell phone.

Our experience shows that health care facilities call schedule appointments. We personally contact these facilities on a regular basis to follow-up with service satisfaction.

**Give a description of the applicant's capability to provide 24-hour coverage 7 days per week:**

We are scheduled to operate BLS services 5 days per week, Monday through Friday 9:00 am until 5:00 pm or as deemed necessary to meet customer requirements. We currently have a BLS staff of six EMTs. The current hours of operation have been guided by advice of the health care facilities.

We are scheduled to operate ALS services 7 days per week, 24 hours per day, with a staff of a Paramedic and an EMT B for each 12 hour or 24 hour shift.

**Give an accurate estimate of the average response time to calls for transport:**

The majority of our BLS transports are by appointment. However, when contacted for unscheduled BLS or ALS transports, our average response time is within 30 minutes.

**Give a statement that each base of operation will have at least 1 open telephone line and that telephone number (the applicant must register these phone numbers with the E-911 Center upon receiving a franchise).**

The Vance County has its individual land line. In addition, the cell phone number of the office manager will be publicized. The current office phone number is (919) 603-0221 and the cell phone number is (919) 691-0591.

**Will you be able to respond to Vance County 911 calls if requested by the Vance County E-911 center and local EMS provider, i.e. mutual aid?**

Yes      No

State of North Carolina  
Department of the Secretary of State  
ARTICLES OF INCORPORATION

SOSID: 916452  
Date Filed: 5/22/2007 2:08:00 PM  
Effective: 5/8/2007  
Elaine F. Marshall  
North Carolina Secretary of State  
C200712801051

Pursuant to §55-2-02 of the General Statutes of North Carolina, the undersigned does hereby submit these Articles of Incorporation for the purpose of forming a business corporation.

1. The name of the corporation is: North Central Medical Transport, Inc.

2. The number of shares the corporation is authorized to issue is: 1,000

3. These shares shall be: (check either a or b)

a.  all of one class, designated as common stock; or

b.  divided into classes or series within a class as provided in the attached schedule, with the information required by N.C.G.S. Section 55-6-01.

4. The street address and county of the initial registered office of the corporation is:

Number and Street 106 Main Street

City Oxford State NC Zip Code 27565 County Granville

5. The mailing address, if different from the street address, of the initial registered office is:

Number and Street P. O. Box 428

City Oxford State NC Zip Code 27565 County Granville

6. The name of the initial registered agent is: R. Gene Edmundson

7. Principal office information: (must select either a or b.)

a.  The corporation has a principal office.

The street address and county of the principal office of the corporation is:

Number and Street 106 Main Street

City Oxford State NC Zip Code 27565 County Granville

The mailing address, if different from the street address, of the principal office of the corporation is:

Number and Street P. O. Box 428

City Oxford State NC Zip Code 27565 County Granville

b.  The corporation does not have a principal office.

8. Any other provisions, which the corporation elects to include, are attached.

9. The name and address of each incorporator is as follows:

R. Gene Edmundson, Edmundson & Burnette, L.L.P., P.O. Box 428, Oxford, NC 27565

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

10. These articles will be effective upon filing, unless a date and/or time is specified:

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

This the \_\_\_\_\_ day of May 2007

  
Signature

R. Gene Edmundson, Incorporator  
Type or Print Name and Title

**NOTES:**

**1. Filing fee is \$125. This document must be filed with the Secretary of State.**

**CORPORATIONS DIVISION**

*(Revised January, 2002)*

**P. O. BOX 29622**

**RALEIGH, NC 27626-0622**

**(Form B-01)**

# Resource Capabilities

Roster



Type				Total
Available Ventilators				0
Kristin Bradsher Abbott P123046	EMS Technician ( <i>Emergency Medical Technician</i> )	Paramedic	02/28/2025	
Taylor J Abbott P112042	EMS Technician	Paramedic	09/30/2021	Work: (252) 425-3883
Debra P Beard P025780	EMS Technician	Emergency Medical Technician	06/30/2022	
Robert H Brandon P018591	EMS Technician	Emergency Medical Technician	07/31/2022	
Cheryl C Champion P083932	EMS Technician	Emergency Medical Technician	12/31/2023	
Wesley Cole P112056	EMS Technician ( <i>Emergency Medical Technician</i> )	Emergency Medical Technician	07/31/2021	
Carrie R Currin P050194	Administrator Agency Primary Contact			Work: (919)-603-0221
Jesse L Currin P050193	Agency Primary Contact Administrator			Work: (919) 603-0221
Jacob Aaron Elliott P047936	EMS Technician	Paramedic	03/31/2023	
Amanda C Robbins P048110 WV516540	EMS Technician ( <i>Paramedic</i> )	Paramedic	09/30/2022	Work: (919)-496-5005
Breanna Marie Sikes P520281	EMS Technician	Paramedic	12/31/2024	
Justin Daniel Simmons P108419	EMS Technician ( <i>Emergency Medical Technician</i> )	Paramedic	10/31/2023	Work: (252) 213-5883
Marie W Simmons P098293	EMS Technician ( <i>Emergency Medical Technician</i> )	Emergency Medical Technician	06/30/2022	
Michael L Stevens P025837	EMS Technician ( <i>Emergency Medical Technician</i> )	Emergency Medical Technician	04/30/2024	
Angela Thompson Wester P063262	EMS Technician	Paramedic	11/30/2023	
Darry L Whitlow P022366	EMS Technician	Emergency Medical Technician	02/28/2022	Work: 5751185
Annie E Wilbourne P107396	EMS Technician	Paramedic	11/30/2021	
Ashley Denise Young P515981	EMS Technician ( <i>Emergency Medical</i> )	Emergency Medical	07/31/2023	

Close



# State of North Carolina

Office of Emergency  
Medical Services



Medical Care  
Commission

Department of Health and Human Services  
Division of Health Service Regulation

*Having met the requirements of North Carolina General Statute 131E-155.1 and the rules of  
the North Carolina Medical Care Commission for the licensing of EMS Agencies.*

***North Central Medical Transport, Inc.***

*is hereby issued an EMS Agency License*

*This License, Number 1630, expires the last day of June, 2025*

A handwritten signature in black ink, appearing to read "John D. ...", positioned above a horizontal line.

North Carolina  
Office of EMS



A handwritten signature in black ink, appearing to read "Mark Payne", positioned above a horizontal line.

Medical Care  
Commission

# Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>North Central Medical Transport, Inc</b>	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
	5 Address (number, street, and apt. or suite no.) See instructions. <b>PO Box 1973</b>	Requester's name and address (optional)
	6 City, state, and ZIP code <b>Oxford, NC 27565</b>	
	7 List account number(s) here (optional)	

### Part I Taxpayer Identification Number (TIN)

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

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

Social security number	
[ ] [ ] [ ] - [ ] [ ] - [ ] [ ] [ ] [ ]	
or	
Employer identification number	
2 0 - 8 9 8 7 4 7 8	

### Part II Certification

Under penalties of perjury, I certify that:

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

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

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ <b>3-4-21</b>
------------------	----------------------------	----------------------

### General Instructions

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

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

### Purpose of Form

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

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
  - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
  - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
  - Form 1099-S (proceeds from real estate transactions)
  - Form 1099-K (merchant card and third party network transactions)
  - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

Vehicles 

[+ Create](#) 

VIN	Model Year	Unit Name	Permit	Expiration	Permit Type	Level	Status
1FDSS34P16HB30399	2006	05	NC003443	07/31/2021	Permanent	EMT	In Service
1FDWE3FSXCDA47664	2012	09	NC001959	08/31/2022	Permanent	Paramedic	In Service
1FDXE4FS9EDB02120	2014	11	NC002270	01/31/2023	Permanent	Paramedic	In Service
1GBKG316291115963	2008	12	NC005355	09/30/2022	Permanent	Paramedic	In Service

4 items found, displaying all items.

Export options: [CSV](#) | [Excel](#) | [XML](#)



AGENCY CUSTOMER ID: NORTCEN-01

CBOY

## COMMERCIAL GENERAL LIABILITY SECTION

DATE (MM/DD/YYYY)  
05/20/2020AGENCY  
Todd & Scarboro, Inc.CARRIER  
MARKEL INSURANCE COMPANYNAIC CODE  
38970POLICY NUMBER  
MTG70002788-05EFFECTIVE DATE  
05/31/2020APPLICANT / FIRST NAMED INSURED  
NORTH CENTRAL MEDICAL TRANSPORT INC

IMPORTANT - If CLAIMS MADE is checked in the COVERAGE / LIMITS section below, this is an application for a claims-made policy.  
Read all provisions of the policy carefully.

## COVERAGES

COMMERCIAL GENERAL LIABILITY  
 CLAIMS MADE  OCCURRENCE  
 OWNER'S & CONTRACTOR'S PROTECTIVE

## LIMITS

GENERAL AGGREGATE \$ 2,000,000  
 LIMIT APPLIES PER:  POLICY  LOCATION  
 PROJECT  OTHER  
 PRODUCTS & COMPLETED OPERATIONS AGGREGATE \$ 2,000,000  
 PERSONAL & ADVERTISING INJURY \$ 1,000,000  
 EACH OCCURRENCE \$ 1,000,000  
 DAMAGE TO RENTED PREMISES (each occurrence) \$ 1,000,000  
 MEDICAL EXPENSE (Any one person) \$ 10,000  
 EMPLOYEE BENEFITS \$ 1,000,000

PREMIUMS	
PREMISES/OPERATIONS	
PRODUCTS	
OTHER	
TOTAL	

## DEDUCTIBLES

PROPERTY DAMAGE \$  PER CLAIM  
 BODILY INJURY \$  PER OCCURRENCE

OTHER COVERAGES, RESTRICTIONS AND/OR ENDORSEMENTS (For hired/non-owned auto coverages attach the applicable state Business Auto Section, ACORD 137)  
 See attached Forms & Endorsements Schedule.

APPLICABLE ONLY IN WISCONSIN: IF NON-OWNED ONLY AUTO COVERAGE IS TO BE PROVIDED UNDER THE POLICY:

1. UM / UIM COVERAGE  IS  IS NOT AVAILABLE. 2. MEDICAL PAYMENTS COVERAGE  IS  IS NOT AVAILABLE.

## SCHEDULE OF HAZARDS

LOC #	HAZ #	CLASSIFICATION	CLASS CODE	PREMIUM BASIS	EXPOSURE	TERR	RATE		PREMIUM	
							PREM/OPS	PRODUCTS	PREM/OPS	PRODUCT
1	1	Ambulance Service	40031	U	5					
1	2	Paratransit Service	40031	U	4					
1	3	Ambulance Service Professional Liab	73444	U	5					
1	4	Paratransit Service Professional Liab	73444	U	4					
1	5	Employee Benefit Liab	44444							
1	6	Monument Endt	44444							
1	7	Professional Liab								
1	8	Abuse or Molstation								

RATING AND PREMIUM BASIS

(S) GROSS SALES - PER \$1,000/SALES

(P) PAYROLL - PER \$1,000/PAY

(A) AREA - PER 1,000/SQ FT

(C) TOTAL COST - PER \$1,000/COST

(M) ADMISSIONS - PER 1,000/ADM

(U) UNIT - PER UNIT

(T) OTHER

## CLAIMS MADE (Explain all "Yes" responses)

EXPLAIN ALL "YES" RESPONSES

1. PROPOSED RETROACTIVE DATE:

2. ENTRY DATE INTO UNINTERRUPTED CLAIMS MADE COVERAGE:

3. HAS ANY PRODUCT, WORK, ACCIDENT, OR LOCATION BEEN EXCLUDED, UNINSURED OR SELF-INSURED FROM ANY PREVIOUS COVERAGE?

4. WAS TAIL COVERAGE PURCHASED UNDER ANY PREVIOUS POLICY?

## EMPLOYEE BENEFITS LIABILITY

1. DEDUCTIBLE PER CLAIM: \$

3. NUMBER OF EMPLOYEES COVERED BY EMPLOYEE BENEFITS PLANS:

2. NUMBER OF EMPLOYEES:

4. RETROACTIVE DATE:

ACORD 126 (2014/04)

Attach to ACORD 125 © 1993-2014 ACORD CORPORATION. All rights reserved

The ACORD name and logo are registered marks of ACORD

North Central Medical Transport, Inc.

Rates:

AO425 miles	\$12.00
AO426 ALS Non-Emergency	\$425.00
AO427 ALS Emergency	\$670.00
AO428 BLS Non-Emergency	\$350.00
AO429 BLS Emergency	\$450.00

**North Central Medical Transport, Inc.**  
**Statement of Revenues and Expenses - Income Tax Basis**  
**For the 1 Month and 12 Months Ended**  
**December 31, 2020 and December 31, 2019**

	1 Month Ended		1 Month Ended		12 Months Ended		12 Months Ended	
	Dec 31, 2020	Percent	Dec 31, 2019	Percent	Dec 31, 2020	Percent	Dec 31, 2019	Percent
<b>Income</b>								
Services	\$ 60,613.23	100.00 %	\$ 83,290.85	100.00 %	\$ 792,836.73	100.18 %	\$ 973,004.20	100.11 %
Less Returns and Allowances	0.00	0.00	0.00	0.00	(1,386.84)	(0.18)	(1,099.71)	(0.11)
<b>Total Income</b>	<u>60,613.23</u>	<u>100.00</u>	<u>83,290.85</u>	<u>100.00</u>	<u>791,449.89</u>	<u>100.00</u>	<u>971,904.49</u>	<u>100.00</u>
<b>Gross Profit</b>	<u>60,613.23</u>	<u>100.00</u>	<u>83,290.85</u>	<u>100.00</u>	<u>791,449.89</u>	<u>100.00</u>	<u>971,904.49</u>	<u>100.00</u>
<b>Operating Expenses</b>								
Advertising	3,183.24	5.25	64.05	0.08	3,348.70	0.42	4,133.79	0.43
Automobile Fuel Expense	1,189.16	1.96	(24,020.80)	(28.84)	33,483.60	4.23	36,300.00	3.73
Bank Service Charges	112.40	0.19	114.40	0.14	1,423.20	0.18	1,439.60	0.15
Contract Labor	0.00	0.00	186.00	0.22	942.38	0.12	501.18	0.05
Contributions	200.00	0.33	0.00	0.00	600.00	0.08	125.00	0.01
Depreciation Expense	156.25	0.26	156.25	0.19	1,875.00	0.24	1,875.00	0.19
Dues & Subscriptions	0.00	0.00	0.00	0.00	895.00	0.11	875.00	0.09
Employee Benefits	4,506.60	7.44	(17,395.60)	(20.89)	24,148.00	3.05	0.00	0.00
Vehicle License	0.00	0.00	0.00	0.00	2,050.39	0.26	1,304.41	0.13
Miscellaneous	0.00	0.00	0.00	0.00	100.62	0.01	0.00	0.00
Office Expense	105.00	0.17	0.00	0.00	5,061.09	0.64	1,125.00	0.12
Postage & Delivery Expense	0.00	0.00	0.00	0.00	64.00	0.01	64.00	0.01
Professional Fees	1,100.00	1.81	450.00	0.54	9,007.56	1.14	7,369.86	0.76
Repairs and Maintenance	1,712.94	2.83	30,902.81	37.10	42,682.55	5.39	52,455.65	5.40
Returned Checks	0.00	0.00	0.00	0.00	0.00	0.00	50.00	0.01
Salaries: Officers	1,900.00	3.13	1,900.00	2.28	26,800.00	3.39	21,750.00	2.24
Salaries: Staff	25,622.31	42.27	30,642.55	36.79	390,300.86	49.31	418,027.92	43.01
Telephone	201.16	0.33	89.96	0.11	1,257.99	0.16	5,214.02	0.54
Utilities	1,159.86	1.91	1,519.92	1.82	10,756.85	1.36	10,883.23	1.12
Rent	3,314.53	5.47	38,974.69	46.79	43,059.83	5.44	45,574.69	4.69
Equipment Rental	0.00	0.00	0.00	0.00	1,151.23	0.15	0.00	0.00
Small Tools & Equipment	0.00	0.00	0.00	0.00	437.72	0.06	0.00	0.00
Insurance	8,025.36	13.24	4,884.20	5.86	56,240.77	7.11	62,889.67	6.47
Employee Health Insurance	0.00	0.00	(2,452.50)	(2.94)	3,612.64	0.46	0.00	0.00
Insurance - Workman's Comp.	0.00	0.00	19,881.40	23.87	0.00	0.00	19,881.40	2.05
Supplies: Office	0.00	0.00	100.00	0.12	446.97	0.06	367.41	0.04
Supplies: General	39.49	0.07	(18,508.21)	(22.22)	928.04	0.12	40,018.43	4.12
Materials / Supplies	106.70	0.18	1,055.01	1.27	9,418.38	1.19	8,830.96	0.91
Oxygen	578.59	0.95	688.54	0.83	5,495.51	0.69	7,374.82	0.76
Drug Testing Fees	0.00	0.00	0.00	0.00	35.00	0.00	0.00	0.00
Taxes: FICA	3,031.33	5.00	1,973.24	2.37	33,284.56	4.21	33,842.84	3.48
Taxes: Unemployment	14.31	0.02	(90.94)	(0.11)	1,180.12	0.15	1,239.34	0.13
Taxes: Property	0.00	0.00	(9,245.11)	(11.10)	3,955.81	0.50	5,971.31	0.61
Taxes: Franchise	0.00	0.00	(22.00)	(0.03)	200.00	0.03	200.00	0.02
Taxes: Other	0.00	0.00	0.00	0.00	0.00	0.00	25.00	0.00
Training	0.00	0.00	0.00	0.00	0.00	0.00	365.10	0.04
Towing	0.00	0.00	55.00	0.07	755.00	0.10	645.00	0.07
Computer Software	16.14	0.03	4,102.82	4.93	7,187.75	0.91	50,460.95	5.19
Interest Expense	0.00	0.00	2.00	0.00	0.00	0.00	2.00	0.00
Penalty Expense	0.00	0.00	20.00	0.02	0.00	0.00	45.00	0.00
Miscellaneous Expense	0.00	0.00	0.00	0.00	0.00	0.00	327.96	0.03
<b>Total Operating Expenses</b>	<u>56,275.37</u>	<u>92.84</u>	<u>66,027.68</u>	<u>79.27</u>	<u>722,187.12</u>	<u>91.25</u>	<u>841,555.54</u>	<u>86.59</u>
<b>Operating Income (Loss)</b>	<u>4,337.86</u>	<u>7.16</u>	<u>17,263.17</u>	<u>20.73</u>	<u>69,262.77</u>	<u>8.75</u>	<u>130,348.95</u>	<u>13.41</u>

ALS

Date: \_\_\_\_\_

Crew Member: \_\_\_\_\_

Ambulance: \_\_\_\_\_

Crew Member: \_\_\_\_\_

Fuel Level: \_\_\_\_\_

<b>Compartment 1</b>		<b>Compartment 3 Cont.</b>		<b>Compartment 9</b>	
3 - Adult NC		1 - CAT Tourniquet		Portable Suction	
3 - Adult NRB		2 - Chest Seals		1 - Suction Tubing	
3 - Nebulizer		4 - Sterile Water		1 - Yankauer	
2 - Adult Neb Mask				1 - Sterile Water	
2 - Pedi Neb Mask		<b>Compartment 4</b>		8Fr,12Fr, 18Fr Su. Cath	
2 - Pedi NC		4 - 1000ml Normal Saline		Oxygen Bag	
2 - Pedi NRB		2 - 500ml Normal Saline		Tank Level:	
3 - Trach Mask		4 - 10gtt Sets		1 - Adult NC	
1 - Large CPAP		4 - 60gtt Sets		1 - Adult NRB	
1 - Medium CPAP		1 - Electrodes		1 - Adult Neb Mask	
40mm-110mm OPA (8)		2 - Monitor Paper		1 - Nebulizer	
12Fr-36Fr NPA (13)				1 - Pedi Neb Mask	
2,2.5,3,4,5 King Airways		<b>Compartment 5</b>		1 - Pedi NRB	
2.0-9.0 ET Tubes (15)		4 - Infection Control Kit		1 - Pedi NC	
1 - 6Fr Flexitip Stylet		5 - Isolation Gowns		1 - Medium CPAP	
1 - 10Fr Slick Stylet		5 - N95 Mask		1 - Large CPAP	
1 - 14Fr Slick Stylet		5 - Masks with Shield		6 - Albuterol	
5 - Lubrication Packets		2 - Safety Goggles		3 - Atrovent	
1 - Adult Tube Holder		2 - Safety Glasses		IV Tray	
1 - Pedi Tube Holder		1 - OB Kit		6 - Flushes	
2 - Suction Tubing		10 - Red Bio Bags		4 - Extension Sets	
2 - Yankauer		1 - Bedpan		4 - IV Start Kits	
6Fr-18Fr Suction Cath		1 - Urinal		4 - 14ga IV Cath	
2 - Meconium Aspirator				4 - 16ga IV Cath	
2 - 1200ml Suction Cans		<b>Compartment 6</b>		4 - 18ga IV Cath	
		6 - Flat Sheets		4 - 20ga IV Cath	
<b>Compartment 2</b>		6 - Pillow Cases		4 - 22ga IV Cath	
1 - Adult BVM		6 - Chucks		4 - 24ga IV Cath	
1 - Child BVM		6 - Blankets		2 - 1ml Syringes	
1 - Pedi BVM		10 - Towels		4 - 3ml Syringes	
		10 - Wash Cloths		4 - 5ml Syringes	
<b>Compartment 3</b>				2 - 10ml Syringes	
4 - Multi Trauma Dress		<b>Compartment 7</b>		5 - 18ga Hypo Needle	
4 - Burn Sheets		5 - Emesis Bags		5 - 19ga Filter Needle	
20 - 4x4 Gauze		5 - Emesis Basins		10 - Lancets	
20 - 2x2 Gauze		5 Piece Auto BP Cuff		20 - Alcohol Preps	
6 - Petroleum Gauze				20 - 2x2 Gauze	
4 - Triange Bandages		<b>Compartment 8</b>		1 - IV Tape	
8 - Abd/Combo Pads		X-Small Gloves			
4 - 6" Rolled Gauze		Small Gloves		<b>Compartment 9/10</b>	
4 - 4" Rolled Gauze		Medium Gloves		Triage Tags	
4 - 2" Rolled Gauze		Large Gloves		Trash Bags	
Assorted Tapes		X-Large Gloves		Sani-Cloth Wipes	
1 - Trauma Sheers					
4 - Hot Packs		Stretcher Oxygen Tank		Narcotic Box #:	
4 - Cold Packs		Stret. Oxygen Level:		Narcotic Box Tag #:	

Current Mileage: \_\_\_\_\_

Service Mileage Date: \_\_\_\_\_

Service Mileage: \_\_\_\_\_

Truck 9  
Daily Check-Off

Date \_\_\_\_\_

Crew \_\_\_\_\_

Oxygen (Main) \_\_\_\_\_

Oxygen (Stretcher) \_\_\_\_\_

Fuel Level \_\_\_\_\_

Mileage \_\_\_\_\_

BLS

Compartment 1A	Compartment 3 Bottom	Compartment 5	Female Station	Compartment 7
Nasal Cannulas (3)	4x4 Gauze (20) Sterile	Emesis Bags (5)	Suction Tubing (1)	Top Seal Number
NRB (3)	2x2 Gauze (20) Sterile	Emesis Basins (5)	Suction Cath 8fr-18fr	
Nebulizer (3)	Petroleum Gauze (6)	Auto BP Set	Yankauer (1)	Side Seal Number
EtCO2 (Zoll) (2)	ABD/Combo Pads (8)	Compartment 9	Sterile Water (1)	
EtCO2 (Phillips) (2)	2" Roll Gauze (4)	X-Small Gloves	Monitor	Pediatric Jump Bag
Trach Mask (2)	4" Roll Gauze (4)	Small Gloves	3-Lead Cables	Top Seal Number
Mask (2)	6" Roll Gauze (4)	Medium Gloves	12-Lead Cables	
Compartment 1B	Chest Seal (2)	Large Gloves	BP Cuff Pedi	Left Side Seal Number
Pediatric NC (2)	Sterile Water (4)	XL Gloves	Small Adult BP Cuff	
Pediatric NRB (2)	Tape	Compartment 10	Regular BP Cuff	Middle Seal Number
Pediatric Mask (2)	Trauma Shears	Portable Suction	Large Adult BP Cuff	
Pedi EtCO2 (Zoll) (1)	Triangle Bandages (4)	IV Tray	Inline EtCO2	Right Side Seal Number
Pedi EtCO2 (Phillips) (1)	2x2 Bulk Gauze (1 pack)	Oxygen Jump Bag	Adult EtCO2	
Compartment 2	Compartment 4	Pediatric Jump Bag	Pedi EtCO2	Red Jump Bag
OPA 40-mm-110mm	Normal Saline 500ml (2)	Red Jump Bag	Electrodes	Top Seal Number
NPA 12fr - 36fr	Normal Saline 1000ml (4)	Rear Seat	Adult Defib Pads	
King 2	Pressure Bag (1)	D Oxygen Cylinders (2)	Pedi Defib Pads	Left Side Seal Number
King 2.5	10gtts Set (4)	Drivers Side Middle	Charging Cable	
King 3	60gtts Set (4)	Body Bag	IV Tray	Right Side Seal Number
King 4	Electrodes (2)	Drivers Side Rear	NS 10ml Flush (6)	
King 5	Monitor Paper (Zoll) (2)	Stair Chair	Ext Set (4)	Left Front Seal Number
Suction Catheter 6fr-18fr	Monitor Paper (Phillips) (2)	Passenger Side Rear	IV Start Kit (4)	
Suction Tubing (2)	Compartment 5	Long Boards (2)	14ga IV Cath (4)	Right Front Seal Number
Yankauer (2)	Urinal (2)	KED	16ga IV Cath (4)	
Suction Canister (2)	Bedpan (1)	Pedi Immobilizer	18ga IV Cath (4)	Rear Seal Number
Compartment 3 Top	Compartment 6	Adult Traction Splint	20ga IV Cath (4)	
Trauma Dressing (4)	Linen	Pedi Traction Splint	22ga IV Cath (4)	
Burn Sheets (4)	Compartment 7 Top	Passenger Side Middle	24ga IV Cath (4)	
Hot Packs (4)	Infection Control Kit (4)	Adult Headblocks (2)	1ml Syringe (2)	
Cold Packs (4)	Masks	Child Headblocks (2)	3ml Syringe (4)	
	Isolation Gowns (5)	Pedi Headblocks (2)	5ml Syringe (4)	
	Compartment 7 Bottom	Adult C-Collars	10ml Syringe (2)	
	Masks W/Shield (5)	Child C-Collars	18ga Hypo Needle (4)	
	Safety Goggles (2)		19ga Filter Needle (4)	
	Safety Glasses (2)		Lancets (10)	
	Red Biohazard Bags (10)		Alcohol Prep Pads (20)	
			2x2 Gauze (bulk)	
			Transpore Tape 1in (1)	



Truck 11  
Daily Check-Off

Date \_\_\_\_\_

Crew \_\_\_\_\_

Oxygen (Main) \_\_\_\_\_

Oxygen (Stretcher) \_\_\_\_\_

Fuel Level \_\_\_\_\_

Mileage \_\_\_\_\_

Compartment 1 A	Compartment 3 Bottom	Compartment 8	Portable Suction	Oxygen Bag
Nasal Cannulas (3)	4x4 Gauze (20) Sterile	Emesis Bags (5)	Suction Tubing (1)	Top Seal Number
NRB (3)	2x2 Gauze (20) Sterile	Emesis Basins (5)	Suction Cath 8fr-18fr	
Nebulizer (3)	Petroleum Gauze (6)	Auto BP Set	Yankauer (1)	Side Seal Number
EtCO2 (Zoll) (2)	ABD/Combo Pads (8)	Compartment 9	Sterile Water (1)	
EtCO2 (Phillips) (2)	2" Roll Gauze (4)	X-Small Gloves	Monitor	Pediatric Jump Bag
Trach Mask (2)	4" Roll Gauze (4)	Small Gloves	3-Lead Cables	Top Seal Number
Mask (2)	6" Roll Gauze (4)	Medium Gloves	12-Lead Cables	
Compartment 1 B	Chest Seal (2)	Large Gloves	BP Cuff Pedi	Left Side Seal Number
Pediatric NC (2)	Sterile Water (4)	XL Gloves	Small Adult BP Cuff	
Pediatric NRB (2)	Tape	Compartment 10	Regular BP Cuff	Middle Seal Number
Pediatric Mask (2)	Trauma Shears	Portable Suction	Large Adult BP Cuff	
Pedi EtCO2 (Zoll) (1)	Triangle Bandages (4)	IV Tray	Inline EtCO2	Right Side Seal Number
Pedi EtCO2 (Phillips) (1)	2x2 Bulk Gauze (1 pack)	Oxygen Jump Bag	Adult EtCO2	
Compartment 2	Compartment 4	Pediatric Jump Bag	Pedi EtCO2	Red Jump Bag
OPA 40-mm-110mm	Normal Saline 500ml (2)	Red Jump Bag	Electrodes	Top Seal Number
NPA 12fr - 36fr	Normal Saline 1000ml (4)	Benches	Adult Defib Pads	
King 2	Pressure Bag (1)	D Oxygen Cylinders (2)	Pedi Defib Pads	Left Side Seal Number
King 2.5	10gts Set (4)	Drivers Side Middle	Charging Cable	
King 3	60gts Set (4)	Body Bag	IV Tray	Right Side Seal Number
King 4	Electrodes (2)	Drivers Side Rear	NS 10ml Flush (6)	
King 5	Monitor Paper (Zoll) (2)	Stair Chair	Ext Set (4)	Left Front Seal Number
Suction Catheter 6fr-18fr	Monitor Paper (Phillips) (2)	Passenger Side Rear	IV Start Kit (4)	
Suction Tubing (2)	Compartment 5	Long Boards (2)	14ga IV Cath (4)	Right Front Seal Number
Yankauer (2)	Urinal (2)	KED	16ga IV Cath (4)	
Suction Canister (2)	Bedpan (1)	Pedi Immobilizer	18ga IV Cath (4)	Rear Seal Number
Compartment 3 Top	Compartment 6	Adult Traction Splint	20ga IV Cath (4)	
Trauma Dressing (4)	Linen	Pedi Traction Splint	22ga IV Cath (4)	
Burn Sheets (4)	Compartment 7 Top	Passenger Side Middle	24ga IV Cath (4)	
Hot Packs (4)	Infection Control Kit (4)	Adult Headblocks (2)	1ml Syringe (2)	
Cold Packs (4)	Masks	Child Headblocks (2)	3ml Syringe (4)	
	Isolation Gowns (5)	Pedi Headblocks (2)	5ml Syringe (4)	
	Compartment 7 Bottom	Adult C-Collars	10ml Syringe (2)	
	Masks W/Shield (5)	Child C-Collars	18ga Hypo Needle (4)	
	Safety Goggles (2)		19ga Filter Needle (4)	
	Safety Glasses (2)		Lancets (10)	
	Red Biohazard Bags (10)		Alcohol Prep Pads (20)	
			2x2 Gauze (bulk)	
			Transpore Tape 1in (1)	

Truck 11  
Daily Check-Off

Date \_\_\_\_\_

Crew \_\_\_\_\_

Oxygen (Main) \_\_\_\_\_

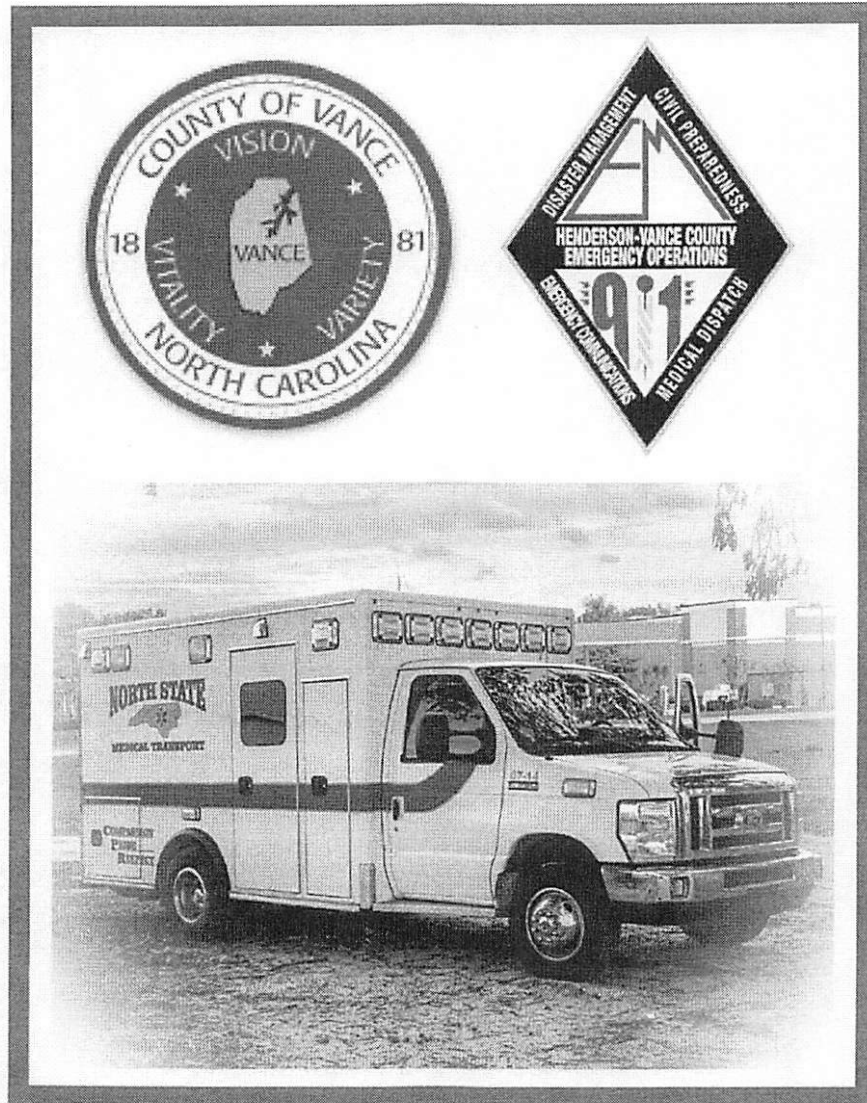
Oxygen (Stretcher) \_\_\_\_\_

Fuel Level \_\_\_\_\_

Mileage \_\_\_\_\_

Compartment 1 A	Compartment 3 Bottom	Compartment 6	Portable Suction	Oxygen Bag
Nasal Cannulas (3)	4x4 Gauze (20) Sterile	Emesis Bags (5)	Suction Tubing (1)	Top Seal Number
NRB (3)	2x2 Gauze (20) Sterile	Emesis Basins (5)	Suction Cath 8fr-18fr	
Nebulizer (3)	Petroleum Gauze (6)	Auto BP Set	Yankauer (1)	Side Seal Number
EtCO2 (Zoll) (2)	ABD/Combo Pads (8)	Compartment 9	Sterile Water (1)	
EtCO2 (Philips) (2)	2" Roll Gauze (4)	X-Small Gloves	Monitor	Pediatric Jump Bag
Trach Mask (2)	4" Roll Gauze (4)	Small Gloves	3-Lead Cables	Top Seal Number
Mask (2)	6" Roll Gauze (4)	Medium Gloves	12-Lead Cables	
Compartment 1 B	Chest Seal (2)	Large Gloves	BP Cuff Pedi	Left Side Seal Number
Pediatric NC (2)	Sterile Water (4)	XL Gloves	Small Adult BP Cuff	
Pediatric NRB (2)	Tape	Compartment 10	Regular BP Cuff	Middle Seal Number
Pediatric Mask (2)	Trauma Shears	Portable Suction	Large Adult BP Cuff	
Pedi EtCO2 (Zoll) (1)	Triangle Bandages (4)	IV Tray	Inline EtCO2	Right Side Seal Number
Pedi EtCO2 (Philips) (1)	2x2 Bulk Gauze (1 pack)	Oxygen Jump Bag	Adult EtCO2	
Compartment 2	Compartment 4	Pediatric Jump Bag	Pedi EtCO2	Red Jump Bag
OPA 40-mm-110mm	Normal Saline 500ml (2)	Red Jump Bag	Electrodes	Top Seal Number
NPA 12fr - 36fr	Normal Saline 1000ml (4)	Bench Seat	Adult Defib Pads	
King 2	Pressure Bag (1)	D Oxygen Cylinders (2)	Pedi Defib Pads	Left Side Seal Number
King 2.5	10gts Set (4)	Drivers Side Middle	Charging Cable	
King 3	60gts Set (4)	Body Bag	IV Tray	Right Side Seal Number
King 4	Electrodes (2)	Drivers Side Rear	NS 10ml Flush (6)	
King 5	Monitor Paper (Zoll) (2)	Stair Chair	Ext Set (4)	Left Front Seal Number
Suction Catheter 6fr-18fr	Monitor Paper (Philips) (2)	Passenger Side Rear	IV Start Kit (4)	
Suction Tubing (2)	Compartment 5	Long Boards (2)	14ga IV Cath (4)	Right Front Seal Number
Yankauer (2)	Urinal (2)	KED	16ga IV Cath (4)	
Suction Canister (2)	Bedpan (1)	Pedi Immobilizer	18ga IV Cath (4)	Rear Seal Number
Compartment 3 Top	Compartment 6	Adult Traction Splint	20ga IV Cath (4)	
Trauma Dressing (4)	Linen	Pedi Traction Splint	22ga IV Cath (4)	
Burn Sheets (4)	Compartment 7 Top	Passenger Side Middle	24ga IV Cath (4)	
Hot Packs (4)	Infection Control Kit (4)	Adult Headblocks (2)	1ml Syringe (2)	
Cold Packs (4)	Masks	Child Headblocks (2)	3ml Syringe (4)	
	Isolation Gowns (5)	Pedi Headblocks (2)	5ml Syringe (4)	
	Compartment 7 Bottom	Adult C-Collars	10ml Syringe (2)	
	Masks W/Shield (5)	Child C-Collars	18ga Hypo Needle (4)	
	Safety Goggles (2)		19ga Filter Needle (4)	
	Safety Glasses (2)		Lancets (10)	
	Red Biohazard Bags (10)		Alcohol Prep Pads (20)	
			2x2 Gauze (bulk)	

# Vance County



Non-Emergent Ambulance Franchise Application  
**North State Medical Transport**

## **Section A) Name & Address**

NSMT, Inc. a North Carolina corporation d/b/a North State Medical Transport (hereinafter referred to as "NSMT") is headquartered at 1240 Corporation Parkway, Raleigh, NC 27610. NSMT is a wholly owned subsidiary of North State Investment Group, LLC, a North Carolina limited liability company (hereinafter referred to as "NSIG"). NSIG has been majority-owned by Stuart D. Coward IV since its inception in 2006.

## **Section B) Trade Name & Articles of Incorporation**

NSMT currently conducts business under the assumed business name: "North State Medical Transport." Please find attached to this application a copy of the filed Assumed Business Name Certificate.

Furthermore, please find attached to this application copies of the filed Articles of Organization for NSIG and the filed Articles of Incorporation for NSMT.

## **Section C) Resume of Training & Experience**

NSMT began service in 2006 and was initially franchised solely in Wake County. Upon being awarded a franchise in Franklin County, NSMT began providing ALS services. Today, NSMT is franchised in 13 counties, including Wake, Franklin, Durham, Orange, Person, Sampson, Johnston, Wilson, Beaufort, Lenoir, Wayne, Craven, and Nash.

While carrying out approximately 16,000 transports per year, NSMT continues to stress Compassion, Pride, and Respect to all employees, while keeping patient care its' number one priority. In recent years, NSMT has focused primarily on the needs of hospital systems, but nursing homes and private citizens remain a sector of NSMT's service market.

Our BLS units are capable of handling hospital discharges from both the inpatient floors, as well as the Emergency Department, to various rehab facilities or residential locations that a patient requires transportation to. On top of this, NSMT routinely handles BLS-level transports for medical appointments, transports to and from skilled nursing facilities, as well as transports associated with hospice services.

In addition to our BLS units, NSMT maintains several 24-hour ALS level units staffed with a Paramedic and EMT. Our ALS level units are capable of treating patients requiring ventilator support, IV medications, hemodynamic monitoring and cardiac telemetry. These units typically transfer patients between hospitals due to requiring higher levels of care, as well as transports to long-term care facilities.

Please see attachment for full roster.

## Section D) EMS Agency License and Vehicle List with OEMS Inspection

Truck #	VIN	Plate	Year	Make	Model	OEMS Exp.	OEMS Sticker #
715	1FDWE3FS5FDA29187	DHW3306	2015	Ford	E-350	10/31/2025	NC004620
416	1FDWE3FS0GDC27578	ECT-1722	2016	Ford	E-350	5/31/2024	NC 000583
417	1FDYR2CM5HKA62962	EKZ-1134	2017	Ford	Transit 250	5/31/2025	NC004567
517	1FDYR2CM5HKA57311	EKZ-1135	2017	Ford	Transit 250	5/31/2025	NC003192
1117	1FDYR2CM0HKA84769	FCB-3777	2017	Ford	Transit 250	10/31/2025	NC 003758
218	1FDYR2CM3HKB16078	FCV-4718	2017	Ford	Transit 250	2/28/2024	NC003822
718	1FDXE4FS5JDC28291	FFS-3457	2018	Ford	E-450	9/30/2024	NC004953
818	1FDYR2CM7JKA57977	FHZ-9968	2018	Ford	Transit 250	9/30/2024	NC005816
319	1FDWE3FS0JDC23229	HEC-7598	2018	Ford	E-350	4/30/2025	NC004763
619	1FDYR2CM8KKA63093	HCM-2498	2019	Ford	Transit 250	7/31/2025	NC004581
719	1FDYR2CCM2KKA63087	HCM-2497	2019	Ford	Transit 250	7/31/2025	NC004580
1019	1FDWE3FS4KDC41430	HDA-1946	2019	Ford	E-350	10/31/2025	NC004627
1119	1FDWE3FS9KDC43139	JS-9590	2019	Ford	E-350	12/31/2025	NC004641
1221	1GB3GRC72M1266047	NR-8909	2021	Chevrolet	G3500	4/30/2025	NC005371
321	1FDXE4FN4MDC20889	RBV-6458	2020	Ford	E-450	4/30/2025	NC005739
422	1FDBW2XG8MKA39656	AAA-5428	2021	Ford	Transit 350	5/31/2024	NC005631
522	1FDBW2XG6MKA39655	AAA-5429	2021	Ford	Transit 350	5/31/2024	NC005630

Please contact NCOEMS for a full inspection report of these vehicles.

## **Section E) Physical Location to Operate**

NSMT has a physical office location at 568 Ruin Creek Road, in the J.W. Jenkins Medical Service Building; The same building where Duke Life Flight has their base of operations for Maria Parham. NSMT worked closely with Emilee Johnson at Maria Parham to coordinate the final leasing of the office space. She can be contacted at [Emilee.Johnson@lpnt.net](mailto:Emilee.Johnson@lpnt.net) or 252-436-1738 for confirmation, if necessary.

## **Section F) Financial Statement**

Attached to this application is the most recent financial statement, for NSMT (completed June 2023).

## **Section G) Ability & Capability for 24/7 coverage**

NSMT has been in operation for 19 years, and our ability to provide high-quality care, at every hour, is our number one priority. With approximately 80 qualified personnel on staff, all being NC-certified EMTs and Paramedics, and 16 well-maintained ambulance units, we can facilitate the needs of our service area.

All of NSMT's staff are experienced in both ambulance operations and patient care, so we can deliver a superior patient care experience. We offer in-house continuing education, as well as secondary online resources, to provide constant improvement in our skills and services, to be able to deliver the level of care deserved by the community of Vance County.

## **Section H) IRS Tax Exempt Status**

NSMT is not a tax-exempt agency, therefore a tax-exempt status letter will not be attached to this application.

## **Section I) Federal Employer Identification Number (FEIN)**

NSMT's Federal Employer Identification Number is 223901717. See attached W9.



## **Section J) Supplemental & Required Attachments**

Please find attached to this application the following documents:

1. Assumed Business Name Certificate for North State Medical Transport
2. Articles of Organization for NSIG
3. Articles of Incorporation for NSMT
4. Financial Statements for NSMT
5. EMS Agency License
6. NSMT W9
7. Certificate for Liability Insurance for NSIG/NSMT
8. FCC Radio Station Authorization
9. Full NSMT Roster

FILED FOR RECORD  
VANCE COUNTY, N.C.  
CYNTHIA S. ABBOTT  
REGISTER OF DEEDS

RECORDED Apr 24 2008  
AT 11:03 am

INSTRUMENT # 62043

**CERTIFICATE OF ASSUMED NAME FOR A LIMITED LIABILITY COMPANY (LLC)**

The undersigned LLC, proposing to engage in business in VANCE County, North Carolina, under an assumed name other than its LLC name, hereby certifies that:

1. The name under which the business is to be conducted is:  
North State Medical Transport  
(Insert assumed name)

2. The name and address of the owner(s) of such business is (are):  
Stuart Coward 8729 NC 395 Zebulon NC 27597  
Richard Hardin 1982 Robersonville Rd Washington NC 27889  
Bryan Perry 768 Stallings Rd Zebulon NC 27597  
North State Investment Group LLC 7419 Knightdale Blvd Knightdale NC 27545  
(Insert name and address of LLC)

In witness whereof, this certificate is signed in the name of the LLC by its manager(s), this 23 day of April, 20 08.

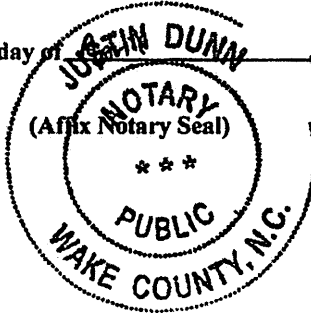
By: [Signature] SEAL  
Manager  
By: [Signature] SEAL  
Manager  
By: [Signature] SEAL  
Manager

State of NC  
County of Wake

I, Justin Dunn, a Notary Public, do hereby certify that Stuart Coward, Richard Hardin and Bryan Perry, manager(s) of North State Investment Group, LLC, LLC, personally appeared before me this 23<sup>rd</sup> day of April, 20 08, and that they signed the foregoing certificate on behalf of the LLC.

Witness my hand and official seal, this the 23 day of April, 20 08.

Notary Public  
My Commission Expires: April 29, 2018





# NORTH CAROLINA

## Department of The Secretary of State

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To all whom these presents shall come, Greetings:

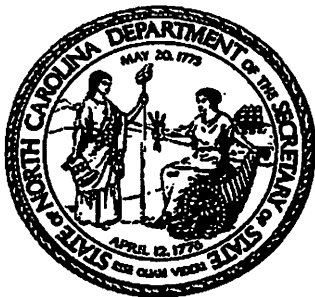
I, **ELAINE F. MARSHALL**, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

### ARTICLES OF ORGANIZATION

OF

### NORTH STATE INVESTMENT GROUP, LLC

the original of which was filed in this office on the 14th day of June, 2004.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 14th day of June, 2004

*Elaine F. Marshall*

Secretary of State

State of North Carolina  
Department of the Secretary of State

Limited Liability Company  
ARTICLES OF ORGANIZATION

Pursuant to §57C-2-20 of the General Statutes of North Carolina, the undersigned does hereby submit these Articles of Organization for the purpose of forming a limited liability company.

1. The name of the limited liability company is: North State Investment Group, LLC
2. If the limited liability company is to dissolve by a specific date, the latest date on which the limited liability company is to dissolve: *(If no date for dissolution is specified, there shall be no limit on the duration of the limited liability company.)* \_\_\_\_\_
3. The name and address of each person executing these articles of organization is as follows: *(State whether each person is executing these articles of organization in the capacity of a member, organizer or both).*  
LegalZoom.com, Inc., as Organizer  
7083 Hollywood Blvd., Suite 180  
Los Angeles, CA 90028
4. The street address and county of the initial registered office of the limited liability company is:  
Number and Street 213 Chamberlain Drive  
City, State, Zip Code Clayton, NC 27520 County Johnston
5. The mailing address, *if different from the street address*, of the initial registered office is:  
\_\_\_\_\_
6. The name of the initial registered agent is: Michael Jason Wells
7. Principal office information: *(Select either a or b.)*
  - a.  The limited liability company has a principal office.  
The street address and county of the principal office of the limited liability company is:  
Number and Street 213 Chamberlain Drive  
City, State, Zip Code Clayton, NC 27520 County Johnston  
The mailing address, *if different from the street address*, of the principal office of the corporation is:  
\_\_\_\_\_
  - b.  The limited liability company does not have a principal office.

8. Check one of the following:

(i) *Member-managed LLC*: all members by virtue of their status as members shall be managers of this limited liability company.

(ii) *Manager-managed LLC*: except as provided by N.C.G.S. Section 57C-3-20(a), the members of this limited liability company shall not be managers by virtue of their status as members.

9. Any other provisions which the limited liability company elects to include are attached.

10. These articles will be effective upon filing, unless a date and/or time is specified:

This is the 11 day of June, 20 04.

  
Signature

Patricia Marin, Assistant Secretary, LegalZoom.com, Inc., Organizer

Type or Print Name and Title

**NOTES:**

1. Filing fee is \$125. This document must be filed with the Secretary of State.

CORPORATIONS DIVISION  
(Revised January 2002)

P.O. Box 29622

RALEIGH, NC 27626-0622  
(Form L-01)

SOSID: 859394  
 Date Filed: 8/2/2006 12:50:00 PM  
 Elaine F. Marshall  
 North Carolina Secretary of State  
 C200621200362

State of North Carolina  
 Department of the Secretary of State

ARTICLES OF INCORPORATION

Pursuant to §55-2-02 of the General Statutes of North Carolina, the undersigned does hereby submit these Articles of Incorporation for the purpose of forming a business corporation.

1. The name of the corporation is: NSMT, INC.

2. The number of shares the corporation is authorized to issue is: 100,000

3. These shares shall be: *(check either a or b)*

- a.  all of one class, designated as common stock; or  
 b.  divided into classes or series within a class as provided in the attached schedule, with the information required by N.C.G.S. Section 55-6-01.

4. The street address and county of the initial registered office of the corporation is:

Number and Street 531 S. BICKETT BOULEVARD  
 City LOUISBURG State NC Zip Code 27549 County FRANKLIN

5. The mailing address, *if different from the street address*, of the initial registered office is:

Number and Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_

6. The name of the initial registered agent is: SCOTT H. MAY

7. Principal office information: *(must select either a or b.)*

- a.  The corporation has a principal office.

The street address and county of the principal office of the corporation is:

Number and Street 7419 US HWY 64 EAST, SUITE 110  
 City KNIGHTDALE State NC Zip Code 27545 County WAKE

The mailing address, *if different from the street address*, of the principal office of the corporation is:

Number and Street P.O. BOX 900  
 City LOUISBURG State NC Zip Code 27549 County FRANKLIN

- b.  The corporation does not have a principal office.

8. Any other provisions, which the corporation elects to include, are attached.

9. The name and address of each incorporator is as follows:

SCOTT H. MAY

531 S. BICKETT BOULEVARD

LOUISBURG, N.C. 27549

10. These articles will be effective upon filing, unless a date and/or time is specified:

This the 26 day of JULY 200 6

  
Signature

SCOTT H. MAY-INCORPORATOR

Type or Print Name and Title

NOTES:

1. Filing fee is \$125. This document must be filed with the Secretary of State.

CORPORATIONS DIVISION  
(Revised January, 2002)

P. O. BOX 29622

RALEIGH, NC 27626-0622  
(Form B-01)

***May & Place, PA***  
**CERTIFIED PUBLIC ACCOUNTANTS**

P.O. Box 900  
Louisburg, NC 27549  
Bus: 919-496-3041  
Fax: 919-496-6342

Scott H. May, CPA  
Dale R. Place, CPA, CFE

**Independent Accountant's Compilation Report**

To the Management  
NSMT, Inc. (North State Medical Transport, Inc.)  
Raleigh, North Carolina 27610

Management is responsible for the accompanying financial statements of NSMT, Inc. (a Corporation), which comprise the balance sheet as of June 30, 2023, and the related statement of income and retained earnings for the six months then ended in accordance with accounting principles generally accepted in the United States of America. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. We did not audit or review the financial statements nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on these financial statements.

Management has elected to omit substantially all of the disclosures and the statement of cash flows required by accounting principles generally accepted in the United States of America. If the omitted disclosures and the statement of cash flows were included in the financial statements, they might influence the user's conclusions about the Company's financial position, results of operations, and cash flows. Accordingly, the financial statements are not designed for those who are not informed about such matters.

*May & Place, PA*  
Louisburg, North Carolina  
August 16, 2023



**NSMT, Inc.**  
**(North State Medical Transport, Inc.)**  
**BALANCE SHEET**  
**June 30, 2023**

**ASSETS**

	<b>2023</b>
<b>CURRENT ASSETS</b>	
Cash	\$ 162 157
Accounts Receivable	832 572
Deferred Taxes	-
<b>TOTAL CURRENT ASSETS</b>	<b>994 729</b>
<b>PROPERTY AND EQUIPMENT</b>	
Furniture and Fixtures	178 695
Vehicles and Equipment	3 734 898
	3 913 593
Less Accumulated Depreciation	2 941 824
<b>TOTAL PROPERTY AND EQUIPMENT</b>	<b>971 769</b>
<b>TOTAL ASSETS</b>	<b>\$ 1 966 498</b>

**LIABILITIES AND STOCKHOLDERS' EQUITY**

<b>CURRENT LIABILITIES</b>	
Due to North State Investment Group, LLC	\$ 553 122
Deferred Taxes	35 584
Current Portion of Notes Payable	182 857
<b>TOTAL CURRENT LIABILITIES</b>	<b>771 563</b>
<b>LONG TERM LIABILITIES</b>	
Notes Payable, Net of Current Portion	985 173
<b>TOTAL LIABILITIES</b>	<b>1 756 736</b>
<b>STOCKHOLDERS' EQUITY</b>	
Common Stock, No Par Value, 100,000 Shares Authorized, 25,000 Issued and Outstanding	25 000
Retained Earnings	184 762
<b>TOTAL STOCKHOLDERS' EQUITY</b>	<b>209 762</b>
<b>TOTAL LIABILITIES AND STOCKHOLDERS' EQUITY</b>	<b>\$ 1 966 498</b>

See independent accountant's compilation report.

# State of North Carolina

Office of Emergency  
Medical Services



Medical Care  
Commission

Department of Health and Human Services  
Division of Health Service Regulation

*Having met the requirements of North Carolina General Statute 131E-155.1 and the rules of the  
North Carolina Medical Care Commission for the licensing of EMS Agencies.*

## ***North State Medical Transport***

*is hereby issued an EMS Agency License*

*This License, Number 1608, expires the last day of November, 2028*

Division of Health Service Regulation



Office of Emergency Medical Services



Whereas **North State Medical Transport - Wake** has made a commitment to function as an integral part of the North Carolina EMS System to provide high quality emergency medical specialty care transport to the patients in its service area and has adequately demonstrated that it meets all criteria and standards to provide such care as defined by the North Carolina Medical Care Commission, it hereby receives approval as a

**NORTH CAROLINA EMERGENCY MEDICAL SPECIALTY CARE TRANSPORT PROGRAM.**

Division of Health Service Regulation

Office of Emergency Medical Services

## Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
 See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <div style="font-family: cursive; font-size: 1.2em;">North State Investment Group, LLC</div>	
2 Business name/disregarded entity name, if different from above <div style="font-family: cursive; font-size: 1.2em;">North State Medical Transport, Inc.</div>	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ <b>P</b> <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small>  <input type="checkbox"/> Other (see instructions) ▶	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. <div style="font-family: cursive; font-size: 1.2em;">1240 Corporation Pkwy</div>	Requester's name and address (optional) <div style="font-family: cursive; font-size: 1.2em;">Vance County                  122 Young St Suite B                  Henderson, NC 27536</div>
6 City, state, and ZIP code <div style="font-family: cursive; font-size: 1.2em;">Raleigh NC 27610</div>	
7 List account number(s) here (optional)	

### Part I Taxpayer Identification Number (TIN)

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

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

<b>Social security number</b>											
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table>											
or											
<b>Employer identification number</b>											
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">2</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">2</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">-</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">3</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">9</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">0</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;"> </td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">7</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;"> </td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">7</td> </tr> </table>	2	2	-	3	9	0		7		7	
2	2	-	3	9	0		7		7		

### Part II Certification

Under penalties of perjury, I certify that:

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

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

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ <b>2/1/2024</b>
------------------	----------------------------	------------------------

### General Instructions

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

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

### Purpose of Form

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

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/11/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Triangle Insurance & Associates, LLC 222 N Bickett Blvd Louisburg NC 27549	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): 919-496-2239      FAX (A/C, No): 919-496-3437 E-MAIL ADDRESS:	
	<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A : MARKEL INSURANCE COMPANY      NAIC # 38970 INSURER B : Markel American Insurance Co INSURER C : INSURANCE COMPANY OF THE WEST      27847 INSURER D : Selective Insurance Company of      12572 INSURER E : INSURER F :	<b>INSURED</b> NORTSTA-01 North State Investment Group LLC DBA North State Medical Transport 1240 Corporation Pkwy Raleigh NC 27610

**COVERAGES**

CERTIFICATE NUMBER: 781923260

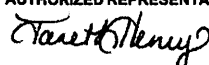
REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	MTG80001047-02	8/25/2023	8/25/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY	Y	Y	MTA80001047-02	8/25/2023	8/25/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			MTU1008-02	8/25/2023	8/25/2024	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
C	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	WNC 5042946 04	8/25/2023	8/25/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D A	Cyber Liability Abuse & Molestation			S 2584698 MTG80001047-02	6/21/2023 8/25/2023	8/25/2024 8/25/2024	Limit Each Person 1,000,000 Aggregate 500,000 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Durham Performing Arts, LLC & City of Durham are additional insureds per a written contract with the insured.

**CERTIFICATE HOLDER****CANCELLATION**

Durham Performing Arts, LLC & City of Durham 123 Vivian Street Durham NC 27701	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
--	---

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**Federal Communications Commission**  
Public Safety and Homeland Security Bureau

**RADIO STATION AUTHORIZATION**

LICENSEE: NORTH STATE MEDICAL TRANSPORT

ATTN: RICHARD HARDIN  
NORTH STATE MEDICAL TRANSPORT  
1240 CORPORATION PKWY  
RALEIGH, NC 27610-1348

<b>Call Sign</b> WQAX350	<b>File Number</b> 0006323146
<b>Radio Service</b> PW - Public Safety Pool, Conventional	
<b>Regulatory Status</b> PMRS	
<b>Frequency Coordination Number</b>	

FCC Registration Number (FRN): 0011225604

<b>Grant Date</b> 07-07-2014	<b>Effective Date</b> 07-07-2014	<b>Expiration Date</b> 08-23-2024	<b>Print Date</b> 07-08-2014
---------------------------------	-------------------------------------	--------------------------------------	---------------------------------

**STATION TECHNICAL SPECIFICATIONS**

**Fixed Location Address or Mobile Area of Operation**

Loc. 1 Area of Operation  
Countywide: WAKE, NC

**Antennas**

Loc. No.	Ant. No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000155.34000000	MO	10		11K2F3E	100.000	100.000			08-23-2005
1	1	000155.28000000	MO	10		11K2F3E	100.000	100.000			08-23-2005
1	1	000156.07500000	MO	10		11K2F3E	100.000	100.000			08-23-2005

**Control Points**

Control Pt. No. 3

Address: 1240 CORPORATION PKWY

City: RALEIGH County: WAKE State: NC Telephone Number: (919)815-2745

**Waivers/Conditions:**

NONE

**Conditions:**

Pursuant to §309(h) of the Communications Act of 1934, as amended, 47 U.S.C. §309(h), this license is subject to the following conditions: This license shall not vest in the licensee any right to operate the station nor any right in the use of the frequencies designated in the license beyond the term thereof nor in any other manner than authorized herein. Neither the license nor the right granted thereunder shall be assigned or otherwise transferred in violation of the Communications Act of 1934, as amended. See 47 U.S.C. § 310(d). This license is subject in terms to the right of use or control conferred by §706 of the Communications Act of 1934, as amended. See 47 U.S.C. §606.

Employee Name	Position
ANDERSON, ANNA	Basic
Aragona, Amelio	Basic
Askew, Caleb	AEMT
Avila, Ricardo	AEMT
Bailey, Michael	Paramedic
Bao, Emma	Basic
Barlet, Troy A	Paramedic
Barnes, Kane	Paramedic
Baudoux, Nathan	Basic
Beaupre, Emily	Basic
Bellamy, Tamika	Dispatcher
Borter, Allison	Basic
BROWN, GEOFFREY A	Paramedic
Bryant, Jacob	Basic
Buchanan, Susan	Paramedic
Burnett, Makena	Basic
Buss, Sidney	Basic
Carpenter, Casey	Paramedic
Castle, Kendall	Basic
CHIARAMONTE, GARY	Basic
Cina, Amanda	Basic
Collins, Cassandra	Dispatcher
Cook, Steven M	Paramedic
Cruz, Araceli	Basic
Daniels, Brittney	Paramedic
DeVaughn, Prophet	Basic
Dewell, Chelsea	Paramedic
Douhadji, Ashley	Basic
Duncan, Alan	Paramedic
Earp, Nathan	Paramedic
Elks, Dawson	Basic
Enoch, Nadia	Basic
Figuroa, Micah	Basic
Garner, Vincent	Dispatcher
Gomes, Anjili	Basic
Greene, Savannah	Basic
Griffith, Sean	Basic
Halpin, Tessa	Basic
Harper, Amanda	Basic
Harris, Autumn	Paramedic
Heffner, John	Paramedic
Hefner, Michael	Basic
Hicks, Nathan	Basic

HOLLOMAN, CARSON B	Paramedic
HOWARD, BRANDON W	Basic
Hoyle, Maranda	AEMT
Huynh, Khang	Basic
Jackson, Tyler	Paramedic
Johnson, Cory	Basic
Johnson, Mikayla	Paramedic
JONES, JORDAN T	Basic
KEITH, TRISTAN M	Basic
Lauer, Kimberly	Paramedic
Lewis, Brookelyn	Basic
Long, Jeffrey G	Basic
Macemore, Tyler	IT
Malet, Andrew	Basic
Martin, Trevor	Basic
MASSEY, PATRICK	Basic
McCALL, JAMES M	Basic
McElhennon, Ciaran	Paramedic
MEIER, BENJAMEN	Paramedic
MOSELEY, DOUG	Fleet
Nelson, Ashley	Paramedic
NEWTON, PAUL J	Paramedic
OWENS, JERMAIN	Paramedic
Paryz, Joshua	Basic
Pathak, Kabir	Basic
Pennell, Benjamin	Paramedic
Pinion, Eva	Basic
Price, Christina	Paramedic
Pritchard, Scott	Paramedic
RAMIREZ, RUBEN	Paramedic
Reid, Mack	Paramedic
Rinehart, Kasey	Basic
Robertson, Garrett	Basic
SANDERLIN, COURTNEY	Paramedic
SANDERLIN, HAYDEN L	Paramedic
Scott, Brandon	Basic
Smith, Evan	Basic
SMITH, EVELYN	Basic
Speagle, Dawson	Basic
Stallings, Cameron	Paramedic
Stone, Elyza	Basic
Tejada, Nicole	Basic
Thomas, Shelby	Basic
Tim, Benjamin	Basic



VANDERWEIDE, KATHRYN	Basic
VanHart, Jonah	Paramedic
VanLue, Breanna	Dispatcher
West, Alyssa	Basic
White, Garrett	Basic
White, Stone	Admin
WILCOX, WHITNEY P	Paramedic
Williams, Greg	Paramedic
WILLIAMS, NATALIE J	Paramedic
Williams, Roy	Paramedic
Williford, Cameron M	Dispatcher
WOODWARD, NATHAN	Paramedic
Young, Wendy	Paramedic
ZANI, ANDREA	Dispatcher
Ziegler, Krystal	Paramedic

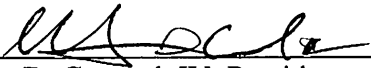
ASSUMED BUSINESS NAME CERTIFICATE  
(N.C. Gen. Stat. § 66-71.5)

This certificate is executed pursuant to the requirements of the General Statutes of North Carolina:

1. The assumed business name is North State Medical Transport.
2. The name of the entity engaging in business under the assumed business name is NSMT, Inc. Its Secretary of State ID Number is 0859394.
3. The nature/type of the business is: medical transportation.
4. The street and mailing address of the principal place of business is:  
7419 US Hwy 64 East, Suite 110  
Knightdale, NC 27545
5. The assumed business name will be used to engage in business in all 100 North Carolina counties.

This the 13th day of January, 2021.

NSMT, INC.

By:   
Stuart D. Coward, IV, President

Prepared by and return to:

C. Joseph DelPapa  
For the firm of  
Ward and Smith, P.A.  
751 Corporate Center Drive  
Suite 300 (27607)  
Post Office Box 33009  
Raleigh, NC 27636-3009  
Telephone: (919) 277-9100  
Facsimile: (919) 277-9177

**§ 110.15 DEFINITIONS.**

**ADVANCED LIFE SUPPORT (ALS).** Ambulance service that includes the necessary equipment and staff to render Advanced Life Support services (e.g. advanced airway procedures, defibrillation and medication administration).

**AMBULANCE.** Any privately or publicly owned motor vehicle intended to be used for, and is maintained or operated for transportation on the streets or highways of persons who are sick, injured, wounded or otherwise incapacitated or helpless.

**AMBULANCE PROVIDER.** An individual, firm, corporation or association who engages or professes to engage in the business or service of transporting patients in an ambulance.

**APPROVED.** Approved by the North Carolina State Medical Care Commission pursuant to the latter's rules and regulations promulgated under North Carolina G.S. §§ 131E-155 *et seq.*

**BASIC LIFE SUPPORT.** An ambulance service that includes the necessary equipment and staff to render basic services (e.g. control bleeding, delivery of babies and splinting fractures).

**COMMISSION.** The State Medical Care Commission.

**CONVALESCENT.** The transportation of sick or infirmed patients having a known, non-emergency medical condition, on a scheduled basis between facilities or between a residence and a facility.

**COUNTY.** The County of Vance.

**EMERGENCY MEDICAL SERVICES DIRECTOR.** An individual employed by Vance County to provide oversight and supervision for Emergency Medical Services within Vance County.

**EMERGENCY MEDICAL TECHNICIAN (AEMT, PARAMEDIC).** An individual who has completed a training program in emergency medical care at least equal to the National Standard Training Program of Emergency Medical Technicians as defined by the United States Department of Transportation and has been credentialed as an Emergency Medical Technician, Advanced Emergency Medical Technician or Paramedic by the State of North Carolina Office of Emergency Medical Services.

**FRANCHISE.** A permit issued by the county to any person for the operation of a ambulance service.

**FRANCHISEE.** Any person having been issued a franchise by the county for the operation of a commercial ambulance service.

**LICENSE.** Any driver's license or permit to operate a motor vehicle issued under or granted by the laws of the state of North Carolina.

**MEDICAL RESPONDER.** An individual who has completed a training program in Emergency Medical Care and First Aid approved by the N.C. Department of Health and Human Services and has been certified as a Medical Responder by the N.C. Department of Health and Human Services, Office of Emergency Medical Services.

**NON-EMERGENCY TRANSPORTATION SERVICES.** The operation of an ambulance for any purpose other than transporting emergency patients.

**OPERATOR.** A person in actual physical control of an ambulance which is in motion or has the engine running.

**OWNER.** Any individual, firm, partnership, association, corporation, company or group of individuals acting together for a common purpose or organizations of any kind, including any governmental agency other than the United States, who owns and operates an ambulance service.

**PATIENT.** An individual who is sick, injured, wounded or otherwise incapacitated or helpless such as that the need for some medical assistance might be anticipated while being transported to or from a medical facility.

**§ 110.16 FRANCHISE REQUIRED.**

- (A) Emergency Medical Services - Vance County Emergency Medical Services Department is the primary provider of emergency care and will be primarily responsible for all emergency transportation services provided in Vance County unless an entity is granted a franchise by Vance County as set forth herein and assistance is requested.
- (B) No person, either as an owner, agent, employee or otherwise, shall furnish, operate, conduct, maintain, advertise or otherwise be engaged in or profess to be engaged in the business of non-emergency, convalescent or emergency transportation of patients within the county unless the person holds a valid permit for each ambulance used in such business issued by the Medical Care Commission of the State Department of Health and Human Services, and has been granted a franchise by Vance County as set forth herein.
- (C) No person shall drive an ambulance, attend a patient in one or permit one to be operated when transporting a patient within the County of Vance unless he or she holds a current valid credential as a medical responder, EMT, AEMT or Paramedic issued by the North Carolina Department of Health and Human Services, Office of Emergency Medical Services.

**§ 110.17 REQUIRED PERSONNEL.**

- (A) Every ambulance when transporting a patient shall be occupied at a minimum by the following:
  - (a) At least one emergency medical technician who shall be responsible for the medical aspects of the mission prior to arrival at the medical facility, assuming no other individual of higher certification or license is available; and
  - (b) One medical responder who is responsible for the operation of the vehicle and rendering assistance to the emergency medical technician.
  - (c) An ambulance owned and operated by a licensed health care facility that is used solely to transport sick or infirm patients with known non-emergency medical

- conditions between facilities or between a residence and a facility for scheduled medical appointments is exempt from the requirements of this division (A).
- (B) The Medical Care Commission of NCDHHS may adopt rules setting forth exemptions to the requirements stated in division (A) above applicable to situations where exemptions are considered by the Commission to be in the public interest.

**§ 110.18 EXEMPTIONS.**

The following vehicles are exempt from the provisions of this subchapter:

- (A) Privately owned vehicles not regularly used in the business of transporting patients;
- (B) A vehicle rendering service as an ambulance in case of a major catastrophe or emergency, when the permitted ambulances based in the locality of the catastrophe or emergency are insufficient to render the services required;
- (C) Any ambulance based outside Vance County, except that an ambulance which receives a patient within Vance County for transportation to a location within Vance County shall comply with the provisions of this subchapter;
- (D) Ambulances owned and operated by an agency of the United States government;
- (E) Vehicles owned and operated by rescue squads chartered by the state as nonprofit corporations or associations which are not regularly used to transport sick, injured, wounded or otherwise incapacitated or helpless persons except as a part of rescue operations; and
- (F) Any ambulance service sponsored and/or under operation of the county.

**§ 110.19 APPLICATION FOR AMBULANCE FRANCHISE.**

Application for a franchise to operate ambulances in the county shall be made upon the forms as may be prepared or prescribed by the county and shall contain:

- (A) The name and address of the applicant and of the owner of the ambulance(s) along with the location and description where the ambulance(s) will be housed.
- (B) Copy of North Carolina articles of incorporation/organization, the trade or other fictitious names, if any, under which the applicant does business, along with a copy of the filed assumed name certificate.
- (C) A resume of the training and experience of the applicant in the transportation and care of patients, a roster of employees, position of each employee, and licenses and certifications of each employee;
- (D) A copy of State EMS Provider License, Permit and most recent State EMS annual inspection for each ambulance owned and operated by the applicant;
- (E) The location and description of the place from which it is intended to operate;
- (F) Financial statement of the applicant as the same pertains to the operations in the county;
- (G) A description of the applicant's capability to provide 24-hour coverage 7 days per week;
- (H) A copy of IRS tax exempt status letter (i.e. 501(c)(3), if any;
- (I) Federal Employer Identification Number (FEIN);
- (J) Any information the county shall deem reasonably necessary for a fair determination of the capability of the applicant to provide ambulance service in the county in accordance with the requirements of the state and the provisions of this section.

**§ 110.20 GRANTING OF FRANCHISE.**

- (A) The county may at any time designate specific service areas as franchise districts. Said districts may be established at the discretion of the county using criteria such as geographic size, road access, the location of existing medical transportation services, population and response time.
- (B) A franchise may be granted if the county finds that:
  - (1) The applicant meets the State of North Carolina standards and standards outlined in this ordinance.
  - (2) The proposed service will not adversely affect the quality or level of service already provided to the citizens of Vance County.
  - (3) A need exists for the proposed service in order to improve the level of ambulance services available to the residents of Vance County and that this is a reasonable and cost effective manner of meeting the need.
- (C) In granting a franchise, the county will comply with the requirements of N.C.G.S. 153A-46, which requires that a franchise be granted by ordinance, and that such ordinance shall not be adopted until it has been passed at two regular meetings of the Board of Commissioners.
- (D) If the application for a franchise is approved by the county, the county and the applicant will enter into a Franchise Agreement that may provide for further requirements of the applicant/franchisee, for a term not to exceed three years from the date of issuance, and may be renewed for additional three year terms.

**§ 110.21 TERM OF FRANCHISE.**

- (A) The county may issue a franchise under this subchapter to an owner of an ambulance service, to be valid for a term of three years unless otherwise determined by the county, provided that either party, as its option, may terminate the franchise upon 60 days' prior written notice to the other party.
- (B) For any violation under this subchapter, the franchisee may be issued a civil penalty by the county for the violation of up to \$100 for each separate violation of the franchise as provided herein, or the county may suspend or revoke the franchise. If at any hearing the county shall find that the franchisee has corrected any deficiencies to the satisfaction of the county and has brought this operation into compliance with the provisions of this subchapter, the franchise shall not be further suspended or revoked for the cited violations, but a civil penalty as provided herein may be imposed.
- (C) Upon suspension, revocation or termination of a franchise granted under this subchapter, the franchised ambulance service shall immediately cease operations in Vance County.
- (D) Upon suspension, revocation or termination of a driver's license or emergency medical technician certificate, the persons shall cease to drive an ambulance or provide medical care in conjunction with an ambulance service or attend an ambulance, and no person shall employ or permit the individual to drive an ambulance or provide medical care in conjunction with an ambulance service. (Ord. 35, passed 3-14-2005) Penalty, see § 110.99.
- (E) All existing franchises issued as of the date of this Ordinance shall terminate on June 30, 2021 unless terminated earlier.

**§ 110.22 STANDARDS FOR AMBULANCE FRANCHISE.**

- (A) Each franchised ambulance service shall comply at all times with the requirements of this subchapter, the franchise granted under this subchapter, and all applicable state and local laws relating to health, sanitation, safety, equipment and ambulance design and all other laws and ordinances.
- (B) Ownership
  - (1) Prior approval by the county shall be required where ownership or control of more than 10% of the right of control of franchisee is acquired by a person or group of persons acting in concert, none of whom own or control 10% or more of the right of control, singularly or collectively, at the date of franchise.
  - (2) By its acceptance of the franchise, the franchisee specifically agrees that any such acquisition occurring without prior approval of the county shall constitute a violation of the franchise by franchisee and shall be cause for immediate termination at the option of the county.
  - (3) Any change of ownership of a franchised ambulance service without the approval of the county shall terminate the franchise and shall require a new application, a new franchise and conformance with all the requirements of this subchapter as upon original franchising.
- (C) The applicant must maintain and operate out of a Vance County office and facility that houses each ambulance used within the boundaries of Vance County, North Carolina. Specific location and description thereof must be provided by the applicant.
- (D) Each franchised ambulance service, its equipment and the Vance County premises designated in the application for all records relating to its maintenance and operation as such shall be open to inspection by the state, the county or their designated representatives.
- (E) No official entry made upon a franchise may be defaced, removed or obliterated.
- (F) Any change, failure to provide or loss of the level of service required to be offered by the franchisee without the approval of the county shall terminate the franchise and shall require a new application and a new franchise and conformance with all the requirements of this ordinance as upon original franchising.
- (G) A franchise shall be required to participate in and provide backup emergency services as needed under the Vance County EMS system plan and shall obtain and maintain the required NC State permits and certifications for such ALS services.

#### **§ 110.23 STANDARDS FOR PERSONNEL.**

- (A) Standards for EMS personnel are to be complied with as dictated under North Carolina Laws, rules and regulations governing EMS personnel, including, but not limited to, Article 7, Chapter 131E-158 and Article 56, Chapter 143. All such laws, rules and regulations, as currently in place and as amended or replaced, are herein incorporated by reference and mandated.
- (B) All personnel providing ambulance services shall obtain and maintain the approval of the Emergency Medical Services Director and Medical Director prior to providing medical care and each submission for approval shall be accompanied by the submission of a driver's license, criminal record history and a letter of review/approval by the Vance County Medical Director.

**§ 110.24 STANDARDS FOR VEHICLES AND EQUIPMENT.**

Vehicle and equipment standards as developed by the North Carolina Medical Care Commission pursuant to Article 7, Chapter 131E-157 and Article 56, Chapter 143 of the General Statutes of North Carolina, shall be applied and adhered to and the same are incorporated herein by reference.

**§ 110.25 STANDARDS FOR COMMUNICATIONS.**

- (A) Each ambulance service shall maintain a central point of contact that is available 24 hours a day, 7 days a week by way of two way radio or telephone line. Each central point must have at least one open telephone line. Telephone numbers must be registered with each law enforcement agency and communications center in the county. (Ord. 35, passed 3-14-2005) Penalty, see § 110.99
- (B) Each ambulance vehicle shall be equipped with an operational two-way radio capable of establishing good quality voice communications from within the geographical confines of Vance County to the hospital(s) emergency department in Vance County.
- (C) Each ambulance vehicle shall be equipped with two-way radio communications capabilities for communications with all hospital emergency departments to which transportation of patients is made on a regular routine basis anywhere in the state of North Carolina.
- (D) Each ambulance shall be equipped with a two-way radio which must be operative at all times and which has the capacity of communicating with Vance County Emergency Communications, Vance County EMS and other franchised providers in Vance County.
- (F) Each ambulance shall provide the county a copy of the Federal Communications Commission license authorizing the use of the communication equipment owned and operated by that service and its operable frequency.

**§ 110.26 INSURANCE.**

- (A) No ambulance franchise shall be issued under this subchapter, nor shall the franchise be valid after issuance, nor shall any ambulance be operated in the county unless there is at all times in force and effect insurance coverage, issued by an insurance company licensed to do business in the state for each and every ambulance owned and/or operated by or for the ambulance service providing for the payment of damages:
  - (1) In the sum of \$1,000,000 for injury to or death of individuals in accidents resulting from any cause for which the owner of the vehicle would be liable on account of liability imposed on him or her by law, regardless of whether the ambulance was being driven by the owner or his or her agent; and
  - (2) In the sum of \$1,000,000 for the loss of or damage to the property of another, including personal property, under like circumstances, in sums as may be required by the state or as approved by the county.
- (B) Any lapse of insurance coverage constitutes immediate grounds for suspension or revocation of the franchise by the county. (Ord. 35, passed 3-14-2005) Penalty, see § 110.99

**§ 110.27 RECORDS.**

Each franchisee shall maintain the following records:



- (A) *Record of dispatch.* Time call was received, time ambulance dispatched, time arrived on scene, time arrived at destination, time in service, and time returned to base;
- (B) *Trip Record.* All information required in division (A) above, in addition to patient's address and telephone number, condition of patient, documentation of all medical care, procedures or assistance provided for each call, time of day all medical care, procedures or assistance provided, total trip miles, schedule of charges, and name of attendant and driver; and
- (C) *Daily Report Log.* A log maintained for the purpose of identifying all people transported in any one day.
- (D) *Daily Vehicle Inventory and Safety Log.* A daily checklist review of the inventory and results of a daily safety inspection for each vehicle, signed by the individual verifying vehicle operations and equipment;
- (E) All the above reports shall be maintained for a minimum of a three (3) year period unless a longer retention period is otherwise required by other retention rules.

**§ 110.28 RATES AND CHARGES.**

- (A) Within 60 days after the acceptance of the franchise as provided for herein, the franchisee shall submit to the county a proposed schedule of rates and charges for the operation of an ambulance service. The county shall within 30 days thereafter either accept or reject the proposed rates. If the county rejects the rates, the franchisee and the county shall negotiate for an acceptable rate, and if the agreement is not reached within 30 days after the rejection by the county, the county may terminate the franchise; and further, any rate increase sought by the franchisee will be filed with the county 60 days before it is to be effective; and if the county takes no action or approves the increase, it will go into effect on the date specified in the filing. If the county takes action by resolution to disapprove the increase, the proposed rate increase shall not be effective.
- (B) No ambulance service shall attempt to collect rates on emergency calls, if applicable, until the patient has reached the point of destination, has received medical attention, and is in a condition deemed by the physician fit to consult with the ambulance service.
- (C) On non-emergency calls or calls where a person requires transportation to a non-emergency facility, attempts to collect payments can be made before the ambulance begins its trip.

**§ 110.29 ENFORCEMENT.**

- (A) The County Manager, or his designee, shall be the enforcing agency for the regulations contained in this subchapter.
- (B) The County Medical Director shall have the authority to issue an immediate suspension for up to thirty (30) days due to matters related to public health, safety and welfare in addition to the ability to hold an EMS Peer Review of the ambulance service as defined in N.C.G.S. 131E 155(a)(6b).
- (C) The Manager will:
  - (1) Receive all franchise proposals from potential providers;
  - (2) Study each proposal for conformance to this subchapter;
  - (3) Recommend to the Vance County Board of Commissioners the award of the franchises to the applicants submitting the best proposals;

- (4) Cause the County Emergency Medical Services Department to inspect the premises, vehicles, equipment and personnel records of franchisees to ensure compliance with this subchapter;
  - (5) Recommend to the Board of Commissioners the temporary or permanent suspension of a franchise in the event of noncompliance with the franchise terms of this Ordinance.
  - (6) Recommend appropriate legal action for the imposition of misdemeanor or civil penalties as provided in this Ordinance;
- (D) Each Franchise will:
- (1) Submit monthly reports from ambulance services provided from the previous month on or before the 15<sup>th</sup> of the following month.
  - (2) Participate in Vance County EMS system wide Peer Review.
  - (3) Ensure by cooperative agreement with other ambulance services the continued service in a district where an ambulance service franchise has been suspended;
  - (4) Within 10 days of receipt, report any complaints from the public, other enforcing agencies and ambulance services regarding services provided within Vance County.
  - (5) Maintain all records required by this Ordinance and other applicable State and local regulations; and

**§ 110.30 TERRITORIAL JURISDICTION.**

The provisions of this subchapter shall apply to all areas within the geographic confines of the county. (Ord. 35, passed 3-14-2005)

**§ 110.31 INSPECTION OF RECORDS.**

The county may inspect a franchisee's records, premises and equipment at any time in order to ensure compliance with this subchapter and any franchise granted under this subchapter. (Ord. 35, passed 3-14-2005)

Adopted the 7<sup>th</sup> day of December, 2020



## Budget Calendar Fiscal Year 2024-2025

<u>Task</u>	<u>Date</u>
CIP Materials to Department/Office Heads	October 11, 2023
CIP Due to Finance Director	November 3, 2023
Budget Materials to Department/Office Heads	December 7, 2023
1 <sup>st</sup> Budget Public Hearing	* January 8, 2024
Budget Requests to Finance Director	January 12, 2024
Commissioners Retreat (To Be Scheduled)	January 18, 2024
Outside Agency Requests Due	January 31, 2024
Processing of Budget Requests & Meeting with Dept. Heads	Feb 13 – Mar 30, 2024
Final Adjustments	April 1 – 30, 2024
Proposed Budget Presentation to Board of Commissioners	May 16, 2024
Potential Budget Work Sessions (To Be Scheduled)	May 20 – June 15, 2024
2 <sup>nd</sup> Budget Public Hearing & Adoption	by June 30, 2024

\*Denotes a Board of Commissioners Meeting Date

**Revised CRP 5/1/2024**



# NATIONAL OPIOID LITIGATION

**CONFIDENTIAL ATTORNEY-CLIENT PRIVILEGE**  
**PROTECTED COMMUNICATION**

April 26, 2024

MAY 03 2024

**VIA EMAIL & U.S. MAIL**

Jordan McMillen  
Vance County  
122 Young Street, Suite B  
Henderson, NC 27536

**Re: ACTION REQUIRED – Opioid PBM Update**

Dear Jordan McMillen:

Over the course of the last eight years, your opioid consortium has now recovered approximately \$60 billion from pharmaceutical manufacturers, distributors, and pharmacies. These funds will go a long way to helping abate the opioid crisis, but our work is not done.

As part of our continued efforts to help remedy the effects of the opioid crisis in your community, our consortium has been investigating the role that pharmacy benefit managers (PBMs) played in contributing to the crisis. PBMs are companies who administer prescription drug plans for health insurers, self-insured employers, and governments; negotiate drug prices and availability with drug manufacturers; process and pay claims; review drug utilization data and operate mail-order pharmacies.

Judge Polster recently opened a new bellwether track of cases against Express Scripts and OptumRx, two of the three PBMs with the largest market share in the United States<sup>2253</sup>. We are in the process of drafting a motion that would give all plaintiffs in the MDL the right to amend their claims by opting-in to a master pleading which follows the existing bellwether complaints (available here) and sets forth the legal and factual basis for claims against the PBMs. In connection with this effort, we are recommending that, subject to our obtaining Court approval, you agree to amend your current complaint to add claims against Express Scripts and OptumRx and their relevant subsidiaries (the PBM Defendants) concerning their role in fueling the opioid crisis<sup>2254</sup>.

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<sup>2253</sup> The other of the three largest PBMs in the country, CVS Caremark/Caremark Rx, is a subsidiary of CVS Health. Caremark was included in the recent national CVS settlement.

<sup>2254</sup> The relevant Express Scripts entities are: Express Scripts, Inc.; Express Scripts Administrators, LLC; Medco Health Solutions, Inc.; ESI Mail Order Processing, Inc.; ESI Mail Pharmacy Service, Inc.; Express Scripts Pharmacy, Inc.; Evernorth Health, Inc. (formerly Express Scripts Holding Company); and Express Scripts Specialty Distribution Services, Inc. The relevant OptumRx entities are: UnitedHealth Group, Inc., Optum, Inc., OptumInsight, Inc., OptumInsight Life Sciences, Inc., OptumRx, Inc., OptumRx Discount Card Services, LLC; Optum Perks, LLC; OptumHealth Care Solutions, LLC; OptumHealth Holdings, LLC; and Optum Health Networks, Inc.

The logo consists of two vertical orange bars of varying heights, with the taller bar on the left and the shorter bar on the right. To the right of these bars, the words "NATIONAL OPIOID LITIGATION" are written in a bold, blue, sans-serif font, stacked in two lines.

# NATIONAL OPIOID LITIGATION

To understand the PBM Defendants' ability to impact the opioid crisis, one need look no further than the statements of their own employees who, in internal emails, stated as follows:

*"No component of our healthcare system is in a better position to deliver more immediate and more impactful changes to the current course of this crisis than our nation's PBMs. . . . PBM's are in a very powerful position to deploy systems-based claims edits that can ensure that physician prescribing and pharmacy dispensing is in line with the most-up-date scientific evidence and national consensus guidelines . . . PBMs also bring enormous clinical and analytic horsepower to the table to be able to more effectively screen for aberrant prescribing and dispensing of opioids by our nation's physicians and pharmacies; to risk stratify patients based upon potentially for dependency, addiction and overdose; and the ability to deploy numerous interventions targeted at both the provider and the patient themselves to clinically intervene in a more timely and effective manner to decrease such risks. As an intermediary between the physician, pharmacist, patient, pharmaceutical manufacturer, health systems, and other components of the industry, the PBM is also in an ideal position to drive improvements in education and awareness of the dangers of opioid therapy and the various tools available for all constituents to contribute to positive change in the course of this epidemic."*

Despite all these resources and a raging epidemic, one can only wonder why the PBM Defendants failed to act. Again, to answer this question, we need look no further than their own documents. For example, in 2017, when clients and government agencies were "demanding" change to limit the flow of pills, Express Scripts concluded that if they "were to implement either the 7 day or 10 day limit on short acting opioids which are most profitable for us we are looking to lose \$10-\$20 Million in margin." In other words, Express Scripts knew that if they put tools in place to restrict short acting opioid prescription fills to seven or ten days, it would cost them \$10 to \$20 million per year.

The PBM Defendants' role in creating and sustaining the opioid epidemic has been largely hidden from public scrutiny. However, evidence recently developed in the MDL, including the documents described above, reveals that the PBM Defendants, hired by third party payors, insurers, and health plans to design formularies and administer prescription drug programs and colluded with the Opioid Manufacturers to make opioids more available. The PBM Defendants had a broad scope of knowledge concerning the opioid crisis by virtue of their access to opioid utilization data for the individuals covered by the insurance plans they administer, their contracts with over 98% of the retail pharmacies in the country, and the detailed dispensing data they collect with respect to the opioid prescriptions filled at every pharmacy in their networks.

Instead of using this data, however, to identify concerning red-flag opioid prescriptions and implement restrictions that would have curtailed the flow of pills, the PBM Defendants knowingly ignored this information and, to increase their profits, they permitted their pharmacy networks to dispense billions of opioid pills into communities across the country. These actions by the PBM Defendants allowed the market to be flooded with prescription opioids and facilitated the opioid epidemic. Based on their conduct, the PBM Defendants would be sued in their

The logo for National Opioid Litigation features two vertical orange bars of varying heights to the left of the text. The text "NATIONAL OPIOID LITIGATION" is in a bold, blue, sans-serif font, with "NATIONAL" on the top line and "OPIOID LITIGATION" on the bottom line.

# NATIONAL OPIOID LITIGATION

capacities as: (1) PBMs; (2) data, analytics, research, and marketing providers; and (3) mail-order pharmacies.

If the Court permits it, amending your complaint will ensure that you have the opportunity to participate in any recovery if there is a favorable resolution of claims against the PBMs. Public entities that amend their complaints potentially could recover from the PBMs, while cities and counties who do not amend may be unable to participate in any recovery.

**Please respond by Friday, May 17, 2024 confirming that you agree to the amendment of your complaint to add the PBM Defendants, including related subsidiaries. Alternatively, if you have any questions about the case against the PBMs or the proposed amendment process, let us know.**

Send all responses and inquires on this topic to Aaron Harrah at Hill, Peterson, Carper, Bee & Deitzler, PLLC at [amendmycomplaint@hpcbd.com](mailto:amendmycomplaint@hpcbd.com).

For your convenience and to assist us with tracking responses, if your subdivision agrees to amend its complaint to add the PBM Defendants, in the subject line of your responsive email, please use the following format: [State abbreviation]\_[ Subdivision name]\_[Subdivision type (County, Tribe, Parish, City, Town)]\_[Agree].

As an example, if Greenbrier County, West Virginia, agrees to amend its complaint to add the PBM Defendants the subject line of its responsive email would be: WV\_Greenbrier\_County\_Agree.

A Tribe's response would be: MT\_Blackfeet\_Tribe\_Agree.

A Parish's response would be: LA\_St. John's\_Parish\_Agree.

The same format would apply similarly to Cities and Towns.

We look forward to hearing from you. Thank you for the continued opportunity to serve your community.

Thank you,

**Aaron Harrah**

[amendmycomplaint@hpcbd.com](mailto:amendmycomplaint@hpcbd.com)

Hill, Peterson, Carper, Bee & Deitzler, PLLC | Attorney

800.822.5667

304.414.4198 Direct Dial

[www.hpcbd.com](http://www.hpcbd.com)

**Mark Pifko**

Baron & Budd, P.C. | Shareholder

310.467.7799 mobile

818.839.2325 direct

818.839.2333 main

[www.baronandbudd.com](http://www.baronandbudd.com)

## **IMPORTANT INFORMATION REGARDING EMAIL COMMUNICATIONS**

Our Consortium regularly sends communications to our clients via email. However, we have noticed that our emails have a very low open rate, meaning that you are potentially not receiving the most up-to-date information in the case, often due to email security settings or SPAM filters.

The attached letter was also sent via email from [OpioidLitigation@LevinLaw.com](mailto:OpioidLitigation@LevinLaw.com), with a subject line of: *ACTION REQUIRED - Opioid PBM Update - PROTECTED - CONFIDENTIAL - ATTORNEY CLIENT PRIVILEGED*. We ask that you take a moment to ensure you received that email.

To ensure prompt delivery of our emails, we ask that you work with your IT staff to “whitelist” or add [OpioidLitigation@LevinLaw.com](mailto:OpioidLitigation@LevinLaw.com) to your safe senders list.

We also strongly recommend whitelisting or adding the following domain names to your safe senders list:

**LevinLaw.com**

**BaronBudd.com**

**FarrellFuller.com**

**McHughFuller.com**

**GreeneKetchum.com**

**HPCBD.com**

**PowellMajestro.com**

Whitelisting varies by email client, internet security provider, and service provider. Please ask your IT staff to assist you in this process.

Please keep us informed of any changes to contact information, so that our communications get to the right people.

*County Attorney's  
Report*



**RESOLUTION AUTHORIZING UPSET BID PROCESS  
FOR SALE OF REAL PROPERTY  
Red Clay Lane Lot, Henderson, NC**

**WHEREAS**, Vance County owns certain real property with an address of **Red Clay Lane Lot, Henderson, North Carolina**, and more particularly described by the Vance County Tax Department as Parcel Number **0352A01029**; and

**WHEREAS**, North Carolina General Statute §160A-269 permits the county to sell real property by upset bid, after receipt of an offer for the property; and

**WHEREAS**, the County has received an offer to purchase the real property described herein above in the amount of **\$900.00** subject to the terms and conditions as included in the submitted offer to purchase bid, submitted by **Bobbie Garner** and

**WHEREAS**, **Bobbie Garner** has paid the required deposit in the amount of **\$750.00** with the offer.

**THEREFORE, THE VANCE COUNTY BOARD OF COMMISSIONERS RESOLVES THAT:**

1. The Board of County Commissioners declares the real property described above surplus and authorizes its sale through the upset bid procedure of North Carolina General Statute §160A-269.
2. A notice of the proposed sale shall be published which shall describe the property and the amount of the offer and shall require any upset offer be subject to the same terms and conditions as contained therein except for the purchase price.
3. Any person may submit an upset bid to the Clerk to the Board of County Commissioners within 10 days after the notice of sale is published. Once a qualifying higher bid has been received, that bid will become the new offer.
4. If a qualifying bid is received, a new notice of upset bid shall be published and shall continue to do so until a 10-day period has passed without any qualifying upset bid having been received. At that time, the amount of the final high bid shall be reported to the Board of County Commissioners.
5. A qualifying higher bid is one that raises the existing offer by the greater of \$750 or ten percent (10%) of the first \$1,000.00 of that offer and five percent (5%) of the remainder of the offer and is subject to the same terms and conditions of the previous bid.
6. A qualifying higher bid must also be accompanied by a deposit in the amount of the greater of \$750 or five percent (5%) of the bid, which may be made by cashier's check or certified funds. The County will return the deposit of any bid not accepted and will return the bid of an offer subject to upset if a qualifying higher bid is received.

7. The terms of the final sale are that the Board of County Commissioners must approve the final high offer before the sale is closed and the buyer must pay with certified funds or wire transfer the bid amount and any other amounts as required pursuant to the terms and conditions of the bid at the time of closing, which shall be no later than 30 days following the approval by this Board of the final bid. The real property is sold in its current condition, as is, and the County gives no warranty with respect to the usability of the real property or title. Title will be delivered at a closing by a **Non Warranty Deed**, subject to exceptions for ad valorem taxes, assessments, zoning regulations, restrictive covenants, street easements, rights of others in possession and any other encumbrances of record. Buyer shall pay for preparation and recording of the Deed and revenue stamps.
8. The County reserves the right to withdraw the property from sale at any time before the final high bid is accepted **and the right to reject all bids at any time.**
9. If no qualifying upset bid is received, the Board of County Commissioners will accept or reject the bid submitted within 60 days after the close of the 10-day upset period.

**This the 6<sup>th</sup> day of May, 2024.**

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**R. Dan Brummitt, Chair**  
**Vance County Board of Commissioners**

**ATTEST:**

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**Kelly H. Grissom, Clerk to the Board**

**Red Clay Lane Lot – Parcel 0352A01029**



<b>Offer to Purchase</b>	\$900
<b>Condition</b>	Foreclosed in February 2024 Vacant lot - .92 acre Property is owned by County Located in the County Zoned R30 – Residential Low Density
<b>Property Value</b>	\$7,728
<b>Attorney's Fees</b>	\$1,800
<b>Buyer</b>	Bobbie Garner

Parcel ID: 0352A01029 (Tax Value\$)

Red Clay Lane

Legend

- 0352A01029
- Centerlines
- Tax Parcels

1:1,800

ArcMap 10.6.1

04-19-2024 // LF911  
Latest 2024 Tax Values



# *Consent Agenda Items*

Budget Amendments  
Tax Refunds and Releases  
Minutes

Monthly Reports  
911 Emergency Operations  
Administrative Ambulance Charge-Offs  
Cooperative Extension  
EMS  
Human Resources  
Information Technology  
Parks and Recreation  
Planning and Development  
Tax Office  
Veterans Service

VANCE COUNTY BUDGET AMENDMENT REQUEST  
2023-2024 FISCAL YEAR

A Request to amend the 2023-2024 Vance County Budget is hereby submitted to the Vance County Board of Commissions as follows:

Revenue Expenditure Request

DESCRIPTION	ACCOUNT NUMBER	REVENUE INCREASE (DECREASE)
Public Safety Grant	10-380-438006	691,536
TOTAL:		<u>\$ 691,536</u>

Expenditure Amendment Request

DESCRIPTION	ACCOUNT NUMBER	EXPENSE INCREASE (DECREASE)
Capital Outlay	10-510-500074	691,536
TOTAL:		<u>\$ 691,536</u>

Reason for Amendment Request: To purchase Body and In-car Cameras for Sheriff Office.

Requested by: \_\_\_\_\_ Date: \_\_\_\_\_

<p>APPROVED: VANCE COUNTY BOARD OF COMMISSIONERS IN MEETING OF:  May 6, 2024  _____ Kelly Grissom, Clerk VANCE COUNTY BOARD OF COMMISSIONERS</p>
--

Reviewed by Budget and Finance Office: \_\_\_\_\_

Date: \_\_\_\_\_

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VANCE COUNTY BUDGET AMENDMENT REQUEST  
2023-2024 FISCAL YEAR

A Request to amend the 2023-2024 Vance County Budget is hereby submitted to the Vance County Board of Commissions as follows:

Fund Balance Request

DESCRIPTION	ACCOUNT NUMBER	REVENUE INCREASE (DECREASE)
General Fund Balance	10-399-439900	53,000
TOTAL:		<u>\$ 53,000</u>

Expenditure Amendment Request

DESCRIPTION	ACCOUNT NUMBER	EXPENSE INCREASE (DECREASE)
Capital Outlay	10-510-500074	53,000
TOTAL:		<u>\$ 53,000</u>

Reason for Amendment Request: To purchase cars for Sheriff's Office.

Requested by: \_\_\_\_\_ Date: \_\_\_\_\_

<p>APPROVED: VANCE COUNTY BOARD OF COMMISSIONERS IN MEETING OF:</p> <p>May 6, 2024</p> <p>_____ Kelly Grissom, Clerk VANCE COUNTY BOARD OF COMMISSIONERS</p>
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Reviewed by Budget and Finance Office: \_\_\_\_\_

Date: \_\_\_\_\_

**TAX OFFICE REFUND AND RELEASE REPORT FOR MARCH 2024**

<b>TAXPAYER NAME</b>	<b>TAX YR</b>	<b>REAL</b>	<b>PERSONAL</b>	<b>SOLID WASTE FEE</b>	<b>REASON</b>
BROWN TAMIKO N	2022	\$477.25	\$0.00	120	CORRECT VALUE
ZHENG YI ZHI	2023	\$0.00	\$126.24	0	PERS PROP BILLED
WEST LINDA GILL	2024	\$579.23	\$0.00	0	CORRECT DUE DATE
WEST LINDA GILL	2024	\$579.23	\$0.00	0	VAL ADJ FOR PRES
WEST LINDA GILL	2024	\$579.23	\$0.00	0	CORRECT VALUE
WEST LINDA GILL	2024	\$124.64	\$0.00	0	VAL ADJ FOR PRES
WEST LINDA GILL	2024	\$579.23	\$0.00	0	CORRECT VALUE
WEST LINDA GILL	2024	\$579.23	\$0.00	0	VAL ADJ FOR PRES
WEST LINDA GILL	2024	\$579.23	\$0.00	0	VAL ADJ FOR PRES
WEST LINDA GILL	2024	\$579.23	\$0.00	0	VAL ADJ FOR PRES
Z AND Z AUTOMOTIVE LLC	2024	\$0.00	\$540.61	0	PERS PROP BILLED
BRAME CURTIS RODNEY	2024	\$0.00	\$25.26	0	REG VEH BILLED I
GUPTON HENRY LEE	2024	\$0.00	\$9.88	0	REG VEH BILLED I
WHITE PETER III	2024	\$0.00	\$4.86	0	REG VEH BILLED I
		\$4,656.50	\$706.85		



**HENDERSON-VANCE COUNTY 911**

**NUMBER OF CALLS REPORT BY COMPLAINT (ALL UNITS)**

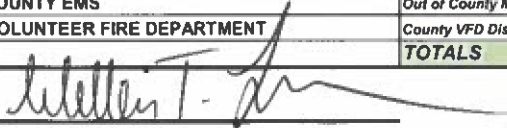
**TOTAL**

**7,556**

**TIME PERIOD:03/25/2024 00:00:00 Through 04/29/2024 23:59:59**

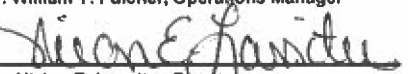
DEPARTMENT	COMMENT	TOTAL	COUNTY	CITY	STATE	OTHER
911 GENERAL CLEAR	Other Dispatch	174				174
AFTON VOLUNTEER FIRE DEPARTMENT	County VFD Dispatch	0	0			
AMERICAN RED CROSS	Other Dispatch	3				3
BEARPOND VOLUNTEER FIRE DEPARTMENT	County VFD Dispatch	58	58			
BERTIE AMUBLANCE SERVICE	City & County Dispatch	0				0
CAROLINA AIR CARE	Other Dispatch	0				0
CASWELL COUNTY EMS	Out of County Mutual Aid	0				0
COKEBURY VOLUNTEER FIRE DEPARTMENT	County VFD Dispatch	33	33			
CSX RAILROAD	Other Dispatch	0				0
DREWRY VOLUNTEER FIRE DEPARTMENT	County VFD Dispatch	18	18			
DUKE LIFE FLIGHT	Other Dispatch	6				6
CENTURYLINK	Other Dispatch	1				1
DUKE ENERGY	Other Dispatch	16				16
EPSOM VOLUNTEER FIRE DEPARTMENT	County VFD Dispatch	14	14			
FRANKLIN COUNTY EMS	Out of County Mutual Aid	0				0
GRANVILLE COUNTY EMS	Out of County Mutual Aid	1				1
HENDERSON FIRE DEPARTMENT	City Dispatch	346		346		
HENDERSON POLICE DEPARTMENT	City Dispatch	2665		2665		
HENDERSON STREET DEPT	City Dispatch	5		5		
HENDERSON WATER DEPARTMENT	City Dispatch	19		19		
HICKSBORO VOLUNTEER FIRE DEPARTMENT	County VFD Dispatch	38	38			
KITRELL VOLUNTEER FIRE DEPARTMENT	County VFD Dispatch	28	28			
NORTH CAROLINA DEPT OF PARKS	State Dispatch	3			3	
NORTH CAROLINA DEPT OF TRANSPORTATION	State Dispatch	9			9	
NORTH CAROLINA DIVISION OF MOTOR VEHICLES	State Dispatch	0			0	
NORTH CAROLINA FORESTRY SERVICE	State Dispatch	4			4	
NORTH CAROLINA MEDICAL EXAMINER	State Dispatch	3			3	
NORTH CAROLINA PROBATION & PAROLE	State Dispatch	0			0	
NORTH CAROLINA STATE HIGHWAY PATROL	State Dispatch	107			107	
NORTH CENTRAL MEDICAL TRANSPORTS	City & County Dispatch	0	0			
NORTH CAROLINA WILDLIFE	State Dispatch	2			2	
PUBLIC SERVICE GAS	Other Dispatch	5				5
RIDGEWAY VOLUNTEER FIRE DEPARTMENT	County VFD Dispatch	1	1			
TOWNSVILLE VOLUNTEER FIRE DEPARTMENT	County VFD Dispatch	26	26			
UNC AIR CARE	Other Dispatch	3				3
VANCE COUNTY AMBULANCE SERVICE (EMS)	City & County Dispatch	725	398	327		
VANCE COUNTY ANIMAL CONTROL	County Dispatch	107	107			
VANCE CO DEPT OF SOCIAL SERVICES	County Dispatch	14	14			
VANCE COUNTY EMERGENCY MANAGEMENT	City & County Dispatch	0	0			
VANCE COUNTY FIRE DEPARTMENT	County Dispatch/FIRE	107	107			
VANCE COUNTY FIRE MARSHALL	County Dispatch/FIRE	7	7			
VANCE COUNTY MAGISTRATE OFFICE	Other Dispatch	8				7
VANCE COUNTY RESCUE SQUAD	County Dispatch	46	46			
VANCE COUNTY SHERIFF DEPARTMENT	County Dispatch	2925	2925			
WAKE ELECTRIC	County Dispatch	0	0			
WAKE COUNTY EMS	Out of County Mutual Aid	0				0
WARREN COUNTY EMS	Out of County Mutual Aid	2				2
WATKINS VOLUNTEER FIRE DEPARTMENT	County VFD Dispatch	27	27			
<b>TOTALS</b>		<b>7556</b>	<b>3847</b>	<b>3362</b>	<b>128</b>	<b>218</b>

Signature:



Prepared by: William T. Fulcher, Operations Manager

Signature:



Reviewed by: Vivian E. Lassiter, Director

4/30/2024

**VANCE COUNTY E911**  
**156 CHURCH ST STE 002 HENDERSON , NC 27536**

**CFS Time Summary By Department Type**  
**03/25/2024 00:00 - 04/29/2024 23:59**

Department	Total CFS	Avg Units	Min CFS	Max CFS	Avg CFS	Disp-Enr	Disp-Arr	Total Time
911 COMMUNICATIONS	174	1	00:00:03	02:44:27	00:05:45	00:00:00	00:05:40	16:40:41
DUKE LIFE FLIGHT	6	1	00:34:14	10:52:01	03:18:02	00:00:00	03:18:02	19:48:17
GRANVILLE COUNTY EMS	1	1	01:11:11	01:11:11	01:11:11	00:00:08	01:11:11	1:11:11
UNC AIR CARE	3	1	00:01:52	00:49:07	00:22:52	00:00:00	00:59:45	1:08:36
WARREN COUNTY EMS	2	1	00:22:16	10:42:15	05:32:15	00:00:00	00:19:20	11:04:31
<b>Totals:</b>	<b>5</b>	<b>186</b>						

**EMS**

Department	Total CFS	Avg Units	Min CFS	Max CFS	Avg CFS	Disp-Enr	Disp-Arr	Total Time
VANCE COUNTY EMS	725	2	00:00:03	02:31:13	00:40:32	00:00:59	00:14:03	489:48:32
<b>Totals:</b>	<b>1</b>	<b>725</b>						

**FIR**

Department	Total CFS	Avg Units	Min CFS	Max CFS	Avg CFS	Disp-Enr	Disp-Arr	Total Time
BEARPOND FIRE DEPARTMENT	58	1	00:01:12	02:02:24	00:21:04	00:00:48	00:14:34	20:22:02
COKESBURY FIRE DEPARTMENT	33	2	00:01:31	01:46:42	00:24:09	00:02:09	00:10:32	13:17:08
DREWRY FIRE DEPARTMENT	18	1	00:00:30	01:46:42	00:17:44	00:01:38	00:21:23	5:19:22
EPSOM FIRE DEPARTMENT	14	2	00:02:20	01:18:49	00:23:31	00:01:10	00:15:29	5:29:26
FORESTRY	4	2	00:03:50	01:00:32	00:40:02	00:00:42	00:18:19	2:40:09
HENDERSON FIRE DEPARTMENT	346	2	00:00:05	02:45:47	00:16:21	00:00:56	00:06:13	94:21:31
HICKSBORO FIRE DEPARTMENT	38	1	00:00:09	03:07:05	00:24:51	00:01:57	00:21:47	15:44:33
KITTRELL FIRE DEPARTMENT	28	2	00:00:10	02:02:47	00:35:28	00:01:23	00:12:17	16:33:05
RIDGEWAY FIRE DEPARTMENT	1	1	00:01:47	00:01:47	00:01:47	00:00:00	00:59:56	0:01:47
TOWNSVILLE FIRE DEPARTMENT	26	2	00:00:59	02:48:19	00:30:57	00:02:38	00:16:38	13:24:56
VANCE COUNTY FIRE DEPARTMENT	107	2	00:00:04	03:01:31	00:25:28	00:00:54	00:13:57	45:25:35
VANCE COUNTY FIRE MARSHAL	7	1	00:16:59	01:51:27	00:41:43	00:00:00	00:02:44	4:52:05
WATKINS FIRE DEPARTMENT	27	2	00:00:43	02:49:54	00:45:07	00:01:11	00:08:32	20:18:33
<b>Totals:</b>	<b>13</b>	<b>707</b>						

**OTH**

Department	Total CFS	Avg Units	Min CFS	Max CFS	Avg CFS	Disp-Enr	Disp-Arr	Total Time
AMERICAN RED CROSS	3	1	01:48:44	02:32:16	02:11:08	00:00:00	02:11:08	6:33:25
CENTURY LINK	1	1	02:01:16	02:01:16	02:01:16	00:00:00	02:01:16	2:01:16

**OTH**

Department	Total CFS	Avg Units	Min CFS	Max CFS	Avg CFS	Disp-Enr	Disp-Arr	Total Time
DEPARTMENT OF TRANSPORTATION	9	1	00:00:04	10:40:35	01:40:36	00:00:00	01:31:12	15:05:27
DUKE POWER	16	1	00:00:31	10:52:01	02:05:21	00:00:00	02:27:27	33:25:38
HIGHWAY PATROL	107	1	00:00:03	04:26:09	00:41:59	00:00:00	00:42:09	74:52:52
KERR LAKE PARK RANGERS	3	1	00:25:24	01:41:12	01:04:31	00:00:00	00:25:23	3:13:33
MAGISTRATE	8	1	00:00:05	03:36:18	01:00:54	00:00:00	00:54:46	8:07:14
MEDICAL EXAMINER	3	1	01:27:33	02:28:00	01:56:12	00:00:00	01:56:12	5:48:37
PUBLIC SERVICE NATURAL GAS	5	1	00:18:47	00:47:05	00:30:20	00:00:00	00:25:58	2:31:44
STREET DEPARTMENT	5	1	00:00:11	10:04:18	02:18:25	00:00:00	02:18:25	11:32:06
VANCE COUNTY ANIMAL CONTROL	107	1	00:00:05	02:38:16	00:23:11	00:00:04	00:17:48	41:20:56
VANCE COUNTY SOCIAL SERVICES	14	1	00:00:05	04:46:28	00:33:18	00:00:00	00:33:18	7:46:15
WATER DEPARTMENT	19	1	00:00:03	01:40:48	00:23:54	00:00:00	00:23:54	7:34:14
WILDLIFE RESOURCES COMMISSION	2	1	00:04:52	00:05:12	00:05:02	00:00:00	00:05:02	0:10:04
<b>Totals:</b>	<b>14</b>	<b>302</b>						

**POL**

Department	Total CFS	Avg Units	Min CFS	Max CFS	Avg CFS	Disp-Enr	Disp-Arr	Total Time
HENDERSON POLICE DEPARTMENT	2665	1	00:00:05	11:00:18	00:25:59	00:00:47	00:05:58	1154:23:07
<b>Totals:</b>	<b>1</b>	<b>2665</b>						

**RES**

Department	Total CFS	Avg Units	Min CFS	Max CFS	Avg CFS	Disp-Enr	Disp-Arr	Total Time
VANCE COUNTY RESCUE SQUAD	46	2	00:01:36	02:49:54	00:36:24	00:01:24	00:27:08	27:54:50
<b>Totals:</b>	<b>1</b>	<b>46</b>						

**SHE**

Department	Total CFS	Avg Units	Min CFS	Max CFS	Avg CFS	Disp-Enr	Disp-Arr	Total Time
VANCE COUNTY SHERIFF'S OFFICE	2925	1	00:00:00	01:34:11	00:32:09	00:01:37	00:07:31	1567:29:37
<b>Totals:</b>	<b>1</b>	<b>2925</b>						

**VANCE COUNTY E911**  
**156 CHURCH ST STE 002 HENDERSON , NC 27536**

**CFS Time Summary By CallType**  
**03/25/2024 23:59 - 04/29/2024 23:59**

CallType	CFS Count	Minimum	Maximum	Average	Total Time	Percentage
	4	0:01:13	0:12:54	0:06:53	0:27:32	0.014
911 HANGUP	136	0:01:24	2:43:23	0:20:10	45:44:33	1.369
911 SYSTEM PROB	5	0:04:27	2:46:40	1:05:11	5:25:59	0.163
ABANDONED VEHICLE	6	0:05:01	0:39:22	0:16:38	1:39:48	0.05
ABDOMINAL PAIN/PROBLEMS	12	0:01:38	1:27:32	0:39:57	7:59:24	0.239
ALARM - RESIDENCE/BUSINESS	275	0:01:29	1:45:52	0:18:01	82:38:29	2.473
ALARM (FIRE RELATED)	35	0:04:22	0:55:49	0:16:28	9:36:50	0.288
ALLERGIES (REACTIONS/ENVENOMATIONS)	5	0:32:07	0:52:41	0:41:13	3:26:09	0.103
ANIMAL BITES/ATTACKS	8	0:03:31	2:08:12	0:42:52	5:42:59	0.171
ANIMAL COMPLAINT	86	0:01:42	2:39:37	0:24:49	35:34:56	1.065
ARMED ROBBERY	1	1:04:32	1:04:32	1:04:32	1:04:32	0.032
ARMED SUSPECT	13	0:13:10	1:38:21	0:37:53	8:12:35	0.246
ASSAULT	37	0:00:41	3:01:05	0:43:58	27:06:57	0.811
ASSAULT/SEXUAL ASSAULT/STUN GUN	6	0:17:50	1:50:32	0:56:23	5:38:21	0.169
ASSIST ANOTHER AGENCY	37	0:01:36	3:03:50	0:40:36	25:02:47	0.749
ASSIST MOTORIST	61	0:01:07	1:31:39	0:21:59	22:21:45	0.669
BACK PAIN(NON-TRAUMATIC/NON- RECENT TRAUMA)	7	0:01:58	1:25:23	0:42:07	4:54:52	0.147
BONDING	31	0:20:34	3:17:42	0:52:51	27:18:42	0.817
BONDSET	2	0:39:58	0:51:28	0:45:43	1:31:26	0.046
BREAKING/ENTERING MOTOR VEHICLE	22	0:11:29	1:59:08	0:45:54	16:50:03	0.504
BREATHING PROBLEMS	101	0:03:53	3:54:10	0:47:05	79:16:53	2.372
BURGLARY	19	0:06:51	3:21:53	1:08:53	21:48:55	0.653
BURNS (SCALDS)/EXPLOSION(BLAST)	1	0:15:08	0:15:08	0:15:08	0:15:08	0.008
CARDIAC/RESPIRATORY ARREST/DEATH	17	0:01:00	4:03:43	1:25:22	24:11:19	0.724
CARELESS/WRECKLESS DRIVER	63	0:02:46	1:52:29	0:18:36	19:32:14	0.585
CHASE	5	0:10:10	4:27:57	1:22:47	6:53:58	0.206
CHEST PAINS/CHEST DISCOMFORT (NON-TRAUMATIC)	52	0:01:17	2:33:57	0:45:12	39:10:41	1.172
CHILD ABUSE	1	0:04:02	0:04:02	0:04:02	0:04:02	0.002

CallType	CFS Count	Minimum	Maximum	Average	Total Time	Percentage
CIVIL DISTURBANCE	46	0:02:10	2:32:42	0:31:52	24:26:36	0.731
CIVIL SUMMONS	241	0:00:13	1:12:31	0:10:15	41:13:39	1.234
COMMUNICATING THREATS/HARASSMENT	59	0:01:13	2:45:54	0:29:52	29:23:01	0.879
CONVULSIONS/SEIZURES	29	0:12:29	1:24:00	0:47:48	23:06:23	0.691
CRIMINAL SUMMONS	28	0:00:23	0:27:47	0:08:24	3:55:15	0.117
DIABETIC PROBLEMS	25	0:02:24	1:15:00	0:37:18	15:32:49	0.465
DIRECT TRAFFIC	1	1:15:43	1:15:43	1:15:43	1:15:43	0.038
DISORDERLY SUBJECT	107	0:01:07	2:36:50	0:26:10	46:40:59	1.397
DOMESTIC PROBLEMS	111	0:02:44	3:00:58	0:36:27	67:27:02	2.018
DOMESTIC PROBLEMS W/ WEAPONS	12	0:08:15	2:19:28	0:41:38	8:19:42	0.249
DOMESTIC VIOLENCE ORDER	54	0:00:56	1:09:19	0:14:11	12:46:24	0.382
DRUG/ALCOHOL COMPLAINT	26	0:00:49	2:56:27	0:35:06	15:12:36	0.455
DRUNK DRIVER	4	0:05:32	1:00:01	0:24:09	1:36:38	0.048
ELECTRICAL HAZARD	5	0:02:31	0:52:26	0:22:02	1:50:14	0.055
ELEVATOR/ESCALATOR INCIDENT	1	0:02:29	0:02:29	0:02:29	0:02:29	0.001
EMERGENCY TRANSPORT	5	0:09:36	2:17:43	1:21:36	6:48:03	0.203
ESCORT	155	0:01:30	8:35:38	0:49:33	128:00:34	3.83
EVICITION	20	0:07:53	0:59:13	0:22:44	7:34:41	0.227
EXPLOSION	3	0:01:53	0:03:16	0:02:21	0:07:03	0.004
EXTRICATION/ENTRAPMENT	3	0:03:17	0:04:39	0:04:08	0:12:25	0.006
EYE PROBLEMS/INJURIES	2	0:17:55	0:33:04	0:25:29	0:50:59	0.025
FALLS	41	0:10:09	1:22:56	0:44:47	30:36:37	0.916
FD TONE TEST	40	0:00:30	0:15:31	0:02:21	1:34:04	0.047
FIGHT	16	0:05:33	1:47:02	0:21:06	5:37:40	0.168
FIGHT W/ WEAPONS	3	0:05:31	1:05:31	0:35:07	1:45:22	0.053
FIRE CALL PROQA LAUNCH	15	0:01:27	1:26:38	0:25:38	6:24:43	0.192
FOOT PATROL	24	0:04:25	2:45:21	0:20:43	8:17:27	0.248
FRAUD/IDENTITY THEFT	24	0:00:26	1:16:11	0:26:00	10:24:00	0.311
FUEL SPILL/FUEL ODOR	1	0:03:05	0:03:05	0:03:05	0:03:05	0.002
GAS LEAK/GAS ODOR	5	0:15:17	0:50:11	0:33:41	2:48:28	0.084
HEADACHE	7	0:18:15	0:58:58	0:36:39	4:16:37	0.128
HEART PROBLEMS/AICD	7	0:27:51	1:23:04	0:59:54	6:59:22	0.209
HEAT/COLD EXPOSURE	1	0:04:19	0:04:19	0:04:19	0:04:19	0.002

CallType	CFS Count	Minimum	Maximum	Average	Total Time	Percentage
HEMORRHAGE/LACERATIONS	23	0:01:48	2:14:04	0:42:04	16:07:46	0.483
HOME INVASION	7	0:07:26	1:49:16	0:48:58	5:42:52	0.171
ILLEGAL DUMPING	7	0:18:22	1:25:31	0:34:27	4:01:13	0.12
IMPROPERLY PARKED VEHICLE	16	0:02:59	3:15:02	0:26:43	7:07:42	0.213
INDECENT EXPOSURE	1	0:16:06	0:16:06	0:16:06	0:16:06	0.008
INSPECTION	11	0:15:19	0:51:46	0:31:19	5:44:31	0.172
INTOXICATED PERSON	6	0:05:51	1:07:01	0:31:08	3:06:48	0.093
INVESTIGATION	568	0:00:21	5:25:54	0:30:43	290:49:54	8.702
JUVENILE COMPLAINT	27	0:00:53	2:48:15	0:40:14	18:06:25	0.542
JUVENILE SUMMONS	3	0:04:27	0:10:58	0:08:09	0:24:28	0.012
LARCENY	107	0:00:27	3:08:46	0:45:04	80:22:43	2.405
LOST PROPERTY	7	0:00:55	3:09:10	0:43:51	5:06:57	0.153
LOUD MUSIC	55	0:02:07	1:08:03	0:17:40	16:12:21	0.485
LOUD NOISE	7	0:08:37	0:42:49	0:18:30	2:09:36	0.065
MEDICAL CALL PROQA LAUNCH	44	0:00:34	4:02:13	0:26:12	19:13:08	0.575
MENTAL SUBJECT	114	0:00:28	14:56:31	1:59:39	227:20:38	6.802
MISSING PERSON	12	0:00:35	2:52:10	0:52:23	10:28:45	0.314
MOTOR VEHICLE COLLISION - PD	132	0:00:57	2:51:17	0:36:49	81:00:16	2.424
MOTOR VEHICLE COLLISION - PI	45	0:02:48	11:00:31	1:20:07	60:05:19	1.798
MUTUAL AID / ASSIST OUTSIDE AGENCY	1	0:56:33	0:56:33	0:56:33	0:56:33	0.028
OPEN DOOR	4	0:13:23	0:35:58	0:25:24	1:41:39	0.051
OUTSIDE FIRE	6	0:10:06	0:45:18	0:22:44	2:16:29	0.068
OVERDOSE / POISONING	13	0:02:00	3:04:27	0:50:53	11:01:29	0.33
PREGNANCY / CHILDBIRTH / MISCARRIAGE	7	0:01:02	0:54:32	0:22:31	2:37:42	0.079
PROPERTY CHECK	1180	0:00:10	6:36:46	0:17:29	344:09:43	10.298
PROPERTY DAMAGE	43	0:00:35	3:10:32	0:45:10	32:22:13	0.969
PSYCHIATRIC / ABNORMAL BEHAVIOR / SUICIDE ATTEMPT	9	0:01:11	1:21:41	0:47:07	7:04:05	0.211
RECOVERED / FOUND PROPERTY	8	0:15:42	1:29:03	0:35:53	4:47:11	0.143
REPO	36	0:01:23	0:05:54	0:02:56	1:45:40	0.053
ROBBERY	1	0:34:45	0:34:45	0:34:45	0:34:45	0.017
SERVICE CALL	47	0:08:40	1:29:42	0:23:11	18:10:04	0.544
SHOPLIFTER	25	0:01:53	1:31:04	0:31:14	13:01:09	0.39
SHOTS FIRED	61	0:01:15	5:58:58	0:36:19	36:56:01	1.105

CallType	CFS Count	Minimum	Maximum	Average	Total Time	Percentage
SHOW CAUSE	87	0:00:26	1:32:08	0:08:49	12:48:28	0.383
SICK PERSON	131	0:02:47	2:31:47	0:45:48	100:00:21	2.992
SMOKE INVESTIGATION (OUTSIDE)	2	0:02:05	1:10:57	0:36:31	1:13:02	0.036
SPECIAL ASSIGNMENT	51	0:16:27	12:54:38	5:18:52	271:02:24	8.11
STAB / GUNSHOT / PENETRATING TRAUMA	5	0:26:59	3:55:51	2:18:50	11:34:12	0.346
STOLEN VEHICLE	13	0:00:50	1:52:13	0:49:29	10:43:24	0.321
STROKE / TIA	13	0:25:19	1:04:51	0:46:14	10:01:02	0.3
STRUCTURE FIRE	23	0:02:09	3:08:26	0:48:05	18:26:09	0.552
SUBPOENA	23	0:00:26	1:54:47	0:12:16	4:42:25	0.141
SURRENDER	2	1:08:17	2:09:22	1:38:49	3:17:39	0.099
SUSPICIOUS SUBJECT	66	0:01:12	2:53:50	0:27:26	30:10:48	0.903
SUSPICIOUS VEHICLE	105	0:00:44	3:32:55	0:21:00	36:45:34	1.1
TALK TO OFFICER / DEPUTY	170	0:03:13	3:52:43	0:30:07	85:20:26	2.553
TEST	9	0:00:23	2:43:27	0:19:04	2:51:43	0.086
TRAFFIC STOP	340	0:01:05	4:04:35	0:15:33	88:12:02	2.639
TRANSPORT	6	0:25:04	11:28:09	3:59:23	23:56:20	0.716
TRAUMATIC INJURY/INJURIES	6	0:37:51	1:30:10	0:51:32	5:09:17	0.154
TREE DOWN	7	0:04:29	2:20:53	0:47:12	5:30:30	0.165
TRESPASSING / LOITERING	148	0:01:07	2:43:38	0:27:16	67:17:33	2.013
UNAUTHORIZED USE OF A VEHICLE	13	0:02:01	0:59:40	0:32:14	6:59:07	0.209
UNCONCIOUS / FAINTING (NEAR)	56	0:02:43	2:43:05	0:48:02	44:50:15	1.342
UNKNOWN PROBLEM (PERSON) DOWN	24	0:05:03	3:34:35	0:38:30	15:24:05	0.461
VEGETATION/WILDLAND/BRUSH/GRASS FIRE	6	0:01:48	1:02:49	0:27:10	2:43:02	0.081
VEHICLE FIRE	8	0:02:30	1:21:03	0:35:44	4:45:58	0.143
WARRANT SERVICE	177	0:00:17	7:02:17	0:30:43	90:39:20	2.713
WATER RELATED PROBLEM	19	0:02:29	1:42:32	0:27:06	8:34:58	0.257
WEATHER/DISASTER SITUATIONS	2	0:00:26	0:00:48	0:00:37	0:01:14	0.001
WRIT OF POSSESSION	23	0:02:46	0:26:40	0:08:59	3:26:58	0.103
<b>Totals:</b>	<b>6337</b>			<b>39:14</b>	<b>3342:07:15</b>	<b>100.004</b>

**ADMINISTRATIVE AMBULANCE CHARGE-OFFS  
FOR INFORMATION ONLY  
APRIL 2024**

<u>NAME</u>	<u>DATE OF SERVICE</u>	<u>AMOUNT</u>	<u>REASON</u>
Shakenia D. Alexander	03/12/2014	500.06	Uncollectible-Statute of limitation beyond 10 yrs
Janice B. Allen	03/14/2014	93.35	Uncollectible-Statute of limitation beyond 10 yrs
James E. Anderson	03/13/2014	732.00	Uncollectible-Statute of limitation beyond 10 yrs
Dianna Ayscue	03/26/2014	414.91	Uncollectible-Statute of limitation beyond 10 yrs
Roshena Bass	03/11/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Mary Bates	03/03/2014	299.43	Uncollectible-Statute of limitation beyond 10 yrs
Walter Bissette	03/28/2014	225.00	Uncollectible-Statute of limitation beyond 10 yrs
Sharon Broadnax-Ansbach	03/07/2014	162.17	Uncollectible-Statute of limitation beyond 10 yrs
Mary O. Brown	03/22/2014	78.19	Uncollectible-Statute of limitation beyond 10 yrs
Drucilla T. Bullock	03/01/2014	484.08	Uncollectible-Statute of limitation beyond 10 yrs
James J. Bullock	03/30/2014	547.98	Uncollectible-Statute of limitation beyond 10 yrs
Johnnie C. Bullock	03/10/2014	503.25	Uncollectible-Statute of limitation beyond 10 yrs
Shirley A. Bullock	03/04/2014	40.00	Uncollectible-Statute of limitation beyond 10 yrs
Deborah K. Caudill	03/12/2014	356.42	Uncollectible-Statute of limitation beyond 10 yrs
David D. Caudle	03/08/2014	195.00	Uncollectible-Statute of limitation beyond 10 yrs
Sophia R. Cheek	03/15/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Dennis A. Clark	03/29/2014	593.95	Uncollectible-Statute of limitation beyond 10 yrs
Jessica L. Coble	03/02/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Barbara E. Culbreath	03/24/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Sandra W. Darensburg	03/18/2014	447.93	Uncollectible-Statute of limitation beyond 10 yrs
Bridgett M. Davis	03/30/2014	538.34	Uncollectible-Statute of limitation beyond 10 yrs
Doreatha L. Davis	03/09/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Felicia Davis	03/17/2014	456.95	Uncollectible-Statute of limitation beyond 10 yrs
William M. Davis	03/28/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Bobby Dawkins	03/20/2014	91.01	Uncollectible-Statute of limitation beyond 10 yrs
Annie A. Dickerson	03/02/2014 & 03/09/2014	300.00	Uncollectible-Statute of limitation beyond 10 yrs



Robin L. Dickerson	03/22/2014	60.44	Uncollectible-Statute of limitation beyond 10 yrs
Patsy W. Edwards	03/13/2014	100.00	Uncollectible-Statute of limitation beyond 10 yrs
Lizzie Epps	03/01/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Ashli S. Garrett	03/18/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Margie M. Garrett	03/07/2014	86.75	Uncollectible-Statute of limitation beyond 10 yrs
Betty S. Gill	03/16/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Williard C. Griffin	03/12/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Alice G. Gutshall	03/14/2014	100.00	Uncollectible-Statute of limitation beyond 10 yrs
Ella A. Hargrove	03/07/2014	225.00	Uncollectible-Statute of limitation beyond 10 yrs
Jamar A. Hargrove	03/17/2014	488.34	Uncollectible-Statute of limitation beyond 10 yrs
Donald W. Harris	03/21/2014	95.29	Uncollectible-Statute of limitation beyond 10 yrs
Georgia A. Harris	03/26/2014 & 03/29/2014	596.86	Uncollectible-Statute of limitation beyond 10 yrs
Emma Lou H. Hawkins	03/18/2014	116.23	Uncollectible-Statute of limitation beyond 10 yrs
Rita D. Hawkins	03/31/2014	100.00	Uncollectible-Statute of limitation beyond 10 yrs
Samuel R. Hayes	03/08/2014 & 03/25/2014	200.00	Uncollectible-Statute of limitation beyond 10 yrs
Edna Henderson	03/02/2014	50.00	Uncollectible-Statute of limitation beyond 10 yrs
Ke'Juan A. Hicks	03/19/2014	429.82	Uncollectible-Statute of limitation beyond 10 yrs
Clarence Holloway	03/08/2014	143.43	Uncollectible-Statute of limitation beyond 10 yrs
Queen E. Holloway	03/24/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Robert D. Horton	03/25/2014	100.00	Uncollectible-Statute of limitation beyond 10 yrs
Shameka L. Hunt	03/14/2014	96.21	Uncollectible-Statute of limitation beyond 10 yrs
Rita N. Johnson	03/28/2014	452.19	Uncollectible-Statute of limitation beyond 10 yrs
Tonya C. Johnson	03/23/2014	91.65	Uncollectible-Statute of limitation beyond 10 yrs
Bobby G. Jones	03/04/2014	96.33	Uncollectible-Statute of limitation beyond 10 yrs
Elrio L. Jones	03/11/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Jeffrey A. Jones	03/29/2014	618.45	Uncollectible-Statute of limitation beyond 10 yrs
Juanita H. Kearney	03/24/2014	91.43	Uncollectible-Statute of limitation beyond 10 yrs
Tiffany G. Lassiter	03/18/2014	215.47	Uncollectible-Statute of limitation beyond 10 yrs
Walter J. Lawton	03/21/2014	471.30	Uncollectible-Statute of limitation beyond 10 yrs
Laquandra T. Lemay	03/11/2014	505.38	Uncollectible-Statute of limitation beyond 10 yrs
Audrey E. Lugo	03/20/2014	452.13	Uncollectible-Statute of

Shekena D. Macon	03/09/2014	49.00	limitation beyond 10 yrs Uncollectible-Statute of limitation beyond 10 yrs
James M. Malone	03/22/2014	98.89	Uncollectible-Statute of limitation beyond 10 yrs
Mary H. Manning	03/10/2014	80.00	Uncollectible-Statute of limitation beyond 10 yrs
Charles Mason	03/13/2014	89.52	Uncollectible-Statute of limitation beyond 10 yrs
Patrick L. McLeod	03/05/2014	574.50	Uncollectible-Statute of limitation beyond 10 yrs
Mary L. Mitchell	03/20/2014	75.00	Uncollectible-Statute of limitation beyond 10 yrs
Bertha H. Mosley	03/03/2014	438.34	Uncollectible-Statute of limitation beyond 10 yrs
Dottice R. Nelson	03/13/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Shannon R. Padgett	03/29/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Clarence Painter	03/09/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Slavko Pavlovic	03/21/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Clarence L. Peace	03/10/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Perla Perez	03/04/2014	542.60	Uncollectible-Statute of limitation beyond 10 yrs
Cytrina Q. Perry	03/28/2014	465.98	Uncollectible-Statute of limitation beyond 10 yrs
George E. Perry	03/27/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Sherell Perry-Edwards	03/18/2014	52.39	Uncollectible-Statute of limitation beyond 10 yrs
Margurite Person	03/12/2014 & 03/19/2014	933.07	Uncollectible-Statute of limitation beyond 10 yrs
Gregory A. Poland	03/27/2014	560.65	Uncollectible-Statute of limitation beyond 10 yrs
Samuel Ponce-Zuniga	03/16/2014	181.33	Uncollectible-Statute of limitation beyond 10 yrs
Damon J. Preston	03/08/2014	1,056.05	Uncollectible-Statute of limitation beyond 10 yrs
Eric L. Reid	03/20/2014	695.91	Uncollectible-Statute of limitation beyond 10 yrs
Joseph A. Rennix	03/19/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Kenneth N. Roberson	03/29/2014 & 03/30/2014	225.00	Uncollectible-Statute of limitation beyond 10 yrs
David L. Rogers	03/17/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Sandra Sarvis	03/14/2014	542.66	Uncollectible-Statute of limitation beyond 10 yrs
Ahmad Q. Shahit	03/24/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Eddie S. Short	03/06/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Acrel C. Simon	03/26/2014	94.42	Uncollectible-Statute of limitation beyond 10 yrs
Ahkeem Simril	03/24/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Angela D. Smith	03/13/2014	103.58	Uncollectible-Statute of limitation beyond 10 yrs

Misty L. Southerland	03/29/2014	483.02	Uncollectible-Statute of limitation beyond 10 yrs
Thelma L. Springs	03/01/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Monett Stevenson	03/14/2014	304.95	Uncollectible-Statute of limitation beyond 10 yrs
Shareka Stewart	03/10/2014	75.00	Uncollectible-Statute of limitation beyond 10 yrs
Michael S. Stroman	03/31/2014	217.69	Uncollectible-Statute of limitation beyond 10 yrs
Lottie C. Talley	03/28/2014	100.00	Uncollectible-Statute of limitation beyond 10 yrs
Patricia A. Tarry	03/16/2014	444.73	Uncollectible-Statute of limitation beyond 10 yrs
Vicki L. Tarry	03/28/2014	36.00	Uncollectible-Statute of limitation beyond 10 yrs
Vickie J. Tarry	03/27/2014	494.73	Uncollectible-Statute of limitation beyond 10 yrs
Larry D. Taylor	03/02/2014	447.93	Uncollectible-Statute of limitation beyond 10 yrs
Richard Tharrington	03/07/2014	444.01	Uncollectible-Statute of limitation beyond 10 yrs
William G. Tillotson	03/01/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Annie S. Towler	03/07/2014	75.00	Uncollectible-Statute of limitation beyond 10 yrs
Keena S. Towns	03/25/2014	91.65	Uncollectible-Statute of limitation beyond 10 yrs
Thomas E. Vass	03/10/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Juan Vera-Fernandez	03/04/2014	542.60	Uncollectible-Statute of limitation beyond 10 yrs
David M. Wade	03/28/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Darius E. Watkins	03/24/2014	181.36	Uncollectible-Statute of limitation beyond 10 yrs
Tamatha K. Weaver	03/12/2014	450.06	Uncollectible-Statute of limitation beyond 10 yrs
Robert D. West	03/02/2014	508.58	Uncollectible-Statute of limitation beyond 10 yrs
Pauline B. White	03/14/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Donald L. Wilkerson	03/30/2014	310.34	Uncollectible-Statute of limitation beyond 10 yrs
Shirley F. Williams	03/01/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Jamarion D. Wilson	03/28/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Shaqueema Wilson	03/07/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs
Michael L. Wortham	03/11/2014	594.90	Uncollectible-Statute of limitation beyond 10 yrs
Seiarra D. Wortham	03/11/2014	694.90	Uncollectible-Statute of limitation beyond 10 yrs
Norman R. Yount	03/02/2014	150.00	Uncollectible-Statute of limitation beyond 10 yrs

**TOTAL      \$ 31,199.06**

# EXTENSION HAPPENINGS

VANCE COUNTY CENTER



VANCE COUNTY REGIONAL

## FARMERS MARKET

2024 SEASON

SNAP/EBT Accepted

### MARKET SCHEDULE

HOURS: 8:00 A.M. - 1:00 P.M.

SATURDAYS, APRIL 20TH - DECEMBER 14TH

WEDNESDAYS & SATURDAYS, JUNE 5TH - AUGUST 28TH

### SPECIAL EVENTS

SPRING FLING - MAY 4TH

HANDCRAFTED HOLIDAY MARKET - NOVEMBER 16TH

210 SOUTHPARK DR., HENDERSON, NC

For more information, please contact Market Manager, Pat Ayscue at 252-598-0814 or 252-425-2092 or [farmersmarket@vancecounty.org](mailto:farmersmarket@vancecounty.org)

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# Expanded Food & Nutrition Education Program

BY NITASHA KEARNEY

The Expanded Food and Nutrition Education Program associate flooded the Spring season with a host of health and nutrition programs for the month of March. March 13-17 4-H participants attended the Ignite Conference at the Westin Hotel in Washington DC! Students attended workshops on Agriscience, Healthy Living and STEM! Twelve hundred teens from all 50 states and Puerto Rico toured FDR memorial, Jefferson, Korean War, Lincoln, MLK, Vietnam Veterans and WWII Memorial. March 25-30, 2024, North Carolina A&T State University Cooperative Extension celebrated Small Farms week. Partnerships with Clark Street Boys & Girls club allowed students to excel in Organ Wiseguys curriculum. Dinah Gore participants are excited about the challenge in May. Training has been very demanding and fulfilling!



## Small Farms Week Food & Toiletries Drive

BY WAYNE ROWLAND

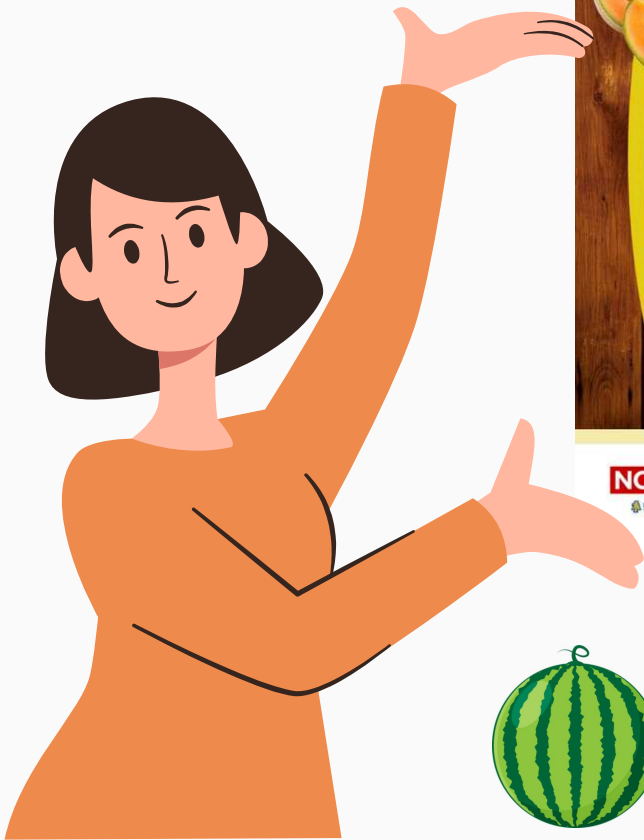
The North Carolina Cooperative Extension, Vance County Center hosted a food and toiletry drive from February 12th – March 22nd, 2024, in honor of our local farmers in conjunction with Small Farms Week. 61 pounds of food and 32 pounds of toiletries was collected through the food drive was donated to ACTS (Area Christians Together in Service).



A big thank you to all that were able to provide to our food and toiletry drive. It's because of your donations that we were able to provide to those in need.



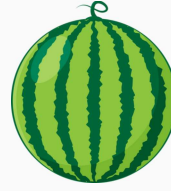
**Join us on May 6th,  
2024 at 6:30 PM for  
tips and tricks on  
growing the juiciest  
watermelons &  
cantaloupes!**



An event poster for a workshop. At the top, there is a photograph of watermelons and cantaloupes, some whole and some cut open to show their interiors. Below the photo is a green and yellow circular graphic containing the event details. The text inside the graphic reads: "SUCCESSFUL PRODUCTION OF Watermelons &amp; Cantaloupes MONDAY, MAY 6, 2024 VANCE COUNTY REGIONAL FARMERS MARKET 210 SOUTHPARK DRIVE, HENDERSON, NC 27536". Below this, it says "Learn About" followed by a bulleted list: "• Recommended Varieties of Watermelons &amp; Cantaloupes", "• Nutrient Requirements", "• Insect &amp; Disease Control in Melons", "• Irrigation Practices to Increase Melon Production", and "• Methods to Increase Your Markets for Watermelons &amp; Cantaloupes". It then says "REGISTER AT THIS LINK OR SCAN THE QR CODE PROVIDED:" followed by the URL "https://www.eventbrite.com/e/successful-production-of-watermelons-cantaloupes-tickets-885752318027". At the bottom of the graphic, it says "For more information, please contact Wayne Rowland, Agriculture &amp; Natural Resources Technician at dwrowlan@ncat.edu or 252-438-8188" and includes a QR code. The background of the graphic is a wooden surface.



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### **Grant Opportunity from Leonard-Mobley Small Farm Fund**

The Leonard-Mobley Small Farm Fund is currently accepting applications from small farms in an 11 county area that includes Vance and Warren. The deadline is July 1, 2024. Additional details are available at [dinnerinthemeadow.org](http://dinnerinthemeadow.org).

## Franklin Wheat Field Day May 7th, 2024

N.C. Cooperative Extension  
Franklin County Center  
Tuesday, May 7, 2024  
11:00 a.m. – 1:00 p.m.  
N&N Farms; 1769 NC 39 Hwy.,  
Louisburg, NC 27549

### REGISTRATION IS REQUIRED

Register to attend by 5 p.m. Friday,  
May 3rd at [go.ncsu.edu/franklin-wheat-field-day](https://go.ncsu.edu/franklin-wheat-field-day) or scan the provided  
QR Code provided on flyer.

For more information, contact  
Matthew Place at 919-496-3344  
or [matthew\\_place@ncsu.edu](mailto:matthew_place@ncsu.edu)



**FRANKLIN WHEAT FIELD DAY**  
**TUESDAY, MAY 7<sup>TH</sup>**  
presented by  
**Franklin County Cooperative Extension**  
Join Extension for Franklin Wheat Field Day!

**Tuesday, May 7th, 2024**  
**11:00 am-1:00 pm at**  
**N&N Farms**  
**1769 NC 39 Hwy**  
**Louisburg, NC 27549**

Registration is required.  
Register to attend by 5 pm Friday, May 3rd.

To register online, Follow the below link.  
<https://go.ncsu.edu/franklin-wheat-field-day>  
or Scan code.



You can also contact the Franklin County Extension Center  
office, **919-496-3344** to be registered.  
Lunch will be provided.

For more information, contact Matthew Place,  
Extension Agent, 919-496-3344, or [matthew\\_place@ncsu.edu](mailto:matthew_place@ncsu.edu).

**NC COOPERATIVE EXTENSION**  

NC Cooperative Extension is an equal opportunity provider.  
Contact [matthew\\_place@ncsu.edu](mailto:matthew_place@ncsu.edu) or 919-496-3344 for accommodations related to a disability.

# MIND YOUR MONEY \$\$\$

By Dr. Wykia Macon

April is National Financial Capability Month! Vance and Granville Counties Cooperative Extension County Directors are working together to offer a money management program for families.

Each Monday this month, 30+ people are showing up and learning about tackling debt, making big purchase, budgeting, credit scores, and more!

**FAMILY FINANCIAL MANAGEMENT SERIES**

## MIND YOUR MONEY

**APRIL 1, 8, 15, 22, 29**  
**5:30 - 7:30 P.M.**

The series is open to Middle and High School students who will be accompanied by one adult. Both youth and adult must be present in each class. Please register each family member separately.

Each Money Monday in April we will explore different financial topics. The program will begin with a family dinner at 5:30 PM and continue with engaging activities and guest speakers.

- ✓ Tackling Debt
- ✓ Budgeting
- ✓ Financing Housing and Vehicles
- ✓ Understanding & Building Credit Scores
- ✓ Planning For Retirement

**Vance Granville Community College**  
**Seminar Room 1 (Bldg. 9, Civic Center)**

**REGISTER AT THIS LINK OR SCAN THE QR CODE PROVIDED:**  
<https://go.ncsu.edu/mindyourmoney>

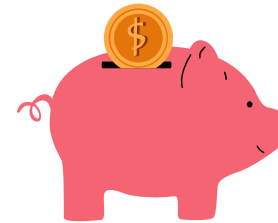


Dr. Wykia Macon, Cooperative Extension Director at 252-430-8188 or [wsmacon@ncsu.edu](mailto:wsmacon@ncsu.edu) or Charissa Puryear, Cooperative Extension Director 919-603-1350 or [charissa\\_puryear@ncsu.edu](mailto:charissa_puryear@ncsu.edu)

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**GROWING GARDENERS**

**APRIL 3RD**  
9:00 A.M. - 12 P.M.

AGES 5 - 12 YEARS OLD

LEARN ABOUT 

- + Growing Your Own Plants
- + Composting
- + Working with Pollinators (Bees)

Vance County Regional Farmers Market  
210 Southpark Drive  
Henderson, NC

For More Information,  
Contact Wykia Macon, Ph.D., 4-H Agent  
252-438-6188 or wmacon@ncsu.edu

REGISTER AT THIS LINK  
or scan the qr code provided:  
<https://go.ncsu.edu/vancegrowinggardener>



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BY DR. WYKIA MACON

From Congressman Don Davis' Facebook Page: "The Vance County Cooperative Extension sponsors a fantastic initiative called Growing Gardeners that teaches young students and their parents during spring break all about the benefits of growing plants, composting, and beekeeping. With Growing Gardeners, our young minds not only have the opportunity to develop green thumbs but also gain valuable life skills that will benefit them for years to come. It was great witnessing the excitement and adventure of gardening come alive."

We are very thankful for our Vance/Warren Counties Extension Master Gardeners and Beekeepers Club for teaching our Growing Gardeners about companion planting, composting, pollinators, and more. We also want to express our gratitude to Franklin Brothers Nursery and Greenhouses for donating basil, marigolds, and tomato plants for our little gardeners.

Great things are happening in Vance County!



**V.I.E.W.**

**Vance-Granville's Initiative on Equity for Women presented it's 3rd Annual Women's Summit entitled: "Owning Our Womanhood, Wearing Our Crowns"**

Dr. Wykia Macon was a panelist at Vance Granville's Initiative on Equity for Women (VIEW) on Thursday, March 21st. She and two other women in the community talked about healthy living and eating.

Dr. Macon promoted the use of USDA.Gov's resources such as MyPlate, along with kitchen tools such as air fryers and instapots. She also promoted purchasing local fruits and vegetables at the Vance County Regional Farmers Market

For more information, please contact V.I.E.W. Co-Chairs, Dr. Krystal Foxx at [foxxk@vgcc.edu](mailto:foxxk@vgcc.edu) or call 252-738-3466 and Sherri Alston at [alstons@vgcc.edu](mailto:alstons@vgcc.edu) or call 252-738-3252.



## College Tours

BY MICAH SHARPE



Mr. Sharpe partnered with Recreation and Parks to take high-schoolers on a three-day college tour excursion. Campuses toured include Shaw University, NC Central University, NC State University, University of North Carolina, Winston Salem University, and NC A&T University.

For more information on 4-H efforts, please contact Mr. Sharpe at [mosharpe@ncsu.edu](mailto:mosharpe@ncsu.edu)



## VISIT TO NCSU

BY MICAH SHARPE & DR. WYKIA MACON

Micah Sharpe, along with Dr. Wykia Macon, took Vance County Cooperative Extension’s Teen Leaders and Boys & Girls Club North Central’s Garden Club to NC State University to engage in learning activities related to horticulture. The students had a fun filled spring break day at NC State University. Thanks to the campus staff, youth were able to participate in different hands-on activities and experiment including: plant propagation, seed planting, soil mineral separation, cheerios iron experiment, and exposure to many new/different plants. We had a great time eating in one of NCSU’s dining halls, too!



# Vance County 4-H Summer Fun

BY MICAH SHARPE

The moment we have all been waiting for is now upon us! Summer fun activities are now finalized and registration will begin the first week of May. With limited space available, we would advise you to sign up at your earliest convenience.



4-H Youth Development

## Vance and Warren Beekeepers

BY WAYNE ROWLAND

The Vance Warren Beekeepers met on Monday, April 8, at 7:00 p.m at the Vance County Regional Farmers Market, 210 Southpark Drive in Henderson with 15 members attending. The Honeybee Swarm prevention was the program topic. Callouts to swarms have been up. The Vance Warren Beekeepers have been busy collecting bee swarms. Swarming season is generally from the end of spring and until late summer.

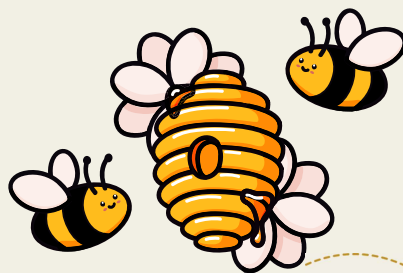
Swarms can be found pretty much anywhere but most of the time the swarms are in the hollow of a tree, on a bush, inside a garage. They can also be found in low areas. Swarming is a natural process and is a hive's way of reproducing. The queen bee starts laying the eggs in the spring and can lay 1,000 to 1,500 eggs a day. The hive gets too full, the colony splits up and goes in search of new homes.

If you come across a swarm, don't panic. Contact your local N.C. Cooperative Extension county office and they will contact an experienced beekeeper out to collect the colony.

The 1st Beginning Beekeepers school concluded April 6 with 10 students ready to start beekeeping this spring. These students learned all about the honey bee but also now have a sense of responsibility to teach others about the honey bee and enjoyment of beekeeping.

Remember, the Vance Warren Beekeepers welcome all who have an interest in beekeeping, and you do not need to actually have bees to attend! The next meeting will be Monday, May 13, at 7:00 p.m. at the Vance County Regional Farmers Market.

***Pictured below is a swarm on a fence at Walmart Distribution Center and a swarm on a tree at the Vance County Regional Farmers Market.***



# Vance County Regional Farmers Market



Presents

2024

# Spring FLING



PRODUCE • PLANTS • MEATS • HONEY  
BAKED & CANNED GOODS • STRAWBERRIES  
JAMS & JELLIES AND LOTS OF CRAFTS!

SATURDAY

4

MAY

8 AM -  
2 PM

210 SOUTHPARK DRIVE, HENDERSON, NC

.....  
FOR MORE INFORMATION CALL 252-598-0814 OR VISIT US AT  
[WWW.FARMERSMARKET@VANCECOUNTY.ORG](http://WWW.FARMERSMARKET@VANCECOUNTY.ORG)



N.C. State University and N.C. A&T State University are collectively committed to positive action to secure equal opportunity and prohibit discrimination and harassment regardless of race, color, national origin, religion, political beliefs, family and marital status, sex, age, veteran status, sexual identity, sexual orientation, genetic information, or disability. N. C. State, N.C. A&T, U.S. Department of Agriculture and local governments cooperating.

Vance County Regional Farmers Market

**Vance County Emergency Medical Service**  
**04/01/2024- 04/29/24 Call Breakdown**

**EMS Calls Totals By Station**

Company 9 (Main)	404
Company 1 (Bearpond FD)	173
<b>Apr-24</b>	<b>577</b>

**EMS Calls By Medical Category**

Abdominal Pain	11
Allergies	4
Altered Mental Status	9
Animal Bite	3
Assault	7
Back Pain	10
Breathing Problems	62
Burns	2
Cardiac Arrest	12
Chest Pain	37
Choking	0
CO Poisoning / Hazmat	0
Code Stroke	3
Convulsions / Seizure	28
Diabetic Problem	17
Dialysis Shunt Issue	0
Drowning	0
Electrocution	0
Eye Problem	1
Fall Victim	4
Fire Standby	14
Headache	3
Heart Problems	4
Heat/Cold Exposure	0
Hemorrhage/Laceration	19
Industrial Accident	0
Ingestion/Poisoning/Overdose	11
Inter-Facility Trx (STEMI, Other)	0
Medical Alarm	0
Newborn	0
Not Applicable	36
Not Entered	0
Not Known	0
Pain	45
Pregnancy / Childbirth	2
Psychiatric Problems	12
Respiratory Arrest	0
Sick Person	140
Stab/Gunshot Wound	1
STEMI	2

**EMS Calls By Medical Category (cont.)**

Stroke/CVA	4
Traffic Accident	0
Transfer / Interfacility	0
Trauma, Arrest	1
Traumatic Injury	24
Unconscious / Fainting	17
Unknown Problems	32
<b>Apr-24</b>	<b>577</b>

**EMS Calls By Outcome**

ALS Assist	0
Cancelled Enroute	20
Dead at Scene	11
Interfacility Transport	0
Mutual Aid Given	0
No Patient Found	68
Not Entered	0
Patient Refused Care	23
Standby	2
Treated, Refused transport	55
Treated, Transferred Care	56
Treated, Transported by EMS	342
<b>Apr-24</b>	<b>577</b>

**Mileage Report**

Unit	Mileage
101	152,957
102	199,288
103	187,326
104	135,696
105	170,318
106	94,753
107	139,658
108	10,179
110	N/A
112	144,192
114	151,813
1101	50,123

**\*\* This report is 1 days short\*\***

## Staffing log

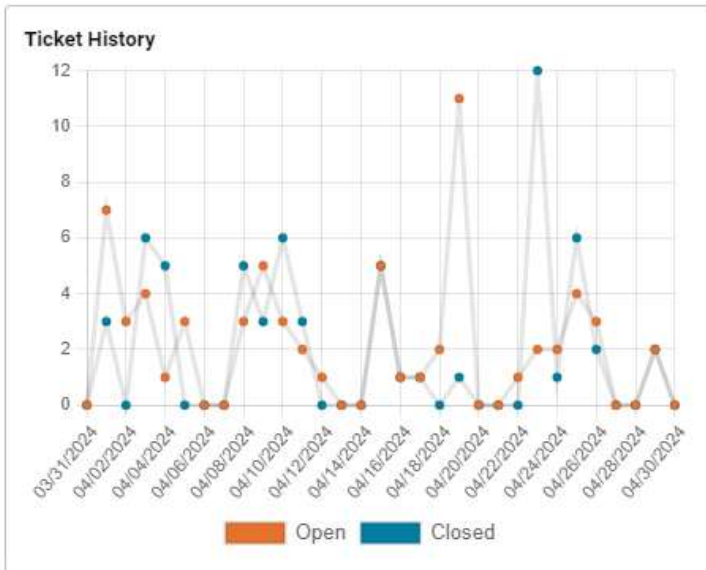
**April**

Date	Total Personnel		Total units		QRV (Y/N)	
	First 12	Last 12	First 12	Last 12	First 12	Last 12
04/01/24	8	8	4	4	Y	Y
04/02/24	6	6	3	3	Y	N
04/03/24	6	6	3	3	N	Y
04/04/24	8	6	4	3	Y	Y
04/05/24	8	8	4	4	Y	Y
04/06/24	8	6	4	3	Y	Y
04/07/24	6	5	3	3	Y	N
04/08/24	8	8	4	4	Y	Y
04/09/24	8	8	4	4	Y	Y
04/10/24	8	8	4	4	Y	Y
04/11/24	8	8	4	4	Y	Y
04/12/24	7	8	4	4	N	Y
04/13/24	8	8	4	4	Y	Y
04/14/24	8	8	4	4	Y	Y
04/15/24	7	8	4	4	N	Y
04/16/24	8	8	4	4	Y	Y
04/17/24	8	8	4	4	Y	Y
04/18/24	8	8	4	4	Y	Y
04/19/24	6	6	3	3	Y	Y
04/20/24	8	8	4	4	Y	Y
04/21/24	8	8	4	4	Y	Y
04/22/24	8	8	4	4	Y	Y
04/23/24	8	8	4	4	Y	Y
04/24/24	8	8	4	4	Y	Y
04/25/24	8	8	4	4	Y	Y
04/26/24	6	6	3	3	Y	Y
04/27/24	7	7	4	4	N	N
04/28/24	8	8	4	4	Y	Y
04/29/24	8	8	4	4	Y	Y
04/30/24	7	8	4	4	N	Y



Dashboard • Last 30 Days ▾ All Organizations ▾

<b>New Tickets</b> <b>66</b> ↑ 25	<b>Your Tickets</b> <b>11</b> ↑ 10	<b>Open Tickets</b> <b>10</b> ↑ 10	<b>Unassigned Tickets</b> <b>1</b> ↑ 1
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### First Response Time

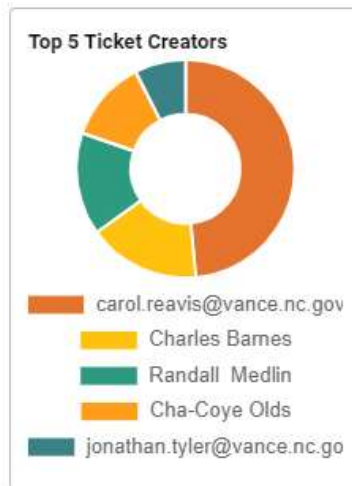
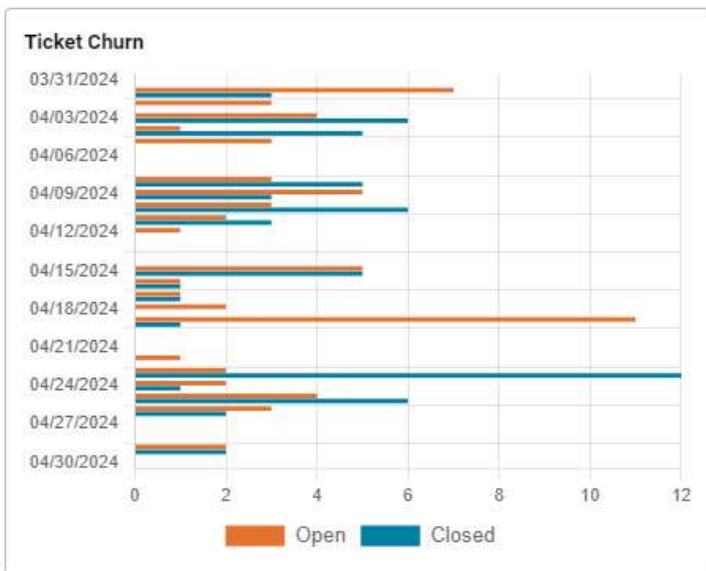
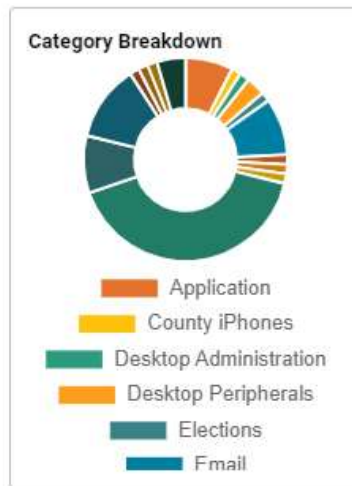
Average

**5 hours 5 minutes**

### Tickets Close Time

Average

**1 month 0 days**



## RECREATION/PARKS

### 2024 APRIL RECREATION PROGRAM SUMMARY

#### RECREATION PROGRAM DIVISION

#### YOUTH ATHLETICS

- ✚ Henderson-Vance Recreation and Parks Department will complete T-Ball, Baseball and Softball registrations on Tuesday March 26, 2024. Skill Assessment is set for Wednesday March 27, 2024 for Softball and Thursday March 28, 2024 for baseball.
- ✚ Mattie McGhee, HV Recreation and Parks Program Specialist coordinated and schedule Earth Day Project for ages 4-12 is coming up Monday April 15<sup>th</sup>, 2024.
- ✚ Mattie McGhee, HV Recreation and Parks Program Specialist coordinated and schedule Kickball Day for ages 15 and up is coming up Thursday June 20<sup>th</sup>, 2024.
- ✚ Henderson-Vance Recreation and Parks Department has 3 teams to compete in the Statewide Athletic Conference (SWAC) Tournament, 10U Boys and 12U Boys played in Butner while the 12U Girls played in Rocky Mounty, NC. 10u Boys placed 2<sup>nd</sup> Place and the 12U Boys placed 1<sup>st</sup>, both teams are advancing to State Tournament in Rocky Mount, NC. The 14U Boys has a state only tournament
- ✚ For tee-ball we had 65 Participants to sign up and with those 65 participants we were able to make 5 teams for tee-ball. For 7-9 softball we had 26 participants to sign up and with those 26 participants we were able to make 2 teams. For 10-12 softball we only had 11 participants to sign up and with those 11 participants we were able to make 1 team. For 13+ softball we had 33 participants to sign up and with those 33 participants we were able to make 3 teams.
- ✚ For 7-9 baseball we had 37 participants to sign up and was able to make 3 teams. For 10-12 baseball we had 28 participants to sign up and was able to make 2 teams. And for 13+ baseball so far we had 15 participants and still waiting for more participants for 13+ longball that will take place after regular season.
- ✚ All practices started April 8<sup>th</sup>.

## **Youth Services**

### **Community Service/Restitution**

- ✚ There are zero new admissions. The goal is to serve 40. There are currently 5 youth enrolled in Community Service. We had two successful terminations. We currently Served Year to Date 14 youths.

### **Teen Court**

- ✚ There were five teen court club practices this month. There were zero cases. Two referrals have been received this month. Teen court club will participate in the Teen Court Summit April 19<sup>th</sup> – April 21<sup>st</sup>.

### **Project Youth Outreach**

- ✚ There were twenty-eight new admissions. There are currently 74 total youth enrolled into the program. We will begin serving youth at Clarke Elementary and Zeb Vance Elementary.
- ✚ Darius Pitt, Youth Service Program Coordinator and Linnoya Watkins, Youth Service Outreach Administrator and Lauren Jones, Youth Service Outreach Specialist took Aycock Elementary students to Adventure Island in Henderson, NC, Thursday April 11<sup>th</sup>, 2024.
- ✚ Darius Pitt, Youth Service Program Coordinator and Linnoya Watkins, Youth Service Outreach Administrator and Lauren Jones, Youth Service Outreach Specialist took Pinkston St. students to Before the First Frame in Henderson, NC, Monday, April 22<sup>nd</sup>, 2024.
- ✚ Darius Pitt, Youth Service Program Coordinator and Linnoya Watkins, Youth Service Outreach Administrator and Lauren Jones, Youth Service Outreach Specialist took EM Rollins students to Youth Services Outreach office in Henderson, NC, on Tuesday, April 23<sup>rd</sup>, 2024.

- ✚ Darius Pitt, Youth Service Program Coordinator and Linnoya Watkins, Youth Service Outreach Administrator and Lauren Jones, Youth Service Outreach Specialist took Carver students to Adventure Island in Henderson, NC, Thursday, April 25<sup>th</sup>, 2024.

### **Programming/Training/Meetings**

- ✚ Linnoya Watkins, Youth Service Outreach Specialist attended Women in Business on April 9, 2024
- ✚ Darius Pitt, Youth Service Outreach Coordinator attended a marketing and event planning conference on April 9<sup>th</sup> – April 10<sup>th</sup>, 2024.
- ✚ Darius Pitt, Youth Service Program Coordinator, Linnoya Watkins, Youth Service Outreach Administrator, and Lauren Jones, Youth Service Outreach Specialist attended Recreation Advisory Council (RAC) on Thursday, April 11<sup>th</sup>, 2024.
- ✚ Linnoya Watkins, Youth Service Outreach Administrator, Lauren Jones, Youth Service Outreach Specialist, Darius Pitt, Youth Service Outreach Coordinator, and Shantel Hargrove, Assistant Director, collaborated and completed JCPC monitoring on April 12<sup>th</sup>, 2024.
- ✚ Darius Pitt, Youth Service Program Coordinator and Linnoya Watkins, Youth Service Outreach Administrator and Lauren Jones, Youth Service Outreach Specialist attended Unit Meeting at Henderson-Vance Recreation & Parks on April 12<sup>th</sup>, 2024.
- ✚ Darius Pitt, Youth Service Program Coordinator and Linnoya Watkins, Youth Service Outreach Administrator and Lauren Jones, Youth Service Outreach Specialist attended JCPC meeting at Vance County Schools on April 18<sup>th</sup>, 2024.
- ✚ Darius Pitt, Youth Service Program Coordinator and Linnoya Watkins, Youth Service Outreach Administrator and Lauren Jones, Youth Service Outreach Specialist attended JAC meeting at Vance County Schools on April 19<sup>th</sup>, 2024.
- ✚ Darius Pitt, Youth Service Program Coordinator and Linnoya Watkins, Youth Service Outreach Administrator and Lauren Jones, Youth Service Outreach Specialist attended NCCAY conference on April 24<sup>th</sup>, 2024
- ✚ Lauren Jones, Youth Service Outreach Specialist and Aquatics/Program Specialist Yuri Hinton PYO with E M Rollins students Tuesday April 9, 2024

- ✚ Field Trip to Bowling Alley Henderson, NC Monday, April 22, 2024
- ✚ Field Trip to Swim at Aycock Pool Tuesday, April 22, 2024

### Community Outreach

- ✚ Darius Pitt, Youth Service Program Coordinator and Lauren Jones, Youth Service Outreach Specialist hosted college tours, “Campus to Campus”, from April 2<sup>nd</sup> to April 4<sup>th</sup>, 2024. Day 1: North Carolina Central University and Shaw University. Day 2: North Carolina State University and University of North Carolina at Chapel Hill. Day 3: Winston Salem State University and North Carolina A&T State University. A total of 30 youth attended throughout the week.
- ✚ YSO hosted Spring Break Bash at YSO on April 6<sup>th</sup>, 2024 for middle and highschoolers. Seven middle schoolers participated.

### AQUATICS

- ✚ Aquatics/Program Specialist Yuri Hinton coordinating aquatic/pool program. Patrons are participating each Monday/Wednesday/Friday for 2 sessions 9:45am-10:30am and 10:45am-11:30am.
- ✚ Aquatics/Program Specialist Yuri Hinton coordinating open swim schedule for the pool/aquatic center for weekends only.

### AYCOCK RECREATION CENTER

#### ✚ **City, County, and Vance County School employee attendance:**

- City Employees = 1
- County Employees = 0
- Vance Co. School Employees = 3

**447 Patron check-ins** (This excludes numbers for rentals, meetings, classes, aquatic events, and youth athletics.)

- **Daily Use**
  - \$870.00 Revenue
- **Memberships: (New)**
  - \$ 305.00 Revenue
- **Multipurpose room rentals: 2**
- **Lobby rentals: 2**
- **Fox Pond shelter rentals \$110.00**
- **Ballfield rentals: 1 (Vance Charter Baseball)**
- **Program Registrations: \$4172.00**

- **(0) Gym rentals:**
- Eaton Johnson Gym =1 (Franklin Vance Warren HeadStart)

## **RECREATION PROGRAMS**

- ✚ Senior Bingo
  - 24 Participants for 2 Events
  - There will also be BINGO held on Thursday April 18 and 25, 2024
  - Free Program
- ✚ Visually Impaired Program (VIP)
  - 9 participants attended support group meeting April 9, 2024
  - There was VIP chair exercise on Tuesday March 19, 2024 with 4 participants
  - VIP bowling was on Tuesday March 26, 2024 with 7 participants
  - VIP bowling will be held on Tuesday April 23, 2024
  - Free Program
- ✚ Golden Age Club
  - 17 participants for 2 meetings
  - There will also be a meeting held on April 24, 2024
  - Free Program
- ✚ Senior Trip
  - Seniors attended a trip on Wednesday March 20, 2024 to Bennett Place and shopping with 19 participants.
  - There is a trip planned for Wednesday April 17, 2024 to Fuquay-Varina for shopping and lunch
- ✚ D.R.E.A.M
  - Queen of Diamonds held 5 practices with participants.
  - There was practice held on March 20, 24, 25 and 27, 2024 with 47 participants
  - There will also be practice held on April 15, 17, 21, 22, 24, and 28, 2024
- ✚ Special Olympic Bowling
  - There was practice held on March 19 and 26, 2024 with 14 participants.
- ✚ Special Olympic Basketball
  - There were 2 practices with 19 participants
  - There will also be practices held on April 16, 23 and 30, 2024.
- ✚ Pickleball
  - 5 participants for 1 event
  - Pickleball was also held on March 21 and 28, 2024 with 15 participants
- ✚ Senior Games
  - Opening Ceremonies and Corn hole was held on Friday March 22, 2024 with 68 registered participants for corn hole

- Thursday April 4, 2024 there was 32 registered for Doubles and mixed Double participants
- Tuesday April 9, 2024 there was 41 registered participants for Horse shoes
- Wednesday April 10, 2024, there were 27 Croquet participants, 8 Table Tennis Doubles, 18 Table Tennis Singles, 14 Badminton Singles, 8 Badminton Doubles, 2 Badminton mixed doubles.
- Tuesday April 16, 2024 there is 28 registered for min golf
- Field Day is Scheduled for April 19, 2024
- Pickle ball Singles is scheduled for April 23, 2024, Pickleball Double and Mixed Doubles scheduled for April 26, 2024, Basketball shot and Fun Walk scheduled for April 30, 2024.
- ✚ Kids Explorer
  - Kid Explorer Earth Day will be held on Monday April 22, 2024
- ✚ Meetings, Classes, and Trainings
  - Queen of Diamonds Parent meeting held on Sunday April 7, 2024
  - RAC meeting held on Thursday April 11, 2024
  - Unit meeting held on Friday April 12, 2024

## **ADMINISTRATION**

- ✚ Shantel Hargrove, Assistant Director, attended City Council Meeting on, Monday April 8, 2024.
- ✚ Shantel Hargrove, Assistant Director, attended Monthly Part-time meeting on, Monday April 8, 2024.
- ✚ Shantel Hargrove, Assistant Director, assisted with interviews on, Monday April 8, 2024.
- ✚ Shantel Hargrove, Assistant Director, attended Safe Kids Meeting on, Tuesday, April 9, 2024.
- ✚ Shantel Hargrove, Jocelyn Hardy attended Women's Business Lunch on, Tuesday, April 9, 2024.
- ✚ Shantel Hargrove, Assistant Director, conducted a tour for Student Leadership on Wednesday, April 10, 2024.
- ✚ Shantel Hargrove, Assistant Director, attended WOW Coalition meeting on Wednesday, April 10, 2024.
- ✚ Recreation an Parks Department attended the Recreation and Parks Advisory Committee (RAC) meeting on Thursday, April 11, 2024.
- ✚ Shantel Hargrove, Assistant Director, attended JCPC monitoring for Youth Services on Friday, April 12, 2024.
- ✚ Shantel Hargrove, Assistant Director, conducted a Unit meeting with the Youth Services Outreach Unit on Friday, April 12, 2024.
- ✚ Kendrick Vann, Shantel Hargrove and Yuri Hinton attended Red Cross Training on Monday, April 29, 2024 and Monday April 29, 2024 for complete the First Aid/CPR/AED Instructor Training. All 3 pass the course.

- ✚ Shantel Hargrove, Assistant Director, attended EAP Zoom meeting on Friday April 12, 2024.
- ✚ Shantel Hargrove, Assistant Director, attended Juneteenth Planning meeting on Tuesday April 16, 2024.
- ✚ Recreation and Parks Department held Executive staff meeting on Tuesday April 17, 2024.
- ✚ Kendrick Vann and Shantel Hargrove attended JCPC on Thursday, April, 18, 2024.
- ✚ Kendrick Vann, Recreation and Parks Director held the first Sarcoidosis Awareness Run/Walk/Ride 5K event on Saturday April 20, 2024 at Aycock Recreation Center and Fox Pond Park. 27 participants registered for this event.
- ✚ Youth attended Teen Court Summit Friday -Sunday, April 19-21, 2024.
- ✚ Shantel Hargrove, Assistant Director, attended Tri County (Franklin, Granville, and Vance) Community Collaborative on Tuesday, April 23, 2024.
- ✚ Shantel Hargrove, Assistant Director, attended NCCAY Regional Meeting on Wednesday, April 24, 2024.
- ✚ The Recreation and Parks Department attended Community Clean-up on Friday, April 26, 2024.



**Vance County Planning & Development's**  
**Activity Report - By Project Type**  
**04/01/24 to 04/29/24**

	Permits Issued	Total Inspections	TCO's Issued	CO's Issued	Total Value	Total Fees
Fire/Safety	3	5	0	0	\$0.00	\$110.00
Electrical Permit (R)	8	13	0	0	\$45,400.00	\$550.00
Electrical Permit (C)	3	3	0	0	\$22,200.00	\$300.00
Electrical Permit Reconnection (R)	2	4	0	0	\$600.00	\$110.00
Electrical Permit Reconnection (C)	1	1	0	0	\$1,500.00	\$55.00
Mechanical Permit (R)	2	8	0	0	\$18,170.00	\$165.00
Mechanical Permit (C)	3	2	0	0	\$41,990.38	\$400.00
Plumbing Permit (R)	3	5	0	0	\$30,500.00	\$165.00
Plumbing Permit (C)	1	2	0	0	\$14,200.00	\$100.00
Plumbing VCWD	4	1	0	0	\$11,887.11	\$205.00
Building New Multi-Family (C)	0	4	0	0	\$0.00	\$0.00
Building Permit New (C)	4	0	0	0	\$3,682,000.00	\$11,778.43
Building Upfit/Remodel (C)	2	15	0	2	\$528,967.00	\$2,640.00
Building Addition (C)	1	4	0	0	\$84,650.00	\$450.00
Building New Single Family (R)	4	51	0	2	\$830,000.00	\$3,370.00
Building New Modular (R)	0	12	0	2	\$0.00	\$0.00
Building Addition (R)	3	5	0	1	\$215,500.00	\$1,324.00
Building Remodel (R)	9	20	0	3	\$315,294.41	\$2,777.00
Building Accessory (R)	7	13	0	1	\$169,860.00	\$650.00
Building Accessory (R) - Deck/Ramp	3	3	0	0	\$22,000.00	\$330.00
Cell Tower	0	5	0	1	\$0.00	\$0.00
Demolition Permit	3	0	0	0	\$53,000.00	\$165.00
Pool Permit	0	2	0	0	\$0.00	\$0.00
Sign Permit	1	1	0	0	\$6,356.00	\$205.00

Manufactured Home Single Wide (R)	2	6	0	0	\$25,000.00	\$420.00
Manufactured Home Double Wide (R)	3	15	0	2	\$100,000.00	\$875.00
BOA - Variance	1	0	0	0	\$0.00	\$250.00
Zoning - Single Family	7	0	0	0	\$0.00	\$420.00
Zoning - Residential Addition	2	0	0	0	\$0.00	\$120.00
Perk/Recert Authorization	17	0	0	0	\$0.00	\$425.00
Zoning - Miscellaneous	7	0	0	0	\$0.00	\$420.00
<b>Totals</b>	<b>106</b>	<b>200</b>	<b>0</b>	<b>14</b>	<b>\$6,219,074.90</b>	<b>\$28,779.43</b>
<b>Average</b>		<b>6</b>	<b>0</b>	<b>0</b>	<b>\$200,615.32</b>	<b>\$928.37</b>

**Vance County Planning & Development's  
Tax Office PERMIT Report  
04/01/24 to 04/29/24**

Project Number	Project Description	Permit Issued Date	Short Address	Owner Name	Square Footage	Value	Building - Bathrooms	Building - Bedrooms	Parcel ID
ACC - 24 - 0432	Detach garage	04/10/2024	577 Port Dr.	Hall Gregory F Hall Kristin T	720	\$61,000.00			0372B01038
ACC - 24 - 0437	Accessory building	04/03/2024	185 Sandy Point Dr.	Brian M Daniel	160				0578C01016
ACC - 24 - 0452	In ground pool	04/09/2024	770 Marina Cove Ln.	CWR Enterprises, Inc.	600	\$50,000.00			0319 02019
ACC - 24 - 0467	Accessory building	04/04/2024	306 Sam Brummitt Rd.	Paynter Robbie C Paynter Nancy H	576	\$5,760.00			0600D02013
ACC - 24 - 0487	Detached Garage	04/15/2024	122 NC 39 Loop Rd.	Boyd Lisa C	1,260	\$35,000.00			0541 04011
ACC - 24 - 0521	erect a residential accessory bldg	04/17/2024	184 Tristen Ln.	John F. Dickson	480	\$3,100.00			0550C 01037
ACC - 24 - 0531	Garage	04/18/2024	308 E Stratford Dr.	Buchanan Michael D Buchanan Barbara		\$15,000.00			0410E01004
<b>Building Accessory (R)</b>									
Total Value			<b>\$169,860.00</b>	(Avg.: \$24,265.71)					
Total Square Footage			<b>3,796.00</b>	(Avg.: 542.29)					

Permits Issued:	<b>7</b>
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DECK - 24 - 0389	add 16x14 deck extension	04/02/2024	150 Country Club Dr.	BURNETTE WILLIAM T BURNETTE PHYLLIS	84	\$5,000.00			0048 02006
DECK - 24 - 0457	Addition to porch	04/03/2024	75 Bristol Meadows Rd.	Thompson Stuart L	374	\$5,000.00			0463A01005
DECK - 24 - 0547	Porch	04/22/2024	1455 Vicksboro Rd.	Harrington Sheila	384	\$12,000.00			0532B01005

<b>Building Accessory (R) - Deck/Ramp</b>		
Total Value	<b>\$22,000.00</b>	(Avg.: \$7,333.33)
Total Square Footage	<b>842.00</b>	(Avg.: 280.67)
Permits Issued:	<b>3</b>	

CA - 24 - 0513	Installation of a roof-mounted solar PV system, consisting of 60 modules, 3 inverters, 1 combiner panel, 1 solar disconnect, 1 back-fed breaker.	04/22/2024	115 Young St.	Kilian Llc	3,942	\$84,650.00			0004 03016
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<b>Building Addition (C)</b>		
Total Value	<b>\$84,650.00</b>	(Avg.: \$84,650.00)
Total Square Footage	<b>3,942.00</b>	(Avg.: 3,942.00)

Permits Issued:	<b>1</b>
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ADD - 24 - 0414	Addition to porch and porch roof	04/03/2024	12630 NC 39 Hwy.	ARREOLA-GODIN ABRAHAM ISSAC	1,000	\$15,500.00			0325 04012
ADD - 24 - 0489	enlarge two bedrooms and kitchen	04/22/2024	330 Wildlife Ln.	Abbott Kimberly F	648	\$40,000.00			0457 01012
ADD - 24 - 0509	Addition to single family house	04/22/2024	148 Waters Edge Loop Rd.	Welsh Luke Frederick Welsh Tammy Gray	1,818	\$160,000.00	1	1	0361B01007

<b>Building Addition (R)</b>		
Total Value	<b>\$215,500.00</b>	(Avg.: \$71,833.33)
Total Square Footage	<b>3,466.00</b>	(Avg.: 1,155.33)
Permits Issued:	<b>3</b>	

SFR - 24 - 0275	Stick build home	04/22/2024	985 Meadow Ln.	Tharrington W Dennis Tharrington Amine C	4,495	\$500,000.00	2.5	3	0039 03008
SFR - 24 - 0314	Tiny house construction project for high school students	04/19/2024	925 Garrett Rd.	VANCE CO BOARD OF EDUCATION	360	\$25,000.00	1	1	0536 02001
SFR - 24 - 0472	Construct single family dwelling	04/25/2024	1101 S Chavis Rd.	Smith Charlie Moses C/O Evans Bobby R.-Tr.	2,491	\$275,000.00	2	3	0488 03011
SFR - 24 - 0481	Single Family dwelling	04/08/2024	222 Satterwhite Point Ln.	Kroetsch Thomas J	840	\$30,000.00	2	2	0588 01006

				Schager Roxann L					
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<b>Building New Single Family (R)</b>		
Total Value	<b>\$830,000.00</b>	(Avg.: \$207,500.00)
Total Square Footage	<b>8,186.00</b>	(Avg.: 2,046.50)
Permits Issued:	<b>4</b>	

CN - 24 - 0422	Metal shelter to cover and protect displayed inventory	04/02/2024	420 Warrenton Rd.	Cbrewer Properties Llc	14,400	\$160,000.00			0212 02017C
CN - 24 - 0444	Construct a new commercial self-storage	04/08/2024	115 Warrenton Rd. Bldg. 1	Cpnone Llc	37,079	\$2,644,500.00			0030 02002
CN - 24 - 0445	Construct a new commercial self-storage	04/08/2024	115 Warrenton Rd. Bldg. 5	Cpnone Llc	37,079	\$457,500.00			
CN - 24 - 0446	Construct a new commercial self-storage	04/08/2024	115 Warrenton Rd. Bldg. 6	Cpnone Llc	6,138	\$420,000.00			

<b>Building Permit New (C)</b>		
Total Value	<b>\$3,682,000.00</b>	(Avg.: \$920,500.00)
Total Square Footage	<b>94,696.00</b>	(Avg.: 23,674.00)
Permits Issued:	<b>4</b>	

RMODL - 24 - 0028	Repairs after fire.	04/10/2024	418 Birch St.	Tfg Rentals Llc	288	\$12,000.00	1	2	0060 04009
RMODL - 24 - 0174	Finished interior of house	04/24/2024	150 Sandpipers Ln.	Townsend Phillip E	1,066	\$29,000.00	.5	1	0578C01024

	upstairs.			Townsend Donna M					
RMODL - 24 - 0450	Repair an existing dwelling--insulated crawlspace	04/08/2024	140 Dabney Woods Ln.	Ivey William E Iii Deceased Ivey Shannon L	2,072	\$38,400.00			0407C03012
RMODL - 24 - 0492	Repair crawlspace	04/10/2024	2639 Flemingtown Rd.	Bissinger Bonnie Wester	360	\$24,245.00			0592 01015
RMODL - 24 - 0493	Remodel and existing house.	04/17/2024	714 Harriett St.	Elite Housing Llc	2,110	\$55,000.00	2	4	0086 01025
RMODL - 24 - 0512	repair foundation	04/25/2024	240 Vicksboro Rd.	Numan Vivian N	1,563	\$19,000.00			0082 01005
RMODL - 24 - 0533	Finish out remodel to upstairs	04/23/2024	109 Fernwood Creek Ct. Bldg. C-1	Brain P Edwards & Christy T Edwards	600	\$22,000.00		1	0042A01041
RMODL - 24 - 0542	Roof mounted solar panels	04/22/2024	210 Kerr Lake Rd.	King Dwight G King Jane	671	\$104,849.41			0600A05014
RMODL - 24 - 0546	Repair an Existing Dwelling.	04/23/2024	1916 Oxford Rd.	Adcock Kristal Lynne	1,098	\$10,800.00	2	1	0018 04017

<b>Building Remodel (R)</b>		
Total Value	<b>\$315,294.41</b>	(Avg.: \$35,032.71)
Total Square Footage	<b>9,828.46</b>	(Avg.: 1,092.05)
Permits Issued:	<b>9</b>	

CU - 24 - 0462	Remodel existing	04/08/2024	394 Zeb Robinson Rd.	Monaco Foods Inc	14,000	\$500,000.00			0411 03016
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	commercial building.							
CU - 24 - 0494	REMOVE AND REPLACE ASPHALT SHINGLE ROOF TO DECK. INSTALL NEW FELT, ICE & WATER SHIELD AND NEW ASPHALT SHINGLES- ENTIRE BLDG	04/16/2024	1775 Graham Ave.	Barnett Ruth F C/O Barnett Properties Llc	7,601	\$28,967.00		0215 02010

<b>Building Upfit/Remodel (C)</b>		
Total Value	<b>\$528,967.00</b>	(Avg.: \$264,483.50)
Total Square Footage	<b>21,601.00</b>	(Avg.: 10,800.50)
Permits Issued:	<b>2</b>	

DEMO - 24 - 0453	Remove shingles and install new landmark black shingles	04/02/2024	517 Dabney Rd.	Allen Margaret B		\$9,500.00		0408 02021
DEMO - 24 - 0525	Remove 1-25,000 gallon double wall fiberglass tank, associated products lines, dispenser islands and demo the approximate square foot metal gas station canopy.	04/18/2024	567 Ruin Creek Rd.	567 RUIN CREEK ROAD OWNER LLC		\$40,000.00		0213 03003
DEMO - 24 -	Remove	04/19/2024	490 Horseshoe	Roeder Todd M		\$3,500.00		0426 02020



0545	shingles and put back		Bend Rd.	Roeder Lisa					
<b>Demolition Permit</b>									
Total Value		<b>\$53,000.00</b>	(Avg.: \$17,666.67)						
Total Square Footage		<b>0.00</b>	(Avg.: 0.00)						
Permits Issued:		<b>3</b>							

DWMH - 24 - 0459	Used Double Wide	04/08/2024	322 Joshua Ln.	Rincon Properties Inc			2	3	0593 01052
DWMH - 24 - 0482	Double Wide	04/08/2024	48 Bishop Ln.	Joseph Bishop		\$30,000.00	2	3	0470 02043
DWMH - 24 - 0485	Commerical-double wide accessory/ building used for classrooms.	04/09/2024	1354 Ruin Creek	Harriett Baptist Church Inc		\$70,000.00			0411 04001

<b>Manufactured Home Double Wide (R)</b>									
Total Value		<b>\$100,000.00</b>	(Avg.: \$33,333.33)						
Total Square Footage		<b>0.00</b>	(Avg.: 0.00)						
Permits Issued:		<b>3</b>							

SWMH - 24 - 0464	Resetting mobile home- single wide	04/02/2024	252 New Bethel Church Rd. Bldg. 6	R&J Enterprises Of Vance Llc		\$10,000.00	2	3	0551 02010
SWMH - 24 - 0568	Used single wide	04/26/2024	188 Irene Bullock Ln.	General Properties Llc		\$15,000.00	1	2	0598B01026

<b>Manufactured Home Single Wide (R)</b>									
Total Value		<b>\$25,000.00</b>	(Avg.: \$12,500.00)						

Total Square Footage	<b>0.00</b>	(Avg.: 0.00)
Permits Issued:	<b>2</b>	

<b>TOTALS:</b>	Square Footage:	<b>146,357.46</b>	(Avg.: 3,658.94)
	Value:	<b>\$6,026,271.41</b>	(Avg.: \$150,656.79)
	Total Projects:	<b>41</b>	
	Permits Issued:	<b>41</b>	

DATE 3/28/24 100 REAL AND LISTED PERSONAL  
 TIME 17:09:59 REVENUE UNIT: ALL  
 USER VNDEVONA

VANCE COUNTY  
 LEVY COLLECTED REPORT  
 AS OF RUN DATE

REVENUE UNIT/YEAR

PAGE 1  
 PROG# CL2237

YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2000	00 VANCE COUNTY TAXES	122,344.23		100,228.76		21,524.95		590.52
	A ASSESSMENT	27,900.00		17,234.52		10,665.48		
	L LATE LISTING	86.71		6.59		80.12		
	* YEAR TOTAL	150,330.94		117,469.87		32,270.55	99.61	590.52
2001	00 VANCE COUNTY TAXES	199,122.20		130,770.33		67,251.26		1,100.61
	A ASSESSMENT	37,026.89		23,726.14		13,300.75		
	L LATE LISTING	165.27		136.13		29.14		
	* YEAR TOTAL	236,314.36		154,632.60		80,581.15	99.54	1,100.61
2002	00 VANCE COUNTY TAXES	240,406.36		203,439.02		36,576.44		390.90
	A ASSESSMENT	46,875.00		35,174.85		11,700.15		
	L LATE LISTING	2,745.38		1,370.39		1,374.99		
	* YEAR TOTAL	290,026.74		239,984.26		49,651.58	99.87	390.90
2003	00 VANCE COUNTY TAXES	289,381.07		261,916.71		25,468.10		1,996.26
	A ASSESSMENT	60,244.20		49,900.92		10,268.28		75.00
	L LATE LISTING	2,607.42		1,566.00		1,001.37		40.05
	* YEAR TOTAL	352,232.69		313,383.63		36,737.75	99.41	2,111.31
2004	00 VANCE COUNTY TAXES	379,828.78	901.28	355,996.75		22,931.48		900.55
	A ASSESSMENT	71,100.00		62,517.42		8,507.58		75.00
	L LATE LISTING	1,352.83		1,005.40		310.58		36.85
	* YEAR TOTAL	452,281.61	901.28	419,519.57		31,749.64	99.78	1,012.40
2005	00 VANCE COUNTY TAXES	617,234.18		591,141.37		13,377.18		12,715.63
	A ASSESSMENT	127,695.00		117,151.63		3,497.00		7,046.37
	L LATE LISTING	1,996.39		1,558.42		34.31		403.66
	* YEAR TOTAL	746,925.57		709,851.42		16,908.49	97.31	20,165.66
2006	00 VANCE COUNTY TAXES	4,705,597.14	11,816.19	4,680,809.15		13,686.88		11,101.11
	A ASSESSMENT	647,352.04		634,553.40		4,069.81		8,728.83
	L LATE LISTING	5,123.65		4,500.50		130.22		492.93
	* YEAR TOTAL	5,358,072.83	11,816.19	5,319,863.05		17,886.91	99.63	20,322.87
2007	00 VANCE COUNTY TAXES	16,516,588.68	21,869.50	16,486,568.06		17,702.47		12,318.15

YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
	A ASSESSMENT	1,780,913.04		1,768,391.28		6,057.94		6,463.82
	L LATE LISTING	7,783.59		7,507.42		44.63		231.54
	* YEAR TOTAL	18,305,285.31	21,869.50	18,262,466.76		23,805.04	99.90	19,013.51
2008	00 VANCE COUNTY TAXES	18,501,368.11	36,640.61	18,463,929.31		25,003.72		12,435.08
	A ASSESSMENT	1,934,885.01		1,917,267.85		8,405.69		9,211.47
	L LATE LISTING	7,805.78		7,242.19		121.65		441.94
	* YEAR TOTAL	20,444,058.90	36,640.61	20,388,439.35		33,531.06	99.90	22,088.49
2009	00 VANCE COUNTY TAXES	18,208,394.81	3,665.66	18,164,642.23		30,542.31		13,210.27
	A ASSESSMENT	1,934,672.50		1,914,663.09		11,169.50		8,839.91
	L LATE LISTING	10,545.82		10,093.68		85.69		366.45
	* YEAR TOTAL	20,153,613.13	3,665.66	20,089,399.00		41,797.50	99.89	22,416.63
2010	00 VANCE COUNTY TAXES	18,236,686.34	7,148.78	18,167,633.75		56,302.51		12,750.08
	A ASSESSMENT	1,959,510.00		1,928,004.00		21,425.00		10,081.00
	L LATE LISTING	20,586.48		14,849.74		5,343.32		393.42
	* YEAR TOTAL	20,216,782.82	7,148.78	20,110,487.49		83,070.83	99.89	23,224.50
2011	00 VANCE COUNTY TAXES	18,773,059.43	238,861.19	18,446,827.38		308,348.85		17,883.20
	A ASSESSMENT	2,029,845.00	15,210.00	1,967,119.26		51,636.77		11,088.97
	L LATE LISTING	64,093.56	52,876.14	42,478.31		19,260.29		2,354.96
	* YEAR TOTAL	20,866,997.99	306,947.33	20,456,424.95		379,245.91	99.85	31,327.13
2012	00 VANCE COUNTY TAXES	19,656,450.38	424,167.90	19,233,278.01		408,816.60		14,355.77
	A ASSESSMENT	2,046,087.50	27,357.50	1,972,589.69		58,149.08		15,348.73
	L LATE LISTING	82,972.04	64,306.93	53,410.35		27,603.00		1,958.69
	* YEAR TOTAL	21,785,509.92	515,832.33	21,259,278.05		494,568.68	99.86	31,663.19
2013	00 VANCE COUNTY TAXES	19,746,595.08	164,244.68	19,452,187.23		271,983.54		22,424.31
	A ASSESSMENT	2,036,960.00	8,885.00	1,972,279.81		49,430.32		15,249.87
	L LATE LISTING	42,307.82	19,399.94	34,333.84		3,806.29		4,167.69
	* YEAR TOTAL	21,825,862.90	192,529.62	21,458,800.88		325,220.15	99.81	41,841.87
2014	00 VANCE COUNTY TAXES	19,826,172.17	170,007.09	19,618,700.90		179,364.92		28,106.35
	A ASSESSMENT	2,000,300.00	22,100.00	1,961,293.91		31,167.50		7,838.59
	L LATE LISTING	37,614.91	19,555.75	24,442.50		6,932.36		6,240.05

YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
	* YEAR TOTAL	21,864,087.08	211,662.84	21,604,437.31		217,464.78	99.81	42,184.99
2015	00 VANCE COUNTY TAXES	20,460,290.21	920,421.25	19,798,588.42		641,369.11		20,332.68
	A ASSESSMENT	1,957,485.00	18,345.00	1,938,674.25		12,595.00		6,215.75
	L LATE LISTING	109,092.95	101,049.00	25,802.21		82,488.30		802.44
	* YEAR TOTAL	22,526,868.16	1,039,815.25	21,763,064.88		736,452.41	99.88	27,350.87
2016	00 VANCE COUNTY TAXES	20,199,939.22	322,317.42	19,868,685.36		219,232.22		112,021.64
	A ASSESSMENT	2,062,720.00	58,795.00	2,012,158.01		26,877.50		23,684.49
	L LATE LISTING	49,532.87	42,771.38	38,578.33		9,516.02		1,438.52
	* YEAR TOTAL	22,312,192.09	423,883.80	21,919,421.70		255,625.74	99.39	137,144.65
2017	00 VANCE COUNTY TAXES	20,528,473.74	180,311.12	20,331,129.71		106,980.56		90,363.47
	A ASSESSMENT	2,037,630.00	3,570.00	2,001,258.21		12,915.00		23,456.79
	L LATE LISTING	34,560.52	10,937.23	25,258.28		682.66		8,619.58
	* YEAR TOTAL	22,600,664.26	194,818.35	22,357,646.20		120,578.22	99.46	122,439.84
2018	00 VANCE COUNTY TAXES	20,990,546.58	124,350.57	20,844,389.40		119,819.15		26,338.03
	A ASSESSMENT	2,171,323.00	4,011.00	2,139,923.86		8,176.00		23,223.14
	L LATE LISTING	26,266.24	6,802.35	21,989.09		1,409.90		2,867.25
	* YEAR TOTAL	23,188,135.82	135,163.92	23,006,302.35		129,405.05	99.78	52,428.42
2019	00 VANCE COUNTY TAXES	21,052,989.17	140,269.99	20,965,158.64		52,843.57		34,986.96
	A ASSESSMENT	2,166,437.00	3,829.00	2,138,929.87		6,118.00		21,389.13
	L LATE LISTING	34,379.46	13,825.39	26,057.28		5,244.12		3,078.06
	* YEAR TOTAL	23,253,805.63	157,924.38	23,130,145.79		64,205.69	99.75	59,454.15
2020	00 VANCE COUNTY TAXES	21,173,529.25	89,190.52	21,055,926.28		64,850.96		52,752.01
	A ASSESSMENT	2,271,357.00	4,131.00	2,235,625.45		5,112.00		30,619.55
	L LATE LISTING	52,176.60	6,613.84	49,211.75		780.44		2,184.41
	* YEAR TOTAL	23,497,062.85	99,935.36	23,340,763.48		70,743.40	99.64	85,555.97
2021	00 VANCE COUNTY TAXES	21,471,605.30	84,831.75	21,289,967.45		80,212.36		101,425.49
	A ASSESSMENT	2,305,915.00	2,515.00	2,264,743.02		5,760.00		35,411.98
	L LATE LISTING	32,663.62	6,175.47	27,326.87		3,201.34		2,135.41
	* YEAR TOTAL	23,810,183.92	93,522.22	23,582,037.34		89,173.70	99.42	138,972.88

DATE 3/28/24 100 REAL AND LISTED PERSONAL  
 TIME 17:09:59 REVENUE UNIT: ALL  
 USER VNDEVONA

VANCE COUNTY  
 LEVY COLLECTED REPORT  
 AS OF RUN DATE

REVENUE UNIT/YEAR

PAGE 4  
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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2022	00 VANCE COUNTY							
	TAXES	22,166,178.57	169,631.03	21,766,416.24		149,349.60		250,412.73
	A ASSESSMENT	2,313,978.00	7,818.00	2,247,032.25		5,573.00		72,518.75
	L LATE LISTING	43,014.65	9,434.30	36,720.96		2,205.99		4,087.70
	* YEAR TOTAL	24,523,171.22	186,883.33	24,050,169.45		145,982.59	98.67	327,019.18
2023	00 VANCE COUNTY							
	TAXES	22,674,304.49	115,802.11	21,697,690.96		67,138.95		909,474.58
	A ASSESSMENT	2,362,766.00	8,366.00	2,146,310.04		8,400.00		208,055.96
	L LATE LISTING	62,695.96	18,446.09	41,976.03		4,329.71		16,390.22
	* YEAR TOTAL	25,099,766.45	142,614.20	23,885,977.03		79,868.66	95.49	1,133,920.76
2024	00 VANCE COUNTY							
	TAXES	14,898.91	14,898.91	3,701.70		4,206.75		6,990.46
	A ASSESSMENT	2,962.00	2,962.00	534.34		232.00		2,195.66
	L LATE LISTING	1,124.17	1,124.17	262.50		49.74		811.93
	* YEAR TOTAL	18,985.08	18,985.08	4,498.54		4,488.49	47.34	9,998.05
	** REV UNT TOT	383,879,218.27	3,802,560.03	377,944,464.95		3,561,013.97	99.39	2,373,739.35

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2002	03 KITTRELL TAXES	7.67		7.67				
	* YEAR TOTAL	7.67		7.67			100.00	
2003	03 KITTRELL TAXES	9.13		7.67		1.46		
	* YEAR TOTAL	9.13		7.67		1.46	100.00	
2004	03 KITTRELL TAXES	46.33		44.87		1.46		
	* YEAR TOTAL	46.33		44.87		1.46	100.00	
2005	03 KITTRELL TAXES	33.85		32.39		1.46		
	* YEAR TOTAL	33.85		32.39		1.46	100.00	
2006	03 KITTRELL TAXES	1,687.28		1,685.82		1.46		
	* YEAR TOTAL	1,687.28		1,685.82		1.46	100.00	
2007	03 KITTRELL TAXES	4,094.58		4,089.30		1.46		3.82
	* YEAR TOTAL	4,094.58		4,089.30		1.46	99.91	3.82
2008	03 KITTRELL TAXES	5,579.68		5,547.35		27.42		4.91
	* YEAR TOTAL	5,579.68		5,547.35		27.42	99.92	4.91
2009	03 KITTRELL TAXES	5,520.64		5,488.31		27.42		4.91
	* YEAR TOTAL	5,520.64		5,488.31		27.42	99.92	4.91
2010	03 KITTRELL TAXES	6,393.99		6,335.55		53.53		4.91
	L LATE LISTING	7.18		7.18				
	* YEAR TOTAL	6,401.17		6,342.73		53.53	99.93	4.91
2011	03 KITTRELL TAXES	12,883.23		5,241.27		7,641.96		
	* YEAR TOTAL	12,883.23		5,241.27		7,641.96	100.00	

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2012	03 KITTRELL TAXES	6,227.48	257.38	6,145.10		82.38		
	L LATE LISTING	74.69	68.13	74.69				
	* YEAR TOTAL	6,302.17	325.51	6,219.79		82.38	100.00	
2013	03 KITTRELL TAXES	5,987.91	1.71	5,964.78		8.13		15.00
	L LATE LISTING	7.20	.69	7.20				
	* YEAR TOTAL	5,995.11	2.40	5,971.98		8.13	99.75	15.00
2014	03 KITTRELL TAXES	6,374.68	3.52	6,157.81		204.33		12.54
	L LATE LISTING	12.28	.79	11.03				1.25
	* YEAR TOTAL	6,386.96	4.31	6,168.84		204.33	99.79	13.79
2015	03 KITTRELL TAXES	6,230.56		6,104.96		53.54		72.06
	L LATE LISTING	10.31		3.11				7.20
	* YEAR TOTAL	6,240.87		6,108.07		53.54	98.73	79.26
2016	03 KITTRELL TAXES	6,032.28	63.27	6,010.87		21.41		
	L LATE LISTING	8.92	6.32	8.92				
	* YEAR TOTAL	6,041.20	69.59	6,019.79		21.41	100.00	
2017	03 KITTRELL TAXES	6,052.68	.30	6,062.20		9.52-		
	L LATE LISTING	18.31		18.31				
	* YEAR TOTAL	6,070.99	.30	6,080.51		9.52-	100.00	
2018	03 KITTRELL TAXES	6,162.65	105.00	6,154.99		7.66		
	L LATE LISTING	34.23	18.68	34.23				
	* YEAR TOTAL	6,196.88	123.68	6,189.22		7.66	100.00	
2019	03 KITTRELL TAXES	6,205.30		6,151.45				53.85
	L LATE LISTING	23.86		23.86				
	* YEAR TOTAL	6,229.16		6,175.31			99.14	53.85
2020	03 KITTRELL TAXES	6,352.13		6,224.95		20.81		106.37
	L LATE LISTING	18.16		12.91				5.25



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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
	* YEAR TOTAL	6,370.29		6,237.86		20.81	98.25	111.62
2021	03 KITTRELL TAXES	6,345.51	2.94	6,237.92				107.59
	L LATE LISTING	22.44	.03	17.45				4.99
	* YEAR TOTAL	6,367.95	2.97	6,255.37			98.24	112.58
2022	03 KITTRELL TAXES	6,381.12	89.80	6,131.87		108.27		140.98
	L LATE LISTING	30.31	1.08	25.58				4.73
	* YEAR TOTAL	6,411.43	90.88	6,157.45		108.27	97.73	145.71
2023	03 KITTRELL TAXES	6,998.87	43.98	6,695.75		74.92		228.20
	L LATE LISTING	34.63	8.80	26.82		3.27		4.54
	* YEAR TOTAL	7,033.50	52.78	6,722.57		78.19	96.70	232.74
	** REV UNT TOT	111,910.07	672.42	102,794.14		8,332.83	99.31	783.10

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2000	08 MIDDLEBURG TAXES	15.75				15.75		
	* YEAR TOTAL	15.75				15.75	100.00	
2001	08 MIDDLEBURG TAXES	15.75				15.75		
	* YEAR TOTAL	15.75				15.75	100.00	
2002	08 MIDDLEBURG TAXES	15.75				15.75		
	* YEAR TOTAL	15.75				15.75	100.00	
2003	08 MIDDLEBURG TAXES	15.75				15.75		
	* YEAR TOTAL	15.75				15.75	100.00	
2004	08 MIDDLEBURG TAXES	15.75				15.75		
	* YEAR TOTAL	15.75				15.75	100.00	
2005	08 MIDDLEBURG TAXES	577.07		577.07				
	* YEAR TOTAL	577.07		577.07			100.00	
2006	08 MIDDLEBURG TAXES	3,219.31		3,219.31				
	* YEAR TOTAL	3,219.31		3,219.31			100.00	
2007	08 MIDDLEBURG TAXES	9,723.37		9,723.37				
	* YEAR TOTAL	9,723.37		9,723.37			100.00	
2008	08 MIDDLEBURG TAXES	12,482.01		12,482.01				
	L LATE LISTING	12.01		12.01				
	* YEAR TOTAL	12,494.02		12,494.02			100.00	
2009	08 MIDDLEBURG TAXES	12,340.55		12,340.55				
	* YEAR TOTAL	12,340.55		12,340.55			100.00	

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2010	08 MIDDLEBURG TAXES	12,706.77		12,683.89				22.88
	L LATE LISTING	14.30		12.01				2.29
	* YEAR TOTAL	12,721.07		12,695.90			99.81	25.17
2011	08 MIDDLEBURG TAXES	12,253.44		11,584.65		645.91		22.88
	L LATE LISTING	2.29						2.29
	* YEAR TOTAL	12,255.73		11,584.65		645.91	99.80	25.17
2012	08 MIDDLEBURG TAXES	12,103.22	2.83	11,428.33		652.01		22.88
	L LATE LISTING	4.53	1.24	.82		1.42		2.29
	* YEAR TOTAL	12,107.75	4.07	11,429.15		653.43	99.80	25.17
2013	08 MIDDLEBURG TAXES	11,728.31	9.57	11,300.99		404.44		22.88
	L LATE LISTING	6.21	3.92	3.92				2.29
	* YEAR TOTAL	11,734.52	13.49	11,304.91		404.44	99.79	25.17
2014	08 MIDDLEBURG TAXES	21,647.97	521.50	20,945.10		702.87		
	L LATE LISTING	145.74	145.74	145.74				
	* YEAR TOTAL	21,793.71	667.24	21,090.84		702.87	100.00	
2015	08 MIDDLEBURG TAXES	20,626.83		20,626.83				
	L LATE LISTING	12.03		12.03				
	* YEAR TOTAL	20,638.86		20,638.86			100.00	
2016	08 MIDDLEBURG TAXES	22,942.31	89.10	20,350.80		2,552.40		39.11
	* YEAR TOTAL	22,942.31	89.10	20,350.80		2,552.40	99.83	39.11
2017	08 MIDDLEBURG TAXES	21,644.17	2.36	21,644.17				
	L LATE LISTING	12.03		12.03				
	* YEAR TOTAL	21,656.20	2.36	21,656.20			100.00	
2018	08 MIDDLEBURG TAXES	21,886.79		21,886.79				
	L LATE LISTING	12.03		12.03				
	* YEAR TOTAL	21,898.82		21,898.82			100.00	

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2019	08 MIDDLEBURG TAXES	21,935.65		21,935.65				
	* YEAR TOTAL	21,935.65		21,935.65			100.00	
2020	08 MIDDLEBURG TAXES	20,603.51	351.07	19,925.93		677.58		
	L LATE LISTING	126.94	108.98	126.94				
	* YEAR TOTAL	20,730.45	460.05	20,052.87		677.58	100.00	
2021	08 MIDDLEBURG TAXES	19,558.85		19,453.31		84.29		21.25
	L LATE LISTING	17.27		16.70		.57		
	* YEAR TOTAL	19,576.12		19,470.01		84.86	99.90	21.25
2022	08 MIDDLEBURG TAXES	19,816.21		19,556.83		6.00		253.38
	L LATE LISTING	16.33		15.73		.60		
	* YEAR TOTAL	19,832.54		19,572.56		6.60	98.73	253.38
2023	08 MIDDLEBURG TAXES	19,761.84		19,049.72		300.95		411.17
	L LATE LISTING	10.70		10.70				
	* YEAR TOTAL	19,772.54		19,060.42		300.95	97.93	411.17
	** REV UNT TOT	298,029.34	1,236.31	291,095.96		6,107.79	99.73	825.59

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2002	12 FIRE DISTRICT TAXES	4,124.55		3,317.20		807.35		
	* YEAR TOTAL	4,124.55		3,317.20		807.35	100.00	
2003	12 FIRE DISTRICT TAXES	6,729.53		6,056.55		604.96		68.02
	* YEAR TOTAL	6,729.53		6,056.55		604.96	98.99	68.02
2004	12 FIRE DISTRICT TAXES	8,740.21	28.59	8,189.80		517.65		32.76
	* YEAR TOTAL	8,740.21	28.59	8,189.80		517.65	99.63	32.76
2005	12 FIRE DISTRICT TAXES	13,511.98		12,975.97		232.94		303.07
	L LATE LISTING			.20		.20-		
	* YEAR TOTAL	13,511.98		12,976.17		232.74	97.76	303.07
2006	12 FIRE DISTRICT TAXES	89,836.07	404.13	89,343.34		229.94		262.79
	* YEAR TOTAL	89,836.07	404.13	89,343.34		229.94	99.71	262.79
2007	12 FIRE DISTRICT TAXES	342,310.78	723.66	341,760.63		278.37		271.78
	* YEAR TOTAL	342,310.78	723.66	341,760.63		278.37	99.93	271.78
2008	12 FIRE DISTRICT TAXES	397,167.68	1,220.07	396,425.66		453.96		288.06
	L LATE LISTING			.21		.21-		
	* YEAR TOTAL	397,167.68	1,220.07	396,425.87		453.75	99.93	288.06
2009	12 FIRE DISTRICT TAXES	403,358.41	120.39	402,499.70		518.36		340.35
	L LATE LISTING			1.26		1.58-		.32
	* YEAR TOTAL	403,358.41	120.39	402,500.96		516.78	99.92	340.67
2010	12 FIRE DISTRICT TAXES	402,067.02	235.37	400,832.99		867.87		366.16
	L LATE LISTING			1.98		2.30-		.32
	* YEAR TOTAL	402,067.02	235.37	400,834.97		865.57	99.91	366.48
2011	12 FIRE DISTRICT TAXES	413,720.18	4,886.84	406,949.71		6,420.56		349.91

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
	L LATE LISTING	1,123.56	859.87	682.14		418.87		22.55
	* YEAR TOTAL	414,843.74	5,746.71	407,631.85		6,839.43	99.92	372.46
2012	12 FIRE DISTRICT TAXES	666,994.21	7,263.01	634,869.29		31,732.51		392.41
	L LATE LISTING	1,961.06	1,180.07	1,511.09		419.33		30.64
	* YEAR TOTAL	668,955.27	8,443.08	636,380.38		32,151.84	99.94	423.05
2013	12 FIRE DISTRICT TAXES	655,653.87	4,628.49	648,904.29		6,332.75		416.83
	L LATE LISTING	1,340.28	323.26	1,169.96		139.73		30.59
	* YEAR TOTAL	656,994.15	4,951.75	650,074.25		6,472.48	99.94	447.42
2014	12 FIRE DISTRICT TAXES	649,950.65	5,833.35	644,695.20		4,815.50		439.95
	L LATE LISTING	1,199.80	420.65	924.65		195.99		79.16
	* YEAR TOTAL	651,150.45	6,254.00	645,619.85		5,011.49	99.93	519.11
2015	12 FIRE DISTRICT TAXES	647,489.28	7,381.65	640,788.54		6,094.65		606.09
	L LATE LISTING	1,625.22	1,352.19	446.51		1,154.97		23.74
	* YEAR TOTAL	649,114.50	8,733.84	641,235.05		7,249.62	99.91	629.83
2016	12 FIRE DISTRICT TAXES	658,488.95	10,245.97	642,442.42		10,862.30		5,184.23
	L LATE LISTING	849.94	630.98	400.71		420.73		28.50
	* YEAR TOTAL	659,338.89	10,876.95	642,843.13		11,283.03	99.21	5,212.73
2017	12 FIRE DISTRICT TAXES	671,651.68	8,549.96	665,049.27		2,402.81		4,199.60
	L LATE LISTING	1,472.02	481.92	1,038.08		27.98		405.96
	* YEAR TOTAL	673,123.70	9,031.88	666,087.35		2,430.79	99.32	4,605.56
2018	12 FIRE DISTRICT TAXES	1,008,071.62	6,484.71	1,004,312.03		2,617.76		1,141.83
	L LATE LISTING	1,484.04	270.97	1,273.42		71.71		138.91
	* YEAR TOTAL	1,009,555.66	6,755.68	1,005,585.45		2,689.47	99.88	1,280.74
2019	12 FIRE DISTRICT TAXES	1,404,011.64	5,870.44	1,399,339.65		2,779.09		1,892.90
	L LATE LISTING	1,879.61	348.23	1,541.24		249.17		89.20
	* YEAR TOTAL	1,405,891.25	6,218.67	1,400,880.89		3,028.26	99.86	1,982.10

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2020	12 FIRE DISTRICT TAXES	1,416,577.68	6,149.81	1,410,881.21		2,235.43		3,461.04
	L LATE LISTING	4,391.54	411.37	4,180.10		56.70		154.74
	* YEAR TOTAL	1,420,969.22	6,561.18	1,415,061.31		2,292.13	99.75	3,615.78
2021	12 FIRE DISTRICT TAXES	1,437,168.53	7,070.34	1,423,526.82		6,830.41		6,811.30
	L LATE LISTING	2,755.69	424.74	2,377.06		211.24		167.39
	* YEAR TOTAL	1,439,924.22	7,495.08	1,425,903.88		7,041.65	99.52	6,978.69
2022	12 FIRE DISTRICT TAXES	1,492,092.59	11,731.68	1,462,706.05		11,758.57		17,627.97
	L LATE LISTING	2,957.16	611.35	2,566.10		99.93		291.13
	* YEAR TOTAL	1,495,049.75	12,343.03	1,465,272.15		11,858.50	98.81	17,919.10
2023	12 FIRE DISTRICT TAXES	1,534,070.09	10,527.83	1,464,033.45		5,679.34		64,357.30
	L LATE LISTING	4,361.30	1,594.11	2,619.64		367.31		1,374.35
	* YEAR TOTAL	1,538,431.39	12,121.94	1,466,653.09		6,046.65	95.73	65,731.65
2024	12 FIRE DISTRICT TAXES	1,219.61	1,219.61	370.20		394.03		455.38
	L LATE LISTING	51.78	51.78	26.24		2.30		23.24
	* YEAR TOTAL	1,271.39	1,271.39	396.44		396.33	62.36	478.62
	** REV UNT TOT	14,352,459.81	109,537.39	14,131,030.56		109,298.78	99.22	112,130.47
	*** GROUP TOTAL	491,000,424.77	5,328,995.06	483,378,538.39		4,684,846.27	99.41	2,937,040.11

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2017	00 VANCE COUNTY TAXES	22,989.27		11,554.07		4,331.69		7,103.51
	* YEAR TOTAL	22,989.27		11,554.07		4,331.69	69.11	7,103.51
2018	00 VANCE COUNTY TAXES	66,330.10	66,330.10	35,312.41		6,240.24		24,777.45
	* YEAR TOTAL	66,330.10	66,330.10	35,312.41		6,240.24	62.65	24,777.45
2019	00 VANCE COUNTY TAXES	90,160.12	90,160.12	49,612.42		6,603.59		33,944.11
	* YEAR TOTAL	90,160.12	90,160.12	49,612.42		6,603.59	62.36	33,944.11
2020	00 VANCE COUNTY TAXES	78,846.04	78,846.04	46,973.72		475.30		31,397.02
	* YEAR TOTAL	78,846.04	78,846.04	46,973.72		475.30	60.18	31,397.02
2021	00 VANCE COUNTY TAXES	63,703.55	63,703.55	40,195.75		758.00		22,749.80
	* YEAR TOTAL	63,703.55	63,703.55	40,195.75		758.00	64.29	22,749.80
2022	00 VANCE COUNTY TAXES	109,903.14	109,903.14	58,645.80		1,532.47		49,724.87
	* YEAR TOTAL	109,903.14	109,903.14	58,645.80		1,532.47	54.76	49,724.87
2023	00 VANCE COUNTY TAXES	104,010.31	104,010.31	26,373.60		2,562.02		75,074.69
	* YEAR TOTAL	104,010.31	104,010.31	26,373.60		2,562.02	27.82	75,074.69
2024	00 VANCE COUNTY TAXES	63,145.79	63,145.79	4,821.67		360.55		57,963.57
	* YEAR TOTAL	63,145.79	63,145.79	4,821.67		360.55	8.21	57,963.57
	** REV UNT TOT	599,088.32	576,099.05	273,489.44		22,863.86	49.47	302,735.02



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YEAR	REVENUE UNIT	(A) LEVY	DISC BILLS	(B) LEVY	DISCOUNTS	(C) NET	B+C/A	LEVY
	CHARGE TYPE	ORIG/DISC	INCL IN (A)	PAID/DSCNTS	INCL IN (B)	ABATEMENTS	COLL %	OUTSTANDING
2017	03 KITTRELL TAXES	20.12		9.58				10.54
	* YEAR TOTAL	20.12		9.58			47.62	10.54
2018	03 KITTRELL TAXES	44.30	44.30	27.12		5.67		11.51
	* YEAR TOTAL	44.30	44.30	27.12		5.67	74.02	11.51
2019	03 KITTRELL TAXES	28.52	28.52	23.05		1.32		4.15
	* YEAR TOTAL	28.52	28.52	23.05		1.32	85.45	4.15
2020	03 KITTRELL TAXES	1.30	1.30	1.30				
	* YEAR TOTAL	1.30	1.30	1.30			100.00	
2021	03 KITTRELL TAXES	19.15	19.15	13.84				5.31
	* YEAR TOTAL	19.15	19.15	13.84			72.28	5.31
2022	03 KITTRELL TAXES	30.57	30.57	12.70				17.87
	* YEAR TOTAL	30.57	30.57	12.70			41.55	17.87
2023	03 KITTRELL TAXES	135.64	135.64	29.59				106.05
	* YEAR TOTAL	135.64	135.64	29.59			21.82	106.05
2024	03 KITTRELL TAXES	70.52	70.52	3.98				66.54
	* YEAR TOTAL	70.52	70.52	3.98			5.65	66.54
	** REV UNT TOT	350.12	330.00	121.16		6.99	36.61	221.97

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2017 08	MIDDLEBURG TAXES	8.88		8.88				
	* YEAR TOTAL	8.88		8.88			100.00	
2018 08	MIDDLEBURG TAXES	198.35	198.35	167.42				30.93
	* YEAR TOTAL	198.35	198.35	167.42			84.41	30.93
2019 08	MIDDLEBURG TAXES	346.24	346.24	238.71		7.83		99.70
	* YEAR TOTAL	346.24	346.24	238.71		7.83	71.21	99.70
2020 08	MIDDLEBURG TAXES	172.59	172.59	134.02				38.57
	* YEAR TOTAL	172.59	172.59	134.02			77.66	38.57
2021 08	MIDDLEBURG TAXES	178.76	178.76	102.17				76.59
	* YEAR TOTAL	178.76	178.76	102.17			57.16	76.59
2022 08	MIDDLEBURG TAXES	126.01	126.01	57.78				68.23
	* YEAR TOTAL	126.01	126.01	57.78			45.86	68.23
2023 08	MIDDLEBURG TAXES	301.88	301.88	116.56				185.32
	* YEAR TOTAL	301.88	301.88	116.56			38.62	185.32
2024 08	MIDDLEBURG TAXES	211.96	211.96	51.74				160.22
	* YEAR TOTAL	211.96	211.96	51.74			24.42	160.22
	** REV UNIT TOT	1,544.67	1,535.79	877.28		7.83	57.31	659.56

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2017	12 FIRE DISTRICT TAXES	840.29		450.54		146.16		243.59
	* YEAR TOTAL	840.29		450.54		146.16	71.02	243.59
2018	12 FIRE DISTRICT TAXES	2,770.77	2,770.77	1,501.24		317.54		951.99
	* YEAR TOTAL	2,770.77	2,770.77	1,501.24		317.54	65.65	951.99
2019	12 FIRE DISTRICT TAXES	5,467.24	5,467.24	3,170.24		337.41		1,959.59
	* YEAR TOTAL	5,467.24	5,467.24	3,170.24		337.41	64.16	1,959.59
2020	12 FIRE DISTRICT TAXES	5,543.50	5,543.50	3,446.14		.58		2,096.78
	* YEAR TOTAL	5,543.50	5,543.50	3,446.14		.58	62.18	2,096.78
2021	12 FIRE DISTRICT TAXES	4,648.95	4,648.95	2,999.00		66.99		1,582.96
	* YEAR TOTAL	4,648.95	4,648.95	2,999.00		66.99	65.96	1,582.96
2022	12 FIRE DISTRICT TAXES	7,749.89	7,749.89	4,307.16		92.13		3,350.60
	* YEAR TOTAL	7,749.89	7,749.89	4,307.16		92.13	56.77	3,350.60
2023	12 FIRE DISTRICT TAXES	7,380.78	7,380.78	2,091.56		202.69		5,086.53
	* YEAR TOTAL	7,380.78	7,380.78	2,091.56		202.69	31.09	5,086.53
2024	12 FIRE DISTRICT TAXES	4,451.29	4,451.29	334.10		3.64		4,113.55
	* YEAR TOTAL	4,451.29	4,451.29	334.10		3.64	7.59	4,113.55
	** REV UNT TOT	38,852.71	38,012.42	18,299.98		1,167.14	50.11	19,385.59
	*** GROUP TOTAL	806,707.48	776,675.91	358,091.04		30,718.71	48.20	417,897.73

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET B+C/A ABATEMENTS COLL %	LEVY OUTSTANDING
2003	00 VANCE COUNTY TAXES	77.41		74.57		2.84	
	* YEAR TOTAL	77.41		74.57		2.84	100.00
2006	00 VANCE COUNTY TAXES	354,990.15		354,990.15			100.00
	* YEAR TOTAL	354,990.15		354,990.15			100.00
2007	00 VANCE COUNTY TAXES	559,394.08		559,394.08			100.00
	L LATE LISTING	12.67		12.67			
	* YEAR TOTAL	559,406.75		559,406.75			100.00
2008	00 VANCE COUNTY TAXES	641,262.39		641,262.39			100.00
	* YEAR TOTAL	641,262.39		641,262.39			100.00
2009	00 VANCE COUNTY TAXES	622,975.47		622,975.47			100.00
	L LATE LISTING	24.24		24.24			
	* YEAR TOTAL	622,999.71		622,999.71			100.00
2010	00 VANCE COUNTY TAXES	605,674.17		605,674.17			100.00
	* YEAR TOTAL	605,674.17		605,674.17			100.00
2011	00 VANCE COUNTY TAXES	609,356.48		609,356.48			100.00
	* YEAR TOTAL	609,356.48		609,356.48			100.00
2012	00 VANCE COUNTY TAXES	607,921.29		607,921.29			100.00
	* YEAR TOTAL	607,921.29		607,921.29			100.00
2013	00 VANCE COUNTY TAXES	608,310.46		608,310.46			100.00
	* YEAR TOTAL	608,310.46		608,310.46			100.00
2014	00 VANCE COUNTY TAXES	609,191.68		609,191.68			100.00
	* YEAR TOTAL	609,191.68		609,191.68			100.00

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2015 00	VANCE COUNTY TAXES	688,091.16	24.26	688,076.32		1.58		13.26
*	YEAR TOTAL	688,091.16	24.26	688,076.32		1.58	100.00	13.26
2016 00	VANCE COUNTY TAXES	779,311.38		779,311.38				
*	YEAR TOTAL	779,311.38		779,311.38			100.00	
2017 00	VANCE COUNTY TAXES	784,322.66		784,322.66				
L	LATE LISTING			60.52		60.52-		
*	YEAR TOTAL	784,322.66		784,383.18		60.52-100.00		
2018 00	VANCE COUNTY TAXES	802,318.43		802,318.43				
*	YEAR TOTAL	802,318.43		802,318.43			100.00	
2019 00	VANCE COUNTY TAXES	888,627.43		888,627.43				
*	YEAR TOTAL	888,627.43		888,627.43			100.00	
2020 00	VANCE COUNTY TAXES	830,778.65		830,778.65				
*	YEAR TOTAL	830,778.65		830,778.65			100.00	
2021 00	VANCE COUNTY TAXES	938,374.78		858,154.58		80,220.20		
*	YEAR TOTAL	938,374.78		858,154.58		80,220.20	100.00	
2022 00	VANCE COUNTY TAXES	872,784.03		872,784.03				
*	YEAR TOTAL	872,784.03		872,784.03			100.00	
2023 00	VANCE COUNTY TAXES	653,731.00		653,731.00				
*	YEAR TOTAL	653,731.00		653,731.00			100.00	
**	REV UNT TOT	12,457,530.01	24.26	12,377,352.65		80,164.10	100.00	13.26

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2011	03 KITTRELL TAXES	1,001.87		1,001.87				
	* YEAR TOTAL	1,001.87		1,001.87			100.00	
2012	03 KITTRELL TAXES	989.96		989.96				
	* YEAR TOTAL	989.96		989.96			100.00	
2013	03 KITTRELL TAXES	979.35		974.77		4.58		
	* YEAR TOTAL	979.35		974.77		4.58	100.00	
2014	03 KITTRELL TAXES	947.23		947.23				
	* YEAR TOTAL	947.23		947.23			100.00	
2015	03 KITTRELL TAXES	980.60	.05	980.60				
	* YEAR TOTAL	980.60	.05	980.60			100.00	
2016	03 KITTRELL TAXES	1,136.56		1,136.56				
	* YEAR TOTAL	1,136.56		1,136.56			100.00	
2017	03 KITTRELL TAXES	1,062.38		1,062.38				
	L LATE LISTING			1.70		1.70-		
	* YEAR TOTAL	1,062.38		1,064.08		1.70-	100.00	
2018	03 KITTRELL TAXES	1,053.02		1,053.02				
	* YEAR TOTAL	1,053.02		1,053.02			100.00	
2019	03 KITTRELL TAXES	1,124.82		1,124.82				
	* YEAR TOTAL	1,124.82		1,124.82			100.00	
2020	03 KITTRELL TAXES	987.08		987.08				
	* YEAR TOTAL	987.08		987.08			100.00	

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2021	03 KITTRELL TAXES	1,112.24		995.37		116.87		
	* YEAR TOTAL	1,112.24		995.37		116.87	100.00	
2022	03 KITTRELL TAXES	1,012.33		1,012.33				
	* YEAR TOTAL	1,012.33		1,012.33			100.00	
2023	03 KITTRELL TAXES	532.85		532.85				
	* YEAR TOTAL	532.85		532.85			100.00	
	** REV UNT TOT	12,920.29	.05	12,800.54		119.75	100.00	

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2011 08	MIDDLEBURG TAXES	1,100.87		1,100.87				
	* YEAR TOTAL	1,100.87		1,100.87			100.00	
2012 08	MIDDLEBURG TAXES	1,122.11		1,122.11				
	* YEAR TOTAL	1,122.11		1,122.11			100.00	
2013 08	MIDDLEBURG TAXES	1,124.04		1,135.48		11.44-		
	* YEAR TOTAL	1,124.04		1,135.48		11.44-	100.00	
2014 08	MIDDLEBURG TAXES	1,920.61		1,920.61				
	* YEAR TOTAL	1,920.61		1,920.61			100.00	
2015 08	MIDDLEBURG TAXES	1,914.00	.50	1,914.00				
	* YEAR TOTAL	1,914.00	.50	1,914.00			100.00	
2016 08	MIDDLEBURG TAXES	2,714.00		2,714.00				
	* YEAR TOTAL	2,714.00		2,714.00			100.00	
2017 08	MIDDLEBURG TAXES	3,117.15		3,117.15				
	* YEAR TOTAL	3,117.15		3,117.15			100.00	
2018 08	MIDDLEBURG TAXES	2,837.28		2,837.28				
	* YEAR TOTAL	2,837.28		2,837.28			100.00	
2019 08	MIDDLEBURG TAXES	3,316.75		3,316.75				
	* YEAR TOTAL	3,316.75		3,316.75			100.00	
2020 08	MIDDLEBURG TAXES	2,553.88		2,553.88				
	* YEAR TOTAL	2,553.88		2,553.88			100.00	
2021 08	MIDDLEBURG							



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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
	TAXES	2,959.13		2,610.28		348.85		
	* YEAR TOTAL	2,959.13		2,610.28		348.85	100.00	
2022 08	MIDDLEBURG TAXES	2,598.57		2,598.57				
	* YEAR TOTAL	2,598.57		2,598.57			100.00	
2023 08	MIDDLEBURG TAXES	3,990.52		3,990.52				
	* YEAR TOTAL	3,990.52		3,990.52			100.00	
	** REV UNT TOT	31,268.91	.50	30,931.50		337.41	100.00	

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2006	12 FIRE DISTRICT TAXES	7,269.34		7,269.34				
	* YEAR TOTAL	7,269.34		7,269.34			100.00	
2007	12 FIRE DISTRICT TAXES	9,800.62		9,800.62				
	* YEAR TOTAL	9,800.62		9,800.62			100.00	
2008	12 FIRE DISTRICT TAXES	10,987.24		10,987.24				
	* YEAR TOTAL	10,987.24		10,987.24			100.00	
2009	12 FIRE DISTRICT TAXES	10,969.95		10,969.95				
	* YEAR TOTAL	10,969.95		10,969.95			100.00	
2010	12 FIRE DISTRICT TAXES	10,818.60		10,818.60				
	* YEAR TOTAL	10,818.60		10,818.60			100.00	
2011	12 FIRE DISTRICT TAXES	11,212.98		11,212.98				
	* YEAR TOTAL	11,212.98		11,212.98			100.00	
2012	12 FIRE DISTRICT TAXES	17,464.01		17,464.01				
	* YEAR TOTAL	17,464.01		17,464.01			100.00	
2013	12 FIRE DISTRICT TAXES	17,835.77		17,835.77				
	* YEAR TOTAL	17,835.77		17,835.77			100.00	
2014	12 FIRE DISTRICT TAXES	18,076.29		18,076.29				
	* YEAR TOTAL	18,076.29		18,076.29			100.00	
2015	12 FIRE DISTRICT TAXES	21,895.14	1.06	21,894.47				.67
	* YEAR TOTAL	21,895.14	1.06	21,894.47			100.00	.67
2016	12 FIRE DISTRICT							

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
	TAXES	24,653.10		24,653.10				
	* YEAR TOTAL	24,653.10		24,653.10			100.00	
2017 12	FIRE DISTRICT TAXES	24,951.20		24,951.20				
	L LATE LISTING			.75		.75-		
	* YEAR TOTAL	24,951.20		24,951.95		.75-	100.00	
2018 12	FIRE DISTRICT TAXES	37,572.73		37,572.73				
	* YEAR TOTAL	37,572.73		37,572.73			100.00	
2019 12	FIRE DISTRICT TAXES	56,126.67		56,126.67				
	* YEAR TOTAL	56,126.67		56,126.67			100.00	
2020 12	FIRE DISTRICT TAXES	52,363.46		52,363.46				
	* YEAR TOTAL	52,363.46		52,363.46			100.00	
2021 12	FIRE DISTRICT TAXES	60,639.63		55,599.39		5,040.24		
	* YEAR TOTAL	60,639.63		55,599.39		5,040.24	100.00	
2022 12	FIRE DISTRICT TAXES	57,420.18		57,420.18				
	* YEAR TOTAL	57,420.18		57,420.18			100.00	
2023 12	FIRE DISTRICT TAXES	49,490.82		49,490.82				
	* YEAR TOTAL	49,490.82		49,490.82			100.00	
	** REV UNT TOT	499,547.73	1.06	494,507.57		5,039.49	100.00	.67
	*** GROUP TOTAL	16,752,874.50	28.33	16,643,378.84		109,481.73	100.00	13.93

DATE 3/28/24 200 REGISTERED VEHICLE  
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 USER VNDEVONA

VANCE COUNTY  
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REVENUE UNIT/YEAR

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2000	00 VANCE COUNTY TAXES	51,147.03		15,739.14		35,307.78		100.11
	* YEAR TOTAL	51,147.03		15,739.14		35,307.78	99.81	100.11
2001	00 VANCE COUNTY TAXES	61,032.85		19,463.85		41,562.69		6.31
	* YEAR TOTAL	61,032.85		19,463.85		41,562.69	99.99	6.31
2002	00 VANCE COUNTY TAXES	64,790.81		28,623.03		36,167.78		
	* YEAR TOTAL	64,790.81		28,623.03		36,167.78	100.00	
2003	00 VANCE COUNTY TAXES	65,201.36		33,554.98		31,646.38		
	* YEAR TOTAL	65,201.36		33,554.98		31,646.38	100.00	
2004	00 VANCE COUNTY TAXES	79,393.27		49,371.22		30,022.05		
	* YEAR TOTAL	79,393.27		49,371.22		30,022.05	100.00	
2005	00 VANCE COUNTY TAXES	232,362.23		203,491.76		40.07		28,830.40
	* YEAR TOTAL	232,362.23		203,491.76		40.07	87.60	28,830.40
2006	00 VANCE COUNTY TAXES	1,709,684.20		1,680,756.09		264.42		28,663.69
	L LATE LISTING	.30-		.30-				
	* YEAR TOTAL	1,709,683.90		1,680,755.79		264.42	98.33	28,663.69
2007	00 VANCE COUNTY TAXES	2,672,490.30		2,644,658.01		1,550.06		26,282.23
	* YEAR TOTAL	2,672,490.30		2,644,658.01		1,550.06	99.02	26,282.23
2008	00 VANCE COUNTY TAXES	2,377,859.90		2,354,449.39		623.51		22,787.00
	L LATE LISTING	.03-		.03-				
	* YEAR TOTAL	2,377,859.87		2,354,449.36		623.51	99.05	22,787.00
2009	00 VANCE COUNTY TAXES	2,026,433.15		2,000,055.16		1,922.37		24,455.62
	L LATE LISTING	.02-		.02-				
	* YEAR TOTAL	2,026,433.13		2,000,055.14		1,922.37	98.80	24,455.62

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VANCE COUNTY  
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REVENUE UNIT/YEAR

PAGE 33  
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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2010	00 VANCE COUNTY TAXES	1,794,422.05	3,658.97	1,744,961.96		27,132.76		22,327.33
	* YEAR TOTAL	1,794,422.05	3,658.97	1,744,961.96		27,132.76	98.76	22,327.33
2011	00 VANCE COUNTY TAXES	2,231,343.97	11,437.28	2,159,732.76		49,341.36		22,269.85
	* YEAR TOTAL	2,231,343.97	11,437.28	2,159,732.76		49,341.36	99.01	22,269.85
2012	00 VANCE COUNTY TAXES	2,154,248.50	5,477.76	2,073,558.87		55,247.12		25,442.51
	* YEAR TOTAL	2,154,248.50	5,477.76	2,073,558.87		55,247.12	98.82	25,442.51
2013	00 VANCE COUNTY TAXES	1,319,211.80	5,342.72	1,268,993.25		30,063.25		20,155.30
	* YEAR TOTAL	1,319,211.80	5,342.72	1,268,993.25		30,063.25	98.48	20,155.30
2014	00 VANCE COUNTY TAXES	3,592.87	879.64	3,264.22		83.85		244.80
	* YEAR TOTAL	3,592.87	879.64	3,264.22		83.85	93.19	244.80
2015	00 VANCE COUNTY TAXES	310.14	310.14	291.18				18.96
	* YEAR TOTAL	310.14	310.14	291.18			93.89	18.96
	** REV UNT TOT	16,843,524.08	27,106.51	16,280,964.52		340,975.45	98.69	221,584.11

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REVENUE UNIT/YEAR

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2002	03 KITTRELL TAXES	10.28		10.28				
	* YEAR TOTAL	10.28		10.28			100.00	
2003	03 KITTRELL TAXES	11.45		11.45				
	* YEAR TOTAL	11.45		11.45			100.00	
2004	03 KITTRELL TAXES	16.16		16.16				
	* YEAR TOTAL	16.16		16.16			100.00	
2005	03 KITTRELL TAXES	61.80		56.64				5.16
	* YEAR TOTAL	61.80		56.64			91.66	5.16
2006	03 KITTRELL TAXES	233.97		233.97				
	* YEAR TOTAL	233.97		233.97			100.00	
2007	03 KITTRELL TAXES	532.88		532.88				
	* YEAR TOTAL	532.88		532.88			100.00	
2008	03 KITTRELL TAXES	651.95		651.95				
	* YEAR TOTAL	651.95		651.95			100.00	
2009	03 KITTRELL TAXES	457.55		456.02				1.53
	* YEAR TOTAL	457.55		456.02			99.67	1.53
2010	03 KITTRELL TAXES	542.16		542.16				
	* YEAR TOTAL	542.16		542.16			100.00	
2011	03 KITTRELL TAXES	538.17		478.79		58.22		1.16
	* YEAR TOTAL	538.17		478.79		58.22	99.79	1.16
2012	03 KITTRELL							

DATE 3/28/24 200 REGISTERED VEHICLE  
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VANCE COUNTY  
 LEVY COLLECTED REPORT  
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REVENUE UNIT/YEAR

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
	TAXES	831.64		753.41		60.09		18.14
	* YEAR TOTAL	831.64		753.41		60.09	97.82	18.14
2013 03	KITTRELL TAXES	541.09		481.85		56.95		2.29
	* YEAR TOTAL	541.09		481.85		56.95	99.58	2.29
	** REV UNT TOT	4,429.10		4,225.56		175.26	99.37	28.28

DATE 3/28/24 200 REGISTERED VEHICLE  
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VANCE COUNTY  
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REVENUE UNIT/YEAR

PAGE 38  
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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2000 08	MIDDLEBURG TAXES	10.65		10.65				
*	YEAR TOTAL	10.65		10.65			100.00	
2001 08	MIDDLEBURG TAXES	138.35		69.76		68.59		
*	YEAR TOTAL	138.35		69.76		68.59	100.00	
2002 08	MIDDLEBURG TAXES	188.92		86.99		101.93		
*	YEAR TOTAL	188.92		86.99		101.93	100.00	
2003 08	MIDDLEBURG TAXES	111.61		65.96		45.65		
*	YEAR TOTAL	111.61		65.96		45.65	100.00	
2004 08	MIDDLEBURG TAXES	192.46		138.85		53.61		
*	YEAR TOTAL	192.46		138.85		53.61	100.00	
2005 08	MIDDLEBURG TAXES	210.69		177.57				33.12
*	YEAR TOTAL	210.69		177.57			84.29	33.12
2006 08	MIDDLEBURG TAXES	1,223.56		1,187.02		19.83		16.71
*	YEAR TOTAL	1,223.56		1,187.02		19.83	98.64	16.71
2007 08	MIDDLEBURG TAXES	2,180.82		2,175.12				5.70
*	YEAR TOTAL	2,180.82		2,175.12			99.74	5.70
2008 08	MIDDLEBURG TAXES	2,238.93		2,237.13				1.80
*	YEAR TOTAL	2,238.93		2,237.13			99.92	1.80
2009 08	MIDDLEBURG TAXES	1,877.68		1,803.78		1.79		72.11
*	YEAR TOTAL	1,877.68		1,803.78		1.79	96.16	72.11
2010 08	MIDDLEBURG							



DATE 3/28/24 200 REGISTERED VEHICLE  
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REVENUE UNIT/YEAR

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
	TAXES	1,628.21		1,607.16		21.05		
	* YEAR TOTAL	1,628.21		1,607.16		21.05	100.00	
2011	08 MIDDLEBURG TAXES	1,913.08		1,861.58		32.05		19.45
	* YEAR TOTAL	1,913.08		1,861.58		32.05	98.99	19.45
2012	08 MIDDLEBURG TAXES	1,650.40		1,701.62		61.35-		10.13
	* YEAR TOTAL	1,650.40		1,701.62		61.35-	99.39	10.13
2013	08 MIDDLEBURG TAXES	997.85		1,017.33		31.51-		12.03
	* YEAR TOTAL	997.85		1,017.33		31.51-	98.80	12.03
	** REV UNT TOT	14,563.21		14,140.52		251.64	98.83	171.05

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REVENUE UNIT/YEAR

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
2002	12 FIRE DISTRICT TAXES	727.43		385.85		341.58		
	* YEAR TOTAL	727.43		385.85		341.58	100.00	
2003	12 FIRE DISTRICT TAXES	1,378.08		786.42		591.66		
	* YEAR TOTAL	1,378.08		786.42		591.66	100.00	
2004	12 FIRE DISTRICT TAXES	1,770.44		1,170.00		600.44		
	* YEAR TOTAL	1,770.44		1,170.00		600.44	100.00	
2005	12 FIRE DISTRICT TAXES	5,276.33		4,705.66		1.32		569.35
	* YEAR TOTAL	5,276.33		4,705.66		1.32	89.21	569.35
2006	12 FIRE DISTRICT TAXES	40,840.25		40,320.35		7.62		512.28
	* YEAR TOTAL	40,840.25		40,320.35		7.62	98.75	512.28
2007	12 FIRE DISTRICT TAXES	63,154.07		62,596.92		46.40		510.75
	* YEAR TOTAL	63,154.07		62,596.92		46.40	99.20	510.75
2008	12 FIRE DISTRICT TAXES	56,307.26		55,858.59		16.43		432.24
	* YEAR TOTAL	56,307.26		55,858.59		16.43	99.24	432.24
2009	12 FIRE DISTRICT TAXES	48,832.57		48,183.31		41.41		607.85
	* YEAR TOTAL	48,832.57		48,183.31		41.41	98.76	607.85
2010	12 FIRE DISTRICT TAXES	42,756.54	102.48	41,971.90		262.08		522.56
	* YEAR TOTAL	42,756.54	102.48	41,971.90		262.08	98.78	522.56
2011	12 FIRE DISTRICT TAXES	53,858.96	284.46	52,397.02		969.55		492.39
	* YEAR TOTAL	53,858.96	284.46	52,397.02		969.55	99.09	492.39
2012	12 FIRE DISTRICT							

DATE 3/28/24 200 REGISTERED VEHICLE  
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VANCE COUNTY  
 LEVY COLLECTED REPORT  
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REVENUE UNIT/YEAR

PAGE 41  
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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
	TAXES	67,638.35	174.39	65,644.45		1,251.99		741.91
	* YEAR TOTAL	67,638.35	174.39	65,644.45		1,251.99	98.91	741.91
2013	12 FIRE DISTRICT TAXES	48,243.68	202.41	46,625.63		942.67		675.38
	* YEAR TOTAL	48,243.68	202.41	46,625.63		942.67	98.61	675.38
2014	12 FIRE DISTRICT TAXES	112.52	43.70	100.53		4.29		7.70
	* YEAR TOTAL	112.52	43.70	100.53		4.29	93.16	7.70
2015	12 FIRE DISTRICT TAXES	.96	.96					.96
	* YEAR TOTAL	.96	.96					.96
	** REV UNT TOT	430,897.44	808.40	420,746.63		5,077.44	98.83	5,073.37
	*** GROUP TOTAL	21,536,372.01	33,374.46	20,754,270.36		473,638.42	98.57	308,463.23

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VANCE COUNTY  
LEVY COLLECTED REPORT  
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REVENUE UNIT/YEAR

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YEAR	REVENUE UNIT CHARGE TYPE	(A) LEVY ORIG/DISC	DISC BILLS INCL IN (A)	(B) LEVY PAID/DSCNTS	DISCOUNTS INCL IN (B)	(C) NET ABATEMENTS	B+C/A COLL %	LEVY OUTSTANDING
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***	GRAND TOTAL	530,096,378.76	6,139,073.76	521,134,278.63		5,298,685.13	99.31	3,663,415.00
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DATE 3/28/24  
 TIME 17:15:21  
 USER VNDEVONA

CURR TAX YEAR: 2024

VANCE COUNTY  
 TAX COLLECTIONS REPORT ALL RGCDS BY UNIT/YEAR  
 DEPOSIT DATE RANGE 3/01/2024 THRU 3/28/2024  
 YEAR RANGE 2000 THRU 2024

PAGE 1  
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REVENUE UNIT: 00 VANCE COUNTY

YEAR	BEGINNING LEVY	ADDITIONS TO LEVY MTD	ADDITIONS YTD	DISCOUNTS AND RELEASES TO LEVY MTD	DISCOUNTS AND RELEASES YTD	ADJUSTED LEVY	COLLECTED MTD	COLLECTED YTD	ENDING BALANCE
2024		27,168.79	79,168.87	4,129.04	4,617.04	74,551.83	2,821.00	8,785.87	65,765.96
2023	1,000,939.49			70.13		1,000,939.49	177,116.32		1,000,939.49
2022	304,225.30	80.20		514.06		304,225.30	28,133.39		304,225.30
2021	126,310.70					126,310.70	7,604.26		126,310.70
2020	86,256.69					86,256.69	3,266.88		86,256.69
2019	72,009.13					72,009.13	1,507.08		72,009.13
2018	53,982.73					53,982.73	445.69		53,982.73
2017	106,086.56					106,086.56	107.41		106,086.56
2016	113,460.16					113,460.16	145.62		113,460.16
2015	21,167.34					21,167.34			21,167.34
2014	34,591.20					34,591.20			34,591.20
2013	46,747.30					46,747.30	19.55		46,747.30
2012	41,756.97					41,756.97			41,756.97
2011	42,508.01					42,508.01			42,508.01
2010	35,470.83					35,470.83			35,470.83
2009	37,926.77					37,926.77			37,926.77
2008	35,664.02					35,664.02			35,664.02
2007	38,831.92					38,831.92			38,831.92
2006	40,257.73					40,257.73			40,257.73
2005	41,949.69					41,949.69			41,949.69
2004	937.40					937.40			937.40
2003	2,036.31					2,036.31			2,036.31
2002	390.90					390.90			390.90
2001	1,106.92					1,106.92			1,106.92



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 USER VNDEVONA

VANCE COUNTY  
 TAX COLLECTIONS REPORT ALL RGCDS BY UNIT/YEAR  
 DEPOSIT DATE RANGE 3/01/2024 THRU 3/28/2024  
 YEAR RANGE 2000 THRU 2024

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CURR TAX YEAR: 2024

REVENUE UNIT: 03 KITTRELL

YEAR	BEGINNING LEVY	ADDITIONS TO LEVY MTD	ADDITIONS YTD	DISCOUNTS AND RELEASES TO LEVY MTD	DISCOUNTS AND RELEASES YTD	ADJUSTED LEVY	COLLECTED MTD	COLLECTED YTD	ENDING BALANCE
2024		6.93	70.52			70.52	2.75	3.98	66.54
2023	338.79					338.79	97.93		338.79
2022	163.58					163.58			163.58
2021	117.89					117.89			117.89
2020	111.62					111.62			111.62
2019	58.00					58.00			58.00
2018	11.51					11.51			11.51
2017	10.54					10.54			10.54
2016									
2015	79.26					79.26			79.26
2014	13.79					13.79			13.79
2013	17.29					17.29			17.29
2012	18.14					18.14			18.14
2011	1.16					1.16			1.16
2010	4.91					4.91			4.91
2009	6.44					6.44			6.44
2008	4.91					4.91			4.91
2007	3.82					3.82			3.82
2006									
2005	5.16					5.16			5.16
2004									
2003									
2002									
TOTAL	966.81	6.93	70.52			1,037.33	100.68	3.98	1,033.35

DATE 3/28/24  
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CURR TAX YEAR: 2024

VANCE COUNTY  
TAX COLLECTIONS REPORT ALL RGCDS BY UNIT/YEAR  
DEPOSIT DATE RANGE 3/01/2024 THRU 3/28/2024  
YEAR RANGE 2000 THRU 2024

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REVENUE UNIT: 03 KITTRELL

YEAR	BEGINNING LEVY	ADDITIONS TO LEVY MTD	ADDITIONS YTD	DISCOUNTS AND RELEASES TO LEVY MTD	DISCOUNTS AND RELEASES YTD	ADJUSTED LEVY	COLLECTED MTD	COLLECTED YTD	ENDING BALANCE
CURRENT INTEREST & COLLECTORS FEES									
							15.22		
TOTAL INTEREST & COLLECTORS FEES							15.22		
TOTAL PRIOR YEARS TAXES							97.93		
TOTAL TAXES & INTEREST & COLLECTORS FEES							115.90	3.98	
DISCOVERIES TAXES & INTEREST									
NET							115.90	3.98	
CURRENT YEAR PERCENTAGE		5.64							













DATE 3/28/24  
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VANCE COUNTY  
TAX COLLECTIONS REPORT ALL RGCDS BY UNIT/YEAR  
DEPOSIT DATE RANGE 3/01/2024 THRU 3/28/2024  
YEAR RANGE 2000 THRU 2024

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CURR TAX YEAR: 2024

ASSESSMENT CODE: SWF SOLID WASTE

YEAR	BEGINNING LEVY	ADDITIONS TO LEVY MTD	ADDITIONS YTD	RELEASES TO LEVY MTD	RELEASES YTD	ADJUSTED LEVY	COLLECTED MTD	COLLECTED YTD	ENDING BALANCE
-----									
2000									
TOTAL	544,623.10		2,962.00	120.00	232.00	547,353.10	38,489.19	534.34	546,818.76
-----									
DISCOVERIES									
NET							38,489.19	534.34	
-----									
TOTAL PRIOR YEARS							38,369.19		
-----									
CURRENT YEAR PERCENTAGE	19.57								
-----									



## VETERANS SERVICE OFFICE

300 S. GARNETT STREET  
HENDERSON, NC 27536  
OFFICE: (252) 438-4619  
FAX: (252) 438-6076

### 2024 APRIL MONTHLY REPORT

Visits/Calls-	270	Male-	152	Meetings/Events-	2
Emails-	73	Female-	167	Out of County-	41
Intent to File-	0	Compensation/Pension-	84	Service Connected-	14
Claims Filed-	6	Other-	238	(received 10% - 100% this month)	

04/03/24- James Ktsanes with Caption Call, who we spoke with during our training conference brought us a hearing impaired demo phone, which will be of great benefit to our hearing impaired veterans.

04/08/24- Since it's tax time, many veterans may be wondering if there are benefits available to them. There are a few key things to know.

First, disabled veterans may be eligible to claim a federal tax refund based on an increase in their percentage of disability from the Department of Veterans Affairs, which may include a retroactive determination, or the combat-disabled veteran applying for and being granted Combat-Related Special Compensation, after an award for Concurrent Retirement and Disability.

In order to do so, a disabled veteran has to file the amended return, Form 1040-X, Amended U.S. Individual Income Tax Return to correct a previously filed Form 1040, 1040-A or 1040-EZ. An amended return can be e-filed or filed by paper for most returns. For tax years 2019 and later, a paper filed original return can be amended electronically or by paper.

Disabled veterans should include all their documents from the VA, and any information they receive from Defense Finance and Accounting Services explain proper tax treatment for the current year.

It's only in the year of the Department of Veterans Affairs reassessment of disability percentage, including any impacted retroactive year or the year that the CRCS is initially granted or adjusted that a veteran may need to file an amended return.



## VETERANS SERVICE OFFICE

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Under normal circumstances, the Form 1099-R issued to a veteran by the Defense Finance and Account Services correctly reflects the taxable portion of compensation received. No amended return would be required, since it's already been adjusted for non-taxable awards.

A veteran should get help from a tax professional before they file an amended return based on a disability determination. Incorrectly interpreting the tax law could subject a veteran to interest and/or penalty fees.

04/11/24- In March, VA announced an update to the Schedule for Rating Disabilities (VASRD) specifically pertaining to digestive conditions. The changes add or modify rating criteria for 55 medical conditions in the rating schedule, incorporating medical advancements for rating certain disabilities and modern medical knowledge to more accurately compensate veterans, according to a VA notice.

As of May 19, celiac disease will have its own rating criteria to address the disabling effects. Celiac disease is an autoimmune disorder impacting how the body processes gluten. Previously, veterans with the condition were granted service connection and evaluated by analogy using rating criteria ranging from 0-30%. Now, under a specific diagnostic code, veterans will be eligible for an evaluation ranging from 0-80%.

VA is adjusting the rating criteria to evaluate irritable bowel syndrome, also known as IBS. Previously, VA offered 0, 10 and 30% evaluations for the condition. Under the new criteria, veterans may be entitled to 10, 20 or 30% evaluations based on symptom frequency. The new rating criteria as a result will always offer a compensable evaluation.

VA also addressed evaluations for internal and external hemorrhoids. Previously VA assigned a 0% evaluation if the condition was identified as mild or moderate. For more severe findings, a 10 or 20% evaluation was given. With the new rating criteria set in the rating schedule, mild or moderate hemorrhoids will qualify for the 10% evaluation.

04/16/24- A veteran was awarded a monthly tax-free VA compensation payment of \$4392.25 starting April 2024 and received a retroactive payment of \$1338.00.



# *Miscellaneous*

## ***APPOINTMENTS***

*May 6, 2024*

### **Adult Care Advisory Committee – 3 year term**

Reappoint June Royster-Tucker – appointed 11/2012  
Louis Williams – appointed 05/2015

### **Kerr-Tar Workforce Development Board – initial 1 year term**

Appoint Jennifer Jones (see application)

### **Vance County Planning Board and Board of Adjustments – 3 year term**

Two applications received for District 6 vacancy.  
James Baines and Katie Richardson (see applications)



Diane Cox  
Executive Director

April 25, 2024

**Member Governments**

**COUNTIES**

- Franklin
- Granville
- Person
- Vance
- Warren

**MUNICIPALITIES**

- Bunn
- Butner
- Creedmoor
- Franklinton
- Henderson
- Kittrell
- Louisburg
- Macon
- Middleburg
- Norlina
- Oxford
- Roxboro
- Stem
- Stovall
- Warrenton
- Youngsville

Ms. Kelly Grissom, Clerk  
Vance County Board of Commissioners  
Vance County Courthouse  
122 Young Street, Suite B  
Henderson, N.C. 27536

Dear Ms. Grissom:

I write to request that the Vance County Board of Commissioners appoint Jennifer M. Jones with NC Commerce DWS – Henderson NCWorks Career Center to the Kerr-Tar Workforce Development Board for an initial one year term. Ms. Jones will serve in the required positions of Wagner-Peyser Act Representative and Labor Organization Representative. Ms. Jones is a Vance County resident and has served in the role of NCWorks Career Center Manager for a number of years and has served the local area through the Department of Commerce for more than 20 years. As a member of the State Employees Association of NC she is also a member of a Labor Organization. Ms. Jones has daily contact with numerous organizations in the community that benefit from her knowledge gained through her years of service. Those community connections and her passion for serving the local community will offer valuable insight and prospective to the workforce programs and opportunities discussed by the board.

Ms. Jones will replace Monica Satterwhite previously appointed by Granville County. The positions being filled by Ms. Jones are required in conjunction with a persons profession and are not county related positions like the Private Industry Representatives.

Thank you for your assistance. If you have any questions or need additional information, please contact me at 252-436-2040.

Sincerely,

Lou Grillo  
Workforce Development Director

**Application for Boards/Commissions/Committees  
Vance County Board of Commissioners**

Please complete each section.

Full Name Jennifer M Jones Date of Birth 07/26/71

Home Address 187 McNair Drive, Henderson NC 27537

Home Phone 252-767-4057

Business Phone 252-598-5201 Email jennifer.m.jones@commerce.nc.gov

Current Employer NC Dept Commerce, Div Workforce Solutions

Job Title Center Manager - NCWorks Career Center Years in current position 5

Duties Manage and support staff in daily operating tasks, assist clients with job seeking activities,  
assist employers with recruitment activities, coordinate social media/marketing accounts, lead staff development/training, etc.

Other employment history \_\_\_\_\_

It is the Board of Commissioners' goal to maintain a balance of membership on its Boards/Commissions/Committees based on race, gender and district residency.

District No. \_\_\_\_\_

Male \_\_\_\_\_ Female

White \_\_\_\_\_ Black  Hispanic \_\_\_\_\_ Native America \_\_\_\_\_ Asian \_\_\_\_\_ Other \_\_\_\_\_

Board/Commission/Committee Applying For (list only one per form) Kerr Tar COG Workforce Development Board

Why are you interested in serving on this Board/Commission/Committee? \_\_\_\_\_

It's an opportunity to support career center services and continue building business relationships in our five county region.

Generally, the Board desires to broaden participation on Boards/Commissions/Committees for as much citizen involvement as possible; therefore, a goal is to limit appointees to no more than 3 Boards/Commissions/Committees. Therefore, please list any other Boards/Commissions/Committees on which you currently serve:

N/A

**DO NOT SUBMIT RESUMES/ATTACHMENTS**

**Interests/Skills/Areas of Expertise/Professional Organizations/Activities:**

Well versed in Local Labor Market Information, Coordinate and deliver career services, Provide training or refresher training to staff, Oversee

WIOA services, Build and support partnerships within 5 county area, Follow and implement state, local and WDB, policies and procedures,

Member of SEANC, Attended Leadership Vance 2020/2021

**Affirmation of Eligibility:**


Has any formal charge of professional misconduct, criminal misdemeanor or felony ever been filed against you?

Yes \_\_\_\_\_ No  \_\_\_\_\_ If yes, please explain disposition: \_\_\_\_\_

Is there any conflict of interest or other matter that would create problems or prevent you from fairly and impartially discharging your duties as an appointee of the Board of Commissioners? Yes \_\_\_\_\_ No  \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

I understand that any situation which may arise to cause conflict of interest may create serious ethical or legal implications if appropriate discretion is not exercised or responsible action is not taken.

I understand this application is public record and I certify that the facts contained in this application are true and correct to the best of my knowledge. I authorize and consent to background checks and to the investigation and verification of all statements contained herein as deemed appropriate. I further authorize all information concerning my qualifications to be investigated and release all parties from all liability for any damages that may result from this investigation. I understand and agree that any misstatement may be cause for my removal from any Board/Commission/Committee. I understand regular attendance to any Board/Commission/Committee is important and, accordingly, I further understand that if my attendance is less than the standards established for any such body that this is cause for removal. Lacking any written standards for attendance by any Board/Commission/Committee it is expected that I will attend at least 75% of all meetings during any one calendar year to maintain my seat on any Board/Commission/Committee to which I may be appointed. This form will remain on file in the Office of the Clerk and requests for updates will be sought prior to any consideration for reappointment (or future appointment) to any Board/Commission/Committee.

Signature:  Date: 3-19-2024

*Form is invalid if not signed and dated.*

**Return completed form to:**

Kelly H. Grissom  
County Commissioners' Office  
122 Young Street, Suite B  
Henderson, NC 27536  
Phone: (252)738-2003 Fax: (252) 738-2039

**Application for Boards/Commissions/Committees  
Vance County Board of Commissioners**

Please complete each section.

Full Name James R. Baines Date of Birth 4-2-1956  
Home Address 1026 Maple St. Henderson, N.C. 27536  
Home Phone (252) 492-3853  
Business Phone (252) 738-2010 Email bainesjames56@gmail.com  
Current Employer Vance Co. Maintenance  
Job Title Security Years in current position 4

Duties MONITOR CAMERA'S, ANSWER PHONE, MONITOR  
HEAT & AC UNITS,

Other employment history no

It is the Board of Commissioners' goal to maintain a balance of membership on its Boards/Commissions/Committees based on race, gender and district residency.

District No. 6

Male  Female

White  Black  Hispanic  Native America  Asian  Other

Board/Commission/Committee Applying For (list only one per form) Vance County Planning Board &  
Board of Adjustments

Why are you interested in serving on this Board/Commission/Committee? HAVE SERVED  
ON SEVERAL BOARDS IN THE CITY & COUNTY  
AND WOULD LIKE TO CONTINUE MY JOURNEY

Generally, the Board desires to broaden participation on Boards/Commissions/Committees for as much citizen involvement as possible; therefore, a goal is to limit appointees to no more than 3 Boards/Commissions/Committees. Therefore, please list any other Boards/Commissions/Committees on which you currently serve:

VANCE CO. BOE, CHAIRMAN, H&V CRIMESTOPPERS

**DO NOT SUBMIT RESUMES/ATTACHMENTS**

**Interests/Skills/Areas of Expertise/Professional Organizations/Activities:**

Love sports, Disaster Member American  
Red Cross. Board Secretary Hend-Vance  
CRIME-STOPPERS.

**Affirmation of Eligibility:**

Has any formal charge of professional misconduct, criminal misdemeanor or felony ever been filed against you?

Yes \_\_\_\_\_ No  If yes, please explain disposition: \_\_\_\_\_

Is there any conflict of interest or other matter that would create problems or prevent you from fairly and impartially discharging your duties as an appointee of the Board of Commissioners? Yes \_\_\_\_\_ No  If yes, please explain: \_\_\_\_\_

I understand that any situation which may arise to cause conflict of interest may create serious ethical or legal implications if appropriate discretion is not exercised or responsible action is not taken.

I understand this application is public record and I certify that the facts contained in this application are true and correct to the best of my knowledge. I authorize and consent to background checks and to the investigation and verification of all statements contained herein as deemed appropriate. I further authorize all information concerning my qualifications to be investigated and release all parties from all liability for any damages that may result from this investigation. I understand and agree that any misstatement may be cause for my removal from any Board/Commission/Committee. I understand regular attendance to any Board/Commission/Committee is important and, accordingly, I further understand that if my attendance is less than the standards established for any such body that this is cause for removal. Lacking any written standards for attendance by any Board/Commission/Committee it is expected that I will attend at least 75% of all meetings during any one calendar year to maintain my seat on any Board/Commission/Committee to which I may be appointed. This form will remain on file in the Office of the Clerk and requests for updates will be sought prior to any consideration for reappointment (or future appointment) to any Board/Commission/Committee.

Signature: James G. Burt

Date: April 5<sup>th</sup>, 2024

*Form is invalid if not signed and dated.*

**Return completed form to:**

Kelly H. Grissom  
County Commissioners' Office  
122 Young Street, Suite B  
Henderson, NC 27536  
Phone: (252)738-2003 Fax: (252) 738-2039

**Application for Boards/Commissions/Committees  
Vance County Board of Commissioners**

Please complete each section.

Full Name Katie Edgerton Richardson Date of Birth 6/15/1959

Home Address 125 N. CLARK St Henderson NC 27536

Home Phone 252 538-5155

Business Phone \_\_\_\_\_ Email kedegert@yahoo.com

Current Employer Maxim / AlwaysCaring

Job Title Direct support Years in current position 7 yrs total 2 different companies

Duties Provide support to those with intellectual and developmental disabilities

Other employment history licensed home daycare over 20 yrs 'Katie's Kids'

It is the Board of Commissioners' goal to maintain a balance of membership on its Boards/Commissions/Committees based on race, gender and district residency.

District No. 6

Male \_\_\_\_\_ Female

White \_\_\_\_\_ Black  Hispanic \_\_\_\_\_ Native America \_\_\_\_\_ Asian \_\_\_\_\_ Other \_\_\_\_\_

Board/Commission/Committee Applying For (list only one per form) Planning Board + Board of Adjustments

Why are you interested in serving on this Board/Commission/Committee? I WAS RAISED HERE, and would appreciate the opportunity to help in the growth and development of my home town.

Generally, the Board desires to broaden participation on Boards/Commissions/Committees for as much citizen involvement as possible; therefore, a goal is to limit appointees to no more than 3 Boards/Commissions/Committees. Therefore, please list any other Boards/Commissions/Committees on which you currently serve:

NA



**DO NOT SUBMIT RESUMES/ATTACHMENTS**

**Interests/Skills/Areas of Expertise/Professional Organizations/Activities:**

*Interests:*  
Houses, landscape, decorating; No Expertise nor Organizations  
Skilled in comparisons, and details.

**Affirmation of Eligibility:**

Has any formal charge of professional misconduct, criminal misdemeanor or felony ever been filed against you?

Yes  No  If yes, please explain disposition: tenant installed illegal cable  
tenant had trash in yard. I was responsible for the tenant.

Is there any conflict of interest or other matter that would create problems or prevent you from fairly and impartially discharging your duties as an appointee of the Board of Commissioners? Yes  No  If yes, please explain:

I understand that any situation which may arise to cause conflict of interest may create serious ethical or legal implications if appropriate discretion is not exercised or responsible action is not taken.

I understand this application is public record and I certify that the facts contained in this application are true and correct to the best of my knowledge. I authorize and consent to background checks and to the investigation and verification of all statements contained herein as deemed appropriate. I further authorize all information concerning my qualifications to be investigated and release all parties from all liability for any damages that may result from this investigation. I understand and agree that any misstatement may be cause for my removal from any Board/Commission/Committee. I understand regular attendance to any Board/Commission/Committee is important and, accordingly, I further understand that if my attendance is less than the standards established for any such body that this is cause for removal. Lacking any written standards for attendance by any Board/Commission/Committee it is expected that I will attend at least 75% of all meetings during any one calendar year to maintain my seat on any Board/Commission/Committee to which I may be appointed. This form will remain on file in the Office of the Clerk and requests for updates will be sought prior to any consideration for reappointment (or future appointment) to any Board/Commission/Committee.

Signature: *Sal Rubra*

Date: April 10, 2024

**Form is invalid if not signed and dated.**