

# AGENDA

## REGULAR SCHOOL BOARD MEETING

GADSDEN COUNTY SCHOOL BOARD  
MAX D. WALKER ADMINISTRATION BUILDING  
35 MARTIN LUTHER KING, JR. BLVD.  
QUINCY, FLORIDA

April 22, 2014

6:00 P.M.

THIS MEETING IS OPEN TO THE PUBLIC

1. CALL TO ORDER
2. OPENING PRAYER
3. PLEDGE OF ALLEGIANCE
4. RECOGNITIONS

### ITEMS FOR CONSENT

#### 5. REVIEW OF MINUTES – **SEE ATTACHMENT**

- a. March 25, 2014, 4:30 p.m. – School Board Workshop
- b. March 25, 2014, 6:00 p.m. – Regular School Board Meeting

ACTION REQUESTED: The Superintendent recommends approval.

#### 6. PERSONNEL MATTERS (resignations, retirements, recommendations, leaves of absence, terminations of services, volunteers, and job descriptions) **SEE PAGE #6**

- a. Personnel 2013 – 2014

ACTION REQUESTED: The Superintendent recommends approval.

- b. 2013 – 2014 GCSB Organizational Chart – **SEE PAGE #8**

ACTION REQUESTED: The Superintendent recommends approval.

#### 7. BUDGET AND FINANCIAL TRANSACTIONS

- a. Budget Amendment Number Nine – **SEE PAGE #26**

Fund Source: 110 (General) Fund  
Amount: \$260,870.40

ACTION REQUESTED: The Superintendent recommends approval.

- b. Budget Amendment Number Ten – **SEE PAGE #45**  
 Fund Source: 420 (Federal) Funds  
 Amount: \$2,008,798.00  
 ACTION REQUESTED: The Superintendent recommends approval.
- c. Budget Amendment Number Eleven – **SEE PAGE #67**  
 Fund Source: 410 School Food Service  
 Amount: \$172,013.05  
 ACTION REQUESTED: The Superintendent recommends approval.

8. AGREEMENT/CONTRACT/PROJECT APPLICATIONS

- a. Specific Appropriation 117 A Program and Expenditure Plan  
**SEE PAGE #81**  
 Fund Source: General Fund 110 (use restricted to this program)  
 Amount: \$43,341.59  
 ACTION REQUESTED: The Superintendent recommends approval.
- b. Food Service Purchase Change Order for Refrigeration Services  
**SEE PAGE #89**  
 Fund Source: Fund 410 Food Service  
 Amount: Total of PO after increase \$8,000  
 ACTION REQUESTED: The Superintendent recommends approval.
- c. Approval of Vendor Purchase Order to Provide Services Defined in the  
 FLDOE RFP for the 21<sup>st</sup> Century Program - **SEE PAGE #91**  
 Fund Source: Fund 420 (Federal Funds)  
 Amount: \$5,250.00  
 ACTION REQUESTED: The Superintendent recommends approval.
- d. Affiliation Agreement Between Gadsden County School District – East  
 Gadsden High School and River Chase Care Center – **SEE PAGE #94**  
 Fund Source: FEFP  
 Amount: N/A  
 ACTION REQUESTED: The Superintendent recommends approval.
- e. Affiliation Agreement Between the School Board of Gadsden County and  
 Tallahassee Medical Center, Inc. d/b/a Capital Regional Medical Center –  
**SEE PAGE #101**  
 Fund Source: FEFP  
 Amount: N/A  
 ACTION REQUESTED: The Superintendent recommends approval.

- f. Parent Liaison Services with Gadsden County Schools – **SEE PAGE #115**  
Fund Source: Fund 420 Federal Funds (Vista Volunteers)  
Amount: \$16,500.00  
ACTION REQUESTED: The Superintendent recommends approval.
  - g. 2014-15 Proposed Bus Rate Increase – **SEE PAGE #117**  
Fund Source: 110 General Fund  
Amount: Future Revenue Increase for the next fiscal period  
ACTION REQUESTED: The Superintendent recommends approval.
  - h. Disaster Recovery Plan – **SEE PAGE #121**  
Fund Source: None, plan is written by District’s IT staff  
Amount: N/A  
ACTION REQUESTED: The Superintendent recommends approval.
  - i. School Field Trip Request (Out of State) – **SEE PAGE #122**  
Fund Source: N/A  
Amount: N/A  
ACTION REQUESTED: The Superintendent recommends approval.
9. **STUDENT MATTERS – SEE ATTACHMENT**
- a. Student Transfers – See back-up material  
ACTION REQUESTED: The Superintendent recommends approval.
  - b. Student Expulsion – See back-up material  
Case #55-1314-0051  
ACTION REQUESTED: The Superintendent recommends approval.
  - c. Student Expulsion – See back-up material  
Case #56-1314-9102  
ACTION REQUESTED: The Superintendent recommends approval.
  - d. Student Expulsion – See back-up material  
Case #57-1314-9102  
ACTION REQUESTED: The Superintendent recommends approval.
  - e. Student Expulsion – See back-up material  
Case #58-1314-9102  
ACTION REQUESTED: The Superintendent recommends approval.

- f. Student Expulsion – See back-up material  
Case #59-1314-9102  
ACTION REQUESTED: The Superintendent recommends approval.
- g. Student Expulsion –See back-up material  
Case #60-1314-0051  
ACTION REQUESTED: The Superintendent recommends approval.
- h. Student Expulsion – See back-up material  
Case #62-1314-0051  
ACTION REQUESTED: The Superintendent recommends approval.

10. SCHOOL FACILITY/PROPERTY

- a. Change Order #1 HMS PreK thru 3<sup>rd</sup> Grade Construction Project  
**SEE PAGE #154**  
  
Fund Source: 379  
Amount: \$103,260.00  
  
ACTION REQUESTED: The Superintendent recommends approval.
- b. Comprehensive Maintenance Agreement for HVAC at EGHS  
**SEE PAGE #157**  
  
Fund Source: 110  
Amount: \$3,827.00  
  
ACTION REQUESTED: The Superintendent recommends approval.
- c. Comprehensive Maintenance Agreement for HVAC at WGHS  
**SEE PAGE #168**  
  
Fund Source: 110  
Amount: \$3,185.00 per month  
  
ACTION REQUESTED: The Superintendent recommends approval.
- d. Grounds Maintenance WGHS/EGHS Athletic Fields – **SEE PAGE #177**  
  
Fund Source: 110  
Amount: \$1,965.00 per month EGHS  
\$1,965.00 per month WGHS  
  
ACTION REQUESTED: The Superintendent recommends approval.

- e. Request to Delete from Capital Assets and Sale to Highest Bidder  
**SEE PAGE #211**

Fund Source: Applicable Funds

Amount: \$448,208.00

**ACTION REQUESTED:** The Superintendent recommends approval.

- 11. EDUCATIONAL ITEMS BY THE SUPERINTENDENT
- 12. SCHOOL BOARD REQUESTS AND CONCERNS
- 13. ADJOURNMENT

# The School Board of Gadsden County

6a



*"Building A Brighter Future"*

**Reginald C. James**  
SUPERINTENDENT  
OF SCHOOLS

35 MARTIN LUTHER KING, JR. BLVD.  
QUINCY, FLORIDA 32351  
TEL: (850) 627-9651  
FAX: (850) 627-2760  
www.gcps.k12.fl.us

April 22, 2014

The School Board of  
Gadsden County, Florida  
Quincy, Florida 32351

Dear School Board Members:

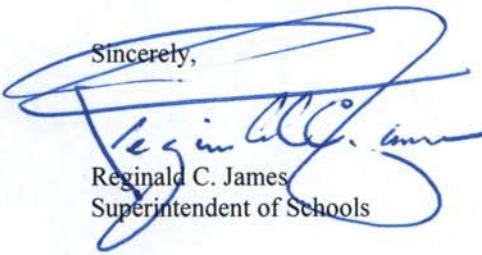
**I am recommending that the attached list of personnel actions be approved, as indicated. I further recommend that all appointments to grant positions be contingent upon funding.**

#### **Item 6A Instructional and Non-Instructional Personnel 2013/2014**

The following reflects the total number of full-time employees in this school district for the 2013/2014 school term, as of April 22, 2014.

<u>Description Per DOE Classification</u>	<u>DOE Object#</u>	<u>#Employees April 2014</u>
Classroom Teachers and Other Certified	120 & 130	456.00
Administrators	110	49.00
Non-Instructional	150, 160, & 170	<u>396.00</u>
		901.00

Sincerely,

  
Reginald C. James  
Superintendent of Schools

Audrey Lewis  
DISTRICT NO. 1  
HAVANA, FL 32333  
MIDWAY, FL 32343

Judge B. Helms, Jr.  
DISTRICT NO. 2  
QUINCY, FL 32351  
HAVANA, FL 32333

Isaac Simmons, Jr.  
DISTRICT NO. 3  
CHATTAHOOCHEE, FL 32324  
GREENSBORO, FL 32330

Charlie D. Frost  
DISTRICT NO. 4  
GRETNA, FL 32332  
QUINCY, FL 32352

Roger P. Milton  
DISTRICT NO. 5  
QUINCY, FL 32351

**BOARD MEETS FOURTH TUESDAY OF EACH MONTH**  
EQUAL OPPORTUNITY EMPLOYER

AGENDA ITEM 6A, INSTRUCTIONAL AND NON INSTRUCTIONAL 2013/2014

**REQUESTS FOR LEAVE, RESIGNATION, TRANSFERS, RETIREMENTS, TERMINATIONS OF EMPLOYMENT:**

**LEAVE**

<u>Name</u>	<u>Location/Position</u>	<u>Beginning</u>	<u>Ending</u>
Berry, Charless	Transportation/Bus Driver	04/28/2014	05/03/2014
Bridges-Bright, Gail	District/ETO Data Analyst	03/27/2014	05/01/2014
Winbush, Latoya	EGHS/Custodial Asst.	04/18/2014	06/26/2014

Shelia Atkins, GTI/Instructor, requested to withdraw FMLA beginning 04/04/2014 - 04/14/2014 requested at March 25, 2014 Board Meeting.

**RESIGNATIONS**

<u>Name</u>	<u>Location</u>	<u>Position</u>	<u>Effective Date</u>
Davis, Christine	WGHS	Teacher	03/14/2014

**DROP RETIREMENTS**

<u>Name</u>	<u>Location</u>	<u>Position</u>	<u>Effective Date</u>
Scott, Ronald	WGHS	Teacher	04/25/2014

**Substitutes**

<u>Teacher</u>	<u>SFS</u>
Turner, Gabriel	Rittman, Jermane*
Hill, Latoye	

SFS/Custodial



SUMMARY SHEET

RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA

**AGENDA ITEM NO.** 6b

**DATE OF SCHOOL BOARD MEETING:** April 22, 2014

**TITLE OF AGENDA ITEM:** 2013-2014 GCSB Organizational Chart

**DIVISION:**

       This is a CONTINUATION of a current project, grant, etc.

**PURPOSE AND SUMMARY OF ITEM:**

Approval is requested of the Gadsden County School Board Organizational Chart for 2013-2014.

**FUND SOURCE:** N/A

**AMOUNT:** N/A

**PREPARED BY:** Rosalyn W. Smith

**POSITION:** Deputy Superintendent

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INTERNAL INSTRUCTIONS TO BE COMPLETED BY PREPARER

       Number of ORIGINAL SIGNATURES NEEDED by preparer.

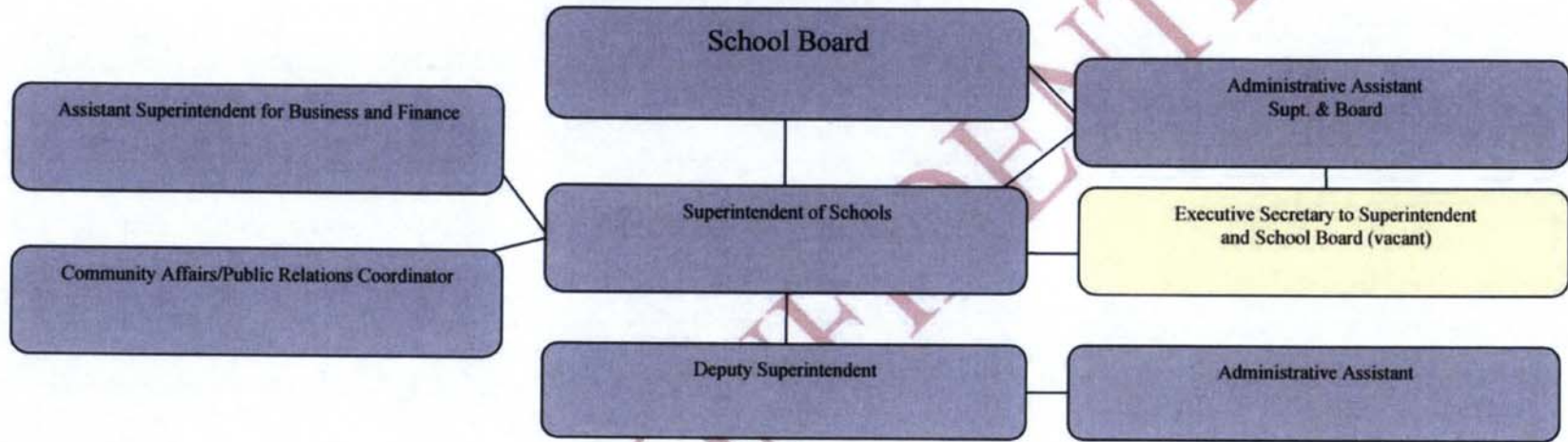
SUPERINTENDENT'S SIGNATURE: page(s) numbered \_\_\_\_\_

CHAIRMAN'S SIGNATURE: page(s) numbered \_\_\_\_\_

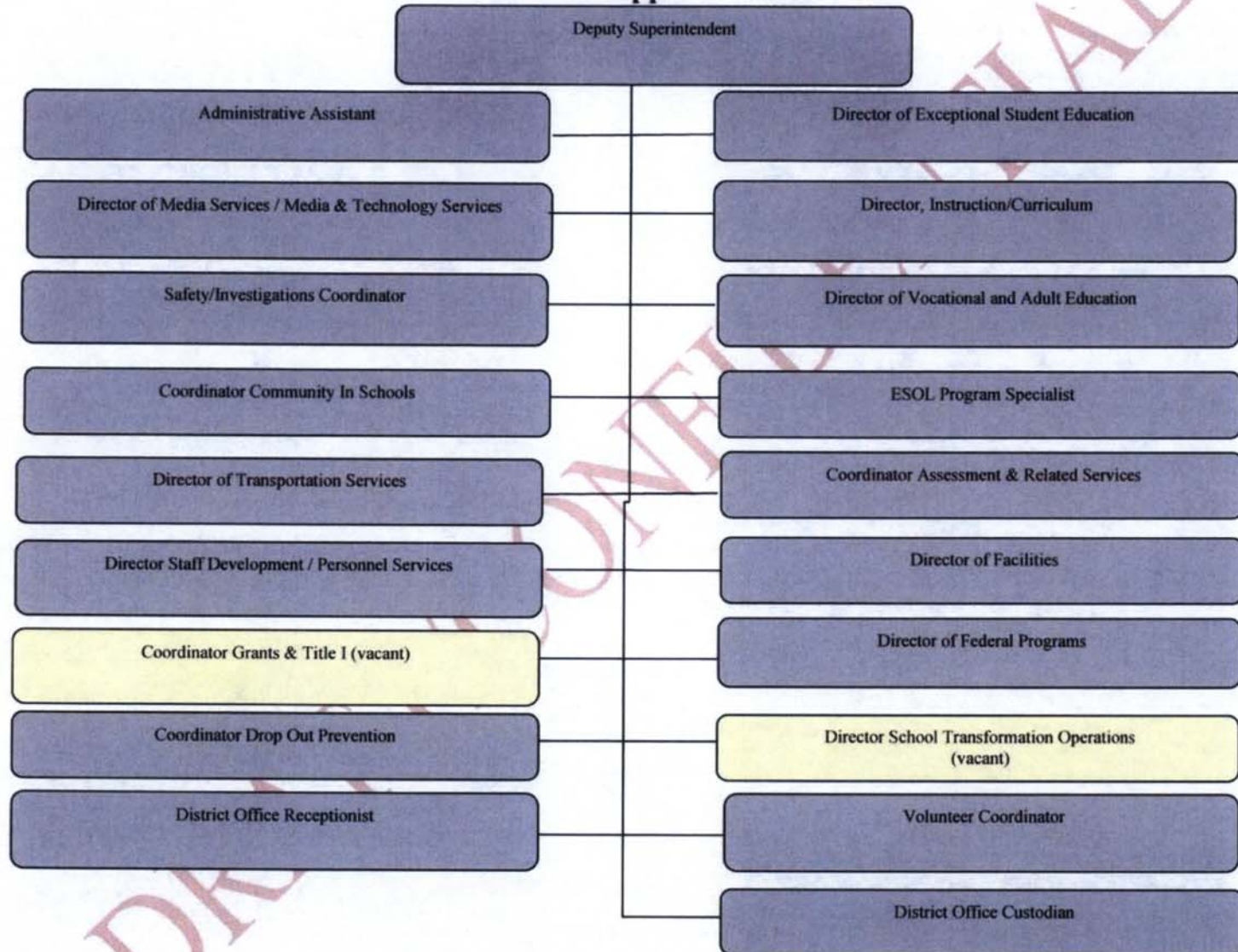
REVIEWED BY: \_\_\_\_\_



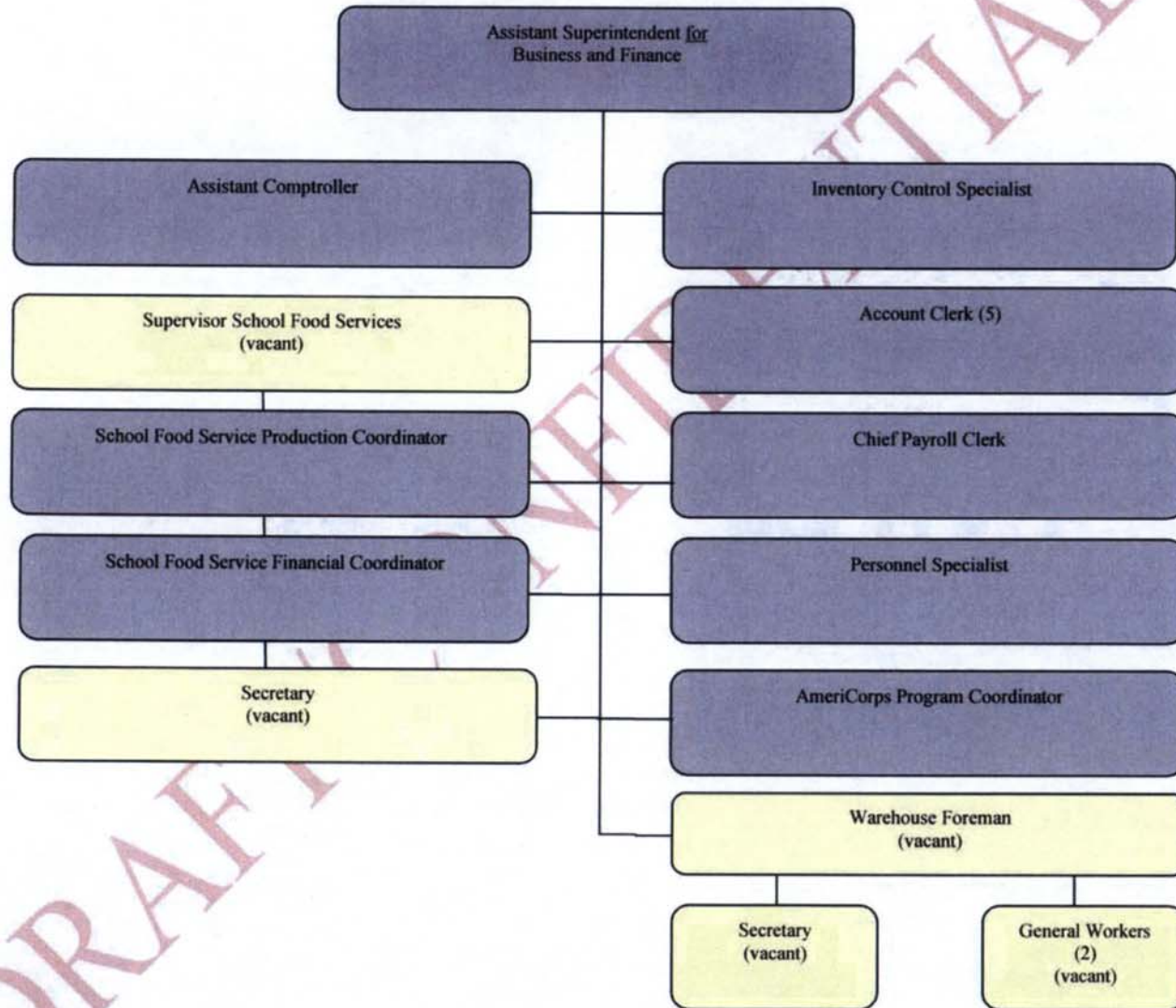
# Gadsden County School Board Organizational Chart



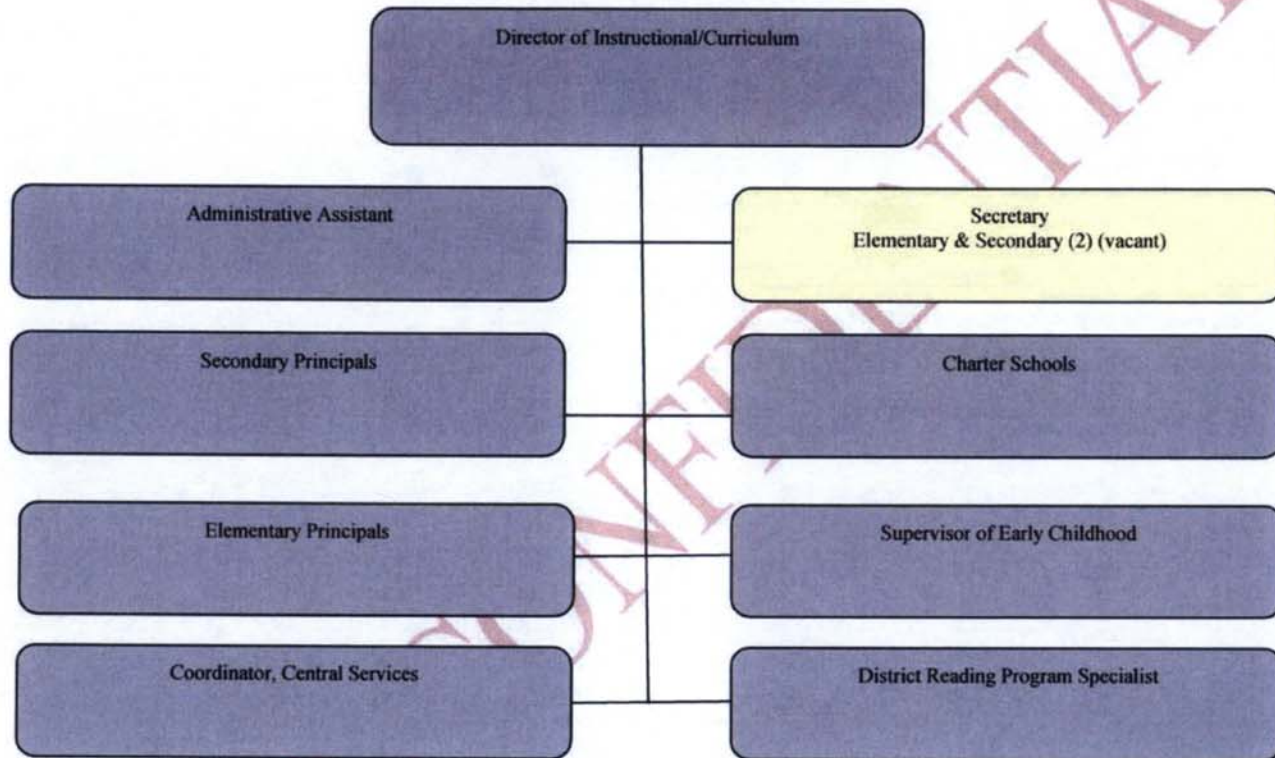
### Central Support Services



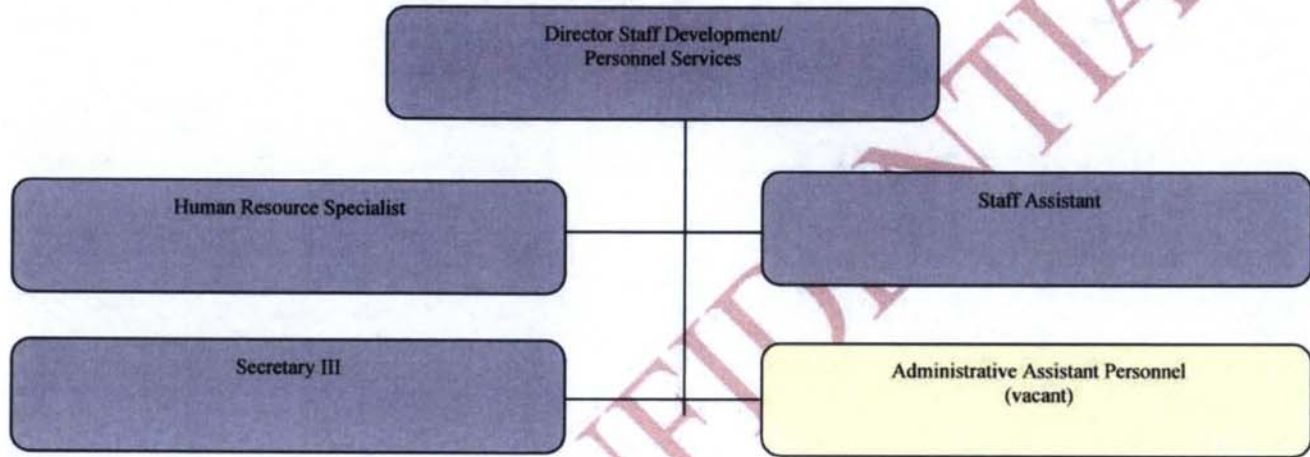
### Business Services Department



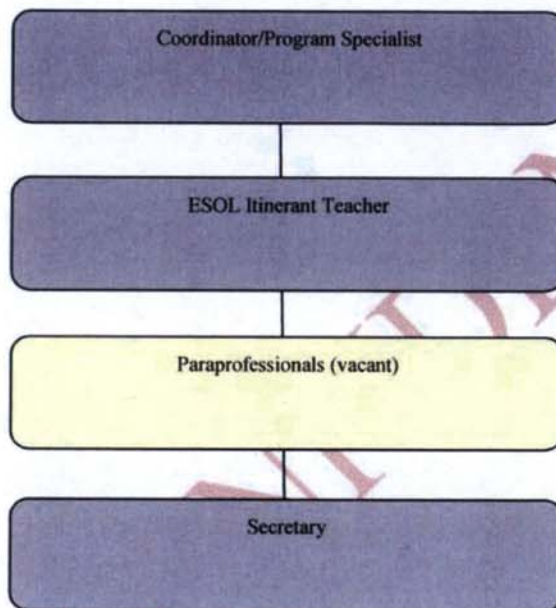
### Instructional Services



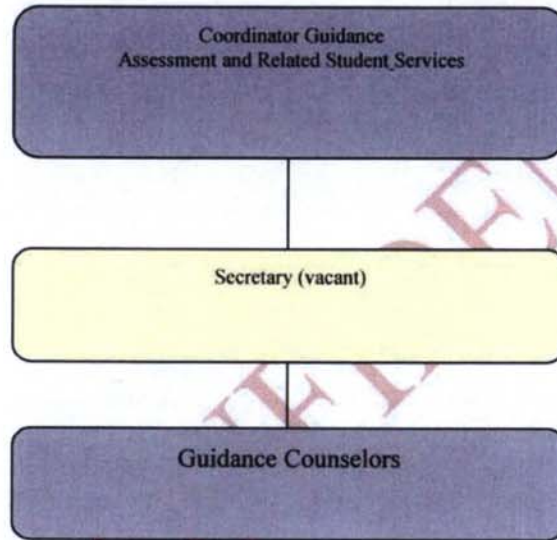
### Human Resources Department



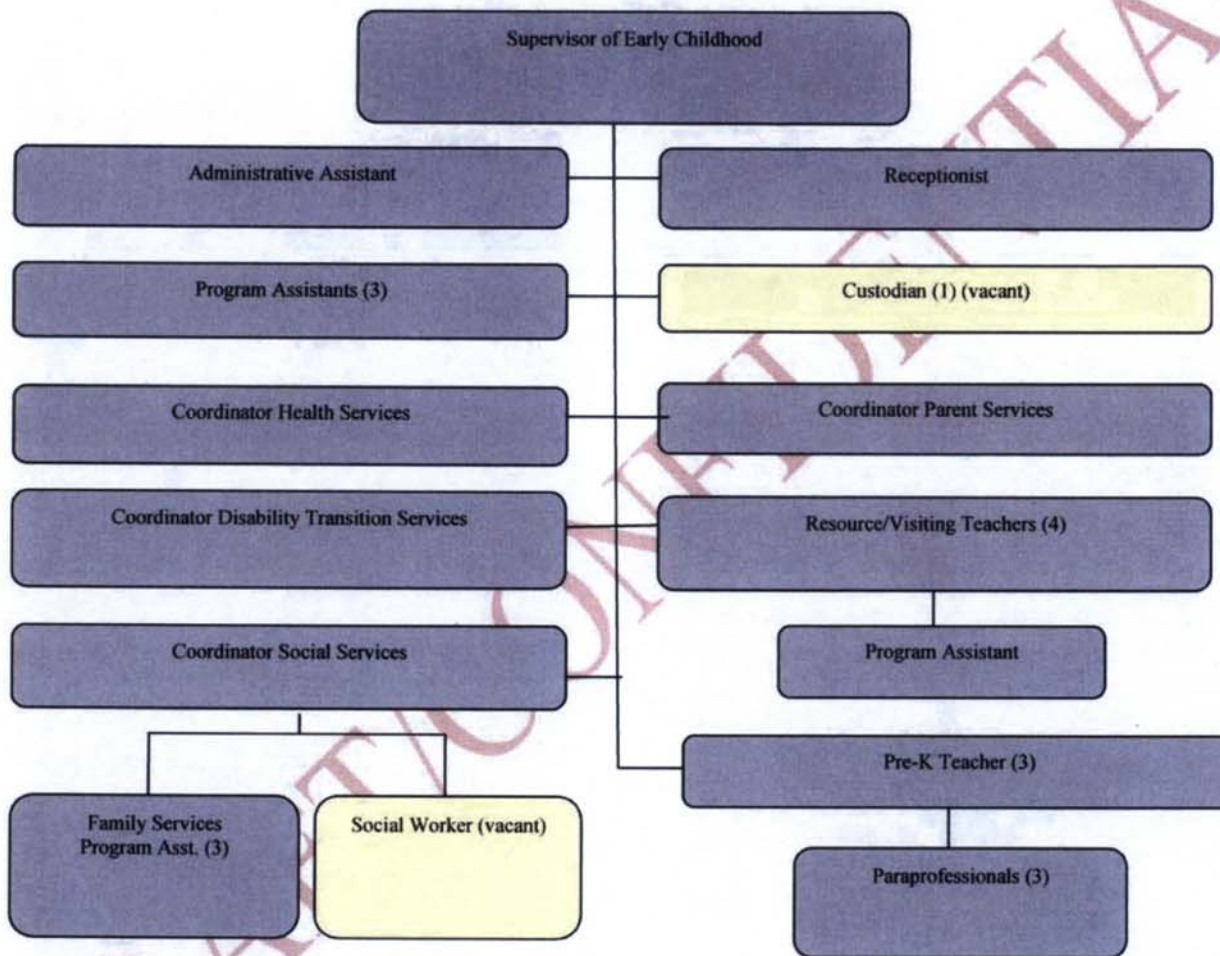
### ESOL Program



**Assessment and Guidance Services**

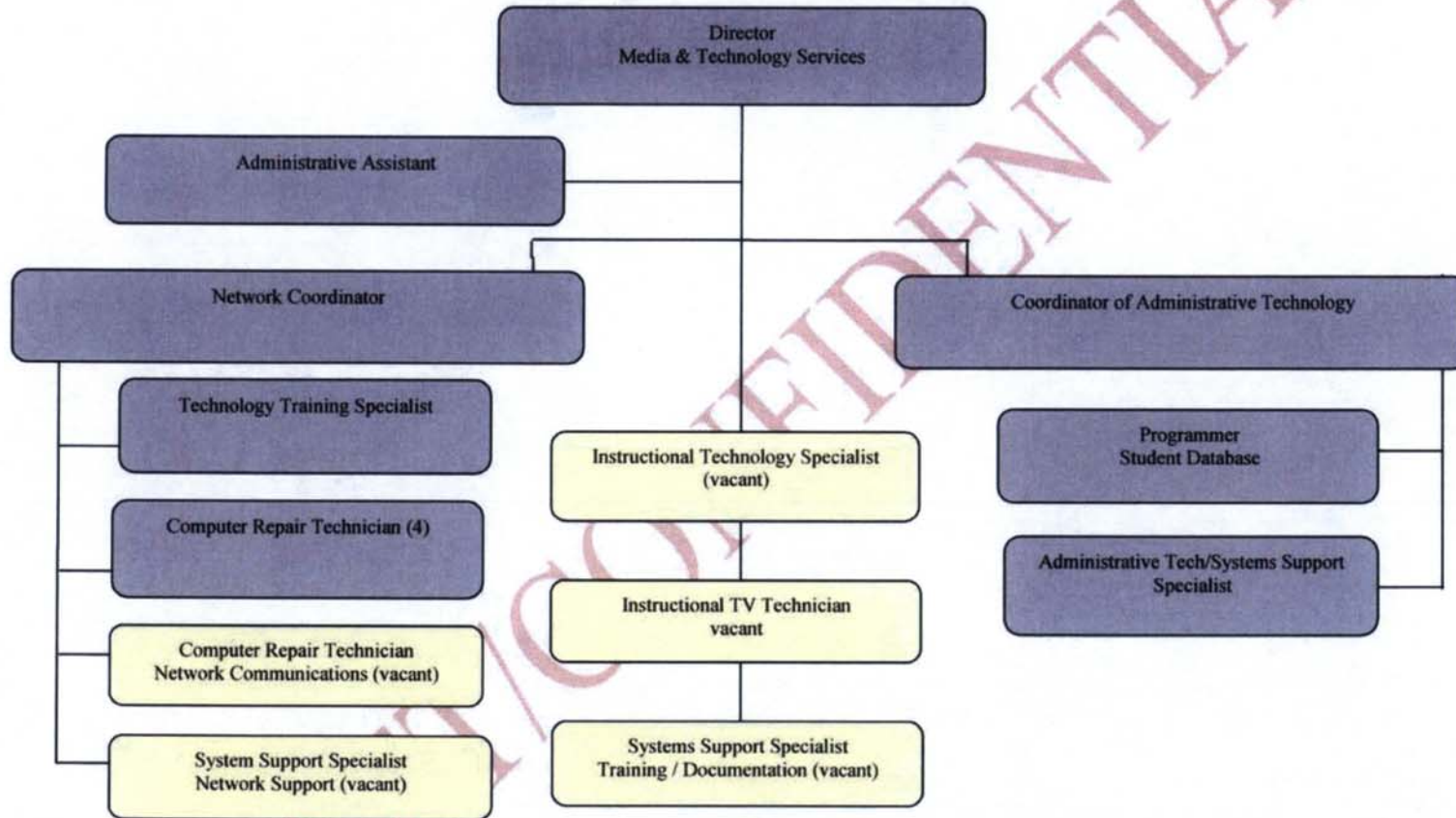


### Pre-Kindergarten Services

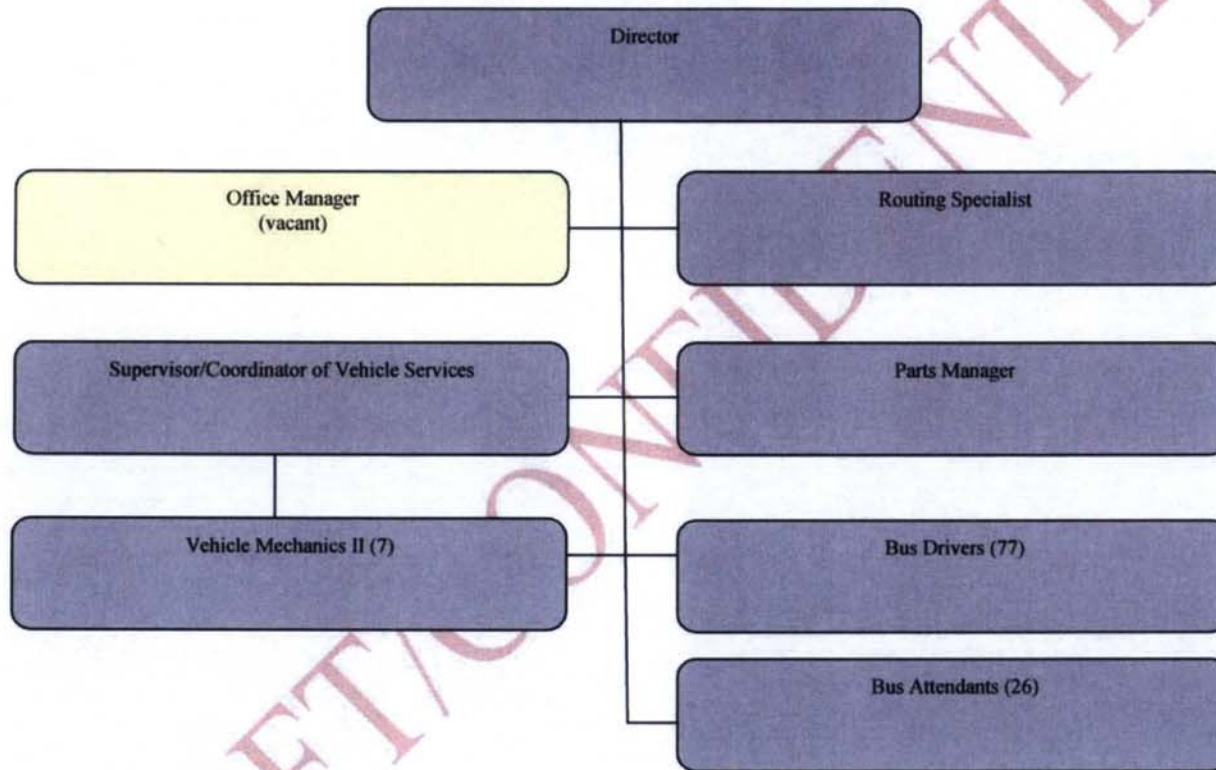




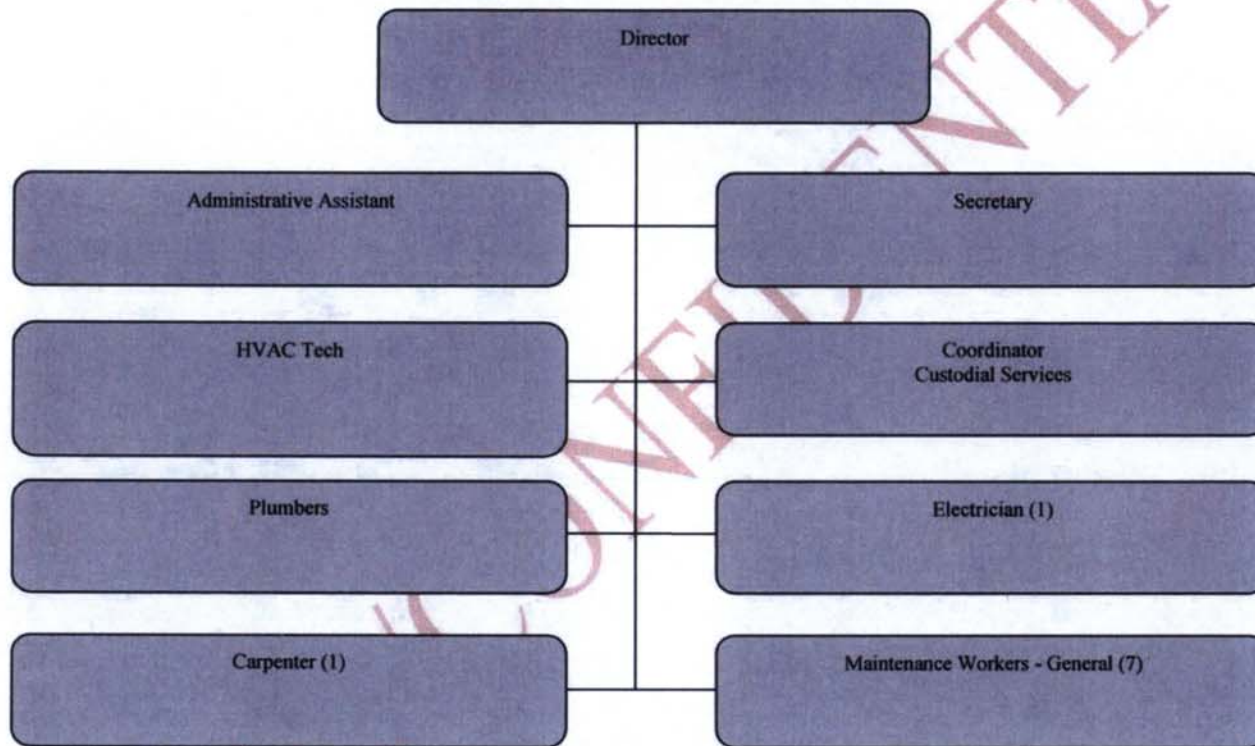
**Instructional Materials and Media/Technology Services**  
(Instructional Technology & Information Technology Services)



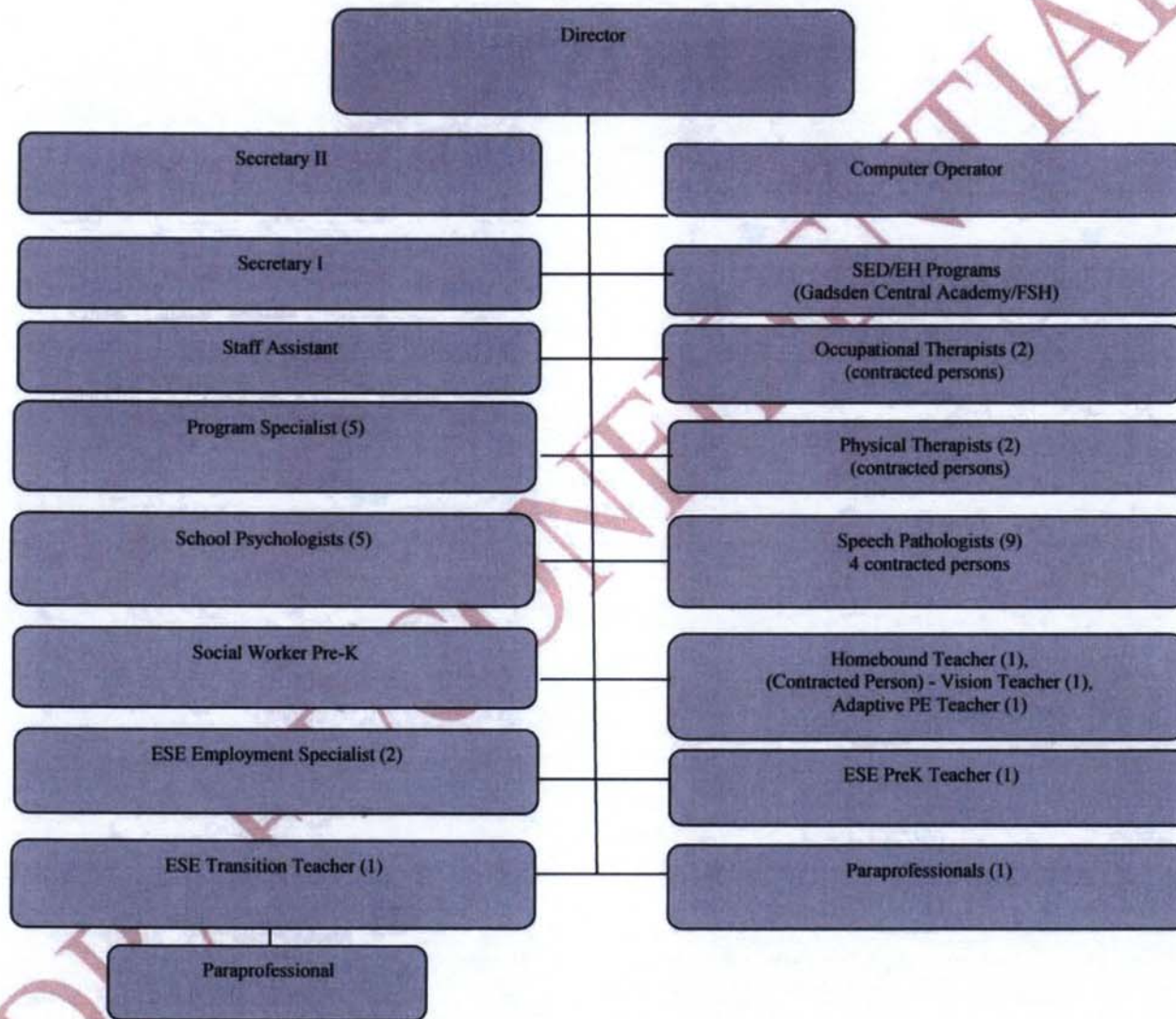
### Transportation Director



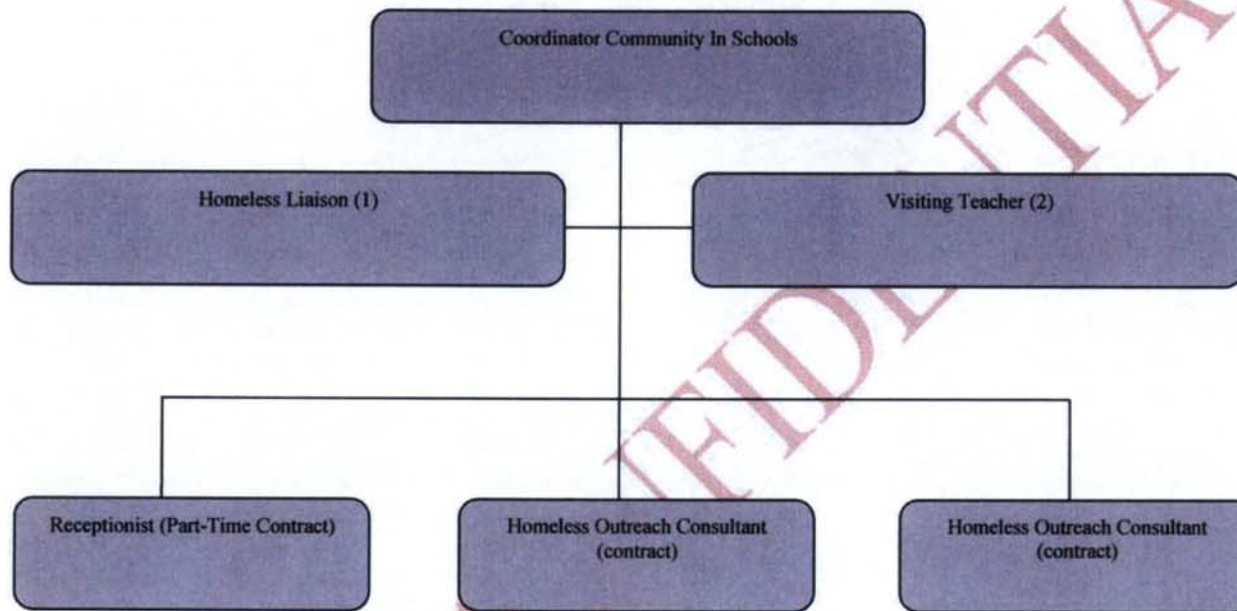
### Facilities Department



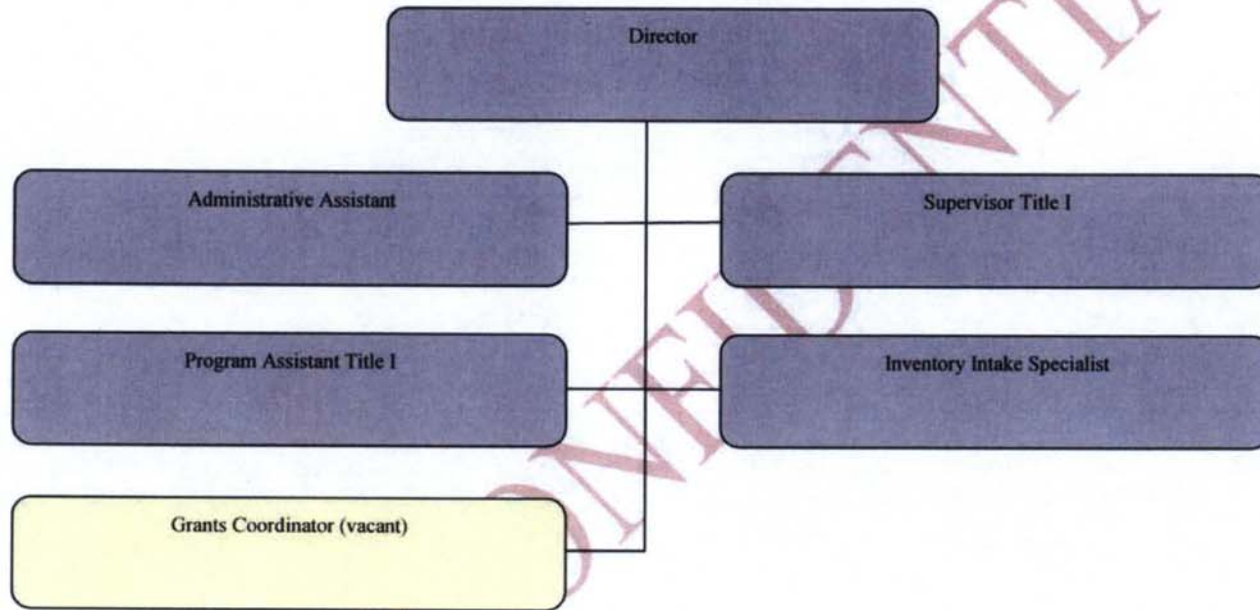
### Exceptional Student Services Department



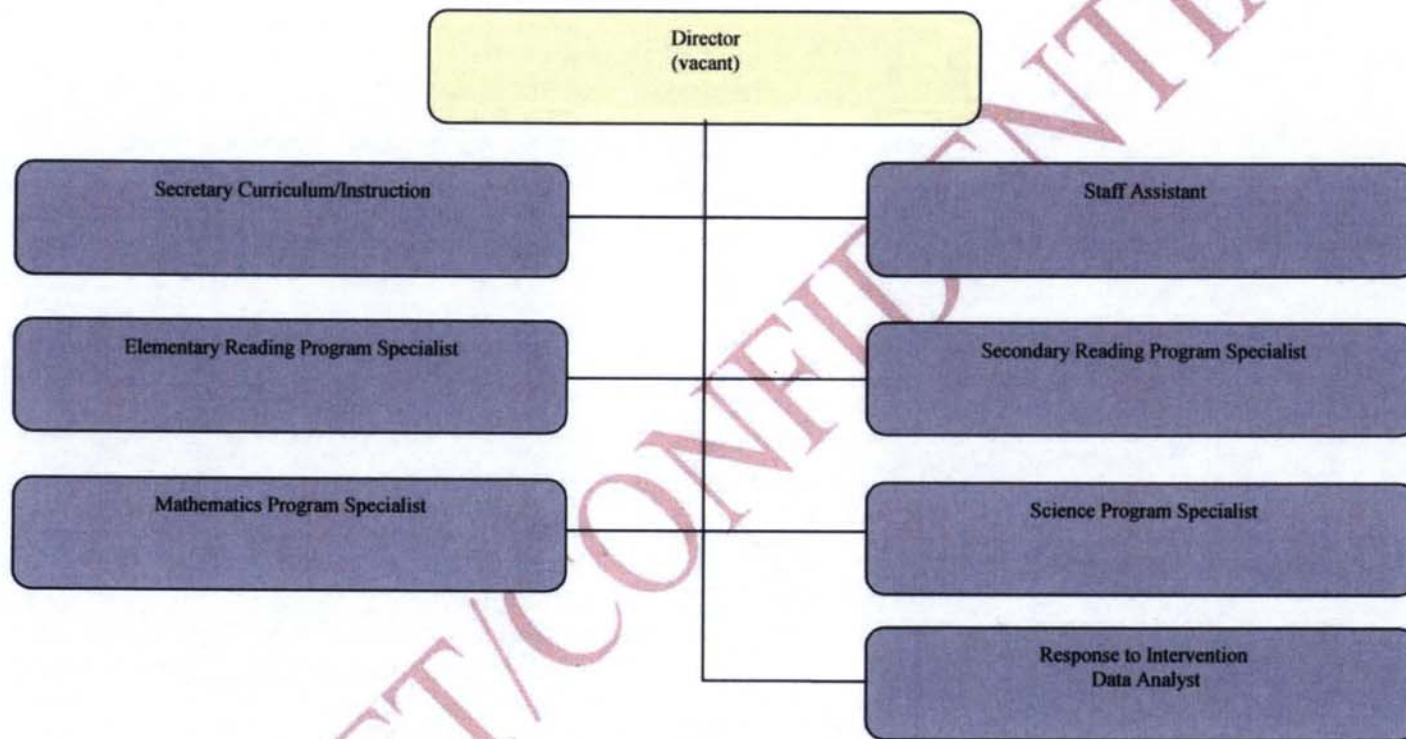
### Parent and Community Services



### Federal Programs

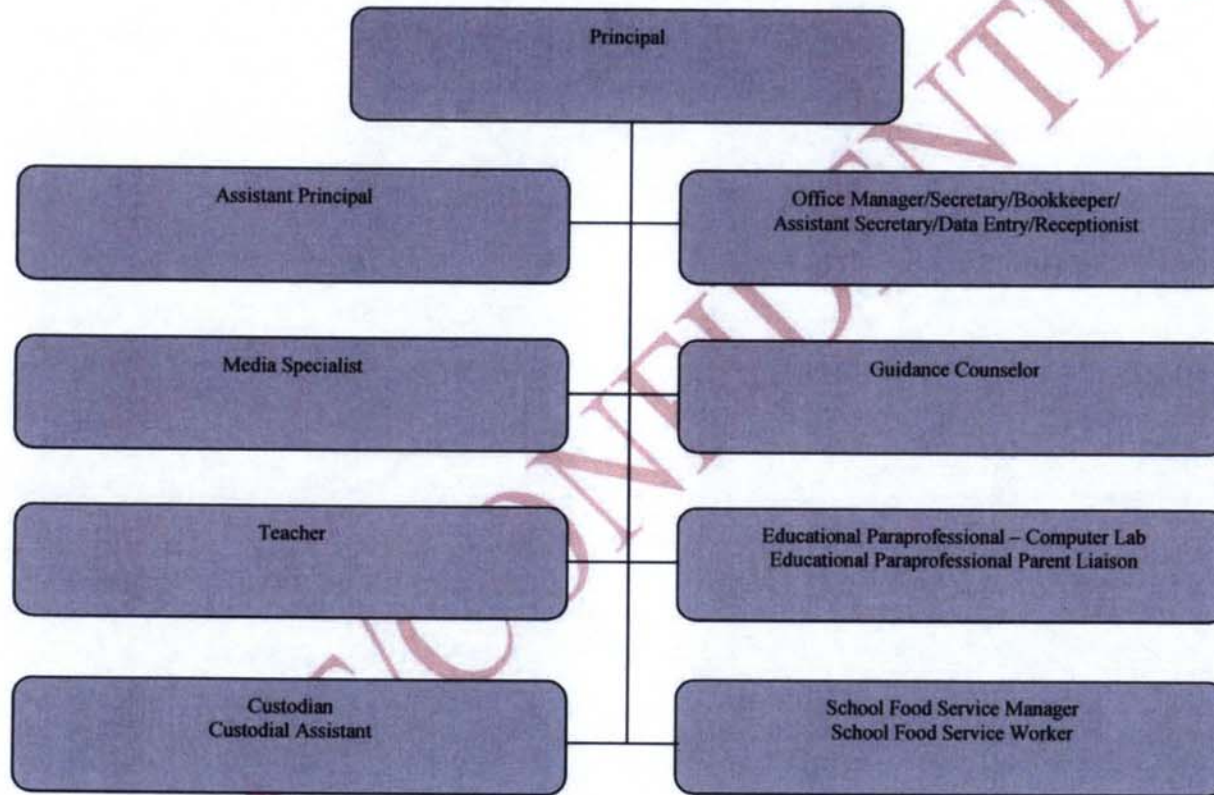


### School Transformation Operations



### School Level Organization

(Positions and numbers allocated will vary depending upon school level and enrollment)





CONFIDENTIAL / DRAFT

AMERICORPS

Director

AmeriCorps Gadsden Read (34)

DRAFT/CONFIDENTIAL

**SUMMARY SHEET**

**RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA**

**AGENDA ITEM NO.** 7a

**DATE OF SCHOOL BOARD MEETING:** April 22, 2014

**TITLE OF AGENDA ITEMS:** Budget Amendment Number Nine

**DIVISION:** Finance Department

**PURPOSE AND SUMMARY OF ITEMS:**

Board approval is requested for this budget amendment that establishes budget for the following:

Career Technical Education Appropriation	\$ 43,431.00
Project 10 Connect 13-14	\$ 1,500.00
Project 10 Visions/NSTTAC 13-14	\$ 4,000.00
Technology Transformation Grant	\$ 208,299.00
District Bandwith Support	\$ 1,202.00
Transportation Donation	\$ 543.40

It also reduces revenue for Pre-K by \$10,000 and Americorp by 4,178 while increasing revenue for the STEM donations by \$ 16,073.00.

**FUND SOURCE:** 110 (General) Fund

**AMOUNT:** \$ 260,870.40

**PREPARED BY:** Kimberly Ferree

**POSITION:** Assistant Superintendent for Business Services

**Gadsden County School Board  
110 (General) Fund Appropriations  
Budget Amendment Number  
Nine**

110 FUND			BEGINNING BUDGET 2/25/2014	BUDGET AMENDMENT NUMBER NINE	ENDING BUDGET BALANCE 4/15/2014
FUNCTION/ OBJECT					
5100	100	\$	11,675,226.43	\$ -	\$ 11,675,226.43
K-12 Instructional	200	\$	2,540,393.36	\$ -	\$ 2,540,393.36
	300	\$	3,572,291.09	\$ (142,997.92)	\$ 3,429,293.17
	400	\$	-	\$ -	\$ -
	500	\$	711,556.92	\$ (19,280.00)	\$ 692,276.92
	600	\$	261.22	\$ -	\$ 261.22
	700	\$	1,190.00	\$ -	\$ 1,190.00
<b>FUNCTOTAL</b>		<b>\$</b>	<b>18,500,919.02</b>	<b>\$ (162,277.92)</b>	<b>\$ 18,338,641.10</b>
5200	100	\$	2,339,156.31	\$ -	\$ 2,339,156.31
Exceptional Instruction	200	\$	629,649.64	\$ -	\$ 629,649.64
	300	\$	666,102.00	\$ 300.00	\$ 666,402.00
	500	\$	1,053.53	\$ -	\$ 1,053.53
	600	\$	-	\$ -	\$ -
<b>FUNCTOTAL</b>		<b>\$</b>	<b>3,635,961.48</b>	<b>\$ 300.00</b>	<b>\$ 3,636,261.48</b>
5300	100	\$	273,629.40	\$ -	\$ 273,629.40
Vocational Technical	200	\$	69,170.82	\$ -	\$ 69,170.82
	300	\$	-	\$ 975.00	\$ 975.00
	500	\$	-	\$ 2,930.70	\$ 2,930.70
	600	\$	-	\$ 38,560.99	\$ 38,560.99
<b>FUNCTOTAL</b>		<b>\$</b>	<b>342,800.22</b>	<b>\$ 42,466.69</b>	<b>\$ 385,266.91</b>
5400	100	\$	734,206.90	\$ (13,626.31)	\$ 720,580.59
	200	\$	175,916.09	\$ (1,747.46)	\$ 174,168.63
5400 Adult	300	\$	5,000.00	\$ -	\$ 5,000.00
	400	\$	-	\$ -	\$ -
	500	\$	21,100.00	\$ -	\$ 21,100.00
	600	\$	20,587.00	\$ -	\$ 20,587.00
	700	\$	-	\$ -	\$ -
<b>FUNCTOTAL</b>		<b>\$</b>	<b>956,809.99</b>	<b>\$ (15,373.77)</b>	<b>\$ 941,436.22</b>
5500	100	\$	348,647.11	\$ 33,500.00	\$ 382,147.11
Pre-Kindergarten	200	\$	110,170.54	\$ 6,400.00	\$ 116,570.54
	300	\$	265.00	\$ 5,850.00	\$ 6,115.00
	500	\$	10,990.64	\$ 19,250.00	\$ 30,240.64
	600	\$	-	\$ -	\$ -
	700	\$	-	\$ -	\$ -
<b>FUNCTOTAL</b>		<b>\$</b>	<b>470,073.29</b>	<b>\$ 65,000.00</b>	<b>\$ 535,073.29</b>

**Gadsden County School Board  
110 (General) Fund Appropriations  
Budget Amendment Number  
Nine**

5900	100	\$	-	\$	-	\$	-
Other	200	\$	-	\$	-	\$	-
Instruction	300	\$	469.84	\$	-	\$	469.84
	500	\$	1,860.18	\$	-	\$	1,860.18
<b>FUNCTOTAL</b>		<b>\$</b>	<b>2,330.02</b>	<b>\$</b>	<b>-</b>	<b>\$</b>	<b>2,330.02</b>
6100	100	\$	1,089,080.06	\$	3,715.22	\$	1,092,795.28
Pupil	200	\$	267,323.95	\$	1,048.42	\$	268,372.37
Personnel	300	\$	132,469.32	\$	1,200.00	\$	133,669.32
Services	400	\$	-	\$	-	\$	-
	500	\$	2,089.16	\$	1,844.98	\$	3,934.14
	600	\$	-	\$	-	\$	-
	700	\$	8,450.00	\$	-	\$	8,450.00
<b>FUNCTOTAL</b>		<b>\$</b>	<b>1,499,412.49</b>	<b>\$</b>	<b>7,808.62</b>	<b>\$</b>	<b>1,507,221.11</b>
6200	100	\$	423,278.60	\$	-	\$	423,278.60
Instructional	200	\$	109,363.16	\$	-	\$	109,363.16
Media	300	\$	118,641.05	\$	-	\$	118,641.05
Service	500	\$	2,154.00	\$	-	\$	2,154.00
	600	\$	-	\$	-	\$	-
	700	\$	-	\$	-	\$	-
<b>6200 FUNCTOTAL</b>		<b>\$</b>	<b>653,436.81</b>	<b>\$</b>	<b>-</b>	<b>\$</b>	<b>653,436.81</b>
6300	100	\$	830,298.05	\$	15,700.00	\$	845,998.05
Instructional	200	\$	198,273.50	\$	3,400.00	\$	201,673.50
Curriculum Dev.	300	\$	27,347.43	\$	5,200.00	\$	32,547.43
	400	\$	-	\$	-	\$	-
	500	\$	846.29	\$	-	\$	846.29
	600	\$	-	\$	-	\$	-
	700	\$	-	\$	-	\$	-
<b>FUNCTOTAL</b>		<b>\$</b>	<b>1,056,765.27</b>	<b>\$</b>	<b>24,300.00</b>	<b>\$</b>	<b>1,081,065.27</b>
6400	100	\$	119,505.73	\$	-	\$	119,505.73
Instructional	200	\$	9,711.18	\$	-	\$	9,711.18
Staff Training	300	\$	2,420.59	\$	(278,237.19)	\$	(275,816.60)
	400	\$	-	\$	-	\$	-
	500	\$	1,006.44	\$	-	\$	1,006.44
	600	\$	-	\$	-	\$	-
	700	\$	-	\$	1,000.00	\$	1,000.00
<b>FUNCTOTAL</b>		<b>\$</b>	<b>132,643.94</b>	<b>\$</b>	<b>(277,237.19)</b>	<b>\$</b>	<b>(144,593.25)</b>

**Gadsden County School Board  
110 (General) Fund Appropriations  
Budget Amendment Number  
Nine**

6500	100	\$	35,564.01	\$	-	\$	35,564.01
Instruction	200	\$	11,983.79	\$	-	\$	11,983.79
Related Tech	300	\$	82.69	\$	26,319.24	\$	26,401.93
Instruction	500	\$	-	\$	2,400.00	\$	2,400.00
	600	\$	-	\$	179,579.76	\$	179,579.76
<b>FUNCTOTAL</b>		<b>\$</b>	<b>47,630.49</b>	<b>\$</b>	<b>208,299.00</b>	<b>\$</b>	<b>255,929.49</b>
7100	100	\$	135,687.23	\$	-	\$	135,687.23
Board of	200	\$	181,399.59	\$	-	\$	181,399.59
Education	300	\$	480,178.38	\$	-	\$	480,178.38
	500	\$	12,395.50	\$	-	\$	12,395.50
	600	\$	-	\$	-	\$	-
	700	\$	20,621.25	\$	-	\$	20,621.25
<b>FUNCTOTAL</b>		<b>\$</b>	<b>830,281.95</b>	<b>\$</b>	<b>-</b>	<b>\$</b>	<b>830,281.95</b>
7200	100	\$	236,236.04	\$	-	\$	236,236.04
Superintendent & Deputy Supt.	200	\$	79,653.50	\$	100.00	\$	79,753.50
	300	\$	89,143.07	\$	-	\$	89,143.07
	500	\$	22,413.93	\$	-	\$	22,413.93
	600	\$	4,438.04	\$	-	\$	4,438.04
	700	\$	11,530.00	\$	-	\$	11,530.00
<b>FUNCTOTAL</b>		<b>\$</b>	<b>443,414.58</b>	<b>\$</b>	<b>100.00</b>	<b>\$</b>	<b>443,514.58</b>
7300	100	\$	2,539,820.28	\$	13,626.31	\$	2,553,446.59
School	200	\$	626,700.01	\$	1,747.46	\$	628,447.47
Administration	300	\$	55,188.45	\$	-	\$	55,188.45
Principals	500	\$	2,301.79	\$	-	\$	2,301.79
	600	\$	1,235.77	\$	-	\$	1,235.77
	700	\$	-	\$	-	\$	-
<b>FUNCTOTAL</b>		<b>\$</b>	<b>3,225,246.30</b>	<b>\$</b>	<b>15,373.77</b>	<b>\$</b>	<b>3,240,620.07</b>
7400	100	\$	65,000.00	\$	-	\$	65,000.00
Facilities Acq & Construction	200	\$	18,309.91	\$	-	\$	18,309.91
	300	\$	5,193.00	\$	-	\$	5,193.00
<b>FUNCTOTAL</b>		<b>\$</b>	<b>88,502.91</b>	<b>\$</b>	<b>-</b>	<b>\$</b>	<b>88,502.91</b>
7500	100	\$	304,010.37	\$	43,113.30	\$	347,123.67
Fiscal	200	\$	71,753.71	\$	9,450.00	\$	81,203.71
Services	300	\$	32,718.46	\$	-	\$	32,718.46
	500	\$	7,973.97	\$	-	\$	7,973.97
	600	\$	-	\$	-	\$	-
	700	\$	-	\$	-	\$	-
<b>FUNCTOTAL</b>		<b>\$</b>	<b>416,456.51</b>	<b>\$</b>	<b>52,563.30</b>	<b>\$</b>	<b>469,019.81</b>

**Gadsden County School Board  
110 (General) Fund Appropriations  
Budget Amendment Number  
Nine**

7600	100	\$	-	\$	-	\$	-
Food Service	200	\$	-	\$	-	\$	-
	300	\$	336.42	\$	-	\$	336.42
<b>FUNCTOTAL</b>		<b>\$</b>	<b>336.42</b>	<b>\$</b>	<b>-</b>	<b>\$</b>	<b>336.42</b>
7700	100	\$	215,018.82	\$	-	\$	215,018.82
Central	200	\$	45,366.50	\$	-	\$	45,366.50
Services	300	\$	77,721.15	\$	-	\$	77,721.15
	500	\$	12,638.29	\$	-	\$	12,638.29
	600	\$	-	\$	-	\$	-
	700	\$	420.00	\$	-	\$	420.00
<b>FUNCTOTAL</b>		<b>\$</b>	<b>351,164.76</b>	<b>\$</b>	<b>-</b>	<b>\$</b>	<b>351,164.76</b>
7800	100	\$	1,344,989.41	\$	605.00	\$	1,345,594.41
Transportation	200	\$	534,666.04	\$	700.00	\$	535,366.04
	300	\$	139,124.88	\$	21,675.00	\$	160,799.88
	400	\$	822,212.60	\$	-	\$	822,212.60
	500	\$	231,329.19	\$	501.02	\$	231,830.21
	600	\$	-	\$	-	\$	-
	700	\$	-	\$	-	\$	-
<b>FUNCTOTAL</b>		<b>\$</b>	<b>3,072,322.12</b>	<b>\$</b>	<b>23,481.02</b>	<b>\$</b>	<b>3,095,803.14</b>
7900	100	\$	1,187,011.57	\$	-	\$	1,187,011.57
Operation of	200	\$	415,236.68	\$	-	\$	415,236.68
Plant	300	\$	2,689,305.73	\$	259,235.40	\$	2,948,541.13
	400	\$	335,304.32	\$	-	\$	335,304.32
	500	\$	48,116.19	\$	-	\$	48,116.19
	600	\$	5,176.33	\$	5,000.00	\$	10,176.33
	700	\$	-	\$	-	\$	-
<b>FUNCTOTAL</b>		<b>\$</b>	<b>4,680,150.82</b>	<b>\$</b>	<b>264,235.40</b>	<b>\$</b>	<b>4,944,386.22</b>
8100	100	\$	551,404.75	\$	-	\$	551,404.75
Maintenance	200	\$	163,676.31	\$	-	\$	163,676.31
of Plant	300	\$	584,031.79	\$	-	\$	584,031.79
	400	\$	10,000.00	\$	-	\$	10,000.00
	500	\$	122,191.42	\$	100.00	\$	122,291.42
	600	\$	1,500.00	\$	-	\$	1,500.00
	700	\$	450.00	\$	-	\$	450.00
<b>FUNCTOTAL</b>		<b>\$</b>	<b>1,433,254.27</b>	<b>\$</b>	<b>100.00</b>	<b>\$</b>	<b>1,433,354.27</b>

**Gadsden County School Board  
110 (General) Fund Appropriations  
Budget Amendment Number  
Nine**

<b>8200</b>	<b>100</b>	\$	196,336.47	\$	-	\$	196,336.47
<b>Admin.</b>	<b>200</b>	\$	47,423.19	\$	-	\$	47,423.19
<b>Technology</b>	<b>300</b>	\$	143,186.44	\$	-	\$	143,186.44
	<b>400</b>	\$	-	\$	-	\$	-
<b>Services</b>	<b>500</b>	\$	7,360.03	\$	-	\$	7,360.03
	<b>600</b>	\$	2,853.13	\$	-	\$	2,853.13
	<b>700</b>	\$	20,201.87	\$	-	\$	20,201.87
<b>FUNCTOTAL</b>		\$	<b>417,361.13</b>	\$	-	\$	<b>417,361.13</b>
<b>9100</b>	<b>100</b>	\$	322,763.18	\$	5,305.48	\$	328,068.66
<b>Community</b>	<b>200</b>	\$	3,501.02	\$	6,426.00	\$	9,927.02
<b>Services</b>	<b>300</b>	\$	-	\$	-	\$	-
	<b>500</b>	\$	-	\$	-	\$	-
	<b>600</b>	\$	-	\$	-	\$	-
	<b>700</b>	\$	-	\$	-	\$	-
<b>FUNCTOTAL</b>		\$	<b>326,264.20</b>	\$	<b>11,731.48</b>	\$	<b>337,995.68</b>
<b>9700</b>	<b>900</b>	\$	-	\$	-	\$	-
<b>Transfer of</b>				\$	-		
<b>Funds</b>				\$	-		
<b>FUNCTOTAL</b>		\$	-	\$	-	\$	-
<b>GRANDTOTAL</b>		\$	<b>42,583,538.99</b>	\$	<b>260,870.40</b>	\$	<b>42,844,409.39</b>

**Gadsden County School Board  
110 (General) Fund Estimated Revenue  
Budget Amendment Number  
Nine**

110 FUND REVENUE OBJECT	ESTIMATED REVENUE 2-25-14	BUDGET AMENDMENT NINE	ENDING ESTIMATED REVENUE 4-15-14
191	\$ 125,083.28	\$ -	\$ 125,083.28
202	\$ 400,000.00	\$ -	\$ 400,000.00
280	\$ 475,000.00	\$ 1,322.00	\$ 476,322.00
310	\$ 22,627,044.00	\$ -	\$ 22,627,044.00
315	\$ 666,405.00	\$ 43,431.00	\$ 709,836.00
318	\$ 255,703.31	\$ -	\$ 255,703.31
341	\$ 223,250.00	\$ -	\$ 223,250.00
342	\$ 4,000.00	\$ -	\$ 4,000.00
343	\$ 17,000.00	\$ -	\$ 17,000.00
355	\$ 5,845,979.00	\$ -	\$ 5,845,979.00
361	\$ 214,841.00	\$ -	\$ 214,841.00
371	\$ 825,000.00	\$ (10,000.00)	\$ 815,000.00
390	\$ (23,000.00)	\$ -	\$ (23,000.00)
399	\$ 50,000.00	\$ 209,501.00	\$ 259,501.00
411	\$ 8,603,151.66	\$ -	\$ 8,603,151.66
421	\$ 50,000.00	\$ -	\$ 50,000.00
425	\$ 1,000.00	\$ -	\$ 1,000.00
430	\$ 10,000.00	\$ -	\$ 10,000.00
440	\$ 10,000.00	\$ 16,073.00	\$ 26,073.00
462	\$ 35,000.00	\$ -	\$ 35,000.00
467	\$ 5,000.00	\$ -	\$ 5,000.00
490	\$ 700,000.00	\$ 543.40	\$ 700,543.40
630	\$ 1,300,000.00	\$ -	\$ 1,300,000.00
	\$ 42,420,457.25	\$ 260,870.40	\$ 42,681,327.65



**Attachment 1**

**List of Funded Agencies from Specific Appropriation 117A, 2013 General Appropriation Act**

No.	District	Appropriation
3	Bay	\$ 399,783
4	Bradford	\$ 102,847
6	Broward	\$ 3,155,243
8	Charlotte	\$ 224,404
9	Citrus	\$ 309,023
11	Collier	\$ 654,277
13	Miami-Dade	\$ 3,118,049
17	Escambia	\$ 370,738
18	Flagler	\$ 126,114
20	Gadsden	\$ 43,431
27	Hernando	\$ 1,500,000
29	Hillsborough	\$ 1,324,273
31	Indian River	\$ 84,161
35	Lake	\$ 1,360,000
36	Lee	\$ 818,051
37	Leon	\$ 708,766
41	Manatee	\$ 861,353
42	Marion	\$ 362,790
46	Okaloosa	\$ 360,989
48	Orange	\$ 2,309,321
49	Osceola	\$ 532,969
51	Pasco	\$ 150,489
52	Pinellas	\$ 1,160,387
53	Polk	\$ 747,150
55	Saint Johns	\$ 417,930
57	Santa Rosa	\$ 132,993
58	Sarasota	\$ 511,101
61	Suwannee	\$ 99,962
62	Taylor	\$ 110,353
66	Walton	\$ 86,910
67	Washington	\$ 340,664
	STATE	\$ 22,484,521

# FLORIDA DEPARTMENT OF EDUCATION



## STATE BOARD OF EDUCATION

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Career and Adult Education

## MEMORANDUM

**TO:** Selected CTE Directors

**FROM:** Rod Duckworth

**DATE :** December 4, 2013

**SUBJECT:** **Program Expenditure Plans for Funds from Specific Appropriation 117A**

The 2013 General Appropriations Act (Chapter 2013-40, Laws of Florida) provided targeted career and technical education funds to selected school districts for the expansion, enhancement or development of program offerings that will lead to industry certifications in the following occupational areas:

- Automotive service technology
- Cyber security
- Cloud virtualization
- Advanced manufacturing
- Welding
- Federal Aviation Administration airframe mechanics
- Federal Aviation Administration power plant mechanics
- Pharmacy technicians
- Heating, ventilation and air conditioning technicians

The law also requires the submission of a report on how the district intends to expend the funds for the purposes specified in the appropriation.

Attached is an Excel spreadsheet with the information required for this report. Please note that the spreadsheet contains several tabs. Please complete this Excel spreadsheet and email your district's response by January 1, 2014, to Tara Goodman at [tara.goodman@fldoe.org](mailto:tara.goodman@fldoe.org).



**Assurances to  
Project 10 CONNECT Mini-Grants**

In receipt of Project 10 CONNECT Mini-Grant funding, the GADSDEN COUNTY School District agrees to adhere to each of the following assurances:

1. The School District will submit reports as requested by their Project 10 Regional Transition Representative, including the End of Year (EOY) report by **July 1, 2014** in a format prescribed by Project 10: Transition Education Network.
2. The school district as fiscal agent will administer this project in accordance with all applicable federal and state statutes, regulations, program plans, and application.
3. Generally unallowable uses for funding include candy, alcohol, banquets, decorations, greeting cards, gift cards, lobbying, personal cellular telephones, fund raising, promotional items, entertainment, food and beverages, perquisites, meals not in accordance with Section 112.061, F.S., items for personal convenience (i.e. refrigerators for office staff), and items that are not necessary and reasonable ( i.e., expensive office equipment to meet personal preferences). This list is not all-inclusive and is presented for example purposes only. An expenditure of state funds must be authorized by law and the expenditure must meet the intent and spirit of the law authorizing the payment. Some of the items above may be allowable if there is statutory authority for their purchase and other rules or laws do not prohibit them. Agencies should refer to the *Reference Guide for State Expenditures* and/or their agency legal staff when determining whether specific purchases are allowable pursuant to the laws, rules, and requirements of their agreement and program.
4. School districts as fiscal agents for these funds must
  - a. Maintain both cost and programmatic records for five (5) years and allow Project 10 access to the records, as requested.
  - b. Have an adequate cost accounting system or maintain a separate bank account for these funds.
  - c. Provide a Budget Summary (summary of activities, costs, and zero balance) as requested, and submit this budget summary (and relevant

updates to the EOY) to the Project 10 Office (Attention: Danie Roberts-Dahm, [lroberts@usfsp.edu](mailto:lroberts@usfsp.edu)) by **September 15, 2014**.

- d. Return all unspent funds to the Project 10 Office by **September 30, 2014**.
  - e. Ensure all costs are reasonable, allowable, allocable and documented, and repay all disallowed costs.
  - f. Participate in monitoring as necessary to ensure that activities and/or deliverables are meeting expectations.
  - g. Agree to the provision for the disposition of property purchased with state funds. If the property has a useful life greater than one year and cost \$1,000 or more, it should be returned to the state upon agreement termination. Disposition of non-expendable property acquired with state or federal financial assistance must be disposed of in accordance with applicable rules and regulations.
  - h. Agree to payment terms (e.g., frequency of payments, method of payment, and required documentation).
5. School districts will submit a copy of each deliverable/product, if applicable, indicated in their application, to Project 10's home office no later than **July 1, 2014**.

### Resources

- DOE "Green Book" Project Application and Amendment Procedures for Federal and State Programs: <http://www.fldoe.org/comptroller/gbook.asp>
- DOE "Red Book" Financial and Program Cost Accounting and Reporting for Florida Schools: <http://www.fldoe.org/fefp/redtoc.asp>
- Department of Financial Services Reference Guide for State Expenditures: [http://www.myfloridacfo.com/aadir/reference\\_guide/reference\\_guide.htm](http://www.myfloridacfo.com/aadir/reference_guide/reference_guide.htm)

Signature of Organizational Representatives and Dates:

  
Project 10 CONNECT Coordinator

Date: 2/5/14

  
Accountable Officer / Bookkeeper

Date: 2/5/14

# Project 10 CONNECT 2013-14 Cover Sheet

Project 10 CONNECT Interagency Council Mini-Grant Application  
2013-14 Grant Year

## Instructions:

1. Cover Letter Requesting Funding that includes: (Developed by Applicant)
  - Name of applying entity (must be a school district)
  - Name of Contact Person which includes address, phone and fax number and email address
  - Name of Fiscal Contact which includes address, phone and fax number and email address
  - Name and address of fiscal agent who will be receiving check
  - Amount of funding requested (maximum - \$1500.00)
  - Name & Signature(s) of accountable officer of funds.
2. Chart that identifies areas of strength and examples (page 2 of application packet)
3. Chart indicating products to be developed and/or disseminated (page 5 of application packet)
4. Action Plan that includes: (pages 6 and 7 of application packet)
  - Priority 1: Dissemination of Information to be a broad audience
  - Priority 2: Actions to support continuous improvement
  - Priority 3: Identification of Priority Activity that correlates to one or more of the State Performance Plan transition related indicators (1-Graduation Rate; 2-Dropout Rate; 3-IEP Compliance; 14-Student Outcomes)
5. Completed Budget Narrative Form (page 9 of application packet)
6. Assurance Page signed by Project 10 CONNECT Site Coordinator and District ESE Director

The completed Project 10 CONNECT Interagency Council Mini-Grant Application is to be mailed to the Regional Transition Representative for Project 10. Please note that faxed or electronic applications are only accepted for review and funds will not be able to be dispersed without original copies.

\* Required

**Name of applying entity \***

(must be a school district)

Gadsden County Schools

## Contact Information

**Name of Contact Person \***

Fannie Smith

**Email address of Contact Person \***

smithf@gcpsmail.com

**Phone number of Contact Person \***

850-627-6030

**Address of Contact Person \***

35 Martin Luther King, Jr.



Assurances to
Project 10 Mini-Grant for 2014 VISIONS / NSTTAC Institute

In receipt of Project 10 Mini-Grant funding to support team planning, the Gadsden School District agrees to adhere to each of the following assurances:

- 1. These funds are being allocated for select "supported" districts that participated in a strategic planning process to address their district's needs for students with disabilities, facilitated during the 2013 VISIONS/NSTTAC Institute and/or 2014 VISIONS/NSTTAC Institute. Activities of the planning process also include attendance at the 2015 Project 10 Regional Institute / NSTTAC District Team Cadre Meeting, and report-out of team progress during the Regional Institute. All funds must be encumbered by July 1, 2014. A required deliverable will be updating of the district's 2013/2014 online transition tool, with final update of the tool by January 15, 2015.
2. The school district as fiscal agent will administer this funding in accordance with all applicable federal and state statutes, regulations, program plans, and application.
3. Generally unallowable uses for funding include candy, alcohol, banquets, decorations, greeting cards, gift cards, lobbying, personal cellular telephones, fund raising, promotional items, entertainment, food and beverages, perquisites, meals not in accordance with Section 112.061, F.S., items for personal convenience (i.e. refrigerators for office staff), and items that are not necessary and reasonable ( i.e., expensive office equipment to meet personal preferences). This list is not all-inclusive and is presented for example purposes only. An expenditure of state funds must be authorized by law and the expenditure must meet the intent and spirit of the law authorizing the payment. Some of the items above may be allowable if there is statutory authority for their purchase and other rules or laws do not prohibit them. Agencies should refer to the Reference Guide for State Expenditures and/or their agency legal staff when determining whether specific purchases are allowable pursuant to the laws, rules, and requirements of their agreement and program.
4. School districts as fiscal agents for these funds must
a. Maintain both cost and programmatic records for five (5) years and allow Project 10 access to the records, as requested.
b. Have an adequate cost accounting system or maintain a separate bank account for these funds.
c. Provide a budget summary showing how funds were expended and a zero balance by July 1, 2014.
d. Ensure all costs are reasonable, allowable, allocable and documented, and repay all disallowed costs.

- e. Participate in monitoring as necessary to ensure that activities and/or deliverables are meeting expectations.
  - f. Agree to the provision for the disposition of property purchased with state funds. If the property has a useful life greater than one year and cost \$1,000 or more, it should be returned to the state upon agreement termination. Disposition of non-expendable property acquired with state or federal financial assistance must be disposed of in accordance with applicable rules and regulations.
  - g. Agree to payment terms (e.g., frequency of payments, method of payment, and required documentation).
5. School districts will ensure periodic updates of their 2013/2014 online transition planning tools, with final update of the tool by January 15, 2015.

**Resources**

- DOE "Green Book" Project Application and Amendment Procedures for Federal and State Programs: <http://www.fldoe.org/comptroller/gbook.asp>
- DOE "Red Book" Financial and Program Cost Accounting and Reporting for Florida Schools: <http://www.fldoe.org/fejp/redtoc.asp>
- Department of Financial Services Reference Guide for State Expenditures: [http://www.myfloridacfo.com/aadir/reference\\_guide/reference\\_guide.htm](http://www.myfloridacfo.com/aadir/reference_guide/reference_guide.htm)

**REQUIRED to Process ASAP**

**1. Signature of District Representatives and Dates**

Sharon B. Thomas  
District ESE Director

Date: 2/21/14

Kimberly Ferree  
Accountable Officer / Bookkeeper

Date: 2/21/14

**2. Contact Information – complete**

Below, **you must provide** a name, phone number, email, and mailing address for the person to whom the check should be sent.

Name: Kimberly Ferree  
Phone #: (850) 1627-9651  
Email: ferreek@gcpsmail.com

Complete mailing address, including zip code: 35 Martin Luther King, Jr. Blvd.  
Quincy, FL 32351

**3. W-9 form – dated within one year**

Submit a completed, current (within one year) W-9 form. You may use the attached.



March 2014

To Whom It May Concern

The funding for the enclosed Project 10 – 2014 VISIONS/NSTTAC Institute mini grant payment is sourced from federal funds (IDEA – Part B) related to CFDA# 84.027A.

If you have any questions regarding these funds, please contact me directly at the following:

Lee Kunkel

[lavallie@usfsp.edu](mailto:lavallie@usfsp.edu)

(727) 873-4661

Thank you,

*Lee A. Kunkel*

Lee Kunkel

Office Manager

Project 10: Transition Education Network

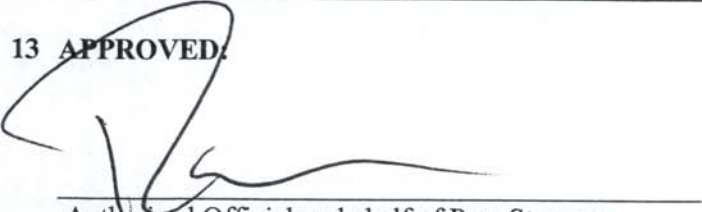
110-2520- 280- 1105189

**Project 10: Transition Education Network**  
University of South Florida St. Petersburg • 140 7th Avenue South – SVB 108 • St. Petersburg, FL 33701  
(727) 873-4661 • Fax (727) 873-4660



**Florida Department of Education  
Project Award Notification**

Proj. 1190200 ✓

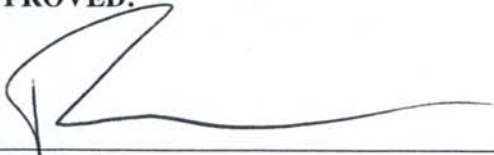

<b>1 PROJECT RECIPIENT</b> Gadsden County School District	<b>2 PROJECT NUMBER</b> 200-90060-4S001
<b>3 PROJECT/PROGRAM TITLE</b> Technology Transformation Grants for Rural School Districts  <p align="center"><b>TAPS 14A106</b></p>	<b>4 AUTHORITY</b> L.I. 102A General Appropriations Act
<b>5 AMENDMENT INFORMATION</b> Amendment Number: Type of Amendment: Effective Date:	<b>6 PROJECT PERIODS</b>  Budget Period: 10/01/2013 - 06/30/2014 Program Period: 10/01/2013 - 06/30/2014
<b>7 AUTHORIZED FUNDING</b> Current Approved Budget: \$ 208,299.00 Amendment Amount: Estimated Roll Forward: Certified Roll Amount: Total Project Amount: \$ 208,299.00	<b>8 REIMBURSEMENT OPTION</b> Quarterly Advance to Public Entity
<b>9 TIMELINES</b> <ul style="list-style-type: none"> <li>• Last date for incurring expenditures and issuing purchase orders: <span style="float: right;"><u>06/30/2014</u></span></li> <li>• Date that all obligations are to be liquidated and final disbursement reports submitted: <span style="float: right;"><u>08/20/2014</u></span></li> <li>• Last date for receipt of proposed budget and program amendments: <span style="float: right;"><u>06/30/2014</u></span></li> <li>• Refund date of unexpended funds; mail to DOE Comptroller, 325 W. Gaines Street, 944 Turlington Building, Tallahassee, Florida 32399-0400:</li> <li>• Date(s) for program reports:</li> </ul>	
<b>10 DOE CONTACTS</b> <b>Program:</b> Ron Nieto Phone: (850) 245 - 9855 Email: <a href="mailto:Ron.Nieto@fldoe.org">Ron.Nieto@fldoe.org</a> <b>Grants Management:</b> Unit A (850) 245-0496	<b>11 DOE FISCAL DATA</b>  DBS: 01 90 10 EO: 60 Object: 720000
<b>12 TERMS AND SPECIAL CONDITIONS</b> <ul style="list-style-type: none"> <li>• This project and any amendments are subject to the procedures outlined in the <u>Project Application and Amendment Procedures for Federal and State Programs</u> (Green Book) and the General Assurances for Participation in Federal and State Programs.</li> <li>• Any unexpended general revenue funds must be returned by check issued to the Florida Department of Education, with the final expenditure report. The check must clearly identify the project number for which funds are being returned.</li> <li>• In the event that the Governor and Cabinet are required to impose a mandatory reserve on the current year appropriation, this Agreement shall be amended to place in reserve the amount determined by the Department of Education to be necessary because of the mandatory reserve in the appropriation.</li> <li>• For quarterly advances of non-federal funding to state agencies and LEAs made in accordance within the authority of the General Appropriations Act. Expenditures must be documented and reported to DOE at the end of the project period. If audited, the recipient must have expenditure detail documentation supporting the requested advances.</li> </ul>	
<b>13 APPROVED</b>   _____ Authorized Official on behalf of Pam Stewart Commissioner of Education	<p align="center">12/20/13</p> _____ Date of Signing





**Florida Department of Education  
Project Award Notification**

Proj. 1190030 ✓

<b>1 PROJECT RECIPIENT</b> Gadsden County School District	<b>2 PROJECT NUMBER</b> 200-90030-4S001
<b>3 PROJECT/PROGRAM TITLE</b> District Bandwidth Support  <p align="center"><b>TAPS 14A108</b></p>	<b>4 AUTHORITY</b> L.I. 102A General Appropriations Act
<b>5 AMENDMENT INFORMATION</b> Amendment Number: Type of Amendment: Effective Date:	<b>6 PROJECT PERIODS</b>  Budget Period: 07/01/2013 - 06/30/2014 Program Period: 07/01/2013 - 06/30/2014
<b>7 AUTHORIZED FUNDING</b> Current Approved Budget: \$ 1,202.00 Amendment Amount: Estimated Roll Forward: Certified Roll Amount: Total Project Amount: \$ 1,202.00	<b>8 REIMBURSEMENT OPTION</b> Quarterly Advance to Public Entity
<b>9 TIMELINES</b> <ul style="list-style-type: none"> <li>• Last date for incurring expenditures and issuing purchase orders: <span style="float: right;"><u>06/30/2014</u></span></li> <li>• Date that all obligations are to be liquidated and final disbursement reports submitted: <span style="float: right;"><u>08/20/2014</u></span></li> <li>• Last date for receipt of proposed budget and program amendments: <span style="float: right;"><u>06/30/2014</u></span></li> <li>• Refund date of unexpended funds; mail to DOE Comptroller, 325 W. Gaines Street, 944 Turlington Building, Tallahassee, Florida 32399-0400:</li> <li>• Date(s) for program reports:</li> </ul>	
<b>10 DOE CONTACTS</b> <b>Program:</b> Ron Nieto <b>Phone:</b> (850) 245 - 9855 <b>Email:</b> <a href="mailto:Ron.Nieto@fldoe.org">Ron.Nieto@fldoe.org</a> <b>Grants Management:</b> Unit A (850) 245-0496	<b>11 DOE FISCAL DATA</b>  DBS: 01 90 10 EO: 30 Object: 720000
<b>12 TERMS AND SPECIAL CONDITIONS</b> <ul style="list-style-type: none"> <li>• This project and any amendments are subject to the procedures outlined in the <u>Project Application and Amendment Procedures for Federal and State Programs</u> (Green Book) and the General Assurances for Participation in Federal and State Programs.</li> <li>• Any unexpended general revenue funds must be returned by check issued to the Florida Department of Education, with the final expenditure report. The check must clearly identify the project number for which funds are being returned.</li> <li>• In the event that the Governor and Cabinet are required to impose a mandatory reserve on the current year appropriation, this Agreement shall be amended to place in reserve the amount determined by the Department of Education to be necessary because of the mandatory reserve in the appropriation.</li> <li>• For Quarterly Advances of Non-Federal Funding to State Agencies and LEAs made in accordance within the authority of the General Appropriations Act. Expenditures must be documented and report to the Florida Department of Education at the end of the project period. If audited, the recipient must have expenditure detail documentation supporting the requested advances.</li> </ul>	
<b>13 APPROVED:</b>  <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">   <hr/>                         Authorized Official on behalf of Pam Stewart                          Commissioner of Education                     </div> <div style="width: 45%; text-align: center;">                         4/4/14  <hr/>                         Date of Signing                     </div> </div> <div style="text-align: right; margin-top: 20px;">  </div>	



**SUMMARY SHEET**

**RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA**

**AGENDA ITEM NO.** 7b

**DATE OF SCHOOL BOARD MEETING:** April 22, 2014

**TITLE OF AGENDA ITEMS:** Budget Amendment Number Ten

**DIVISION:** Finance Department

**PURPOSE AND SUMMARY OF ITEMS:**

Board approval is requested for this budget amendment that establishes budget Head Start and roll forward increases/decreases for Title III, IDEA, and IDEA Pre-K. This budget amendment also moves funds by function and object as allowable under FDOE Green Book to reflect expenditures.

**FUND SOURCE:** 420 (Federal) Fund

**AMOUNT:** \$ 2,008,798.00

**PREPARED BY:** Kim Ferree

**POSITION:** Assistant Superintendent for Business Services

**Gadsden County School Board  
Estimated Revenue  
Budget Amendment Ten**

<b>FUND 420</b>				
<b>REVENUE OBJECT</b>		<b>BEGINNING ESTIMATED REVENUE 4/2/2014</b>	<b>BUDGET AMENDMENT NUMBER TEN</b>	<b>ENDING ESTIMATED REVENUE 4/14/2014</b>
199	\$	701,571.83	\$ 1,874,486.21	\$ 2,576,058.04
201	\$	169,518.40	\$ -	\$ 169,518.40
225	\$	499,328.34	\$ -	\$ 499,328.34
226	\$	50,468.99	\$ -	\$ 50,468.99
230	\$	1,879,333.48	\$ 126,750.96	\$ 2,006,084.44
240	\$	5,415,871.63	\$ -	\$ 5,415,871.63
251	\$	-	\$ -	\$ -
270	\$	-	\$ -	\$ -
290	\$	710,349.82	\$ 7,560.83	\$ 717,910.65
299	\$	-	\$ -	\$ -
<b>TOTALS</b>	<b>\$</b>	<b>9,426,442.49</b>	<b>\$ 2,008,798.00</b>	<b>\$ 11,435,240.49</b>

**Gadsden County School Board  
420 (Federal) Fund Appropriations  
Ten**

420 FUND		BUDGET		
FUNCTION/ OBJECT		BUDGET BALANCE 4/2/2014	AMENDMENT NUMBER TEN	BUDGET BALANCE 4/14/2014
5100	100	\$ 537,119.11	\$ (1,757.73)	\$ 535,361.38
	200	\$ 101,105.33	\$ 2,454.91	\$ 103,560.24
	300	\$ 457,202.32	\$ (367.78)	\$ 456,834.54
	500	\$ 695,770.69	\$ 6,909.99	\$ 702,680.68
	600	\$ 7,265.00	\$ 714.37	\$ 7,979.37
	700	\$ 1,050.00	\$ 1,011.00	\$ 2,061.00
	<b>FUNCTOTAL</b>		<b>\$ 1,799,512.45</b>	<b>\$ 8,964.76</b>
5200	100	\$ 605,965.65	\$ 22,337.90	\$ 628,303.55
	200	\$ 172,796.42	\$ (4,665.73)	\$ 168,130.69
	300	\$ 258,506.83	\$ 36,100.00	\$ 294,606.83
	500	\$ 14,138.66	\$ -	\$ 14,138.66
	600	\$ 19,875.00	\$ 34,477.33	\$ 54,352.33
	700	\$ 1,000.00	\$ 1,500.00	\$ 2,500.00
	<b>FUNCTOTAL</b>		<b>\$ 1,072,282.56</b>	<b>\$ 89,749.50</b>
5300	100	\$ -	\$ -	\$ -
	200	\$ -	\$ -	\$ -
	300	\$ 11,837.02	\$ 9,412.70	\$ 21,249.72
	500	\$ 20,542.08	\$ (1,177.70)	\$ 19,364.38
	600	\$ 32,213.34	\$ (7,311.00)	\$ 24,902.34
	700	\$ 15,785.49	\$ (2,000.00)	\$ 13,785.49
	<b>FUNCTOTAL</b>		<b>\$ 80,377.93</b>	<b>\$ (1,076.00)</b>
5400	100	\$ -	\$ -	\$ -
	200	\$ -	\$ -	\$ -
	300	\$ -	\$ -	\$ -
	500	\$ -	\$ -	\$ -
	600	\$ -	\$ -	\$ -
	700	\$ -	\$ -	\$ -
	<b>FUNCTOTAL</b>		<b>\$ -</b>	<b>\$ -</b>
5500	100	\$ 479,544.69	\$ 716,182.45	\$ 1,195,727.14
	200	\$ 139,022.51	\$ 190,631.69	\$ 329,654.20
	300	\$ 6,024.43	\$ 47,136.10	\$ 53,160.53
	500	\$ 78,584.84	\$ 47,261.40	\$ 125,846.24
	600	\$ 4,908.02	\$ 300.00	\$ 5,208.02
	700	\$ -	\$ -	\$ -
	<b>FUNCTOTAL</b>		<b>\$ 708,084.49</b>	<b>\$ 1,001,511.64</b>

**Gadsden County School Board  
420 (Federal) Fund Appropriations  
Ten**

<b>5900</b>	<b>100</b>	\$	181,931.68	\$	(4,161.90)	\$	177,769.78
	<b>200</b>	\$	38,648.18	\$	-	\$	38,648.18
	<b>300</b>	\$	46,863.70	\$	4,161.90	\$	51,025.60
	<b>400</b>	\$	142.42	\$	-	\$	142.42
	<b>500</b>	\$	22,726.76	\$	-	\$	22,726.76
	<b>600</b>	\$	2,000.00	\$	-	\$	2,000.00
<b>FUNCTOTAL</b>		\$	<b>292,312.74</b>	\$	<b>0.00</b>	\$	<b>292,312.74</b>
<b>6100</b>	<b>100</b>	\$	508,341.58	\$	206,490.45	\$	714,832.03
	<b>200</b>	\$	119,880.39	\$	50,923.91	\$	170,804.30
	<b>300</b>	\$	83,782.00	\$	73,299.11	\$	157,081.11
	<b>500</b>	\$	79,018.95	\$	16,566.88	\$	95,585.83
	<b>600</b>	\$	6,424.69	\$	-	\$	6,424.69
	<b>700</b>	\$	3,635.15	\$	110.00	\$	3,745.15
	<b>900</b>	\$	-	\$	-	\$	-
<b>FUNCTOTAL</b>		\$	<b>801,082.76</b>	\$	<b>347,390.35</b>	\$	<b>1,148,473.11</b>
<b>6200</b>	<b>100</b>	\$	2,000.00	\$	-	\$	2,000.00
	<b>200</b>	\$	-	\$	-	\$	-
	<b>300</b>	\$	33,900.00	\$	5,525.00	\$	39,425.00
	<b>500</b>	\$	-	\$	-	\$	-
	<b>600</b>	\$	15,125.00	\$	-	\$	15,125.00
	<b>700</b>	\$	-	\$	-	\$	-
<b>FUNCTOTAL</b>		\$	<b>51,025.00</b>	\$	<b>5,525.00</b>	\$	<b>56,550.00</b>
<b>6300</b>	<b>100</b>	\$	805,875.36	\$	169,344.66	\$	975,220.02
	<b>200</b>	\$	198,647.36	\$	46,621.76	\$	245,269.12
	<b>300</b>	\$	338,066.76	\$	4,924.63	\$	342,991.39
	<b>400</b>	\$	-	\$	-	\$	-
	<b>500</b>	\$	110,035.70	\$	(9,427.74)	\$	100,607.96
	<b>600</b>	\$	25,000.01	\$	2,000.00	\$	27,000.01
	<b>700</b>	\$	21,053.50	\$	1,618.89	\$	22,672.39
<b>FUNCTOTAL</b>		\$	<b>1,498,678.69</b>	\$	<b>215,082.20</b>	\$	<b>1,713,760.89</b>
<b>6400</b>	<b>100</b>	\$	1,193,086.62	\$	26,386.57	\$	1,219,473.19
	<b>200</b>	\$	323,644.71	\$	(1,649.34)	\$	321,995.37
	<b>300</b>	\$	333,736.86	\$	17,152.02	\$	350,888.88
	<b>400</b>	\$	-	\$	-	\$	-
	<b>500</b>	\$	56,066.10	\$	1,500.00	\$	57,566.10
	<b>600</b>	\$	-	\$	-	\$	-
	<b>700</b>	\$	2,523.37	\$	8,674.91	\$	11,198.28
<b>FUNCTOTAL</b>		\$	<b>1,909,057.66</b>	\$	<b>52,064.16</b>	\$	<b>1,961,121.82</b>



**Gadsden County School Board  
420 (Federal) Fund Appropriations  
Ten**

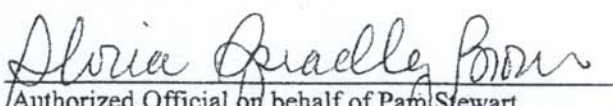

6500	100	\$	27,500.00	\$	-	\$	27,500.00
	200	\$	6,953.85	\$	-	\$	6,953.85
	300	\$	157,769.00	\$	(348.93)	\$	157,420.07
	500	\$	-	\$	405.00	\$	405.00
	600	\$	157,166.74	\$	(1,525.00)	\$	155,641.74
<b>FUNCTOTAL</b>		<b>\$</b>	<b>349,389.59</b>	<b>\$</b>	<b>(1,468.93)</b>	<b>\$</b>	<b>347,920.66</b>
7200	100	\$	4,195.78	\$	28,974.33	\$	33,170.11
	200	\$	15,352.86	\$	9,397.31	\$	24,750.17
	300	\$	1,239.62	\$	-	\$	1,239.62
	500	\$	-	\$	-	\$	-
	600	\$	-	\$	-	\$	-
	700	\$	265,904.03	\$	51,970.00	\$	317,874.03
<b>FUNCTOTAL</b>		<b>\$</b>	<b>286,692.29</b>	<b>\$</b>	<b>90,341.64</b>	<b>\$</b>	<b>377,033.93</b>
7300	100	\$	49,000.00	\$	19,000.00	\$	68,000.00
	200	\$	7,563.00	\$	2,500.00	\$	10,063.00
	600	\$	(1.00)	\$	-	\$	(1.00)
<b>FUNCTOTAL</b>		<b>\$</b>	<b>56,562.00</b>	<b>\$</b>	<b>21,500.00</b>	<b>\$</b>	<b>78,062.00</b>
7400	300	\$	-	\$	13,915.00	\$	13,915.00
	600	\$	15,706.68	\$	-	\$	15,706.68
<b>FUNCTOTAL</b>		<b>\$</b>	<b>15,706.68</b>	<b>\$</b>	<b>13,915.00</b>	<b>\$</b>	<b>29,621.68</b>
7600	100	\$	-	\$	1,586.00	\$	1,586.00
	200					\$	191.80
<b>FUNCTOTAL</b>		<b>\$</b>	<b>-</b>	<b>\$</b>	<b>1,777.80</b>	<b>\$</b>	<b>1,777.80</b>
7700	100	\$	117,584.66	\$	-	\$	117,584.66
	200	\$	41,953.07	\$	-	\$	41,953.07
	300	\$	20,000.00	\$	-	\$	20,000.00
	500	\$	879.00	\$	-	\$	879.00
	600	\$	-	\$	-	\$	-
	700	\$	5,500.00	\$	-	\$	5,500.00
<b>FUNCTOTAL</b>		<b>\$</b>	<b>185,916.73</b>	<b>\$</b>	<b>-</b>	<b>\$</b>	<b>185,916.73</b>
7800	100	\$	109,235.07	\$	20,027.12	\$	129,262.19
	200	\$	22,386.62	\$	11,883.44	\$	34,270.06
	300	\$	108,112.84	\$	-	\$	108,112.84
	400	\$	410.01	\$	-	\$	410.01
	500	\$	69.23	\$	962.77	\$	1,032.00
	600	\$	-	\$	-	\$	-
<b>FUNCTOTAL</b>		<b>\$</b>	<b>240,213.77</b>	<b>\$</b>	<b>32,873.33</b>	<b>\$</b>	<b>273,087.10</b>

**Gadsden County School Board  
420 (Federal) Fund Appropriations  
Ten**

<b>7900</b>	<b>100</b>	\$	7,745.01	\$	302.16	\$	8,047.17
	<b>200</b>	\$	1,288.60	\$	(38.57)	\$	1,250.03
	<b>300</b>	\$	40,308.99	\$	72,146.14	\$	112,455.13
	<b>400</b>	\$	6,245.90	\$	8,394.41	\$	14,640.31
	<b>500</b>	\$	11,570.42	\$	2,000.00	\$	13,570.42
	<b>600</b>	\$	6,076.56	\$	-	\$	6,076.56
	<b>700</b>	\$	-	\$	-	\$	-
<b>FUNCTOTAL</b>		\$	<b>73,235.48</b>	\$	<b>82,804.14</b>	\$	<b>156,039.62</b>
<b>8100</b>	<b>100</b>	\$	-	\$	262.59	\$	262.59
	<b>200</b>	\$	-	\$	38.57	\$	38.57
	<b>300</b>	\$	4,072.00	\$	-	\$	4,072.00
	<b>500</b>	\$	-	\$	2,000.00	\$	2,000.00
	<b>600</b>	\$	1,092.02	\$	-	\$	1,092.02
<b>FUNCTOTAL</b>		\$	<b>5,164.02</b>	\$	<b>2,301.16</b>	\$	<b>7,465.18</b>
<b>8200</b>	<b>100</b>	\$	-	\$	-	\$	-
	<b>200</b>	\$	-	\$	-	\$	-
	<b>500</b>	\$	-	\$	-	\$	-
	<b>600</b>	\$	-	\$	-	\$	-
<b>FUNCTOTAL</b>		\$	<b>-</b>	\$	<b>-</b>	\$	<b>-</b>
<b>9100</b>	<b>100</b>	\$	348.72	\$	34,858.89	\$	35,207.61
	<b>200</b>	\$	798.93	\$	-	\$	11,482.29
	<b>300</b>	\$	-	\$	-	\$	-
	<b>400</b>	\$	-	\$	-	\$	-
	<b>500</b>	\$	-	\$	-	\$	-
<b>FUNCTOTAL</b>		\$	<b>1,147.65</b>	\$	<b>45,542.25</b>	\$	<b>46,689.90</b>
<b>GRANDTOTAL</b>		\$	<b>9,426,442.49</b>	\$	<b>2,008,798.00</b>	\$	<b>11,435,240.49</b>

**Florida Department of Education  
Project Award Notification**

4216141

<b>1 PROJECT RECIPIENT</b> Gadsden County School District	<b>2 PROJECT NUMBER</b> 200-1614A-4CS01
<b>3 PROJECT/PROGRAM TITLE</b> Carl D. Perkins Career Technical Education, Secondary Section 131  <p align="center"><b>TAPS 14B004</b></p>	<b>4 AUTHORITY</b> 84.048A Carl Perkins - Voc. ED Basic
<b>5 AMENDMENT INFORMATION</b> Amendment Number: 2 Type of Amendment: Budget: Changes Effective Date: 03/07/2014	<b>6 PROJECT PERIODS</b>  Budget Period: 07/01/2013 - 06/30/2014 Program Period: 07/01/2013 - 06/30/2014
<b>7 AUTHORIZED FUNDING</b> Current Approved Budget: \$ 91,851.00 Amendment Amount: Estimated Roll Forward: \$ Certified Roll Amount: Total Project Amount: \$ 91,851.00	<b>8 REIMBURSEMENT OPTION</b> Federal Cash Advance
<b>9 TIMELINES</b> <ul style="list-style-type: none"> <li>Last date for incurring expenditures and issuing purchase orders: <u>06/30/2014</u></li> <li>Date that all obligations are to be liquidated and final disbursement reports submitted: <u>08/20/2014</u></li> <li>Last date for receipt of proposed budget and program amendments: <u>06/30/2014</u></li> <li>Refund date of unexpended funds; mail to DOE Comptroller, 325 W. Gaines Street, 944 Turlington Building, Tallahassee, Florida 32399-0400:</li> <li>Date(s) for program reports:</li> </ul>	
<b>10 DOE CONTACTS</b> Program: Jakita Jones Phone: (850) 245 - 9044 Email: <a href="mailto:Jakita.Jones@fldoe.org">Jakita.Jones@fldoe.org</a> Grants Management: Unit B (850) 245-0496	<b>11 DOE FISCAL DATA</b>  DBS: 55 90 00 EO: F2 Object: 720035
<b>12 TERMS AND SPECIAL CONDITIONS</b> <ul style="list-style-type: none"> <li>This project and any amendments are subject to the procedures outlined in the <u>Project Application and Amendment Procedures for Federal and State Programs</u> (Green Book) and the General Assurances for Participation in Federal and State Programs.</li> <li>For federal cash advance projects, monthly expenditures must be submitted to the Comptroller's Office by the 20<sup>th</sup> of each month for the preceding month's disbursements utilizing the On-Line Disbursement Reporting System.</li> <li>Other: <b>Only 25% of the "Current Approved Budget" in block 7 is authorized for obligating or expending during the first quarter period of July 1, 2013 through September 30, 2013. The balance of the allocation (75%) and any unexpended funds from the first quarter will be available October 1, 2013 through June 30, 2014.</b></li> </ul>	
<b>13 APPROVED:</b>  <div style="display: flex; justify-content: space-between;"> <div data-bbox="162 1711 771 1858">                       Authorized Official on behalf of Pam Stewart                      Commissioner of Education                 </div> <div data-bbox="876 1711 1169 1837"> <p align="center">3/25/14 Date of Signing</p> </div> <div data-bbox="1266 1606 1437 1774" style="text-align: right;">  </div> </div>	

DOE-200  
Revised 02/05

A) Gadsden District/Agency Name      B) 200-1614A-4CS01 Project Number      / 14B004 TAPS Number

C) 2 Amendment Number

## FLORIDA DEPARTMENT OF EDUCATION BUDGET AMENDMENT NARRATIVE FORM

D) Total Project Amount Currently Approved \$ <u>91,851</u>	E) Total Project Amount resulting from this Budget Amendment \$ <u>91,851</u>
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**F) Line Item Description**

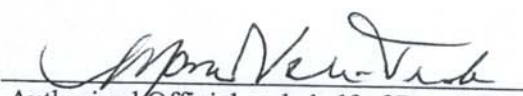

FUNCTION	OBJECT	ACCOUNT TITLE AND NARRATIVE	FTE	AMOUNT INCREASE	AMOUNT DECREASE
5300	330	Student travel – over-budgeted for amount needed for remainder of school year			2,500.00 ✓
	<del>390</del> 360	Software Rental – for industry certification and testing for CTE students		11,912.70 ✓	
	510	Supplies and materials for CTE programs (ink, toner, carpentry, barbering, nails, etc.)		2,000.00 ✓	
	520	Textbook allocation not needed for remainder of school term			3,177.70 ✓
	620	AV supplies not needed for remainder of school term.			1,023.00 ✓
	641	Furn, Fix, Equipment - amount not needed for remainder of school term – more than \$750			3,407.00 ✓
	642	Furn, Fix, Equipment - amount not needed for remainder of school term. Less than \$750			2,881.00 ✓
	730	Dues and Fees – allocated amount not needed			2,000.00 ✓
6400	730	Dues and Fees – CTE staff travel needs		500.00 ✓	
7800	161	Pupil Transportation Services – Bus Drivers for CTE field trips		450.00 ✓	
	210	Retirement for CTE bus drivers (field trips)		50.00 ✓	
	220	Social Security for CTE bus drivers (Field trips)		50.00 ✓	
	240	Worker's Compensation for CTE bus drivers (field trips)		26.00 ✓	
				<b>14,988.70</b>	<b>14,988.70</b>

**Total                      Total**



**Florida Department of Education  
Project Award Notification**

4226740

<b>1 PROJECT RECIPIENT</b> Gadsden County School District	<b>2 PROJECT NUMBER</b> 200-2674A-4CP01
<b>3 PROJECT/PROGRAM TITLE</b> IDEA Part B Entitlement <span style="float:right"><b>TAPS 14C002</b></span>	<b>4 AUTHORITY</b> <b>84.173A IDEA Part B - Preschool</b>
<b>5 AMENDMENT INFORMATION</b> Amendment Number: 1 Type of Amendment: Roll Forward Decrease Effective Date: 11/19/2013	<b>6 PROJECT PERIODS</b>  Budget Period: 07/01/2013 - 06/30/2014 Program Period: 07/01/2013 - 06/30/2014
<b>7 AUTHORIZED FUNDING</b> Current Approved Budget: \$ 82,110.00 Amendment Amount: Estimated Roll Forward: Certified Roll Amount: \$ 32,203.63 Total Project Amount: \$ 114,313.63	<b>8 REIMBURSEMENT OPTION</b> Federal Cash Advance
<b>9 TIMELINES</b> <ul style="list-style-type: none"> <li>• Last date for incurring expenditures and issuing purchase orders: <span style="float:right"><u>06/30/2014</u></span></li> <li>• Date that all obligations are to be liquidated and final disbursement reports submitted: <span style="float:right"><u>08/20/2014</u></span></li> <li>• Last date for receipt of proposed budget and program amendments: <span style="float:right"><u>06/30/2014</u></span></li> <li>• Refund date of unexpended funds; mail to DOE Comptroller, 325 W. Gaines Street, 944 Turlington Building, Tallahassee, Florida 32399-0400:</li> <li>• Date(s) for program reports:</li> </ul>	
<b>10 DOE CONTACTS</b> <b>BEES:</b> Virginia Sasser Phone: (850) 245-0475 Email: <a href="mailto:Virginia.Sasser@fldoe.org">Virginia.Sasser@fldoe.org</a> <b>Grants Management:</b> Unit C (850) 245-0496	<b>11 DOE FISCAL DATA</b>  DBS: 40 90 40 EO: 24 Object: 720035
<b>12 TERMS AND SPECIAL CONDITIONS</b> <ul style="list-style-type: none"> <li>• This project and any amendments are subject to the procedures outlined in the <i>Project Application and Amendment Procedures for Federal and State Programs</i> (Green Book) and the <i>General Assurances for Participation in Federal and State Programs</i>.</li> <li>• For federal cash advance projects, monthly expenditures must be submitted to the Comptroller's Office by the 20<sup>th</sup> of each month for the preceding month's disbursements utilizing the On-Line Disbursement Reporting System.</li> <li>• FY 2013 roll forward funds must be satisfied in full by the end of FY 2013. To ensure all roll funds have been expended, the total amount of expenditures reported on the DOE 399 must be equal to or exceed the Approved Accumulated 2013 Roll Forward amount authorized by the Comptroller.</li> <li>• IDEA does not restrict the amount of funds a recipient may roll forward at the end of the project. However, it is recommended that recipients roll no more than 20% of their allocation each year to ensure that roll forward funds are satisfied in the subsequent year for which funds must be used.</li> </ul> <p><b>Terms and Special Conditions continued on page 2</b></p>	
<b>13 APPROVED:</b> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="width: 45%;">   <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/>                     Authorized Official on behalf of Pam Stewart                      Commissioner of Education                 </div> <div style="width: 30%; text-align: center;"> <p style="font-size: 1.5em; margin: 0;">12/23/13</p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/>                     Date of Signing                 </div> <div style="width: 15%; text-align: right;">  </div> </div>	

# FLORIDA DEPARTMENT OF EDUCATION




## STATE BOARD OF EDUCATION

GARY CHARTRAND, *Chair*  
JOHN R. PADGET, *Vice Chair*  
*Members*  
ADA G. ARMAS, M.D.  
JOHN A. COLÓN  
BARBARA S. FEINGOLD  
KATHLEEN SHANAHAN

Pam Stewart  
Commissioner of Education

November 19, 2013

TO: Ms. Kimberly S. Ferree  
Gadsden County School Board

FROM: Matt Kirkland, Chief Comptroller 

SUBJECT: Individuals with Disabilities Education Act, Fiscal Year 2013 Roll Forward Funds

FOR YOUR INFORMATION, below are the 2013 certified roll forward funds for the Individuals with Disabilities Education Act, Part B Preschool.

Accumulated 2012 Roll Forward	82,193.93
IDEA 2013 Allocation	81,949.00
Adjustment	0.00
Total 2013 Funds Available	164,142.93
Less: Final 2013 Expenditures	131,939.30
<b>**Approved Accumulated 2013 Roll Forward**</b>	<b>32,203.63</b>
IDEA 2014 Allocation	82,110.00
Adjustment	0.00
Total Fiscal Year 2014 Funds Available	114,313.63

If the total FY 2014 funds available (above) are less than the project amount indicated in the project approval letter, no amendment is necessary; the project amount should be reduced to agree with the FY 2014 funds available. (The project amount cannot exceed the total FY 2014 funds available.) **If the total FY 2014 funds available are greater than the project amount and you wish to utilize those additional funds, a budget amendment must be requested to increase the project to the total FY 2014 funds available. Budget amendments are requested using form DOE150.** If the total FY 2014 funds available are equal to the project amount, the authority to encumber and/or expend the total project amount is now effective by receipt of this letter. If there are any questions regarding this roll forward, please contact Mireia Vidal at (850) 245-9217.

cc: Superintendent  
cc: Virginia Sasser

MATT KIRKLAND  
CHIEF COMPTROLLER, BUREAU OF THE COMPTROLLER

325 W. GAINES STREET • SUITE 914 • TALLAHASSEE, FLORIDA 32399-0400 • 850-245-0401 • FAX 850-245-9220  
[www.fldoe.org](http://www.fldoe.org)

RPRT- F2B31  
 DIST- 20 GADSDEN COUNTY SCHOOLS  
 PROJ- 4226740 IDEA PRE-K 2013-14

TERMS - FINANCIAL INFORMATION SERIES  
 BUDGET STATUS SUMMARY  
 REQ-01 SEQ-L,F,O TOT-2 SRC-D

PROCESSED- 04/07/14 PAGE- 1  
 TIME- 09:58 FY- 14  
 MONTH- APRIL PRD- 10

NUMBER-----ACCOUNT-----DESCRIPTION	BUDGETED	--MTD--- EXPENDED	--YTD--- EXPENDED	COMMITTED	ENCUMBERED	-----BALANCE----- AMOUNT PCT
5200 EXCEPTIONAL						
120 CLASSROOM TEACHER-REGULAR PA	31,000.00	.00	17,399.25	12,879.15	.00	721.60 2DB 346.59
140 SUBSTITUTES	.00	.00	346.59	.00	.00	346.59- CR 346.59
150 INSTRUCTIONAL ASSIST-REGULAR	58,000.00	.00	11,510.08	5,754.98	.00	40,734.94 7DB 22,562.10
210 RETIREMENT	3,303.00	.00	2,009.17	1,295.07	.00	1.24- 0 CR 1.24
220 SOCIAL SECURITY	4,507.00	.00	2,087.57	1,425.52	.00	993.91 22
230 BOARD MEDICAL & DENTAL INS	.00	.00	3,008.23	1,514.21	.00	4,522.44- CR 4522.41
232 BOARD TERM LIFE INSURANCE	190.00	.00	96.96	59.02	.00	34.02 17
240 WORKERS COMPENSATION	.00	.00	147.02	95.03	.00	242.05- CR 242.05
390 OTHER PURCHASED SERVICES	.00	.00	3,000.00	.00	.00	6,000.00-
510 SUPPLIES	4,607.00	.00	548.74	.00	.00	3,964.04 86
642 FURN,FIXT,EQUIP-LESS THAN \$7	2,500.00	.00	.00	.00	.00	2,500.00 100
643 COMPUTER EQUIP-MORE THAN \$75	10,000.00	.00	5,678.00	.00	.00	4,322.00 43
*	114,107.00	.00	45,831.61	23,022.98	3,094.22	42,158.19 36
5500 PRE-KINDERGARTEN						
122 TEACHER INSERVICE EARNINGS	.00	.00	303.49	.00	.00	303.49-
152 INSTRUCTIONAL ASST INSERVICE	.00	.00	73.61	.00	.00	73.61-
220 SOCIAL SECURITY	.00	.00	28.85	.00	.00	28.85-
240 WORKERS COMPENSATION	.00	.00	1.81	.00	.00	1.81-
*	.00	.00	407.76	.00	.00	407.76-
6100 PUPIL PERSONNEL SERVICE						
130 OTHER CERTIFIED REGULAR PAY	.00	.00	1,670.46	3,858.38	.00	5,528.84- CR 5528.84
136 OTHER CERTIFIED-HOURLY EMPLO	30,473.00	.00	.00	.00	.00	30,473.00 100 DO 17,133.34
210 RETIREMENT	2,300.00	.00	535.80	268.16	.00	1,496.04 65
220 SOCIAL SECURITY	2,500.00	.00	572.27	295.17	.00	1,632.56 65
230 BOARD MEDICAL & DENTAL INS	.00	.00	721.10	356.44	.00	1,077.54- CR 1077.54
232 BOARD TERM LIFE INSURANCE	200.00	.00	25.41	12.22	.00	162.37 81
240 WORKERS COMPENSATION	.00	.00	38.74	19.68	.00	58.42- CR 58.42
*	35,473.00	.00	3,563.78	4,810.05	.00	27,099.17 76
7200 GENERAL ADMINISTRATION						
791 FEDERAL INDIRECT COSTS	2,530.00	.00	1,423.30	.00	.00	1,106.70 43
*	2,530.00	.00	1,423.30	.00	.00	1,106.70 43
7800 PUPIL TRANSPORTATION SERVICES						
161 OTHER SUPPORT-MISC EARNINGS	.00	.00	222.75	.00	.00	222.75-
210 RETIREMENT	.00	.00	15.48	.00	.00	15.48-
220 SOCIAL SECURITY	.00	.00	15.56	.00	.00	15.56-
240 WORKERS COMPENSATION	.00	.00	10.19	.00	.00	10.19-
330 TRAVEL	.00	.00	78.00	.00	.00	78.00-
390 OTHER PURCHASED SERVICES	.00	.00	24.75	.00	.00	24.75-
*	.00	.00	366.73	.00	.00	366.73-

18572  
 Ether Cave

JP Thomas  
 4/10/14

RPRT- F2B31  
 DIST- 20 GADSDEN COUNTY SCHOOLS  
 PROJ- 4226740 IDEA PRE-K 2013-14

TERMS - FINANCIAL INFORMATION SERIES  
 BUDGET STATUS SUMMARY  
 REQ-01 SEQ-L,F,O TOT-2 SRC-D

PROCESSED- 04/07/14 PAGE- 2  
 TIME- 09:58 FY- 14  
 MONTH- APRIL PRD- 10

NUMBER-----ACCOUNT-----DESCRIPTION	BUDGETED	--MTD--- EXPENDED	--YTD--- EXPENDED	COMMITTED	ENCUMBERED	-----BALANCE----- AMOUNT PCT
FUNC/OBJ						
7900 OPERATION OF PLANT						
161 OTHER SUPPORT-MISC EARNINGS	.00	.00	2,223.73	.00	.00	2,223.73-
210 RETIREMENT	.00	.00	154.56	.00	.00	154.56-
220 SOCIAL SECURITY	.00	.00	160.31	.00	.00	160.31-
240 WORKERS COMPENSATION	.00	.00	98.63	.00	.00	98.63-
*	.00	.00	2,637.23	.00	.00	2,637.23-
**	152,110.00	.00	54,230.41	27,833.03	3,094.22	66,952.34 44

-37,796.37  
114,313.63





Proj. 4210959

ADMINISTRATION FOR  
**CHILDREN & FAMILIES**

Administration for  
Children & Families  
*Region IV*

61 Forsyth St., SW, Suite 4M60  
Atlanta, GA 30303

Telephone: (404) 562-2800/2900  
Fax: (404) 562-2981  
[www.acf.hhs.gov](http://www.acf.hhs.gov)

**DISTRIBUTION  
OF THE HEAD START/EARLY HEAD START  
NOTICE OF AWARD**

---

**ENCLOSED PLEASE FIND THE FOLLOWING FOR THE  
EXECUTIVE DIRECTOR OR SUPERINTENDENT:**

- ❖ **AN ORIGINAL FINANCIAL ASSISTANCE AWARD**
- ❖ **A BUDGET INFORMATION SHEET, AND**
- ❖ **OTHER CORRESPONDENCE (IF APPLICABLE).**

**PLEASE PROVIDE AND DISTRIBUTE COPIES OF THE  
ENCLOSED CORRESPONDENCE TO THE FOLLOWING:**

- ❖ **CHAIRPERSON, BOARD OF DIRECTORS**
- ❖ **HEAD START/EARLY HEAD START DIRECTOR**
- ❖ **FISCAL OFFICER AND/OR BOOKKEEPER**
- ❖ **POLICY COUNCIL CHAIRPERSON**

**Department of Health and Human Services  
Administration for Children and Families  
Notice of Award (NOA)**

SAI NUMBER:  
PMS DOCUMENT NUMBER:  
04CH468701

<b>1. AWARDING OFFICE:</b> OA/OGM/Region IV	<b>2. ASSISTANCE TYPE:</b> Discretionary Grant	<b>3. AWARD NO.:</b> 04CH4687/01	<b>4. AMEND. NO.:</b>
--	---	-------------------------------------	-----------------------

<b>5. TYPE OF AWARD:</b> SERVICE	<b>6. TYPE OF ACTION:</b> New	<b>7. AWARD AUTHORITY:</b> 42 USC 9801 ET SEQ.
-------------------------------------	----------------------------------	---

<b>8. BUDGET PERIOD:</b> 12/01/2013 THRU 11/30/2014	<b>9. PROJECT PERIOD:</b> 12/01/2013 THRU 11/30/2018	<b>10. CAT NO./CFDA:</b> 93.600
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<b>11. RECIPIENT ORGANIZATION:</b> GADSDEN COUNTY SCHOOL DISTRICT 35 MARTIN LUTHER KING JR. BLVD QUINCY FL 32351 ISAAC SIMMONS, BOARD CHAIRPERSON	<b>12. PROJECT / PROGRAM TITLE:</b> 2013 5 year non-competitive award
---	--

<b>13. COUNTY:</b> GADSDEN	<b>14. CONGR. DIST.:</b>	<b>15. PRINCIPAL INVESTIGATOR OR PROGRAM DIRECTOR:</b> CAROLYN HARDEN , EXECUTIVE DIRECTOR
-------------------------------	--------------------------	---

<b>16. APPROVED BUDGET:</b>		<b>17. AWARD COMPUTATION:</b>	
Personnel.....	\$ 827,213	A. NON-FEDERAL SHARE.....	\$ 338,833 20.00 %
Fringe Benefits.....	\$ 235,106	B. FEDERAL SHARE.....	\$ 1,355,331 80.00 %
Travel.....	\$ 10,220	<b>18. FEDERAL SHARE COMPUTATION:</b>	
Equipment.....	\$ 0	A. TOTAL FEDERAL SHARE.....	\$ 1,355,331
Supplies.....	\$ 45,934	B. UNOBLIGATED BALANCE FEDERAL SHARE.....	\$
Contractual.....	\$ 91,351	C. FED. SHARE AWARDED THIS BUDGET PERIOD..	\$ 1,355,331
Facilities/Construction.....	\$ 0	<b>19. AMOUNT AWARDED THIS ACTION:</b>	
Other.....	\$ 104,576	\$ 1,355,331	
Direct Costs.....	\$ 1,314,400	<b>20. FEDERAL \$ AWARDED THIS PROJECT PERIOD:</b>	
Indirect Costs.....	\$ 40,931	\$ 1,355,331	
At % of \$		<b>21. AUTHORIZED TREATMENT OF PROGRAM INCOME:</b>	
In Kind Contributions.....	\$ 0	ADDITIONAL COSTS	
Total Approved Budget(**)..	\$ 1,355,331	<b>22. APPLICANT EIN:</b> 1-596000615-A1	<b>23. PAYEE EIN:</b> 1-596000615-A1
		<b>24. OBJECT CLASS:</b> 41.51	

<b>25. FINANCIAL INFORMATION:</b>						DUNS: 152811279	
ORGN	DOCUMENT NO.	APPROPRIATION	CAN NO.	NEW AMT.	UNOBLIG.	NONFED %	
OGM	04CH468701	75-4-1536	2014 G044120	\$18,579			
OGM	04CH468701	75-4-1536	2014 G044122	\$1,336,752			

**26. REMARKS:** (Continued on separate sheets)

Client Population: 259.  
Number of Delegates: 0.  
Paid by DHHS Payment Management System (PMS), see attached for payment information.  
This award is subject to the requirements of the HHS Grants Policy Statement (HHS GPS) that are applicable to you based on your recipient type and the purpose of this award.  
This includes requirements in Parts I and II (available at <http://www.hhs.gov/asfr/ogapa/grantinformation/hhsgps107.pdf>) of the HHS GPS.  
Although consistent with the HHS GPS, any applicable statutory or regulatory requirements, including 45 CFR Part 74 or 92, directly apply to this award apart from any coverage in the HHS GPS.

<b>27. SIGNATURE - ACF GRANTS OFFICER</b> Juan Gordon	<b>DATE:</b> 11/21/13	<b>28. SIGNATURE(S) CERTIFYING FUND AVAILABILITY</b> Jeffrey L. Fredericks	<b>DATE:</b> 11/21/13
<b>29. SIGNATURE AND TITLE - PROGRAM OFFICIAL(S)</b> Jeffrey L. Fredericks, Regional Program Manager			

**Department of Health and Human Services  
Administration for Children and Families  
Notice of Award (NOA)**

SAI NUMBER:

PMS DOCUMENT NUMBER:  
04CH468701

<b>1. AWARDING OFFICE:</b> OA/OGM/Region IV		<b>2. ASSISTANCE TYPE:</b> Discretionary Grant	<b>3. AWARD NO.:</b> 04CH4687/01	<b>4. AMEND. NO.</b>
<b>5. TYPE OF AWARD:</b> SERVICE	<b>6. TYPE OF ACTION:</b> New		<b>7. AWARD AUTHORITY:</b> 42 USC 9801 ET SEQ.	
<b>8. BUDGET PERIOD:</b> 12/01/2013 THRU 11/30/2014		<b>9. PROJECT PERIOD:</b> 12/01/2013 THRU 11/30/2018		<b>10. CAT NO./CFDA:</b> 93.600
<b>11. RECIPIENT ORGANIZATION:</b> GADSDEN COUNTY SCHOOL DISTRICT				

**26. REMARKS:** (Continued from previous page)

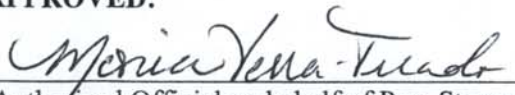

This award is subject to requirements or limitations in any applicable Appropriations Act. This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104).  
 For the full text of the award term, go to <https://www.acf.hhs.gov/grants/discretionary-competitive-grants>.  
 This award is subject to the Federal Financial Accountability and Transparency ACT (FFATA or Transparency) of 2006 subaward and executive compensation reporting requirements.  
 For the full text of the award term, go to: <https://www.acf.hhs.gov/grants/discretionary-competitive-grants>.  
 This award is subject to requirements as set forth in 2 CFR 25.110 Central Contractor Registration (CCR) and DATA Universal Number System (DUNS).  
 For full text go to <https://www.acf.hhs.gov/grants/discretionary-competitive-grants>.  
 This award is subject to requirements as set forth in 2 CFR 25.110.  
 For full text go to [http://www.acf.hhs.gov/grants/msg\\_sf425.html](http://www.acf.hhs.gov/grants/msg_sf425.html).  
 This grant is subject to the requirements as set forth in 45 CFR Part 87.  
 This grant is subject to the requirements set forth in 45 CFR part 74 (for non-profit organizations and educational institutions) or 45 CFR Part 92 (for state, local, and federally recognized tribal governments).  
 Initial expenditure of funds by the grantee constitutes acceptance of this award.  
 Future support is anticipated.  
 This award is subject to HHS regulations codified at 45 CFR 1301, 1302, 1303, 1304, 1305, 1306, 1307, 1308, 1309 and 1310.(\*\*) Reflects only federal share of approved budget.  
 Under Section 638 of the Head Start Act, this grant action awards Gadsden county School Board a five-year project period of 12/01/2013-11/30/2018 for the operation of the Head Start program in the designated service area. Due to funding limitations under the continuing resolution for Fiscal Year (FY) 2014, this grant action awards partial funds under Common Accounting Numbers (CAN) G044120 and G044122 to provide Head Start services to 259 children for the initial 12/01/2013-11/30/2014 budget period of the five-year project period. The projected annual funding level in FY 2014 for Head Start operations is \$1,909,646, and the training and technical assistance allocation is \$26,542. The balance of the funds will be awarded when funds are available, subject to the final appropriation for the Head Start program for FY 2014.

Designated Head Start service area: Gadsden County  
 Approved program options: Center-based

This grant is subject to the requirements for contribution of the non-Federal share match and approval of key staff, the limitations on development and administrative costs and employee compensation, and prior approval for the purchase, construction and major renovation of facilities as specified in Attachment 1. This grant is also subject to the conditions specified in Attachment 2.

**Florida Department of Education  
Project Award Notification**

Proj. 4226340

<b>1 PROJECT RECIPIENT</b> Gadsden County School District	<b>2 PROJECT NUMBER</b> 200-2634A-4CB01
<b>3 PROJECT/PROGRAM TITLE</b> IDEA Part B Entitlement  <p align="center"><b>TAPS 14C001</b></p>	<b>4 AUTHORITY</b> <b>84.027A IDEA Part B K-12 Entitlement</b>
<b>5 AMENDMENT INFORMATION</b> Amendment Number: 1 Type of Amendment: Roll Forward Increase Effective Date: 02/28/2014	<b>6 PROJECT PERIODS</b>  Budget Period: 07/01/2013 - 06/30/2014 Program Period: 07/01/2013 - 06/30/2014
<b>7 AUTHORIZED FUNDING</b> Current Approved Budget: \$ 1,550,255.00 Amendment Amount: Estimated Roll Forward: Certified Roll Amount: \$ 334,547.33 Total Project Amount: \$ 1,884,802.33	<b>8 REIMBURSEMENT OPTION</b> Federal Cash Advance
<b>9 TIMELINES</b> <ul style="list-style-type: none"> <li>• Last date for incurring expenditures and issuing purchase orders: <span style="float: right;"><u>06/30/2014</u></span></li> <li>• Date that all obligations are to be liquidated and final disbursement reports submitted: <span style="float: right;"><u>08/20/2014</u></span></li> <li>• Last date for receipt of proposed budget and program amendments: <span style="float: right;"><u>06/30/2014</u></span></li> <li>• Refund date of unexpended funds; mail to DOE Comptroller, 325 W. Gaines Street, 944 Turlington Building, Tallahassee, Florida 32399-0400:</li> <li>• Date(s) for program reports:</li> </ul>	
<b>10 DOE CONTACTS</b> <b>BEESS:</b> Virginia Sasser Phone: (850) 245-0475 Email: <a href="mailto:Virginia.Sasser@fldoe.org">Virginia.Sasser@fldoe.org</a> <b>Grants Management:</b> Unit C (850) 245-0496	<b>11 DOE FISCAL DATA</b>  DBS: 40 90 40 EO: EF Object: 720035
<b>12 TERMS AND SPECIAL CONDITIONS</b> <ul style="list-style-type: none"> <li>• This project and any amendments are subject to the procedures outlined in the <i>Project Application and Amendment Procedures for Federal and State Programs</i> (Green Book) and the <i>General Assurances for Participation in Federal and State Programs</i>.</li> <li>• For federal cash advance projects, monthly expenditures must be submitted to the Comptroller's Office by the 20<sup>th</sup> of each month for the preceding month's disbursements utilizing the On-Line Disbursement Reporting System.</li> <li>• FY 2013 roll forward funds must be satisfied in full by the end of FY 2013. To ensure all roll funds have been expended, the total amount of expenditures reported on the DOE 399 must be equal to or exceed the Approved Accumulated 2013 Roll Forward amount authorized by the Comptroller.</li> <li>• IDEA does not restrict the amount of funds a recipient may roll forward at the end of the project. However, it is recommended that recipients roll no more than 20% of their allocation each year to ensure that roll forward funds are satisfied in the subsequent year for which funds must be used.</li> </ul> <p><b>Terms and Special Conditions continued on page 2</b></p>	
<b>13 APPROVED:</b>  <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">   <hr/>                         Authorized Official on behalf of Pam Stewart                          Commissioner of Education                     </div> <div style="width: 45%; text-align: center;">                         3/11/14  <hr/>                         Date of Signing                     </div> <div style="width: 10%; text-align: right;">  </div> </div>	

# FLORIDA DEPARTMENT OF EDUCATION



## STATE BOARD OF EDUCATION

GARY CHARTRAND, *Chair*  
JOHN R. PADGET, *Vice Chair*  
*Members*  
ADA G. ARMAS, M.D.  
JOHN A. COLÓN  
BARBARA S. FEINGOLD  
KATHLEEN SHANAHAN

Pam Stewart  
Commissioner of Education

November 19, 2013

TO: Ms. Kimberly S. Ferree  
Gadsden County School Board

FROM: Matt Kirkland, Chief Comptroller *Matt Kirkland*

SUBJECT: Individuals with Disabilities Education Act, Fiscal Year 2013 Roll Forward Funds

FOR YOUR INFORMATION, below are the 2013 certified roll forward funds for the Individuals with Disabilities Education Act, Part B.

Accumulated 2012 Roll Forward	324,201.30
IDEA 2013 Allocation	1,633,243.00
Adjustment	0.00
Total 2013 Funds Available	1,957,444.30
Less: Final 2013 Expenditures	1,675,847.96
Supplemental Distribution	52,949.99
<b>**Approved Accumulated 2013 Roll Forward**</b>	<b>334,546.33</b>
IDEA 2014 Allocation	1,550,255.00
Adjustment	1.00
Total Fiscal Year 2014 Funds Available	<b>1,884,802.33</b>

If the total FY 2014 funds available (above) are less than the project amount indicated in the project approval letter, no amendment is necessary; the project amount should be reduced to agree with the FY 2014 funds available. (The project amount cannot exceed the total FY 2014 funds available.) **If the total FY 2014 funds available are greater than the project amount and you wish to utilize those additional funds, a budget amendment must be requested to increase the project to the total FY 2014 funds available. Budget amendments are requested using form DOE150.** If the total FY 2014 funds available are equal to the project amount, the authority to encumber and/or expend the total project amount is now effective by receipt of this letter. If there are any questions regarding this roll forward, please contact Mireia Vidal at (850) 245-9217.

cc: Superintendent  
cc: Virginia Sasser

MATT KIRKLAND  
CHIEF COMPTROLLER, BUREAU OF THE COMPTROLLER

325 W. GAINES STREET • SUITE 914 • TALLAHASSEE, FLORIDA 32399-0400 • 850-245-0401 • FAX 850-245-9220  
[www.fldoe.org](http://www.fldoe.org)

A) Gadsden County School District District/Agency Name      B) 200-2634A-4CB01 Project Number      / 14C001 TAPS Number  
 C) 1 Amendment Number

## FLORIDA DEPARTMENT OF EDUCATION BUDGET AMENDMENT NARRATIVE FORM

D) Total Project Amount Currently Approved  <p style="text-align: center;">\$1,720,255.00</p>	E) Total Project Amount resulting from this Budget Amendment  <p style="text-align: center;">\$1,884,802.33</p>
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F) Line Item Description

FUNCTION	OBJECT	ACCOUNT TITLE AND NARRATIVE	FTE	AMOUNT INCREASE	AMOUNT DECREASE
5200	140	Hire substitutes for teachers of students with disabilities to attend workshops/conferences.	0.030	25,000.00	
5200	140	Hire substitutes for regular education teachers, allowing them to be able to participate in in-service activities as appropriate and to attend IEP meetings.	0.080	20,000.00	
5200	330	Travel for teachers who work with SWDs.	NA	22,000.00	
5200	350	Repairs and maintenance provided for equipment used at schools for SWDS.	NA	6,100.00	
5200	360	Costs for annual maintenance of software and broadcast rights fees for programs used with SWDs.		8,000.00	
5200	642	Non-capitalized furniture and/or equipment will be purchased to provide support for SWDs.	NA	5,054.33	
5200	643	Purchase capitalized computer hardware for instruction to SWDs.	NA	9,000.00	
5200	644	Purchase non-capitalized computer hardware for instruction to SWDs.	NA	6,500.00	
5200	691	Purchase capitalized computer software to work with SWDs.	NA	6,923.00	
5200	692	Purchase non-capitalized computer software to work with SWDs.	NA	7,000.00	
5200	730	Dues and fees for membership to organizations that provide current information On provision of services to SWDs.	NA	1,500.00	
				<b>Total</b>	<b>Total</b>

DOE 151  
 Revised August 2012

*REV. 3/7/14*  
 Pam Stewart, Commissioner



A) Gadsden County School District District/Agency Name      B) 200-2634A-4CB01 Project Number      / 14C001 TAPS Number

C) 1 Amendment Number

## FLORIDA DEPARTMENT OF EDUCATION BUDGET AMENDMENT NARRATIVE FORM

D) Total Project Amount Currently Approved <p style="text-align: right;">\$1,720,255.00    ✓</p>	E) Total Project Amount resulting from this Budget Amendment <p style="text-align: right;">\$1,884,802.33    ✓</p>
---	---

**F) Line Item Description**

FUNCTION	OBJECT	ACCOUNT TITLE AND NARRATIVE	FTE	AMOUNT INCREASE	AMOUNT DECREASE
6100	330	Travel for Support Personnel to provide services to SWDs.	NA	20,500.00	
6100	510	Purchase of materials and supplies necessary to carry out IDEA requirements and training opportunities for parents and families of SWDS.	NA	10,000.00	
6300	330	Travel for ESE Director, Program Specialists and School Psychologists to gain new and updated information regarding ESE policies, Practices, and data management.	NA	8,000.00	
6300	641	Capitalized furniture, fixtures and equipment for personnel who work with SWDS.	NA	1,500.00	
6300	642	Non-capitalized furniture/fixtures/equipment for personnel who work with SWDS.	NA	500.00	
6400	120	In-service training of staff on IDEA requirements.	NA	5,000.00	
7200	790	Indirect Cost @ 3.02%		1,970.00	
				\$164,547.33	✓

Total Total

REV. 3/7/14


Pam Stewart, Commissioner

DOE 151  
Revised August 2012



**Florida Department of Education  
Project Award Notification**

Proj. 4210240

<b>1 PROJECT RECIPIENT</b> Gadsden County School District	<b>2 PROJECT NUMBER</b> 200-1024A-4C001
<b>3 PROJECT/PROGRAM TITLE</b> Title III, Part A, Supplementary Instructional Support for English Language Learners  <p align="right">TAPS 14A014</p>	<b>4 AUTHORITY</b> 84.365A Title III Part A, English Language Acquisition
<b>5 AMENDMENT INFORMATION</b> Amendment Number: 1 Type of Amendment: Roll Forward Increase Effective Date: 03/11/2014	<b>6 PROJECT PERIODS</b>  Budget Period: 07/01/2013 - 06/30/2014 Program Period: 07/01/2013 - 06/30/2014
<b>7 AUTHORIZED FUNDING</b> Current Approved Budget: \$ 55,905.60 Amendment Amount: Estimated Roll Forward: Certified Roll Amount: \$ 7,560.83 Total Project Amount: \$ 63,466.43	<b>8 REIMBURSEMENT OPTION</b> Federal Cash Advance
<b>9 TIMELINES</b> <ul style="list-style-type: none"> <li>• Last date for incurring expenditures and issuing purchase orders: <span style="float: right;"><u>06/30/2014</u></span></li> <li>• Date that all obligations are to be liquidated and final disbursement reports submitted: <span style="float: right;"><u>08/20/2014</u></span></li> <li>• Last date for receipt of proposed budget and program amendments: <span style="float: right;"><u>06/30/2014</u></span></li> <li>• Refund date of unexpended funds; mail to DOE Comptroller, 325 W. Gaines Street, 944 Turlington Building, Tallahassee, Florida 32399-0400:</li> <li>• Date(s) for program reports:</li> </ul>	
<b>10 DOE CONTACTS</b> <b>Program:</b> Ginger Alberto <b>Phone:</b> (850) 245 - 0894 <b>Email:</b> <a href="mailto:Ginger.Alberto@fldoe.org">Ginger.Alberto@fldoe.org</a> <b>Grants Management:</b> Unit A (850) 245-0496	<b>11 DOE FISCAL DATA</b>  DBS: 40 90 50 EO: 34 Object: 720035
<b>12 TERMS AND SPECIAL CONDITIONS</b> <ul style="list-style-type: none"> <li>• This project and any amendments are subject to the procedures outlined in the <u>Project Application and Amendment Procedures for Federal and State Programs</u> (Green Book) and the General Assurances for Participation in Federal and State Programs.</li> <li>• For federal cash advance projects, monthly expenditures must be submitted to the Comptroller's Office by the 20<sup>th</sup> of each month for the preceding month's disbursements utilizing the On-Line Disbursement Reporting System.</li> <li>• Agencies receiving funds under Title III, No Child Left Behind may use not more than two percent (2%) of such funds for the cost of administering the program.</li> </ul>	
<b>13 APPROVED:</b>  <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 45%;"> <p align="center"><i>Chas Eplin</i></p> <hr style="width: 80%; margin: 0 auto;"/> <p align="center">Authorized Official on behalf of Pam Stewart Commissioner of Education</p> </div> <div style="width: 45%; text-align: center;"> <p><i>3-27-14</i></p> <hr style="width: 80%; margin: 0 auto;"/> <p>Date of Signing</p> </div> <div style="width: 10%; text-align: right;">  </div> </div>	



A) Gadsden District/Agency Name      B) <sup>200-10244-4001</sup>  
~~4210240~~ / ~~13A014~~ 14A014  
 Project Number      TAPS Number  
 C) 1 Amendment Number

## FLORIDA DEPARTMENT OF EDUCATION BUDGET AMENDMENT NARRATIVE FORM

D) Total Project Amount Currently Approved \$ <u>55,905.60</u>	E) Total Project Amount resulting from this Budget Amendment \$ <u>63,466.43</u>
---	---

**F) Line Item Description**

FUNCTION	OBJECT	ACCOUNT TITLE AND NARRATIVE	FTE	AMOUNT INCREASE	AMOUNT DECREASE
5100	510	Multiple resources to assist ELLs in improving their academic achievement and English Language Acquisition including but not limited to Summer Counts, Oxford Bilingual Picture Dictionaries, supplemental literacy manipulatives, and Rosetta Stone.		7,560.83	
				7,560.83	

**Total**

# FLORIDA DEPARTMENT OF EDUCATION



## STATE BOARD OF EDUCATION

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JOHN R. PADGET, *Vice Chair*

*Members*

ADA G. ARMAS, M.D.

JOHN A. COLÓN

BARBARA S. FEINGOLD

KATHLEEN SHANAHAN

Pam Stewart  
Commissioner of Education

December 17, 2013

TO: Kimberly S. Ferree  
Gadsden County School Board

FROM: Matt Kirkland, Chief Comptroller 

SUBJECT: **Title III, Part A – English Language Acquisition, Fiscal Year 2013 Roll Forward Funds**

**FOR YOUR INFORMATION**, below are the 2013 certified roll forward funds for **Title III, Part A – English Language**.

Accumulated 2012 Roll Forward	11,195.03
Adjustment	0.00
Title III 2013 Allocation	63,458.46
Total 2013 Funds Available	74,653.49
Less: Final 2013 Expenditures	67,092.66
<b>**Approved Accumulated 2013 Roll Forward**</b>	<b>7,560.83</b>
Title III 2014 Allocation	55,905.60
Adjustment	0.00
<b>Total Fiscal Year 2014 Funds Available</b>	<b>63,466.43</b>

If the total FY 2014 funds available (above) are less than the project amount indicated in the project approval letter, no amendment is necessary; the project amount should be reduced to agree with the FY 2014 funds available. (The project amount cannot exceed the total FY 2014 funds available.) **If the total FY 2014 funds available are greater than the project amount and you wish to utilize those additional funds, a budget amendment must be requested to increase the project to the total FY 2014 funds available. Budget amendments are requested using form DOE150.** If the total FY 2014 funds available are equal to the project amount, the authority to encumber and/or expend the total project amount is now effective by receipt of this letter. If there are any questions regarding this roll forward, please contact Kristin Joyner at (850) 245-9151.

cc: Superintendent  
cc: Mary Jane Tappen

MATT KIRKLAND  
CHIEF COMPTROLLER, BUREAU OF THE COMPTROLLER

325 W. GAINES STREET • SUITE 914 • TALLAHASSEE, FLORIDA 32399-0400 • 850-245-0401 • FAX 850-245-9220  
[www.fdoe.org](http://www.fdoe.org)

**SUMMARY SHEET**

**RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA**

**AGENDA ITEM NO.** 7c

**DATE OF SCHOOL BOARD MEETING:** April 22, 2014

**TITLE OF AGENDA ITEMS:** Budget Amendment Number Eleven

**DIVISION:** Finance Department

**PURPOSE AND SUMMARY OF ITEMS:**

Board approval is requested for this budget amendment that accurately reflects actual expenditures and increases estimated revenue.

**FUND SOURCE:** 410 School Food Service

**AMOUNT:** \$ 172,013.05

**PREPARED BY:** Kimberly Ferree

**POSITION:** Assistant Superintendent for Business Services

**Gadsden County School Board  
410 (Food Service) Fund Estimated Revenue  
Budget Amendment Number Eleven**

FUND 410 REVENUE OBJECT	ESTIMATED REVENUE 4/7/2014	BUDGET AMENDMENT NUMBER ELEVEN	ENDING ESTIMATED REVENUE 4/10/2014
260	\$ -	\$ -	\$ -
261	\$ 2,353,659.27	\$ 149,679.45	\$ 2,503,338.72
262	\$ 849,291.16	\$ -	\$ 849,291.16
263	\$ 96,883.80	\$ -	\$ 96,883.80
265	\$ 147,866.91	\$ -	\$ 147,866.91
267	\$ 250,000.00	\$ -	\$ 250,000.00
268	\$ 126,750.00	\$ 22,333.60	\$ 149,083.60
280	\$ -	\$ -	\$ -
299	\$ -	\$ -	\$ -
337	\$ 35,680.00	\$ -	\$ 35,680.00
338	\$ 34,977.00	\$ -	\$ 34,977.00
390	\$ -	\$ -	\$ -
440	\$ -	\$ -	\$ -
451	\$ -	\$ 75,000.00	\$ 75,000.00
454	\$ 75,000.00	\$ (75,000.00)	\$ -
493	\$ -	\$ -	\$ -
495	\$ 1,000.00	\$ -	\$ 1,000.00
497	\$ -	\$ -	\$ -
<b>TOTALS</b>	<b>\$ 3,971,108.14</b>	<b>\$ 172,013.05</b>	<b>\$ 4,143,121.19</b>

budgeted \$ 53,390.83 originally out of fund balance

**Gadsden County School Board  
410 (Food Service) Fund Appropriations  
Budget Amendment Number Eleven**

410 FUND				BUDGET			
FUNCTION/ OBJECT		BUDGET BALANCE 4/7/2014		AMENDMENT NUMBER ELEVEN		BUDGET BALANCE 4/10/2014	
7200	700	\$ -		\$ 30,000.00		\$ 30,000.00	
7600	100	\$ 1,213,368.73		\$ 67,925.87		\$ 1,281,294.60	
	200	\$ 455,181.21		\$ 18,530.54		\$ 473,711.75	
	300	\$ 41,042.33		\$ 24,951.21		\$ 65,993.54	
	400	\$ 20,500.00		\$ 4,069.45		\$ 24,569.45	
	500	\$ 2,173,075.04		\$ 17,846.28		\$ 2,190,921.32	
	600	\$ 4,550.00		\$ 7,769.70		\$ 12,319.70	
	700	\$ 10,000.00		\$ 920.00		\$ 10,920.00	
7900	300	\$ -		\$ -		\$ -	
<b>GRANDTOTAL</b>		<b>\$ 3,917,717.31</b>		<b>\$ 172,013.05</b>		<b>\$ 4,089,730.36</b>	



DIST: 20 FY: 14 12. REQUEST/PURCH ORDER SCAN TIME: 10:00

TYPE CNTR FND ---VENDOR-- E S I FR--ISSUE--TO START#  
 P \_\_\_\_\_ V Q01000000 - - - - -

NUM-PO	REQ-NUM-	DATE	CNTR-	VENDOR--	ESI	ORIGINAL	LIQ/PAID	CURRENT
185131	00003039	070113	9003	VQ01000000	BY	2,000.00	2,000.00	.00
185273	90204037	070113	9020	VQ01000000	YBY	678.24	378.24	300.00
185458	00000001	070113	9003	VQ01000000	YBY	3,500.00	1,740.97	1,759.03
186352	02455002	041114	0245	VQ01000000	YBN	11,056.21	.00	11,056.21

TOTAL 17,234.45 4,119.21 13,115.24

ALL RECORDS DISPLAYED. NEXT? PF3 FOR ACCOUNT NUM SCAN TERML: 8AJZ  
 4-© § 1 Sess-1 199.44.72.2 TW1H0323 4/9







AIRGAS USA, LLC  
945 YULEE ST  
TALLAHASSEE FL 32304-4403  
Phone : 850-576-2192  
Fax : 850-575-6250

*✓ 10402*

QUOTATION

Quote For : 1235995  
GADSDEN TECHNICAL INSTITUTE  
ACCOUNTS PAYABLE  
201 MARTIN LUTHER KING JR BLVD  
QUINCY FL 32351-4415  
Phone : 850-875-8324

Quote No. : 2002405350  
Date : 12/10/2013  
Account Manager : William Strickland  
Created By : William Strickland  
PO Number :  
PO Date : 00000000  
Release Number :

Sold To : 1201843  
GADSDEN TECHNICAL INSTITUTE  
ACCOUNTS PAYABLE  
35 MARTIN LUTHER KING JR BLVD  
QUINCY FL 32351-4411  
Phone : 850-627-9651

Item	Part No.	Description	Order Qty	U/M	Unit Price	Currency	Ext Price
Customer Part No.	Customer Description	Plant	Vol				
10	LINK1655-5	LFA 2.0 6.5FT EXTRACTION ARM	2.00	EA	702.47 /EA	USD	1,404.94
		LFA 2.0 6.5FT EXTRACTION ARM	SO59				
20	LINK1656-1	FAN SF2400 STATIONARY SINGLE HORSEPOWER HAS SELF-CLEANING CONCAVE BLADES AND PROVIDES OPEN AIR FLOW	2.00	EA	1,296.80 /EA	USD	2,593.60
		FAN SF2400 STNR Y 1 HRSPWR	SO59				
30	LINK1494-2	STARTER/OVERLOAD SWITCH FOR 115V	2.00	EA	96.02 /EA	USD	192.04
		STARTER/OVERLOAD SWITCH FOR 115V	SO59				
40	LINK1657-2	MOTOR/WALL-MOUNTING BRACKET	2.00	EA	75.82 /EA	USD	151.64
		MOTOR/WALL-MOUNTING BRACKET	SO59				
80	LINK1654-2	MH03022010	1.00	EA	2,315.37 /EA	USD	2,315.37
		STATIFLEX 200-M	SO59				
90	LINK2269-3	LINCOLN MULTI-PROCESS WELDER INVERTEC V275-S CC DC STICK/TIG/ GOUGING 208/230/460/575V 50/60HZ 1/3PH	1.00	EA	2,491.62 /EA	USD	<del>2,491.62</del>
		MP WLDR INVERTEC V275-S CC DC	SO59				

*1995.98  
Regulator*

*Towel  
Welding Cable #2  
Cover  
Ground  
Stinger  
1 1/8*

Quote Amount	9,149.21
Sales Tax	0.00
Quote Total	9,149.21

PLEASE REFER TO THIS QUOTATION WHEN ORDERING.  
Terms and pricing are valid for a limited time only.

MATERIAL PRICING ONLY. SURCHARGES, TAXES & FREIGHT MAY NOT BE INCLUDED.

Comments :

*\$ 13,315.18*

*110-5300-641.0245-1190043*

*13,733.19*

DIST: 20 FY: 14

12. REQUEST/PURCH ORDER SCAN

TIME: 09:46

TYPE CNTR FND ---VENDOR-- E S I FR--ISSUE--TO START#  
 P \_\_\_\_\_ V A04020000 \_ \_ \_ \_ \_

NUM-PO	REQ-NUM-	DATE	CNTR-	VENDOR--	ESI	ORIGINAL	LIQ/PAID	CURRENT
185377	00001181	070113	0245	VA04020000	YBY	3,125.00	3,073.46	51.54
186362	02450008	041514	0245	VA04020000	YBN	698.27	.00	698.27
186363	02450009	041514	0245	VA04020000	YBN	13,733.19	.00	13,733.19
186366	02452003	041514	0245	VA04020000	YBN	4,801.31	.00	4,801.31
186367	02452004	041514	0245	VA04020000	YBN	565.58	.00	565.58
186370	02452008	041514	0245	VA04020000	YBN	519.70	.00	519.70

TOTAL 23,443.05 3,073.46 20,369.59

ALL RECORDS DISPLAYED. NEXT?

PF3 FOR ACCOUNT NUM SCAN TERML: 8AAQ

4-© 1 Sess-1 199.44.72.2 TW1H0011 4/9





AIRGAS USA, LLC  
 945 YULEE ST  
 TALLAHASSEE FL 32304-4403  
 Phone : 850-576-2192  
 Fax : 850-575-6250

V A0402

**QUOTATION**

Quote For : 1235995  
 GADSDEN TECHNICAL INSTITUTE  
 ACCOUNTS PAYABLE  
 201 MARTIN LUTHER KING JR BLVD  
 QUINCY FL 32351-4415  
 Phone : 850-875-8324

Quote No. : 2002721459  
 Date : 04/02/2014  
 Account Manager : William Strickland  
 Created By : William Strickland  
 PO Number :  
 P.O. Date : 00000000  
 Release Number :

Sold To : 1201843  
 GADSDEN TECHNICAL INSTITUTE  
 ACCOUNTS PAYABLE  
 35 MARTIN LUTHER KING JR BLVD  
 QUINCY FL 32351-4411  
 Phone : 850-627-9651

Item	Part No.	Description	Order Qty	U/M	Unit Price	Currency	Ext Price
Customer Part No.	Customer Description	Plant	Vol				
10	OX 200	OXYGEN INDUSTRIAL SIZE 200 CGA 540	2.00	CL	30.62 /CL	USD	61.24
		OXYGEN INDUSTRIAL 200 CGA 540	SO59		502.00		
20	AC 4	ACETYLENE SIZE 4 CGA 510	2.00	CL	48.17 /HH	USD	127.17
		ACETYLENE IND #4 CGA 510	SO59		264.00		
30	RAD64000703	RADNOR GRINDING WHEEL 4 1/2"X 1/4"X 7/8" 27 A24R A/O 13580	20.00	EA	2.37 /EA	USD	47.40
		GRIND WHL 4-1/2X1/4X7/8 T27 A24R	SO59				
40	RAD64001408	E71T-11 MIG WIRE FLUX CORED CARBON STEEL RADNOR 035 10 LB SPOOL	1.00	EA	75.274 /EA	USD	75.27
		E71T11 MIG WR FC 035 10 LB SP	SO59				
50	A10EF71T-1MNI	AMERICAN FILLER METALS E71T-1 TUBULAR WIRE .045 AFM E71T-1 44 LB SPOOL CARBON STEEL UNBAKED AFM71T-1 .045 X 44 LB SPOOL	44.00	LB	2.08 /LB	USD	91.52
			SO59				

Quote Amount :	402.60
Sales Tax :	0.00
Quote Total :	402.60

PLEASE REFER TO THIS QUOTATION WHEN ORDERING.

Terms and pricing are valid for a limited time only.

MATERIAL PRICING ONLY. SURCHARGES, TAXES & FREIGHT MAY NOT BE INCLUDED.

Comments :



AIRGAS USA, LLC  
945 YULEE ST  
TALLAHASSEE FL 32304-4403  
Phone : 850-576-2192  
Fax : 850-575-6250

**QUOTATION**

**Quote For :** 1235995  
GADSDEN TECHNICAL INSTITUTE  
ACCOUNTS PAYABLE  
201 MARTIN LUTHER KING JR BLVD  
QUINCY FL 32351-4415  
**Phone :** 850-875-8324

**Quote No. :** 2002709266  
**Date :** 03/31/2014  
**Account Manager :** William Strickland  
**Created By :** William Strickland  
**PO Number :**  
**PO Date :** 00000000  
**Release Number :**

**Sold To :** 1201843  
GADSDEN TECHNICAL INSTITUTE  
ACCOUNTS PAYABLE  
35 MARTIN LUTHER KING JR BLVD  
QUINCY FL 32351-4411  
**Phone :** 850-627-9651

Item	Part No.	Description	Order Qty	U/M	Unit Price	Currency	Ext Price
Customer Part No.	Customer Description	Plant	Vol				
10	RAD64052106	WELDING SCREEN REPLACEMENT RADNOR 14 MIL BLUE TRANSPARENT VINYL 6' X 6'	6.00	EA	25.779 /EA	USD	154.67
20	RAD64052104	WLD SCRNR REPL 14 MIL BLU VNL 6X6 WELDING SCREEN REPLACEMENT RADNOR 14 MIL ORANGE TRANSPARENT VINYL 6' X 6' WLD SCRNR REPL 14 MIL ORG VNL 6X6	6.00	EA	23.50 /EA	USD	141.00
				SO59			
				SO59			

<b>Quote Amount :</b>	295.67
<b>Sales Tax :</b>	0.00
<b>Quote Total :</b>	295.67

**PLEASE REFER TO THIS QUOTATION WHEN ORDERING.**

Terms and pricing are valid for a limited time only.

**MATERIAL PRICING ONLY. SURCHARGES, TAXES & FREIGHT MAY NOT BE INCLUDED.**

**Comments :**











# FLORIDA DEPARTMENT OF EDUCATION



STATE BOARD OF EDUCATION

---

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*Members*  
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JOHN A. COLÓN  
BARBARA S. FEINGOLD  
KATHLEEN SHANAHAN

Pam Stewart  
Commissioner of Education

Rod Duckworth  
Career and Adult Education

## MEMORANDUM

**TO:** Selected CTE Directors

**FROM:** Rod Duckworth

**DATE :** December 4, 2013

**SUBJECT:** **Program Expenditure Plans for Funds from Specific Appropriation 117A**

The 2013 General Appropriations Act (Chapter 2013-40, Laws of Florida) provided targeted career and technical education funds to selected school districts for the expansion, enhancement or development of program offerings that will lead to industry certifications in the following occupational areas:

- Automotive service technology
- Cyber security
- Cloud virtualization
- Advanced manufacturing
- Welding
- Federal Aviation Administration airframe mechanics
- Federal Aviation Administration power plant mechanics
- Pharmacy technicians
- Heating, ventilation and air conditioning technicians

The law also requires the submission of a report on how the district intends to expend the funds for the purposes specified in the appropriation.

Attached is an Excel spreadsheet with the information required for this report. Please note that the spreadsheet contains several tabs. Please complete this Excel spreadsheet and email your district's response by January 1, 2014, to Tara Goodman at [tara.goodman@fldoe.org](mailto:tara.goodman@fldoe.org).

Program Expenditure Plans  
December 4, 2013  
Page Two

If you have any questions regarding how to complete this submission, please contact Tara Goodman at 850-245-9002 or via email at [tara.goodman@fldoe.org](mailto:tara.goodman@fldoe.org).

RD/tgg

Attachments

Proj. 1190043

Function codes	5300	5300	6400	5300	5300	5300	
<b>Automotive tech OBJECT CODES</b>	Equipment > 641	Equipment < 642	Travel 330	Textbooks 520	Training CD's 620	Online training & service info 360	
<b>\$ amount</b>	10,028.60	7,557.21	728.31	1,330.70	1,006.92	975.00	
<b>Welding OBJECT CODES</b>	Equipment > 641	Equipment < 642	Travel 330	Textbooks 520			
<b>\$ amount</b>	19,100.08	778.77	936.00	900.00			
<b>TOTAL \$ AMOUNT</b>	<b>29,128.68</b>	<b>8335.98</b>	<b>1664.31</b>	<b>2230.70</b>	<b>1006.92</b>	<b>975.00</b>	<b>\$43,341.59</b>

## Attachment 1

## List of Funded Agencies from Specific Appropriation 117A, 2013 General Appropriation Act

No.	District	Appropriation
3	Bay	\$ 399,783
4	Bradford	\$ 102,847
6	Broward	\$ 3,155,243
8	Charlotte	\$ 224,404
9	Citrus	\$ 309,023
11	Collier	\$ 654,277
13	Miami-Dade	\$ 3,118,049
17	Escambia	\$ 370,738
18	Flagler	\$ 126,114
20	Gadsden	\$ 43,431
27	Hernando	\$ 1,500,000
29	Hillsborough	\$ 1,324,273
31	Indian River	\$ 84,161
35	Lake	\$ 1,360,000
36	Lee	\$ 818,051
37	Leon	\$ 708,766
41	Manatee	\$ 861,353
42	Marion	\$ 362,790
46	Okaloosa	\$ 360,989
48	Orange	\$ 2,309,321
49	Osceola	\$ 532,969
51	Pasco	\$ 150,489
52	Pinellas	\$ 1,160,387
53	Polk	\$ 747,150
55	Saint Johns	\$ 417,930
57	Santa Rosa	\$ 132,993
58	Sarasota	\$ 511,101
61	Suwannee	\$ 99,962
62	Taylor	\$ 110,353
66	Walton	\$ 86,910
67	Washington	\$ 340,664
	STATE	\$ 22,484,521

**Estimated Expenditure Detail**

**PROGRAM AREA: AUTOMOTIVE SERVICE TECHNOLOGY**

**Postsecondary Program Names and Numbers supported with the appropriation**

	Postsecondary Program Number	Postsecondary Program Name	Enhance (Y/N)	Expand(Y/N)	Develop (Y/N)	2013-14 Projected Enrollment (Headcount)	2014-15 Projected Enrollment (Headcount)	2013-14 Projected Enrollment (Instructional Hrs)	2014-15 Projected Enrollment (Instructional Hrs)
Program 1	1470608	Automotive Service Technology	Y	N	N	20	25	900	900
Program 2									
Program 3									
Program 4									
Program 5									
Program 6									
Program 7									
Program 8									

**LIST OF CERTIFICATIONS OFFERED TO STUDENTS**

DOE CODES (IF AVAILABLE)	CERTIFICATION TITLE
FLADA001	Certified Technician

**Program Expenditure Detail**

Cost Detail	13-14 Fund Allocation
Salaries & Benefits	
Purchased Services	
Energy Services	
Materials and Supplies	
Capital Outlay	\$ 20,216
Other Expenses	\$ 1,500
<b>TOTAL Expenses</b>	<b>\$ 21,716</b>

**Projected Recurring Funds to Support Expansion/Development**

Year 2 (2014/15)	
Year 3 (2015/16)	

Estimated Expenditure Detail

PROGRAM AREA: WELDING

Postsecondary Program Names and Numbers supported with the appropriation

	Postsecondary Program Number	Postsecondary Program Name	Enhance (Y/N)	Expand(Y/N)	Develop (Y/N)	2013-14 Projected Enrollment (Headcount)	2014-15 Projected Enrollment (Headcount)	2013-14 Projected Enrollment (Instructional Hrs)	2014-15 Projected Enrollment (Instructional Hrs)
Program 1	14080500	Applied Welding Technology	Y	N	N	15	20	900	900
Program 2									
Program 3									
Program 4									
Program 5									
Program 6									
Program 7									
Program 8									

LIST OF CERTIFICATIONS OFFERED TO STUDENTS

DOE CODES (IF AVAILABLE)	CERTIFICATION TITLE
NCCER061	NCCER Level 1
	AWS SENSE Level 1

Program Expenditure Detail

Cost Detail	13-14 Fund Allocation
Salaries & Benefits	
Purchased Services	
Energy Services	
Materials and Supplies	\$ 836
Capital Outlay	\$ 19,879
Other Expenses	\$ 1,000
TOTAL Expenses	\$ 21,715

Projected Recurring Funds to Support Expansion/Development

Year 2 (2014/15)	
Year 3 (2015/16)	

RPRT- F2B21  
 DIST- 20  
 FUND- 110

GADSDEN COUNTY SCHOOL BOARD  
 GENERAL FUND

TERMS - FINANCIAL INFORMATION SERIES  
 REVENUE LEDGER DETAIL  
 REQ-01 SEQ-S,R,L TOT-2 SRC-D  
 FROM-07/01/13 TO-04/15/14

PROCESSED- 04/15/14  
 TIME- 08:53

PAGE- 1  
 FY- 14

-ACCOUNT DIMENSIONS- REV PROJECT	-----TRANSACTION DESCRIPTION/SOURCE-----	----RECEIPT----		-----DEPOSIT-----		-----JOURNAL-----			A C T	TRANSACTION AMOUNT
		DATE	NUMBER	DATE	BANK NUMBER	DATE	NUMBER	PG		
315 1190043	EFT (7-26-13) CAREER TECHNICAL EDU.			07/26/13	0280 801503	072613	800015	03	C	3,619.00
	EFT(8-26-13)CAREER TECHNICAL EDUCATION			08/26/13	0280 803003	082613	800030	03	C	3,619.00
	EFT(9-26-13)CAREER TECHNICAL EDUCATION			09/26/13	0280 805103	092613	800051	03	C	3,619.00
	EFT(10-25-13)CAREER TECHNICAL EDUCATION			10/25/13	0280 807007	102513	800070	07	C	3,619.00
	EFT(11-26-13)CAREER TECHNICAL EDUCATION			11/26/13	0280 809103	112613	800091	03	C	3,619.00
	EFT(12-26-13)CAREER TECHNICAL ED			12/26/13	0280 811103	122613	800111	03	C	3,619.00
	EFT(1-24-14)CAREER TECHNICAL EDUCATION			01/24/14	0280 812906	012414	800129	06	C	3,619.00
	BUDGET AMD #9					022514	400022	05	B	43,341.59
	EFT(2-26-14)CAREER TECHNICAL EDUCATION			02/26/14	0280 815210	022614	800152	10	C	3,619.00
	EFT(3-26-14)CAREER TECH ED			03/26/14	0280 817105	032614	800171	05	C	3,619.00
315 *	* 43,341.59 BDG	.00	ACR	.00	COL	32,571.00	U/C	32,571.00	T/C	
* *	* 43,341.59 BDG	.00	ACR	.00	COL	32,571.00	U/C	32,571.00	T/C	





DATE **SFS**  
8/16/13

THE SCHOOL BOARD OF GADSDEN COUNTY

PURCHASE ORDER NO.

35 MARTIN LUTHER KING, JR., BLVD. QUINCY, FLORIDA 32351  
PHONE (850) 627-9651 FAX (850) 627-2760

185503

www.gcps.k12.fl.us

FL SALES TAX EXEMPTION # 85-8012621915C-2

FEDERAL ID # 59-6000615

**VENDOR F B11840**

**SHIP TO THIS ADDRESS**

BROWNS REFRIGERATION & EQUIPMENT CO., INC.  
P. O. BOX 5801  
Tallahassee FL 32314

SCHOOL FOOD SERVICE—SCHOOL BD OF GADSDEN CO.  
35 Martin Luther King Jr. Blvd  
Quincy FL 32351

*Change Order: 4/22/14*

PRINCIPAL / SUPERVISOR

COMPTROLLER

SUPERINTENDENT

*Paula Milton*

*Bonnie Scott*

*[Handwritten signature and scribble]*

QUANTITY

PRODUCT NO.

DESCRIPTION

UNIT PRICE

TOTAL

Piggyback off: LEON COUNTY SCHOOL BOARD (Nutrition Service)

RFP No.305-2013 PM & REPAIR OF WALK IN OR REACH IN COOLERS DIST WIDE

see attached recommendation letter and cost proposal form(s) - pre-qualified vendor(s)

BLANKET PURCHASE ORDER FOR PM & REPAIRS AS NEEDED:

1

\$3,000.00

*Change Order due to Emergency repairs to prevent fines, food loss & health related issues + 5,000.00*

DATE RECEIVED \_\_\_\_\_ BY \_\_\_\_\_

DATE APPROVED \_\_\_\_\_ BY \_\_\_\_\_

DATE FINANCE \_\_\_\_\_ BY \_\_\_\_\_

TOTAL **8,000.00**

PAY TERMS: NET 30

- All correspondence/shipments must reflect the PO number. For prompt payment mail invoice to Accounts Payable address above.
- If box checked and you accept this PO, goods/services & invoice must be received by the District no later than June 15 of the CURRENT YEAR. NO FINANCIAL OBLIGATION continues after June 30 of the CURRENT YEAR if the box is checked. This PO is void after one year.
- Notice to Vendor/Contractor: By acceptance of the contract/order in excess of \$10,000 and involving Federal Funds, the Vendor/Contractor agrees to comply with Title 34 Section 80.36 Code of Federal Regulations. Termination for cause and for convenience by the grantee or sub-grantee including the manner by which it will be affected and the basis for settlement will be decided by the School Board of Gadsden County. In addition, the Vendor/Contractor agrees to comply with Florida Statute 257.36 regarding retention of records for 5 years.

DISTRIBUTION TO BE COMPLETED BY ORIGINATOR						FINANCE DEPT USE EXPENDITURE
FUND	FUNCTION	OBJECT	CENTER	PROJECT	PROGRAM	
						<b>8,000.00</b>
410	7600	350	<del>9004</del>	0750	0713	<del>3,000.00</del>
410	7600	350	0141	0704		700.00
410	7600	350	0071	0709		2222.60
410	7600	350	9004	0750		2077.40





DIST: 20 FY: 14 12. REQUEST/PURCH ORDER SCAN TIME: 09:59

TYPE	CNTR	FND	---VENDOR--	E S I	FR--ISSUE--TO	START#		
P	_____	_____	V G01060000	---	_____	_____		
NUM-PO	REQ-NUM-	DATE	CNTR-	VENDOR--	ESI	ORIGINAL	LIQ/PAID	CURRENT
185288	00001111	070113	9001	VG01060000	YBY	226,982.36	97,360.94	129,621.42

\* SUB 226,982.36 97,360.94 129,621.42

1000 RECORDS READ. ENTER TO CONTINUE PF3 FOR ACCOUNT NUM SCAN TERML: 8AJZ  
4-© § 1 Sess-1 199.44.72.2 TW1H0323 4/9

*R. Smith*

SUMMARY SHEET

RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA

**AGENDA ITEM NO.** 8d

**DATE OF SCHOOL BOARD MEETING:** April 22, 2014

**TITLE OF AGENDA ITEM:** Affiliation Agreement between Gadsden County School District-East Gadsden High School and River Chase Care Center

**DIVISION:** Secondary Education

\_\_\_\_\_ This is a CONTINUATION of a current project, grant, etc.

**PURPOSE AND SUMMARY OF ITEM:**  
(Type and Double Space)

This is a mutual agreement between the Administration of River Chase Care Center and Gadsden County School District – East Gadsden High School, that the Health Agency will accept students from the school for the opportunity to learn through observation of the nurse, direct service workers and/or other professionals in the delivery of basic care to clients in the ordinary performance of duties. The students will perform patient care duties and complete applicable documentation under the supervision of their clinical instructor.

**FUND SOURCE:** FEFP

**AMOUNT:** NA

**PREPARED BY:** Sylvia R. Jackson, Ed.D.

*SJR*

**POSITION:** K-12 Director

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INTERNAL INSTRUCTIONS TO BE COMPLETED BY PREPARER

\_\_\_ 1 \_\_\_ Number of ORIGINAL SIGNATURES NEEDED by preparer.

SUPERINTENDENT'S SIGNATURE: page(s) numbered 6

CHAIRMAN'S SIGNATURE: page(s) numbered \_\_\_\_\_

**PARTICIPATING AGENCY AGREEMENT**

**Between**

**GADSDEN COUNTY SCHOOL DISTRICT (EAST GADSDEN HIGH)**

**And**

**NF RIVER CHASE, LLC (dba)**

**For**

**HEALTH EDUCATION PROGRAMS**

**Affiliation Agreement Between  
Gadsden County School District - East Gadsden High School  
And River Chase Care Center**

**I. PARTICIPATING AGENCIES:**

The participating agencies of this agreement are Gadsden County School District (East Gadsden High) and Riverchase Care Center.

The word Health Agency used herein shall mean the Riverchase Care Center.

**II. STATEMENT OF AGREEMENT:**

This is a mutual agreement between the Administration of Riverchase Care Center and Gadsden County School District (East Gadsden High), that the Health Agency will accept students from the school for the opportunity to learn through observation of the nurse, direct service workers and/or other professionals in the delivery of basic care to clients in the ordinary performance of their duties. In accordance to applicable Health Agency policies and/or procedures, the students will perform patient care duties and complete applicable documentation under the supervision of their clinical instructor, such as record keeping when appropriate. Students may also assist with duties by employees of said facility as designated and/or approved by their clinical instructor.

**III. GENERAL PROVISIONS OF THE AGREEMENT:**

1. The education of the student shall be the primary purpose of the instructional program.
2. The school shall be responsible for the education of students.
3. The Health Agency agrees to allow students to observe and participate in the delivery of basic care by employees of said facility.
4. The faculty of the school shall be responsible for the student to meet guidelines of the State Department of Education, State Board of Nursing, and the Southern Association of Colleges and Schools Commission of Occupation Education Institutions.
5. The school agrees to comply with the established policies and practices of the Health Agency in so far as these relate to the approved curriculum.



**IV. THE SCHOOL AGREES:**

1. To maintain standards recommended in the rules and regulations of the Florida State Board of Nursing, the State Department of Education, and the Southern Association of Colleges and Schools Commission of Occupational Education Institutions. These include provisions for physical examinations and certain immunizations as required by Florida law prior to Health Agency experience.
2. To employ current licensed registered nurse faculty who meet Florida Department of Education Teacher Certification requirements and the State Board of Nursing requirements. This faculty shall be responsible for determining the philosophy and the objectives of the Health Education programs and developing curriculum.
3. To maintain liability insurance on all students involved in clinical training. The faculty shall be responsible for:
  - a. Selecting student assignments in cooperation with participating agency personnel and the supervision of students in their learning experience.
  - b. Planning for concurrent related instruction (informal and formal) as needed to meet the objectives of the program. This instruction will be scheduled during the regular school day.
  - c. Maintaining individual records of class, clinical instruction and practice, and evaluation of student competency and health.
  - d. Preparing a clinical rotation plan to be used for practical experience.
  - e. Interpreting to Health Agency and other personnel the roles of the students within the Health Occupations Education Program.

**V. THE HEALTH AGENCY AGREES:**

1. To make Health Agency facilities available to the school's faculty and students for planning clinical learning experiences included in the curriculum.
2. To hold meetings with representatives from the nursing educational program affiliated with the Health Agency for the purpose of cooperative planning.
3. To share and assist in the supervision of the students, particularly in restricted areas.

4. Both parties agree in case of illness or accidents incurred while on duty at the facility, payment for services rendered will be the sole responsibility of the individual's parent who receives the treatment.

**VI. SCHOOL POLICIES:**

1. The educational program shall consist of a minimum of (35) hours per week of classroom instruction, laboratory experience and experience in selected learning situations in clinical facilities. The division and arrangement of time to include the theoretical and clinical learning experiences shall be determined by the faculty and based upon the needs of the students for specific learning experiences to meet objectives of the instructional program. Should it be desirable for students to have the clinical experience during hours other than those of the regular school day, the schedule will be planned as part of the curriculum.

If students are assigned for clinical outside the regular school day, a faculty member will provide a rotation plan for Health Agency.

2. The minimum school day is (7) hours, Monday through Friday.
3. Students will be assigned for Health Agency experience on scheduled school days.
4. Students will be given holidays as provided for in the regular school calendar.

**VII. REQUEST FOR WITHDRAWAL OF STUDENT:**

The participating Health Agency has the right to request the school to withdraw any student from its facilities whose conduct during assigned hours is not in accordance with acceptable standards of performance. The school may, at any time, withdraw a student whose academic progress, conduct, or clinical work does not meet the standards of the school or the participating Health Agency. The final decision to withdraw a student is the responsibility of the school administration.

**VIII. FINAL AUTHORITY:**

The Health Agency will retain all administrative authority for removal of a student from their facility.

**IX. DISCONTINUANCE OF AGREEMENT:**

If either party to this agreement wishes to withdraw, it is understood that at least 30 days notice shall be given, provided that students currently enrolled in the program shall be permitted to complete the course.

**X. MODIFICATION OF THE AGREEMENT:**

Modification of this agreement requires mutual written consent of both parties.

A memorandum noting the modification shall be attached to this agreement, including the date and the signature of the parties agreeing to the modification.

**XI. RENEWAL OF AGREEMENT:**

This agreement shall expire three (3) years from the date signed and shall be renewable as agreed upon by the participating parties.

**XII. COPIES OF THIS AGREEMENT:**

Authenticated copies of this agreement shall be provided to:

1. Florida Board of Nursing
2. Administrator of the participating agency (Riverchase Care Center)
3. The Gadsden District Schools Director of Career and Technical Education
4. Health Science Academy Coordinator
5. Health Science Academy Instructor

XIII. The aforementioned provisions are accepted by all parties as witnessed by the signatures below:

**PARTICIPATING AGENCY ENDORSEMENT**

\_\_\_\_\_  
Signature, Executive Director of Riverchase  
Care Center

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Executive Director of Riverchase  
Care Center

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature, Director of Nursing (if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Director of Nursing (if applicable)

\_\_\_\_\_  
Date

**GADSDEN COUNTY SCHOOL DISTRICT ENDORSEMENT**

\_\_\_\_\_  
Signature, Superintendent of Schools

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Superintendent of Schools

\_\_\_\_\_  
Date

Both parties shall indemnify and hold each other harmless from any liability of their respective agents or employees from any cause arising from or relating to the parties performance under this agreement. Both parties to initial:

\_\_\_\_\_ Riverchase Care Center

\_\_\_\_\_ Gadsden County School District

SUMMARY SHEET

RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA

**AGENDA ITEM NO.** 8e

**DATE OF SCHOOL BOARD MEETING:** April 22, 2014

**TITLE OF AGENDA ITEM:** Affiliation Agreement between the School Board of Gadsden County and Tallahassee Medical Center, Inc. d/b/a Capital Regional Medical Center

**DIVISION:** Secondary Education

\_\_\_\_\_ This is a CONTINUATION of a current project, grant, etc.

**PURPOSE AND SUMMARY OF ITEM:**

(Type and Double Space)

This is a mutual agreement between The School Board of Gadsden County and Tallahassee Medical Center, Inc. d/b/a Capital Regional Medical Center. The hospital agrees to make its facility available to the school to provide its students who are enrolled in a certificate program in the field of Certified Nursing Assistant (CNA) with clinical learning experiences through the application of knowledge and skills in acute patient-centered situations.

**FUND SOURCE:** FEFP

**AMOUNT:** NA

**PREPARED BY:** Sylvia R. Jackson, Ed.D.

**POSITION:** K-12 Director

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INTERNAL INSTRUCTIONS TO BE COMPLETED BY PREPARER

\_\_\_\_\_ 1 Number of ORIGINAL SIGNATURES NEEDED by preparer.

SUPERINTENDENT'S SIGNATURE: page(s) numbered 8

CHAIRMAN'S SIGNATURE: page(s) numbered \_\_\_\_\_

## SCHOOL AFFILIATION AGREEMENT

THIS AFFILIATION AGREEMENT (the "Agreement") is made as of this July 1, 2014, by and between The School Board of Gadsden County, hereinafter referred to as "School" and Tallahassee Medical Center, Inc. d/b/a Capital Regional Medical Center, hereinafter referred to as "Hospital".

### WITNESSETH:

WHEREAS, School offers to enrolled students in a certificate program in the field of Certified Nursing Assistant (CNA); and

WHEREAS, Hospital operates a comprehensive acute-care medical-surgical facility; and

WHEREAS, School desires to provide to its students a clinical learning experience through the application of knowledge and skills in actual patient-centered situations in a health care facility; and

WHEREAS, Hospital has agreed to make its facility available to School for such purposes.

NOW, THEREFORE, in consideration of the mutual promises contained herein, the parties hereby agree as follows:

#### 1. RESPONSIBILITIES OF SCHOOL.

(a) **Clinical Program.** School shall be responsible for the implementation and operation of the clinical component of its program at Hospital ("Program"), which Program shall be approved in advance by Hospital. Such responsibilities shall include, but not be limited to, the following:

- (i) Orientation of students to the clinical experience at Hospital;
- (ii) Provision of classroom theory and practical instruction to students prior to their clinical assignments at Hospital;
- (iii) Preparation of student/patient assignments and rotation plans for each student and coordination of same with Hospital;
- (iv) Continuing oral and written communication with Hospital regarding student performance and evaluation, absences and assignments of students, and other pertinent information;
- (v) Supervision of students and their performance at Hospital;
- (vi) Participation, with the students, in Hospital's Quality Assurance and related programs;
- (vii) Performance of such other duties as may from time to time be agreed to between School and Hospital;
- (viii) Provide adequate documentation attesting to competency of each instructor.

All students, faculty, employees, agents and representatives of School participating in the Program at Hospital (the "Program Participants") shall be accountable to the Hospital's Administrator.

- (b) **Student Statements.** School shall require each Program Participant to sign a Statement of Responsibility, in the form attached hereto as Exhibit A, and a Statement of Confidentiality and Security, in the form attached hereto as Exhibit B.
- (c) **Insurance.** School shall obtain and maintain, or shall require each individual Program Participant to obtain and maintain, occurrence-type general and professional liability insurance coverage in amounts not less than one million dollars (\$1,000,000.00) per occurrence and three million dollars (\$3,000,000.00) annual aggregate per Program Participant, with insurance carriers or self insurance programs approved by Hospital and covering the acts and omissions of Program Participants. If such coverage is provided on a claims-made basis, then such insurance shall continue throughout the term of this Agreement and upon the termination of this Agreement, or the expiration or cancellation of the insurance, School shall purchase, or shall require each individual Program Participant to purchase, tail coverage for a period of three years after the termination of this Agreement or the expiration or cancellation of the claim-made coverage (said tail coverage shall be in amounts and type equivalent to the claims-made coverage). School shall further, at its expense, obtain and maintain workers' compensation insurance and unemployment insurance for School employees assigned to Hospital. For all insurance required by this Paragraph 1(c), School shall require the insurance carrier notify Hospital at least thirty (30) days in advance of any cancellation or modification of such insurance policy and shall provide to Hospital, upon request, certificates of insurance evidencing the above coverage and renewals thereof.
- (d) **Health of Program Participants.** All Program Participants shall pass a medical examination acceptable to Hospital prior to their participation in the Program at Hospital at least once a year or as otherwise required by Florida law. School and/or the Program Participant shall be responsible for arranging for the Program Participant's medical care and/or treatment, if necessary, including transportation in case of illness or injury while participating in the Program at Hospital. In no event shall Hospital be financially or otherwise responsible for said medical care and treatment. Program Participants will present the following health records on the first day of their educational experience at Hospital (Program Participants will not be allowed to commence experiences until all records):
- (i) Tuberculin skin test within the past 12 months or documentation as a previous positive reactor; and
  - (ii) Proof of Rubella and Rubeola immunity by positive antibody titers or 2 doses of MMR; and
  - (iii) Varicella immunity, by positive history of chickenpox or proof of Varicella immunization; and
  - (iv) Proof of Hepatitis B immunization or declination of vaccine, if patient contact is anticipated.
  - (v) Proof of Influenza vaccination during the Flu season, October 1 to March 31, (or dates defined by CDC), or a signed Declination Form.
  - (vi) In addition, evidence of a Negative 10-panel drug screen, performed upon admission to the school, or, closer to the start time of clinical rotations, will be provided to the hospital.

- (e) **Dress Code; Breaks.** School shall require the students to dress in accordance with dress and personal appearance standards approved by School. Such standards shall be in accordance with Hospital's standards regarding same. All Program Participants shall remain on the Hospital premises for breaks, including meals. Program Participants shall pay for their own meals at Hospital.
- (f) **Performance.** All faculty provided by School shall be duly licensed, certified or otherwise qualified to participate in the Program at Hospital. School shall have a specially designated staff for the performance of the services specified herein. School and all Program Participants shall perform its and their duties and services hereunder in accordance with all relevant local, state, and federal laws and shall comply with the standards and guidelines of all applicable accrediting bodies and the bylaws, rules and regulations of Hospital and any rules and regulations of School as may be in effect from time to time. Neither School nor any Program Participant shall interfere with or adversely affect the operation of Hospital or the performance of services therein.
- (g) **Background Checks.** School represents that it will timely conduct (or will timely have conducted) a background check on each and every Program Participant at the Hospital. Said background check shall include, at a minimum, the following:
- (i) Social Security Number Verification;
  - (ii) Criminal Search (7 years or up to 5 criminal searches);
  - (iii) Employment Verification to include reason for separation and eligibility for re-employment for each employer for 7 years (*not required for students younger than 21 years of age*);
  - (iv) Violent Sexual Offender and Predator Registry Search;
  - (v) HHS/OIG List of Excluded Individuals/Entities;
  - (vi) GSA List of Parties Excluded from Federal Programs;
  - (vii) Education verification (Highest Degree Received)
  - (viii) U.S. Treasury, Office of Foreign Assets Control (OFAC), List of Specially Designated Nationals (SDN);
  - (ix) Applicable State Exclusion List, if one.

The background check for Program Participants who are licensed or certified caregivers shall include the above, and in addition, shall include the following:

- (i) Education verification (highest level);
- (ii) Professional License Verification;
- (iii) Certification & Designations Check;
- (iv) Professional Disciplinary Action Search;



(v) Department of Motor Vehicle Driving History, based on responsibilities;

(vi) Consumer Credit Report, based on responsibilities.

School shall provide an *Attestation of Satisfactory Background Investigation and Drug and Alcohol Report* in the form attached hereto as the Exhibit C prior to each student and staff/faculty member's participation in the Program at the Hospital. Should the background check disclose adverse information as to any School's representative, School shall immediately remove said School's representative from the Program.

(h) **Drug and Alcohol Testing.** School represents that it will timely conduct (or will have timely conducted) a drug and alcohol test on each and every Program Participant.

(i) To ensure the accuracy and fairness of the testing program, all collection and testing will be conducted pursuant to guidelines established by the Medical Review Officers of the testing facility and, if applicable, in accordance with Substance Abuse and Mental Health Services Administration (SAMHSA) guidelines; a confirmatory test; the opportunity for a split sample; review by an MRO, including the opportunity for employees or students who test positive to provide a legitimate medical explanation, such as a physician's prescription, for the positive result; and a documented chain of custody.

(ii) Substances tested prior to placement at Hospital must at a minimum include amphetamines, barbiturates, benzodiazepines, opiates, marijuana, codeine, and cocaine. Reasonable suspicion and reportable accident testing should include amphetamines, barbiturates, benzodiazepines, carisoprodol, opiates, fentanyl analogues, methadone, meperidine, marijuana, and cocaine.

(i) **School Status.** School represents and warrants to Hospital that the School and its Program Participants participating hereunder: (i) are not currently excluded, debarred, or otherwise ineligible to participate in the Federal health care programs as defined in 42 U.S.C. Section 1320a-7b(f) (the "Federal health care programs"); (ii) are not convicted of a criminal offense related to the provision of health care items or services but has not yet been excluded, debarred or otherwise declared ineligible to participate in the Federal health care programs, and (iii) are not under investigation or otherwise aware of any circumstances which may result in the School or a Program Participant being excluded from participation in the Federal health care programs. This shall be an ongoing representation and warranty during the term of this Agreement and the School shall immediately notify Hospital of any change in status of the representation and warranty set forth in this section. Any breach of this Paragraph 1(h) shall give Hospital the right to immediately terminate this Agreement for cause.

## 2. RESPONSIBILITIES OF HOSPITAL.

(a) Hospital shall accept the Program Participants assigned to the Program by School and reasonably cooperate in the orientation of all Program Participants to Hospital. Hospital shall provide reasonable opportunities for such Program Participants, who shall be supervised by School and Hospital, to observe and assist in various aspects of patient care to the extent permitted by applicable law and without disruption of patient care or Hospital operations. Hospital shall coordinate School's rotation and assignment schedule with its own schedule and those of other educational institutions. Hospital shall at all times retain ultimate control of the Hospital and responsibility for patient care.

(b) Upon the request of School, Hospital shall assist School in the evaluation of each Program Participant's performance in the Program. However, School shall at all times remain solely

responsible for the evaluation and grading of Program Participants.

3. **MUTUAL RESPONSIBILITIES.** The parties shall cooperate to fulfill the following mutual responsibilities:

- (a) Students shall be treated as trainees who have no expectation of receiving compensation or future employment from the Hospital or the School.
- (b) Any courtesy appointments to faculty or staff by either the School or Hospital shall be without entitlement of the individual to compensation or benefits for the appointed party.

4. **WITHDRAWAL OF PROGRAM PARTICIPANTS.**

Hospital may request School to withdraw or dismiss a student or other Program Participant from the Program at Hospital when his or her clinical performance is unsatisfactory to Hospital or his or her behavior, in Hospital's discretion, is disruptive or detrimental to Hospital and/or its patients. In such event, said Program Participant's participation in the Program at Hospital shall immediately cease. It is understood that only School can dismiss the Program Participant from the Program.

5. **INDEPENDENT CONTRACTOR; NO OTHER BENEFICIARIES.**

The parties hereby acknowledge that they are independent contractors, and neither the School nor any of its agents, representatives, Program Participants, or employees shall be considered agents, representatives, or employees of Hospital. In no event shall this Agreement be construed as establishing a partnership or joint venture or similar relationship between the parties hereto. School shall be liable for its own debts, obligations, acts and omissions, including the payment of all required withholding, social security and other taxes or benefits. No Program Participant shall look to Hospital for any salaries, insurance or other benefits. No Program Participant or other third person is entitled to, and shall not, receive any rights under this Agreement.

6. **NON-DISCRIMINATION.**

There shall be no discrimination on the basis of race, national origin, religion, creed, sex, age, veteran status, or handicap in either the selection of students for participation in the Program, or as to any aspect of the clinical training; provided, however, that with respect to handicap, the handicap must not be such as would, even with reasonable accommodation, in and of itself preclude the Program Participant's effective participation in the Program.

7. **INDEMNIFICATION.**

To the extent permitted by applicable law and without waiving any defenses, School shall indemnify and hold harmless Hospital and its officers, medical and nursing staff, representatives and employees from and against all liabilities, claims, damages and expenses, including reasonable attorneys' fees, relating to or arising out of any act or omission of the School or any of its faculty, Program Participants, agents, representatives and employees under this Agreement, including, but not limited to, claims for personal injury, professional liability, or with respect to the failure to make proper payment of required taxes, withholding, employee benefits or statutory or other entitlements. Hospital shall indemnify School against liabilities, claims, damages and expenses, including reasonable attorneys' fees, incurred by School in defending or compromising actions brought against School arising out of or related to the Hospital's performance of duties hereunder.

8. **CONFIDENTIALITY.**

School and its agents, Program Participants, faculty, representatives and employees agree to keep strictly confidential and hold in trust all confidential information of Hospital and/or its patients and not

disclose or reveal any confidential information to any third party without the express prior written consent of Hospital. School shall not disclose the terms of this Agreement to any person who is not a party to this Agreement, except as required by law or as authorized by Hospital. Unauthorized disclosure of confidential information or of the terms of this Agreement shall be a material breach of this Agreement and shall provide Hospital with the option of pursuing remedies for breach, or, notwithstanding any other provision of this Agreement, immediately terminating this Agreement upon written notice to School.

**9. TERM; TERMINATION.**

- (a) The initial term of this Agreement shall be five (5) year(s), commencing on January 1, 2014 and ending on December 31, 2019.
- (b) Except as otherwise provided herein, either party may terminate this Agreement at any time without cause upon at least thirty (30) days prior written notice, provided that all students currently enrolled in the Program at Hospital at the time of notice of termination shall be given the opportunity to complete their clinical Program at Hospital, such completion not to exceed six (6) months.

**10. ENTIRE AGREEMENT.**

This Agreement and its accompanying Exhibits set forth the entire Agreement with respect to the subject matter hereof and supersedes all prior agreements, oral or written, and all other communications between the parties relating to such subject matter. This Agreement may not be amended or modified except by mutual written agreement. All continuing covenants, duties and obligations herein shall survive the expiration or earlier termination of this Agreement.

**11. SEVERABILITY.**

If any provision of this Agreement is held to be invalid or unenforceable for any reason, this Agreement shall remain in full force and effect in accordance with its terms disregarding such unenforceable or invalid provision.

**12. CAPTIONS.**

The captions contained herein are used solely for convenience and shall not be deemed to define or limit the provisions of this Agreement.

**13. NO WAIVER.**

Any failure of a party to enforce that party's right under any provision of this Agreement shall not be construed or act as a waiver of said party's subsequent right to enforce any of the provisions contained herein.

**14. GOVERNING LAW.**

This Agreement shall be governed and construed in accordance with the laws of the State of Florida.

**15. ASSIGNMENT; BINDING EFFECT.**

School may not assign or transfer any of its rights, duties or obligations under this Agreement, in whole or in part, without the prior written consent of Hospital. This Agreement shall inure to the benefit of, and be binding upon, the parties hereto and their respective successors and permitted assigns.

16. NOTICES.

All notices hereunder by either party to the other shall be in writing, delivered personally, by certified or registered mail, return receipt requested, or by overnight courier, and shall be deemed to have been duly given when delivered personally or when deposited in the United States mail, postage prepaid, addressed as follows:

If to Hospital: Tallahassee Medical Center, Inc. d/b/a Capital Regional Medical Center  
2626 Capital Medical Boulevard  
Tallahassee, FL 32308  
**Attention: Chief Executive Officer**

Copy to: HCA  
One Park Plaza, Bldg. 1, 2-East  
Nashville, TN 37203  
**Attention: Operations Counsel**

If to School: Gadsden County School Board  
East Gadsden High School – Science Academy  
27001 Blue Star Highway  
Havana, Florida 32333  
Attn: Curtis Richardson

or to such other persons or places as either party may from time to time designate by written notice to the other.

17. EXECUTION OF AGREEMENT.

This Agreement shall not become effective or in force until all of the below named parties have fully executed this Agreement.

18. HIPAA Requirements.

To the extent applicable to this Agreement, the School agrees to comply with the Health Information Technology for Economic and Clinical Health Act of 2009 (the "HITECH ACT"), the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996, as codified at 42 USC § 1320d through d-8 ("HIPAA") and any current and future regulations promulgated under either the HITECH Act or HIPAA including without limitation the federal privacy regulations contained in 45 C.F.R. Parts 160 and 164 (the "Federal Privacy Regulations"), the federal security standards contained in 45 C.F.R. Parts 160, 162 and 164 (the "Federal Security Regulations") and the federal standards for electronic Transactions Regulations), all as may be amended from time to time, and all collectively referred to herein as "HIPAA Requirements.". The School further agrees not to use or disclose any Protected Health Information (as defined in 45 C.F.R. § 164.501) or Individually Identifiable Health Information (as defined in 42 USC § 1320d), other than as permitted by HIPAA Requirements and the terms of this Agreement. The School agrees to enter into any further agreements as necessary to facilitate compliance with HIPAA Requirements.

The School shall direct its Program Participants to comply with the policies and procedures of Hospital, including those governing the use and disclosure of individually identifiable health information under federal law, specifically 45 CFR parts 160 and 164. Solely for the purpose of defining the Program Participants' role in relation to the use and disclosure of Hospital's protected health information, the Program Participants are defined as members of the Hospital's workforce, as that term is defined by 45 CFR 160.103, when engaged in activities pursuant to this Agreement. However, the Program Participants are not and shall not be considered to be employees of Hospital.

**19. COMPLIANCE WITH HOSPITAL POLICIES AND PROCEDURES.**

School and Program Participants shall comply with Hospital Policies and Procedures to the extent such Hospital Policies and Procedures do not conflict with the terms of this Agreement.

**20. NO REQUIREMENT TO REFER.**

Nothing in this Agreement requires or obligates School to admit or cause the admittance of a patient to Hospital or to use Hospital's services. None of the benefits granted pursuant to this Agreement is conditioned on any requirement or expectation that the parties make referrals to, be in a position to make or influence referrals to, or otherwise generate business for the other party. Neither party is restricted from referring any services to, or otherwise generating any business for, any other entity of their choosing.

THE PARTIES HERETO have executed this Agreement as of the day and year first above written.

Gadsden County School Board - East Gadsden H.S.  
[Name of School]

By: \_\_\_\_\_

Title: \_\_\_\_\_

Tallahassee Medical Center, Inc. d/b/a  
Capital Regional Medical Center  
[Hospital]

By: \_\_\_\_\_

Title: \_\_\_\_\_

## EXHIBIT A

### STATEMENT OF RESPONSIBILITY

For and in consideration of the benefit provided the undersigned in the form of experience in a clinical setting at Capital Regional Medical Center ("Hospital"), the undersigned and his/her heirs, successors and/or assigns do hereby covenant and agree to assume all risks and be solely responsible for any injury or loss sustained by the undersigned while participating in the Program operated by: Gadsden County School Board ("School") at Hospital unless such injury or loss arises solely out of Hospital's gross negligence or willful misconduct.

\_\_\_\_\_  
Signature of Program Participant/Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Legal Guardian  
If Program Participant is under 18 / Print Name

\_\_\_\_\_  
Date

## EXHIBIT B

### Confidentiality and Security Agreement

I understand that the facility or business entity (the "Company") for which I work, volunteer or provide services manages health information as part of its mission to treat patients. Further, I understand that the Company has a legal and ethical responsibility to safeguard the privacy of all patients and to protect the confidentiality of their patients' health information. Additionally, the Company must assure the confidentiality of its human resources, payroll, fiscal, research, internal reporting, strategic planning information, or any information that contains Social Security numbers, health insurance claim numbers, passwords, PINs, encryption keys, credit card or other financial account numbers (collectively, with patient identifiable health information, "Confidential Information").

In the course of my employment/assignment at the Company, I understand that I may come into the possession of this type of Confidential Information. I will access and use this information only when it is necessary to perform my job related duties in accordance with the Company's Privacy and Security Policies, which are available on the Company intranet (on the Security Page) and the Internet (under Ethics & Compliance). I further understand that I must sign and comply with this Agreement in order to obtain authorization for access to Confidential Information or Company systems.

#### General Rules:

1. I will act in the best interest of the Company and in accordance with its Code of Conduct at all times during my relationship with the Company.
2. I understand that I should have no expectation of privacy when using Company information systems. The Company may log, access, review, and otherwise utilize information stored on or passing through its systems, including email, in order to manage systems and enforce security.
3. I understand that violation of this Agreement may result in disciplinary action, up to and including termination of employment, suspension, and loss of privileges, and/or termination of authorization to work within the Company, in accordance with the Company's policies.

#### Protecting Confidential Information:

1. I understand that any Confidential Information, regardless of medium (paper, verbal, electronic, image or any other), is not to be disclosed or discussed with anyone outside those supervising, sponsoring or directly related to the learning activity.
2. I will not disclose or discuss any Confidential Information with others, including friends or family, who do not have a need to know it. I will not take media or documents containing Confidential Information home with me unless specifically authorized to do so as part of my job. Case presentation material will be used in accordance with Facility policies.
3. I will not publish or disclose any Confidential Information to others using personal email, or to any Internet sites, or through Internet blogs or sites such as Facebook or Twitter. I will only use such communication methods when explicitly authorized to do so in support of Company business and within the permitted uses of Confidential Information as governed by regulations such as HIPAA.
4. I will not in any way divulge, copy, release, sell, loan, alter, or destroy any Confidential Information except as properly authorized. I will only reuse or destroy media in accordance with Company Information Security Standards and Company record retention policy.
5. In the course of treating patients, I may need to orally communicate health information to or about patients. While I understand that my first priority is treating patients, I will take reasonable safeguards to protect conversations from unauthorized listeners. Whether at the

School or at the Facility, such safeguards include, but are not limited to: lowering my voice or using private rooms or areas (not hallways, cafeterias or elevators) where available.

6. I will not make any unauthorized transmissions, inquiries, modifications, or purgings of Confidential Information. I will not access data on patients for whom I have no responsibilities or a need-to-know the content of the PHI concerning those patients.
7. I will not transmit Confidential Information outside the Company network unless I am specifically authorized to do so as part of my job responsibilities. If I do transmit Confidential Information outside of the Company using email or other electronic communication methods, I will ensure that the Information is encrypted according to Company Information Security Standards.

Following Appropriate Access:

1. I will only access or use systems or devices I am officially authorized to access, and will not demonstrate the operation or function of systems or devices to unauthorized individuals.
2. I will only access software systems to review patient records or Company information when I have a business need to know, as well as any necessary consent. By accessing a patient's record or Company information, I am affirmatively representing to the Company at the time of each access that I have the requisite business need to know and appropriate consent, and the Company may rely on that representation in granting such access to me.

Using Portable Devices and Removable Media:

1. I will not copy or store Confidential Information on removable media or portable devices such as laptops, personal digital assistants (PDAs), cell phones, CDs, thumb drives, external hard drives, etc., unless specifically required to do so by my job. If I do copy or store Confidential Information on removable media, I will encrypt the information while it is on the media according to Company Information Security Standards
2. I understand that any mobile device (Smart phone, PDA, etc.) that synchronizes company data (e.g., Company email) may contain Confidential Information and as a result, must be protected. Because of this, I understand and agree that the Company has the right to:
  - a. Require the use of only encryption capable devices.
  - b. Prohibit data synchronization to devices that are not encryption capable or do not support the required security controls.
  - c. Implement encryption and apply other necessary security controls (such as an access PIN and automatic locking) on any mobile device that synchronizes company data regardless of it being a Company or personally owned device.
  - d. Remotely "wipe" any synchronized device that: has been lost, stolen or belongs to a terminated employee or affiliated partner.
  - e. Restrict access to any mobile application that poses a security risk to the Company network.

Doing My Part – Personal Security:

1. I understand that I will be assigned a unique identifier (e.g., 3-4 User ID) to track my access and use of Confidential Information and that the identifier is associated with my personal data provided as part of the initial and/or periodic credentialing and/or employment verification processes.
2. I will:
  - a. Use only my officially assigned User-ID and password (and/or token (e.g., SecurID card)).
  - b. Use only approved licensed software.
  - c. Use a device with virus protection software.



3. I will never:
  - a. Disclose passwords, PINs, or access codes.
  - b. Use tools or techniques to break/exploit security measures.
  - c. Connect unauthorized systems or devices to the Company network.
4. I will practice good workstation security measures such as locking up diskettes when not in use, using screen savers with activated passwords, positioning screens away from public view.
5. I will immediately notify my manager, Facility Information Security Official (FISO), Director of Information Security Operations (DISO), or Facility or Corporate Client Support Services (CSS) help desk if:
  - a. my password has been seen, disclosed, or otherwise compromised;
  - b. media with Confidential Information stored on it has been lost or stolen;
  - c. I suspect a virus infection on any system;
  - d. I am aware of any activity that violates this agreement, privacy and security policies; or
  - e. I am aware of any other incident that could possibly have any adverse impact on Confidential Information or Company systems.

Upon Termination:

1. I agree that my obligations under this Agreement will continue after termination of my employment, expiration of my contract, or my relationship ceases with the Company.
2. Upon termination, I will immediately return any documents or media containing Confidential Information to the Company.
3. I understand that I have no right to any ownership interest in any Confidential Information accessed or created by me during and in the scope of my relationship with the Company.

By signing this document, I acknowledge that I have read this Agreement and I agree to comply with all the terms and conditions stated above.

Employee/Consultant/Vendor/Program Participant Signature	Facility Name and COID	Date
Employee/Consultant/Vendor/Program Participant Printed Name	Business Entity Name	

**EXHIBIT C**

**Attestation of Satisfactory Background Investigation and Drug and Alcohol Report**

On behalf of Gadsden County School Board, I acknowledge and attest to Capital Regional Medical Center ("Hospital") that we own, and have in our possession, a background investigation report on the individual identified below. Such background investigation and drug and alcohol report is satisfactory in that it:

- \_\_\_ does not reveal any criminal activity;
- \_\_\_ does not reveal ineligibility for rehire with any former employer or otherwise indicate poor performance;
- \_\_\_ confirms the individual is not on either the GSA or OIG exclusion lists;
- \_\_\_ confirms the individual is not listed as a violent sexual offender;
- \_\_\_ confirms this individual is not on the U.S. Treasury Department's Office of Foreign Assets Control list of Specially Designation Nationals;
- \_\_\_ no other aspect of the investigation required by Employer reveals information of concern; and
- \_\_\_ does not reveal the inappropriate use of drugs or alcohol.

I further attest there are no prior or pending investigations, reviews, sanctions or peer review proceedings; or limitations of any licensure, certification or registration.

This attestation is provided in lieu of providing a copy of the background investigation and/or the drug and alcohol report.

Identified Individual Subject to the Background Investigation:

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

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

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

I also acknowledge and agree to an annual compliance audit by Hospital of five percent (5%) or a minimum of thirty (30) such background investigation files as authorized by the subjects under the Fair Credit Reporting Act (FCRA)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
[Name of Organization]  
Date: \_\_\_\_\_

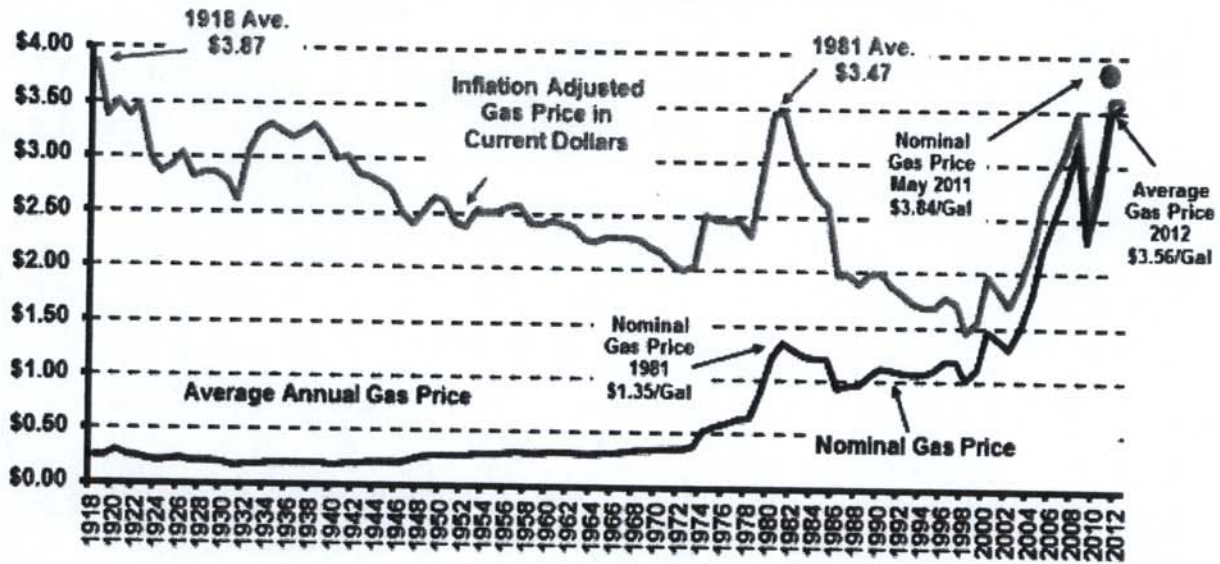








**Annual Average Gasoline Prices**  
**1918 - Current**  
**Adjusted for June 2013 Inflation**  
 © 2013 InflationData.com  
 Prepared By Timothy McMahon  
 Updated 7/16/2013



Note: Prices are Average Annual prices not Peak Prices so peaks are smoothed out considerably

Source of Data US Energy Information Administration  
 CPI-U Inflation index- www.bls.gov

Weekly U.S. No 2 Diesel Ultra Low Sulfur (0-15 ppm) Retail Prices (Dollars per Gallon)

Year-Month	Week 1		Week 2		Week 3		Week 4		Week 5	
	End Date	Value	End Date	Value	End Date	Value	End Date	Value	End Date	Value
2007-Feb	02/05	2.463	02/12	2.502	02/19	2.515	02/26	2.571		
2007-Mar	03/05	2.640	03/12	2.695	03/19	2.694	03/26	2.690		
2007-Apr	04/02	2.803	04/09	2.853	04/16	2.887	04/23	2.863	04/30	2.831
2007-May	05/07	2.816	05/14	2.797	05/21	2.822	05/28	2.836		
2007-Jun	06/04	2.819	06/11	2.814	06/18	2.822	06/25	2.847		
2007-Jul	07/02	2.842	07/09	2.859	07/16	2.902	07/23	2.903	07/30	2.899
2007-Aug	08/06	2.910	08/13	2.861	08/20	2.878	08/27	2.873		
2007-Sep	09/03	2.901	09/10	2.932	09/17	2.971	09/24	3.038		
2007-Oct	10/01	3.055	10/08	3.046	10/15	3.053	10/22	3.110	10/29	3.171
2007-Nov	11/05	3.314	11/12	3.438	11/19	3.426	11/26	3.456		
2007-Dec	12/03	3.433	12/10	3.345	12/17	3.325	12/24	3.321	12/31	3.356
2008-Jan	01/07	3.387	01/14	3.341	01/21	3.286	01/28	3.272		
2008-Feb	02/04	3.291	02/11	3.291	02/18	3.405	02/25	3.558		
2008-Mar	03/03	3.666	03/10	3.825	03/17	3.982	03/24	3.998	03/31	3.976
2008-Apr	04/07	3.966	04/14	4.069	04/21	4.153	04/28	4.187		
2008-May	05/05	4.162	05/12	4.339	05/19	4.504	05/26	4.731		
2008-Jun	06/02	4.716	06/09	4.702	06/16	4.702	06/23	4.659	06/30	4.657
2008-Jul	07/07	4.733	07/14	4.771	07/21	4.729	07/28	4.614		
2008-Aug	08/04	4.515	08/11	4.368	08/18	4.219	08/25	4.158		
2008-Sep	09/01	4.135	09/08	4.075	09/15	4.035	09/22	3.967	09/29	3.969
2008-Oct	10/06	3.887	10/13	3.672	10/20	3.497	10/27	3.300		
2008-Nov	11/03	3.100	11/10	2.958	11/17	2.822	11/24	2.676		
2008-Dec	12/01	2.624	12/08	2.523	12/15	2.430	12/22	2.373	12/29	2.335
2009-Jan	01/05	2.299	01/12	2.324	01/19	2.307	01/26	2.278		
2009-Feb	02/02	2.256	02/09	2.230	02/16	2.197	02/23	2.138		
2009-Mar	03/02	2.095	03/09	2.051	03/16	2.023	03/23	2.093	03/30	2.225
2009-Apr	04/06	2.233	04/13	2.234	04/20	2.226	04/27	2.207		
2009-May	05/04	2.192	05/11	2.223	05/18	2.237	05/25	2.278		
2009-Jun	06/01	2.354	06/08	2.501	06/15	2.575	06/22	2.619	06/29	2.612
2009-Jul	07/06	2.598	07/13	2.546	07/20	2.501	07/27	2.532		
2009-Aug	08/03	2.554	08/10	2.628	08/17	2.656	08/24	2.672	08/31	2.679
2009-Sep	09/07	2.650	09/14	2.638	09/21	2.626	09/28	2.606		
2009-Oct	10/05	2.588	10/12	2.604	10/19	2.708	10/26	2.805		
2009-Nov	11/02	2.811	11/09	2.805	11/16	2.795	11/23	2.792	11/30	2.780
2009-Dec	12/07	2.777	12/14	2.753	12/21	2.731	12/28	2.736		
2010-Jan	01/04	2.801	01/11	2.882	01/18	2.874	01/25	2.838		
2010-Feb	02/01	2.787	02/08	2.775	02/15	2.761	02/22	2.834		
2010-Mar	03/01	2.865	03/08	2.906	03/15	2.926	03/22	2.949	03/29	2.942
2010-Apr	04/05	3.017	04/12	3.073	04/19	3.078	04/26	3.082		
2010-May	05/03	3.126	05/10	3.131	05/17	3.098	05/24	3.025	05/31	2.983
2010-Jun	06/07	2.949	06/14	2.930	06/21	2.962	06/28	2.957		
2010-Jul	07/05	2.925	07/12	2.904	07/19	2.899	07/26	2.919		
2010-Aug	08/02	2.928	08/09	2.991	08/16	2.979	08/23	2.957	08/30	2.938
2010-Sep	09/06	2.931	09/13	2.943	09/20	2.960	09/27	2.951		
2010-Oct	10/04	3.000	10/11	3.066	10/18	3.073	10/25	3.067		
2010-Nov	11/01	3.067	11/08	3.116	11/15	3.184	11/22	3.171	11/29	3.162
2010-Dec	12/06	3.197	12/13	3.231	12/20	3.248	12/27	3.294		
2011-Jan	01/03	3.331	01/10	3.333	01/17	3.407	01/24	3.430	01/31	3.438
2011-Feb	02/07	3.513	02/14	3.534	02/21	3.573	02/28	3.716		
2011-Mar	03/07	3.871	03/14	3.908	03/21	3.907	03/28	3.932		
2011-Apr	04/04	3.976	04/11	4.078	04/18	4.105	04/25	4.098		
2011-May	05/02	4.124	05/09	4.104	05/16	4.061	05/23	3.997	05/30	3.948
2011-Jun	06/06	3.940	06/13	3.954	06/20	3.950	06/27	3.888		
2011-Jul	07/04	3.850	07/11	3.899	07/18	3.923	07/25	3.949		
2011-Aug	08/01	3.937	08/08	3.897	08/15	3.835	08/22	3.810	08/29	3.820
2011-Sep	09/05	3.868	09/12	3.862	09/19	3.833	09/26	3.786		
2011-Oct	10/03	3.749	10/10	3.721	10/17	3.801	10/24	3.825	10/31	3.892
2011-Nov	11/07	3.887	11/14	3.987	11/21	4.010	11/28	3.964		
2011-Dec	12/05	3.931	12/12	3.894	12/19	3.828	12/26	3.791		
2012-Jan	01/02	3.783	01/09	3.828	01/16	3.854	01/23	3.848	01/30	3.850
2012-Feb	02/06	3.856	02/13	3.943	02/20	3.960	02/27	4.051		
2012-Mar	03/05	4.094	03/12	4.123	03/19	4.142	03/26	4.147		
2012-Apr	04/02	4.142	04/09	4.148	04/16	4.127	04/23	4.085	04/30	4.073
2012-May	05/07	4.057	05/14	4.004	05/21	3.956	05/28	3.897		
2012-Jun	06/04	3.846	06/11	3.781	06/18	3.729	06/25	3.678		
2012-Jul	07/02	3.648	07/09	3.683	07/16	3.695	07/23	3.783	07/30	3.796
2012-Aug	08/06	3.850	08/13	3.965	08/20	4.026	08/27	4.089		
2012-Sep	09/03	4.127	09/10	4.132	09/17	4.135	09/24	4.086		
2012-Oct	10/01	4.079	10/08	4.094	10/15	4.150	10/22	4.116	10/29	4.030
2012-Nov	11/05	4.010	11/12	3.980	11/19	3.976	11/26	4.034		
2012-Dec	12/03	4.027	12/10	3.991	12/17	3.945	12/24	3.923	12/31	3.918
2013-Jan	01/07	3.911	01/14	3.894	01/21	3.902	01/28	3.927		
2013-Feb	02/04	4.022	02/11	4.104	02/18	4.157	02/25	4.159		
2013-Mar	03/04	4.130	03/11	4.088	03/18	4.047	03/25	4.006		
2013-Apr	04/01	3.993	04/08	3.977	04/15	3.942	04/22	3.887	04/29	3.851
2013-May	05/06	3.845	05/13	3.866	05/20	3.890	05/27	3.880		
2013-Jun	06/03	3.869	06/10	3.849	06/17	3.841	06/24	3.838		
2013-Jul	07/01	3.817	07/08	3.828	07/15	3.867	07/22	3.903	07/29	3.915
2013-Aug	08/05	3.909	08/12	3.896	08/19	3.900	08/26	3.913		
2013-Sep	09/02	3.981	09/09	3.981	09/16	3.974	09/23	3.949	09/30	3.919
2013-Oct	10/07	3.897	10/14	3.886	10/21	3.886	10/28	3.870		
2013-Nov	11/04	3.857	11/11	3.832	11/18	3.822	11/25	3.844		
2013-Dec	12/02	3.883	12/09	3.879	12/16	3.871	12/23	3.873	12/30	3.903





*R. Smith*

SUMMARY SHEET

RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA

**AGENDA ITEM NO.** 8i

**Date of School Board Meeting:** April 22, 2014

**TITLE OF AGENDA ITEM:** School Field Trip Request (Out-of-State)

**DIVISION:** Pre-K – 12 Education

\_\_\_\_\_ This is a CONTINUATION of a current project, grant, etc.

**PURPOSE AND SUMMARY OF ITEM:**  
(Type and Double Space)

According to School Board Policy 2340 (Field and Other District-Sponsored Trips), all out-of-state field trips must be approved by the School Board. Stewart Street Elementary is requesting approval for a 2<sup>nd</sup> grade field trip to Wild Adventures in Valdosta, Georgia on May 2, 2014 and a 5<sup>th</sup> grade field trip to Wild Adventures in Valdosta, Georgia on May 8, 2014. Please see documentation attached.

**FUND SOURCE:** N/A

**AMOUNT:** N/A

**PREPARED BY:** Sylvia R. Jackson, Ed.D.

*[Handwritten signature]*

**POSITION:** Director of Pre-K - 12

-----  
INSTRUCTIONS TO BE COMPLETED BY PREPARER

\_\_\_\_\_ Number of ORIGINAL SIGNATURES NEEDED by preparer.

SUPERINTENDENT'S SIGNATURE: page(s) numbered \_\_\_\_\_

CHAIRMAN'S SIGNATURE: page(s) numbered \_\_\_\_\_

2014 APR 14 AM 10:00  
GADSDEN SCHOOL BOARD  
OFFICE OF ASSISTANT  
SUPERINTENDENT



# Stewart Street Elementary School

*"Where Children and Learning Come First"*

---

749 South Stewart Street ♦ Quincy, Florida 32351

(850) 627-3145 ♦ Fax: (850) 875-8750

To: School Board Members of Gadsden County School  
From: Lisa Robinson  
Date: April 2, 2014  
Re: Out-of-State Field Trip Request

Per Board Policy 2340 (Field and Other District-Sponsored Trips), this is a written request for the School Board's approval for Stewart Street Elementary 2<sup>nd</sup> and 5<sup>th</sup> grade students' field trip requests to Wild Adventures Theme Park in Valdosta, Georgia. Wild Adventures Theme Park is approximately 98.56 miles, a total of 1 hour 43 minutes travel time from Stewart Street Elementary.

In preparation for this field trip, teachers will preview the attached educational goals, which will culminate our science benchmarks, in order to ensure that this trip is not only fun and exciting, but educational as well. Students' comprehension of classification of animals, zoos around the world, animals' habitats and adaptations will be enhanced greatly.

I have attached the itineraries, explanations of the educational goals and assignments related to the field trip.

If you have any questions or concerns, please contact me at 850-627-3145.

Thank in you advance for your consideration.

---

Lisa Robinson, Principal

Curlie Harris, Assistant Principal

## The School Board of Gadsden County Bylaws & Policies

Unless a specific policy has been amended and the date of the policy was revised is noted at the bottom of that policy, the bylaws and policies of The School Board of Gadsden County were adopted on June 25, 2013, and were in effect beginning June 26, 2013.

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### **2340 - FIELD AND OTHER DISTRICT-SPONSORED TRIPS**

The School Board recognizes that field trips, when used for teaching and learning integral to the curriculum, are an educationally sound and important ingredient in the instructional program of the schools. Properly planned and executed field trips should:

- A. supplement and enrich classroom procedures by providing learning experiences in an environment outside the schools;
- B. arouse new interests among students;
- C. help students relate school experiences to the reality of the world outside of school;
- D. bring the resources of the community - natural, artistic, industrial, commercial, governmental, educational - within the student's learning experience;
- E. afford students the opportunity to study real things and real processes in their actual environment.

For purposes of this policy, a field trip shall be defined as any planned journey by one or more students away from District premises, which is an integral part of a course of study and is under the direct supervision and control of an instructional staff member or any advisor as designated by the Superintendent.

Other District-sponsored trips shall be defined as any planned, student-travel activity which is approved as part of the District's total educational program and is under the direct supervision and control of an instructional staff member or any advisor as designated by the Superintendent.

School personnel shall not accept any form of compensation from vendors that might influence their recommendation on the eventual selection of a location for, or a vendor that will provide transportation to, a field or other District-sponsored trip. Furthermore, school personnel shall not accept any compensation from a vendor after a decision has been made regarding the location for, or a vendor that will provide transportation to, a field or other District-sponsored trip. In addition, school personnel who recommended the location for, or a vendor that will provide transportation to, a field or other District-sponsored trip shall not enter into a contractual arrangement whereby an individual staff member receives compensation in any form from the vendor that operates the venue for, or provides the transportation to, a field or other District-sponsored trip for services rendered.

Such compensation includes, but is not limited to, cash, checks, stocks, or any other form of securities, and gifts such as televisions, microwave ovens, computers, discount certificates, travel vouchers, tickets, passes, and other such things of value. In the event that a school staff member receives such compensation, albeit unsolicited, from a vendor, the staff member shall notify the Fiscal Officer, in writing,

that s/he received such compensation and shall thereafter promptly transmit said compensation to the Fiscal Officer at his/her earliest opportunity.

The Superintendent shall approve all field trips within the State of Florida. The Board shall approve all field trips out of State or out of the country.

The Board does not endorse, support, or assume liability in any way for any staff member, volunteer, or parent of the District who takes students on trips not approved by the Superintendent. No staff member may solicit students of this District for such trips within the facilities or on the school grounds of the District without permission from the Superintendent. Permission to solicit neither grants nor implies approval of the trip. Such approval must be obtained in accordance with the District's administrative procedures for Extended Trips.

The Superintendent shall prepare administrative procedures for the operation of both field and other District-sponsored trips, including athletic trips, which shall address:

- A. the safety and well-being of students;
- B. parental permission is sought and obtained before any student leaves the District on a trip;
- C. each trip is properly planned, and if a field trip, is integrated with the curriculum, evaluated, and followed up by appropriate activities which enhance its usefulness;
- D. the effectiveness of field trip activities is judged in terms of demonstrated learning outcomes;
- E. each trip is properly monitored;
- F. student behavior while on all field trips complies with the Student Code of Conduct and on all other trips complies with an approved code of conduct for the trip;
- G. a copy of each student's Emergency Medical Authorization Form is in the possession of the staff member in charge;
- H. provisions have been made for the administration of medication to those students for whom medications are administered routinely while at school;
- I. provisions have been made at the trip destination and in transportation, if and when required to accommodate students and/or chaperones with disabilities.

An instructional staff member shall not change a planned itinerary while the trip is in progress, except where the health, safety, or welfare of the students in his/her charge is imperiled.

In any instance in which the itinerary of a trip is altered, the instructional staff member in charge shall notify the administrative superior immediately.

F.S. 1001.43

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# FILE COPY

REVISED 11/28/11

**FORM MUST BE RECEIVED IN DISTRICT OFFICE 2 WEEKS PRIOR TO TRIP**

## FIELD TRIP REQUEST

SCHOOL: <u>Stewart Street Elem.</u>	CONTACT FOR FIELD TRIP: <u>Lainsa Bailey / Angda Rollins</u>
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DATE OF TRIP: <u>5/2/14</u>	WHO IS ATTENDING: (grade/organization) <u>Stewart Street Elem. 2nd Grade</u>
--------------------------------	---

LOCATION: <u>Wild Adventures</u> <u>Valdosta, Georgia</u>	TRAVELING BY: <input checked="" type="checkbox"/> School bus <input type="checkbox"/> Charter bus
--	--

PURPOSE: The purpose of the trip is to help children develop an understanding of other cultures as well as wild life and our environment.

<b>SCHOOL BUS - Required items for approval:</b> <ol style="list-style-type: none"><li>1. Principal's signature</li><li>2. Complete list of participants and chaperones</li><li>3. Complete final itinerary</li></ol>	<b>CHARTER BUS - Required items for approval:</b> <ol style="list-style-type: none"><li>1. Principal's signature</li><li>2. Complete list of participants and chaperones</li><li>3. Complete final itinerary</li><li>4. Copy of charter bus contract with signatures</li><li>5. Proof of Insurance showing either district or school as insured</li></ol>
---	---

Ms. Bailey  
2nd Grade Teachers  
Signature of Person Requesting Trip

Lisa Robinson  
Approval of Principal (signature required)

<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED
<u>[Signature]</u> Sylvia R. Jackson, Ed.D. Director of K-12 Education	Date <u>2/18/14</u>

This request can be either faxed (627-3530) or sent via interoffice mail, but only send one time.



# Stewart Street Elementary School

"Where Children and Learning Come First"

749 South Stewart Street ♦ Quincy, Florida 32351  
(850) 627-3145 ♦ Fax: (850) 875-8750

## Field Trip Request Form

Trip Type:	Destination:	Duration:
<input checked="" type="checkbox"/> Educational	<input type="checkbox"/> In County	<input type="checkbox"/> Day
<input type="checkbox"/> Extracurricular	<input checked="" type="checkbox"/> Out of County	<input checked="" type="checkbox"/> Extended
<input type="checkbox"/> Recreational/Fun	<input type="checkbox"/> Out of State/Country	
<input type="checkbox"/> Sports	<input type="checkbox"/> Overnight	
<input type="checkbox"/> Other		

### Sponsor/Group Information

Requested by: Second Grade Teachers  
Group Name: Second Grade Team  
Group Contact: Latrisa Bailey/Angela Pollins  
Contact E-mail: bailey1@gcpsmail.com  
Contact Mobile: (850) 345-5575 / (850) 727-3001  
Trip Purpose: The purpose of the trip is to help children  
develop an understanding of other cultures as  
well as wildlife and other environments.

Estimated # of Students 50 Estimated # of Chaperones 8  
Total Participants 58 # of Bag Lunches Required     

### Transportation Required

Is Transportation Required?  Yes  No  
Type of Transportation Required  Car  Full Bus  Mini Bus  
 Other/Van  
Estimated # of Vehicles Required 1  
Volunteer Driver Required?  Yes  No  
Specify Any Special Needs Required:

N/A

Lisa Robinson, Principal

Valencia Denson, Assistant Principal

**Lisa Robinson, Principal**

**Valencia Denson, Assistant Principal**

## Itinerary

Departure Date: May 2, 2014

Departure Time: 8:00 am.

Return Date: May 2, 2014

Return Time: 7:00 pm.

Trip Destination: Wild Adventures

Destination City: Valdosta

Destination State: Georgia

Destination Contact Name: \_\_\_\_\_

Destination Telephone #: (229) 219-7144

Departure Location: Wild Adventures 3766 Old Chatsville Rd Valdosta, GA

Return Location: Stewart Street Elementary School Quincy, FL

Fund: 2nd Grade Students

Additional Comments:

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

Signature: Ms. Buning





Trip to:

**3766 Old Clyattville Rd**

Valdosta, GA 31601-1704

98.56 miles / 1 hour 43 minutes

Notes

		Download Free App
	<b>749 S Stewart St, Quincy, FL 32351-4420</b>	
	1. Start out going north on <b>S Stewart St</b> toward <b>Martin Luther King Jr Blvd / Experiment Station Rd.</b> <a href="#">Map</a>	0.04 Mi 0.04 Mi Total
	2. Take the 1st left onto <b>Martin Luther King Jr Blvd / Experiment Station Rd.</b> <a href="#">Map</a> <i>If you reach 3rd St you've gone about 0.2 miles too far</i>	0.7 Mi 0.7 Mi Total
	3. Take the 3rd left onto <b>S Pat Thomas Pky / SR-267 S / Robert St.</b> Continue to follow <b>S Pat Thomas Pky / SR-267 S.</b> <a href="#">Map</a> <i>S Pat Thomas Pky is just past Orlando St</i> <i>If you reach Williams St you've gone about 0.1 miles too far</i>	2.8 Mi 3.5 Mi Total
	4. Merge onto <b>I-10 E</b> via the ramp on the left toward <b>Tallahassee.</b> <a href="#">Map</a> <i>If you are on Pat Thomas Pky and reach Spooner Rd you've gone about 0.2 miles too far</i>	70.2 Mi 73.7 Mi Total
	5. Take the <b>SR-14 E</b> exit, <b>EXIT 251</b> , toward <b>Madison.</b> <a href="#">Map</a>	0.3 Mi 74.0 Mi Total
	6. Turn left onto <b>SR-14 N / SW Sr 14.</b> Continue to follow <b>SR-14 N.</b> <a href="#">Map</a>	3.7 Mi 77.7 Mi Total
	7. Turn right onto <b>SR-14 / SW Millinor St.</b> <a href="#">Map</a> <i>SR-14 is 0.1 miles past SW Willie Clare Copeland St</i> <i>If you reach SW Dinkins St you've gone a little too far</i>	0.2 Mi 77.9 Mi Total
	8. Turn left onto <b>S Duval Ave / SR-53.</b> Continue to follow <b>S Duval Ave.</b> <a href="#">Map</a>	0.7 Mi 78.6 Mi Total
	9. Turn right onto <b>NE Colin Kelly Hwy / SR-145</b> (Crossing into Georgia). <a href="#">Map</a>	13.6 Mi 92.1 Mi Total
	10. <b>NE Colin Kelly Hwy / SR-145</b> becomes <b>Madison Hwy / GA-31.</b> <a href="#">Map</a>	4.0 Mi 96.2 Mi Total
	11. Turn left onto <b>Clyattville Nankin Rd.</b> <a href="#">Map</a> <i>Clyattville Nankin Rd is just past Davis St</i> <i>If you reach Churchwood Dr you've gone about 0.2 miles too far</i>	0.4 Mi 96.5 Mi Total
	12. Turn right onto <b>Old Clyattville Rd.</b> <a href="#">Map</a> <i>Old Clyattville Rd is 0.1 miles past Main St</i> <i>If you reach Bland Dairy Dr you've gone about 0.9 miles too far</i>	2.0 Mi 98.6 Mi Total

13. 3766 OLD CLYATTVILLE RD is on the left. [Map](#)  
Your destination is 0.7 miles past Kindertou Clyattville Rd  
If you reach Briggston Rd you've gone about 0.1 miles too far



3766 Old Clyattville Rd, Valdosta, GA 31601-1704

Total Travel Estimate: 98.56 miles - about 1 hour 43 minutes

FREE NAVIGATION APP  
SELECT:  IPHONE  ANDROID

Enter your mobile number



©2014 MapQuest, Inc. Use of directions and maps is subject to the MapQuest Terms of Use. We make no guarantee of the accuracy of their content, road conditions or route usability. You assume all risk of use. [View Terms of Use](#)

## Itinerary for Wild Adventures

8:00am – Departure from SSES

8:00am-10:00am – Journey to Wild Adventures

10:00am – Arrive at Wild Adventures

10:00am-5:00pm – Time at Park

5:00pm – Depart from Wild Adventures

5:00pm-7:00pm – Travel to SSES

7:00pm – Arrive at SSES

**Ms. Bailey's 2<sup>nd</sup> Grade Class**

**Brice Jackson  
Jakerria Bowen  
JaVonta Sweet  
Jordan Gaines  
Monterria McNealy  
Rayven Lee  
Sha'Zion Riley  
Takyran Wilson  
Trevion Pruitt  
Tyler Lockwood  
Zavian Scott  
Shamira Johnson  
Kevonda Irvin  
KeAndrea Smith  
Jamy Lovett**

**Mrs. K. Dudley**  
**2<sup>nd</sup> Grade Class Roster**

Le'Darrion Butler  
Marcus Cromartie  
Darryl Culver  
Na'Tiyah Davis  
Jordin McGriff  
Ervin Sailor  
Javien Sheffield  
Davonta Sweet  
Zy'kei Washington  
Jordan Walker  
Areli Zuniga

**Ms. Rollins 2<sup>nd</sup> Grade Class  
2-001**

Kenya Booth  
Ahkil Brown  
Terria Bullock  
Kylie Demps  
Tiara Fain  
Cameron Franklin  
Jaelynn Gaines  
Marlon Hollis  
Keyani Jones  
Sha'Diamond Keys  
Trevon Lee  
Morgan McMillian  
Noah Murphy  
Kashaedria Murray  
Benjamin Scott  
Julius Taylor  
Tamelia Wilson  
Jakeria Wood

## Ms. Thompson Roster

1. Mariah Hollis
2. Tim'Myia Green
3. Shamiyah McCloud
4. Jourdan Robinson
5. Dereko McCray
6. Serenity McKay
7. Azariah McNealy
8. Markelis Chapman
9. Brooke Hill
10. Shawnterrius Thomas
11. Deion Neal
12. Malaysia Weston
13. Derrius Fagin
14. Julian Robinson
15. Don Hannah
16. Scion Patterson
17. Kevin Irvin

L.Henry/2<sup>nd</sup> grade

1. Kendarius Atkins
2. Shaliyah Atkins
3. Akhiya Brown
4. Dezmonte Bryant
5. LaKentrye Davis
6. Dailyn Dennis
7. Dekendrick Ford
8. Zachary Incarnato
9. JaCorie Jackson
10. Jamarrion Jordan
11. Terrell Jefferson
12. Jamari Mosely
13. Kavon Murray
14. Kartel Slaton
15. Jayden Whitley
16. Daja Manning
17. Andrew Sansburn



**FORM MUST BE RECEIVED IN DISTRICT OFFICE 2 WEEKS PRIOR TO TRIP**

**FIELD TRIP REQUEST**

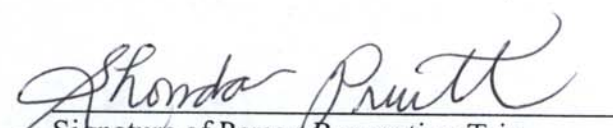
<b>SCHOOL:</b> Stewart Street Elementary	<b>CONTACT FOR FIELD TRIP:</b> Ms. Shonda Pruitt
---	---

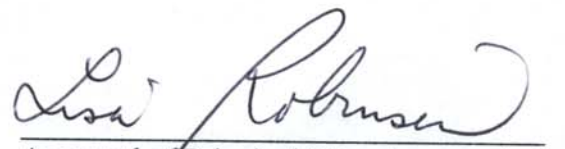
<b>DATE OF TRIP:</b> May 8, 2014	<b>WHO IS ATTENDING: (grade/organization)</b> 5 <sup>th</sup> Grade
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<b>LOCATION:</b> Wild Adventures	<b>TRAVELING BY:</b> <input type="checkbox"/> School bus <input checked="" type="checkbox"/> Charter bus
-------------------------------------	---

**PURPOSE:** Student will experience fun, interactive learning in a setting that explores petting zoos; Tigers of India; Physical Science; Fun with Physics and Math stations.

<b>SCHOOL BUS – Required items for approval:</b> <ol style="list-style-type: none"> <li>1. Principal's signature</li> <li>2. Complete list of participants and chaperones</li> <li>3. Complete final itinerary</li> </ol>	<b>CHARTER BUS – Required items for approval:</b> <ol style="list-style-type: none"> <li>1. Principal's signature</li> <li>2. Complete list of participants and chaperones</li> <li>3. Complete final itinerary</li> <li>4. Copy of charter bus contract with signatures</li> <li>5. Proof of Insurance showing either district or school as insured</li> </ol>
---	---

  
Signature of Person Requesting Trip

  
Approval of Principal (signature required)

<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED
 Sylvia R. Jackson, Ed.D. Director of K-12 Education	Date <u>4/8/14</u>

This request can be either faxed (627-3530) or sent via interoffice mail, but only send one time.



# Stewart Street Elementary School

"Where Children and Learning Come First"

749 South Stewart Street ♦ Quincy, Florida 32351  
(850) 627-3145 ♦ Fax: (850) 875-8750

## Field Trip Request Form

<b>Trip Type:</b>	<b>Destination:</b>	<b>Duration:</b>
<input checked="" type="checkbox"/> Educational	<input type="checkbox"/> In County	<input checked="" type="checkbox"/> Day
<input type="checkbox"/> Extracurricular	<input checked="" type="checkbox"/> Out of County	<input type="checkbox"/> Extended
<input type="checkbox"/> Recreational/Fun	<input checked="" type="checkbox"/> Out of State/Country	
<input type="checkbox"/> Sports	<input type="checkbox"/> Overnight	
<input type="checkbox"/> Other		

### Sponsor/Group Information

Requested by: Shonda Pruitt

Group Name: Stewart Street Fifth Graders

Group Contact: Shonda Pruitt

Contact E-mail: pruitts@gcpsmail.com

Contact Mobile: 850 661-8990

Trip Purpose: Students will experience fun, interactive learning in a setting that explores petting zoos, Tigers of India, Physical Science; then with Physics and Math Stations.

Estimated # of Students 50 Estimated # of Chaperones 6

Total Participants 56 # of Bag Lunches Required     

### Transportation Required

Is Transportation Required?  Yes  No

Type of Transportation Required  Car  Full Bus  Mini Bus

Other/Van Charter Bus

Estimated # of Vehicles Required     

Volunteer Driver Required?  Yes  No

Specify Any Special Needs Required:

\_\_\_\_\_

\_\_\_\_\_

Lisa Robinson  
Lisa Robinson, Principal

\_\_\_\_\_  
Valencia Denson, Assistant Principal

Lisa Robinson, Principal

Valencia Denson, Assistant Principal

**Itinerary**

**Departure Date:** Thursday  
May 8, 2014

**Departure Time:** 8:00 am

**Return Date:** May 8, 2014

**Return Time:** 6:30 pm

**Trip Destination:** Wild Adventures

**Destination City:** Valdosta

**Destination State:** Georgia

**Destination Contact Name:** Mrs. Mischa Hogan

**Destination Telephone #:** 229-219-7144 ; 229-219-7080 option 5

**Departure Location:** Stewart Street Elementary

**Return Location:** Stewart Street Elementary

**Fund:** Fifth Grade Account

**Additional Comments:**

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

**Signature:** Shonda Pruitt

## Stewart Street Elementary Fifth Grade End of the Year Fieldtrip

### Students

Rashard Farlin	Jamaal Jackson
Tyson Scott	Elisha Clark
Zion Hosten	Shanya Paden
Jakari Bozeman	Avontae Madry
Tyree Jackson	Alondrae Madry
Jakyah Moore	Jykla Key
Johnathan Sconiers	Janadria Murphy
Marrisha Robinson	Demiah Stevens
Jeffrey March	DeCarlo Murphy
Nilah Dantzler	Azariah Bullock
Andhadjah Miller	Desmond Lane
Brianna Ward	Quinesha Manning
Daivion Colston	Demartez Kelly
Lakesha Dixon	Zion Ward
Jamarion Anthony	Ashantl Green
Jamilia Thomas	Braxton Robinson
Zykerah Rumph	Jacquez O'Neal
Terronda Walker	Ja'Shondrya Oliver
Sanchez Barnes	
Treveon McGhee	Chaperones
Derrick Feaster	
Leah Read	Ms. Pruitt
Ayonna Street	Mr. Scales
Zion Hosten	

Mrs. Holton

Mrs. Bell-Key

Mrs. Karla March

Mrs. Bab Murphy

Mrs. Zola Akins



### Pre and Post Trip Guide

The information we provide is a way to prepare your classroom for their experience in the park. Take the time to use the ideas to become familiar with the animals that will be featured in the animal talk presentations and other animals featured throughout the park.

Grades K – 2

GPS: SKL1, SKL2, S1L1, S2L1

SSS: SC.K.P.14, SC.1.L.14, SC.1.L.16, SC.1.L.17, SC.2.N.1, SC.2.L.14, SC.2.L.17, SC.3.L.14

COS: K6, K7, 1.4, 2.6

Grades 3 – 5

GPS: S3L1, S4L2, S5L1, S5L2

SSS: SC.3.L.15, SC.3.L.17, SC.4.L.16, SC.4.L.17, SC.5.L.14, SC.5.L.15, SC.5.L.17

COS: 3.7, 3.8, 4.5, 4.6, 5.9

Grades 6 – 8

GPS: S7L1, S7L3, S7L5

SSS: SC.6.L.14, SC.6.L.15, SC.7.L.15, SC.7.L.16, SC.7.L.17

COS: 7.5, 7.6

## Classification of Animals

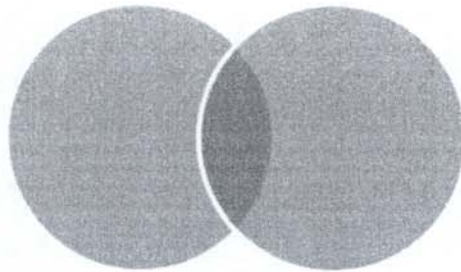
Directions:

Pair the students up with a partner.

Use the Venn Diagram that is provided to record the following information:

1. Look at your partner. Make notes about your partner's appearance, mannerisms, and unusual characteristics. On the left side of the diagram, write your information.
2. On the right side of the diagram, write information about yourself that your partner placed in the left side of the diagram.
3. In the middle of the diagram, make notes that the two of you have in common. How are the two of you alike?
4. In the notes at the bottom, write what attributes to the similarities and the differences that are recorded in the diagram.

Partner



Yourself

Notes:

Come together as a class and compare diagrams. Discuss your notes and the importance of our similarities and differences as human beings.

## AR Reading Assignment

Directions:

Choose an informational text or non – fiction AR book about your favorite animal from your reading level. Use the KWL chart provided to record the following information:

1. In the What You Know section of the chart, write information about the subject of your book that you know before you read.
2. In the What You Want to Learn section on the chart, write information you want to know about the subject of your book.
3. In the What I Have Learned section on the chart, record information from what you have read that answers your questions from the other two sections of your chart.
4. In the Notes section of your chart, record any information that needs to be further researched to find your answers that were not covered in your AR book.

# Know

# Want

# Learn


Notes: \_\_\_\_\_

Take a test on your AR book.

## Zoos Around the World

Directions:

Use the internet in your classroom, school, library, or house to find different web cams at various zoos. Pick two of your favorite sites and choose an animal to observe and complete the Observational Guide page provided.

Web sites:

<a href="http://www.zoo.atlanta.org">www.zoo.atlanta.org</a>	Panda cam
<a href="http://www.sandiego.zoo.org">www.sandiego.zoo.org</a>	Live cams (polar bears, apes, elephant, panda)
<a href="http://www.alaskazoo.org">www.alaskazoo.org</a>	Bear cam
<a href="http://www.natzoo.si.edu">www.natzoo.si.edu</a>	Smithsonian national zoo
<a href="http://www.mbayaq.org">www.mbayaq.org</a>	Monterey Bay Aquarium
<a href="http://dsc.discovery.com">dsc.discovery.com</a>	Discovery Channel live cam, squid cam
<a href="http://www.indyzoo.com">www.indyzoo.com</a>	Zoo and gardens, web cams- elephant, rhino
<a href="http://www.shamu.com">www.shamu.com</a>	San Diego – Shamu cam

**Observational Guide:**

Record the information needed for reference purposes. Then fill out the guide about the behaviors or activity that was observed.

Type of behavior

What was observed

Type of behavior	What was observed





## Adaptation

### Map skills:

#### Directions:

You will need a map of the United States or of the World. Pick to places on the map that are in opposite areas of the country or world. You will be recording observational notes on the Venn Diagram provided for you.

On the map locate two places that are in opposite locations from each other. They can be differences in terrain, climate, altitude, or environment.

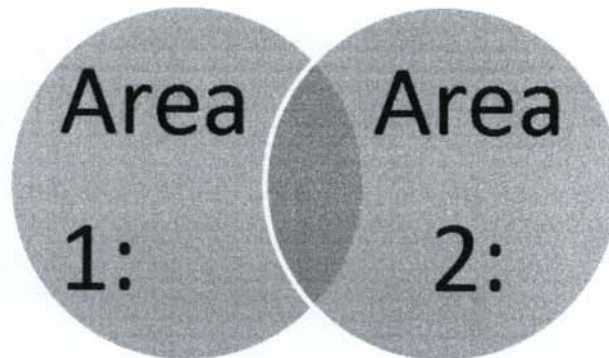
Use the Venn Diagram to record observations about the two locations. How would you dress? Is the area congested or rural? Would public transportation be provided or do I need to supply my own? What types of natural disasters would be prevalent in the area? What recreational activities could you do? What type of house would you live in? What is the culture like?

Next compare the two areas and look for similarities and record them. In the notes section, write any information that would allow you to make a decision on a place to live one over the other.

### Venn Diagram

Area 1

Area 2



#### Notes:

Compare your notes with other students in the classroom.

## Science

Directions:

Students will use a common household AC adapter to observe and record information. Find a Game Boy SP, tape recorder, radio, or computer AC adapter.

Use a 3x5 card or post it note to record information for the following questions.

What is the purpose of an AC adapter?

Can the item using the AC adapter still work without the adapter?

What happens when the item uses the AC adapter?

Can the item use another source of power to make it work?

The Class will discuss the purpose of the AC adapter and what the students have recorded in their notes. Discuss the purpose of a power source adapter and how animals need to use adaptation in order to survive their climates, environment, and extinction.

## Program in the Park

When the weather changes during the seasons, how do you change what you wear?

Can you always find your favorite fruits in the store during the year? Are some fruits not available at certain times of the year?

If you were to move to the North Pole in February, how would you have to dress?

### *Adaptation:*

Adaptation allows living things to adjust to the environment that surrounds them. Animals need adaptation skills for survival. Animals use various forms of adaptation. There are six types: structural, protective, mimicry, behavior, migration, and hibernation.

Structural adaptation involves the changing of an animal's body for survival. It could include changes in their teeth, body coverings, and movement. Their teeth adaptation allows them to eat the various foods available in their environment. Body covering could include scales, hair, spines, and feathers. They may need to adapt due to the climate of the area or the terrain. Movement changes would include animals that need to move from their environment in search of food or lodging. For example, birds will molt (lose feathers) when the weather changes.

Protective coloration allows the animal to blend into the environment, also known as camouflage. Camouflage can be the color of an animal or the body structure of the animal. A timber rattler would have more dark green and brown colors, versus an eastern diamond back rattlesnake that is light tan with dark tan markings. Mimicry gives the animal a look, sound, or action that confuses its predator to leave it alone. Mimicry allows the animal to be confused with a dangerous or poisonous animal and to escape its predator. For example, the viceroy butterfly resembles a monarch butterfly which keeps birds from trying to eat them because of the taste.

Behavioral adaptations can be for social or protective reasons. They are activities that help an animal survive and they can be learned or instinctive. For example an opossum will play dead when approached.

Migration takes place when animals move from one region to another and then back to the original location. They may move to find a better climate, food, a safe place to live or raise their young, or to go back to where they were born. Salmon fish will swim from the area where they are born to the ocean and then at the end of their life, they swim upstream to return to location they were born so they can die.

Hibernation is the ability for an animal to fall into a deep sleep in which the body temperature drops to about the temperature of the environment. The animal will live off the fat that has been stored in the body for this sleep. Bats, woodchucks, snakes, and bears are all examples.

*Example with resident animal:*

Bring out an animal and discuss the various adaptations that the animal uses for survival and why it is important.

Adaptation is an important part of an animal's life cycle. It allows for survival of the species and the importance of that species on the environment. We can choose how we adapt and overcome our various roadblocks in life, but animals have to depend on their skills of adaptation for survival.

Notes:

## Map Skills

Directions:

You will need to choose an animal that can be tracked by the internet. Using a map, you will track the migration patterns of your animal.

Choose a web site that will allow you to track the migration patterns of an animal. Suggested sites:

[www.learner.org/jnorth/](http://www.learner.org/jnorth/)

[www.uaf.edu/index.html](http://www.uaf.edu/index.html)

[www.whale.wheelock.edu/Welcome.html](http://www.whale.wheelock.edu/Welcome.html)

Teacher's resources

Research

Satellite Tracking Program

Choose an animal to track.

Bald eagle

Manatee

Robin

Hummingbird

Loon

Sea Lion

Barn Swallow

Canadian Goose

Red Winded Blackbird

Caribou

Oriole

Wildebeest

Salmon

Walrus

Sea Turtle

Gray Whale

Monarch Butterfly

Whooping Crane

- Use a map of the region your animal migrates.
- Make indications on your map where the animals started, traveled, and ended. Place the dates beside the indication.
- Discuss as a class, everyone's animal and migration patterns.
- Discuss how changes in environment could cause differences in the pattern. What can you do to preserve these patterns?



## Acquisition Lesson Plan

Name:

Duration:

Standard:

Topic:

ESSENTIAL QUESTION:

---

What do students need to learn to be able to answer the Essential Question?

Assessment Prompt 1:

Assessment Prompt \_\_\_:

Assessment Prompt \_\_\_:

Activating Strategy:

---

Key vocabulary to preview:

Teaching Strategies:

Graphic Organizer:

---

Instruction:

AP#1:

AP#2:

AP#3:

---

Assignment:

Summarizing Strategy:



Stewart Street Elementary  
Fifth Grades' Wild Adventures Itinerary  
Thursday, May 8, 2014

- |            |  |
|------------|--|
| 8:00 a.m.  | Depart from Stewart Street Elementary  |
| 10:00 a.m. | Arrive at Wild Adventures Theme Park<br>3766 Old Clyattville Road<br>Valdosta, GA 31601<br><br>229-219-7144  |
| 12:00 p.m. | Lunch in the park  |
| 1:00 p.m.  | Resume tour  |
| 3:00 p.m.  | Board bus to leave Wild Adventures   |
| 3:30 p.m.  | Arrive at Ole Times Country Buffet<br><br>1193 N St Augustine Rd<br>Valdosta, GA 31601<br><br>(229) 253-1600 |
| 5:00 p.m.  | Board bus for return to Quincy, Florida  |
| 6:30 p.m.  | Arrive at Stewart Street Elementary  |

*RS*

**SUMMARY SHEET**

**RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA**

**AGENDA ITEM NO.** 10a

**DATE OF SCHOOL BOARD MEETING:** April 22, 2014

**TITLE OF AGENDA ITEM:** Change Order #1 HMS Pre-K thru 3<sup>rd</sup> Grade Construction Project

**DIVISION:** Facilities

       This is a CONTINUATION of a current project, grant, etc.

**PURPOSE AND SUMMARY OF ITEM:** For Board approval of Change Order #1 for Havana Middle School Project to delete mill work package price of \$103,260.00 from GMP and move it to the furniture package. We will purchase mill work through furniture contractor on state contract.

**FUND SOURCE:** 379

**AMOUNT:** \$103,260.00

**PREPARED BY:** *WS* Wayne Shepard

**POSITION:** Director of Facilities

---

**INTERNAL INSTRUCTIONS TO BE COMPLETED BY PREPARER**

       Number of ORIGINAL SIGNATURES NEEDED by preparer.

SUPERINTENDENT'S SIGNATURE: page(s) numbered                     

CHAIRMAN'S SIGNATURE: page(s) numbered                     

Be sure that the COMPTROLLER has signed the budget page.

This form is to be duplicated on light blue paper.



# AIA Document G701™ – 2001

## Change Order

**PROJECT:** (Name and address)  
Havana Middle School Addition  
1210 Kemp Road  
Tallahassee, FL 32333

**CHANGE ORDER NUMBER:** 01

**DATE:** 04/8/2013

**ARCHITECT'S PROJECT NUMBER:**

OWNER

ARCHITECT

CONTRACTOR

FIELD

OTHER

**TO CONTRACTOR:** (Name and address)

Cook Brothers Inc.  
1255 Commerce Blvd.  
Midway, FL 32343

**CONTRACT DATE:** 02/22/2014

**CONTRACT FOR:** Middle School Addition

The Contract is changed as follows:

(Include, where applicable, any undisputed amount attributable to previously executed Construction Change Directives)

Return cabinet scope funds

The original (Contract Sum) (Guaranteed Maximum Price) was \$ 4,821,118.00  
 The net change by previously authorized Change Orders \$ -0-  
 The (Contract Sum) (Guaranteed Maximum Price) prior to this Change Order was \$ 4,821,118.00  
 The (Contract Sum) (Guaranteed Maximum Price) will be (increased) (decreased) (unchanged)  
 by this Change Order in the amount of \$ (103,260.00)  
 The new (Contract Sum) (Guaranteed Maximum Price) including this Change Order will be \$ 4,717,858.00  
 The Contract Time will be (increased) (decreased) (unchanged) by (-0- ) days  
 The date of Substantial Completion as of the date of this Change Order therefore is **November 14, 2014**

(Note: This Change Order does not include changes in the Contract Sum, Contract Time or Guaranteed Maximum Price which have been authorized by Construction Change Directive until the cost and time have been agreed upon by both the Owner and Contractor, in which case a Change Order is executed to supersede the Construction Change Directive.)

**NOT VALID UNTIL SIGNED BY THE ARCHITECT, CONTRACTOR AND OWNER.**

**Clemons, Rutherford & Assoc.**   
ARCHITECT (Firm name)  
2027 Thomasville Road  
Tallahassee, FL 32308

**Cook Brothers Inc.**  
CONTRACTOR (Firm name)  
1255 Commerce Blvd.  
Midway, FL 32343

**Gadsden County School Board**  
OWNER (Firm name)  
35 Martin Luther King Blvd  
Tallahassee, FL 32351

ADDRESS

ADDRESS

ADDRESS

BY (Signature)

BY (Signature)

BY (Signature)

**Bill Rutherford**

**S. Lamont Cook**

**Wayne Shepard**

(Typed name)

(Typed name)

(Typed name)

DATE 4/10/14

DATE 04/08/2014

DATE

CAUTION: You should sign an original AIA Contract Document, on which this text appears in RED. An original assures that changes will not be obscured.

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# Document G701™ – 2001 Instructions

## Change Order

### GENERAL INFORMATION

#### Purpose

AIA Document G701 is for implementing changes in the Work agreed to by the Owner, Contractor and Architect. Execution of a completed G701 indicates agreement upon all the terms of the change, including any changes in the Contract Sum (or Guaranteed Maximum Price) and Contract Time.

#### Use of Current Documents

Prior to using any AIA Contract Document, users should consult [www.aia.org](http://www.aia.org) or a local AIA component to verify the most recent edition.

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### COMPLETING THE G701 FORM

#### Description of Change in the Contract

Insert a detailed description of the change or reference specific exhibits describing, in detail, the change to be made in the Contract by this Change Order. Include any drawings, specifications, documents or other supporting data to clarify the scope of the change.

#### Determination of Costs

Insert in the blanks provided, or strike out the terms in parentheses that do not apply, the original Contract Sum or Guaranteed Maximum Price; the net change by previously authorized Change Order (note that this does not include changes authorized by Construction Change Directive unless such changes were subsequently agreed to by the Contractor and recorded as a Change Order); the Contract Sum or Guaranteed Maximum Price prior to this Change Order; the amount of increase or decrease, if any, in the Contract Sum or Guaranteed Maximum Price; and the new Contract Sum or Guaranteed Maximum Price as adjusted by this Change Order.

#### Change in Contract Time

Insert in the blanks provided, and strike out the unused terms in parentheses, the amount (in days) of the increase or decrease, if any in the Contract Time. Also insert the date of Substantial Completion, including any adjustment effected by this Change Order.

### EXECUTION OF THE DOCUMENT

When the Owner and Contractor, in occurrence with the Architect, have reached agreement on the change to be made in the Contract, including any adjustments in the Contract Sum (or Guaranteed Maximum Price) and Contract Time, the G701 document should be executed in triplicate by the two parties and the Architect, each retaining an original.

*RWS*

**SUMMARY SHEET**

**RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA**

**AGENDA ITEM NO.** 10b

**DATE OF SCHOOL BOARD MEETING:** April 22, 2014

**TITLE OF AGENDA ITEM:** Comprehensive Maintenance Agreement for HVAC at EGHS

**DIVISION:** Facilities

       This is a CONTINUATION of a current project, grant, etc.

**PURPOSE AND SUMMARY OF ITEM:** For School Board to approve paying Brooks Air Systems, Inc. by the month for the months of March, April, May, and June of 2014 at a cost of \$3,827.00 per month for a comprehensive maintenance agreement on HVAC systems per original contract.

**FUND SOURCE:** 110

**AMOUNT:** \$3,827.00 per month

**PREPARED BY:** *W.S.* Wayne Shepard

**POSITION:** Director of Facilities

---

**INTERNAL INSTRUCTIONS TO BE COMPLETED BY PREPARER**

       Number of ORIGINAL SIGNATURES NEEDED by preparer.

SUPERINTENDENT'S SIGNATURE: page(s) numbered \_\_\_\_\_

CHAIRMAN'S SIGNATURE: page(s) numbered \_\_\_\_\_

Be sure that the COMPTROLLER has signed the budget page.

This form is to be duplicated on light blue paper.

## **SERVICE AGREEMENT**

**Presented To:**

**GADSDEN COUNTY  
SCHOOLS BOARD  
WAYNE SHEPARD  
EAST GADSDEN H.S.**

**SERVICE AGREEMENT**

---

**Customer Information:**

**Date: September 5, 2013**

**Customer Name:** Gadsden County School Board  
**Contact Name/Title:** Wayne Shepard – Director of Facilities  
**Street Address:** 35 Martin Luther King Jr. Blvd.  
**City, State, Zip:** Quincy, Fl 32351

**Locations Covered:**

The Campus of East Gadsden High School

**Description of Service:**

This is a FULL service agreement-coverage includes ALL emergency calls routine maintenance, parts and labor to diagnose, repair or replace failed components of the equipment covered under this agreement. The (3) McQuay chillers will be covered as Preventative Maintenance Only.

**Price and Billing Terms:**

\$40,180.00/yr to be billed in equal monthly investments of \$4,018.00  
Based on 10 remaining months September 2013 through June 2014

**Proposal Expiration Date:** October 15, 2013 Proposal must be accepted and returned.

This Service Agreement proposal, including the attached pages and special conditions, constitutes the entire agreement, and shall become a valid contract after your acceptance and credit approval by B.A.S. This agreement supersedes all prior presentations and agreements not incorporated herein, and no other verbal or written agreement for service exists between us.

This agreement commences on September 01, 2013 and shall continue until June 30, 2014, and may continue from year to year thereafter until terminated in writing by either party.

**Proposed:** Brooks Air Systems  
By: Tom Zimmerly  
Title: Service Sales Engineer  
Date: September 5, 2013

**Accepted:** \_\_\_\_\_  
By: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_

## HVAC EQUIPMENT COVERED

Unit No.	Equipment Type	Manufacturer	Model No.	Belt Size	Filters
1	A/C screw chiller	McQuay	ALS218C	N/A	N/A
2	A/C screw chiller	McQuay	ALS218C	N/A	N/A
3	A/C screw chiller	McQuay	ALS218C	N/A	N/A
4	Vision AHU	McQuay	CAH021FDAC	SEE	ATTACHED
5	Vision AHU	McQuay	CAH025FDAC		
6	Vision AHU	McQuay	CAH010FDAC		
7	Vision AHU	McQuay	CAH008FDAC		
8	Vision AHU	McQuay	CAH017FDAC		
9	Vision AHU	McQuay	CAH008FDAC		
10	Vision AHU	McQuay	CAH030FDAC		
11	Vision AHU	McQuay	CAH021FDAC		
12	Vision AHU	McQuay	CAH040FDAC		
13	Vision AHU	McQuay	CAH012FDAC		
14	Vision AHU	McQuay	CAH017FDAC		
15	Vision AHU	McQuay	CAH012FDAC		
16	Vision AHU	McQuay	CAH017FDAC		
17	Vision AHU	McQuay	CAH040FDAC		
18	VAV	ETI	SDR-06		
19-23	VAV	ETI	VFR-0604		
24-25	VAV	ETI	VFR-0606		
26-29	VAV	ETI	VFR-0804		



30-33	VAV	ETI	VFR-0806		
34-46	VAV	ETI	VFR-0811		
47-56	VAV	ETI	VFR-1011		
56-65	VAV	ETI	VFR-1018		
66-67	VAV	ETI	VFR-1218		
68-72	VAV	ETI	VFR-1221		
73-92	Air Handler	ETI	H-08		
93-99	Air Handler	ETI	H-12		
100-115	Air Handler	ETI	H-16		
116-147	Air Handler	ETI	H-20		
148-151	Air Handler	ETI	H-25		
152-153	Air Handler	ETI	H30		
154	VFD	DANFOS	VLT 6000H11		
155-156	VFD	DANFOSS	VLT6000H14		
157-158	VFD	DANFOSS	VLT6000H21		
159-160	VFD	DANFOSS	VLT6000H34		
161-162	VFD	DANFOSS	VLT6000H65		
163-164	TOWERS	EVAPCO			

**ASSORTED PUMPS/EXHAUST FANS**

This is the entire list of mechanical equipment to be maintained as of November 01,2003



	QUARTERLY	SEMI-ANNUALLY	ANNUALLY	AS REQUIRED BY PERFORMANCE
<b>MAINTENANCE SCHEDULES</b>				
<b>AIR-COOLED SCROLL CHILLER</b>				
<b>GENERAL</b>				
A) Perform controller check, log, and last fault analysis	X			
B) Inspect for refrigerant and oil leaks	X			
C) Check condenser coils, clean debris from around condenser	X			
D) Verify safety controls for proper operation		X		
E) Check refrigerant system for presence of moisture/acid		X		
F) Check condenser fan motors, verify proper operation		X		
G) Inspect thermal insulation for integrity			X	
H) Inspect entire unit for noise, vibration, cleanliness, and paint			X	
<b>ELECTRICAL</b>				
A) Check terminals for tightness, tighten as necessary			X	
A) Clean control panel interior			X	
B) Visually inspect components for signs of overheating	X			
A) Verify compressor heater operation	X			
A) Megger compressor motor every five years				X
<b>REFRIGERATION</b>				
A) Leak test	X			
B) Check sight glasses for clear flow	X			
C) Check filter-drier pressure drop (see manual for spec)	X			
D) Perform compressor vibration test			X	
<b>CONDENSER (AIR-COOLED)</b>				
A) Clean condenser coils			X	
B) Check fan blades for tightness on shaft			X	
C) Check fans for loose rivets and cracks			X	
D) Check coil fins for damage			X	
<b>AHU MAINTENANCE</b>				
A) Check all moving parts for wear		X		
B) Inspect drain pans and clean as necessary	X			
C) Inspect and replace filters	X			
D) Check for tightness:				
Bearing Collar		X		
Sheave		X		
Wheel Hub Setscrews		X		
Sheave Cap screws		X		
Bearing Hold-Down Bolts		X		
E) Relubricate Motor and Fan Shaft Bearings:				
IF unit runs continuously		X		
IF unit runs 12 hours (or less) a day			X	
<b>KEY</b>				

M = Perform According to Manufacturer's Instructions  
 O = Performed by in-house personnel  
 X = Performed by service personnel

<b>VFD MAINTENANCE</b>				
A) Check R7/R8 Enclosure Inlet Air Filter (replace if necessary)	X			
B) Check R7/R8 Enclosure Exhaust Air Filter (replace if necessary)		X		
C) Check and Clean Heatsink		X		
D) Replace Drive Module Fan				X
E) Change Capacitor				X
F) Replace Battery in the Assistant Control Panel				X
<b>PUMP MAINTENANCE</b>				
A) Check Motor Lubrication	X			
B) Check Pump Lubrication	X			
<b>AIR-COOLED SPLIT SYSTEM MAINTENANCE</b>				
<b>ELECTRICAL</b>				
A) Check terminals for tightness, tighten as necessary			X	
A) Clean control panel interior			X	
B) Visually inspect components for signs of overheating	X			
A) Verify compressor heater operation	X			
A) Megger compressor motor every five years				X
<b>REFRIGERATION</b>				
A) Check sight glasses for clear flow	X			
C) Check filter-drier pressure drop (see manual for spec)	X			
D) Perform compressor vibration test			X	
<b>CONDENSER (AIR-COOLED)</b>				
A) Clean condenser coils			X	
B) Check fan blades for tightness on shaft			X	
C) Check fans for loose rivets and cracks			X	
D) Check coil fins for damage			X	
<b>AIR HANDLING UNIT</b>				
A) Check all moving parts for wear		X		
B) Inspect drain pans and clean as necessary	X			
C) Inspect and replace filters	X			
D) Check for tightness:				
Bearing Collar		X		
Sheave		X		
Wheel Hub Setscrews		X		
Sheave Cap screws		X		
Bearing Hold-Down Bolts		X		
E) Relubricate Motor and Fan Shaft Bearings:				
IF unit runs continuously		X		
IF unit runs 12 hours (or less) a day			X	
<b>KEY</b>				
O = Performed by in-house personnel				
X = Performed by service personnel				

	QUARTERLY	SEMI-ANNUALLY	ANNUALLY	AS REQUIRED BY PERFORMANCE
<b>EMCS MAINTENANCE SCHEDULE</b>				
<b>GLOBAL CONTROLLER</b>				
A) Remove accumulated dust from interior and exterior	X			
B) Check operation of Modem	X			
C) Make backup copy of database	X			
D) Check power supply voltage	X			
E) Check battery for proper charge	X			
F) Verify operation of battery backup	X			
G) Check voltage levels on communication trunks	X			
H) Check all electrical connections	X			
<b>TERMINAL CONTROLLERS (2 AHU AND 2 VAV)</b>				
A) Perform point-point check of all connected points	X			
B) Calibrate all temperature sensors	X			
C) Verify software sequence of operation	X			
D) Check communications to Global Controller	X			
E) Check all switch settings for proper position	X			
<b>OPERATORS TERMINAL</b>				
A) Thoroughly clean filters, remove dust and dirt from int/ext	X			
B) Check all functions	X			
<b>CPU POWER SUPPLY</b>				
A) Verify operation of all software functions	X			
B) Check cables for chafing and broken insulation; replace	X			
C) Check power supply voltages and surge protection	X			
A) Performance Evaluation (Superheat Control)	X			
<b>PERFORM SYSTEM BACK-UP</b>				
A) 1 set of disks for owner	X			
B) 1 set of disks for Brooks Air Systems	X			
C) System software updates as they become available	X			

**KEY**  
O = Performed by in-house personnel  
X = Performed by service personnel

## **BROOKS AIR SYSTEMS TERMS AND CONDITIONS OF SALE- SERVICE**

This agreement is between Brooks Air Systems, Inc. ("B.A.S.") and the customer. This agreement applies only to equipment installed prior to effective date of this agreement and as described on attachment(s).

**1. PAYMENT AND TAXES** – Payment shall be net upon receipt of invoice. Brooks Air Systems reserves the right to require cash payment or other alternative method of payment prior to completion of work if Brooks Air Systems determines, in its sole discretion, that the Customer or Customer's assignee's financial condition at any time does not justify continuance of the net 30 days payment term. Brooks Air Systems reserves the right to discontinue its service anytime payments have not been paid as agreed. In addition to the Agreement price, the Customer shall pay Brooks Air systems any applicable taxes or government charges which may be required in connection with the service or material furnished under this Agreement.

**2. WORKING HOURS** – All services performed under this Agreement including major repairs, are to be provided during Brooks Air Systems normal working hours unless otherwise agreed. Normal working hours (8 a.m. to 5 p.m.) Monday through Friday will apply to all services, unless otherwise stated, including major repairs performed under this agreement. Work performed beyond normal working hours for the convenience of the Customer shall be billed at the difference between overtime and straight time rates. We will respond to all calls within a four (4) hour time period or sooner.

**3. ADDITIONAL SERVICE** - Services or parts requested by Customer in addition to those specified in this Agreement will be provided upon receipt of Customer's written authorization and invoiced at Brooks Air Systems prevailing contract labor rate of \$ 82.00 per hour mechanical, \$ 95.00 controls and parts charges. Additional services or parts shall be supplied under the terms of this Agreement.

- In the event Brooks Air Systems is required to make any repairs and/or replacement and/or emergency calls occasioned by improper operation or misuse of equipment covered by this agreement or any cause beyond Brooks Air Systems control, the customer shall reimburse B.A.S. for expenses incurred in making repairs and/or replacements and/or replacements, and/or emergency calls in accordance with the established rate for performing such service such as calls for thermostat setting, air balancing or equipment resetting.

**4. REPAIR OR REPLACEMENT** - Brooks Air Systems shall not be responsible for repair or replacement of any HVAC or EMCS equipment that is damaged by any disaster or weather catastrophes (ie, floods, tornados, hurricanes, etc.), vandalism, other contractors, maintenance personnel, tenants, or any other party.

Brooks Air Systems is not responsible for the identification, detection, abatement, encapsulating or removal of asbestos, mold, or products or materials containing asbestos, mold, or similar hazardous substances. In the event that Brooks Air Systems encounters any asbestos, mold product or any hazardous material in the course of performing its work, Brooks Air Systems may suspend its work and remove its employees from the project, until such product or material, and any hazards connected with it are abated. Brooks Air Systems shall receive an extension of time to complete its work and compensation for delays encountered as a result of such situation and its correction.

Brooks Air Systems shall not be required to perform tests, install any items of equipment or make modifications that may be recommended or directed by insurance companies, government, state, municipal or other authority. However, in the event any such recommendations occur, Brooks Air Systems, at its option, may submit a proposal for Customer's consideration in addition to this Agreement. Brooks Air Systems shall not be required to repair or replace equipment that has not been properly maintained.

**5. SUPPLEMENTAL CONDITIONS SECTION** – This agreement presupposes that all major pieces of equipment are in proper operating condition at the signing of this agreement.

- It shall be the responsibility of Brooks Air Systems to inspect and report to the customer any malfunctions and defects within sixty (60) days after acceptance date. If equipment cannot be operated within this 60 day period due to seasonal conditions or factors beyond our control, the period for the initial inspection will be extended 60 days after the equipment can be operated and checked.
- It shall also be the responsibility of Brooks Air Systems to make recommendations and assist the customer in restoring the equipment to proper operating condition. However, all of the actual restoration costs shall be paid by the customer
- After equipment restoration to original operating conditions has been approved by Brooks Air Systems, coverage will become effective in accordance with the terms of this agreement.

**6. PROPRIETARY RIGHTS**– During the term of this Agreement and in combination with certain services, Brooks Air Systems may elect to install, attach to Customer equipment, or provide portable devices (hardware and/or software) that shall remain the personal proprietary property of Brooks Air Systems. No devices installed, attached to real property or portable device(s) shall become a fixture of the Customer locations. Customer shall not acquire any interest, title or equity in any hardware, software, processes, and other intellectual or proprietary rights to devices which are used in connection with providing service on Customer equipment.

7. **DELAYS**— Delays caused by conditions beyond the reasonable control of either party shall not be the liability of either party to this Agreement.

**8. CUSTOMER OBLIGATIONS**

Customer shall:

- Provide a safe work environment.
- Permit access to Customer's site, and use of building services including but not limited to: water, elevators, receiving dock facilities, electrical service and local telephone service.
- Keep areas adjacent to equipment free of extraneous material, move any stock, fixtures, walls or partitions that may be necessary to perform the specified service.
- Promptly notify Brooks Air Systems of any unusual operating conditions.
- Upon agreement of a timely mutual schedule, allow Brooks Air Systems to stop and start equipment necessary to perform service.
- Provide the daily routine equipment operation (if not part of this Agreement) including availability of routine equipment log readings.
- Operate the equipment properly and in accordance with instructions.

9. **EQUIPMENT CONDITION & RECOMMENDED SERVICE** – Upon the initial scheduled operating and/or initial annual stop inspection should Brooks Air Systems determine the need for repairs or replacement. Brooks Air Systems will provide the Customer in writing an "equipment condition" report that includes recommendations for corrections and the price for repairs in addition to this Agreement.

In the event Brooks Air Systems recommends certain services (that are not included herein or upon initial inspection). If the Customer does not elect to have such services properly performed in a timely fashion, Brooks Air Systems shall not be responsible for any equipment or control failures, operability and any long-term damage that may result. Brooks Air Systems at its option will either continue to maintain equipment and/or controls to the best of its ability, without any responsibility, or remove such equipment from this Agreement, adjusting the price accordingly.

10. **CUSTOMER TERMINATION**— Customer shall have the right to terminate this Agreement for Brooks Air Systems non-performance provided Brooks Air Systems fails to cure such non-performance within 30 days after having been given prior written notice of the non-performance. Upon early termination or expiration of this Agreement, Brooks Air Systems shall have free access to enter Customer locations to disconnect and remove any Brooks Air Systems personal proprietary property or devices as well as remove any and all Brooks Air Systems-owned parts, tools and personal property. Additionally, Customer agrees to pay Brooks Air Systems for all incurred but unamortized service costs performed by Brooks Air Systems including overheads and a reasonable profit.

11. **CUSTOMER RESPONSIBILITY** – It is agreed that the customer will assume responsibility and pay extra for all service and material required for repair or replacement due to electrical power failure, low voltage, power surges, burned out main or branch fuses, or low water pressure or water damage.

12. **LIMITATION OF LIABILITY**— Under no circumstances shall Brooks Air Systems be held liable for any incidental, special or consequential damages, including loss of revenue, loss of use of equipment or facilities, or economic damages based on strict liability or negligence. Brooks Air Systems shall be liable for damage to property, other than the equipment provided under this Agreement, and to persons, to the extent that Brooks Air Systems negligent acts or omissions directly contributed to such injury or property damage. Brooks Air Systems maximum liability for any reason (except for personal injuries) shall consist of the refunding of all moneys paid by Customer to Brooks Air Systems under this Agreement, subject to right of removal and return of equipment provided under this Agreement to Brooks Air Systems.

B.A.S. and customer assume the non-occurrence of the following contingencies which, without limitation, might render performance by B.A.S. impractical: strikes, fires, war, late or non-delivery by suppliers of B.A.S., and all other contingencies beyond the reasonable control of B.A.S. Under no circumstances shall B.A.S. be liable for any special or consequential damages whether based upon lost goodwill, lost resale profits, work stoppage, and impairment of other goods or otherwise and whether arising out of breach of warranty, breach of contract, negligence or otherwise, except only in the case of personal injury where applicable law requires such liability. But in no event shall B.A.S.'s liability exceed the purchase price paid under this contract.

13. **WASTE DISPOSAL**— Contractor is wholly responsible for the removal and proper disposal of waste oil, refrigerant and any other material generated during the term of this Agreement.

14. **CLAIMS** – Any suits arising from the performance or non-performance of this Agreement, whether based upon contract, negligence, and strict liability or otherwise, shall be brought within one (1) year from the date the claim arose.

15. **SUPERSEDE, ASSIGNMENT and MODIFICATION**- This Agreement contains the complete and exclusive statement of the agreement between the parties and supersedes all previous or contemporaneous, oral or written, statements. Customer may assign this Agreement only with Brooks Air System's prior written consent. No modification to this Agreement shall be binding unless in writing and signed by both parties.

*RS*

**SUMMARY SHEET**

**RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA**

**AGENDA ITEM NO.** 10c

**DATE OF SCHOOL BOARD MEETING:** April 22, 2014

**TITLE OF AGENDA ITEM:** Comprehensive Maintenance Agreement for HVAC at WGHS

**DIVISION:** Facilities

       This is a CONTINUATION of a current project, grant, etc.

**PURPOSE AND SUMMARY OF ITEM:** For School Board to approve paying Brooks Air Systems, Inc. by the month for the months of March, April, May, and June of 2014 at a cost of \$3,185.00 per month for a comprehensive maintenance agreement on HVAC systems per original contract.

**FUND SOURCE:** 110

**AMOUNT:** \$3,185.00 per month

**PREPARED BY:** *W.S.* Wayne Shepard

**POSITION:** Director of Facilities

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**INTERNAL INSTRUCTIONS TO BE COMPLETED BY PREPARER**

       Number of ORIGINAL SIGNATURES NEEDED by preparer.

SUPERINTENDENT'S SIGNATURE: page(s) numbered \_\_\_\_\_

CHAIRMAN'S SIGNATURE: page(s) numbered \_\_\_\_\_

Be sure that the COMPTROLLER has signed the budget page.

This form is to be duplicated on light blue paper.



## **SERVICE AGREEMENT**

**Presented To:**

**GADSDEN COUNTY  
SCHOOL BOARD  
WAYNE SHEPARD  
WEST GADSDEN HIGH  
SCHOOL**

**SERVICE AGREEMENT**

---

**Customer Information:**

**Date: September 5, 2013**

**Customer Name:** Gadsden County School Board  
**Contact Name/Title:** Wayne Shepard – Director of Facilities  
**Street Address:** 35 Martin Luther King Jr. Blvd  
**City, State, Zip:** Quincy, Florida 32351

**Locations Covered:**

West Gadsden High School  
200 Providence Road  
Greensboro, Fl 32330

**Description of Service:**

This is a FULL service agreement-coverage includes ALL emergency calls routine maintenance, parts and labor to diagnose, repair or replace failed components of the equipment covered under this agreement. The (2) McQuay chillers will be covered as inspections only.

**Price and Billing Terms:**

\$33,440.00 to be billed in equal monthly investments of \$ 3,344.00  
Based on 10 months September 2013 through June 2014

**Proposal Expiration Date:** October 15, 2013 Proposal must be accepted and returned.

This Service Agreement proposal, including the attached pages and special conditions, constitutes the entire agreement, and shall become a valid contract after your acceptance and credit approval by B.A.S. This agreement supersedes all prior presentations and agreements not incorporated herein, and no other verbal or written agreement for service exists between us.

This agreement commences on September 01, 2013 and shall continue until June 30, 2014 and may continue from year to year thereafter until terminated in writing by either party.

**Proposed:** Brooks Air Systems  
By: Tom Zimmerly  
Title: Branch Manager  
Date: September 5, 2013

**Accepted:** \_\_\_\_\_  
By: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_

## HVAC EQUIPMENT COVERED

### West Gadsden High School Greensboro FL

Item	Equip. Type	MFG.	Order Number	Model No.	Qty	Serial No.	Tag	Area Served	Ship Date	Start-Up Date	Belt Size/ Qty	Filter Sizes / Quantity
1	CHILLER	McQuay	E799282130	AGS170CH27	1	STNUO60700220	7-2	CAMPUS		8-29-07		
2	CHILLER	McQuay	F7992F2120	AGS170CH27	1	STNUO60700221	7-1	CAMPUS		3-28-07		
3	VFD	ABB		ACH550-VD-08A8-4+K465	1	2063000882	AHU		7-25-06	5-31-07		
4	VFD	ABB		ACH550-VD-012A-4+K465	1	2063000883	AHU		7-25-06	5-31-07		
5	VFD	ABB		ACG550-VD-012A-4+K465	1	2063000886	AHU		7-25-06	5-31-07		
6	VFD	ABB		ACH550-VD-023A-4+K465	1	2063000887	PUMP		7-25-06	5-31-07		
7	VFD	ABB		ACH550-VD-023A-4+K465	1	2063000888	PUMP		7-25-06	5-31-07		
8	VFD	ABB		ACH550-VD-023A-4+K465	1	2063000889	AHU		7-25-06	5-31-07		
9	VFD	ABB		ACH550-VD-023A-4+K465	1	2063000890	AHU		7-25-06	5-31-07		
10	VFD	ABB		ACH550-VD-031A-4+K465	1	2063000891	AHU		7-25-06	5-31-07		
11	VFD	ABB		ACH550-VD-031A-4+K465	1	2063000893	AHU		7-25-06	5-31-07		
12	VFD	ABB		ACH550-VD-031A-4+K465	1	2063000894	AHU		7-25-06	5-31-07		
13	VFD	ABB		ACH550-VD-031A-4+K465	1	2063000919	AHU		7-25-06	5-31-07		
14	FANCOILS	ETI		VARIOUS	87	VARIOUS	BY ROOM			6-4-07		
15	Walk-in Cooler			REFRIGATEK	1		KITCHEN			6-6-07		
16	Walk-in Freezer			REFRIGATEK	1		KITCHEN			6-6-07		
17	AHU	MCQUAY		VARIUOS	11	VARIOUS	BY BLDG			5-31-07		
18	PUMPS			PRIMARY	2	"		CAMPUS		5-31-07		
19	PUMPS			SECONDARY	2	"		CAMPUS		5-31-07		

This is the entire list of mechanical equipment to be maintained as of \_\_\_\_\_

	QUARTERLY	SEMI-ANNUALLY	ANNUALLY	AS REQUIRED BY PERFORMANCE
<b>MAINTENANCE SCHEDULES</b>				
<b>AIR-COOLED SCREW CHILLER</b>				
<b>GENERAL</b>				
A) Perform controller check, log, and last fault analysis	X			
B) Inspect for refrigerant and oil leaks	X			
C) Check condenser coils, clean debris from around condenser	X			
D) Verify safety controls for proper operation		X		
E) Check refrigerant system for presence of moisture/acid		X		
F) Check condenser fan motors, verify proper operation		X		
G) Inspect thermal insulation for integrity			X	
H) Inspect entire unit for noise, vibration, cleanliness, and paint			X	
<b>ELECTRICAL</b>				
A) Check terminals for tightness, tighten as necessary			X	
A) Clean control panel interior			X	
B) Visually inspect components for signs of overheating	X			
A) Verify compressor heater operation	X			
A) Megger compressor motor every five years				X
<b>REFRIGERATION</b>				
A) Leak test	X			
B) Check sight glasses for clear flow	X			
C) Check filter-drier pressure drop (see manual for spec)	X			
D) Perform compressor vibration test			X	
<b>CONDENSER (AIR-COOLED)</b>				
A) Clean condenser coils			X	
B) Check fan blades for tightness on shaft			X	
C) Check fans for loose rivets and cracks			X	
D) Check coil fins for damage			X	
<b>AHU MAINTENANCE</b>				
A) Check all moving parts for wear		X		
B) Inspect drain pans and clean as necessary	X			
C) Inspect and replace filters	X			
D) Check for tightness:				
Bearing Collar		X		
Sheave		X		
Wheel Hub Setscrews		X		
Sheave Cap screws		X		
Bearing Hold-Down Bolts		X		
E) Relubricate Motor and Fan Shaft Bearings:				
IF unit runs continuously		X		
IF unit runs 12 hours (or less) a day			X	
<b>KEY</b>				

M = Perform According to Manufacturer's Instructions  
 O = Performed by in-house personnel  
 X = Performed by service personnel

<b>VFD MAINTENANCE</b>				
A) Check R7/R8 Enclosure Inlet Air Filter (replace if necessary)	X			
B) Check R7/R8 Enclosure Exhaust Air Filter (replace if necessary)		X		
C) Check and Clean Heatsink		X		
D) Replace Drive Module Fan				X
E) Change Capacitor				X
F) Replace Battery in the Assistant Control Panel				X
<b>PUMP MAINTENANCE</b>				
A) Check Motor Lubrication	X			
B) Check Pump Lubrication	X			
<b>AIR-COOLED SPLIT SYSTEM MAINTENANCE</b>				
<b>ELECTRICAL</b>				
A) Check terminals for tightness, tighten as necessary			X	
A) Clean control panel interior			X	
B) Visually inspect components for signs of overheating	X			
A) Verify compressor heater operation	X			
A) Megger compressor motor every five years				X
<b>REFRIGERATION</b>				
A) Check sight glasses for clear flow	X			
C) Check filter-drier pressure drop (see manual for spec)	X			
D) Perform compressor vibration test			X	
<b>CONDENSER (AIR-COOLED)</b>				
A) Clean condenser coils			X	
B) Check fan blades for tightness on shaft			X	
C) Check fans for loose rivets and cracks			X	
D) Check coil fins for damage			X	
<b>AIR HANDLING UNIT</b>				
A) Check all moving parts for wear		X		
B) Inspect drain pans and clean as necessary	X			
C) Inspect and replace filters	X			
D) Check for tightness:				
Bearing Collar		X		
Sheave		X		
Wheel Hub Setscrews		X		
Sheave Cap screws		X		
Bearing Hold-Down Bolts		X		
E) Relubricate Motor and Fan Shaft Bearings:				
IF unit runs continuously		X		
IF unit runs 12 hours (or less) a day			X	
<b>KEY</b>				
O = Performed by in-house personnel				
X = Performed by service personnel				

	QUARTERLY	SEMI-ANNUALLY	ANNUALLY	AS REQUIRED BY PERFORMANCE
<b>EMCS MAINTENANCE SCHEDULE</b>				
<b>GLOBAL CONTROLLER</b>				
A) Remove accumulated dust from interior and exterior	X			
B) Check operation of Modem	X			
C) Make backup copy of database			X	
D) Check power supply voltage		X		
E) Check battery for proper charge			X	
F) Verify operation of battery backup		X		
G) Check voltage levels on communication trunks			X	
H) Check all electrical connections			X	
<b>TERMINAL CONTROLLERS (AHU AND VAV)</b>				
A) Perform point-point check of all connected points	X			
B) Calibrate all temperature sensors			X	
C) Verify software sequence of operation	X			
D) Check communications to Global Controller		X		
E) Check all switch settings for proper position			X	
<b>OPERATORS TERMINAL</b>				
A) Thoroughly clean filters, remove dust and dirt from int/ext			X	
B) Check all functions	X			
<b>CPU POWER SUPPLY</b>				
A) Verify operation of all software functions		X		
B) Check cables for chafing and broken insulation	X		X	
C) Check power supply voltages and surge protection		X		
A) Performance Evaluation (Superheat Control)			X	
<b>PERFORM SYSTEM BACK-UP</b>				
A) 1 set of disks for owner			X	
B) 1 set of disks for Brooks Air Systems			X	
C) System software updates as they become available	X			

**KEY**

O = Performed by in-house personnel  
X = Performed by service personnel

## **BROOKS AIR SYSTEMS TERMS AND CONDITIONS OF SALE- SERVICE**

This agreement is between Brooks Air Systems, Inc. ("B.A.S.") and the customer. This agreement applies only to equipment installed prior to effective date of this agreement and as described on attachment(s).

**1. PAYMENT AND TAXES** -- Payment shall be net upon receipt of invoice. Brooks Air Systems reserves the right to require cash payment or other alternative method of payment prior to completion of work if Brooks Air Systems determines, in its sole discretion, that the Customer or Customer's assignee's financial condition at any time does not justify continuance of the net 30 days payment term. Brooks Air Systems reserves the right to discontinue its service anytime payments have not been paid as agreed. In addition to the Agreement price, the Customer shall pay Brooks Air systems any applicable taxes or government charges which may be required in connection with the service or material furnished under this Agreement.

**2. WORKING HOURS** -- All services performed under this Agreement including major repairs, are to be provided during Brooks Air Systems normal working hours unless otherwise agreed. Normal working hours (8 a.m. to 5 p.m.) Monday through Friday will apply to all services, unless otherwise stated, including major repairs performed under this agreement. Work performed beyond normal working hours for the convenience of the Customer shall be billed at the difference between overtime and straight time rates. We will respond to all calls within a four (4) hour time period or sooner.

**3. ADDITIONAL SERVICE** - Services or parts requested by Customer in addition to those specified in this Agreement will be provided upon receipt of Customer's written authorization and invoiced at Brooks Air Systems prevailing contract labor rate of \$ 82.00 per hour mechanical, \$ 95.00 controls and parts charges. Additional services or parts shall be supplied under the terms of this Agreement.

- In the event Brooks Air Systems is required to make any repairs and/or replacement and/or emergency calls occasioned by improper operation or misuse of equipment covered by this agreement or any cause beyond Brooks Air Systems control, the customer shall reimburse B.A.S. for expenses incurred in making repairs and/or replacements and/or replacements, and/or emergency calls in accordance with the established rate for performing such service such as calls for thermostat setting, air balancing or equipment resetting.

**4. REPAIR OR REPLACEMENT** - Brooks Air Systems shall not be responsible for repair or replacement of any HVAC or EMCS equipment that is damaged by any disaster or weather catastrophes (ie, floods, tornados, hurricanes, etc.), vandalism, other contractors, maintenance personnel, tenants, or any other party.

Brooks Air Systems is not responsible for the identification, detection, abatement, encapsulating or removal of asbestos, mold, or products or materials containing asbestos, mold, or similar hazardous substances. In the event that Brooks Air Systems encounters any asbestos, mold product or any hazardous material in the course of performing its work, Brooks Air Systems may suspend its work and remove its employees from the project, until such product or material, and any hazards connected with it are abated. Brooks Air Systems shall receive an extension of time to complete its work and compensation for delays encountered as a result of such situation and its correction.

Brooks Air Systems shall not be required to perform tests, install any items of equipment or make modifications that may be recommended or directed by insurance companies, government, and state, municipal or other authority. However, in the event any such recommendations occur, Brooks Air Systems, at its option, may submit a proposal for Customer's consideration in addition to this Agreement. Brooks Air Systems shall not be required to repair or replace equipment that has not been properly maintained.

**5. SUPPLEMENTAL CONDITIONS SECTION** -- This agreement presupposes that all major pieces of equipment are in proper operating condition at the signing of this agreement.

- It shall be the responsibility of Brooks Air Systems to inspect and report to the customer any malfunctions and defects within sixty (60) days after acceptance date. If equipment cannot be operated within this 60 day period due to seasonal conditions or factors beyond our control, the period for the initial inspection will be extended 60 days after the equipment can be operated and checked.
- It shall also be the responsibility of Brooks Air Systems to make recommendations and assist the customer in restoring the equipment to proper operating condition. However, all of the actual restoration costs shall be paid by the customer
- After equipment restoration to original operating conditions has been approved by Brooks Air Systems, coverage will become effective in accordance with the terms of this agreement.

**6. PROPRIETARY RIGHTS**-- During the term of this Agreement and in combination with certain services, Brooks Air Systems may elect to install, attach to Customer equipment, or provide portable devices (hardware and/or software) that shall remain the personal proprietary property of Brooks Air Systems. No devices installed, attached to real property or portable device(s) shall become a fixture of the Customer locations. Customer shall not acquire any interest, title or equity in any hardware, software, processes, and other intellectual or proprietary rights to devices which are used in connection with providing service on Customer equipment.

**7. DELAYS**— Delays caused by conditions beyond the reasonable control of either party shall not be the liability of either party to this Agreement.

**8. CUSTOMER OBLIGATIONS**

Customer shall:

- Provide a safe work environment.
- Permit access to Customer's site, and use of building services including but not limited to: water, elevators, receiving dock facilities, electrical service and local telephone service.
- Keep areas adjacent to equipment free of extraneous material, move any stock, fixtures, walls or partitions that may be necessary to perform the specified service.
- Promptly notify Brooks Air Systems of any unusual operating conditions.
- Upon agreement of a timely mutual schedule, allow Brooks Air Systems to stop and start equipment necessary to perform service.
- Provide the daily routine equipment operation (if not part of this Agreement) including availability of routine equipment log readings.
- Operate the equipment properly and in accordance with instructions.

**9. EQUIPMENT CONDITION & RECOMMENDED SERVICE** – Upon the initial scheduled operating and/or initial annual stop inspection should Brooks Air Systems determines the need for repairs or replacement. Brooks Air Systems will provide the Customer in writing an "equipment condition" report that includes recommendations for corrections and the price for repairs in addition to this Agreement.

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**12. LIMITATION OF LIABILITY**— Under no circumstances shall Brooks Air Systems be held liable for any incidental, special or consequential damages, including loss of revenue, loss of use of equipment or facilities, or economic damages based on strict liability or negligence. Brooks Air Systems shall be liable for damage to property, other than the equipment provided under this Agreement, and to persons, to the extent that Brooks Air Systems negligent acts or omissions directly contributed to such injury or property damage. Brooks Air Systems maximum liability for any reason (except for personal injuries) shall consist of the refunding of all moneys paid by Customer to Brooks Air Systems under this Agreement, subject to right of removal and return of equipment provided under this Agreement to Brooks Air Systems.

B.A.S. and customer assume the non-occurrence of the following contingencies which, without limitation, might render performance by B.A.S. impractical: strikes, fires, war, late or non-delivery by suppliers of B.A.S., and all other contingencies beyond the reasonable control of B.A.S. Under no circumstances shall B.A.S. be liable for any special or consequential damages whether based upon lost goodwill, lost resale profits, work stoppage, and impairment of other goods or otherwise and whether arising out of breach of warranty, breach of contract, negligence or otherwise, except only in the case of personal injury where applicable law requires such liability. But in no event shall B.A.S.'s liability exceed the purchase price paid under this contract.

**13. WASTE DISPOSAL**— Contractor is wholly responsible for the removal and proper disposal of waste oil, refrigerant and any other material generated during the term of this Agreement.

**14. CLAIMS** – Any suits arising from the performance or non-performance of this Agreement, whether based upon contract, negligence, and strict liability or otherwise, shall be brought within one (1) year from the date the claim arose.

**15. SUPERSEDURE, ASSIGNMENT and MODIFICATION**- This Agreement contains the complete and exclusive statement of the agreement between the parties and supersedes all previous or contemporaneous, oral or written, statements. Customer may assign this Agreement only with Brooks Air System's prior written consent. No modification to this Agreement shall be binding unless in writing and signed by both parties.



*RS*

**SUMMARY SHEET**

**RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA**

**AGENDA ITEM NO.** 10d

**DATE OF SCHOOL BOARD MEETING:** April 22, 2014

**TITLE OF AGENDA ITEM:** Grounds Maintenance WGHS/EGHS Athletic Fields

**DIVISION:** Facilities

       This is a CONTINUATION of a current project, grant, etc.

**PURPOSE AND SUMMARY OF ITEM:** Asking the Board to approve the lowest and best bid for Grounds Maintenance WGHS/EGHS Athletic Fields to Mark's Lawn Maintenance, Inc. All references and certifications asked for in bid were checked out and found to be in good standing.

**FUND SOURCE:** 110

**AMOUNT:** \$1,965.00 per month EGHS  
\$1,965.00 per month WGHS

**PREPARED BY:** *W.S.* Wayne Shepard

**POSITION:** Director of Facilities

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**INTERNAL INSTRUCTIONS TO BE COMPLETED BY PREPARER**

       Number of ORIGINAL SIGNATURES NEEDED by preparer.

SUPERINTENDENT'S SIGNATURE: page(s) numbered                   

CHAIRMAN'S SIGNATURE: page(s) numbered                   

Be sure that the COMPTROLLER has signed the budget page.

This form is to be duplicated on light blue paper.





Gadsden County Schools  
Building a Brighter Future

**THE SCHOOL BOARD OF GADSDEN COUNTY  
MAINTENANCE DEPARTMENT  
805 South Stewart Street  
QUINCY, FLORIDA 32351**

**INVITATION TO BID (ITB) & BIDDER'S ACKNOWLEDGEMENT**

**CONTACT & TELEPHONE: Wayne Shepard – Director of Facilities (850) 627-9888**

BID TITLE:	BID NUMBER:
<b>Grounds Maintenance – EGHS &amp; WGHS Athletic Fields</b>	<b>1415-01</b>

BID OPENING DATE & TIME:	<b>March 31, 2014 @ 2:00 P.M.</b>
LOCATION:	<b>Max D. Walker Building 35 Martin Luther King Jr., Blvd., Quincy, FL 32351</b>

**SITE VISITS: Vendor is responsible for visiting each location to determine a fair price for services. Contact Wayne Shepard**

The School District of Gadsden County, Florida, solicits your company to submit a bid on the above referenced goods or services. All terms, specifications and conditions set forth in this request are incorporated by this reference into your response. Bids will not be accepted unless all conditions have been met. In the event of a conflict between the General Bid Terms and Conditions and any Special terms and Conditions attached hereto, the Special Terms and Conditions shall have precedence. All bids must have an authorized signature in the space provided below. **All bids must be sealed and received at the School District's Administration Building at 35 Martin Luther King Jr., Blvd., Quincy, Florida by the "Bid Opening Date & Time" referenced above. All envelopes containing sealed bids must reference the "Bid Title", "Bid Number" and the "Bid Opening Date & Time".** The School District is not responsible for lost or late delivery of Bids by the U.S. Postal Service or other delivery services used by the Bidder. Bids may not be withdrawn for a period of sixty (60) days after the bid opening unless otherwise specified.

**THE FOLLOWING MUST BE COMPLETED, SIGNED, AND RETURNED AS PART OF YOUR BID. BIDS WILL NOT BE ACCEPTED WITHOUT THIS FORM, SIGNED BY AN AUTHORIZED AGENT OF THE BIDDER.**

COMPANY NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

FEDERAL EMPLOYER'S IDENTIFICATION NUMBER (FEIN): \_\_\_\_\_

TELEPHONE NUMBER : \_\_\_\_\_ ( EXT : \_\_\_\_\_ ) FAX NUMBER: \_\_\_\_\_

**EMAIL:** \_\_\_\_\_  
I CERTIFY THAT THIS BID IS MADE WITHOUT PRIOR UNDERSTANDING, AGREEMENT, OR CONNECTION WITH ANY OTHER BIDDER SUBMITTING A BID FOR THE SAME MATERIALS, SUPPLIES, EQUIPMENT OR SERVICES, AND IS IN ALL RESPECTS FAIR AND WITHOUT COLLUSION OR FRAUD. I AGREE TO ABIDE BY ALL TERMS AND CONDITIONS OF THIS BID AND CERTIFY THAT I AM AUTHORIZED TO SIGN THIS BID FOR THE BIDDER.

AUTHORIZED SIGNATURE: \_\_\_\_\_ PRINTED NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

**THE SCHOOL BOARD OF GADSDEN COUNTY RESERVES THE RIGHT TO REJECT ANY OR ALL BIDS AND TO WAIVE ANY TECHNICAL IRREGULARITIES IN THE BIDDING OR BIDDING PROCESS.**

**NOTE: BIDS RECEIVED AFTER THE BID OPENING DATE AND TIME WILL NOT BE ACCEPTED.**

## **I. INTRODUCTION & GENERAL INFORMATION**

The purpose and intent of this Invitation to Bid is to identify qualified vendors and secure firm pricing for the mowing and grounds maintenance of the **sports fields at East Gadsden High School and West Gadsden High School** in the Gadsden County School District (the District) as specified herein.

## **II. GENERAL TERMS AND CONDITIONS**

**NOTE:** The term "Bidder" as used within this Invitation to Bid (ITB) refers to the person, company or organization responding to this ITB. The Bidder is responsible for understanding and complying with the terms and conditions herein.

- A. **GENERAL:** Upon a Bid award, the terms and conditions of this Bid or any portion thereof, may, upon mutual agreement of the parties be extended for one additional term(s) or for additional quantities (all original terms and conditions will remain in effect). Subject to the mutual consent of the parties, the pricing, terms and conditions of this Bid, for the products or services specified herein, may be extended to other municipal, city or county government agencies, school boards, community or junior colleges, or state universities within the State of Florida.
- B. **AWARD: In the event of contract award, this contract shall be awarded to the responsible and Responsive Bidder(s) whose bid is determined to be the most advantageous to the District,** taking into consideration price and other requirements as set forth in the ITB. **It is anticipated that this contract award will be made to one vendor.** Any bidder who is awarded the contract must maintain the same prices as originally bid for the duration of the term of the contract and any subsequent renewal periods. Within one week after receipt of notification of award, successful bidder(s) shall meet with the Facilities Maintenance Supervisor to discuss job procedures and scheduling.

It is anticipated that a recommendation for award will be presented to the School Board for consideration at its regularly scheduled meeting on April 22, 2014.

- C. **TERM:** The initial term of this contract will be from date of School Board approval, on or about July 1, 2014 through June 30, 2015, and may, by mutual agreement between the School Board of Gadsden County, Florida and the awardee(s), upon final School Board approval, be extended an additional one (1) year period and, if needed, ninety (90) days beyond the expiration date of the current contract period. All prices shall be firm for the term of the contract. The successful bidder(s) agree to this condition by signing its bid.
- D. **BID OPENING AND FORM:** Bid openings will be public on the date and time specified on the Bidder's Acknowledgement form. All Bids received after the time indicated will be rejected as non-responsive and returned unopened to sender. Bids by Email, fax, telegram, or verbally by telephone will not be accepted. (To protect any confidential information contained in their Bid, companies must invoke the exemptions to disclosure provided by law in response to the ITB, and must identify the data and other material to be protected, and must state the reasons why such exclusion from public disclosure is necessary).
- E. **BIDDER'S RESPONSIBILITY:** Before submitting their bid, each Bidder is required to carefully examine the ITB specifications and to completely familiarize themselves with all of the terms and conditions that are contained within this request. Ignorance on the part of the bidder will in no way relieve them of any of the obligations and responsibilities which are a part of this ITB.
- F. **OCCUPATIONAL LICENSE:** Vendors submitting a Bid shall meet the Local Occupational License Tax requirements. Vendors with a location outside Gadsden County shall meet local Occupational Tax requirements. It is the vendor's responsibility to resubmit a copy of a new license after expiration or termination of the current license.

**G. WARRANTY:** All goods and services furnished by the Bidder, relating to and pursuant to this ITB will be warranted to meet or exceed the Specifications contained herein. In the event of breach, the Bidder will take all necessary action, at Bidder's expense, to correct such breach in the most expeditious manner possible.

**H. TERMS OF PAYMENT / INVOICING:** The normal terms of payment will be Net 30 Days from receipt and acceptance of goods or services and Bidder's invoice. Itemized invoices, each bearing the Purchase Order Number, dates of service and original sign off sheets will be turned into the Maintenance Department, 805 South Stewart Street, Quincy, FL. 32351.

**NOTE: Contractor is responsible for getting a signature of completion from the principal at each location after every service, on the day of service.**

**I. INSPECTIONS:** The School District will have the right to expedite and inspect any of the work covered by this ITB. All goods or services are subject to the School District's inspection and approval upon arrival or completion. If rejected, they will be held for disposal at the Bidder's risk. Such inspection, or the waiver thereof, however, will not relieve the Bidder from full responsibility for furnishing goods or work conforming to the requirements of this Bid or the Bid Specifications, and will not prejudice any claim, right, or privilege the School District may have because of the use of defective or unsatisfactory goods or work.

**J. STOP WORK ORDER:** The School District may at any time by written notice to the Bidder stop all or any part of the work for this Bid award. Upon receiving such notice, the Bidder will take all reasonable steps to minimize additional costs during the period of work stoppage. The School District may subsequently either cancel the stop work order resulting in an equitable adjustment in the delivery schedule and/or the price, or terminate the work in accordance with the provisions of the ITB terms and conditions.

**K. INSURANCE AND INDEMNIFICATION:** The Bidder agrees to indemnify and hold harmless the School District, its officers, agents and employees from and against any and all claims and liabilities (including expenses) for injury or death of persons or damage to any property which may result, in whole or in part, from any act or omission on the part of the Bidder, its agents, employees, or representatives, or are arising from any Bidder furnished goods or services, except to the extent that such damage is due solely and directly to the negligence of the School District. The Bidder will carry comprehensive general liability insurance, including contractual and product liability coverage, with minimum limits acceptable to the School District. The Bidder will supply certificates evidencing such coverage.

**L. RISK OF LOSS:** The Bidder assumes the following risks: (1) all risks of loss or damage to all goods, work in process, materials and equipment until the delivery thereof as herein provided; (2) all risks of loss or damage to third persons and their property until delivery of all goods as herein provided; (3) all risks of loss or damage to any property received by the Bidder or held by the Bidder or its suppliers for the account of the School District, until such property has been delivered to the School District; (4) all risks of loss or damage to any of the goods or part thereof rejected by the School District, from the time of shipment thereof to Bidder until redelivery thereof to the School District.

**M. LAWS AND REGULATIONS:** Bidders will comply with all applicable Federal, State and Local laws, statutes and ordinances including, but not limited to the rules, regulations and standards of the Occupational Safety and Health Act of 1970, the Federal Contract Work Hours and Safety Standards Act, the Fair Labor Standards Act, the Uniformed Services Employment and Reemployment Rights Act, Chapter 440, Florida Statutes, and the rules and regulations promulgated there under. Bidders agree not to discriminate against any employee or applicant for employment because of race, sex, religion, color, age, disability or national origin

**All agreements as a result of an award hereto and all extensions and modifications thereto and all questions relating to its validity, interpretation, performance or enforcement shall be governed and construed in conformance to the laws of the State of Florida.**

**N. PUBLIC ENTITY CRIMES:** A Bidder, person, or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a bid on a contract to provide any goods or services to a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Florida State Statute, Section 287.017, for CATEGORY TWO for a period of 36 months from the date of being placed on the convicted vendor list.

**O. CONFLICT OF INTEREST:** The award hereunder is subject to the provisions of Chapter 112 Florida Statutes. All Bidders must disclose the name of any company owner, officer, director or agent who is an employee of the School District and/or is an employee of the School District and owns, directly or indirectly, an interest of five percent or more of the company.

**P. TERMINATION: DEFAULT:** The School District may terminate all or any part of a subsequent award by giving notice of default to Bidder, if Bidder: (1) refuses or fails to deliver the goods or services within the time specified; (2) fails to comply with any of the provisions of this Bid or so fails to make progress as to endanger performances, hereunder, or; (3) becomes insolvent or subject to proceedings under any law relating to bankruptcy, insolvency, or relief of debtors. In the event of termination for default, the School District's liability will be limited to the payment for goods and services delivered and accepted as of the date of termination.

**Q. FUNDING OUT, TERMINATION, and CANCELLATION:** Florida School Laws prohibit School Boards from creating obligations on anticipation of budgeted revenues from one fiscal year to another without year-to-year extension provisions in the agreements. It is necessary that fiscal funding out provisions be included in all bids in which the terms are for periods of longer than one year. Therefore, this funding out provision is an integral part of this bid and must be agreed to by all bidders.

**R. CONVENIENCE:** The School District may terminate for its convenience at any time, in whole or in part any subsequent award. In which event of termination for convenience, the School Districts sole obligations will be to reimburse Bidder for (1) those goods or services actually shipped/performed and accepted up to the date of termination, and (2) costs incurred by Bidder for unfinished goods, which are specifically for the School District and which are not standard products of the Bidder, as of the date of termination, and a reasonable profit thereon. In no event is the School District responsible for loss of anticipated profit or will reimbursement exceed the Bid value.

**S. DRUG-FREE WORKPLACE:** Whenever two or more Bids are equal with respect to price, quality, and service, a Bid received from a business that certifies that it has implemented a drug-free workplace program as defined by Section 287.087 Florida Statutes, will be given preference in the award process.

**T. REQUIREMENTS FOR PERSONNEL ENTERING DISTRICT PROPERTY:** Possession of firearms will not be tolerated on School District property; nor will violations of Federal and State laws and any applicable School Board policy regarding Drug Free Workplace to be tolerated. Violations will be subject to the immediate termination of the contract.

**Bidders are advised that they are responsible to ensure that no employee, agent or representative of their company who has been convicted or who is currently under investigation for a crime against children in accordance with Florida Statute 435.04 will enter onto any school site.**

**U. CRIMINAL BACKGROUND CHECKS:** The Legislature passed a law effective September 1, 2005 called the Jessica Lunsford Act. This law requires any employee, contractor, vendor who will (1) be at a school when students are present; or (2) Have direct contact with students; or (3) Have access to or control of school funds; meet Level II Background screening requirements. Level II screening includes fingerprinting, statewide criminal and juvenile justice records checks through the Florida Department of Law Enforcement and federal criminal records checks through the Federal Bureau of Investigation. Level II screening may also include local criminal records checks through the local law enforcement agencies.

School Board Policy 3.68 also requires a background check of all vendors and their employees that meet the above requirements. In addition, all vendors will have a Sexual Predator Check completed if they meet the requirements as listed below.

**SBGC Policy 3.68 is subject to review and change. As a provision of this contract, if awarded, any changes made to this policy will automatically become a part of and be incorporated in this contract. It is the responsibility of the awardee(s) to be aware of any changes that may occur.**

1. **Sexual Predator Check** – All vendors who provide services under this contract will have a Sexual Predator Check completed by Human Resource Department personnel through the Florida Department of Law Enforcement prior to approval of any contract. This check will be performed at the FDLE website listed here: [http://www3.fdle.state.fl.us/sexual\\_predators/](http://www3.fdle.state.fl.us/sexual_predators/)
2. **Level II Background Check** – Any vendor providing services under this contract who will (1) Be at a school; or (2) Have direct contact with students; or (3) Have access to or control of school funds, that person shall have a Level II background check submitted through the School Board of Gadsden County, Human Resource Department 35 Martin Luther King Jr., Blvd. Quincy, FL. 32351. The School Board of Gadsden County shall submit vendor fingerprints and information to the Florida Department of Law Enforcement and the Federal Bureau of Investigations. The SBGC will inform the contractor of the approval/disapproval of the check within approximately one week. If any person does not meet the Board's requirements, as described in Policy 3.68, that individual shall not be allowed to perform services for Gadsden County Schools. The contractor shall be required to pay for all costs of the background reports. If it is discovered, during the period of the contract that the successful contractor substituted an unapproved worker for an approved worker, the vendor's contract may be cancelled immediately at the instructions of the School Board of Gadsden County.

**Contact Sharon Gilcrease at (850) 627-9651 ext. 1244 for information and cost. Remittance shall be in the form of a VISA/MasterCard or money order payable to School Board of Gadsden County.**

**ALL PERSONNEL ARE REQUIRED TO WEAR THE IDENTIFICATION BADGES THAT ARE ISSUED BY THE GADSDEN COUNTY SCHOOL BOARD AT ALL TIMES WHILE ON SCHOOL BOARD PROPERTY.**

**By initialing below you agree to these terms.**

\_\_\_\_\_ **Initial**

**V. CLARIFICATIONS AND INTERPRETATIONS:** The School District reserves the right to allow for clarification of questionable entries, and for the Bidder to withdraw items with obvious mistakes. Any questions concerning terms, conditions or specifications will be directed to the Director of Facilities referenced on the ITB Acknowledgement. Any ambiguities or inconsistencies shall be brought to the attention of the Director of Facilities in writing at least seven workdays prior to the opening date of the Bid. Failure to do so, on the part of the bidder will constitute an acceptance by the bidder of consequent decision. An addendum to the ITB shall be issued and posted for those interpretations that may affect the eventual outcome of this bid. It is the bidder's responsibility to assure the receipt of all addendum issued.

No person is authorized to give oral interpretations of, or make oral changes to the Bid. Therefore oral statements given before the bid opening date will not be binding. The School District will consider no interpretations binding unless provided for by issuance of an addendum. The bidder shall acknowledge receipt of all addenda by signing and enclosing said addenda with their proposal.

**W. DISPUTE RESOLUTION CLAUSE:** In the event a dispute occurs, or a clarification of contract terms becomes necessary, please indicate your company representative for arbitration proceedings.

Representative's Name \_\_\_\_\_

Telephone  
Number \_\_\_\_\_

Our District Representative will be: Deborah Minnis  
Ausley & McMullen  
(850) 224-9115

**X. POSTING OF BID RECOMMENDATIONS/TABULATIONS:**

Bid recommendations and tabulations will be posted for review by interested parties at the Max D. Walker Building, located at 35 Martin Luther King Jr., Blvd. Quincy, Florida, on/or about April 1, 2014 and will remain posted for a period of 72 hours or three business days, whichever is later. Bidders shall be notified by certified mail, return receipt requested, of any change in the date established herein for posting of Bid Recommendations/Tabulations. In the event the date of the posting of Bid Recommendations/Tabulations is changed, the notification letter shall provide the new date upon which Bid Recommendations/Tabulations will be posted.

**Y. PROTESTING BID SPECIFICATIONS:**

Any person desiring to protest the conditions/specifications in this Bid or any Addenda thereto, shall file a written notice of protest within 72 hours after receipt of the Bid or Addendum and shall file a formal written protest within ten days after the date the notice of protest was filed. Saturdays, Sundays and legal holidays days during which the school district administration is closed shall be excluded in the computation of the 72 hour period. If the tenth calendar day falls on a Saturday, Sunday or legal holiday, the formal written protest must be received on or before 4:00 p.m. of the next calendar day that is not a Saturday, Sunday, legal holiday, or day during which the school district administration is closed.

**Notices of protest and formal written protests required by School Board policy 7.701, shall be considered filed when delivered to and received at the address provided on page one (1) of this ITB. Transmission by facsimile, email, telegram or word of mouth is not acceptable.**

**Failure to file a notice of protest or to file a formal written protest within the time prescribed by Section 120.57(3), Florida Statutes, shall constitute a waiver of proceedings under Chapter 120, Florida Statutes and School Board policy 7.701.**



- Z. **CONTACT**: All questions for additional information regarding this ITB must be addressed to the Director of Facilities as noted on page one. Prospective bidders shall not contact any member of the Gadsden County School Board, Superintendent, or staff regarding this bid prior to posting of the final tabulation and award recommendation. Any such contact shall be cause for rejection of your proposal.

### **III. SPECIAL CONDITIONS**

These "SPECIAL CONDITIONS" are in addition to or supplement Section II GENERAL TERMS AND CONDITIONS. In the event of a conflict these SPECIAL CONDITIONS shall have precedence.

- A. **AGREEMENT FORM**: The basis of our agreement shall be the terms and conditions of this Invitation to Bid and the Bidder's response thereto. Any alternative agreement form or document required by Bidder shall be attached with their response hereto. The District reserves the right to reject any terms or conditions in conflict with those set by this ITB or negotiate mutually acceptable terms or conditions as it deems appropriate.
- B. **FIRM OFFER**: Any bid may be withdrawn up until the date and time set for the opening of the bids. Any bid not so withdrawn shall constitute an irrevocable offer to provide the District the services/products set forth in this ITB. Such offer shall be held open for a period of sixty days from ITB opening date or until one of the bids has been awarded by the District.
- C. **CLARIFICATIONS**: The District reserves the right to request clarification of information submitted and/or request related additional information or materials from the Bidder, to accurately evaluate the bid. Such information shall not materially change the original bid response nor serve to allow the addition of new information that was not originally expressed or referenced.
- D. **INDEMNIFICATION**: Successful bidder agrees to indemnify and save harmless the School Board of Gadsden County, its officers, agents and employees from and against any demand, claim, suit, loss, expense, or damage which may be asserted against any of them in their official or individual capacities by reason of any alleged damage to property, or injury to, or death of any person arising out of, or in any way related to, any action or inaction of the successful bidder (including its sub-contractors, officers, agents, and employees) in the performance or intended performance of this agreement, or the maintenance of any facility, or the operation of any program, which is the subject of, or is related to the performance of this agreement. **The obligations of the successful bidder pursuant to this paragraph shall not be limited in any way by any limitation in the amount or type of proceeds, damages, compensation, or benefits payable under any policy of insurance or self-insurance maintained by or for the use and benefit of the successful bidder.**
- E. **TERMINATION**: Except as it relates to any warranty provision established by this agreement and in addition to any and all rights by the parties in law or equity, the Successful Bidder may terminate this agreement at any time with thirty (30) days written notice to other without penalty. The District may unilaterally terminate this agreement in writing at any time. In the event of termination, the Contractor (a) shall be responsible for the continued service up to the date of termination, or (b) may mutually be canceled without penalty upon agreement by both parties. The District shall be responsible for payment of all goods, materials, and services ordered, received and accepted prior to termination.
- F. **GOVERNING LAW AND VENUE**: All legal proceedings brought in connection with this contract shall only be brought in a state or federal court located in the State of Florida. Venue in state court shall be in Gadsden County, Florida. Venue in federal court shall be in the United States District Court, Northern District of Florida, Tallahassee division. Each party hereby agrees to submit to the personal jurisdiction of these courts for any lawsuits filed there against such party arising under or in connection with this contract. In the event that a legal proceeding is brought for the enforcement of any term of the contract, or any right arising there from, the parties expressly waive their respective rights to have such action tried by jury trial and hereby consent to the use of non-jury trial for the adjudication of such suit. All questions concerning the validity, operation, interpretation, construction and enforcement of any terms or conditions of this contract shall in all respects be governed by and determined in accordance with the laws of the State of Florida without giving effect to the choice of law principles thereof and unless preempted by federal law.

**IV. INSTRUCTIONS TO BIDDERS AND SCOPE OF WORK:**

- A. **GENERAL:** These specifications shall be construed as the minimum acceptable standards for the mowing of **All Athletic Fields at East Gadsden High School and West Gadsden High School** in the School District of Gadsden County, Florida.
- B. **FAMILIARITY WITH SITES:** Vendor is responsible for their own site visit to each location in order to determine a fair price for their services. Contact the Director of Facilities with any questions.
- C. **REFERENCES:** Each bidder is required to submit a list of **(5) five commercial references** using the format on the attached "Vendor Reference Forms" **and have at least (5) five years commercial experience.** Bidder must be the prime contractor for each customer/contract referenced. All references shall be for work performed over the last year at commercial, multi-residential developments and/or institutional complexes for contracts of comparable size. Newly formed companies, corporations, joint ventures; etc. may use an incorporator as a referenced entity. At least one contract/customer shall have been serviced for a minimum of one year. Failure to do so will result in the bidder not being considered for award. Unsatisfactory references may result in the bidder not being considered for award.
- D. **CRIMINAL BACKGROUND CLEARANCE:** Pursuant to School Board Policy 3.68, Criminal Background and Employment and the Florida Legislated Jessica Lunsford Act, any personnel deployed to school sites as a result of contract award must have received a Level II criminal background screening and clearance. See section U, pg 5 of these specifications for detailed information concerning the procedures pertaining to this requirement.
- E. **LABOR AND MATERIAL:** The bidder shall provide and pay for all labor, materials, equipment, tools, transportation and other facilities and services as required for the proper execution and completion of the work.
- F. **SAFETY:** The bidder shall take all reasonable precautions for safety and shall provide all reasonable protection to prevent damage, injury or loss to persons and employees of the District. The bidder shall comply with all Occupational Safety and Health Administration (OSHA) regulations, as they are applicable.
- G. **EMERGENCIES:** In any emergency affecting the safety of persons and property, the bidder shall act immediately to prevent threatened damage, injury or loss. Any such emergency must be reported to the District not later than twenty-four (24) hours from the time that the emergency is discovered by the bidder.
- H. **EQUIPMENT:** All equipment operated on any school district site shall be equipped with guards and/or shields to minimize the possibility of injury to the operator, the general public or property. Machinery not equipped with safety devices shall not be operated at any facility housing students, staff or other personnel. No power equipment shall be operated in the vicinity of students during periods such as class change, recess, fire drills, etc. Proper operation of equipment is the contractor's responsibility.

**The Gadsden County School Board is requiring that the vendor have commercial grade mowers, reel mowers and that all weed eaters and other equipment deemed necessary to perform grounds maintenance will be commercial grade. In addition the vendor shall employ a minimum of (4) four fulltime employees. You agree to these terms by initialing below.**

\_\_\_\_\_ Initial

- I. **SITE ADDITIONS/DELETIONS:** Sites for work may be added or deleted as required for the duration of the contract. Approval is required by the Director of Facilities before work commences related to the items contained in this contract. When a site is added the cost to maintain that site shall be negotiated at that time, but must be in relation to other sites of similar size and design.
- J. **CORRECTION OF WORK:** The bidder shall promptly correct all work rejected by the District as defective or as failing to conform to these contract specifications.
- K. **SMOKING AND TOBACCO PRODUCTS:** Smoking and the use of tobacco products are prohibited on Gadsden County School Board property, **including all buildings and grounds.**
- L. **IDENTIFICATION:** **I.D. badges and/or company logos on shirts or hats are required on all bidder's personnel at all times.**
- M. **ATTIRE:** Proper attire shall be worn at all times!
- 1. Every employee MUST wear GCSB ID badges at all times while on School Board property.**
2. Shirts shall be worn while on school property at all times. (No tank tops or undershirts will be permitted).
3. Clothing displaying nudity, obscene language, obscene symbols or pro-drug slogans are prohibited.
4. Proper shoes to insure the individual's safety shall be worn at all times.
- N. **FRATERNIZATION:** Contractors' personnel shall not fraternize with school staff or students.
- O. **WORK SCHEDULE DELAYS:** When conditions at any site are unfavorable for the completion of mowing/maintenance on the scheduled day because of excusable delays due to no fault of the contractor or due to acts of nature, the contractor may cease their attempt to complete work until conditions are favorable. This delay shall not nullify the contractor's responsibility to perform within a reasonable time after conditions improve sufficiently to finish the work. Should contractors fall behind schedule for any reason, including rain, they will advise the school principal and the Director of Facilities **immediately** of the intended adjustment date prior to performing the work on the adjusted date.

**\*\* IT IS ADVISED TO MEET WITH THE PRINCIPAL AT EACH SCHOOL TO SET A TIME FOR SERVICE THAT IS AGREEABLE TO BOTH THE CONTRACTOR AND THE PRINCIPAL. SOME LOCATIONS ARE NOT AVAILABLE DURING NORMAL SCHOOL HOURS.**

**P. WORK SCHEDULE:**

1. **MOWING AND GROUNDS MAINTENANCE:** All **Athletic Fields** will be mowed and cleared of trash and debris **with every service** on a weekly schedule beginning July 1, 2014 through June 30, 2015.
2. This includes all specified areas. All paved areas including sidewalks that have grass and weeds growing up through must be trimmed. See the Director of Facilities for keys.

The Director of Facilities or his designee will call for maintenance to be done if any changes occur to the established schedule.

3. **TRIMMING, PRUNING, EDGING AND MULCHING:** The trimming and pruning of hedges, shrubs, trees and weeding of flower beds will be done **monthly**. Edging all walkways will be done monthly.

**All fence lines are to be sprayed monthly.**  
**Mulch flower beds in March and August.**

**Q. SCOPE OF WORK/WORK SCHEDULE—Athletic Fields “ONLY”**

This includes the Athletic Fields and Practice Fields and the area around the Football Field, Baseball Fields, and Softball fields. These areas include Centipede, Bahia, and Bermuda Grass. The specifications below are specific to the Athletic Fields. **The common surrounding areas that reside within the Athletic Field perimeter must follow the same schedule as the Athletic Fields and be cut once per week.**

1. Sports Turf Care
  - a. All Bermuda lawn areas shall be mowed once per week from July through June. Mowing shall be performed at a minimum frequency of 52 times per year. No extra cuts for games—cuttings must coincide with game schedules during playing season.
  - b. All Bermuda lawn areas shall be fertilized with a 10-10-10 Blended Slow Release or Equal product three (3) times a year (March/June/October).
  - c. All Bermuda lawn areas will be top dressed once per year in November.
  - d. All Bermuda lawn areas will receive aeration twice per year in November and April.
  - e. All Bermuda lawn areas will be over seeded using a perennial rye seed at a rate of 8 lbs per 1,000 sq. ft. in November.
  - f. Additional top dressing shall occur (due to erosion) at a rate of 2” of sand or top soil.
  - g. School Board will furnish sand for top dressing and additional dressing.
2. Spray fence lines monthly or more often as needed to keep any and all grass from growing in fence. **All sports fields—no exceptions (football, baseball, softball, and practice fields if they have fencing).**
3. Edge running track at East Gadsden High School and West Gadsden High School each time field is cut or at least two (2) times per month.
4. Before starting to mow fields, remove any items on fields so as not to have to mow around them, pick up all paper & other trash, and replace moved items back onto field as found when finished.
5. **PRIOR TO EVERY SERVICE, THE CONTRACTOR MUST SIGN IN AT THE FRONT OFFICE BEFORE STARTING WORK.**

6. Mow all areas leaving clippings on the lawn so long as no readily visible clumps remain on the grass surface 48 hours after mowing, otherwise, clippings should be collected and disposed of by the contractor. **All mower blades must be sharpened and alignment adjusted on a regular basis so as NOT to damage grass or leave uneven cut.** Mowing pattern shall create straight lines when possible.
7. All debris generated by the contractor shall be removed from sites. Contractor will remove all trash and debris from inlets and fence lines. **Dumpster containers and other on-site trash disposal containers will NOT be used by the contractor to dispose of debris. State and local ordinances regarding disposal of landscape debris must be followed.**
8. Visual inspection of the grounds. Any problems with the fences/gates, erosion, etc. should be reported to the Director of Facilities immediately.
9. Keys for all gates may be obtained from the Director of Facilities.

\_\_\_\_\_ Initial

**R. IRRIGATION SYSTEM (If Applicable)**

All irrigation systems shall be inspected and adjustments made at a frequency of once (1) per month.

Inspections shall consist of the following:

- Active each zone
- Visually check for damaged heads or ones needing repair
- Ensure the operation and coverage is sufficient for proper healthy landscape growing conditions.
- For repair work—contractor will present GCSB with itemized proposal of cost. Purchase order must be received by contractor before repair work is done.

**S. LITTER AND DEBRIS REMOVAL**

Contractor at a frequency of no less than once per week must police all lawn and shrub areas for removal of litter and debris.

**T. SCHEDULE**

At least seven (7) calendar days prior to commencement of the contract, the awarded contractor shall submit a permanent schedule listing the day of the week services shall be performed (weather permitting). Any amendment to the schedule must be requested in writing to the school contact person prior to implementation, and a copy of the “approved” schedule sent to the Director of Facilities.

**U. MONTHLY SIGN-OFF SHEET**

The awarded contractor shall submit a completed copy of the Monthly Sign-off attached herein as Appendix B with their monthly invoice for the school site showing that each required function (mowing, edging, weed eating, etc.) was satisfactorily completed on each visit or stating why completion was not possible. The checklist should also show any problem areas and include comments or suggestions that may enhance the appearance of the site or be of general interest to the District. No payment will be made unless the above is adhered to.

**V. AMENDED SCOPE OF WORK**

The District reserves the right to re-negotiate the monthly fee for lawn care services in the event that the existing scope of work is changed for any reason. Any revisions to the original contract or price changes shall be negotiated through the Maintenance Department in the form of an Addendum to the bid documents and must be agreed to in writing by the District and the Contractor. The District reserved the right to re-bid this project if the changes in the scope of work so dictates. Payments will not be made for work not completed.

**W. UNSATISFACTORY WORK**

The vendor shall correct unsatisfactory work within 24 HOURS of notification by the School Board.

**X. CONTACT PERSON**

The contact person shall be the Principal or his/her designee. Only the School Contact Person or the Director of Facilities may authorize changes in the scope of work.

**V. QUALIFICATIONS FOR SPORTS FIELD CONTRACTORS**

**The Qualifications that the School Board of Gadsden County Selection Committee will be looking for, but are not limited to are as follows:**

- 1. Must have ornamental and turf state category 3 commercial license.**
- 2. Must be familiar with filling out water reports required by Northwest Florida Water Management District for water consumption.**
- 3. Must be familiar with all types of fertilizers.**
- 4. Must possess a Limited Commercial Fertilizer Applicator Certificate issued by the Florida Department of Agriculture and Consumer Services**
- 5. Must be familiar with all aspects of irrigation system maintenance.**
- 6. Must have commercial (reel) mowers for mowing fields.**

**APPENDIX A**

**TABLE 1 CUTTING HEIGHTS FOR TURF GRASS**

<b><u>WARM SEASON GRASSES</u></b>	<b><u>SUMMER</u></b>	<b><u>WINTER</u></b>
Bermuda Grasses	1"—2"	1"—2"
Carpet Grasses	1"—2"	1"—2"
<b><u>WARM SEASON GRASSES</u></b>		
Centipede Grasses	1"—2"	1"—2"
St. Augustine Grasses	1"—2"	1"—2"
Zoysia Grasses	2"—3"	2"—3"
<b><u>COOL SEASON GRASSES</u></b>		
Tall Fescue Alta	2"—3"	3"—4"
Kentucky 31	2"—3"	3"—4"
Red Fescue	1"—2"	3"—4"
Kentucky Bluegrass	1"—3"	2"—4"
Rye Grasses	1"—2"	2"—3"
Bent Grasses	½"—1"	1"—2"



**APPENDIX B**

**SCHOOL DISTRICT OF GADSDEN COUNTY**

LAWN CARE SERVICE

MONTHLY SIGN-OFF SHEET

Awarded Vendor: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

-----  
School Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Purchase Order #: \_\_\_\_\_

Bid#: \_\_\_\_\_

B/A Date: \_\_\_\_\_

Day/Date Lawn Care Services Performed for Current Month:

Week 1	Week 2	Week 3	Week 4	Week 5
_____ Day of Week	_____ Day of Week	_____ Day of Week	_____ Day of Week	_____ Day of Week
_____ Date	_____ Date	_____ Date	_____ Date	_____ Date

-----  
**Please read bid Specifications and Addenda for Service Requirements**

All lawn care services were completed satisfactorily for this month, OK to pay invoice.

Month of Service: \_\_\_\_\_

Vendor Invoice Number: \_\_\_\_\_

\_\_\_\_\_  
Vendor Representative (Signature)

\_\_\_\_\_  
School Representative (Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**APPENDIX B**

Description of Service Performed—Please Check each week that work was completed.

**Work required each visit:**

	<u>Week 1</u>	<u>Week 2</u>	<u>Week 3</u>	<u>Week 4</u>	<u>Week 5</u>
Mowing	_____	_____	_____	_____	_____
Edging	_____	_____	_____	_____	_____
Weed Eating	_____	_____	_____	_____	_____
Blowing	_____	_____	_____	_____	_____

**Work Required Monthly**

**Date Work was Performed**

All fence lines sprayed	_____
Prune Shrubs/Trees (max 8 ft.)	_____
Weed Removal	_____
Herbicides/Pesticides	_____

**Additional Work “Authorized” by School Contact Person**

**Date Performed**

_____	_____
_____	_____
_____	_____

**Additional Comments:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SITE LOCATIONS**

<p><b>East Gadsden High School 27001 Blue Star Hwy. Havana, FL 32333</b></p> <p><b>Football Field—2.5 Acres Baseball Field—2.7 Acres Softball Field—1.25 Acres Practice Field—2.0 Acres Area Around Track/Football Field</b></p>	<p><b>West Gadsden High School 200 Providence Road Quincy, FL 32351</b></p> <p><b>Football Field—2.5 Acres Baseball Field—2.7 Acres Softball Field—1.25 Acres Practice Field—2.0 Acres Area Around Track/Football Field</b></p>
--	---

**ALL AREAS ARE TO BE SERVICED WEEKLY.**

**PLEASE PROVIDE A MONTHLY COST FOR ALL WORK DESCRIBED IN THIS  
BID.**

**PLEASE BID ACCORDINGLY.**

**ANY CHANGES TO SERVICE WILL BE AT THE DISCRETION OF  
THE DIRECTOR OF FACILITIES.**

**VENDOR BID SHEET**

**BID # 1415-01**

**GROUNDS MAINTENANCE OF SPORTS FIELDS AT  
EAST GADSDEN HIGH SCHOOL AND WEST GADSDEN HIGH SCHOOL**

The Gadsden County School Board is requesting a monthly cost for all work described in this Invitation to Bid.

<p><b>EAST GADSDEN HIGH SCHOOL ATHLETIC FIELDS</b></p> <p><b>BID</b> _____</p> <p><b>PER MONTH</b></p>	<p><b>WEST GADSDEN HIGH SCHOOL ATHLETIC FIELDS</b></p> <p><b>BID</b> _____</p> <p><b>PER MONTH</b></p>
--	--

**THE SCHOOL BOARD OF GADSDEN COUNTY  
MAINTENANCE DEPARTMENT  
805 S. STEWART STREET  
QUINCY, FL. 32351  
BID NO. 1415-01 GROUNDS MAINTENANCE-EGHS AND WGHS ATHLETIC FIELDS  
REFERENCE FORM**

Please provide all requested information for each reference.

Company Name: \_\_\_\_\_  
Business Type: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date last supplied services: \_\_\_\_\_



Company Name: \_\_\_\_\_  
Business Type: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date last supplied services: \_\_\_\_\_



Company Name: \_\_\_\_\_  
Business Type: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date last supplied services: \_\_\_\_\_

**THE SCHOOL BOARD OF GADSDEN COUNTY  
MAINTENANCE DEPARTMENT  
805 S. STEWART STREET  
QUINCY, FL. 32351  
BID NO. 1415-01 GROUNDS MAINTENANCE-EGHS AND WGHS ATHLETIC FIELDS  
REFERENCE FORM**

Please provide all requested information for each reference.

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

Business Type: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone: \_\_\_\_\_

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

Date last supplied services: \_\_\_\_\_



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

Business Type: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone: \_\_\_\_\_

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

Date last supplied services: \_\_\_\_\_



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

Business Type: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone: \_\_\_\_\_

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

Date last supplied services: \_\_\_\_\_

**b. with respect only to the Workers' Compensation insurance, the company must be:**

1. Authorized as a group self-insurer pursuant to Florida Statutes or
2. Authorized as a commercial self-insurance fund pursuant to Florida Statutes

Neither approval nor failure to disapprove the insurance furnished by the Vendor to the School Board shall relieve the Vendor of the Vendor's full responsibility to provide insurance as required by this Contract.

The Vendor shall be responsible for assuring that the insurance remains in force for the duration of the contractual period; including any and all option years that may be granted to the Vendor. The certificate of insurance shall contain the provision that the School Board be given no less than thirty (30) days written notice of cancellation. If the insurance is scheduled to expire during the or renewed certificates of insurance to the School Board at a minimum of thirty (30) calendar days in advance of such expiration.

Unless otherwise notified, the certificate of insurance must be delivered to the following address:

The School Board of Gadsden County  
Maintenance Department  
35 Martin Luther King Jr., Blvd.  
Quincy, Florida 32351

**The name and address of The School Board of Gadsden County, as shown directly above, must be listed as Certificate Holder on the Certificate of Insurance as well as clearly noted as "Additional Insured".**

**The Vendor may be in default of this Contract for failure to maintain the insurance as required by this Contract.**

**Any questions and/or inquiries should be directed to Wayne Shepard at (850) 627-9888.**

**Initial** \_\_\_\_\_

## DRUG FREE WORKPLACE

Preference shall be given to businesses with drug-free workplace programs. Whenever two or more bids that are equal with respect to price, quality, and service are received for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process.

Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this business complies fully with the above requirements.

Vendor's Signature \_\_\_\_\_ Date \_\_\_\_\_



**SWORN STATEMENT PURSUANT TO  
SECTION 287.133(3) (a), FLORIDA STATUTES, ON ENTITY CRIMES**

This sworn statement is submitted to The School Board of Gadsden County, Florida

By \_\_\_\_\_  
(Print individual's name and title)

For \_\_\_\_\_  
(Print name of entity submitting sworn statement)

Whose business address is:

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

and (if applicable) its Federal Employer Identification number (FEIN) is: \_\_\_\_\_

If the entity has no FEIN, include the Social Security number of the Individual signing this sworn Statement \_\_\_\_\_

1. I understand that a "public entity crime" as defined in Paragraph 287.133(1) (g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid or contract for goods or services to be provided to any public entity or an agency or political subdivision or any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
2. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1) (b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
3. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
  - A. A predecessor or successor of a person convicted of a public entity crime; or
  - B. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding thirty-six (36) months shall be considered an affiliate.
  - C. I understand that a "person" as defined in Paragraph 287.133.(1)(e), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors,

executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

4. The statement, which I have marked below, is true in relation to the entity submitting this sworn statement. (Indicate which statement applies).

neither the entity submitting this sworn statement, nor any of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. (Attach a copy of the final order).

**I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH ONE (1) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED.**

**I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FLORIDA STATUTES, FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.**

\_\_\_\_\_  
Signature

For

\_\_\_\_\_  
STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to or affirmed and signed before me on this \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC - STATE OF FLORIDA

\_\_\_\_\_  
Print, type, or stamp commissioned name of notary

personally known  
 produced identification  
Type of identification produced \_\_\_\_\_

**MINORITY-OWNED FIRM OR COMPANY**

I (we) do hereby certify that my (our) business qualifies as a minority-owned firm or company. Please check one of the following applicable:

- BLACK
- HISPANIC
- AMERICAN INDIAN-ALASKAN NATIVE
- FEMALE
- PHYSICALLY OR MENTALLY DISABLED
- ASIAN-PACIFIC ISLANDER

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

NAME OF BUSINESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

**Non-Minority Firm or Company**

I (we) do hereby certify that my (our) business does not qualify as a minority-owned firm or company.

SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

NAMES OF BUSINESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

NOTE: Pursuant to Section 289.094, Florida Statutes, it is unlawful for any individual to falsely represent any entity as a minority-owned firm or company for purpose of qualifying for certification as such an enterprise under any program, which, in compliance with federal law, is designed to assist minority-owned firms or companies in receipt of contracts for the provision of goods and services.

**\*NOTE: THIS CERTIFICATION MUST BE SIGNED AND RETURNED WITH YOUR BID IN ORDER FOR YOUR BID TO BE VALID.**

## INDEMNIFICATION AND INSURANCE

In consideration of this Contract, if awarded, the Vendor agrees without reservation to the indemnification and insurance clauses contained herein. These clauses are attached to and form a part of

### BID NO. 1415-01 GROUNDS MAINTENANCE-EGHS AND WGHS ATHLETIC FIELDS

#### INDEMNIFICATION

The Vendor shall hold harmless, indemnify and defend the indemnitees (as hereinafter defined) against any claim, action, loss, damage, injury, liability, cost or expense of whatsoever kind or nature including, but not by way of limitation, attorneys' fees and court costs arising out of or incidental to the performance of this Contract (including goods and services provided thereto) by or on behalf of the Vendor, whether or not due to or caused in part by the negligence or other culpability of the indemnity, excluding only the sole negligence or culpability of the indemnity. The following shall be deemed to be indemnitees: The School Board of Gadsden County, Florida and its members, officers and employees.

#### INSURANCE

Prior to being recommended for award, the Vendor has five business days after notification to submit proof of insurance as required herein. Failure to submit a fully completed certificate of insurance signed by an authorized representative of the insurer providing such insurance coverage's may cause the Vendor to be considered non-responsive and not eligible for award of the Contract. The insurance coverage's and limits shall meet, at a minimum, the following requirements:

<b>1. Commercial General Liability Insurance in an amount not less than \$1,000,000 combined single limit per occurrence for bodily injury and property damage.</b>
---

<b>2. Automobile Liability Insurance covering all owned, non-owned and hired vehicles used in connection with the operation of the Vendor, in an amount not less than \$1,000,000 combined single limit per occurrence for bodily injury and property damage.</b>
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<b>3. Proof of Workers' Compensation Insurance for all employees as required by Florida Statutes or a Certificate of Exemption from the Division of Workers' Compensation/FL Dept. Financial Services.</b>
--

<b>The School Board of Gadsden County, Florida" must be listed as additional insured on all liability coverage's except Workers' Compensation.</b>
--

The insurance coverage required shall include those classifications, as listed in standard liability insurance manuals, which most nearly reflect the operations of the Vendor.

All insurance policies shall be issued by companies with either of the following qualifications:

a. The company must be:

1. Authorized by subsisting certificates of authority by the Department of Insurance of the State of Florida or
2. An eligible surplus lines insurer under Florida Statutes. In addition, the insurer must have a Best's Rating of "A" or better and a Financial Size Category of "IV" or better according to the latest edition of Best's Key Rating Guide, published by A.M. Best Company.

Initial received \_\_\_\_\_

## Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <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) ▶ _____  <input type="checkbox"/> Other (see instructions) ▶ _____	
	Exemptions (see instructions):  Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code		
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 the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

<b>Social security number</b>		
-		
<b>Employer identification number</b>		
-		

### 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 on page 3.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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### General Instructions

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

**Future developments.** The IRS has created a page on [IRS.gov](http://IRS.gov) for information about Form W-9, at [www.irs.gov/w9](http://www.irs.gov/w9). Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

#### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

**Note.** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity.
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust, and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

### Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code* on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships* on page 1.

**What is FATCA reporting?** The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code* on page 3 and the Instructions for the Requester of Form W-9 for more information.

## Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

## Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

## Specific Instructions

### Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

**Sole proprietor.** Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name/disregarded entity name" line.

**Partnership, C Corporation, or S Corporation.** Enter the entity's name on the "Name" line and any business, trade, or "doing business as (DBA) name" on the "Business name/disregarded entity name" line.

**Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulation section 301.7701-2(c)(2)(iii). Enter the owner's name on the "Name" line. The name of the entity entered on the "Name" line should never be a disregarded entity. The name on the "Name" line must be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on the "Name" line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on the "Business name/disregarded entity name" line. If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

**Note.** Check the appropriate box for the U.S. federal tax classification of the person whose name is entered on the "Name" line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

**Limited Liability Company (LLC).** If the person identified on the "Name" line is an LLC, check the "Limited liability company" box only and enter the appropriate code for the U.S. federal tax classification in the space provided. If you are an LLC that is treated as a partnership for U.S. federal tax purposes, enter "P" for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter "C" for C corporation or "S" for S corporation, as appropriate. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the "Name" line) is another LLC that is not disregarded for U.S. federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the "Name" line.

**Other entities.** Enter your business name as shown on required U.S. federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name/disregarded entity name" line.

## Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the *Exemptions* box, any code(s) that may apply to you. See *Exempt payee code* and *Exemption from FATCA reporting code* on page 3.

**Exempt payee code.** Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends. Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.

**Note.** If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following codes identify payees that are exempt from backup withholding:

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 5 <sup>2</sup>
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

<sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.  
<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency.

**Exemption from FATCA reporting code.** The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements.

- A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
- B—The United States or any of its agencies or instrumentalities
- C—A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Reg. section 1.1472-1(c)(1)(i)
- E—A corporation that is a member of the same expanded affiliated group as a corporation described in Reg. section 1.1472-1(c)(1)(i)
- F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

- G—A real estate investment trust
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940
- I—A common trust fund as defined in section 584(a)
- J—A bank as defined in section 581
- K—A broker
- L—A trust exempt from tax under section 664 or described in section 4947(a)(1)
- M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

**Part I. Taxpayer Identification Number (TIN)**

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note.** See the chart on page 4 for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at [www.ssa.gov](http://www.ssa.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/businesses](http://www.irs.gov/businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting [IRS.gov](http://IRS.gov) or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note.** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

**Part II. Certification**

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the "Name" line must sign. Exempt payees, see *Exempt payee code* earlier.

**Signature requirements.** Complete the certification as indicated in items 1 through 5 below.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

**What Name and Number To Give the Requester**

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee <sup>3</sup> The actual owner <sup>1</sup>
5. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A))	The grantor <sup>4</sup>
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(B))	The trust

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or "DBA" name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

\*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

**Secure Your Tax Records from Identity Theft**

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

**Protect yourself from suspicious emails or phishing schemes.** Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: [spam@uce.gov](mailto:spam@uce.gov) or contact them at [www.ftc.gov/idtheft](http://www.ftc.gov/idtheft) or 1-877-IDTHEFT (1-877-438-4338).

Visit [IRS.gov](http://IRS.gov) to learn more about identity theft and how to reduce your risk.

**Privacy Act Notice**

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.



**BID SUBMITTAL REQUIREMENTS/ CHECKLIST:** To help ensure that you include all the submittals necessary to complete a thorough evaluation of your Bid, we suggest that you use this checklist as a reminder. Please include this checklist along with your response. Items checked "Required" must be submitted with your response or your Bid will be declared non-responsive.

Verified	Required	Description of Submittal	Included
	<input checked="" type="checkbox"/>	ITB – Bidder Acknowledgement Form – Page 1	
	<input checked="" type="checkbox"/>	Occupational Licenses – Page 2, Section F	
	<input checked="" type="checkbox"/>	Dispute Resolution Contact - Page 6, Section W	
	<input checked="" type="checkbox"/>	Vendor Reference Form – Pages 19-20	
	<input checked="" type="checkbox"/>	Worker's Compensation Insurance—Page 21	
	<input checked="" type="checkbox"/>	Bid Proposal Form - Page 18	
	<input checked="" type="checkbox"/>	Drug Free Workplace Certification – Page 22	
	<input checked="" type="checkbox"/>	Public Entity Crime Statement – Page 5, Section U	
	<input checked="" type="checkbox"/>	Local Small Business Certification – Page 25	
	<input checked="" type="checkbox"/>	Sworn Affidavits – Jessica Lundsford Act – Pages 23-24	
	<input checked="" type="checkbox"/>	Indemnification and Insurance – Page 26	
	<input checked="" type="checkbox"/>	W-9 Form – Page 27	
		Bid Submittal Requirements Checklist – Page 31	

# The School Board of Gadsden County



*"Building A Brighter Future"*

**Reginald C. James**  
SUPERINTENDENT  
OF SCHOOLS

35 MARTIN LUTHER KING, JR. BLVD.  
QUINCY, FLORIDA 32351  
TEL: (850) 627-9651  
FAX: (850) 627-2760  
www.gcps.k12.fl.us

## Addendum #1

### Grounds Maintenance—EGHS & WGHS Athletic Fields Bid #1415-01

Opening Date: March 31, 2014 at 2:00 P.M.

**Please be advised of this change to the bid package:**

Please **remove/disregard** the following from your bid package:

- Page 10
- Section Q: Scope of Work/Work Schedule—Athletic Fields "ONLY"
- Sub-section 1-e (All Bermuda lawn areas will be over seeded using a perennial rye seed at a rate of 8 lbs per 1,000 sq. ft. in November)

Audrey Lewis  
DISTRICT NO. 1  
HAVANA, FL 32333

Judge B. Helms, Jr.  
DISTRICT NO. 2  
QUINCY, FL 32351  
HAVANA, FL 32333

ISAAC SIMMONS, JR.  
DISTRICT NO. 3  
CHATTACHOOCHEE, FL 32324  
GREENSBORO, FL 32330

Charlie D. Frost  
DISTRICT NO. 4  
GREENSBORO, FL 32330  
QUINCY, FL 32352

ROGER P. MILTON  
DISTRICT NO. 5  
QUINCY, FL 32351

**BOARD MEETS FOURTH TUESDAY OF EACH MONTH**  
EQUAL OPPORTUNITY EMPLOYER

**SUMMARY SHEET**

**RECOMMENDATION TO SUPERINTENDENT FOR SCHOOL BOARD AGENDA**

**AGENDA ITEM NO.** 10e

**DATE OF SCHOOL BOARD MEETING:** April 22, 2014

**TITLE OF AGENDA ITEMS:** Request to Delete from Capital Assets and Sale to Highest Bidder

**DIVISION:** Finance Department

**PURPOSE AND SUMMARY OF ITEMS:**

In accordance with Sections 274.04, 274.05 and 274.06, Florida Statutes, Board approval is requested to delete \$448,208.00 plus applicable depreciation from the Motor Vehicle Capital Assets. This action is required based on the information received from the Director of Transportation.

<b>VIN #</b>	<b>Purchase Price</b>	<b>Miles</b>	<b>Inventory Tag #</b>	<b>Vehicle #</b>
1. 1BAKGCKAX7F239195	69,725.00	143026	200647	06-16
2. 1TBBU3B2511089839	69,191.00	218720	200728	00-143
3. 1HVBBAAN6YH290884	51,416.00	189575	200638	00-131
4. 1T88U3B2111093855	63,191.00	215450	200196	00-115
5. 1HVBBAAN0YH29088	51,416.00	203067	200106	00-110
6. 2B4HB11Y1YK151573	16,887.00	262165	220670	01-514
7. 1T88U3B2X11093854	63,191.00	172131	200118	00-137
8. 1T88U3B2311089838	63,191.00	223251	200217	00-90

**TOTAL NUMBER OF VEHICLES** 8

**REVENUE:** Applicable Funds

**AMOUNT:** \$448,208. 00

**PREPARED BY:** Bruce James 

**POSITION(s):** Inventory Control Specialist

---

DIST: 20 FY: 14

2. FIXED ASSETS

TIME: 11:35

NUMB: 00200647

ITEM CODE-----DESCRIPTION -----SERIAL #-----  
 5000015 BUSES 1BAKGCKAX7F239195

TAGGED? MODEL # VDR: V 999999999 VENDOR PRIOR TO TERMS  
 Y 06 MFG: M 000000415 BLUEBIRD  
 VEH: 06-16 TAG: 232671 TITLE: \_\_\_\_\_

LOCATED CNTR: 9003 TRANS.DEPT-SCHOOL BD GADSDEN DEPT: \_\_ BLD: 00 RM: 0000

ACQUIRED	DATE	P.O.#	CHECK#	OLG	OWN	CNTR-OBJ-FND-PROJECT-----	AMOUNT
	040306	_____	045108	0	-	_____	69,725.00

MAINT CONTRACT: \_\_\_\_\_  
 COMMENTS HOMER KNIGHT TOTAL COST: 69,725.00

STATUS INV DT CN -----DISPOSITION----- DISP DT LIF ACCUM DEPR: 50,550.63  
 \_\_\_\_\_ G 07 REMOVED 021014 10 CURR VAL: 19,174.37  
 SALVAGE: \_\_\_\_\_

IF SOLD DATE: \_\_\_\_\_ RECEIPT NO: \_\_\_\_\_ SOLD FOR: \_\_\_\_\_

FIXED ASSET RECORD DISPLAYED. NEXT? TERML: 8AN7

4-©	1	TERMS	199.44.72.2	TW1H0058	2/41
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DIST: 20 FY: 14

2. FIXED ASSETS

TIME: 11:35

NUMB: 00200728

ITEM CODE-----DESCRIPTION -----SERIAL #-----  
 5000015 BUSES 1TBBU3B2511089839

TAGGED? MODEL # VDR: V 999999999 VENDOR PRIOR TO TERMS  
 Y 00 MFG: M 000001168 THOMAS  
 VEH: 00-143 TAG: 72879 TITLE: \_\_\_\_\_

LOCATED CNTR: 9003 TRANS.DEPT-SCHOOL BD GADSDEN DEPT: \_\_ BLD: 00 RM: 0000

ACQUIRED DATE P.O.# CHECK# OLG OWN CNTR-OBJ-FND-PROJECT-----AMOUNT  
 021600 \_\_\_\_\_ 0 \_\_\_\_\_ 63,191.00

MAINT CONTRACT: \_\_\_\_\_  
 COMMENTS WALKER TOTAL COST: 63,191.00

STATUS INV DT CN ----DISPOSITION---- DISP DT LIF ACCUM DEPR: 63,191.00  
 \_\_\_\_\_ G 07 REMOVED 021014 10 CURR VAL:

IF SOLD DATE: RECEIPT NO: SALVAGE: \_\_\_\_\_  
 SOLD FOR: \_\_\_\_\_

FIXED ASSET RECORD DISPLAYED. NEXT? TERML: 8AN7

4-© 1 TERMS 199.44.72.2 TW1H0058 2/41

DIST: 20 FY: 14

2. FIXED ASSETS

TIME: 11:35

NUMB: 00200638

ITEM CODE-----DESCRIPTION -----SERIAL #-----  
 5000015 BUSES 1HVBBAAN6YH290884

TAGGED? MODEL # VDR: V 999999999 VENDOR PRIOR TO TERMS  
 Y 00 MFG: M 000000400 INTERNATIONAL  
 VEH: 00-131 TAG: 120562 TITLE: \_\_\_\_\_

LOCATED CNTR: 9003 TRANS.DEPT-SCHOOL BD GADSDEN DEPT: \_\_ BLD: 00 RM: 0000

ACQUIRED DATE P.O.# CHECK# OLG OWN CNTR-OBJ-FND-PROJECT-----AMOUNT  
 021600 \_\_\_\_\_ 0 - \_\_\_\_\_ 51,416.00

MAINT CONTRACT: \_\_\_\_\_  
 COMMENTS SPARE \_\_\_\_\_ TOTAL COST: 51,416.00

STATUS INV DT CN ----DISPOSITION---- DISP DT LIF ACCUM DEPR: 51,416.00  
 \_\_\_\_\_ G 07 REMOVED 021014 10 CURR VAL:

IF SOLD DATE: RECEIPT NO: SALVAGE: \_\_\_\_\_  
 SOLD FOR: \_\_\_\_\_

FIXED ASSET RECORD DISPLAYED. NEXT? TERML: 8AN7

4-© 1 TERMS 199.44.72.2 TW1H0058 2/41

DIST: 20 FY: 14 2. FIXED ASSETS TIME: 11:35  
 NUMB: 00200196

ITEM CODE-----DESCRIPTION -----SERIAL #-----  
 5000015 BUSES 1T88U3B2111093855

TAGGED? MODEL # VDR: V 999999999 VENDOR PRIOR TO TERMS  
 Y 00 MFG: M 000001168 THOMAS  
 VEH: 00-115 TAG: 120541 TITLE: \_\_\_\_\_

LOCATED CNTR: 9003 TRANS.DEPT-SCHOOL BD GADSDEN DEPT: \_\_ BLD: 00 RM: 0000

ACQUIRED DATE P.O.# CHECK# OLG OWN CNTR-OBJ-FND-PROJECT-----AMOUNT  
 040500 \_\_\_\_\_ 0 \_\_\_\_\_ 63,191.00

MAINT CONTRACT: \_\_\_\_\_  
 COMMENTS AMY PROCTOR TOTAL COST: 63,191.00

STATUS INV DT CN ----DISPOSITION---- DISP DT LIF ACCUM DEPR: 63,191.00  
 \_\_\_\_\_ G 07 REMOVED 021014 10 CURR VAL:

IF SOLD DATE: RECEIPT NO: SALVAGE: \_\_\_\_\_  
 SOLD FOR: \_\_\_\_\_

FIXED ASSET RECORD DISPLAYED. NEXT? TERML: 8AN7

4-© 1 TERMS 199.44.72.2 TW1H0058 2/41

DIST: 20 FY: 14

2. FIXED ASSETS  
 NUMB: 00200106

TIME: 11:45

ITEM CODE-----DESCRIPTION -----SERIAL #-----  
 5000015 BUSES 1HVBBAAN0YH290881

TAGGED? MODEL # VDR: V 999999999 VENDOR PRIOR TO TERMS  
 Y 00 MFG: M 000000400 INTERNATIONAL  
 VEH: 00-110 TAG: 120527 TITLE: \_\_\_\_\_

LOCATED CNTR: 9003 TRANS.DEPT-SCHOOL BD GADSDEN DEPT: \_\_ BLD: 00 RM: 0000

ACQUIRED DATE P.O.# CHECK# OLG OWN CNTR-OBJ-FND-PROJECT-----AMOUNT  
 021600 \_\_\_\_\_ 0 \_\_\_\_\_ 51,416.00

MAINT CONTRACT: \_\_\_\_\_  
 COMMENTS LINDA COSTER TOTAL COST: 51,416.00

STATUS INV DT CN ----DISPOSITION---- DISP DT LIF ACCUM DEPR: 51,416.00  
 \_\_\_\_\_ G 07 REMOVED 021014 10 CURR VAL:

IF SOLD DATE: RECEIPT NO: SALVAGE: \_\_\_\_\_  
 SOLD FOR: \_\_\_\_\_

FIXED ASSET RECORD DISPLAYED. NEXT? TERML: 8A0J

4-© 1 TERMS 199.44.72.2 TW1H0209 2/41



DIST: 20 FY: 14

2. FIXED ASSETS  
 NUMB: 00200670

TIME: 11:45

ITEM CODE-----DESCRIPTION -----SERIAL #-----  
 5000001 VANS 2B4HB11Y1YK151573

TAGGED? MODEL # VDR: V 999999999 VENDOR PRIOR TO TERMS  
 Y 01 MFG: M 000000007 DODGE  
 VEH: 01-514 TAG: 120573 TITLE: \_\_\_\_\_

LOCATED CNTR: 9003 TRANS.DEPT-SCHOOL BD GADSDEN DEPT: \_\_ BLD: RM: 0000

ACQUIRED DATE P.O.# CHECK# OLG OWN CNTR-OBJ-FND-PROJECT-----AMOUNT  
 062801 \_\_\_\_\_ 0 - \_\_\_\_\_ 16,887.00

MAINT CONTRACT: \_\_\_\_\_  
 COMMENTS MAIL VAN -BAMA TOTAL COST: 16,887.00

STATUS INV DT CN ----DISPOSITION---- DISP DT LIF ACCUM DEPR: 16,887.00  
 \_\_\_\_\_ G 07 REMOVED 021014 7 CURR VAL:

IF SOLD DATE: RECEIPT NO: SALVAGE: \_\_\_\_\_  
 SOLD FOR: \_\_\_\_\_

FIXED ASSET RECORD DISPLAYED. NEXT? TERML: 8AOJ

4-© 1 TERMS 199.44.72.2 TW1H0209 2/41

DIST: 20 FY: 14

2. FIXED ASSETS  
 NUMB: 00200118

TIME: 12:09

ITEM CODE-----DESCRIPTION -----SERIAL #-----  
 5000015 BUSES 1T88U3B2X11093854

TAGGED? MODEL # VDR: V 999999999 VENDOR PRIOR TO TERMS  
 Y 00 MFG: M 000001168 THOMAS  
 VEH: 00-137 TAG: 120540 TITLE: \_\_\_\_\_

LOCATED CNTR: 9003 TRANS.DEPT-SCHOOL BD GADSDEN DEPT: \_\_ BLD: RM:

ACQUIRED DATE P.O.# CHECK# OLG OWN CNTR-OBJ-FND-PROJECT-----AMOUNT  
 040500 \_\_\_\_\_ 0 - \_\_\_\_\_ 63,191.00

MAINT CONTRACT: \_\_\_\_\_  
 COMMENTS AMOS BOSTICK TOTAL COST: 63,191.00

STATUS INV DT CN -----DISPOSITION----- DISP DT LIF ACCUM DEPR: 63,191.00  
 \_\_\_\_\_ G 07 REMOVED 030314 10 CURR VAL:

IF SOLD DATE: RECEIPT NO: SALVAGE: \_\_\_\_\_  
 SOLD FOR: \_\_\_\_\_

FIXED ASSET RECORD DISPLAYED. NEXT? TERML: 8A05

4-© 1 TERMS 199.44.72.2 TW1H0361 2/41

DIST: 20 FY: 14

2. FIXED ASSETS

TIME: 12:03

NUMB: 00200217

ITEM	CODE-----	DESCRIPTION	-----SERIAL #-----
	5000015 BUSES		1T88U3B2311089838

TAGGED?	MODEL #	VDR: V 999999999	VENDOR PRIOR TO TERMS
Y	00	MFG: M 000001168	THOMAS
		VEH: 00-90	TAG: 120542 TITLE: _____

LOCATED CNTR: 9003 TRANS.DEPT-SCHOOL BD GADSDEN DEPT: \_\_ BLD: 00 RM: 0000

ACQUIRED	DATE	P.O.#	CHECK#	OLG	OWN	CNTR-OBJ-FND-PROJECT-----	AMOUNT
	040500	_____	_____	0	-	_____	63,191.00

MAINT CONTRACT:	_____	_____	_____	_____	_____	TOTAL COST:	63,191.00
COMMENTS	SPARE						

STATUS	INV DT	CN	-----DISPOSITION-----	DISP DT	LIF	ACCUM DEPR:	63,191.00
	_____		G 07 REMOVED	030314	10	CURR VAL:	

IF SOLD	DATE:	RECEIPT NO:	SALVAGE:	_____
			SOLD FOR:	_____

FIXED ASSET RECORD DISPLAYED. NEXT? TERML: 8A05

4-©	1	TERMS	199.44.72.2	TW1H0361	2/41
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