



Shelton City Council Meeting Agenda
March 4, 2025
Special Meeting 5:30 p.m. – 5:45 p.m.
Regular Meeting 6:00 p.m.
Civic Center & Virtual Platform

SPECIAL MEETING

A. Call to Order

B. Adjourn to Executive Session (15 minutes)

C. Item for Discussion

- Potential Litigation with Legal Counsel – RCW 42.30.110(1)(i)
- Action to follow

D. Adjourn

REGULAR MEETING

A. Call to Order

- Pledge of Allegiance
- Roll Call
- Late Changes to the Agenda

B. Council Reports

C. Consent Agenda (Action)

1. Vouchers numbered 112483 through 112519 and EFT payment numbers 1029 through 1047 in the total amount of \$315,371.83
2. Voucher number 112520 in the amount of \$20,000.00
3. Vouchers numbered 112524 through 112559, EFT payment numbers 1048 through 1062 in the total amount of \$65,274.08 and Bank Draft numbers DFT0001814 through DFT0001827 in the total amount of \$200,417.32
4. Payroll warrants numbered 4031 through 4033 and 14363 through 14458. Warrants 112560 through 112570 in the amount of \$381,184.33

D. General Public Comment (3-minute time limit)

The Council invites members of the public to provide comments on any City-related topic. To make comments in person, please sign in on the public comment sheet and keep an instruction card. If you would like to comment on an Action item, please write the agenda item number on the list. To comment virtually using Zoom, please use the "Raise Hand" feature to alert the City Clerk. If you have joined Zoom on your telephone, dial *9 to use the "Raise Hand" feature. City Councilmembers and City Staff will not enter into a dialogue during public comment. If the Council feels an issue requires follow up, Staff will be directed to respond at an appropriate time.

E. Business Agenda (Study/No Action)

1. Resolution No. 1368-0225 Notice of Intent to Annex Vacant Land – Presented by Senior Planner Jason Dose

2. Designated Crisis Responder Contracts – Presented by City Manager Mark Ziegler

F. Action Agenda (Action/Public Comment Taken)

1. Resolution No. 1371-0225 Authoring a Settlement Agreement – Presented by City Manager Mark Ziegler

H. Administration Reports

1. City Manager Report

H. New Items for Discussion

I. Announcement of Next Meeting – March 18, 2025 at 6:00 p.m.

J. Adjourn

Special Note for Virtual Public Participation

The meeting can be viewed at: <https://www.youtube.com/user/cityofshelton>

The public can provide comments virtually by:

Email: donna.nault@sheltonwa.gov (before 4:00pm the day of the meeting)

Telephone: (360) 432-5103 (before 4:00pm the day of the meeting)

Your comments will be relayed directly to the Council.



2025 Looking Ahead

(Items and dates are subject to change)

Tues. 3/11 6:00 p.m.	Study Session	Study Agenda <ul style="list-style-type: none"> • Comp. Plan Land Use Update • Multi-Family Tax Exemption Ordinance 	Packet Items Due: 3/7 @ noon
Tues. 3/18 5:45 p.m. CANCELLED	SMPD Meeting	Consent Agenda <ul style="list-style-type: none"> • Vouchers/Meeting Minutes Business Agenda <ul style="list-style-type: none"> • Action Agenda <ul style="list-style-type: none"> • Administration Report <ul style="list-style-type: none"> • 	Packet Items Due: 3/7 @ 5:00 p.m.
Tues. 3/18 6:00 p.m.	Regular Meeting	Consent Agenda <ul style="list-style-type: none"> • Vouchers/Payroll Warrants/Meeting Minutes • Thurston Mason Behavioral Health Contract Presentations <ul style="list-style-type: none"> • Swearing-in Police Officer • January Financial Status Report Business Agenda <ul style="list-style-type: none"> • Resolution No. 1366-1224 WSDOT City Street Striping Contract • Resolution No. 1362-1124 Agreement for Systemic Ped. Safety & Olympic Hwy North Improvements Design Services • Resolution No. 1350-0924 Mid-Block Crossing (OBJH) Design Enhancement Approval • Resolution No. 1369-0225 Committing to Budget for Post-Construction Monitoring at the C-Street Landfill • Resolution No. 1370-0225 SPD Towing Contract Public Hearing <ul style="list-style-type: none"> • Action Agenda <ul style="list-style-type: none"> • Resolution No. 1368-0225 Notice of Intent to Annex Vacant Land into City Limits • Ordinance No. 2025-0924 Revisions to Permitted Uses Matrix Administration Report <ul style="list-style-type: none"> • 	Packet Items Due: 3/7 @ 5:00 p.m.
Tues. 3/25 6:00 p.m.	Study Session	Study Agenda <ul style="list-style-type: none"> • SPD Annual Report • Prep for Council Retreat • 2025 Ballot Measures (Transportation Benefit District & Affordable Housing Sales Tax) 	Packet Items Due: 3/21 @ 5:00 p.m.

Tues. 4/1 6:00 p.m.	Regular Meeting	<p>Consent Agenda</p> <ul style="list-style-type: none"> • Vouchers/Payroll Warrants/Meeting Minutes • Resolution No. 1366-1224 WSDOT City Street Striping Contract • Resolution No. 1369-0225 Committing to Budget for Post-Construction Monitoring at the C-Street Landfill • Resolution No. 1370-0225 SPD Towing Contract <p>Presentations</p> <ul style="list-style-type: none"> • <p>Business Agenda</p> <ul style="list-style-type: none"> • <p>Public Hearing</p> <ul style="list-style-type: none"> • <p>Action Agenda</p> <ul style="list-style-type: none"> • Resolution No. 1362-1124 Agreement for Systemic Ped. Safety & Olympic Hwy North Improvements Design Services • Resolution No. 1350-0924 Mid-Block Crossing (OBJH) Design Enhancement Approval <p>Administration Report</p> <ul style="list-style-type: none"> • 	Packet Items Due: 3/21 @ 5:00 p.m.
Tues. 4/8 6:00 p.m.	Study Session	<p>Study Agenda</p> <ul style="list-style-type: none"> • 	Packet Items Due: 4/4 @ noon
Tues. 4/15 6:00 p.m.	Regular Meeting	<p>Consent Agenda</p> <ul style="list-style-type: none"> • Vouchers/Payroll Warrants/Meeting Minutes <p>Presentations</p> <ul style="list-style-type: none"> • February Financial Status Report <p>Business Agenda</p> <ul style="list-style-type: none"> • <p>Public Hearing</p> <ul style="list-style-type: none"> • <p>Action Agenda</p> <ul style="list-style-type: none"> • <p>Administration Report</p> <ul style="list-style-type: none"> • 	Packet Items Due: 4/4 @ 5:00 p.m.
Tues. 4/22 6:00 p.m.	Study Session	<p>Study Agenda</p> <ul style="list-style-type: none"> • 	Packet Items Due: 4/18 @ noon
Mon. 5/5 8:30 a.m.	Special Meeting	Council Retreat	N/A
Tues. 5/6 6:00 p.m.	Regular Meeting	<p>Consent Agenda</p> <ul style="list-style-type: none"> • Vouchers/Payroll Warrants/Meeting Minutes <p>Presentations</p> <ul style="list-style-type: none"> • <p>Business Agenda</p> <ul style="list-style-type: none"> • <p>Public Hearing</p> <ul style="list-style-type: none"> • <p>Action Agenda</p> <ul style="list-style-type: none"> • <p>Administration Reports</p>	Packet Items Due: 4/25 @ 5:00 p.m.

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Tues. 5/13 6:00 p.m.	Study Session	Study Agenda •	Packet Items Due: 5/9 @ noon

Other – TBD

- International Property Maintenance Code

DRAFT

VOUCHER APPROVAL

I, the undersigned, do hereby certify under penalty of perjury that the materials have been furnished, the services rendered, or the labor performed as described herein vouchers number 112483 through number 112519 and EFT payment numbers 1029 through 1047 in the total amount of \$315,371.83 that the claims are just, due and unpaid obligations against the City of Shelton, and that I am authorized to authenticate and certify said claims.

Signed this 13th of February, 2025.


Finance Director

We, the undersigned members of the City Council of Shelton, Washington, do hereby certify that the vouchers contained herein are approved for payment.

Signed this _____ of _____, 2025.

Mayor Eric Onisko

Deputy Mayor Sharon Schirman

Councilmember George Blush

Councilmember Tom Gilmore

Councilmember Miguel Gutierrez

Councilmember Lyndsey Sapp

Councilmember Melissa Stearns



Shelton, WA

Check Register

Packet: APPKT03444 - FEBRUARY 14, 2025 AP PAYMENTS

By Check Number

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: APBNK-Main-APBNK-Main						
005900	CAPITAL BUSINESS MACHINES	02/13/2025	EFT	0.00	1,190.63	1029
	Void	02/13/2025	EFT	0.00	0.00	1030
008450	COMMUNITY ACTION COUNCIL	02/13/2025	EFT	0.00	44.37	1031
009231	DARREN PARSE	02/13/2025	EFT	0.00	300.00	1032
009351	DELAGÉ LANDEN FINANCIAL SVCS	02/13/2025	EFT	0.00	271.17	1033
023078	FASTENAL COMPANY	02/13/2025	EFT	0.00	35.02	1034
VEN01406	FERGUSON WATERWORKS	02/13/2025	EFT	0.00	13,464.18	1035
040960	GRAINGER	02/13/2025	EFT	0.00	225.10	1036
VEN02276	JAMES N DOCTER	02/13/2025	EFT	0.00	3,000.00	1037
VEN02564	JOHN R BONIN	02/13/2025	EFT	0.00	625.00	1038
081000	KENNETH J. DOBIE	02/13/2025	EFT	0.00	2,000.00	1039
142952	NORTH CENTRAL LABORATORIES	02/13/2025	EFT	0.00	152.12	1040
151000	P. U. D. # 3	02/13/2025	EFT	0.00	54,122.37	1041
	Void	02/13/2025	EFT	0.00	0.00	1042
	Void	02/13/2025	EFT	0.00	0.00	1043
VEN02506	PDBLOWERS, INC.	02/13/2025	EFT	0.00	1,006.98	1044
178231	SEAN CARNEY	02/13/2025	EFT	0.00	40.00	1045
VEN01972	THOMAS A FURRER	02/13/2025	EFT	0.00	1,647.04	1046
VEN02437	WALTER E NELSON CO OF WESTERN	02/13/2025	EFT	0.00	408.76	1047
098000	BUILDERS FIRSTSOURCE	02/14/2025	Regular	0.00	22.88	112483
108679	CENTRAL MASON FIRE AND EMS	02/14/2025	Regular	0.00	178,429.91	112484
006950	CERTIFIED LABORATORIES	02/14/2025	Regular	0.00	713.99	112485
VEN02655	CHINTANA BARDEN	02/14/2025	Regular	0.00	150.00	112486
VEN01214	CINTAS CORPORATION	02/14/2025	Regular	0.00	206.48	112487
008751	CRYSTAL SPRINGS	02/14/2025	Regular	0.00	152.03	112488
009595	DEPT. OF LICENSING	02/14/2025	Regular	0.00	18.00	112489
080980	GILLIARDI LOGGING & CONSTRUCTI	02/14/2025	Regular	0.00	879.29	112490
VEN02505	GUNDERSON LAW OFFICE, PLLC	02/14/2025	Regular	0.00	10,000.00	112491
062087	IACP	02/14/2025	Regular	0.00	220.00	112492
VEN02393	INTERNATIONAL INSTITUTE OF MUP	02/14/2025	Regular	0.00	195.00	112493
064940	J & I POWER EQUIPMENT INC	02/14/2025	Regular	0.00	122.95	112494
085995	LANGUAGE LINE SERVICES	02/14/2025	Regular	0.00	149.52	112495
VEN02631	LAW, LYMAN, DANIEL, KAMERRER, I	02/14/2025	Regular	0.00	821.55	112496
087799	LEMAY MOBILE SHREDDING	02/14/2025	Regular	0.00	18.11	112497
109750	MASON COUNTY DISTRICT COURT	02/14/2025	Regular	0.00	10.00	112498
109750	MASON COUNTY DISTRICT COURT	02/14/2025	Regular	0.00	50.00	112499
109750	MASON COUNTY DISTRICT COURT	02/14/2025	Regular	0.00	600.00	112500
108850	MASON COUNTY GARBAGE CO.-A V	02/14/2025	Regular	0.00	5,188.86	112501
113000	MASON COUNTY TREASURER	02/14/2025	Regular	0.00	65.02	112502
114420	MASON TRANSIT AUTHORITY	02/14/2025	Regular	0.00	700.00	112503
VEN02241	MICHELLE PUGH	02/14/2025	Regular	0.00	1,696.00	112504
VEN02402	MVIX (USA), INC	02/14/2025	Regular	0.00	136.74	112505
153500	PACIFIC LAMP & SUPPLY CO	02/14/2025	Regular	0.00	72.38	112506
161080	PROFORCE	02/14/2025	Regular	0.00	4,989.65	112507
164899	QWEST DBA CENTURYLINK	02/14/2025	Regular	0.00	1,068.02	112508
187505	SHELTON SCHOOL DISTRICT	02/14/2025	Regular	0.00	400.00	112509
VEN02656	SPEX CERTI PREP, LLC	02/14/2025	Regular	0.00	2,545.90	112510
196341	STEVEN R. BUZZARD	02/14/2025	Regular	0.00	450.00	112511
VEN02534	SUMMIT TOWING INC	02/14/2025	Regular	0.00	583.98	112512
197259	SUNSET AIR, INC.	02/14/2025	Regular	0.00	1,927.54	112513
200235	TACOMA SCREW PRODUCTS INC	02/14/2025	Regular	0.00	420.53	112514
178252	TASCHNER LAW, PLLC	02/14/2025	Regular	0.00	14,440.00	112515
VEN01609	TEREX USA, LLC	02/14/2025	Regular	0.00	4,622.11	112516
201300	TOZIER BROS INC.	02/14/2025	Regular	0.00	26.91	112517

Check Register

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
202990	WAPRO	02/14/2025	Regular	0.00	25.00	112518
203035	WASHINGTON ST. TREASURER	02/14/2025	Regular	0.00	4,720.74	112519

Bank Code APBNK-Main Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	67	37	0.00	236,839.09
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	30	19	0.00	78,532.74
	97	56	0.00	315,371.83

Fund Summary

Fund	Name	Period	Amount
999	Pooled Cash	2/2025	315,371.83
			<u>315,371.83</u>



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Bank Code: APBNK-Main-APBNK-Main						
005900	CAPITAL BUSINESS MACHINES	02/13/2025	EFT	0.00	1,190.63	1029
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INV250859	Invoice	02/10/2025	CONTRACT # CN3230-01		0.00	468.63
001-111-000-51423-4500		FIN AC - Operating Rental		CONTRACT # CN3230-01		281.18
001-130-000-51810-4500		HR - Operating Rentals		CONTRACT # CN3230-01		187.45
INV250860	Invoice	02/10/2025	CBM CONTRACT #CN3370-01		0.00	334.97
001-110-000-51160-4500		COUNCIL - Operating Ren		CONTRACT#CN3370-01		82.74
001-111-000-51421-4500		FIN UB - Operating Rental		CONTRACT#CN3370-01		3.15
001-111-000-51423-4500		FIN AC - Operating Rental		CONTRACT#CN3370-01		11.72
001-115-000-51896-4500		PW ENG - Operating Rent		CONTRACT#CN3370-01		112.05
001-120-000-51310-4500		C MGR - Operating Rental		CONTRACT#CN3370-01		3.79
001-121-000-51430-4500		CLK REC - Operating Rent		CONTRACT#CN3370-01		0.94
001-130-000-51810-4500		HR - Operating Rentals		CONTRACT#CN3370-01		0.30
001-132-000-51888-4500		IT - Operating Rentals		CONTRACT#CN3370-01		13.40
001-140-000-55860-4500		CD PLAN - Operating Rent		CONTRACT#CN3370-01		86.25
001-141-000-57680-4500		PARKS - Operating Rental		CONTRACT#CN3370-01		9.31
001-142-000-51830-4500		FACIL - Operating Rental		CONTRACT#CN3370-01		10.92
001-143-000-57320-4500		COM CTR ARTS - Operatin		CONTRACT#CN3370-01		0.40
INV250861	Invoice	02/10/2025	CONTRACT# CN3227-01		0.00	38.12
401-000-000-53480-4501		WAT - Operating Rentals -		CONTRACT# CN3227-01		38.12
INV250862	Invoice	02/10/2025	CONTRACT# CN3364-01		0.00	60.19
401-000-000-53480-4501		WAT - Operating Rentals -		CONTRACT# CN3364-01		60.19
INV250863	Invoice	02/10/2025	CONTRACT# CN1866-01		0.00	150.72
402-400-000-53580-4500		SEW SV MN - Operating R		CONTRACT# CN1866-01		150.72
INV250883	Invoice	02/10/2025	CONTRACT# CN1692-01		0.00	11.98
001-112-000-51251-4500		MUNI CT - Operating Ren		CONTRACT# CN1692-01		11.98
INV250884	Invoice	02/10/2025	CONTRACT# CN3142-01		0.00	27.23
001-112-000-51251-4500		MUNI CT - Operating Ren		CONTRACT# CN3142-01		27.23
INV250885	Invoice	02/10/2025	CONTRACT# CN3143-01		0.00	42.37
001-112-000-51251-4500		MUNI CT - Operating Ren		CONTRACT# CN3143-01		42.37
INV250886	Invoice	02/10/2025	CONTRACT# CN3144-01		0.00	48.55
001-112-000-51251-4500		MUNI CT - Operating Ren		CONTRACT# CN3144-01		48.55
INV250887	Invoice	02/10/2025	CONTRACT# CN3588-01		0.00	7.87
001-112-000-51251-4500		MUNI CT - Operating Ren 24-ITC		CONTRACT# CN3588-01		7.87
	Void	02/13/2025	EFT	0.00	0.00	1030
008450	COMMUNITY ACTION COUNCIL	02/13/2025	EFT	0.00	44.37	1031
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
SOS CONTRIBUTI	Invoice	02/10/2025	SOS CONTRIBUTIONS/JANUARY 2025		0.00	44.37
657-000-000-58600-0014		SOS Contributions		SOS CONTRIBUTIONS/JAN		44.37
009231	DARREN PARSE	02/13/2025	EFT	0.00	300.00	1032
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INTERPRETATION	Invoice	02/05/2025	INTERPRETATION02052025		0.00	300.00
001-112-000-51251-4106		MUNI CT - Interpreter Ex		INTERPRETATION0205202		300.00
009351	DELAGE LANDEN FINANCIAL SVCS	02/13/2025	EFT	0.00	271.17	1033

Check Register

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
83469077	Invoice	01/25/2025	CONTRACT# 500-50499916		0.00	271.17
001-115-000-51895-4500		PW ADM - Operating Ren		CONTRACT# 500-5049991		10.42
001-115-000-59148-7001		PW ADM - Long Term Lea		CONTRACT# 500-5049991		117.03
001-120-000-51310-4500		C MGR - Operating Rental		CONTRACT# 500-5049991		1.11
001-120-000-59113-7001		C MGR - Long Term Lease		CONTRACT# 500-5049991		12.45
001-140-000-55860-4500		CD PLAN - Operating Rent		CONTRACT# 500-5049991		10.64
001-140-000-59158-7001		CD - Long Term Lease		CONTRACT# 500-5049991		119.52
023078	FASTENAL COMPANY	02/13/2025	EFT	0.00	35.02	1034
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
WATUM227417	Credit Memo	09/03/2024	CUST# WATUM1147/ORIG INV WATUM22		0.00	-410.51
401-000-000-53480-3100		WAT - Office and Operati		CUST# WATUM1147/ORIG		-410.51
WATUM231275	Invoice	02/05/2025	CUST# WATUM1147 MISC SUPPLIES		0.00	445.53
401-000-000-53480-3100		WAT - Office and Operati		CUST# WATUM1147 MISC		445.53
VEN01406	FERGUSON WATERWORKS	02/13/2025	EFT	0.00	13,464.18	1035
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
0068437	Invoice	01/29/2025	CUST# 2544 METERS AND MXU'S FOR ST		0.00	13,464.18
401-000-000-53480-3100		WAT - Office and Operati		CUST# 2544 METERS AND		13,464.18
040960	GRAINGER	02/13/2025	EFT	0.00	225.10	1036
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
9354722812	Invoice	12/23/2024	ACCT# 839177342 WIRE STRIPPER		0.00	61.99
001-142-000-51830-3100		FACIL - Office and Operati		ACCT# 839177342 WIRE S		61.99
9388416266	Invoice	01/28/2025	ACCT# 839177342 GAUGE,VENT/19920D		0.00	114.75
503-000-000-54865-3104		EMR - Oper Supp-Parts-E		ACCT# 839177342 GAUGE,		114.75
9388416274	Invoice	01/28/2025	ACCT# 839177342 BREATHER VENT/1992		0.00	23.09
503-000-000-54865-3100		EMR - Office and Operati		ACCT# 839177342 BREATH		23.09
9388920465	Invoice	01/29/2025	ACCT# 839177342 BREATHER VENT/1992		0.00	25.27
503-000-000-54865-3100		EMR - Office and Operati		ACCT# 839177342 BREATH		25.27
VEN02276	JAMES N DOCTER	02/13/2025	EFT	0.00	3,000.00	1037
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
#8	Invoice	02/03/2025	COURT FACILITATOR/ITC FEBRUARY 2025		0.00	3,000.00
001-112-000-51251-4109		MUNI CT - Other Professi	24-ITC	COURT FACILITATOR/ITC FE		3,000.00
VEN02564	JOHN R BONIN	02/13/2025	EFT	0.00	625.00	1038
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
PROTEM0205202	Invoice	02/05/2025	PROTEM02052025		0.00	625.00
001-112-000-51251-4101		MUNI CT - Judge Pro-Tem		PROTEM02052025		625.00
081000	KENNETH J. DOBIE	02/13/2025	EFT	0.00	2,000.00	1039
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
DENTALREIMBUR	Invoice	02/01/2025	DENTALREIMBURSEMENT/FEBRUARY2025		0.00	2,000.00
502-000-000-51725-2036		PR BEN - Dental Costs-Re		DENTALREIMBURSEMENT/		2,000.00
142952	NORTH CENTRAL LABORATORIES	02/13/2025	EFT	0.00	152.12	1040

Check Register

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Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
<u>514828</u>	Invoice	01/24/2025	ACCT# 42215 TEST SUPPLIES	0.00	152.12	
<u>402-400-000-53580-3100</u>		SEW SV MN - Office and		ACCT# 42215 TEST SUPPLI	152.12	
151000	P. U. D. # 3	02/13/2025	EFT	0.00	54,122.37	1041
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
<u>101001 FEBRUAR</u>	Invoice	02/05/2025	101001 FEBRUARY 2025	0.00	54,058.79	
<u>001-140-000-55430-4700</u>		CD AN CTRL - Utility Servi		35199001 FEBRUARY 2025	256.10	
<u>001-141-000-57680-4700</u>		PARKS - Utility Services		30003001 FEBRUARY 2025	168.67	
<u>001-141-000-57680-4700</u>		PARKS - Utility Services		32453001 FEBRUARY 2025	153.53	
<u>001-141-000-57680-4700</u>		PARKS - Utility Services		82241001 FEBRUARY 2025	93.92	
<u>001-141-000-57680-4700</u>		PARKS - Utility Services		25911003 FEBRUARY 202	109.15	
<u>001-142-000-51890-4715</u>		FACIL CIVIC - Utility Servic		28249001 FEBRUARY 2025	3,689.18	
<u>001-142-000-57250-4700</u>		FACIL LIB - Utility Services		35665001 FEBRUARY 2025	742.98	
<u>001-142-000-57530-4700</u>		FACIL MUSM - Utility Serv		27639001 FEBRUARY 2025	661.67	
<u>101-000-000-54263-4700</u>		ST LGHT - Utility Services		27837001 FEBRUARY 2025	2,198.23	
<u>101-000-000-54263-4700</u>		ST LGHT - Utility Services		27839002 FEBRUARY 2025	10,125.26	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		35337001 FEBRUARY 2025	94.52	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		109441001 FEBRUARY 202	81.82	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		109413001 FEBRUARY 202	69.88	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		109397001 FEBRUARY 202	99.03	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		101097001 FEBRUARY 202	98.22	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		26197001 FEBRUARY 2025	94.82	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		25911002 FEBRUARY 202	127.79	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		101002 FEBRUARY 2025	104.04	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		101001 FEBRUARY 2025	102.74	
<u>101-000-000-54265-4700</u>		ST PRK FAC - Utility Servic		26857001 FEBRUARY 2025	28.68	
<u>101-000-000-54270-4700</u>		ST RD PRK - Utility Service		250321001 FEBRUARY 202	83.20	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		277201002 FEBRUARY 20	164.32	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		8511001 FEBRUARY 2025	169.46	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		101149001 FEBRUARY 202	114.06	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		277201001 FEBRUARY 202	219.01	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		25911001 FEBRUARY 2025	1,904.80	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		25913001 FEBRUARY 2025	149.77	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		26729001 FEBRUARY 2025	585.23	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		35201001 FEBRUARY 2025	1,733.08	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		113939001 FEBRUARY 202	118.47	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		101155001 FEBRUARY 202	4,874.69	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		45451001 FEBRUARY 2025	200.87	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		46051001 FEBRUARY 2025	173.67	
<u>401-000-000-53480-4701</u>		WAT - Utility Services - Sh		26717001 FEBRUARY 2025	160.25	
<u>402-300-000-53580-4700</u>		SEW CL MN - Utility Servi		18515001 FEBRUARY 2025	87.05	
<u>402-300-000-53580-4700</u>		SEW CL MN - Utility Servi		47009001 FEBRUARY 2025	78.48	
<u>402-300-000-53580-4700</u>		SEW CL MN - Utility Servi		85079001 FEBRUARY 2025	72.57	
<u>402-400-000-53580-4700</u>		SEW SV MN - Utility Servi		30003002 FEBRUARY 2025	1,757.05	
<u>402-400-000-53580-4700</u>		SEW SV MN - Utility Servi		26551001 FEBRUARY 2025	2,555.59	
<u>402-400-000-53580-4700</u>		SEW SV MN - Utility Servi		259409001 FEBRUARY 202	13,380.20	
<u>402-640-000-53580-4700</u>		SEW SV SAT - Utility Servi		25911005 FEBRUARY 202	76.59	
<u>402-640-000-53580-4700</u>		SEW SV SAT - Utility Servi		252689001 FEBRUARY 202	6,232.39	
<u>404-000-000-53180-4700</u>		STRM - Utility Services		85183001 FEBRUARY 2025	67.76	
<u>ACCT# 28249003</u>	Invoice	02/05/2025	ACCT# 28249003/TREE MAZE	0.00	63.58	
<u>001-142-000-57250-4700</u>		FACIL LIB - Utility Services		ACCT# 28249003/TREE M	63.58	
	Void	02/13/2025	EFT	0.00	0.00	1042
	Void	02/13/2025	EFT	0.00	0.00	1043
VEN02506	PDBLOWERS, INC.	02/13/2025	EFT	0.00	1,006.98	1044

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
93299	Invoice	01/28/2025	PO# 250127 PARTS	0.00	1,006.98	
402-640-000-53580-3100		SEW SV SAT - Office and		PO# 250127 PARTS	1,006.98	
178231	SEAN CARNEY	02/13/2025	EFT	0.00	40.00	1045
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
KIMUDO INSTRU	Invoice	02/06/2025	KIMUDO INSTRUCTOR/JANUARY 2025	0.00	40.00	
001-141-000-57120-4100		REC - Professional Service		KIMUDO INSTRUCTOR/JAN	40.00	
VEN01972	THOMAS A FURRER	02/13/2025	EFT	0.00	1,647.04	1046
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
COURT SECURITY	Invoice	02/10/2025	COURT SECURITY SVC/FEBRUARY 2025	0.00	1,647.04	
001-112-000-51251-4109		MUNI CT - Other Professi		COURT SECURITY SVC/FEB	1,647.04	
VEN02437	WALTER E NELSON CO OF WESTERN	02/13/2025	EFT	0.00	408.76	1047
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
1039519	Invoice	02/07/2025	CUST# 12400 MISC SUPPLIES	0.00	408.76	
001-142-000-51830-3100		FACIL - Office and Operati		CUST# 12400 MISC SUPPLI	107.60	
001-142-000-51890-3115		FACIL CIVIC - Office and O		CUST# 12400 MISC SUPPLI	98.99	
001-142-000-57250-3100		FACIL LIB - Office and Ope		CUST# 12400 MISC SUPPLI	51.59	
401-000-000-53480-3100		WAT - Office and Operati		CUST# 12400 MISC SUPPLI	51.59	
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 12400 MISC SUPPLI	98.99	
098000	BUILDERS FIRSTSOURCE	02/14/2025	Regular	0.00	22.88	112483
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
75827102	Credit Memo	12/13/2024	ACCT# 671668 ORIG INV # 78745824	0.00	-394.14	
401-000-000-53480-4801		WAT - Repairs and Mainte		ACCT# 671668 ORIG INV #	-394.14	
99379058	Invoice	02/05/2025	ACCT# 671668 MISC SUPPLIES	0.00	340.78	
402-400-000-53580-3100		SEW SV MN - Office and		ACCT# 671668 MISC SUPP	340.78	
99381558	Invoice	02/05/2025	ACCT# 671668 HATCHET, ANG BRUSH,LU	0.00	76.24	
402-400-000-53580-3100		SEW SV MN - Office and		ACCT# 671668 HATCHET, A	76.24	
108679	CENTRAL MASON FIRE AND EMS	02/14/2025	Regular	0.00	178,429.91	112484
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
FIRE SERVICES/FE	Invoice	02/01/2025	FIRE SERVICES/FEBRUARY 2025	0.00	178,429.91	
001-119-000-52220-4103		FIRE - Prof FF Services-Fir		FIRE SERVICES/FEBRUARY	128,647.33	
001-119-000-52221-4103		EMS - Prof Services-Fire D		FIRE SERVICES/FEBRUARY	42,546.72	
001-119-000-52260-4100		FIRE EQ - Professional Ser		FIRE SERVICES/FEBRUARY	4,777.53	
001-119-000-52260-4100		FIRE EQ - Professional Ser		FIRE SERVICES/FEBRUARY	2,458.33	
006950	CERTIFIED LABORATORIES	02/14/2025	Regular	0.00	713.99	112485
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
9016655	Invoice	01/29/2025	CUST# 364565 MISC SUPPLIES	0.00	713.99	
503-000-000-54865-3100		EMR - Office and Operati		CUST# 364565 MISC SUPP	713.99	
VEN02655	CHINTANA BARDEN	02/14/2025	Regular	0.00	150.00	112486
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INTERPRETATION	Invoice	01/27/2025	INTERPRETATION01272025	0.00	150.00	
001-112-000-51251-4106		MUNI CT - Interpreter Ex		INTERPRETATION0127202	150.00	
VEN01214	CINTAS CORPORATION	02/14/2025	Regular	0.00	206.48	112487

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
5252577101	Invoice	02/04/2025	CUST# 10690213	FIRST AID SUPPLIES	0.00	206.48
001-118-000-52122-3100		PD PAT - Office and Opera		CUST# 10690213 FIRST AI		206.48
008751	CRYSTAL SPRINGS	02/14/2025	Regular	0.00	152.03	112488
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
24726383 01012	Invoice	01/01/2025	CUST# 1033109224726383	WWTP	0.00	47.25
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 1033109224726383		38.54
402-400-000-53580-4500		SEW SV MN - Operating R		CUST# 1033109224726383		8.71
24726383012925	Invoice	01/29/2025	CUST# 1033109224726383	WWTP	0.00	104.78
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 1033109224726383		96.07
402-400-000-53580-4500		SEW SV MN - Operating R		CUST# 1033109224726383		8.71
009595	DEPT. OF LICENSING	02/14/2025	Regular	0.00	18.00	112489
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
SHP250004	Invoice	02/04/2025	SHP250004		0.00	18.00
657-000-000-58600-0007		Concealed Pistol Permits		SHP250004		18.00
080980	GILLIARDI LOGGING & CONSTRUCTI	02/14/2025	Regular	0.00	879.29	112490
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
23507	Invoice	01/07/2025	WET FILL TK#271687		0.00	121.20
404-000-000-53180-3100		STRM - Office and Operati		WET FILL TK#271687		121.20
23575	Invoice	01/15/2025	DRY FILL TK#'S271977,979,984,987,992,9		0.00	758.09
101-000-000-54230-3100		ST RD WAY - Office and O		DRY FILL TK#'S271977,979,		189.52
401-000-000-53480-3100		WAT - Office and Operati		DRY FILL TK#'S271977,979,		189.52
402-400-000-53580-3100		SEW SV MN - Office and		DRY FILL TK#'S271977,979,		189.53
404-000-000-53180-3100		STRM - Office and Operati		DRY FILL TK#'S271977,979,		189.52
VEN02505	GUNDERSON LAW OFFICE, PLLC	02/14/2025	Regular	0.00	10,000.00	112491
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
1456	Invoice	02/02/2025	PROSECUTION SERVICES/JANUARY 2025		0.00	10,000.00
001-122-000-51545-4101		LEGAL - Prof Serv - Prosec		PROSECUTION SERVICES/J		10,000.00
062087	IACP	02/14/2025	Regular	0.00	220.00	112492
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
0385148	Invoice	01/22/2025	ACTIVE DUES 2025#10013177/C.KOSTAD		0.00	220.00
001-118-000-52140-3100		PD TRG - Office and Oper		ACTIVE DUES 2025#10013		220.00
VEN02393	INTERNATIONAL INSTITUTE OF MUN	02/14/2025	Regular	0.00	195.00	112493
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
ID#38921 ANNUA	Invoice	01/09/2025	ID#38921 ANNUAL MBRSHF FEE DONNA		0.00	195.00
001-121-000-51430-4900		CLK REC - Miscellaneous		ID#38921 ANNUAL MBRSH		195.00
064940	J & I POWER EQUIPMENT INC	02/14/2025	Regular	0.00	122.95	112494
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
800778	Invoice	01/08/2025	CUST# 15090 RETRACTABLE STARTER		0.00	102.10
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 15090 RETRACTABL		102.10
802248	Invoice	01/23/2025	CUST# 15090 AIR FILTER		0.00	20.85
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 15090 AIR FILTER		20.85
085995	LANGUAGE LINE SERVICES	02/14/2025	Regular	0.00	149.52	112495

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
11515074	Invoice	01/31/2025	ACCT# 9020514029 PHONE INTERPRETATI	0.00	108.94	
001-112-000-51251-4106		MUNI CT - Interpreter Ex		ACCT# 9020514029 PHON	108.94	
11520593	Invoice	01/31/2025	ACCT# 9020535356 PHONE INTERPRETATI	0.00	40.58	
001-122-000-51593-4101		LEGAL - OPD Grant Public		ACCT# 9020535356 PHON	40.58	
VEN02631	LAW, LYMAN, DANIEL, KAMERRER, i	02/14/2025	Regular	0.00	821.55	112496
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
MICHELLE ENGLE	Invoice	01/31/2025	CLIENT ID: SHEL-001/JANUARY 2025	0.00	821.55	
001-122-000-51541-4100		LEGAL - Professional Servi		CLIENT ID: SHEL-001/JANU	821.55	
087799	LEMAY MOBILE SHREDDING	02/14/2025	Regular	0.00	18.11	112497
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
48743505185	Invoice	02/01/2025	ACCT# 2185-952778-1166 MUNI COURT	0.00	18.11	
001-112-000-51251-4109		MUNI CT - Other Professi		ACCT# 2185-952778-1166	18.11	
109750	MASON COUNTY DISTRICT COURT	02/14/2025	Regular	0.00	10.00	112498
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
UA TEST/ITC COU	Invoice	02/05/2025	UA TEST/ITC COURT 4A0449937	0.00	10.00	
001-112-000-51251-4109		MUNI CT - Other Professi	24-ITC	UA TEST/ITC COURT 4A044	10.00	
109750	MASON COUNTY DISTRICT COURT	02/14/2025	Regular	0.00	50.00	112499
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
UA/ITC COURT	Invoice	01/08/2025	UA/ITC COURT 4A0449937	0.00	50.00	
001-112-000-51251-4109		MUNI CT - Other Professi	24-ITC	UA/ITC COURT 4A0449937	50.00	
109750	MASON COUNTY DISTRICT COURT	02/14/2025	Regular	0.00	600.00	112500
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
PROBATION CON	Invoice	02/03/2025	PROBATION CONSULTATION/ITC COURT J	0.00	600.00	
001-112-000-51251-4109		MUNI CT - Other Professi	24-ITC	PROBATION CONSULTATIO	600.00	
108850	MASON COUNTY GARBAGE CO.-A V	02/14/2025	Regular	0.00	5,188.86	112501
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
84135405149	Invoice	01/01/2025	ACCT# 2149-12818048 218 N THIRD	0.00	118.63	
001-141-000-57680-4700		PARKS - Utility Services		ACCT# 2149-12818048 21	118.63	
84475785149	Invoice	02/01/2025	ACCT# 2149-30135 CIVIC CENTER	0.00	319.14	
001-142-000-51890-4715		FACIL CIVIC - Utility Servic		ACCT# 2149-30135 CIVIC C	319.14	
84476545149	Invoice	02/01/2025	ACCT# 2149-30714 710 W ALDER	0.00	124.26	
001-142-000-57250-4700		FACIL LIB - Utility Services		ACCT# 2149-30714 710 W	124.26	
84477445149	Invoice	02/01/2025	ACCT# 2149-56141 525 COTA ST	0.00	39.90	
001-142-000-51890-4715		FACIL CIVIC - Utility Servic		ACCT# 2149-56141 525 CO	39.90	
84485845149	Invoice	02/01/2025	ACCT# 2149-204368 100 TURNER	0.00	38.41	
402-400-000-53580-4700		SEW SV MN - Utility Servi		ACCT# 2149-204368 100 T	38.41	
84486025149	Invoice	02/01/2025	ACCT# 2149-204402 101 N 10891 S HWY	0.00	178.01	
402-640-000-53580-4700		SEW SV SAT - Utility Servi		ACCT# 2149-204402 101 N	178.01	
84487835149	Invoice	02/01/2025	ACCT # 2149-204783 122 W FRANKLIN	0.00	230.42	
001-119-000-52250-4700		FIRE FACIL - Utility Service		ACCT # 2149-204783 122	230.42	
84490785149	Invoice	02/01/2025	ACCT# 214-205337 1700 FAIRMOUNT	0.00	1,215.52	
402-400-000-53580-4700		SEW SV MN - Utility Servi		ACCT# 214-205337 1700 F	1,215.52	
84492165149	Invoice	02/01/2025	ACCT# 2149-205584 200 N FRONT ST	0.00	38.41	

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
402-400-000-53580-4700		SEW SV MN - Utility Servi	ACCT# 2149-205584 200 N		38.41	
8449733S149	Invoice	02/01/2025	ACCT# 2149-206560 427 W RAILROAD	0.00	57.61	
001-142-000-57530-4700		FACIL MUSM - Utility Serv	ACCT# 2149-206560 427		57.61	
8449845S149	Invoice	02/01/2025	ACCT# 2149-206771 525 W COTA	0.00	712.06	
001-142-000-51890-4715		FACIL CIVIC - Utility Servic	ACCT# 2149-206771 525		712.06	
8450049S149	Invoice	02/01/2025	ACCT# 2149-207155 710 W ALDER	0.00	356.02	
001-142-000-57250-4700		FACIL LIB - Utility Services	ACCT# 2149-207155 710		356.02	
8450161S149	Invoice	02/01/2025	ACCT# 2149-207351 902 W PINE	0.00	57.61	
001-140-000-55430-4700		CD AN CTRL - Utility Servi	ACCT# 2149-207351 902		57.61	
8450227S149	Invoice	02/01/2025	ACCT# 2149-207565 1000 W PINE	0.00	1,378.86	
001-141-000-57680-4700		PARKS - Utility Services	ACCT# 2149-207565 1000		413.66	
101-000-000-54230-4700		ST RD WAY - Maint - Utili	ACCT# 2149-207565 1000		193.04	
401-000-000-53480-4700		WAT - Utility Services	ACCT# 2149-207565 1000		193.04	
402-300-000-53580-4700		SEW CL MN - Utility Servi	ACCT# 2149-207565 1000		193.04	
404-000-000-53180-4700		STRM - Utility Services	ACCT# 2149-207565 1000		193.04	
503-000-000-54865-4700		EMR - Utility Services	ACCT# 2149-207565 1000		193.04	
8450228S149	Invoice	02/01/2025	ACCT# 2149-207568 1000 W PINE	0.00	92.28	
001-141-000-57680-4700		PARKS - Utility Services	ACCT# 2149-207568 1000		15.38	
101-000-000-54230-4700		ST RD WAY - Maint - Utili	ACCT# 2149-207568 1000		15.38	
401-000-000-53480-4700		WAT - Utility Services	ACCT# 2149-207568 1000		15.38	
402-300-000-53580-4700		SEW CL MN - Utility Servi	ACCT# 2149-207568 1000		15.38	
404-000-000-53180-4700		STRM - Utility Services	ACCT# 2149-207568 1000		15.38	
503-000-000-54865-4700		EMR - Utility Services	ACCT# 2149-207568 1000		15.38	
8450291S149	Invoice	02/01/2025	ACCT# 2149-209143 1700 FAIRMOUNT	0.00	52.52	
402-400-000-53580-4700		SEW SV MN - Utility Servi	ACCT# 2149-209143 1700		52.52	
8452979S149	Invoice	02/01/2025	ACCT# 2149-12818048 218 N THIRD	0.00	179.20	
001-141-000-57680-4700		PARKS - Utility Services	ACCT# 2149-12818048 21		179.20	
113000	MASON COUNTY TREASURER	02/14/2025	Regular	0.00	65.02	112502
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
JANUARY 2025	Invoice	02/10/2025	JANUARY 2025/CVC FINES &	FORFEITS	65.02	
657-000-000-58600-0005		CVC Fines & Forfeits		JANUARY 2025/CVC FINES	65.02	
114420	MASON TRANSIT AUTHORITY	02/14/2025	Regular	0.00	700.00	112503
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
11289	Invoice	01/31/2025	CUST# CIT100 JANUARY GYM USE	0.00	700.00	
001-141-000-57120-4500		REC - Operating Rentals		CUST# CIT100 JANUARY GY	700.00	
VEN02241	MICHELLE PUGH	02/14/2025	Regular	0.00	1,696.00	112504
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
YOGA INSTRUCT	Invoice	02/06/2025	YOGA INSTRUCTOR/JANUARY 2025	0.00	1,696.00	
001-141-000-57120-4100		REC - Professional Service		YOGA INSTRUCTOR/JANUA	1,696.00	
VEN02402	MVIX (USA), INC	02/14/2025	Regular	0.00	136.74	112505
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INVZ-2012116	Invoice	02/01/2025	MVIX MONITOR ANNUAL SUPPORT	0.00	136.74	
001-112-000-51251-4109		MUNI CT - Other Professi	24-ITC	MVIX MONITOR ANNUAL S	136.74	
153500	PACIFIC LAMP & SUPPLY CO	02/14/2025	Regular	0.00	72.38	112506
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
890431	Credit Memo	08/08/2024	CUST# 23733-1 RETURN LED ORDER	0.00	-574.49	
001-119-000-52250-3100		FIRE FACIL - Office and Op		CUST# 23733-1 RETURN LE	-574.49	
896913	Invoice	01/08/2025	CUST# 23733-1 FLUORESCENT LIGHTS	0.00	646.87	

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
001-142-000-57250-3100	FACIL LIB - Office and Ope		CUST# 23733-1 FLUORESC	485.15		
402-400-000-53580-3100	SEW SV MN - Office and		CUST# 23733-1 FLUORESC	161.72		
161080	PROFORCE	02/14/2025	Regular	0.00	4,989.65	112507
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
0566236	Invoice	01/21/2025	CUST# 009361 PO# 20241220-001	0.00	3,832.59	
001-118-000-52122-3100		PD PAT - Office and Opera		CUST# 009361 PO# 20241	3,832.59	
566646	Invoice	01/27/2025	CUST# 009361 QT# 709675	0.00	1,157.06	
001-118-000-52122-3505		PD PAT - Inventoried-Smal		CUST# 009361 QT# 70967	1,157.06	
164899	QWEST DBA CENTURYLINK	02/14/2025	Regular	0.00	1,068.02	112508
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
33341982 JANUA	Invoice	01/28/2025	33341982 JANUARY 2025	0.00	1,068.02	
401-000-000-53480-4201		WAT - Communication - S		33341982 JANUARY 2025	225.38	
402-300-000-53580-4200		SEW CL MN - Communica		33341982 JANUARY 2025	60.25	
402-400-000-53580-4200		SEW SV MN - Communica		33341982 JANUARY 2025	384.53	
402-400-000-53580-4200		SEW SV MN - Communica		33341982 JANUARY 2025	149.37	
402-640-000-53580-4200		SEW SV SAT - Communica		33341982 JANUARY 2025	248.49	
187505	SHELTON SCHOOL DISTRICT	02/14/2025	Regular	0.00	400.00	112509
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
2025-032	Invoice	02/03/2025	YOUTH BASKETBALL PRACTICE	0.00	400.00	
001-141-000-57120-4500		REC - Operating Rentals		YOUTH BASKETBALL PRAC	400.00	
VEN02656	SPEX CERTI PREP, LLC	02/14/2025	Regular	0.00	2,545.90	112510
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
515697	Invoice	01/28/2025	CUST# 39858 SAMPLE TESTS	0.00	464.21	
402-400-000-53580-4100		SEW SV MN - Professional		CUST# 39858 SAMPLE TES	464.21	
516108	Invoice	01/30/2025	CUST# 39858 SAMPLE TESTS	0.00	285.80	
402-400-000-53580-4100		SEW SV MN - Professional		CUST# 39858 SAMPLE TES	285.80	
516124	Invoice	01/30/2025	CUST# 39858 SAMPLE TESTS	0.00	1,795.89	
402-400-000-53580-4100		SEW SV MN - Professional		CUST# 39858 SAMPLE TES	1,795.89	
196341	STEVEN R. BUZZARD	02/14/2025	Regular	0.00	450.00	112511
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
PROTEM0203202	Invoice	02/03/2025	PROTEM02032025	0.00	300.00	
001-112-000-51251-4101		MUNI CT - Judge Pro-Tem		PROTEM02032025	300.00	
PROTEM0206202	Invoice	02/06/2025	PROTEM02062025	0.00	150.00	
001-112-000-51251-4101		MUNI CT - Judge Pro-Tem		PROTEM02062025	150.00	
VEN02534	SUMMIT TOWING INC	02/14/2025	Regular	0.00	583.98	112512
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
1866	Invoice	02/04/2025	TOW TOYOTA P/U 25-501032	0.00	583.98	
001-118-000-52122-4100		PD PAT - Professional Serv		TOW TOYOTA P/U 25-5010	583.98	
197259	SUNSET AIR, INC.	02/14/2025	Regular	0.00	1,927.54	112513
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
123403A	Invoice	02/03/2025	CUST# SHE122 2 RTU'S SERVICED	0.00	767.75	
001-119-000-52250-4100		FIRE FACIL - Professional		CUST# SHE122 2 RTU'S SER	767.75	
124629	Invoice	01/22/2025	CUST# CIT245 RTU 1 AND RTU 2 SERVICE	0.00	1,159.79	
001-142-000-51890-4115		FACIL CIVIC - Professional		CUST# CIT245 RTU 1 AND	1,159.79	

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
200235	TACOMA SCREW PRODUCTS INC	02/14/2025	Regular	0.00	420.53	112514
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
170129174-00	Invoice	01/28/2025	CUST# 103300 MISC TOOLS/SUPPLIES	0.00	420.53	
402-640-000-53580-3100		SEW SV SAT - Office and		CUST# 103300 MISC TOOL	420.53	
178252	TASCHNER LAW, PLLC	02/14/2025	Regular	0.00	14,440.00	112515
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
37	Invoice	02/03/2025	PUBLIC DEFENDER/ITC FEBRUARY 2025	0.00	1,500.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		PUBLIC DEFENDER/ITC FEB	1,500.00	
PUBLIC DEFENSE	Invoice	02/10/2025	PUBLIC DEFENSE SVC/FEBRUARY 2025	0.00	12,940.00	
001-122-000-51593-4100		LEGAL - Public Defense/A		PUBLIC DEFENSE SVC/FEB	12,940.00	
VEN01609	TEREX USA, LLC	02/14/2025	Regular	0.00	4,622.11	112516
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
5005389104	Invoice	01/22/2025	CUST# 4720504 PLATFORM/59482D	0.00	4,622.11	
503-000-000-54865-3104		EMR - Oper Supp-Parts-E		CUST# 4720504 PLATFOR	4,622.11	
201300	TOZIER BROS INC.	02/14/2025	Regular	0.00	26.91	112517
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
474079	Invoice	02/04/2025	CUST# 20090 STARTER PULL CORD	0.00	5.14	
001-141-000-57680-3100		PARKS - Office and Opera		CUST# 20090 STARTER PUL	5.14	
474088	Invoice	02/05/2025	CUST# 20090 DURA BATTERY 9V	0.00	21.77	
001-142-000-51890-3115		FACIL CIVIC - Office and O		CUST# 20090 DURA BATTE	21.77	
202990	WAPRO	02/14/2025	Regular	0.00	25.00	112518
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
11140	Invoice	11/10/2024	WAPRO MBRSHP DUES VVENTURA 12/24	0.00	25.00	
001-111-000-51423-4900		FIN AC - Miscellaneous		WAPRO MBRSHP DUES V.V	25.00	
203035	WASHINGTON ST. TREASURER	02/14/2025	Regular	0.00	4,720.74	112519
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
JANUARY 2025	Invoice	02/11/2025	JANUARY 2025/STATE FINES	0.00	4,720.74	
657-000-000-58600-0006		State Fines & Forfeits		JANUARY 2025/STATE FINE	4,720.74	

Bank Code APBNK-Main Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	67	37	0.00	236,839.09
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	30	19	0.00	78,532.74
	97	56	0.00	315,371.83

Fund Summary

Fund	Name	Period	Amount
999	Pooled Cash	2/2025	315,371.83
			<u>315,371.83</u>



Shelton, WA

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By Check Number

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
005900	CAPITAL BUSINESS MACHINES	02/13/2025	EFT	0.00	1,190.63	1029
Bank Code: APBNK-Main-APBNK-Main						
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INV250859	Invoice	02/10/2025	CONTRACT # CN3230-01		0.00	468.63
001-111-000-51423-4500		FIN AC - Operating Rental		CONTRACT # CN3230-01		281.18
001-130-000-51810-4500		HR - Operating Rentals		CONTRACT # CN3230-01		187.45
INV250860	Invoice	02/10/2025	CBM CONTRACT #CN3370-01		0.00	334.97
001-110-000-51160-4500		COUNCIL - Operating Ren		CONTRACT#CN3370-01		82.74
001-111-000-51421-4500		FIN UB - Operating Rental		CONTRACT#CN3370-01		3.15
001-111-000-51423-4500		FIN AC - Operating Rental		CONTRACT#CN3370-01		11.72
001-115-000-51896-4500		PW ENG - Operating Rent		CONTRACT#CN3370-01		112.05
001-120-000-51310-4500		C MGR - Operating Rental		CONTRACT#CN3370-01		3.79
001-121-000-51430-4500		CLK REC - Operating Rent		CONTRACT#CN3370-01		0.94
001-130-000-51810-4500		HR - Operating Rentals		CONTRACT#CN3370-01		0.30
001-132-000-51888-4500		IT - Operating Rentals		CONTRACT#CN3370-01		13.40
001-140-000-55860-4500		CD PLAN - Operating Rent		CONTRACT#CN3370-01		86.25
001-141-000-57680-4500		PARKS - Operating Rental		CONTRACT#CN3370-01		9.31
001-142-000-51830-4500		FACIL - Operating Rental		CONTRACT#CN3370-01		10.92
001-143-000-57320-4500		COM CTR ARTS - Operatin		CONTRACT#CN3370-01		0.40
INV250861	Invoice	02/10/2025	CONTRACT# CN3227-01		0.00	38.12
401-000-000-53480-4501		WAT - Operating Rentals -		CONTRACT# CN3227-01		38.12
INV250862	Invoice	02/10/2025	CONTRACT# CN3364-01		0.00	60.19
401-000-000-53480-4501		WAT - Operating Rentals -		CONTRACT# CN3364-01		60.19
INV250863	Invoice	02/10/2025	CONTRACT# CN1866-01		0.00	150.72
402-400-000-53580-4500		SEW SV MN - Operating R		CONTRACT# CN1866-01		150.72
INV250883	Invoice	02/10/2025	CONTRACT# CN1692-01		0.00	11.98
001-112-000-51251-4500		MUNI CT - Operating Ren		CONTRACT# CN1692-01		11.98
INV250884	Invoice	02/10/2025	CONTRACT# CN3142-01		0.00	27.23
001-112-000-51251-4500		MUNI CT - Operating Ren		CONTRACT# CN3142-01		27.23
INV250885	Invoice	02/10/2025	CONTRACT# CN3143-01		0.00	42.37
001-112-000-51251-4500		MUNI CT - Operating Ren		CONTRACT# CN3143-01		42.37
INV250886	Invoice	02/10/2025	CONTRACT# CN3144-01		0.00	48.55
001-112-000-51251-4500		MUNI CT - Operating Ren		CONTRACT# CN3144-01		48.55
INV250887	Invoice	02/10/2025	CONTRACT# CN3588-01		0.00	7.87
001-112-000-51251-4500		MUNI CT - Operating Ren 24-ITC		CONTRACT# CN3588-01		7.87
008450	**Void**	02/13/2025	EFT	0.00	0.00	1030
	COMMUNITY ACTION COUNCIL	02/13/2025	EFT	0.00	44.37	1031
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
SOS CONTRIBUTI	Invoice	02/10/2025	SOS CONTRIBUTIONS/JANUARY 2025		0.00	44.37
657-000-000-58600-0014		SOS Contributions		SOS CONTRIBUTIONS/JAN		44.37
009231	DARREN PARSE	02/13/2025	EFT	0.00	300.00	1032
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INTERPRETATION	Invoice	02/05/2025	INTERPRETATION02052025		0.00	300.00
001-112-000-51251-4106		MUNI CT - Interpreter Ex		INTERPRETATION0205202		300.00
009351	DELAGE LANDEN FINANCIAL SVCS	02/13/2025	EFT	0.00	271.17	1033

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
83469077	Invoice	01/25/2025	CONTRACT# 500-50499916		0.00	271.17
001-115-000-51895-4500		PW ADM - Operating Ren		CONTRACT# 500-5049991		10.42
001-115-000-59148-7001		PW ADM - Long Term Lea		CONTRACT# 500-5049991		117.03
001-120-000-51310-4500		C MGR - Operating Rental		CONTRACT# 500-5049991		1.11
001-120-000-59113-7001		C MGR - Long Term Lease		CONTRACT# 500-5049991		12.45
001-140-000-55860-4500		CD PLAN - Operating Rent		CONTRACT# 500-5049991		10.64
001-140-000-59158-7001		CD - Long Term Lease		CONTRACT# 500-5049991		119.52
023078	FASTENAL COMPANY	02/13/2025	EFT	0.00	35.02	1034
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
WATUM227417	Credit Memo	09/03/2024	CUST# WATUM1147/ORIG INV WATUM22		0.00	-410.51
401-000-000-53480-3100		WAT - Office and Operati		CUST# WATUM1147/ORIG		-410.51
WATUM231275	Invoice	02/05/2025	CUST# WATUM1147 MISC SUPPLIES		0.00	445.53
401-000-000-53480-3100		WAT - Office and Operati		CUST# WATUM1147 MISC		445.53
VEN01406	FERGUSON WATERWORKS	02/13/2025	EFT	0.00	13,464.18	1035
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
0068437	Invoice	01/29/2025	CUST# 2544 METERS AND MXU'S FOR ST		0.00	13,464.18
401-000-000-53480-3100		WAT - Office and Operati		CUST# 2544 METERS AND		13,464.18
040960	GRAINGER	02/13/2025	EFT	0.00	225.10	1036
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
9354722812	Invoice	12/23/2024	ACCT# 839177342 WIRE STRIPPER		0.00	61.99
001-142-000-51830-3100		FACIL - Office and Operati		ACCT# 839177342 WIRE S		61.99
9388416266	Invoice	01/28/2025	ACCT# 839177342 GAUGE,VENT/19920D		0.00	114.75
503-000-000-54865-3104		EMR - Oper Supp-Parts-E		ACCT# 839177342 GAUGE,		114.75
9388416274	Invoice	01/28/2025	ACCT# 839177342 BREATHER VENT/1992		0.00	23.09
503-000-000-54865-3100		EMR - Office and Operati		ACCT# 839177342 BREATH		23.09
9388920465	Invoice	01/29/2025	ACCT# 839177342 BREATHER VENT/1992		0.00	25.27
503-000-000-54865-3100		EMR - Office and Operati		ACCT# 839177342 BREATH		25.27
VEN02276	JAMES N DOCTER	02/13/2025	EFT	0.00	3,000.00	1037
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
#8	Invoice	02/03/2025	COURT FACILITATOR/ITC FEBRUARY 2025		0.00	3,000.00
001-112-000-51251-4109		MUNI CT - Other Professi	24-ITC	COURT FACILITATOR/ITC FE		3,000.00
VEN02564	JOHN R BONIN	02/13/2025	EFT	0.00	625.00	1038
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
PROTEM0205202	Invoice	02/05/2025	PROTEM02052025		0.00	625.00
001-112-000-51251-4101		MUNI CT - Judge Pro-Tem		PROTEM02052025		625.00
081000	KENNETH J. DOBIE	02/13/2025	EFT	0.00	2,000.00	1039
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
DENTALREIMBUR	Invoice	02/01/2025	DENTALREIMBURSEMENT/FEBRUARY2025		0.00	2,000.00
502-000-000-51725-2036		PR BEN - Dental Costs-Re		DENTALREIMBURSEMENT/		2,000.00
142952	NORTH CENTRAL LABORATORIES	02/13/2025	EFT	0.00	152.12	1040

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
<u>514828</u>	Invoice	01/24/2025	ACCT# 42215 TEST SUPPLIES	0.00	152.12	
<u>402-400-000-53580-3100</u>		SEW SV MN - Office and		ACCT# 42215 TEST SUPPLI	152.12	
151000	P. U. D. # 3	02/13/2025	EFT	0.00	54,122.37	1041
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
<u>101001 FEBRUAR</u>	Invoice	02/05/2025	101001 FEBRUARY 2025	0.00	54,058.79	
<u>001-140-000-55430-4700</u>		CD AN CTRL - Utility Servi		35199001 FEBRUARY 2025	256.10	
<u>001-141-000-57680-4700</u>		PARKS - Utility Services		30003001 FEBRUARY 2025	168.67	
<u>001-141-000-57680-4700</u>		PARKS - Utility Services		32453001 FEBRUARY 2025	153.53	
<u>001-141-000-57680-4700</u>		PARKS - Utility Services		82241001 FEBRUARY 2025	93.92	
<u>001-141-000-57680-4700</u>		PARKS - Utility Services		25911003 FEBRUARY 202	109.15	
<u>001-142-000-51890-4715</u>		FACIL CIVIC - Utility Servic		28249001 FEBRUARY 2025	3,689.18	
<u>001-142-000-57250-4700</u>		FACIL LIB - Utility Services		35665001 FEBRUARY 2025	742.98	
<u>001-142-000-57530-4700</u>		FACIL MUSM - Utility Serv		27639001 FEBRUARY 2025	661.67	
<u>101-000-000-54263-4700</u>		ST LGHT - Utility Services		27837001 FEBRUARY 2025	2,198.23	
<u>101-000-000-54263-4700</u>		ST LGHT - Utility Services		27839002 FEBRUARY 2025	10,125.26	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		35337001 FEBRUARY 2025	94.52	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		109441001 FEBRUARY 202	81.82	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		109413001 FEBRUARY 202	69.88	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		109397001 FEBRUARY 202	99.03	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		101097001 FEBRUARY 202	98.22	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		26197001 FEBRUARY 2025	94.82	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		25911002 FEBRUARY 202	127.79	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		101002 FEBRUARY 2025	104.04	
<u>101-000-000-54264-4700</u>		ST TR CTL - Utility Service		101001 FEBRUARY 2025	102.74	
<u>101-000-000-54265-4700</u>		ST PRK FAC - Utility Servic		26857001 FEBRUARY 2025	28.68	
<u>101-000-000-54270-4700</u>		ST RD PRK - Utility Service		250321001 FEBRUARY 202	83.20	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		277201002 FEBRUARY 20	164.32	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		8511001 FEBRUARY 2025	169.46	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		101149001 FEBRUARY 202	114.06	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		277201001 FEBRUARY 202	219.01	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		25911001 FEBRUARY 2025	1,904.80	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		25913001 FEBRUARY 2025	149.77	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		26729001 FEBRUARY 2025	585.23	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		35201001 FEBRUARY 2025	1,733.08	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		113939001 FEBRUARY 202	118.47	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		101155001 FEBRUARY 202	4,874.69	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		45451001 FEBRUARY 2025	200.87	
<u>401-000-000-53480-4700</u>		WAT - Utility Services		46051001 FEBRUARY 2025	173.67	
<u>401-000-000-53480-4701</u>		WAT - Utility Services - Sh		26717001 FEBRUARY 2025	160.25	
<u>402-300-000-53580-4700</u>		SEW CL MN - Utility Servi		18515001 FEBRUARY 2025	87.05	
<u>402-300-000-53580-4700</u>		SEW CL MN - Utility Servi		47009001 FEBRUARY 2025	78.48	
<u>402-300-000-53580-4700</u>		SEW CL MN - Utility Servi		85079001 FEBRUARY 2025	72.57	
<u>402-400-000-53580-4700</u>		SEW SV MN - Utility Servi		30003002 FEBRUARY 2025	1,757.05	
<u>402-400-000-53580-4700</u>		SEW SV MN - Utility Servi		26551001 FEBRUARY 2025	2,555.59	
<u>402-400-000-53580-4700</u>		SEW SV MN - Utility Servi		259409001 FEBRUARY 202	13,380.20	
<u>402-640-000-53580-4700</u>		SEW SV SAT - Utility Servi		25911005 FEBRUARY 202	76.59	
<u>402-640-000-53580-4700</u>		SEW SV SAT - Utility Servi		252689001 FEBRUARY 202	6,232.39	
<u>404-000-000-53180-4700</u>		STRM - Utility Services		85183001 FEBRUARY 2025	67.76	
<u>ACCT# 28249003</u>	Invoice	02/05/2025	ACCT# 28249003/TREE MAZE FEBRUARY	0.00	63.58	
<u>001-142-000-57250-4700</u>		FACIL LIB - Utility Services		ACCT# 28249003/TREE M	63.58	
	Void	02/13/2025	EFT	0.00	0.00	1042
	Void	02/13/2025	EFT	0.00	0.00	1043
VEN02506	PDBLOWERS, INC.	02/13/2025	EFT	0.00	1,006.98	1044

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
93299	Invoice	01/28/2025	PO# 250127 PARTS	0.00	1,006.98	
402-640-000-53580-3100		SEW SV SAT - Office and		PO# 250127 PARTS	1,006.98	
178231	SEAN CARNEY	02/13/2025	EFT	0.00	40.00	1045
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
KIMUDO INSTRU	Invoice	02/06/2025	KIMUDO INSTRUCTOR/JANUARY 2025	0.00	40.00	
001-141-000-57120-4100		REC - Professional Service		KIMUDO INSTRUCTOR/JAN	40.00	
VEN01972	THOMAS A FURRER	02/13/2025	EFT	0.00	1,647.04	1046
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
COURT SECURITY	Invoice	02/10/2025	COURT SECURITY SVC/FEBRUARY 2025	0.00	1,647.04	
001-112-000-51251-4109		MUNI CT - Other Professi		COURT SECURITY SVC/FEB	1,647.04	
VEN02437	WALTER E NELSON CO OF WESTERN	02/13/2025	EFT	0.00	408.76	1047
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
1039519	Invoice	02/07/2025	CUST# 12400 MISC SUPPLIES	0.00	408.76	
001-142-000-51830-3100		FACIL - Office and Operati		CUST# 12400 MISC SUPPLI	107.60	
001-142-000-51890-3115		FACIL CIVIC - Office and O		CUST# 12400 MISC SUPPLI	98.99	
001-142-000-57250-3100		FACIL LIB - Office and Ope		CUST# 12400 MISC SUPPLI	51.59	
401-000-000-53480-3100		WAT - Office and Operati		CUST# 12400 MISC SUPPLI	51.59	
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 12400 MISC SUPPLI	98.99	
098000	BUILDERS FIRSTSOURCE	02/14/2025	Regular	0.00	22.88	112483
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
75827102	Credit Memo	12/13/2024	ACCT# 671668 ORIG INV # 78745824	0.00	-394.14	
401-000-000-53480-4801		WAT - Repairs and Mainte		ACCT# 671668 ORIG INV #	-394.14	
99379058	Invoice	02/05/2025	ACCT# 671668 MISC SUPPLIES	0.00	340.78	
402-400-000-53580-3100		SEW SV MN - Office and		ACCT# 671668 MISC SUPP	340.78	
99381558	Invoice	02/05/2025	ACCT# 671668 HATCHET, ANG BRUSH,LU	0.00	76.24	
402-400-000-53580-3100		SEW SV MN - Office and		ACCT# 671668 HATCHET, A	76.24	
108679	CENTRAL MASON FIRE AND EMS	02/14/2025	Regular	0.00	178,429.91	112484
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
FIRE SERVICES/FE	Invoice	02/01/2025	FIRE SERVICES/FEBRUARY 2025	0.00	178,429.91	
001-119-000-52220-4103		FIRE - Prof FF Services-Fir		FIRE SERVICES/FEBRUARY	128,647.33	
001-119-000-52221-4103		EMS - Prof Services-Fire D		FIRE SERVICES/FEBRUARY	42,546.72	
001-119-000-52260-4100		FIRE EQ - Professional Ser		FIRE SERVICES/FEBRUARY	4,777.53	
001-119-000-52260-4100		FIRE EQ - Professional Ser		FIRE SERVICES/FEBRUARY	2,458.33	
006950	CERTIFIED LABORATORIES	02/14/2025	Regular	0.00	713.99	112485
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
9016655	Invoice	01/29/2025	CUST# 364565 MISC SUPPLIES	0.00	713.99	
503-000-000-54865-3100		EMR - Office and Operati		CUST# 364565 MISC SUPP	713.99	
VEN02655	CHINTANA BARDEN	02/14/2025	Regular	0.00	150.00	112486
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INTERPRETATION	Invoice	01/27/2025	INTERPRETATION01272025	0.00	150.00	
001-112-000-51251-4106		MUNI CT - Interpreter Ex		INTERPRETATION0127202	150.00	
VEN01214	CINTAS CORPORATION	02/14/2025	Regular	0.00	206.48	112487

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
5252577101	Invoice	02/04/2025	CUST# 10690213	FIRST AID SUPPLIES	0.00	206.48
001-118-000-52122-3100		PD PAT - Office and Opera		CUST# 10690213 FIRST AI		206.48
008751	CRYSTAL SPRINGS	02/14/2025	Regular	0.00	152.03	112488
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
24726383 01012	Invoice	01/01/2025	CUST# 1033109224726383	WWTP	0.00	47.25
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 1033109224726383		38.54
402-400-000-53580-4500		SEW SV MN - Operating R		CUST# 1033109224726383		8.71
24726383012925	Invoice	01/29/2025	CUST# 1033109224726383	WWTP	0.00	104.78
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 1033109224726383		96.07
402-400-000-53580-4500		SEW SV MN - Operating R		CUST# 1033109224726383		8.71
009595	DEPT. OF LICENSING	02/14/2025	Regular	0.00	18.00	112489
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
SHP250004	Invoice	02/04/2025	SHP250004		0.00	18.00
657-000-000-58600-0007		Concealed Pistol Permits		SHP250004		18.00
080980	GILLIARDI LOGGING & CONSTRUCTI	02/14/2025	Regular	0.00	879.29	112490
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
23507	Invoice	01/07/2025	WET FILL TK#271687		0.00	121.20
404-000-000-53180-3100		STRM - Office and Operati		WET FILL TK#271687		121.20
23575	Invoice	01/15/2025	DRY FILL TK#'S271977,979,984,987,992,9		0.00	758.09
101-000-000-54230-3100		ST RD WAY - Office and O		DRY FILL TK#'S271977,979,		189.52
401-000-000-53480-3100		WAT - Office and Operati		DRY FILL TK#'S271977,979,		189.52
402-400-000-53580-3100		SEW SV MN - Office and		DRY FILL TK#'S271977,979,		189.53
404-000-000-53180-3100		STRM - Office and Operati		DRY FILL TK#'S271977,979,		189.52
VEN02505	GUNDERSON LAW OFFICE, PLLC	02/14/2025	Regular	0.00	10,000.00	112491
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
1456	Invoice	02/02/2025	PROSECUTION SERVICES/JANUARY 2025		0.00	10,000.00
001-122-000-51545-4101		LEGAL - Prof Serv - Prosec		PROSECUTION SERVICES/J		10,000.00
062087	IACP	02/14/2025	Regular	0.00	220.00	112492
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
0385148	Invoice	01/22/2025	ACTIVE DUES 2025#10013177/C.KOSTAD		0.00	220.00
001-118-000-52140-3100		PD TRG - Office and Oper		ACTIVE DUES 2025#10013		220.00
VEN02393	INTERNATIONAL INSTITUTE OF MUN	02/14/2025	Regular	0.00	195.00	112493
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
ID#38921 ANNUA	Invoice	01/09/2025	ID#38921 ANNUAL MBRSHP FEE DONNA		0.00	195.00
001-121-000-51430-4900		CLK REC - Miscellaneous		ID#38921 ANNUAL MBRSH		195.00
064940	J & I POWER EQUIPMENT INC	02/14/2025	Regular	0.00	122.95	112494
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
800778	Invoice	01/08/2025	CUST# 15090 RETRACTABLE	STARTER	0.00	102.10
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 15090 RETRACTABL		102.10
802248	Invoice	01/23/2025	CUST# 15090 AIR FILTER		0.00	20.85
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 15090 AIR FILTER		20.85
085995	LANGUAGE LINE SERVICES	02/14/2025	Regular	0.00	149.52	112495

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
11515074	Invoice	01/31/2025	ACCT# 9020514029 PHONE INTERPRETATI	0.00	108.94	
001-112-000-51251-4106		MUNI CT - Interpreter Ex		ACCT# 9020514029 PHON	108.94	
11520593	Invoice	01/31/2025	ACCT# 9020535356 PHONE INTERPRETATI	0.00	40.58	
001-122-000-51593-4101		LEGAL - OPD Grant Public		ACCT# 9020535356 PHON	40.58	
VEN02631	LAW, LYMAN, DANIEL, KAMERRER, I	02/14/2025	Regular	0.00	821.55	112496
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
MICHELLE ENGLE	Invoice	01/31/2025	CLIENT ID: SHEL-001/JANUARY 2025	0.00	821.55	
001-122-000-51541-4100		LEGAL - Professional Servi		CLIENT ID: SHEL-001/JANU	821.55	
087799	LEMAY MOBILE SHREDDING	02/14/2025	Regular	0.00	18.11	112497
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
48743505185	Invoice	02/01/2025	ACCT# 2185-952778-1166 MUNI COURT	0.00	18.11	
001-112-000-51251-4109		MUNI CT - Other Professi		ACCT# 2185-952778-1166	18.11	
109750	MASON COUNTY DISTRICT COURT	02/14/2025	Regular	0.00	10.00	112498
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
UA TEST/ITC COU	Invoice	02/05/2025	UA TEST/ITC COURT 4A0449937	0.00	10.00	
001-112-000-51251-4109		MUNI CT - Other Professi	24-ITC	UA TEST/ITC COURT 4A044	10.00	
109750	MASON COUNTY DISTRICT COURT	02/14/2025	Regular	0.00	50.00	112499
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
UA/ITC COURT	Invoice	01/08/2025	UA/ITC COURT 4A0449937	0.00	50.00	
001-112-000-51251-4109		MUNI CT - Other Professi	24-ITC	UA/ITC COURT 4A0449937	50.00	
109750	MASON COUNTY DISTRICT COURT	02/14/2025	Regular	0.00	600.00	112500
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
PROBATION CON	Invoice	02/03/2025	PROBATION CONSULTATION/ITC COURT J	0.00	600.00	
001-112-000-51251-4109		MUNI CT - Other Professi	24-ITC	PROBATION CONSULTATIO	600.00	
108850	MASON COUNTY GARBAGE CO.-A V	02/14/2025	Regular	0.00	5,188.86	112501
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
84135405149	Invoice	01/01/2025	ACCT# 2149-12818048 218 N THIRD	0.00	118.63	
001-141-000-57680-4700		PARKS - Utility Services		ACCT# 2149-12818048 21	118.63	
84475785149	Invoice	02/01/2025	ACCT# 2149-30135 CIVIC CENTER	0.00	319.14	
001-142-000-51890-4715		FACIL CIVIC - Utility Servic		ACCT# 2149-30135 CIVIC C	319.14	
84476545149	Invoice	02/01/2025	ACCT# 2149-30714 710 W ALDER	0.00	124.26	
001-142-000-57250-4700		FACIL LIB - Utility Services		ACCT# 2149-30714 710 W	124.26	
84477445149	Invoice	02/01/2025	ACCT# 2149-56141 525 COTA ST	0.00	39.90	
001-142-000-51890-4715		FACIL CIVIC - Utility Servic		ACCT# 2149-56141 525 CO	39.90	
84485845149	Invoice	02/01/2025	ACCT# 2149-204368 100 TURNER	0.00	38.41	
402-400-000-53580-4700		SEW SV MN - Utility Servi		ACCT# 2149-204368 100 T	38.41	
84486025149	Invoice	02/01/2025	ACCT# 2149-204402 101 N 10891 S HWY	0.00	178.01	
402-640-000-53580-4700		SEW SV SAT - Utility Servi		ACCT# 2149-204402 101 N	178.01	
84487835149	Invoice	02/01/2025	ACCT # 2149-204783 122 W FRANKLIN	0.00	230.42	
001-119-000-52250-4700		FIRE FACIL - Utility Service		ACCT # 2149-204783 122	230.42	
84490785149	Invoice	02/01/2025	ACCT# 214-205337 1700 FAIRMOUNT	0.00	1,215.52	
402-400-000-53580-4700		SEW SV MN - Utility Servi		ACCT# 214-205337 1700 F	1,215.52	
84492165149	Invoice	02/01/2025	ACCT# 2149-205584 200 N FRONT ST	0.00	38.41	

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
402-400-000-53580-4700		SEW SV MN - Utility Servi	ACCT# 2149-205584 200 N		38.41	
8449733S149	Invoice	02/01/2025	ACCT# 2149-206560 427 W RAILROAD	0.00	57.61	
001-142-000-57530-4700		FACIL MUSM - Utility Serv	ACCT# 2149-206560 427		57.61	
8449845S149	Invoice	02/01/2025	ACCT# 2149-206771 525 W COTA	0.00	712.06	
001-142-000-51890-4715		FACIL CIVIC - Utility Servic	ACCT# 2149-206771 525		712.06	
8450049S149	Invoice	02/01/2025	ACCT# 2149-207155 710 W ALDER	0.00	356.02	
001-142-000-57250-4700		FACIL LIB - Utility Services	ACCT# 2149-207155 710		356.02	
8450161S149	Invoice	02/01/2025	ACCT# 2149-207351 902 W PINE	0.00	57.61	
001-140-000-55430-4700		CD AN CTRL - Utility Servi	ACCT# 2149-207351 902		57.61	
8450227S149	Invoice	02/01/2025	ACCT# 2149-207565 1000 W PINE	0.00	1,378.86	
001-141-000-57680-4700		PARKS - Utility Services	ACCT# 2149-207565 1000		413.66	
101-000-000-54230-4700		ST RD WAY - Maint - Utili	ACCT# 2149-207565 1000		193.04	
401-000-000-53480-4700		WAT - Utility Services	ACCT# 2149-207565 1000		193.04	
402-300-000-53580-4700		SEW CL MN - Utility Servi	ACCT# 2149-207565 1000		193.04	
404-000-000-53180-4700		STRM - Utility Services	ACCT# 2149-207565 1000		193.04	
503-000-000-54865-4700		EMR - Utility Services	ACCT# 2149-207565 1000		193.04	
8450228S149	Invoice	02/01/2025	ACCT# 2149-207568 1000 W PINE	0.00	92.28	
001-141-000-57680-4700		PARKS - Utility Services	ACCT# 2149-207568 1000		15.38	
101-000-000-54230-4700		ST RD WAY - Maint - Utili	ACCT# 2149-207568 1000		15.38	
401-000-000-53480-4700		WAT - Utility Services	ACCT# 2149-207568 1000		15.38	
402-300-000-53580-4700		SEW CL MN - Utility Servi	ACCT# 2149-207568 1000		15.38	
404-000-000-53180-4700		STRM - Utility Services	ACCT# 2149-207568 1000		15.38	
503-000-000-54865-4700		EMR - Utility Services	ACCT# 2149-207568 1000		15.38	
8450291S149	Invoice	02/01/2025	ACCT# 2149-209143 1700 FAIRMOUNT	0.00	52.52	
402-400-000-53580-4700		SEW SV MN - Utility Servi	ACCT# 2149-209143 1700		52.52	
8452979S149	Invoice	02/01/2025	ACCT# 2149-12818048 218 N THIRD	0.00	179.20	
001-141-000-57680-4700		PARKS - Utility Services	ACCT# 2149-12818048 21		179.20	
113000	MASON COUNTY TREASURER	02/14/2025	Regular	0.00	65.02	112502
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
JANUARY 2025	Invoice	02/10/2025	JANUARY 2025/CVC FINES & FORFEITS	0.00	65.02	
657-000-000-58600-0005		CVC Fines & Forfeits		JANUARY 2025/CVC FINES	65.02	
114420	MASON TRANSIT AUTHORITY	02/14/2025	Regular	0.00	700.00	112503
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
11289	Invoice	01/31/2025	CUST# CIT100 JANUARY GYM USE	0.00	700.00	
001-141-000-57120-4500		REC - Operating Rentals		CUST# CIT100 JANUARY GY	700.00	
VEN02241	MICHELLE PUGH	02/14/2025	Regular	0.00	1,696.00	112504
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
YOGA INSTRUCT	Invoice	02/06/2025	YOGA INSTRUCTOR/JANUARY 2025	0.00	1,696.00	
001-141-000-57120-4100		REC - Professional Service		YOGA INSTRUCTOR/JANUA	1,696.00	
VEN02402	MVIX (USA), INC	02/14/2025	Regular	0.00	136.74	112505
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INVZ-2012116	Invoice	02/01/2025	MVIX MONITOR ANNUAL SUPPORT	0.00	136.74	
001-112-000-51251-4109		MUNI CT - Other Professi	24-ITC	MVIX MONITOR ANNUAL S	136.74	
153500	PACIFIC LAMP & SUPPLY CO	02/14/2025	Regular	0.00	72.38	112506
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
890431	Credit Memo	08/08/2024	CUST# 23733-1 RETURN LED ORDER	0.00	-574.49	
001-119-000-52250-3100		FIRE FACIL - Office and Op		CUST# 23733-1 RETURN LE	-574.49	
896913	Invoice	01/08/2025	CUST# 23733-1 FLUORESCENT LIGHTS	0.00	646.87	

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Packet: APPKT03444-FEBRUARY 14, 2025 AP PAYMENTS

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
001-142-000-57250-3100		FACIL LIB - Office and Ope	CUST# 23733-1 FLUORESC	485.15		
402-400-000-53580-3100		SEW SV MN - Office and	CUST# 23733-1 FLUORESC	161.72		
161080	PROFORCE	02/14/2025	Regular	0.00	4,989.65	112507
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
0566236	Invoice	01/21/2025	CUST# 009361 PO# 20241220-001	0.00	3,832.59	
001-118-000-52122-3100		PD PAT - Office and Opera		CUST# 009361 PO# 20241	3,832.59	
566646	Invoice	01/27/2025	CUST# 009361 QT# 709675	0.00	1,157.06	
001-118-000-52122-3505		PD PAT - Inventoried-Smal		CUST# 009361 QT# 70967	1,157.06	
164899	QWEST DBA CENTURYLINK	02/14/2025	Regular	0.00	1,068.02	112508
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
33341982 JANUA	Invoice	01/28/2025	33341982 JANUARY 2025	0.00	1,068.02	
401-000-000-53480-4201		WAT - Communication - S		33341982 JANUARY 2025	225.38	
402-300-000-53580-4200		SEW CL MN - Communica		33341982 JANUARY 2025	60.25	
402-400-000-53580-4200		SEW SV MN - Communica		33341982 JANUARY 2025	384.53	
402-400-000-53580-4200		SEW SV MN - Communica		33341982 JANUARY 2025	149.37	
402-640-000-53580-4200		SEW SV SAT - Communica		33341982 JANUARY 2025	248.49	
187505	SHELTON SCHOOL DISTRICT	02/14/2025	Regular	0.00	400.00	112509
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
2025-032	Invoice	02/03/2025	YOUTH BASKETBALL PRACTICE	0.00	400.00	
001-141-000-57120-4500		REC - Operating Rentals		YOUTH BASKETBALL PRAC	400.00	
VEN02656	SPEX CERTI PREP, LLC	02/14/2025	Regular	0.00	2,545.90	112510
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
515697	Invoice	01/28/2025	CUST# 39858 SAMPLE TESTS	0.00	464.21	
402-400-000-53580-4100		SEW SV MN - Professional		CUST# 39858 SAMPLE TES	464.21	
516108	Invoice	01/30/2025	CUST# 39858 SAMPLE TESTS	0.00	285.80	
402-400-000-53580-4100		SEW SV MN - Professional		CUST# 39858 SAMPLE TES	285.80	
516124	Invoice	01/30/2025	CUST# 39858 SAMPLE TESTS	0.00	1,795.89	
402-400-000-53580-4100		SEW SV MN - Professional		CUST# 39858 SAMPLE TES	1,795.89	
196341	STEVEN R. BUZZARD	02/14/2025	Regular	0.00	450.00	112511
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
PROTEM0203202	Invoice	02/03/2025	PROTEM02032025	0.00	300.00	
001-112-000-51251-4101		MUNI CT - Judge Pro-Tem		PROTEM02032025	300.00	
PROTEM0206202	Invoice	02/06/2025	PROTEM02062025	0.00	150.00	
001-112-000-51251-4101		MUNI CT - Judge Pro-Tem		PROTEM02062025	150.00	
VEN02534	SUMMIT TOWING INC	02/14/2025	Regular	0.00	583.98	112512
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
1866	Invoice	02/04/2025	TOW TOYOTA P/U 25-501032	0.00	583.98	
001-118-000-52122-4100		PD PAT - Professional Serv		TOW TOYOTA P/U 25-5010	583.98	
197259	SUNSET AIR, INC.	02/14/2025	Regular	0.00	1,927.54	112513
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
123403A	Invoice	02/03/2025	CUST# SHE122 2 RTU'S SERVICED	0.00	767.75	
001-119-000-52250-4100		FIRE FACIL - Professional		CUST# SHE122 2 RTU'S SER	767.75	
124629	Invoice	01/22/2025	CUST# CIT245 RTU 1 AND RTU 2 SERVICE	0.00	1,159.79	
001-142-000-51890-4115		FACIL CIVIC - Professional		CUST# CIT245 RTU 1 AND	1,159.79	

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
200235	TACOMA SCREW PRODUCTS INC	02/14/2025	Regular	0.00	420.53	112514
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
170129174-00	Invoice	01/28/2025	CUST# 103300 MISC TOOLS/SUPPLIES	0.00	420.53	
402-640-000-53580-3100		SEW SV SAT - Office and		CUST# 103300 MISC TOOL	420.53	
178252	TASCHNER LAW, PLLC	02/14/2025	Regular	0.00	14,440.00	112515
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
37	Invoice	02/03/2025	PUBLIC DEFENDER/ITC FEBRUARY 2025	0.00	1,500.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		PUBLIC DEFENDER/ITC FEB	1,500.00	
PUBLIC DEFENSE	Invoice	02/10/2025	PUBLIC DEFENSE SVC/FEBRUARY 2025	0.00	12,940.00	
001-122-000-51593-4100		LEGAL - Public Defense/A		PUBLIC DEFENSE SVC/FEB	12,940.00	
VEN01609	TEREX USA, LLC	02/14/2025	Regular	0.00	4,622.11	112516
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
5005389104	Invoice	01/22/2025	CUST# 4720504 PLATFORM/59482D	0.00	4,622.11	
503-000-000-54865-3104		EMR - Oper Supp-Parts-E		CUST# 4720504 PLATFOR	4,622.11	
201300	TOZIER BROS INC.	02/14/2025	Regular	0.00	26.91	112517
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
474079	Invoice	02/04/2025	CUST# 20090 STARTER PULL CORD	0.00	5.14	
001-141-000-57680-3100		PARKS - Office and Opera		CUST# 20090 STARTER PUL	5.14	
474088	Invoice	02/05/2025	CUST# 20090 DURA BATTERY 9V	0.00	21.77	
001-142-000-51890-3115		FACIL CIVIC - Office and O		CUST# 20090 DURA BATTE	21.77	
202990	WAPRO	02/14/2025	Regular	0.00	25.00	112518
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
11140	Invoice	11/10/2024	WAPRO MBRSHP DUES V.VENTURA 12/24	0.00	25.00	
001-111-000-51423-4900		FIN AC - Miscellaneous		WAPRO MBRSHP DUES V.V	25.00	
203035	WASHINGTON ST. TREASURER	02/14/2025	Regular	0.00	4,720.74	112519
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
JANUARY 2025	Invoice	02/11/2025	JANUARY 2025/STATE FINES	0.00	4,720.74	
657-000-000-58600-0006		State Fines & Forfeits		JANUARY 2025/STATE FINE	4,720.74	

Bank Code APBNK-Main Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	67	37	0.00	236,839.09
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	30	19	0.00	78,532.74
	97	56	0.00	315,371.83

Fund Summary

Fund	Name	Period	Amount
999	Pooled Cash	2/2025	315,371.83
			<u>315,371.83</u>

VOUCHER APPROVAL

I, the undersigned, do hereby certify under penalty of perjury that the materials have been furnished, the services rendered, or the labor performed as described herein voucher number 112520 in the total amount of \$20,000.00 that the claims are just, due and unpaid obligations against the City of Shelton, and that I am authorized to authenticate and certify said claims.

Signed this 19th of February, 2025.

Michael G. Githens
Finance Director

We, the undersigned members of the City Council of Shelton, Washington, do hereby certify that the vouchers contained herein are approved for payment.

Signed this _____ of _____, 2025.

Mayor Eric Onisko

Deputy Mayor Sharon Schirman

Councilmember George Blush

Councilmember Tom Gilmore

Councilmember Miguel Gutierrez

Councilmember Lyndsey Sapp

Councilmember Melissa Stearns



Shelton, WA

Check Register

Packet: APPKT03452 - FEBRUARY 19, 2025 AP COMMUNITY
LIFELINE GRANT PAYMENT

By Check Number

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: APBNK-Main-APBNK-Main						
VEN02658	COMMUNITY LIFELINE	02/19/2025	Regular	0.00	20,000.00	112520
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
COMMUNITY LIF	Invoice	02/19/2025	COMMUNITY LIFELINE GRANT/FEBRUARY	0.00	20,000.00	
001-120-000-56540-4100		HOMELESS SERV-Professi		COMMUNITY LIFELINE GR	20,000.00	

Bank Code APBNK-Main Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	1	1	0.00	20,000.00
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	0	0	0.00	0.00
	1	1	0.00	20,000.00

Fund Summary

Fund	Name	Period	Amount
999	Pooled Cash	2/2025	20,000.00
			<u>20,000.00</u>



Shelton, WA

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Packet: APPKT03452 - FEBRUARY 19, 2025 AP COMMUNITY
LIFELINE GRANT PAYMENT

By Check Number

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: APBNK-Main-APBNK-Main						
VEN02658	COMMUNITY LIFELINE	02/19/2025	Regular	0.00	20,000.00	112520

Bank Code APBNK-Main Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	1	1	0.00	20,000.00
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	0	0	0.00	0.00
	1	1	0.00	20,000.00

Fund Summary

Fund	Name	Period	Amount
999	Pooled Cash	2/2025	20,000.00
			<u>20,000.00</u>

VOUCHER APPROVAL

I, the undersigned, do hereby certify under penalty of perjury that the materials have been furnished, the services rendered, or the labor performed as described herein vouchers number 112524 through number 112559 and EFT payment numbers 1048 through 1062 in the total amount of \$65,274.08 and Bank Draft numbers DFT0001814 through DFT0001827 in the total amount of \$200,417.32 that the claims are just, due and unpaid obligations against the City of Shelton, and that I am authorized to authenticate and certify said claims.

Signed this 21st of February, 2025.


Finance Director

We, the undersigned members of the City Council of Shelton, Washington, do hereby certify that the vouchers contained herein are approved for payment.

Signed this _____ of _____, 2025.

Mayor Eric Onisko

Deputy Mayor Sharon Schirman

Councilmember George Blush

Councilmember Tom Gilmore

Councilmember Miguel Gutierrez

Councilmember Lyndsey Sapp

Councilmember Melissa Stearns



Shelton, WA

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Packet: APPKT03457 - FEBRUARY 21, 2025 AP PAYMENTS

By Check Number

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: APBNK-Main-APBNK-Main						
009231	DARREN PARSE	02/21/2025	EFT	0.00	375.00	1048
VEN02319	DENALI WATER SOLUTIONS LLC	02/21/2025	EFT	0.00	9,963.90	1049
023078	FASTENAL COMPANY	02/21/2025	EFT	0.00	323.02	1050
VEN01406	FERGUSON WATERWORKS	02/21/2025	EFT	0.00	84.68	1051
045000	H.D. FOWLER COMPANY	02/21/2025	EFT	0.00	2,729.28	1052
142952	NORTH CENTRAL LABORATORIES	02/21/2025	EFT	0.00	680.21	1053
VEN02141	NORTHWEST CASCADE, INC.	02/21/2025	EFT	0.00	141.00	1054
VEN02532	PROFAST SUPPLY INC	02/21/2025	EFT	0.00	236.91	1055
195599	STATE AUDITORS OFFICE	02/21/2025	EFT	0.00	1,321.45	1056
VEN02449	THE NICHOLS GROUP RELATIONS, LI	02/21/2025	EFT	0.00	3,000.00	1057
189670	THE SHOPPER	02/21/2025	EFT	0.00	348.04	1058
201148	TMG SERVICES, INC.	02/21/2025	EFT	0.00	875.56	1059
201520	TRAFFIC SAFETY SUPPLY CO.	02/21/2025	EFT	0.00	3,000.64	1060
VEN02437	WALTER E NELSON CO OF WESTERN	02/21/2025	EFT	0.00	54.45	1061
203900	WESMAR COMPANY, INC	02/21/2025	EFT	0.00	814.01	1062
000401	A T & T	02/21/2025	Regular	0.00	58.22	112524
VEN02394	AIMPOINT INC	02/21/2025	Regular	0.00	486.79	112525
VEN02445	AK ATHLETIC EQUIPMENT, INC.	02/21/2025	Regular	0.00	1,946.70	112526
002982	APP	02/21/2025	Regular	0.00	1,648.75	112527
003003	ASSOC OF WA CITIES	02/21/2025	Regular	0.00	585.00	112528
VEN02340	BLT SHELTON PONY, LLC	02/21/2025	Regular	0.00	761.82	112529
098000	BUILDERS FIRSTSOURCE	02/21/2025	Regular	0.00	403.62	112530
008751	CRYSTAL SPRINGS	02/21/2025	Regular	0.00	336.80	112531
VEN01592	EDGAR JERONIMO PABLO	02/21/2025	Regular	0.00	560.00	112532
VEN02652	J FRANK SCHMIDT & SON	02/21/2025	Regular	0.00	5,909.73	112533
VEN02551	JACK M NASWORTHY	02/21/2025	Regular	0.00	350.00	112534
VEN02657	JENNY'S HEATING & COOLING	02/21/2025	Regular	0.00	190.94	112535
091345	LEXIPOL LLC	02/21/2025	Regular	0.00	3,395.07	112536
113000	MASON COUNTY TREASURER	02/21/2025	Regular	0.00	23.50	112537
113000	MASON COUNTY TREASURER	02/21/2025	Regular	0.00	23.50	112538
113000	MASON COUNTY TREASURER	02/21/2025	Regular	0.00	23.50	112539
113000	MASON COUNTY TREASURER	02/21/2025	Regular	0.00	23.50	112540
113000	MASON COUNTY TREASURER	02/21/2025	Regular	0.00	23.50	112541
142300	NISQUALLY INDIAN TRIBE	02/21/2025	Regular	0.00	4,729.89	112542
VEN02623	PETROCARD, INC	02/21/2025	Regular	0.00	4,327.85	112543
114040	PETTYJOHN ENTERPRISES, LLC	02/21/2025	Regular	0.00	166.61	112544
161080	PROFORCE	02/21/2025	Regular	0.00	192.29	112545
VEN02498	RHIZORS PAINTING LLC	02/21/2025	Regular	0.00	2,483.99	112546
186450	SHELTON LOCK & KEY	02/21/2025	Regular	0.00	204.01	112547
187505	SHELTON SCHOOL DISTRICT	02/21/2025	Regular	0.00	4,600.00	112548
200255	TAGS AWARDS & SPECIALTIES	02/21/2025	Regular	0.00	119.47	112549
VEN01650	THURSTON MASON BEHAVIORAL HI	02/21/2025	Regular	0.00	723.80	112550
201300	TOZIER BROS INC.	02/21/2025	Regular	0.00	458.62	112551
202195	U.S. BANK N.A.-CUSTODY	02/21/2025	Regular	0.00	40.00	112552
VEN02408	VEOLIA TREATMENT SOLUTIONS	02/21/2025	Regular	0.00	1,039.14	112553
VEN02544	VESTIS GROUP INC	02/21/2025	Regular	0.00	119.63	112554
VEN02287	WARRIOR WOMAN LAW PLLC	02/21/2025	Regular	0.00	3,369.00	112555
202850	WASHINGTON PUBLIC TREASURERS	02/21/2025	Regular	0.00	400.00	112556
203780	WATER MGMNT LABORATORIES INC	02/21/2025	Regular	0.00	358.00	112557
053987	WESTBAY NAPA AUTO PARTS	02/21/2025	Regular	0.00	1,227.07	112558

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Packet: APPKT03457-FEBRUARY 21, 2025 AP PAYMENTS

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
VEN02139	ZEPPELIN SHIPPING & TECHNOLOGY	02/21/2025	Regular	0.00	15.62	112559

Bank Code APBNK-Main Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	81	36	0.00	41,325.93
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	22	15	0.00	23,948.15
	103	51	0.00	65,274.08

Fund Summary

Fund	Name	Period	Amount
999	Pooled Cash	2/2025	65,274.08
			<u>65,274.08</u>



Shelton, WA

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Packet: APPKT03457 - FEBRUARY 21, 2025 AP PAYMENTS

By Check Number

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
009231	DARREN PARSE	02/21/2025	EFT	0.00	375.00	1048
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INTERPRETATION	Invoice	01/27/2025	INTERPRETATION01272025	0.00	75.00	
001-112-000-51251-4106		MUNI CT - Interpreter Ex		INTERPRETATION0127202	75.00	
INTERPRETATION	Invoice	02/10/2025	INTERPRETATION02102025	0.00	150.00	
001-112-000-51251-4106		MUNI CT - Interpreter Ex		INTERPRETATION0210202	150.00	
INTERPRETATION	Invoice	02/12/2025	INTERPRETATION02122025	0.00	150.00	
001-112-000-51251-4106		MUNI CT - Interpreter Ex		INTERPRETATION0212202	150.00	
VEN02319	DENALI WATER SOLUTIONS LLC	02/21/2025	EFT	0.00	9,963.90	1049
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INV1011168	Invoice	02/06/2025	CUST# 599121378 TRANSPORTATION	0.00	9,963.90	
402-400-000-53580-4100		SEW SV MN - Professional		CUST# 599121378 TRANSP	9,963.90	
023078	FASTENAL COMPANY	02/21/2025	EFT	0.00	323.02	1050
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
WATUM231373	Invoice	02/10/2025	CUST# WATUM1962 MISC SUPPLIES	0.00	170.34	
402-400-000-53580-3100		SEW SV MN - Office and		CUST# WATUM1962 MISC	170.34	
WATUM231380	Invoice	02/10/2025	CUST# WATUM1961 GLOVES,VESTS	0.00	147.56	
401-000-000-53480-3100		WAT - Office and Operati		CUST# WATUM1961 GLOV	147.56	
WATUM231388	Invoice	02/10/2025	CUST# WATUM1147 BLISTER PK	0.00	5.12	
401-000-000-53480-3100		WAT - Office and Operati		CUST# WATUM1147 BLIST	5.12	
VEN01406	FERGUSON WATERWORKS	02/21/2025	EFT	0.00	84.68	1051
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
0052629-2	Invoice	02/03/2025	CUST# 2543 MULTI PURPOSE END CONN/	0.00	84.68	
401-000-000-53480-3100		WAT - Office and Operati		CUST# 2543 MULTI PURPO	84.68	
045000	H.D. FOWLER COMPANY	02/21/2025	EFT	0.00	2,729.28	1052
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
C632171	Credit Memo	02/04/2025	CITY OF SHELTON #194680/ORIGINV#I692	0.00	-1,063.93	
402-640-000-53580-3100		SEW SV SAT - Office and		CITY OF SHELTON #194680	-1,063.93	
I6932313	Invoice	02/18/2025	CITY OF SHELTON #194680/7" RESETTER	0.00	1,893.55	
401-000-000-53480-3100		WAT - Office and Operati		CITY OF SHELTON #194680	1,893.55	
I6932316	Invoice	02/18/2025	CITY OF SHELTON #194680/9" RESETTER	0.00	1,899.66	
401-000-000-53480-3100		WAT - Office and Operati		CITY OF SHELTON #194680	1,899.66	
142952	NORTH CENTRAL LABORATORIES	02/21/2025	EFT	0.00	680.21	1053
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
515078	Invoice	01/29/2025	ACCT# 42215 TEST SUPPLIES	0.00	680.21	
402-400-000-53580-3100		SEW SV MN - Office and		ACCT# 42215 TEST SUPPLI	680.21	
VEN02141	NORTHWEST CASCADE, INC.	02/21/2025	EFT	0.00	141.00	1054

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
0554687336	Invoice	02/05/2025	CUST# 228916 799 W HARVARD AVE SERV	0.00	141.00	
001-141-000-57680-4500		PARKS - Operating Rental		CUST# 228916 799 W HAR	141.00	
VEN02532	PROFAST SUPPLY INC	02/21/2025	EFT	0.00	236.91	1055
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INV20250845	Invoice	02/06/2025	SO#1022 SPIRAL CONSTRUCTION TAPER	0.00	236.91	
503-000-000-54865-3100		EMR - Office and Operati		SO#1022 SPIRAL CONSTRU	236.91	
195599	STATE AUDITORS OFFICE	02/21/2025	EFT	0.00	1,321.45	1056
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
L166262	Invoice	02/12/2025	AUDIT # 55759 22-23 ACCOUTABILITY AU	0.00	1,321.45	
001-111-000-51423-4145		FIN AC - Professional Serv		AUDIT # 55759 22-23 ACC	1,321.45	
VEN02449	THE NICHOLS GROUP RELATIONS, LI	02/21/2025	EFT	0.00	3,000.00	1057
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
2365	Invoice	02/10/2025	GOVERNMENTAL CONSULTING SERVICES	0.00	3,000.00	
001-120-000-51310-4100		C MGR - Professional Serv		GOVERNMENTAL CONSULT	3,000.00	
189670	THE SHOPPER	02/21/2025	EFT	0.00	348.04	1058
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
64417	Invoice	02/12/2025	#9 YELLOW ENVELOPES	0.00	348.04	
001-111-000-51423-3100		FIN AC - Office and Opera		#9 YELLOW ENVELOPES	348.04	
201148	TMG SERVICES, INC.	02/21/2025	EFT	0.00	875.56	1059
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
0052965-IN	Invoice	02/11/2025	CUST# 1908050 GAUGE GUARD	0.00	875.56	
402-640-000-53580-3100		SEW SV SAT - Office and		CUST# 1908050 GAUGE G	875.56	
201520	TRAFFIC SAFETY SUPPLY CO.	02/21/2025	EFT	0.00	3,000.64	1060
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INV077896	Invoice	02/04/2025	CUST# CO00981 POSTS AND HARDWARE	0.00	2,821.23	
101-000-000-54264-3100		ST TR CTL - Office and Op		CUST# CO00981 POSTS A	2,821.23	
INV077897	Invoice	02/04/2025	CUST# CO00981 CHANNELIZERS W/BASE	0.00	179.41	
101-000-000-54264-3100		ST TR CTL - Office and Op		CUST# CO00981 CHANNELI	179.41	
VEN02437	WALTER E NELSON CO OF WESTERN	02/21/2025	EFT	0.00	54.45	1061
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
1040779	Invoice	02/14/2025	CUST# 12400 AEROSOL	0.00	54.45	
001-142-000-51830-3100		FACIL - Office and Operati		CUST# 12400 AEROSOL	54.45	
203900	WESMAR COMPANY, INC	02/21/2025	EFT	0.00	814.01	1062
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
330443	Invoice	02/06/2025	CUST# 31175 SODIUM HYPOCHLORITE	0.00	814.01	
401-000-000-53480-3104		WAT - Office and Operati		CUST# 31175 SODIUM HYP	814.01	

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
000401	A T & T	02/21/2025	Regular	0.00	58.22	112524
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
030 265 9923 00	Invoice	02/03/2025	030 265 9923 001 FEB25	0.00	58.22	
402-400-000-53580-4200		SEW SV MN - Communica		030 265 9923 001 FEB25	58.22	
VENO2394	AIMPOINT INC	02/21/2025	Regular	0.00	486.79	112525
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
129543	Invoice	01/31/2025	PO # 20250131-001 PATROL RIFILE OPTIC	0.00	486.79	
001-118-000-52122-3100		PD PAT - Office and Opera		PO # 20250131-001 PATRO	486.79	
VENO2445	AK ATHLETIC EQUIPMENT, INC.	02/21/2025	Regular	0.00	1,946.70	112526
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
5421831	Invoice	02/07/2025	REMOVEABLE FOLDING WALL PAD	0.00	1,946.70	
001-118-000-52122-3505		PD PAT - Inventoried-Smal		REMOVEABLE FOLDING W	1,946.70	
002982	APP	02/21/2025	Regular	0.00	1,648.75	112527
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
25-296580	Invoice	02/13/2025	ACCT# AP7500158 GUARDOL ECT SYN BN	0.00	1,894.09	
503-000-000-54865-3101		EMR - Vehicle Supplies		ACCT# AP7500158 GUARD	1,136.45	
503-000-000-54865-3103		EMR - Vehicle Supp-EM&		ACCT# AP7500158 GUARD	757.64	
WAMGMTREFUN	Credit Memo	12/06/2024	ACCT# AP7500158 WA MANAGEMENT FE	0.00	-245.34	
503-250-000-58900-0001		EMR - Inventory-Gas		ACCT# AP7500158 WA MA	-245.34	
003003	ASSOC OF WA CITIES	02/21/2025	Regular	0.00	585.00	112528
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
158440	Invoice	02/19/2025	AWC ANNUAL CONFEREN 2025 SHARON S	0.00	585.00	
001-110-000-51160-4907		COUNCIL - Miscellaneous		AWC ANNUAL CONFEREN	585.00	
VENO2340	BLT SHELTON PONY, LLC	02/21/2025	Regular	0.00	761.82	112529
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
527999	Invoice	02/01/2025	UNIT41/DRIVER SIDE MIRROR	0.00	290.27	
001-118-000-52122-3110		PD PAT - Office & Operati		UNIT41/DRIVER SIDE MIRR	290.27	
528028	Invoice	02/04/2025	UNIT481 BACK SEAT FRAME	0.00	238.28	
001-118-000-52122-3110		PD PAT - Office & Operati		UNIT481 BACK SEAT FRAM	238.28	
658010	Invoice	02/03/2025	MAINT,WIPERS,DRN PLG,SIGNAL BULB/VI	0.00	233.27	
001-118-000-52122-4805		PD PAT - Repairs and Mai		MAINT,WIPERS,DRN PLG,SI	233.27	
098000	BUILDERS FIRSTSOURCE	02/21/2025	Regular	0.00	403.62	112530
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
76542615	Invoice	02/03/2025	CUST# 671668 DOOR, INSULATION	0.00	292.67	
401-000-000-53480-3100		WAT - Office and Operati		CUST# 671668 DOOR, INS	292.67	
99386103	Invoice	02/06/2025	CUST# 671668 MISC SUPPLIES	0.00	86.21	
404-000-000-53180-3100		STRM - Office and Operati		CUST# 671668 MISC SUPP	86.21	
99397875	Invoice	02/10/2025	CUST# 671668 TITEN SCREWS	0.00	24.74	
101-000-000-54264-3100		ST TR CTL - Office and Op		CUST# 671668 TITEN SCRE	24.74	
008751	CRYSTAL SPRINGS	02/21/2025	Regular	0.00	336.80	112531

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Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
24715526 01292	Invoice	01/29/2025	CUST# 1032581724715526		0.00	336.80
001-112-000-51251-3100		MUNI CT - Office and Ope		CUST# 1032581724715526		36.43
001-112-000-51251-4500		MUNI CT - Operating Ren		CUST# 1032581724715526		4.36
001-118-000-52122-3100		PD PAT - Office and Opera		CUST# 1032581724715526		70.46
001-118-000-52122-4500		PD PAT - Operating Rental		CUST# 1032581724715526		4.36
001-130-000-51810-3100		HR - Office and Operating		CUST# 1032581724715526		84.07
001-130-000-51810-4500		HR - Operating Rentals		CUST# 1032581724715526		8.72
001-140-000-55430-3100		CD AN CTRL - Office and		CUST# 1032581724715526		14.38
001-140-000-55430-4500		CD AN CTRL - Operating R		CUST# 1032581724715526		4.36
401-000-000-53480-3100		WAT - Office and Operati		CUST# 1032581724715526		100.94
401-000-000-53480-4500		WAT - Operating Rentals		CUST# 1032581724715526		8.72
VEN01592	EDGAR JERONIMO PABLO	02/21/2025	Regular	0.00	560.00	112532
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INTERPRETATION	Invoice	01/13/2025	INTERPRETATION01132025		0.00	140.00
001-112-000-51251-4106		MUNI CT - Interpreter Ex		INTERPRETATION0113202		140.00
INTERPRETATION	Invoice	02/03/2025	INTERPRETATION02032025		0.00	140.00
001-112-000-51251-4106		MUNI CT - Interpreter Ex		INTERPRETATION0203202		140.00
INTERPRETATION	Invoice	02/05/2025	INTERPRETATION02052025		0.00	280.00
001-112-000-51251-4106		MUNI CT - Interpreter Ex		INTERPRETATION0205202		280.00
VEN02652	J FRANK SCHMIDT & SON	02/21/2025	Regular	0.00	5,909.73	112533
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
670880	Invoice	02/04/2025	CUST# 4800218 FIRESTARTER TREES		0.00	5,147.43
302-000-000-59561-6300		CAP IMP - SIDEWALKS-Co	23-DOWNTOWNTREE	CUST# 4800218 FIRESTART		5,147.43
670880-1	Invoice	02/04/2025	FREIGHT CHARGE INV# 670880		0.00	762.30
302-000-000-59561-6300		CAP IMP - SIDEWALKS-Co	23-DOWNTOWNTREE	FREIGHT CHARGE INV# 67		762.30
VEN02551	JACK M NASWORTHY	02/21/2025	Regular	0.00	350.00	112534
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
20250105	Invoice	02/01/2025	POLYGRAPH/TONY DROGMUND		0.00	350.00
001-118-000-52122-4100		PD PAT - Professional Serv		POLYGRAPH/TONY DROG		350.00
VEN02657	JENNY'S HEATING & COOLING	02/21/2025	Regular	0.00	190.94	112535
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
REFUNDPERMIT	Invoice	02/10/2025	REFUNDPERMITINV-00001937/FEBRUARY		0.00	190.94
001-000-000-322100000		GF - Building Permits		REFUNDPERMITINV-00001		180.00
001-000-000-369910001		GF - Misc - Technology Fe		REFUNDPERMITINV-00001		7.20
001-000-000-369910002		GF - Misc - Credit Card Su		REFUNDPERMITINV-00001		3.74
091345	LEXIPOL LLC	02/21/2025	Regular	0.00	3,395.07	112536
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
INVPM11248824	Invoice	02/01/2025	ANNUAL LEFTA SHIELD SUITE BASE/PER U		0.00	3,395.07
001-118-000-52122-4100		PD PAT - Professional Serv		ANNUAL LEFTA SHIELD SUI		3,395.07
113000	MASON COUNTY TREASURER	02/21/2025	Regular	0.00	23.50	112537
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
420241300230PR	Invoice	02/18/2025	420241300230PROPTAXES2025		0.00	23.50
001-142-000-51830-4900		FACIL - Miscellaneous		420241300230PROPTAXES		23.50
113000	MASON COUNTY TREASURER	02/21/2025	Regular	0.00	23.50	112538

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Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
320201200010PR	Invoice	02/18/2025	320201200010PROPTAXES2025	0.00	23.50	
001-142-000-51830-4900		FACIL - Miscellaneous		320201200010PROPTAXES	23.50	
113000	MASON COUNTY TREASURER	02/21/2025	Regular	0.00	23.50	112539
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
420241100000PR	Invoice	02/18/2025	420241100000PROPTAXES2025	0.00	23.50	
001-142-000-51830-4900		FACIL - Miscellaneous		420241100000PROPTAXES	23.50	
113000	MASON COUNTY TREASURER	02/21/2025	Regular	0.00	23.50	112540
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
320173400020PR	Invoice	02/18/2025	320173400020PROPTAXES2025	0.00	23.50	
001-142-000-51830-4900		FACIL - Miscellaneous		320173400020PROPTAXES	23.50	
113000	MASON COUNTY TREASURER	02/21/2025	Regular	0.00	23.50	112541
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
420244100000PR	Invoice	02/18/2025	420244100000PROPTAXES2025	0.00	23.50	
001-141-000-57680-4900		PARKS - Miscellaneous		420244100000PROPTAXES	23.50	
142300	NISQUALLY INDIAN TRIBE	02/21/2025	Regular	0.00	4,729.89	112542
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
1482	Invoice	01/31/2025	JANUARY 2025 INMATE INCARCERATION F	0.00	4,729.89	
001-123-000-52360-4103		DET & COR - Professional		JANUARY 2025 INMATE IN	4,729.89	
VEN02623	PETROCARD, INC	02/21/2025	Regular	0.00	4,327.85	112543
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
0544775-IN	Invoice	02/06/2025	CUST# 20-0108487 FUEL	0.00	4,327.85	
503-250-000-58900-0001		EMR - Inventory-Gas		CUST# 20-0108487 FUEL	4,327.85	
114040	PETTYJOHN ENTERPRISES, LLC	02/21/2025	Regular	0.00	166.61	112544
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
3724	Invoice	02/01/2025	LAWN MIX/STUMPS 13074 25134	0.00	166.61	
001-141-000-57680-3100		PARKS - Office and Opera		LAWN MIX/STUMPS 13074	20.00	
101-000-000-54230-3100		ST RD WAY - Office and O		LAWN MIX/STUMPS 13074	146.61	
161080	PROFORCE	02/21/2025	Regular	0.00	192.29	112545
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
567274	Invoice	02/04/2025	CUST# 009361 PO#20250130-002	0.00	192.29	
001-118-000-52122-3100		PD PAT - Office and Opera		CUST# 009361 PO#202501	192.29	
VEN02498	RHIZORS PAINTING LLC	02/21/2025	Regular	0.00	2,483.99	112546
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
RELEASE OF RETA	Invoice	02/19/2025	RELEASE OF RETAINAGE/FEBRUARY 2025	0.00	2,483.99	
001-142-000-51890-4815		FACIL CIVIC - Repairs and	23-CC EXTERIOR REHA	RELEASE OF RETAINAGE/F	2,483.99	
186450	SHELTON LOCK & KEY	02/21/2025	Regular	0.00	204.01	112547
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
7307	Invoice	02/04/2025	DUPLICATE KEYS	0.00	81.61	
402-400-000-53580-3100		SEW SV MN - Office and		DUPLICATE KEYS	81.61	
7308	Invoice	02/04/2025	SERVICE CALL, NEW LOCK/KEYS FILE CABI	0.00	122.40	

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Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
001-142-000-51890-4115	FACIL CIVIC - Professional		SERVICE CALL, NEW LOCK/		122.40	
187505	SHELTON SCHOOL DISTRICT	02/21/2025	Regular	0.00	4,600.00	112548
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
2025-039	Invoice	02/06/2025	YTH BASKETBALL PRACTICE/BORDEAUX G	0.00	540.00	
001-141-000-57120-4500		REC - Operating Rentals		YTH BASKETBALL PRACTIC	540.00	
2025-040	Invoice	02/06/2025	YTH BASKETBALL PRACTICE/OBJH GYM	0.00	1,600.00	
001-141-000-57120-4500		REC - Operating Rentals		YTH BASKETBALL PRACTIC	1,600.00	
2025-041	Invoice	02/06/2025	YTH BASKETBALL PRACTICE & GAMES/OM	0.00	2,280.00	
001-141-000-57120-4500		REC - Operating Rentals		YTH BASKETBALL PRACTIC	2,280.00	
2025-042	Invoice	02/06/2025	YTH BASKETBALL PRACTICE/EVERGREEN	0.00	180.00	
001-141-000-57120-4500		REC - Operating Rentals		YTH BASKETBALL PRACTIC	180.00	
200255	TAGS AWARDS & SPECIALTIES	02/21/2025	Regular	0.00	119.47	112549
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
B233129	Invoice	01/29/2025	ACCT# SHELP CAPS & EMBROIDERY	0.00	119.47	
001-118-000-52122-3101		PD PAT - Uniforms		ACCT# SHELP CAPS & EMB	119.47	
VEN01650	THURSTON MASON BEHAVIORAL HI	02/21/2025	Regular	0.00	723.80	112550
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
LPE 2024 Q4	Invoice	02/05/2025	LPE 2024 Q4	0.00	723.80	
001-140-000-56600-4400		CD CHEM DEP - GENERAL		LPE 2024 Q4	723.80	
201300	TOZIER BROS INC.	02/21/2025	Regular	0.00	458.62	112551
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
474098	Invoice	02/05/2025	CUST# 20090 CONCRETE,PATIO BLOCK	0.00	10.33	
401-000-000-53480-3100		WAT - Office and Operati		CUST# 20090 CONCRETE,P	10.33	
474121	Invoice	02/06/2025	CUST# 20090 3/4 IN PVC ML ADPT	0.00	8.85	
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 20090 3/4 IN PVC	8.85	
474123	Invoice	02/06/2025	CUST# 20090 CAP PVC	0.00	32.63	
001-142-000-57250-3100		FACIL LIB - Office and Ope		CUST# 20090 CAP PVC	32.63	
474151	Invoice	02/07/2025	CUST# 20090 PAINT AND SUPPLIES	0.00	48.84	
001-141-000-57680-3100		PARKS - Office and Opera		CUST# 20090 PAINT AND S	48.84	
474212	Invoice	02/12/2025	CUST# 20090 GFI ST RECEPT	0.00	26.82	
001-119-000-52250-3100		FIRE FACIL - Office and Op		CUST# 20090 GFI ST RECEP	26.82	
474215	Invoice	02/12/2025	CUST# 20090 DRILL BIT, NUTS AND BOLTS	0.00	49.76	
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 20090 DRILL BIT, N	49.76	
474219	Invoice	02/12/2025	CUST# GREASGUN LEVR/GREASE	0.00	31.12	
001-142-000-51830-3100		FACIL - Office and Operati		CUST# GREASGUN LEVR/G	31.12	
474221	Invoice	02/12/2025	CUST# 20090 SS ELBOW, BALL VALVE	0.00	36.24	
401-000-000-53480-3100		WAT - Office and Operati		CUST# 20090 SS ELBOW, B	36.24	
474235	Invoice	02/13/2025	CUST# 20090 SPREADER, NUTS AND BOLT	0.00	167.99	
001-141-000-57680-3100		PARKS - Office and Opera		CUST# 20090 SPREADER, N	167.99	
474236	Invoice	02/13/2025	CUST# 20090 PROPANE TANKS	0.00	38.37	
503-000-000-54865-3200		EMR - Gas & Oil Fleet		CUST# 20090 PROPANE TA	38.37	
474241	Invoice	02/13/2025	CUST# 20090 BRASS NIPPLE	0.00	7.67	
401-000-000-53480-3100		WAT - Office and Operati		CUST# 20090 BRASS NIPPL	7.67	
202195	U.S. BANK N.A.-CUSTODY	02/21/2025	Regular	0.00	40.00	112552

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Packet: APPKT03457-FEBRUARY 21, 2025 AP PAYMENTS

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
CUSTODYCHARGE	Invoice	02/18/2025	CUSTODYCHARGES/JANUARY2025	0.00	40.00	
001-111-000-51423-4102		FIN AC - Prof Services-Ba		CUSTODYCHARGES/JANUA	40.00	
VEN02408	VEOLIA TREATMENT SOLUTIONS	02/21/2025	Regular	0.00	1,039.14	112553
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
903055750	Invoice	01/13/2025	CUST# 510148 UV BULBS	0.00	1,039.14	
402-400-000-53580-4800		SEW SV MN - Repairs and		CUST# 510148 UV BULBS	1,039.14	
VEN02544	VESTIS GROUP INC	02/21/2025	Regular	0.00	119.63	112554
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
5120578038	Invoice	11/20/2024	CUST# 792105973 COVERALLS, MAT,MOP,	0.00	38.33	
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 792105973 COVER	38.33	
5120620094	Invoice	01/29/2025	CUST# 792105973 COVERALLS,MAT,MOP,	0.00	38.33	
402-400-000-53580-4900		SEW SV MN - Miscellaneo		CUST# 792105973 COVER	38.33	
5120624804	Invoice	02/05/2025	CUST# 792105972 COVERALLS,MAT,TOWE	0.00	42.97	
401-000-000-53480-4901		WAT - Miscellaneous - Sh		CUST# 792105972 COVER	42.97	
VEN02287	WARRIOR WOMAN LAW PLLC	02/21/2025	Regular	0.00	3,369.00	112555
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
570	Invoice	01/25/2025	00898 RAMIREZ	0.00	410.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00898 RAMIREZ	410.00	
571	Invoice	01/25/2025	00868 PABLO PABLO	0.00	340.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00868 PABLO PABLO	340.00	
572	Invoice	01/25/2025	00892 MARTIN RAMIREZ	0.00	164.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00892 MARTIN RAMIREZ	164.00	
573	Invoice	01/25/2025	00864 COOPER	0.00	260.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00864 COOPER	260.00	
574	Invoice	01/25/2025	00874 RANDALL	0.00	340.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00874 RANDALL	340.00	
575	Invoice	01/25/2025	00718 LANPHIER	0.00	100.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00718 LANPHIER	100.00	
576	Invoice	01/25/2025	00876 WEBSTER	0.00	60.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00876 WEBSTER	60.00	
577	Invoice	01/25/2025	00833 STANLEY	0.00	60.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00833 STANLEY	60.00	
578	Invoice	01/25/2025	00912 BRADY	0.00	130.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00912 BRADY	130.00	
579	Invoice	01/25/2025	00638 WELLS	0.00	150.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00638 WELLS	150.00	
580	Invoice	01/25/2025	00877 MACUXTLE	0.00	100.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00877 MACUXTLE	100.00	
581	Invoice	01/25/2025	00829 MEIKLE	0.00	260.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00829 MEIKLE	260.00	
582	Invoice	01/28/2025	00903 BARRETT	0.00	395.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00903 BARRETT	395.00	
583	Invoice	01/30/2025	00766 REID PHILLIPS	0.00	100.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00766 REID PHILLIPS	100.00	
584	Invoice	01/30/2025	00919 ALEXANDER	0.00	260.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public		00919 ALEXANDER	260.00	
585	Invoice	01/30/2025	00913 SCHWARTZ	0.00	100.00	

Check Register

Packet: APPKT03457-FEBRUARY 21, 2025 AP PAYMENTS

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
001-122-000-51593-4101		LEGAL - OPD Grant Public	00913 SCHWARTZ		100.00	
586	Invoice	01/30/2025	00919 ALEXANDER	0.00	140.00	
001-122-000-51593-4101		LEGAL - OPD Grant Public	00919 ALEXANDER		140.00	
202850	WASHINGTON PUBLIC TREASURERS	02/21/2025	Regular	0.00	400.00	112556
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
E1261	Invoice	02/19/2025	WPTA 2025 ANNUAL CONFERENCE T.SCH	0.00	400.00	
001-111-000-51423-4907		FIN AC - Miscellaneous-Tr		WPTA 2025 ANNUAL CONF	400.00	
203780	WATER MGMNT LABORATORIES INC	02/21/2025	Regular	0.00	358.00	112557
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
226605	Invoice	02/07/2025	ACCT# AS201R TESTS 1/12/25	0.00	358.00	
402-400-000-53580-4100		SEW SV MN - Professional		ACCT# AS201R TESTS 1/12	358.00	
053987	WESTBAY NAPA AUTO PARTS	02/21/2025	Regular	0.00	1,227.07	112558
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
118377	Invoice	02/04/2025	CUST# 4296 4IN DR RATCHET	0.00	68.56	
402-400-000-53580-3100		SEW SV MN - Office and		CUST# 4296 4IN DR RATCH	68.56	
118599	Credit Memo	02/06/2025	ACCT# 4296 ORIG INV93990/HI POWER V	0.00	-35.85	
001-142-000-51890-3115		FACIL CIVIC - Office and O		ACCT# 4296 ORIG INV9399	-35.85	
119029	Invoice	02/10/2025	ACCT# 4296 SHOP SUPPLIES	0.00	142.34	
503-000-000-54865-3100		EMR - Office and Operati		ACCT# 4296 SHOP SUPPLIE	57.41	
503-000-000-54865-3101		EMR - Vehicle Supplies		ACCT# 4296 SHOP SUPPLIE	50.96	
503-000-000-54865-3103		EMR - Vehicle Supp-EM&		ACCT# 4296 SHOP SUPPLIE	33.97	
119126	Invoice	02/11/2025	ACCT# 4296 MISC PARTS/19989D	0.00	738.56	
503-000-000-54865-3102		EMR - Oper Supplies-Part		ACCT# 4296 MISC PARTS/1	738.56	
119134	Invoice	02/11/2025	ACCT# 4296 MISC PARTS/19933D	0.00	236.85	
503-000-000-54865-3104		EMR - Oper Supp-Parts-E		ACCT# 4296 MISC PARTS/1	236.85	
119555	Invoice	02/13/2025	ACCT# 4296 AIR FILTER, SPARK PLUG/199	0.00	76.61	
503-000-000-54865-3102		EMR - Oper Supplies-Part		ACCT# 4296 AIR FILTER, SP	76.61	
VEN02139	ZEPPELIN SHIPPING & TECHNOLOGY	02/21/2025	Regular	0.00	15.62	112559
Payable #	Payable Type	Payable Date	Payable Description	Discount Amount	Payable Amount	
Account Number		Account Name	Project Account Key	Item Description	Dist Amount	
PACKAGEID 1392	Invoice	02/06/2025	TROEMNER LLC/WEIGHT CALIBRATION LA	0.00	15.62	
402-400-000-53580-4200		SEW SV MN - Communica		TROEMNER LLC/WEIGHT C	15.62	

Bank Code APBNK-Main Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	81	36	0.00	41,325.93
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	22	15	0.00	23,948.15
	103	51	0.00	65,274.08

Fund Summary

Fund	Name	Period	Amount
999	Pooled Cash	2/2025	65,274.08
			<u>65,274.08</u>



Shelton, WA

Check Report

By Check Number

Date Range: 01/01/2025 - 02/21/2025

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
009700	DEPARTMENT OF REVENUE	01/17/2025	Bank Draft	0.00	427.71	DFT0001814
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
DECEMBER/2024	Invoice	01/17/2025	DECEMBER/2024 USE TAX	0.00	427.71	
	001-118-000-52122-3500		PD PAT - Small Tools/Equi		216.94	
	402-400-000-53580-3100		SEW SV MN - Office and		37.11	
	402-400-000-53580-3100		SEW SV MN - Office and		23.04	
	402-400-000-53580-3100		SEW SV MN - Office and		37.44	
	402-400-000-53580-3100		SEW SV MN - Office and		53.69	
	402-400-000-53580-3100		SEW SV MN - Office and		59.49	
009700	DEPARTMENT OF REVENUE	02/03/2025	Bank Draft	0.00	572.11	DFT0001815
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
JANUARY/2025 U	Invoice	02/03/2025	JANUARY/2025 USE TAX	0.00	572.11	
	001-118-000-52122-3100		PD PAT - Office and Opera		151.84	
	101-000-000-54230-3100		ST RD WAY - Office and O		16.77	
	101-000-000-54230-3100		ST RD WAY - Office and O		32.04	
	101-000-000-54230-4100		ST RD WAY - Professional		178.00	
	401-000-000-53480-3100		WAT - Office and Operati		16.77	
	402-400-000-53580-3100		SEW SV MN - Office and		52.61	
	402-400-000-53580-3100		SEW SV MN - Office and		23.34	
	402-400-000-53580-3100		SEW SV MN - Office and		23.34	
	402-400-000-53580-3100		SEW SV MN - Office and		43.86	
	402-400-000-53580-3100		SEW SV MN - Office and		16.77	
	404-000-000-53180-3100		STRM - Office and Operati		16.77	
VEN01232	KEY2PURCHASE	02/10/2025	Bank Draft	0.00	6,445.38	DFT0001816

Check Report

Date Range: 01/01/2025 - 02/21/2025

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
JANUARY 2025/K	Invoice	02/10/2025	JANUARY 2025/KEY2PURCHASE	0.00	6,445.38	
001-110-000-51160-4907	COUNCIL - Miscellaneous	DONNA NAULT #1205/ AWC-20	125.00			
001-111-000-51423-4900	FIN AC - Miscellaneous	GEN USE3 #1028/ WPTA- MBRS	50.00			
001-111-000-51423-4907	FIN AC - Miscellaneous-Tr	GEN USE5 #4489/ MRSC.ORG-P	40.00			
001-112-000-51251-3100	MUNI CT - Office and Ope	D.SMOLINSKY #8018/AMAZON-	914.73			
001-112-000-51251-3100	MUNI CT - Office and Ope	D.SMOLINSKY #8018/PADDLE.N	59.99			
001-112-000-51251-3100	MUNI CT - Office and Ope	D.SMOLINSKY #8018/GRAMMA	144.00			
001-112-000-51251-3100	MUNI CT - Office and Ope	D.SMOLINSKY #8018/AMAZON-	83.78			
001-112-000-51251-4900	MUNI CT - Miscellaneous	D.SMOLINSKY #8018/ AMAZON-	26.60			
001-112-000-52360-3100	COM SVC - Office and Op	D.SMOLINSKY #8018/AMAZON-	44.55			
001-115-000-51895-3100	PW ADM - Office and Ope	GEN USE6 #0479/ VISTAPRINT-C	57.69			
001-118-000-52122-3100	PD PAT - Office and Opera	COP #7802/ ALCOPRO- ALCOHO	234.70			
001-118-000-52122-3100	PD PAT - Office and Opera	COS #9145/ AMAZON- FLASH D	52.24			
001-118-000-52122-3100	PD PAT - Office and Opera	C.KOSTAD #7182/ID CREATOR-ID	15.99			
001-118-000-52122-3100	PD PAT - Office and Opera	C.KOSTAD #7182-/IN*NAFCO-IN	124.00			
001-118-000-52122-3100	PD PAT - Office and Opera	C.KOSTAD #7182/AMAZON-THE	116.46			
001-118-000-52122-3100	PD PAT - Office and Opera	COP #7802/ IN*TAGS AWARDS	85.10			
001-118-000-52122-4100	PD PAT - Professional Serv	COS #9145/ BWY*FBINAA NATL-	120.00			
001-120-000-51310-3100	C MGR - Office and Opera	M.ZIEGLER #2265/IDCREATOR- I	29.04			
001-120-000-51310-3102	C MGR - Employee Recog	L.SHARP #2128/ URRACO COFFE	33.68			
001-120-000-51310-3102	C MGR - Employee Recog	L.SHARP #2128/ SAFEWAY- ALL	16.74			
001-120-000-51310-3102	C MGR - Employee Recog	L.SHARP #2128/ SAFEWAY- ALL	71.37			
001-120-000-51310-4100	C MGR - Professional Serv	DONNA NAULT # 1205/ ADOBE-	97.99			
001-120-000-51310-4900	C MGR - Miscellaneous	M.ZIEGLER #2265/WCMA-MBRS	375.00			
001-121-000-51430-3100	CLK REC - Office and Oper	DONNA NAULT #1205-/AMAZO	84.32			
001-121-000-51430-4907	CLK REC - Miscellaneous-	DONNA NAULT #1205-IIMC/ CM	50.00			
001-130-000-51810-3101	HR - Office & Operating-	GEN USE6 #0479/ SAFEWAY-WE	40.57			
001-130-000-51810-3101	HR - Office & Operating-	GEN USE6 #0479/SQ*COUNTY L	132.86			
001-130-000-51810-4100	HR - Professional Services	L.SHARP #2128/ WSP BACKGRO	11.00			
001-130-000-51810-4100	HR - Professional Services	L.SHARP #2128/ WSP BACKGRO	11.00			
001-130-000-51810-4100	HR - Professional Services	L.SHARP #2128/WSP BACKGRO	11.00			
001-130-000-51810-4307	HR - Travel-Training	L.SHARP #2128/ PELRA*IL- 2025	927.50			
001-131-000-51900-4907	RISK MG - Misc Training	L.SHARP #2128/ PRIMA- REFUN	-72.00			
001-131-000-51900-4907	RISK MG - Misc Training	L. SHARP #2128/ PRIMA- MEMB	72.00			
001-140-000-55430-3100	CD AN CTRL - Professional	ANIMAL CONTROL #7379/HUM	30.00			
001-140-000-55850-4307	CD BLDG - Travel-Training	GEN USE1 #3468/WABO- DOUG	52.00			
001-141-000-57680-3100	PARKS - Office and Opera	GEN USE2 #6884/ AMAZON- LE	108.63			
001-141-000-57680-3100	PARKS - Office and Opera	GEN USE 2 #6884/AMAZON-CH	166.93			
001-141-000-57680-3100	PARKS - Office and Opera	GEN USE 2 #6884/THE HOME D	38.08			
001-142-000-51830-3100	FACIL - Office and Operati	GEN USE 2 #6884/AMAZON- RE	-37.01			
001-142-000-51830-3100	FACIL - Office and Operati	GEN USE 2 #6884/AMAZON- PLI	94.53			
001-142-000-51830-3100	FACIL - Office and Operati	GEN USE 2 #6884/THE HOME D	21.91			
001-142-000-51830-3100	FACIL - Office and Operati	GEN USE 2 #6884/AMAZON- WI	37.01			
001-142-000-51830-4907	FACIL - Miscellaneous-Trai	GEN USE2 #6884/USTTRAINING.	14.06			
001-142-000-57250-3100	FACIL LIB - Office and Ope	GEN USE2 #6884/ AMAZON- CE	241.75			
101-000-000-54230-3100	ST RD WAY - Office and O	COS #2316/ AMAZON- GRAFFITI	50.42			
401-000-000-53480-3100	WAT - Office and Operati	COS #2316/ AMAZON- SCREEN	26.08			
401-000-000-53480-3100	WAT - Office and Operati	COS #2316/ AMAZON- GRAFFITI	29.37			
401-000-000-53480-4907	WAT - Miscellaneous-Trai	COS #2316/ MRSC.ORG- PROCU	40.00			
402-400-000-53580-3100	SEW SV MN - Office and	COS #5732/ WEBER SCIENTIFIC I	372.71			
402-400-000-53580-3100	SEW SV MN - Office and	GEN USE2 #6884/ CONTROL PA	342.00			
402-400-000-53580-4307	SEW SV MN - Travel-Traini	COT #8654/TULALIP RESORT CA	174.67			
402-400-000-53580-4307	SEW SV MN - Travel-Traini	COT #8654/TULALIP RESORT CA	174.67			
402-400-000-53580-4307	SEW SV MN - Travel-Traini	COT #8654/TULALIP RESORT CA	174.67			
402-400-000-53580-4307	SEW SV MN - Travel-Traini	COS #5732/ PSI EXAMS- ETHAN	106.00			
VEN01675	CAPTUREPOINT	01/07/2025	Bank Draft	0.00	24.12	DFT0001817

Check Report

Date Range: 01/01/2025 - 02/21/2025

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV0008796	Invoice	01/07/2025	Community Pass CC Fee-Jan 2025	0.00	24.12	
	001-141-000-57120-4100	REC - Professional Service	Community Pass CC Fee-Jan 202		24.12	
VEN02147	GLOBAL PAYMENTS DIRECT, INC.	01/02/2025	Bank Draft	0.00	32,158.76	DFT0001818
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV0008797	Invoice	01/02/2025	CC Bank Fees-January 2025	0.00	32,158.76	
	401-000-000-53480-4105	WAT - Prof Serv-Credit Ca	CC Bank Fees-January 2025		8,039.69	
	402-500-000-53580-4105	SEW OT MN - Prov Serv-C	CC Bank Fees-January 2025		20,903.19	
	404-000-000-53180-4106	STRM - Prof Serv-Credit C	CC Bank Fees-January 2025		3,215.88	
VEN02147	GLOBAL PAYMENTS DIRECT, INC.	01/02/2025	Bank Draft	0.00	3,933.99	DFT0001819
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV0008798	Invoice	01/02/2025	CC Bank Fees-January 2025	0.00	3,933.99	
	401-000-000-53480-4105	WAT - Prof Serv-Credit Ca	CC Bank Fees-January 2025		983.50	
	402-500-000-53580-4105	SEW OT MN - Prov Serv-C	CC Bank Fees-January 2025		2,557.09	
	404-000-000-53180-4106	STRM - Prof Serv-Credit C	CC Bank Fees-January 2025		393.40	
VEN02147	GLOBAL PAYMENTS DIRECT, INC.	01/02/2025	Bank Draft	0.00	508.29	DFT0001820
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV0008799	Invoice	01/02/2025	CC Bank Fees-January 2025	0.00	508.29	
	001-111-000-51423-4101	FIN AC - Prof Serv-Credit	CC Bank Fees-January 2025		40.66	
	401-000-000-53480-4105	WAT - Prof Serv-Credit Ca	CC Bank Fees-January 2025		116.91	
	402-500-000-53580-4105	SEW OT MN - Prov Serv-C	CC Bank Fees-January 2025		304.97	
	404-000-000-53180-4106	STRM - Prof Serv-Credit C	CC Bank Fees-January 2025		45.75	
VEN02147	GLOBAL PAYMENTS DIRECT, INC.	01/02/2025	Bank Draft	0.00	486.56	DFT0001821
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV0008800	Invoice	01/02/2025	CC Bank Fees-January 2025	0.00	486.56	
	001-111-000-51423-4101	FIN AC - Prof Serv-Credit	CC Bank Fees-January 2025		486.56	
VEN02147	GLOBAL PAYMENTS DIRECT, INC.	01/02/2025	Bank Draft	0.00	2,489.94	DFT0001822
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV0008801	Invoice	01/02/2025	CC Bank Fees-January 2025	0.00	2,489.94	
	001-115-000-51896-4100	PW ENG - Professional Se	CC Bank Fees-January 2025		1,244.97	
	001-140-000-55850-4100	CD BLDG - Professional Se	CC Bank Fees-January 2025		1,244.97	
063780	IRS	01/10/2025	Bank Draft	0.00	100.36	DFT0001823
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV0008802	Invoice	01/10/2025	January 2025 IRS Pmt #1	0.00	100.36	
	657-000-000-58600-0099	IRS Withholding Tax	January 2025 IRS Pmt #1		100.36	
063780	IRS	01/24/2025	Bank Draft	0.00	48,113.31	DFT0001824
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV0008803	Invoice	01/24/2025	January 2025 IRS Pmt #2	0.00	48,113.31	
	657-000-000-58600-0099	IRS Withholding Tax	January 2025 IRS Pmt #2		48,113.31	
202195	U.S. BANK N.A.-CUSTODY	01/27/2025	Bank Draft	0.00	15.00	DFT0001825

Check Report

Date Range: 01/01/2025 - 02/21/2025

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV0008804	Invoice	01/27/2025	CUSIP:3130AKM86 Wire Fee	0.00	15.00	
	001-111-000-51423-4102	FIN AC - Prof Services-Ba	CUSIP:3130AKM86 Wire Fee		3.75	
	401-000-000-53480-4100	WAT - Professional Servic	CUSIP:3130AKM86 Wire Fee		3.75	
	402-400-000-53580-4100	SEW SV MN - Professional	CUSIP:3130AKM86 Wire Fee		7.50	
009701	DEPARTMENT OF REVENUE	01/24/2025	Bank Draft	0.00	31,125.30	DFT0001826
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV0008805	Invoice	01/24/2025	EXCISE TAX/Jan 2025	0.00	31,125.30	
	001-000-000-341810000	GF - Copies, Etc.	EXCISE TAX/Jan 2025		14.84	
	001-000-000-347600003	GF - Rec Fees-Fitness, Ad	EXCISE TAX/Jan 2025		170.48	
	001-000-000-362400002	GF - ShortTerm Facility Re	EXCISE TAX/Jan 2025		40.86	
	001-000-000-362800000	GF - Concession Proceeds	EXCISE TAX/Jan 2025		6.30	
	001-121-000-51430-4400	CLK REC - TAXES was Adv	EXCISE TAX/Jan 2025		0.79	
	001-141-000-57120-4400	REC - Educational-TAXES	EXCISE TAX/Jan 2025		24.40	
	001-143-000-57550-4400	COM CTR - TAXES was Ad	EXCISE TAX/Jan 2025		2.49	
	401-000-000-362100000	WAT - Equipment Rentals	EXCISE TAX/Jan 2025		-61.30	
	401-000-000-53480-4400	WAT - TAXES was Advertis	EXCISE TAX/Jan 2025		-3.24	
	401-000-000-53480-4400	WAT - TAXES was Advertis	EXCISE TAX/Jan 2025		13,181.71	
	402-500-000-53580-4400	SEW OT MN - TAXES was	EXCISE TAX/Jan 2025		13,687.71	
	402-650-000-53580-4400	SEW OT SAT - TAXES was	EXCISE TAX/Jan 2025		1,184.70	
	404-000-000-53180-4400	STRM - TAXES was Adver	EXCISE TAX/Jan 2025		2,875.56	
063780	IRS	01/10/2025	Bank Draft	0.00	74,016.49	DFT0001827
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV0008806	Invoice	01/10/2025	IRS Pmt #1A	0.00	74,016.49	
	657-000-000-58600-0099	IRS Withholding Tax	IRS Pmt #1A		74,016.49	

Bank Code APBNK-Main Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	0	0	0.00	0.00
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	14	14	0.00	200,417.32
EFT's	0	0	0.00	0.00
	14	14	0.00	200,417.32

All Bank Codes Check Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	0	0	0.00	0.00
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	14	14	0.00	200,417.32
EFT's	0	0	0.00	0.00
	14	14	0.00	200,417.32


Fund Summary

Fund	Name	Period	Amount
999	Pooled Cash	1/2025	193,399.83
999	Pooled Cash	2/2025	7,017.49
			200,417.32

VOUCHER APPROVAL

I, the undersigned, do hereby certify under penalty of perjury that the materials have been furnished, the services rendered, or the labor performed as described within payroll warrants numbered 4031 through 4033 and 14363 through 14458. Warrants 112560 through 112570 in the amount of \$381,184.33 and that the claims are just and due obligations against the City of Shelton, and that I am authorized to authenticate and certify said claims.

Signed this 21st of February, 2025.


Finance Director

We, the undersigned members of the City Council of Shelton, Washington, do hereby certify that the payroll warrants contained herein are approved for payment.

Signed this _____ of _____, 2025.

Mayor Onisko

Deputy Mayor Sharon Schirman

Councilmember George Blush

Councilmember Tom Gilmore

Councilmember Miguel Gutierrez

Councilmember Lyndsey Sapp

Councilmember Melissa Stearns



CITY OF SHELTON COUNCIL BRIEFING REQUEST (Agenda Item E1)

Touch Date: 02/04/2025
Brief Date: 03/04/2025
Action Date: 03/18/2025

Department: Community Development
Presented By: Jason Dose

APPROVED FOR COUNCIL PACKET:

ROUTE TO:

REVIEWED:

- ☒ Dept. Head
☐ Finance Director
☐ Attorney
☒ City Clerk
☐ City Manager

PROGRAM/PROJECT TITLE:
Acceptance of proposed HNM
Development annexation area

ATTACHMENTS:

- Resolution No. 1368-0225
- HNM Development Proposed Annexation Area (location map)
- Notice of Intent (signed), legal description and parcel map for requested annexation area

Action Requested:

- ☐ Ordinance
☒ Resolution
☒ Motion
☐ Other

DESCRIPTION OF THE PROGRAM/PROJECT AND BACKGROUND INFORMATION:

In February 2025, the City of Shelton received a notice of intent to petition for annexation of a vacant 2.5 acre parcel located in the Shelton Urban Growth Area, contiguous with City limits. The parcel is owned by HNM Development, and their ownership group is requesting approval from the Council to officially proceed with a formal petition to annex into City limits.

A map illustrating the proposed annexation area, as well as a signed Notice of Intent to Petition for Annexation utilizing the 60% method, are attached to this report.

The entire annexation area under consideration is located within the Shelton Urban Growth Area (UGA) and is pre-zoned Neighborhood Residential (NR) as recognized in the City's Comprehensive Plan Future Land Use Map. The properties carry the same zoning designation on the City's Zoning map.

Pursuant to RCW 35A.14.120 the applicants intend to petition the City of Shelton for annexation utilizing the 60% method by providing a petition with signatures of at least 60% of the assessed valuation of the annexation area's property owners if the Council approves the initiation of annexation by adopting Resolution No. 1368-0225.

Provided the Council approves the request the next steps include:

- The applicant formally submits a petition for annexation of the areas to the City
- The County assessor will determine sufficiency/authenticity of the 60% petition
- Formal public notice is issued and a public hearing is held regarding the annexation
- Council consideration of an ordinance for approval or denial of the annexation of all or any portion of the proposed area only included in the petition
- Annexation would be effective on the date of the ordinance

ANALYSIS/OPTIONS/ALTERNATIVES:

During this initial process the Council may accept, reject, or geographically modify the proposed annexation and requirement of assumption of any existing City indebtedness.

BUDGET/FISCAL INFORMATION:

N/A

PUBLIC INFORMATION REQUIREMENTS:

Information is available from the City Clerk's office.

STAFF RECOMMENDATION/MOTION:

"I move to place Resolution No. 1368-0225 on the Action Agenda for March 18, 2025 Council meeting".

RESOLUTION NO. 1368-0225

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF SHELTON, WASHINGTON, ACCEPTING A PROPOSED ANNEXATION FOR THE HNM ANNEXATION AREA PURSUANT TO RCW 35A.14.120

WHEREAS, the Shelton City Council adopted Ordinance No. 1915-1217 adopting the 2017 Comprehensive Plan that sets planning goals, policies and implementation strategies for the City and Shelton Urban Growth Area (UGA) pursuant to Chapter 36.70A RCW; and

WHEREAS, the City received a notice of intent, signed by 100% of the owners of the HNM Annexation Area, a vacant 2.5 acre piece of property, ("Annexation Area"), signifying their intention to commence annexation proceedings pursuant to RCW 35A.14.120; and

WHEREAS, the Annexation Area is contiguous to the present corporate limits of the City of Shelton and is in the City of Shelton Urban Growth Area; and

WHEREAS, Ordinance No. 1915-1217, which adopted land use and zoning designations for the UGA, designated the Annexation Area in the City's Comprehensive Plan as NR (Neighborhood Residential) and on the City's Official Zoning Map as NR (Neighborhood Residential); and

THEREFORE, BE IT RESOLVED by the City Council of the City of Shelton

SECTION 1. The Council accepts the initiation of annexation proceedings pursuant to RCW 35A.14.120 for the Annexation Area, which is described in Exhibit A and subject to the provisions of section 2-3 below. The property owners are authorized to circulate and submit an annexation petition bearing signatures of the owners of at least 60% of the assessed valuation of the Annexation Area. Upon receipt of a sufficient annexation petition, the City Council shall set a public hearing to consider whether to annex the area.

SECTION 2. The Annexation Area, if annexed, shall be required to assume and be subject to the existing indebtedness of the City of Shelton at the time of the effective date of such annexation.

SECTION 3. The Annexation Area, if annexed, shall be designated as set forth in the City's Comprehensive Plan and on the City's Zoning Map as Neighborhood Residential.

Passed by the City Council at its regular meeting held on the 18th day of March 2025.

Eric Onisko, Mayor

ATTEST:




City Clerk Nault

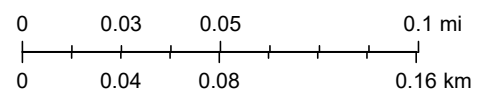
Mason County WA GIS Web Map



2/24/2025, 10:59:59 AM

1:3,071

-  County Boundary
-  No Filled
-  Tax Parcels (Zoom in to 1:30,000)



Source: Esri, Maxar, Earthstar Geographics, and the GIS User Community

NOTICE OF INTENT TO PETITION FOR ANNEXATION BY 60 PERCENT METHOD

CITY OF Shelton ,Washington

TO: City of Shelton City Council:

The undersigned, being the owners of not less than 10 percent (10%) in value, according to the assessed valuation of general taxation of the property for which annexation is sought, hereby notify the City Council of the City of Shelton to commence annexation proceedings to the City of Shelton of the following described property. In accordance with RCW 35A.14.120 we hereby further request of the City Council to set a date, within sixty (60) days following the City's receipt of this notice, for a meeting with the undersigned parties to determine whether the City of Shelton will accept the proposed annexation, whether is shall require the simultaneous adoption of zoning regulations, and whether it shall require the assumption of existing City indebtedness by the area to be annexed. The property in question lies contiguous to the present corporate limits of the City of Shelton, and said property is situated in Mason County, Washington, and is legally described as follows (attach separate sheet). We, the undersigned, are owners of real property lying outside of the city limits of the City of Shelton, Washington, but contiguous thereto and designated as part of the City of Shelton's Urban Growth Area. A legal description and map of this area are attached to this notice.


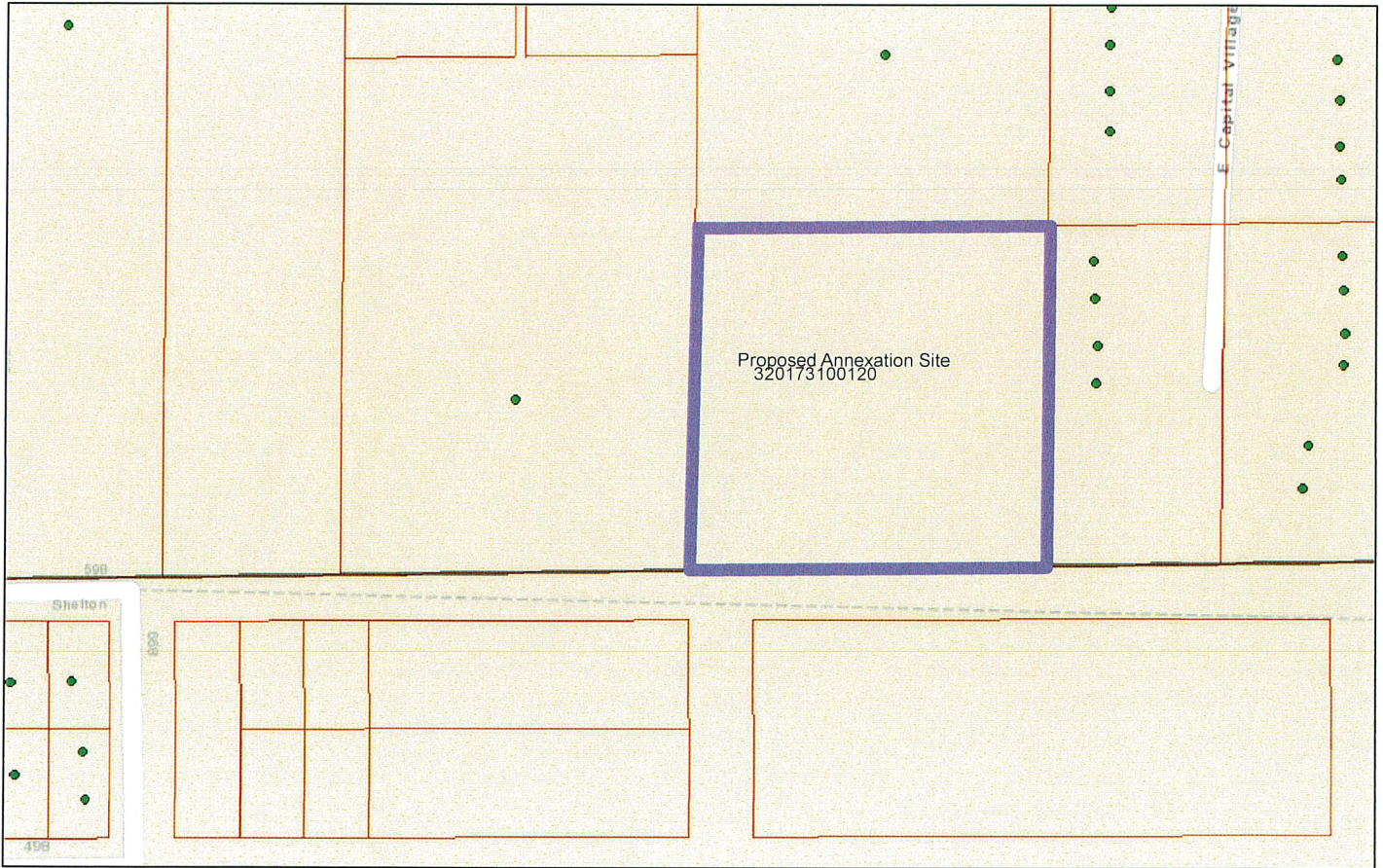
Property Owner Name (PLEASE PRINT)	Property Owner SIGNATURE	Street Address	Parcel Number	Date Signed
HNM Development LLC		17115 226 th St Ct E Graham, WA 98338	320173100120	1-8-25

EXHIBIT A

The Land is described as follows:

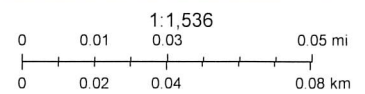
THE SOUTH HALF OF THE WEST HALF OF THE SOUTHEAST QUARTER OF THE NORTHEAST QUARTER
OF THE SOUTHWEST QUARTER OF SECTION 17, TOWNSHIP 20 NORTH, RANGE 3 WEST, W.M., IN
MASON COUNTY, WASHINGTON.

Annexation Map



12/24/2024, 11:07:23 AM

-  County Boundary
-  Site Address (Zoom in to 1:3,000)
-  No Filled
-  Tax Parcels (Zoom in to 1:30,000)



Sources: Esri, HERE, Garmin, USGS, Intermap, INCREMENT P, NRCan, Esri Japan, METI, Esri China (Hong Kong), Esri Korea, Esri (Thailand),

Mason County WA GIS Web Map Application

Mason County disclaims accuracy, reliability, or timeliness of website info, not liable for losses from reliance on it. <https://www.masoncountywa.gov/disclaimer.php>



CITY OF SHELTON COUNCIL BRIEFING REQUEST (Agenda Item E2)

Touch Date: 02/18/2025
Brief Date: 03/04/2025
Consent Date: 03/18/2025

Department: Executive
Presented By: Mark Ziegler, City Manager

APPROVED FOR COUNCIL PACKET:

Action Requested:

ROUTE TO:

REVIEWED:

PROGRAM/PROJECT TITLE:

Designated Crisis Responder
Contracts

☐

Ordinance

☐ Dept. Head

☐ Finance Director

☒ Attorney

☒ City Clerk

☒ City Manager

MZ

ATTACHMENTS:

- Contract with Olympic Health and Recovery Services
- Contract with Thurston Mason Behavioral Health Administrative Service Organization

☐

Resolution

☒

Motion

☐

Other

DESCRIPTION OF THE PROGRAM/PROJECT AND BACKGROUND INFORMATION:

Throughout the summer and early fall of 2022, the city convened a Homelessness Task Force to address concerns in the community and determine consensus recommendations which should be considered by the City Council. One of the consensus recommendations from the task force is support for a Designated Crisis Responder (DCR) within the city to assist individuals experiencing mental health crisis.

The City subsequently contracted with Olympic Health and Recovery Services (OHRS) for DCR services in February 2023, with funding provided by the Association of Washington Cities, through June 30, 2023. The services were maintained with funding provided by the Thurston-Mason Behavioral Health Administrative Service Organization (TMBHO-ASO) through September of 2024 until staffing changes occurred. TMBHO has recently hired and trained a DCR to once again provide these services in Shelton. The attached contracts provide for the continued DCR services through December 31, 2025.

The DCR is placed with the Shelton Police Department, operating independently, Tuesday through Friday from 10am to 8pm. The DCR is authorized to act as a DCR by the Washington State Healthcare Authority.

ANALYSIS/OPTIONS/ALTERNATIVES:

Council may choose to modify the terms of this contract or disapprove this contract and seek another provider.

BUDGET/FISCAL INFORMATION:

This program will be supported by grant dollars obtained through Thurston Mason Behavioral Health Services.

PUBLIC INFORMATION REQUIREMENTS:

More information can be obtained through the City Clerk's Office.

STAFF RECOMMENDATION/MOTION:

"I move to place the contracts with Thurston Mason Behavioral Health Administrative Services Organization and Olympic Health and Recovery Services for designated crisis responder services on the March 18 City Council consent agenda."

AGREEMENT FOR DESIGNATED CRISIS RESPONDER SERVICES

The City of Shelton ("City") and Olympic Health and Recovery Services ("OHRS") enter into the following Agreement for Designated Crisis Responder ("DCR") services.

1. OVERVIEW

Olympic Health and Recovery Services (OHRS) shall provide dedicated Involuntary Treatment Act ("ITA") Services including all services required for the evaluation for involuntary detention or involuntary treatment of individuals in accordance with WAC 246-341-0810, RCW 71.05, RCW 71.24.300, and RCW 71.34.700.

2. SERVICE REQUIREMENTS

- 2.1. OHRS shall provide continuous services in four 10 hour shifts, Tuesday through Friday from 10 a.m. to 8 p.m. During these agreed upon hours, OHRS will provide ITA services to persons who have mental disorders and substance use disorders in accordance with state law and without regard to the individual's ability to pay.
- 2.2. OHRS will incorporate the statewide Designated Crisis Responder (DCR) protocols approved by the Health Care Authority into its practice.
- 2.3. OHRS will respond to referrals immediately upon request during the mutually agreed upon hours of service and not later than the timelines outlined by the RCW 71.05.153. The City may utilize the regional 24/7 hotline for service requests outside the agreed-upon hours.
- 2.4. OHRS will provide services in the community and hospital settings, as deemed appropriate in its sole discretion.
- 2.5. The City will allow OHRS to utilize office space in the police department during the agreed upon hours. OHRS shall be responsible for supplying its own equipment including computer equipment and transportation services.
- 2.6. OHRS shall provide all services required for the evaluation for involuntary detention or involuntary treatment of Individuals of all ages, including all clinical services. The DCR shall exercise independent decision-making authority when evaluating individuals for involuntary treatment. OHRS shall continue to provide ITA services to an individual until the end of the involuntary commitment or until the individual is appropriately passed on to a relieving DCR.

3. PROGRAM REQUIREMENTS

- 3.1. All OHRS staff shall have the necessary training defined within the DCR protocol and be designated as a DCR by the Thurston Mason Behavioral Health-Administrative Service Organization (TMBH-ASO).
- 3.2. OHRS shall fully participate in the Quality Management program of their, as it relates to the function of the DCR and ITA work. The quality assurance/improvement program will include tracking of timely investigations,

quality of documentation, training of the DCR teams in SUD ITA process, and reporting timeliness of detainment.

- 3.3. OHRS must have policies and procedures for ITA services that adhere to WAC 246-341-0810, 246-341-0300 through 246-341-0650.

4. PERFORMANCE MEASURES AND REPORTING

- 4.1. OHRS shall track the following items:

- Number of referrals and referral source
- Number of attempted evaluations
- Number of completed evaluations
- ITA Evaluation dispositions (e.g., hospital placement, not detained, single bed certification, etc.)

- 4.2. For AWC Grant Reporting requirements, OHRS will report the following information to the City of Shelton on a monthly basis, or as needed::

- Number of individuals served
- Gender (Male, Female, Nonbinary, etc.) of individuals served
- Age of individuals served
- Veteran status of individuals served
- Substance abuse or mental health issues of individuals served
- Reason for contact
- Outcome of contact (No outcome, referral to services, involuntary transport, etc.)
- Long-term outcome of individual receiving services (No outcome, permanent housing, shelter, etc.)
- Program successes and challenges

5. ELIGIBILITY

- 5.1. OHRS will primarily provide ITA services to Individuals referred by the City of Shelton Police Department.
- 5.2. OHRS will respond to referrals from the Mason County Sheriff's Office, the OHRS Crisis Team, and community referrals as appropriate.

6. COMPENSATION

The City shall compensate OHRS for its services in an amount not to exceed one hundred thousand dollars (\$100,000). OHRS shall invoice the City on a monthly basis. Invoices shall include a breakdown of costs for salary, benefits, training, supplies, travel, and administration. Invoices shall be paid within thirty (30) days of receipt.

7. TERM

This Agreement shall take effect upon execution and shall remain in effect through December 31,

2024.

8. INSURANCE/INDEMNITY

Indemnification / Hold Harmless. OHRS shall defend, indemnify and hold the City, its officers, officials, employees and volunteers harmless from any and all claims, injuries, damages, losses or suits including attorney fees, arising out of or resulting from the negligent or other tortious acts, errors or omissions of the OHRS in connection with the performance of this Agreement, except for injuries and damages caused by sole negligence of the City.

In the event of liability for damages arising out of bodily injury to persons or damages to property caused by or resulting from the concurrent negligence of OHRS and the City, its officers, officials, employees, and volunteers, OHRS's liability hereunder shall be only to the extent of OHRS's negligence. It is further specifically and expressly understood that the indemnification provided herein constitutes the OHRS's waiver of immunity under Industrial Insurance, Title 51 RCW, solely for the purposes of this indemnification. This waiver has been mutually negotiated by the parties. The provisions of this section shall survive the expiration or Termination of this Agreement.

Insurance. OHRS shall procure and maintain for the duration of this Agreement, insurance against claims for injuries to persons or damage to property which may arise from or in connection with the performance of the Work hereunder by the OHRS, their agents, representatives, employees or subcontractors.

No Limitation. OHRS's maintenance of insurance as required by this Agreement shall not be construed to limit the liability of OHRS to the coverage provided by such insurance, or otherwise limit the City's recourse to any remedy available at law or in equity.

A. **Minimum Scope of Insurance.** OHRS shall obtain insurance of the types described below:

1. Automobile Liability insurance covering all owned, non-owned, hired and leased vehicles. Coverage shall be at least as broad as Insurance Services Office (ISO) form CA 00 01 or substitute providing equivalent coverage. If necessary, the policy shall be endorsed to provide contractual liability coverage.
2. Commercial General Liability insurance shall be written on ISO occurrence form CG 00 01 and shall cover liability arising from premises, operations, stop-gap independent contractors, products-completed operations, personal injury and advertising injury, and liability assumed under an insured contract. The City shall be named as an insured under OHRS's Commercial General Liability insurance policy with respect to the Work performed for the City using additional insured endorsement at least as broad as ISO endorsement from CG 20 26 or substitute endorsements providing equivalent coverage.
3. Workers' Compensation coverage as required by the Industrial Insurance laws of the State of Washington.
4. Professional Liability insurance appropriate to OHRS's profession.

B. Minimum Amounts of Insurance. OHRS shall maintain the following insurance limits:

1. Automobile Liability insurance with a minimum combined single limit for bodily injury and property damage of \$1,000,000 per accident.
2. Commercial General Liability insurance shall be written with limits no less than \$2,000,000 each occurrence and \$2,000,000 general aggregate.
3. Professional Liability insurance shall be written with limits no less than \$2,000,000 per claim and \$2,000,000 policy aggregate limit.

C. Other Insurance Provisions. OHRS's Automobile Liability and Commercial General Liability insurance policies are to contain, or be endorsed to contain, that they shall be primary insurance as respect the City. Any Insurance, self-insurance, or insurance pool coverage maintained by the City shall be excess of OHRS's insurance and shall not contribute with it.

D. Acceptability of Insurers. Insurance is to be placed with insurers with a current A.M. Best rating of not less than A:VII.

E. Verification of Coverage. OHRS shall furnish the City with original certificates and a copy of the amendatory endorsements, including but not necessarily limited to the additional insured endorsement, evidencing the insurance requirements of OHRS before commencement of the Work.

F. Notice of Cancellation. OHRS shall provide the City with written notice of any policy cancellation, within two (2) business days of their receipt of such notice.

G. Failure to Maintain Insurance. Failure on the part of OHRS to maintain the insurance as required shall constitute a material breach of contract, upon which the City may, after giving five (5) business days' notice to OHRS to correct the breach, immediately terminate the contract or, at its discretion, procure or renew such insurance and pay any and all premiums in connection therewith, with any sums so expended to be repaid to the City on demand, or at the sole discretion of the City, offset against funds due OHRS from the City.

H. City's Full Availability of OHRS Limits. If OHRS maintains higher insurance limits than the minimums shown above, the City shall be insured for the full available limits of Commercial General and Excess or Umbrella liability maintained by OHRS, irrespective of whether such limits maintained by OHRS are greater than those required by this Agreement or whether any certificate of insurance furnished to the City evidences limits of liability lower than those maintained by OHRS.

9. MISCELLANEOUS

9.1. Assignment. Any assignment of this Agreement by OHRS without the written consent of the City shall be void.

9.2. This Contract contains Federal Block Grant funds, and any subcontracts must be

subcontracted according to the terms set forth by the Community Behavioral Health Advisory Board-approved Mental Health Block Grant project plan and/or Substance Abuse Block Grant (SABG) project plan. The approved Subcontractor must adhere to the applicable requirements in the Thurston-Mason BH-ASO Non-Medicaid Professional Services Contractor Guide and Crisis Provider Guide.

- 9.3. Non-Waiver of Breach.** The failure of the City to insist upon strict performance of any of the covenants and agreements contained herein, or to exercise any option herein conferred in one or more instances shall not be construed to be a waiver or relinquishment of said covenants, agreements or options, and the same shall be and remain in full force and effect.
- 9.4. Resolution of Disputes, Governing Law.** Should any dispute, misunderstanding or conflict arise as to the terms and conditions contained in this Agreement, the matter shall be referred to the City Manager, whose decision shall be final. In the event of any litigation arising out of this Agreement, the Parties shall bear their own costs and fees. This Agreement shall be governed by and construed in accordance with the laws of the State of Washington and the jurisdiction of any dispute under this Agreement shall be the Superior Court of Mason County, Washington.
- 9.5. Public Records Act.** OHRS acknowledges that the City is a public agency subject to the Public Records Act codified in Chapter 42.56 RCW and documents, notes, emails, and other records prepared or gathered by OHRS in its performance of this Agreement may be subject to public review and disclosure, even if those records are not produced to or possessed by the City of Woodinville. As such, OHRS agrees to cooperate fully with the City in satisfying the City's duties and obligations under the Public Records Act as allowable by law.
- 9.6. Ratification.** Each Party shall take such action as is necessary by law to approve this Agreement via appropriate motion of its governing body or by other allowable means.

Executed this _____ day of March, 2024.

Signatures on following page

OLYMPIC HEALTH AND RECOVERY SERVICES

DATE: 3/6

3/13/2024

Name/Title

CITY OF SHELTON

Date: 3/7/24

Mark Ziegler
Mark Ziegler, City Manager

Attest:

Donna Nault
Donna Nault, City Clerk

THURSTON-MASON BEHAVIORAL HEALTH ADMINISTRATIVE SERVICE ORGANIZATION (TMBH-ASO)

CONTRACT FOR PROFESSIONAL SERVICES WITH

Contractor:	City of Shelton				
Contact:	Mark Ziegler	Title:	City Manager		
Phone:	360.432.5194	Email:	mark.ziegler@sheltonwa.gov		
Mailing Address:	525 West Cota Street, Shelton WA 98584				
Contract Number:	2025-3635	Start Date:	January 1, 2025	End Date:	December 31, 2025
Thurston-Mason BH-ASO Contacts:					
Tara Smith, Finance Director		Phone:	360.763.5809	Email:	tara.smith@tmbho.org
Amy Martin, Contracts and Compliance Director		Phone:	360.763.5828	Email:	amy.martin@tmbho.org
Mailing Address:	670 Woodland Square Loop SE Ste 301 Lacey WA 98503				
Is this Contractor a Subrecipient for the purposes of this contract? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N				CFDA#: 93.959; 93.958	
Contract Total				\$100,000	
INCORPORATION OF EXHIBITS AND ATTACHMENTS					
<p>The Provider shall provide services and comply with the requirements set forth in the following attached exhibits, attachments, or any other materials which are incorporated herein by reference. To the extent that the terms and conditions of any Exhibit or Attachments conflicts with the terms and conditions of this base contract, the terms of this Contract shall control.</p>					
<input checked="" type="checkbox"/> Exhibit A: Scope of Services <input checked="" type="checkbox"/> Exhibit B: Compensation <input checked="" type="checkbox"/> Exhibit C: Business Associate Agreement (BAA)			<input checked="" type="checkbox"/> TMBH-ASO Non-Medicaid Professional Services Contractor Guide <input checked="" type="checkbox"/> TMBH-ASO Non-Medicaid Crisis Services Provider Guide		
<p>This Professional Service Contract is entered into in counterpart or duplicate copies, and any signed counterpart or duplicate copy shall be equivalent to a signed original for all purposes, between the Thurston-Mason Behavioral Health Administrative Service Organization (TMBH-ASO) and the Contractor. This Contract, including all Exhibits, Attachments, and other documents incorporated by reference, contains all of the terms and conditions agreed upon by the parties. No other understandings and representations, oral or otherwise, regarding the subject matter of this Contract shall be deemed to exist or bind the parties. The parties signing below warrant that they have read and understand this Contract and have authority to enter into this Professional Service Contract. THE PARTIES HERETO ACKNOWLEDGE THAT THE WAIVER OF IMMUNITY SET OUT IN SECTION 17 WAS MUTUALLY NEGOTIATED AND SPECIFICALLY AGREED TO BY THE PARTIES HEREIN.</p>					
Contractor Signature:		Printed Name and Title:		Date:	
Thurston-Mason BH-ASO Signature:		Printed Name and Title:		Date:	

GENERAL TERMS AND CONDITIONS

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1. SERVICES PROVIDED BY THE CONTRACTOR

- 1.1. The CONTRACTOR represents that it is qualified and possesses the necessary expertise, knowledge, training, and skills, and has the necessary licenses and/or certification to perform the services set forth in this Contract.
- 1.2. A detailed description of the services to be performed by the CONTRACTOR is set forth in Exhibit A, attached hereto and incorporated herein by reference.
- 1.3. The CONTRACTOR agrees to provide its own labor and materials. Unless otherwise provided for in the Contract, no material, labor, or facilities will be furnished by TMBH-ASO.
- 1.4. The CONTRACTOR shall perform according to standard industry practice of the work specified by this Contract.
- 1.5. The CONTRACTOR shall complete its work in a timely manner and in accordance with the schedule agreed to by the parties.

2. SERVICES PROVIDED BY TMBH-ASO

- 2.1. In order to assist the CONTRACTOR in fulfilling its duties under this Contract, TMBH-ASO shall provide the following:
 - 2.1.1. Relevant information as exists to assist the CONTRACTOR with the performance of the CONTRACTOR'S services.
 - 2.1.2. Coordination with other Consultants as necessary for the performance of the CONTRACTOR'S services.
 - 2.1.3. Services documents, or other information identified in Exhibit A.

3. COMPENSATION

- 3.1. For the services performed hereunder, the CONTRACTOR shall be paid based upon mutually agreed rates contained in Exhibit B, attached hereto and incorporated herein by reference.
- 3.2. No payment shall be made for any work performed by the CONTRACTOR, except for work identified and set forth in this Contract or supporting exhibits or attachments incorporated by reference into this Contract.
- 3.3. The CONTRACTOR may, in accordance with Exhibit B, submit invoices to TMBH-ASO not more often than once per month during the progress of the work for partial payment of work completed to date. Invoices shall cover the time CONTRACTOR performed work for TMBH-ASO during the billing period. TMBH-ASO shall pay the CONTRACTOR for services rendered in the month following the actual delivery of the work and will remit payment per Exhibit B.
- 3.4. The CONTRACTOR shall not be paid for services rendered under the Contract unless and until they have been performed to the satisfaction of TMBH-ASO.
- 3.5. In the event the CONTRACTOR has failed to perform any substantial obligation to be performed by the CONTRACTOR under this Contract and such failure has not been cured within ten (10) days following notice from TMBH-ASO, then TMBH-ASO may, in its sole discretion, upon written notice to the CONTRACTOR, withhold any and all monies due and payable to the CONTRACTOR, without penalty until such failure to perform is cured or otherwise adjudicated. "Substantial" for purposes of this Contract means faithfully fulfilling the terms of the contract with variances only for technical or minor omissions or defects.
- 3.6. Unless otherwise provided for in this Contract or any exhibits or attachments hereto, the CONTRACTOR will not be paid for any billings or invoices presented for payment prior to the execution of the Contract or after its termination.

4. AMENDMENT AND CHANGES IN WORK

- 4.1. In the event of any errors or omissions by the CONTRACTOR in the performance of any work required under this Contract, the CONTRACTOR shall make any and all necessary corrections without additional compensation. All work submitted by the CONTRACTOR shall be certified by the CONTRACTOR and

checked for errors and omissions. The CONTRACTOR shall be responsible for the accuracy of the work, even if the work is accepted by TMBH-ASO.

- 4.2. The CONTRACTOR shall not make any changes to service delivery requirements under this Contract due to changes in federal or State law, rules or regulations applicable to said service delivery without TMBH-ASO approval.
- 4.3. Except as described below, an amendment to this Contract shall require the approval of both TMBH-ASO and the CONTRACTOR. The following shall guide the amendment process:
 - 4.3.1. Any amendment shall be in writing and shall be signed by the CONTRACTOR's authorized officer and an authorized representative of TMBH-ASO. No other understandings, verbal or otherwise, regarding the subject matter of this Agreement shall be deemed to exist or to bind any of the parties hereto.
 - 4.3.2. TMBH-ASO reserves the right to issue unilateral amendments which provide corrective or clarifying information.
 - 4.3.3. The CONTRACTOR shall submit all feedback or questions to TMBH-ASO at contracts@tmbho.org or other email address as expressly stated.
 - 4.3.4. The CONTRACTOR shall submit written feedback within the expressed deadline provided to the CONTRACTOR upon receipt of any amendments. TMBH-ASO is not obligated to accept CONTRACTOR feedback after the written deadline provided by TMBH-ASO.
 - 4.3.5. The CONTRACTOR shall return all signed amendments within the written deadline provided by TMBH-ASO contracts administration.

5. ASSIGNMENT, DELEGATION, AND SUBCONTRACTING

- 5.1. The CONTRACTOR shall not assign or subcontract any obligations and duties of the Contract to any person, partnership, corporation, association or organization, in whole or in part, without the prior written consent of TMBH-ASO. If approved, the CONTRACTOR shall:
 - 5.1.1. Provide copies of all Subcontracts, including exhibits, attachments, and Subcontract amendments to TMBH-ASO within 15 days of contract execution.
 - 5.1.2. Retain the responsibility for monitoring Subcontractor compliance and oversight of delegated functions, which shall be documented and provided to TMBH-ASO no less than annually.
- 5.2. All Subcontracts must be in writing and specify all duties, responsibilities and reports that are appropriate to the service or activity delegated under the Subcontract and require compliance with all applicable local, State and federal laws, rules and regulations. No Subcontract terminates the legal responsibility of the CONTRACTOR to TMBH-ASO to perform the terms of this Contract. The CONTRACTOR shall be responsible for the acts and omissions of any Subcontractor, and the CONTRACTOR is responsible for all contractual obligations, financial or otherwise, to its Subcontractors. TMBH-ASO has no contractual obligations to any Subcontractor under contract to the CONTRACTOR. Subcontractors must abide by the requirements of Section 1128A(b) of the Social Security Act prohibiting BHO'S and other providers from making payments directly or indirectly to physicians or other providers as an inducement to reduce or limit services provided to recipients.
- 5.3. The CONTRACTOR certifies that no person or selling agent has been employed or retained to solicit or secure this Contract for a commission, percentage, brokerage or contingent fee, excepting bona fide employees or bona fide established agents maintained by the CONTRACTOR for the purpose of securing business. TMBH-ASO shall have the right, in the event of breach of this clause by the CONTRACTOR, to terminate this Contract or, in its discretion, to deduct from amounts due the CONTRACTOR under the Contract recover by other means the full amount of any such commission, percentage, brokerage or contingent fee.

6. COMPLIANCE WITH APPLICABLE LAW

- 6.1. In the provision of services under this Contract, the CONTRACTOR and any approved Subcontractors shall comply with all applicable federal, State and local statutes and regulations, and all amendments thereto, that are in effect when the Contract is signed or that come into effect during the term of this Contract. The provisions of this Contract that are in conflict with applicable State or federal laws or Regulations are hereby amended to conform to the minimum requirements of such laws or Regulations.
- 6.2. The Contractor shall comply with these General Terms and Conditions, Provider Guides, Subdelegation Grids, Exhibits, Attachments, TMBH-ASO and/or the Department Data Reporting Guidelines, TMBH-ASO Data Dictionary, TMBH-ASO Policies and Procedures, TMBH-ASO Protocols, TMBH-ASO and/or the Department required forms, and any other documents attached hereto or incorporated herein by reference.
- 6.3. A provision of this Contract that is stricter than such laws or Regulations will not be deemed a conflict.

7. CONFIDENTIALITY

- 7.1. The CONTRACTOR shall protect and preserve the confidentiality of TMBH-ASO's data or information that is defined as confidential under State or federal law or Regulation or data that TMBH-ASO has identified as confidential.
- 7.2. The CONTRACTOR shall comply with all applicable federal and state laws and Regulations concerning collection, use, and disclosure of Personal Information set forth in Governor Locke's Executive Order 00-03 and Protected Health Information (PHI), defined at 45 C.F.R. §160.103, as may be amended from time to time.
- 7.3. The CONTRACTOR shall not release, divulge, publish, transfer, sell, or otherwise make known to unauthorized third parties Personal Information or PHI without the advance express written consent of the individual who is the subject matter of the Personal Information or PHI or as otherwise required in this Contract or as permitted or required by state or federal law or Regulation.
- 7.4. The CONTRACTOR shall implement appropriate physical, electronic and managerial safeguards to prevent unauthorized access to Personal Information and PHI. The CONTRACTOR shall require the same standards of confidentiality of any approved Subcontractors.
- 7.5. The CONTRACTOR agrees to share Personal Information regarding Individuals in a manner that complies with applicable state and federal law protecting confidentiality of such information (including but not limited to the Health Insurance Portability and Accountability Act (HIPAA) of 1996, codified at 42 U.S.C. §1320(d) et. seq. and 45 C.F.R. parts 160, 162, and 164., the HIPAA Regulations, 42 C.F.R. §431 Subpart F, RCW 5.60.060(4), and Chapter 70.02 RCW). The CONTRACTOR and the CONTRACTOR's Subcontractors shall fully cooperate with TMBH-ASO efforts to implement HIPAA requirements.
- 7.6. The CONTRACTOR shall protect and maintain all Confidential Information gained by reason of this Contract against unauthorized use, access, disclosure, modification or loss.
- 7.7. This duty requires that CONTRACTOR employ reasonable security measures, which include restricting access to the Confidential Information by:
 - 7.7.1. Encrypting electronic Confidential Information during Transport;
 - 7.7.2. Physically securing and tracking media containing Confidential Information during Transport;
 - 7.7.3. Limiting access to staff that have an authorized business requirement to view the Confidential Information;
 - 7.7.4. Using access lists, Unique User ID and Hardened Password authentication to protect Confidential Information;
 - 7.7.5. Physically securing any computers, documents or other media containing the Confidential Information; and
 - 7.7.6. Encrypting all Confidential Information that is stored on portable devices including but not limited to laptop computers and flash memory devices.

- 7.8. Upon request by TMBH-ASO the CONTRACTOR shall return the Confidential Information or certify in writing that the CONTRACTOR employed a TMBH-ASO approved method to destroy the information. CONTRACTOR may obtain information regarding approved destruction methods from the TMBH-ASO contact identified in this Contract.
- 7.9. In the event of a breach, meaning an acquisition, access, use, or disclosure of PHI in a manner not permitted by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule which compromises the security or privacy of an Individual's PHI, the CONTRACTOR shall notify TMBH-ASO in writing, as described in the Notices Section of the General Terms and Conditions, within two (2) business days after determining notification must be sent to Individuals. CONTRACTOR must also take actions to mitigate the risk of loss and comply with any notification or other requirement imposed by law (45 C.F.R. Part 164, Subpart D, WAC 284-04-625, RCW 19.255.010).
- 7.10. TMBH-ASO reserves the right to monitor, audit, or investigate the use of Personal Information and PHI of Individuals collected, used, or acquired by CONTRACTOR during the term of this Agreement to the extent permitted by law. All TMBH-ASO representatives conducting onsite audits of CONTRACTOR agree to keep confidential any patient- identifiable information which may be reviewed during the course of any site visit or audit.
- 7.11. Any material breach of this confidentiality provision may result in termination of this Contract. The CONTRACTOR shall indemnify and hold TMBH-ASO harmless from any damages related to the CONTRACTOR's or Subcontractor's unauthorized use or release of Personal Information or PHI of Individuals.
- 7.12. To the extent allowed by law, when the Contract term has ended or the Contract terminated, or when Confidential Information is no longer needed, the CONTRACTOR shall return the Confidential Information or certify in writing the destruction of Confidential Information upon written request by TMBH-ASO.
- 7.13. Paper documents with Confidential Information may be recycled through a contracted firm, provided the contract with the recycler specifies that the confidentiality of information will be protected, and the information destroyed through the recycling process. Paper documents with Confidential Information must be destroyed through shredding, pulping, or incineration.
- 7.14. The CONTRACTOR shall obtain written consent from an individual prior to the use of the individual's picture(s) or personal story.

8. CONTRACTOR CERTIFICATION REGARDING ETHICS

- 8.1. The CONTRACTOR certifies that the CONTRACTOR is now, and shall remain, in compliance with Chapter 42.52 RCW, Ethics in Public Service, throughout the term of this Contract, as a recipient of public funding under this Contract.
- 8.2. The Contractor shall have conflict of interest safeguards that, at a minimum, are equivalent to conflict-of-interest safeguards imposed by federal law on parties involved in public Contracting (42 C.F.R. § 438.58).

9. DEBARMENT

- 9.1. Debarment Certification
 - 9.1.1. By signing this Contract, the Contractor certifies that it and any owners are not presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded in any Washington State or federal department or agency from participating in transactions (debarred) and is not listed in the Excluded Parties List System in the System for Award Management (SAM).
 - 9.1.2. The Contractor agrees to include the above requirement in any approved Subcontracts into which it enters concerning the performance of services hereunder, and also agrees that it shall not employ debarred individuals or Subcontract with any debarred providers, persons, or entities.
 - 9.1.3. The Contractor must immediately notify TMBH-ASO if, during the term of this Contract, the

Contractor becomes debarred. TMBH-ASO may immediately terminate this Contract by providing Contractor written notice in accord with the Subsection, Terminations: Pre-Termination Processes of this Contract if the Contractor becomes debarred during the term hereof.

10. DEFENSE OF LEGAL ACTIONS

- 10.1. The CONTRACTOR shall advise TMBH-ASO as to matters that come to its attention with respect to potential substantial legal actions involving allegations that may give rise to a claim for indemnification from TMBH-ASO. The CONTRACTOR shall fully cooperate with TMBH-ASO in the defense of any action arising out of matters related to this Contract by providing without additional fee all reasonably available information relating to such actions and by providing necessary testimony.

11. DISPUTES

- 11.1. Differences between the CONTRACTOR and TMBH-ASO, arising under and by virtue of this Contract shall be brought to the attention of TMBH-ASO at the earliest possible time in order that such matters may be settled, or other appropriate action promptly taken. Any dispute relating to the quality or acceptability of performance and/or compensation due to the CONTRACTOR shall be decided by the TMBH-ASO Contract representative or designee. All rulings, orders, instructions and decisions of TMBH-ASO'S contract representative shall be final and conclusive, subject to the CONTRACTOR'S right to seek judicial relief pursuant to Section, Governing Law and Venue.

12. ENTIRE CONTRACT

- 12.1. The parties agree that this Contract, including all documents attached or incorporated by reference, is the complete expression of its terms and conditions. Any verbal or written representations or understandings not incorporated in this Contract are specifically excluded.

13. FORCE MAJEURE

- 13.1. If the CONTRACTOR is prevented from performing any of its obligations hereunder in whole or in part as a result of a major epidemic, act of God, war, civil disturbance, court order or any other cause beyond its control, such nonperformance shall not be a ground for termination for default. Immediately upon the occurrence of any such event, the CONTRACTOR shall use its best efforts to provide, directly or indirectly, alternative and, to the extent practicable, comparable performance. Nothing in this Section shall be construed to prevent TMBH-ASO from terminating this Contract for reasons other than for default during the period of events set forth above, or for default, if such default occurred prior to such event.

14. FUTURE SUPPORT

- 14.1. TMBH-ASO makes no commitment to future support and assumes no obligation for future support of the services contracted for, except as expressly set forth in this Contract.

15. GOVERNING LAW AND VENUE

- 15.1. This Contract has been and shall be construed as having been made and delivered in accordance with the laws of the state of Washington, and it is agreed by each party hereto that this Contract shall be governed by the laws of the State of Washington, both as to its interpretation and performance.
- 15.2. Any action at law, suit in equity, or judicial proceedings arising out of this Contract shall be instituted and maintained only in any of the courts of competent jurisdiction in Thurston County or Mason County. In the event that an action is removed to U.S. District Court, venue shall be in the Western District of Washington in Tacoma.

16. HEADINGS

- 16.1. The headings used in this Contract are for reference and convenience only, and in no way define, limit, or decide the scope or intent of any provisions or Sections of this Contract.

17. HEALTH AND SAFETY

- 17.1. The CONTRACTOR shall perform any and all of its obligations under this Contract in a manner that does not

compromise the health and safety of any TMBH-ASO individual with whom the CONTRACTOR has contact.

18. INDEMNIFICATION AND HOLD HARMLESS

- 18.1. The CONTRACTOR shall hold harmless, indemnify and defend THURSTON COUNTY, MASON COUNTY, TMBH-ASO, its officers, officials, employees and agents, from and against any and all claims, actions, suits, liability, losses, expenses, damages, and judgments of any nature whatsoever, including costs and attorney's fees in defense thereof, for injury, sickness, disability or death to persons or damage to property or business, caused by or arising out of the CONTRACTOR's acts, errors or omissions or the acts, errors or omissions of its employees, agents, Subcontractors or anyone for whose acts any of them may be liable, in the performance of this Contract. PROVIDED HOWEVER, that the CONTRACTOR's obligations hereunder shall not extend to injury, sickness, disability, death or damage caused by or arising out of the sole negligence of THURSTON COUNTY, MASON COUNTY, TMBH-ASO, its officers, officials, employees or agents. PROVIDED FURTHER, that in the event of the concurrent negligence of the parties, the CONTRACTOR's obligations hereunder shall apply only to the percentage of fault attributable to the CONTRACTOR, its employees, agents or Subcontractors. Claims shall include, but not be limited to, assertions that information supplied or used by the CONTRACTOR or Subcontractor infringes any patent, copyright, trademark, trade name, or otherwise results in an unfair trade practice.
- 18.2. In any and all claims against THURSTON COUNTY, MASON COUNTY, TMBH-ASO, its officers, officials, employees and agents by any employee of the CONTRACTOR, Subcontractor, anyone directly or indirectly employed by any of them, or anyone for whose acts any of them may be liable, the indemnification obligation under this Section shall not be limited in any way by any limitation on the amount or type of damages, compensation, or benefits payable by or for the CONTRACTOR or Subcontractor under Industrial Insurance acts, disability benefits acts, or other employee benefits acts, it being clearly agreed and understood by the parties hereto that the CONTRACTOR expressly waives any immunity the CONTRACTOR might have had under Title 51 RCW. By executing the Contract, the CONTRACTOR acknowledges that the foregoing waiver has been mutually negotiated by the parties and that the provisions of this Section shall be incorporated, as relevant, into any contract the CONTRACTOR makes with any Subcontractor or agent performing work hereunder.
- 18.3. The CONTRACTOR's obligations hereunder shall include, but are not limited to, investigating, adjusting and defending all claims alleging loss from action, error or omission, or breach of any common law, statutory or other delegated duty by the CONTRACTOR, the CONTRACTOR's employees, agents or Subcontractors
- 18.4. The CONTRACTOR shall indemnify and hold harmless the State from any claims by the CONTRACTOR related to the provision of services to Individuals according to the terms of this Contract; this obligation shall not apply to any services that were unpaid due to non-payment of installment moneys by the State to TMBH-ASO. The CONTRACTOR agrees to promptly notify TMBH-ASO in writing of any claim and provide the State and TMBH-ASO the opportunity to defend and settle the claim. The CONTRACTOR waives its immunity under Title 51 RCW to the extent it is required to indemnify, defend, and hold harmless the State and its agencies, officials, agents, or employees.

19. INDEPENDENT CONTRACTOR

- 19.1. The parties intend that an independent CONTRACTOR relationship between the CONTRACTOR and TMBH-ASO shall be created by this Contract. The CONTRACTOR specifically has the right to direct and control CONTRACTOR'S own activities in providing the agreed services in accordance with the specifications set out in this Contract.
- 19.2. The CONTRACTOR acknowledges that the entire compensation for this Contract is set forth in Section, Compensation and Exhibit B - Compensation of this Contract, and the CONTRACTOR is not entitled to any TMBH-ASO benefits, including, but not limited to: vacation pay, holiday pay, sick leave pay, medical, dental, or other insurance benefits, fringe benefits, or any other rights or privileges afforded to TMBH-ASO employees.
- 19.3. The CONTRACTOR shall have and maintain complete responsibility and control over all of its subcontractors, employees, agents, and representatives. No subcontractor, employee, agent or representative of the CONTRACTOR shall be or deem to be or act or purport to act as an employee, agent

or representative of TMBH-ASO.

- 19.4. The CONTRACTOR shall assume full responsibility for the payment of all payroll taxes, use, sales, income or other form of taxes, fees, licenses, excises, or payments required by any city, county, federal or state legislation which is now or may during the term of this Contract be enacted as to all persons employed by the CONTRACTOR and as to all duties, activities and requirements by the CONTRACTOR in performance of the work on this project and under this Contract and shall assume exclusive liability therefore, and meet all requirements thereunder pursuant to any rules or regulations.
- 19.5. The CONTRACTOR agrees to immediately remove any of its employees or agents from assignment to perform services under this Contract upon receipt of a written request to do so from TMBH-ASO'S contract representative or designee.

20. INSPECTION OF BOOKS AND RECORDS

- 20.1. TMBH-ASO has the right to inspect the books and records of the CONTRACTOR relating to the performance of this Contract. The CONTRACTOR and any approved Subcontractors shall cooperate with TMBH-ASO regarding any audits and investigations initiated by TMBH-ASO or other funding entities that support the services under this Contract – Federal, State, or local government.

20.2. Records

- 20.2.1. The CONTRACTOR shall provide access to its records and place of business during the term of this Contract and for one (1) year following termination or expiration of this Contract for the purposes of monitoring, auditing, and evaluating CONTRACTOR'S compliance with this Contract, and compliance with applicable State and federal laws, rules, and regulations as existing now or as later amended.
- 20.2.2. The CONTRACTOR and any approved Subcontractors shall maintain all financial, medical and other records pertinent to this Contract. All financial records shall follow generally accepted accounting principles or other comprehensive basis of accounting (OCBA) that is prescribed by the State Auditor's Office under the authority of Washington State Law, chapter 43.09 RCW. Other records shall be maintained as necessary to clearly reflect all actions taken by the CONTRACTOR related to this Contract.
- 20.2.3. The CONTRACTOR shall maintain books, records, documents and other material relevant to this Contract which sufficiently and properly reflects all direct and indirect costs expended in the performance of the services described herein and the performance of all acts required by the Contract and applicable laws, rules, and regulations.
- 20.2.4. Records will enable identification of all federal funds received and expended by Catalog of Federal Domestic Assistance Number (CFDA#), federal program, award number and year, name of federal, state and pass-through agency. Records will meet the requirements of OMB Circular A-102 Grants and Cooperative Contracts with state and local Governments, and also OMB Circular A-110 Uniform Administrative Requirements for Grants and Contracts with institutions of higher education, hospitals and other non-profit organizations.
 - 20.2.4.1. The CONTRACTOR will include in their financial statements a schedule of expenditures of all federal awards. The schedule will include the name of the federal agency, the pass-through entity, the CFDA#, any other identification number, the amount of expenditures for the program, identification of any major programs, and any notes that pertain to the significant accounting policies used to account for the federal programs.
- 20.2.5. All records and reports relating to this Contract shall be retained by the CONTRACTOR and any approved Subcontractors for a minimum of ten (10) years after final payment is made under this Contract. When an audit, litigation, or other action involving records is initiated prior to the end of said period, records shall be maintained for a minimum of ten (10) years following resolution of such action.

- 20.2.6. The CONTRACTOR acknowledges the TMBH-ASO is subject to the Public Records Act (Chapter 42.56 RCW). This Contract shall be a “public record” as defined in Chapter 42.56 RCW. Any documents submitted to TMBH-ASO by the CONTRACTOR may also be construed as “public records” and therefore subject to public disclosure.

21. INSURANCE

- 21.1. Depending upon contracted services to be delivered, some or all insurance requirements may be waived by TMBH-ASO. The CONTRACTOR understands, no Sections of the insurance terms will be removed, if “waived” it will be noted next to “insurance” or next to each individual insurance requirement, as applicable.
- 21.2. **Professional Legal Liability:** The CONTRACTOR or subcontractor, if a licensed professional, shall maintain Professional Legal Liability or Professional Errors and Omissions coverage appropriate to the CONTRACTOR’s profession and shall be written subject to limits of not less than \$2,000,000 per loss and a \$4,000,000 aggregate.
- 21.2.1. The coverage shall apply to liability for a professional error, act or omission arising out of the scope of the CONTRACTOR’s services defined in this Contract. Coverage shall not exclude bodily injury or property damage. Coverage shall not exclude hazards related to the work rendered as part of the Contract or within the scope of the CONTRACTOR’s services as defined by this Contract including testing, monitoring, measuring operations, or laboratory analysis where such services are rendered as part of the Contract.
- 21.3. **Commercial General Liability:** The CONTRACTOR or subcontractor shall maintain Commercial General Liability coverage for bodily injury, personal injury and property damage, subject to limits of not less than \$2,000,000 per loss. Coverage shall include: liability that arises out of the ownership, maintenance or use of real property, arises out of operations away from the business premises by employees or agents of the insured, or liability assumed by Contract. The general aggregate limit shall apply separately to this Contract and be no less than \$4,000,000.
- 21.3.1. The CONTRACTOR will provide Commercial General Liability coverage that does not exclude any activity to be performed in fulfillment of this Contract. Specialized forms specific to the industry of the CONTRACTOR will be deemed equivalent, provided coverage is no more restrictive than would be provided under a standard Commercial General Liability policy, including contractual liability coverage.
- 21.3.2. The CONTRACTOR shall secure employers’ liability coverage with limits not less than \$100,000 as part of their CGL policy or separately.
- 21.4. **Automobile Liability:** The CONTRACTOR shall maintain automobile liability insurance as follows:
- 21.4.1. The CONTRACTOR shall maintain Business Automobile Liability Insurance with a limit of not less than \$1,000,000 each accident combined Bodily Injury and Property Damages. Coverage shall include owned, hired and non-owned automobiles.
- 21.5. **Industrial Insurance Coverage**
- 21.5.1. The CONTRACTOR shall comply with the provisions of Title 51 RCW, Industrial Insurance. If the CONTRACTOR fails to provide industrial insurance coverage or fails to pay premiums or penalties on behalf of its employees, as may be required by law, TMBH-ASO may collect from the CONTRACTOR the full amount payable to the Industrial Insurance accident fund. TMBH-ASO may deduct the amount owed by the CONTRACTOR to the accident fund from the amount payable to the CONTRACTOR by TMBH-ASO under this Contract and transmit the deducted amount to the Department of Labor and Industries, (L&I) Division of Insurance Services. This provision does not waive any of L&I’s rights to collect from the CONTRACTOR.
- 21.6. **Privacy Breach Response Coverage:** For the term of this Contract and three (3) years following its termination, the CONTRACTOR shall maintain insurance to cover costs incurred in connection with a Security Incident, privacy Breach, or potential compromise of data including:

- 21.6.1. Computer forensics assistance to assess the impact of a data Breach, determine root cause, and help determine whether and the extent to which notification must be provided to comply with Breach notification laws (45. C.F.R. Part 164, Subpart D; RCW 42.56.590, RCW 19.255.010; and WAC 284-04-625).
- 21.6.2. Notification and call center services for individuals affected by a Security Incident or privacy Breach.
- 21.6.3. Breach resolution and mitigation services for individuals affected by a Security Incident or privacy Breach including fraud prevention, credit monitoring and identity theft assistance.
- 21.6.4. Regulatory defense, fines and penalties from any claim in the form of a regulatory proceeding resulting from a violation of any applicable privacy or security law(s) or regulation(s).
- 21.7. **Other Insurance Provisions:**
 - 21.7.1. It is acknowledged by the parties of this Contract that all insurance coverage required to be provided by the CONTRACTOR or any approved Subcontractor, is intended to apply on a primary non-contributing basis in relation to any other insurance or self-insurance available to TMBH-ASO, THURSTON COUNTY, and MASON COUNTY covering TMBH-ASO, THURSTON COUNTY, MASON COUNTY, and their respective elected and appointed officers, officials, employees and agents.
 - 21.7.2. Where such coverage is required, the CONTRACTOR's Commercial General Liability insurance shall include TMBH-ASO, THURSTON COUNTY, MASON COUNTY, their respective elected and appointed officers, officials, employees, agents, and WASHINGTON STATE with respect to performance of services.
 - 21.7.3. Where such coverage is required, the CONTRACTOR's Commercial General Liability insurance shall contain no special limitations on the scope of protection afforded to TMBH-ASO, THURSTON COUNTY, MASON COUNTY, their respective elected and appointed officers, officials, employees, agents, and WASHINGTON STATE as additional insureds.
 - 21.7.4. Any failure to comply with reporting provisions of the policies shall not affect coverage provided to TMBH-ASO, THURSTON COUNTY, MASON COUNTY, their respective elected and appointed officers, officials, employees, agents, and WASHINGTON STATE.
 - 21.7.5. The CONTRACTOR's insurance shall apply separately to each insured against whom claim is made or suit is brought, except with respect to the limits of the insurer's liability.
 - 21.7.6. The CONTRACTOR shall include all Subcontractors as insured under its policies or shall furnish separate certificates and endorsements for each Subcontractor. All coverage for Subcontractors shall be subject to all of the requirements stated herein.
 - 21.7.7. The insurance limits mandated for any insurance coverage, required by this Contract, are not intended to be an indication of exposure nor are they limitations on indemnification.
 - 21.7.8. The CONTRACTOR shall maintain all required policies in force from the time services commence until services are completed. Certificates, policies, and endorsements expiring before completion of services shall be promptly replaced. If the CONTRACTOR's liability coverage is written as a claim made policy, then the CONTRACTOR must evidence the purchase of an extended reporting period or "tail" coverage for a three (3) year period after project completion.
- 21.8. **Verification of Coverage and Acceptability of Insurers:** The CONTRACTOR shall place insurance with insurers licensed to do business in the State of Washington and having A.M. Best Company ratings of no less than A minus with the exception that excess and umbrella coverage used to meet the requirements for limits of liability or gaps in coverage need not be placed with insurers or re-insurers licensed in the State of Washington.

- 21.8.1. The CONTRACTOR shall furnish TMBH-ASO with properly executed Certificates of Insurance or a signed policy endorsement which shall clearly evidence all insurance required in this Section prior to commencement of services. The certificates will, at a minimum, list limits of liability and coverage. The certificate will provide that the underlying insurance contract will not be canceled, allowed to expire, or be materially reduced in coverage except on 30 days prior written notice to TMBH-ASO.
- 21.8.2. The CONTRACTOR shall furnish TMBH-ASO with evidence that the additional insured provision required above has been met. Acceptable form of evidence is the endorsement page(s) of the policy showing TMBH-ASO, THURSTON COUNTY, MASON COUNTY, their respective elected and appointed officers, officials, employees, agents, and WASHINGTON STATE as additional insureds.
- 21.8.3. Written notice of cancellation or change shall be mailed to TMBH-ASO to the address on the cover page.
- 21.8.4. The CONTRACTOR or its broker shall provide a copy of any, and all insurance policies specified in this Contract annually upon renewal and upon request of TMBH-ASO.

21.9. Third Party Claims Handling:

- 21.9.1. A party to this Contract that is seeking indemnification hereunder shall promptly notify the other party from whom indemnification is sought in writing of any claim asserted against it and promptly deliver a true copy of any Summons or other process, pleading or notice issued in any lawsuit or claim.
- 21.9.2. Where acceptance of its obligation to indemnify is deemed proper by the indemnifying party, said party reserves the right to control the investigation, trial and defense of such lawsuit or action (including all negotiations to effect settlement), any appeal arising from it and employ or engage attorneys of its own choice.
- 21.9.3. The party seeking indemnification may, at its sole cost, participate in such investigation, trial and defense of such lawsuit or action and any appeal arising from same.
- 21.9.4. Each party to this contract, its employees, agents, servants and representatives shall provide full cooperation to the other at all times during the pendency of the claim or lawsuit, including, without limitation, providing one another with all available information concerning the claim.

- 21.10. **Self-Insured Waiver:** TMBH-ASO may waive the requirements as described in the Commercial General Liability Insurance, Professional Liability Insurance, Insurers and Evidence of Coverage Provisions of this Section if the CONTRACTOR is self-insured. In the event the CONTRACTOR is self-insured, the CONTRACTOR must send to TMBH-ASO by the third Wednesday of January in each Contract year, a signed written document, which certifies that the CONTRACTOR is self-insured, carries coverage adequate to meet the requirements of this Section, shall treat TMBH-ASO as an additional insured, expressly for, and limited to, the CONTRACTOR's services provided under this Contract, and provides a point of contact for TMBH-ASO.

22. MERGERS AND ACQUISITIONS

- 22.1. If the CONTRACTOR is involved in an acquisition of assets or merger with another TMBH-ASO CONTRACTOR after the effective date of this Contract, TMBH-ASO reserves the right, to the extent permitted by law, to require that each CONTRACTOR maintain its separate business lines for the remainder of the Contract period. The CONTRACTOR does not have an automatic right to a continuation of the Contract after any such acquisition of assets or merger.

23. NONDISCRIMINATION

- 23.1. The CONTRACTOR, or any approved subcontractors shall not discriminate on the bases enumerated in RCW 49.60.530(3); Title VII of the Civil Rights Act, 42 U.S.C. §12101 et seq.; the Americans with Disabilities

Act of 1990 (ADA), 42 U.S.C. §12101 et seq., and 28 C.F.R. Part 35.

- 23.2. The CONTRACTOR, including any subcontractor, shall give written notice of this nondiscrimination requirement to any labor organizations with which the Contractor, or subcontractor, has a collective bargaining or other agreement.
- 23.3. Obligation to Cooperate. The CONTRACTOR, including any subcontractor, shall cooperate and comply with any Washington State agency or federal agency investigation regarding any allegation that the CONTRACTOR, including any Subcontractor, has engaged in discrimination prohibited by this Contract.
- 23.4. Suspension and Termination. Notwithstanding any provision in this Contract to the contrary, HCA and TMBH-ASO may suspend the CONTRACTOR, including any subcontractor, upon written notice from HCA of a failure to participate and cooperate with any state or federal agency investigation into alleged discrimination prohibited by this Contract.
- 23.5. Any such suspension will remain in place until HCA and TMBH-ASO determines that the Contractor, including any subcontractor, is cooperating with the investigating agency.
- 23.6. If the Contractor, or subcontractor, is determined by HCA and TMBH-ASO to have engaged in discrimination under any of the provisions identified in this Section, HCA and TMBH-ASO may terminate this Contract in whole or in part, and the Contractor, Subcontractor, or both, may be referred for debarment as provided in RCW 39.26.200. HCA and TMBH-ASO, in its sole discretion, may give the Contractor or Subcontractor a reasonable time in which to cure the noncompliance, including implementing conditions consistent with any court order or settlement agreement.
- 23.7. Damages. Notwithstanding any provision in this Contract to the contrary, in the event of Contract termination or suspension for engaging in discrimination, the Contractor, subcontractor, or both, shall be liable for damages as authorized by law.
- 23.8. Any such damages are distinct from any penalties imposed under chapter 49.60 RCW or applicable law or provision of this Contract.
- 23.9.

24. NON-WAIVER OF RIGHTS

- 24.1. The parties agree that the excuse or forgiveness of performance, or waiver of any provision(s) of this Contract does not constitute a waiver of such provision(s) or future performance or prejudice the right of the waiving party to enforce any of the provisions of this Contract at a later time.

25. NOTICES

- 25.1. If either one party is required to give notice to the other under this Contract, it shall be deemed given if sent via email with the “delivery receipt” and/or “read receipt” feature enabled, or sent by a recognized United States Postal Service. If notice is sent by email, the receiving party must confirm receipt by accepting the “read receipt” notice.

- 25.1.1. In the case of notice from TMBH-ASO to the CONTRACTOR, notice will be sent to:

City of Shelton
Mark Ziegler, City Manager
525 West Cota Street
Shelton WA 98584
Or mark.ziegler@shelton.wa.gov

- 25.1.2. In the case of notice from the Contractor to TMBH-ASO, notice will be sent to:

TMBH-ASO Contracts Department
670 Woodland Square Loop SE Suite 301
Lacey WA 98503
Or contracts@tmbho.org

- 25.2. Notices delivered through the United States Postal Service will be effective on the date delivered as evidenced by the return receipt. Notices delivered by email to contracts@tmbho.org, will be deemed to have been received when the recipient acknowledges, by email reply, having received that email.
- 25.3. Either party may, at any time, change its mailing address or email address for notification purposes by sending a notice in accord with this Section, stating the change and setting forth the new address, which shall be effective on the tenth (10th) day following the effective date of such notice unless a later date is specified.

26. NOTIFICATION OF ORGANIZATIONAL CHANGES

- 26.1. The CONTRACTOR shall provide TMBH-ASO with sixty (60) calendar days' prior written notice of any change in the CONTRACTOR's ownership or legal status. The CONTRACTOR shall provide TMBH-ASO written notice of any changes to the CONTRACTOR's leadership including management, executive officers, and/or executive board members within five (5) business days.

27. OWNERSHIP OF MATERIAL

- 27.1. TMBH-ASO recognizes that nothing in this Contract shall give TMBH-ASO ownership rights to the systems developed or acquired by the CONTRACTOR during the performance of this Contract. The CONTRACTOR recognizes that nothing in this Contract shall give the CONTRACTOR ownership rights to the systems developed or acquired by TMBH-ASO during the performance of this Contract.
- 27.2. Both Parties agree that if either uses any materials prepared by TMBH-ASO or the CONTRACTOR for purposes other than those intended by this Contract, they do so at their sole risk and agree to hold one another harmless therefore.

28. SEVERABILITY

- 28.1. If a court of competent jurisdiction holds any part, term, or provision of this Contract to be illegal, or invalid in whole or part, the validity of the remaining provisions shall not be affected, and the parties' rights and obligations shall be construed and enforced as if the Contract did not contain the particular provision held to be invalid.
- 28.2. If any provision of this Contract is in direct conflict with any statutory provision of the State of Washington, or federal statutes, that provision which may conflict shall be deemed inoperative and null and void insofar as it may conflict and shall be deemed modified to conform to such statutory provision. Such modification will be effective on the effective date of the statutes necessitating it and will be binding on the parties even though such amendment may not have been reduced to writing and formally agreed upon and executed by the parties.
- 28.3. Should TMBH-ASO determine that the severed portions substantially alter this Contract so that the original intent and purpose of the Contract no longer exists, TMBH-ASO may, in its sole discretion, terminate this Contract.

29. SUBRECIPIENTS

- 29.1. If the CONTRACTOR is a Subrecipient of federal awards as defined by 2 CFR Part 200 and this Contract, the CONTRACTOR shall:
 - 29.1.1. Maintain records that identify, in its accounts, all federal awards received and expended and the federal programs under which they were received, by Catalog of Federal Domestic Assistance (CFDA) title and number, award number and year, name of the federal agency, and name of the pass-through entity;
 - 29.1.2. Maintain internal controls that provide reasonable assurance that the CONTRACTOR is managing federal awards in compliance with laws, regulations, and provisions of contracts or grant contracts that could have a material effect on each of its federal programs;
 - 29.1.3. Prepare appropriate financial statements, including a schedule of expenditures of federal awards;

- 29.1.4. Incorporate 2 CFR Part 200, Subpart F audit requirements into all contracts between the CONTRACTOR and its Subcontractors who are Subrecipients;
- 29.1.5. Comply with any future amendments to 2 CFR Part 200 and any successor or replacement CFR or regulation;
- 29.1.6. Comply with the applicable requirements of either 2 CFR Part 225 (OMB Circular A-87) or 2 CFR Part 230 (OMB Circular A-122), any future amendments, and any successor or replacement Circular or regulation; and
- 29.1.7. Comply with the Omnibus Crime Control and Safe streets Act of 1968, Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title II of the Americans with Disabilities Act of 1990, Title IX of the Education Amendments of 1972, The Age Discrimination Act of 1975, and The Department of Justice Non-Discrimination Regulations at 28 CFR Part 42, Subparts C, D, E, and G, and 28 CFR Parts 35 and 39. (See www.ojp.usdoj.gov/ocr/ for additional information and access to the aforementioned federal laws and regulations.)

29.2. **Single Audit Act**

- 29.2.1. If the CONTRACTOR is a Subrecipient and expends \$750,000 or more in federal awards from **all** funding sources in any fiscal year, the CONTRACTOR shall procure and pay for a single audit or a program-specific audit for that fiscal year. Upon completion of each audit, the CONTRACTOR shall:
 - 29.2.1.1. Submit to the TMBH-ASO contact person, listed on the first page of this Contract, the data collection form and reporting package specified in 2 CFR Part 200, Subpart F, reports required by the program-specific audit guide (if applicable), and a copy of any management letters issued by the auditor.
 - 29.2.1.1.1. Follow-up and develop corrective action for all audit findings, in accordance with 2 CFR Part 200, Subpart F, and prepare a "Summary Schedule of Prior Audit Findings" reporting the status of all audit findings included in the prior audit's schedule of findings and questioned costs.
- 29.2.2. Overpayments. If it is determined by TMBH-ASO, or during the course of a required audit, that the CONTRACTOR has been paid unallowable costs under any Contract, the State may require the CONTRACTOR to reimburse TMBH-ASO or the State in accordance with 2 CFR Part 200.

30. **SURVIVABILITY**

- 30.1. The terms and conditions contained in this Contract that shall survive the expiration or termination of this Contract include but are not limited to: Indemnification and Hold Harmless, Inspection Books and Records, Records, and Confidentiality. After termination of this Contract, the CONTRACTOR remains obligated to:
 - 30.1.1. Submit all reports required in this Contract per the Termination Section.
 - 30.1.2. Provide access to records required in accord with the Inspection provisions of this Section.

31. **TERMINATION**

- 31.1. TMBH-ASO may terminate this Contract for convenience in whole or in part whenever TMBH-ASO, in its sole discretion, determines that such termination is in the best interests of TMBH-ASO. TMBH-ASO may terminate this Contract upon giving ten (10) days written notice by Certified Mail to the CONTRACTOR. In that event, TMBH-ASO shall pay the CONTRACTOR for all costs incurred by the CONTRACTOR in performing the Contract up to the date of such notice. Payment shall be made in accordance with Section, Compensation and Exhibit B - Compensation of this Contract.
- 31.2. In the event that funding for this project is withdrawn, reduced or limited in any way after the effective date of this Contract, TMBH-ASO may summarily terminate this Contract notwithstanding any other

termination provision of the Contract. Termination under this paragraph shall be effective upon the date specified in the written notice of termination sent by TMBH-ASO to the CONTRACTOR. After the effective date, no charges incurred under this Contract are allowable.

- 31.3. If the CONTRACTOR breaches any of its obligations hereunder, and fails to cure the breach within ten (10) days of written notice to do so by TMBH-ASO, TMBH-ASO may terminate this Contract, in which case TMBH-ASO shall pay the CONTRACTOR only for the costs of services accepted by TMBH-ASO, in accordance with Section, Compensation and Exhibit B – Compensation of this Contract. Upon such termination, TMBH-ASO, at its discretion, may obtain performance of the work elsewhere, and the CONTRACTOR shall bear all costs and expenses incurred by TMBH-ASO in completing the work and all damage sustained by TMBH-ASO by reason of the CONTRACTOR'S breach. If, subsequent to termination, it is determined for any reason that (1) the CONTRACTOR was not in default, or (2) the CONTRACTOR'S failure to perform was not its fault or its subcontractor's fault or negligence, the termination shall be deemed to be a termination under subsection a of this Section.

31.4. Termination Procedure

- 31.4.1. The following provisions shall survive and be binding on the parties in the event this Contract is terminated in whole or in part:
- 31.4.1.1. Each party shall be responsible only for its performance in accordance with the terms of this Contract rendered prior to the effective date of termination. The CONTRACTOR shall assist in the orderly transfer/transition of the service recipients served under this Contract. The CONTRACTOR shall promptly supply all information necessary for the reimbursement of any outstanding claims.
 - 31.4.1.2. The CONTRACTOR shall cease to perform any services required by the Contract as of the effective date of termination and shall comply with all of the instructions contained in the notice of termination.
 - 31.4.1.3. TMBH-ASO shall be responsible for payment only for the work authorized and provided in accordance with the terms of this Contract rendered up to the effective date of termination. TMBH-ASO shall withhold 20% of the final payment under this Contract until all final Contract deliverables, reports, data, and any mutual transition plans under this Contract are received and accepted by TMBH-ASO.
 - 31.4.1.4. The CONTRACTOR shall submit, within thirty (30) calendar days after the effective date of termination of this Contract, all financial, performance, and other reports required by this Contract.
 - 31.4.1.5. Should this Contract be terminated in part, the CONTRACTOR shall complete performance of such part of the work not terminated.
- 31.4.2. The rights and remedies of TMBH-ASO provided in this Section are in addition to any other rights and remedies available at law, in equity, or under this Contract.

32. WAIVER

- 32.1. Waiver of any breach or default on any occasion shall not be deemed to be a waiver of any subsequent breach or default. Any waiver shall not be construed to be a modification of the terms and conditions of this Contract. Only the Governing Board of TMBH-ASO or its designee has the authority to waive any term or condition of this Contract, as approved by legal counsel, on behalf of TMBH-ASO.



City of Shelton

Exhibit A: Scope of Work

1. SERVICES PROVIDED BY THE CONTRACTOR

1.1. The CONTRACTOR shall perform the following services:

1.1.1. Provide Involuntary Treatment Act (ITA) services including all services required for the evaluation for involuntary detention or involuntary treatment of individuals in accordance with WAC 246-341-0912 RCW 43.20A.890, 70.02, 71.05, 71.24, 71.34, 74.08.090, 74.50. A behavioral health agency providing DCR services must meet the general requirements for crisis services in WAC 246-341-0901.

1.2. A detailed description of the services to be performed by the CONTRACTOR is set forth in the Thurston-Mason BH-ASO Non-Medicaid Crisis Services Provider Guide, attached hereto and incorporated herein by reference.

1.3. The CONTRACTOR shall complete its work in a timely manner and in accordance with the schedule agreed to by the parties.

1.4. The CONTRACTOR or SUBCONTRACTOR shall track agreed upon data, including but not limited to, weekly accomplishments and number of:

- 1.4.1. Referrals
- 1.4.2. Follow Ups
- 1.4.3. Law Enforcement Referrals
- 1.4.4. Mason General Hospital ITA Referrals
- 1.4.5. Mason General Hospital Voluntary Referrals
- 1.4.6. Mason County Jail Referrals
- 1.4.7. Community Referrals (CLL, family, etc.)
- 1.4.8. Contact Made
- 1.4.9. Attempted
- 1.4.10. ITA Investigations
- 1.4.11. Crisis Investigations
- 1.4.12. Detained
- 1.4.13. Not Detained
- 1.4.14. No Bed Reports

2. SERVICES PROVIDED BY TMBH-ASO

2.1. In order to assist the CONTRACTOR in fulfilling its duties under this Contract, TMBH-ASO shall provide the following:

- 2.1.1. Relevant information as it exists to assist the CONTRACTOR with the performance of the CONTRACTOR'S services.
- 2.1.2. Coordination with other Consultants as necessary for the performance of the CONTRACTOR'S services.



City of Shelton

Exhibit B: Compensation

1. COMPENSATION

- 1.1. Program funding is based on the services as set forth in Exhibit A: Scope of Work in this Contract. The Contractor shall use all funds provided pursuant to this Contract, including interest earned to support only the services as described within this Contract.
- 1.2. Funding allocations are contingent upon the receipt of funds from contractual agreements between TMBH-ASO and other government agencies.
- 1.3. The Contractor shall be reimbursed for services delivered in the following manner:

City of Shelton				
Payment Period: January 1, 2025 through December 31, 2025				
Service Designation	Rate Method	Fund Source	Project Code	Not to Exceed
Co-Responder	Actual Cost	MHBG	41411	\$75,000
		SABG	41611	\$25,000
Contract Total				\$100,000

2. FEDERAL FUNDING REQUIREMENTS

- 2.1. If the Contractor has been awarded federal funding, as outlined below, the Contractor is required to report on the Schedule of Expenditures of Federal Awards (SEFA).

CFDA#	Funding Amount	Federal Award Identification Number	Federal Award Date	Indirect Cost Rate
93.959	\$12,500 January-June 2025	B08TI085843	2/16/2023	10%
93.959	\$12,500 July- December 2025	TBD	TBD	10%
93.958	\$37,500 January-June 2025	B09SM087386	3/22/2023	10%
93.958	\$37,500 July- December 2025	TBD	TBD	10%

- 2.2. If the Contractor has been awarded federal funding, the Contractor must follow the Single Audit Act requirements of the General Terms and Conditions, or any successor.

- 2.3. Block Grant funding as described below is awarded by the Department of Health and Human Services (DHHS), Catalog of Federal Domestic Assistance. Each Block Grant fund source has restrictions and may not be used for the following:

Restrictions	MHBG (CFDA #93.958)	SABG (CFDA #93.959)
Services and programs that are covered under the capitation rate for Medicaid covered services to Medicaid enrollees	X	X
Construction and/or renovation	X	X
Capital assets or the accumulation of operating reserve accounts	X	X
Equipment costs over \$5,000.00	X	X
Cash payments to consumers	X	X
State match for other federal funds	X	
Any mental health services (inpatient or outpatient)		X
Purchase or improve land – purchase, construct, or permanently improve any building or other facility or the purchase of medical equipment		X
Satisfy any requirement for the expenditure of non-Federal funds as a condition for receipt of Federal funds		X
Provide financial assistance to any entity other than public or nonprofit private entity		X
Make payments to intended recipients of health services		X
Provide individuals with hypodermic needles/syringes		X
Provide treatment services in penal or correctional institutions of the State		X

3. OTHER FUNDING SOURCES

- 3.1. The Contractor shall make all reasonable effort to collect from Third Party Insurers, when available. The Contractor shall report monthly, the total collections of third party reimbursement. The Contractor shall be able to show by individual, those clients eligible for third party benefits, including which services, amount billed by service, and amount collected.
- 3.2. The Contractor shall maintain records in such a manner to reasonably ensure that all third party resources available to clients are identified and pursued, in accordance with TMBH-ASO funds being the payer of last resort. Third party revenue received by the Contractor for TMBH-ASO funded services will be deducted from the TMBH-ASO payment for same services.
- 3.2.1. Failure to seek third party payments and complying with the requirements under *TMBH-ASO Policy 3044 Third Party* shall result in a corrective action and/or TMBH-ASO may enact Remedial Actions per Provider Guide, Section 11.1, Compliance and Oversight Monitoring, including contract termination.

4. FISCAL MANAGEMENT

- 4.1. The Contractor shall provide services in the most effective, efficient and economical manner possible to establish a prudent financial management system. This shall include, but not be limited to:
- 4.1.1. The Contractor may establish a sliding fee scale. The sliding fee scale schedule shall be posted and accessible to staff and clients and may not require payment from clients with income levels equal to or below the grant standards for the general assistance program.
- 4.1.2. In accordance with Federal and State regulations and statutes, ensuring TMBH-ASO funds are not utilized to support administrative and/or direct services to non-TMBH-ASO authorized clients.

5. ACCOUNTING AND REPORTING REQUIREMENTS

- 5.1. Except for SUD residential and withdrawal management services, the Contractor will submit service encounters through the Information System for the TMBH-ASO Invoice by the 10th of each month.
- 5.2. Funding for all programs under this Contract is only to be used to provide the services, as depicted in the Program Contract, and may not supplement any other programs or fund sources.
- 5.3. The Contractor shall have an annual audit performed by an outside CPA firm if the Contractor receives any federal funds indicated in the Compensation Section (above) and in the Provider Guide, or from any other funding sources, see the General Terms and Conditions for Single Audit requirements, or any successor.

6. BILLING PROCEDURE AND INVOICE SCHEDULE

- 6.1. Invoices must be submitted by the Contractor to TMBH-ASO by the 10th calendar day of the month to receive payment by the last calendar day of the month. Cost reports of actual expenses must be submitted with the invoice to TMBH-ASO to the following email address: Invoices@tmbho.org.
 - 6.1.1. Submit the Monthly Progress Report for SABG and MHBG as backup with the invoices.
 - 6.1.2. Federal Block Grant recipients only: The Contractor shall make a good faith effort to invoice Thurston-Mason BH-ASO for all services rendered within thirty (30) calendar days after the end of the month services were provided; or withing thirty (30) days after the funding source end date or end of the grant funding year, for FBG funding. Thurston-Mason BH-ASO must submit invoices for costs due and payable under the HCA Contract within forty-five (45) r days of the month services were provided or within forty-five (45) calendar days after the HCA Contract expiration date or after the funding source end date, except as otherwise authorized through written amendment of the HCA Contract; or (2) written notification from HCA to Thurston-Mason BH-ASO. For FBG funding delayed or supplementary invoices submitted resulting from unexpected or third-party billing issues, including inpatient billing will be reviewed and paid on a case-by-case basis. Any such potential payment is contingent upon the availability of funds.
 - 6.1.2.1.1. HCA is under no obligation to pay any delayed or supplementary invoices received past the 45-day requirement above. Late billing resulting from unexpected or third-party billing issues, including inpatient billing, will be reviewed, and paid on a case-by-case basis.
 - 6.1.2.1.1.1. Therefore, Thurston-Mason BH-ASO is unable to guarantee payment for invoices submitted outside of the allowable timeframe.
- 6.2. The contractor shall invoice for services using the specified Excel invoice form provided by TMBH-ASO.
 - 6.2.1. Invoices must be signed with an original or electronic signature and received prior to payment.
 - 6.2.2. All invoices must contain a unique invoice number in the identified field on the invoice form. No invoice number shall be repeated.
- 6.3. TMBH-ASO reserves the rights to amend, delete, or add to the invoice or reporting forms required in this Exhibit.
- 6.4. TMBH-ASO shall not release payment until the Contractor provides required reports identified in this Contract.

7. DELIVERABLES

- 7.1. A copy of the annual audit must be submitted to the TMBH-ASO upon receipt of the audit report by the Contractor, if applicable.
- 7.2. Financial Statements that include Contractor assets, liabilities, fund balances, and third-party payers when applicable, must be submitted to the TMBH-ASO upon the agency's fiscal year end or annual audit, whichever occurs first, for this contracting period. An individual financial statement for services set forth in this contract shall be itemized. Financial Statements may be sent electronically or via mail.
- 7.3. When submitting annual audit reports and financial statements, send to invoices@tmbho.org. Any information mailed to the fiscal department should be sent to:

TMBH-ASO Fiscal Department
670 Woodland Square Loop SE, Suite 301
Lacey, WA 98503
- 7.4. If receiving MHBG funds, complete the MHBG Annual Report. The annual report is due to contracts@tmbho.org by July 10th of each year.



Business Associate Agreement



OLYMPIC
HEALTH &
RECOVERY
SERVICES

☒ **Thurston Mason Behavioral Health Administrative Service Organization**
☐ **Olympic Health and Recovery Services**

THIS BUSINESS ASSOCIATE AGREEMENT (the "Agreement") is effective this 1st day of January 2025 (the "Effective Date") between Thurston-Mason Behavioral Health Administrative Service Organization ("TMBH-ASO") and/or Olympic Health and Recovery Services ("OHRS") as identified above ("Covered Entity"), and City of Shelton ("Business Associate").

RECITALS

WHEREAS, Covered Entity and Business Associate are parties entering into one or more agreements or contracts, incorporated herein by reference (the "Underlying Agreement" and collectively "Agreements") pursuant to which Business Associate will perform the services as outlined in Agreements and such services involve the use and disclosure of Individually Identifiable Health Information that is subject to protection under HIPAA and the HIPAA Rules (all as hereinafter defined); and

WHEREAS, Business Associate has created and maintains security safeguards for the protection from unlawful disclosure of Protected Health Information (as hereinafter defined); and

WHEREAS, Covered Entity and Business Associate are committed to complying with the Standards for Privacy of Individually Identifiable Health Information set forth under the HIPAA and HITECH Act and any regulations promulgated thereunder the "HIPAA Privacy Rule";

WHEREAS, this BAA, in conjunction with the HIPAA Rules, sets forth the terms and conditions pursuant to which protected health information (in any format) that is created, received, maintained, or transmitted by, the Business Associate from or on behalf of the Company, will be handled between the Business Associate and the Company and with third parties during the term of the Agreement(s) and after its termination.

NOW, THEREFORE, for and in consideration of the recitals above and the mutual covenants and conditions herein contained, Covered Entity and Business Associate enter into the following Agreement to provide a full statement of their respective responsibilities as more fully described below:

ARTICLE 1 – DEFINITIONS

Unless otherwise provided herein terms used shall have the same meaning as set forth in HIPAA and the HIPAA Rules.

- 1.1. **Agreement** means this Business Associate Agreement.
- 1.2. **Business Associate** as used in this Agreement means the Business Associate named in this Agreement and generally has the same meaning as the term "business associate" at 45 CFR § 160.103. Any reference to Business Associate in this Agreement includes Business Associate's employees, agents, officers, subcontractors, volunteers, or directors.
- 1.3. **CFR** means and refers to the Code of Federal Regulations.

- 1.4. **Covered Entity** means TMBH-ASO and/or OHRS, as specified above, which are each a Covered Entity as defined at 45 CFR § 160.103, in its conduct of covered functions by its health care components.
- 1.5. **Designated Record Set** means a group of records maintained by or for the Covered Entity that is: the medical records and billing records about Individuals maintained by or for a covered health care provider; the enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for a health plan; or used, in whole or in part, by or for the Covered Entity to make decisions about Individuals.
- 1.6. **Electronic Protected Health Information or “EPHI”** means Protected Health Information that is transmitted by electronic media or maintained in electronic media.
- 1.7. **HIPAA** means the Health Insurance Portability and Accountability Act of 1996, Pub.L. No. 104-191, as amended by the Health Information Technology for Economic and Clinical Health (HITECH) Act, enacted as Title XIII of The American Recovery and Reinvestment Act of 2009, H.R. 1, Pub.L. 111-5 (February 17, 2009), as amended or superseded, and any current and future regulations promulgated under HIPAA.
- 1.8. **HIPAA Rules** means the Privacy, Security, Enforcement, and Breach Notification Rules at 45 CFR Part 160 and Part 164, in effect or as amended.
- 1.9. **Individual** means the person who is the subject of Protected Health Information and includes a person who qualifies as a personal representative in accordance with 45 CFR § 164.502(g).
- 1.10. **Material Alteration** means any addition, deletion or change to the PHI of any subject other than the addition of indexing, coding and other administrative identifiers for the purpose of facilitating the identification or processing of such information.
- 1.11. **Privacy Rule** means the Privacy Standards at 45 CFR Part 164, Subpart E, in effect or as amended.
- 1.12. **Protected Health Information or “PHI”** means individually identifiable health information created, received, maintained or transmitted by Business Associate on behalf of a health care component of the Covered Entity that relates to the provision of health care to an Individual; the past, present, or future physical or mental health or condition of an Individual; or the past, present, or future payment for provision of health care to an Individual. 45 CFR § 160.103. PHI includes demographic information that identifies the Individual or about which there is reasonable basis to believe can be used to identify the Individual. 45 CFR § 160.103. PHI is information transmitted or held in any form or medium and includes Electronic Protected Health Information. 45 CFR § 160.103. PHI does not include education records covered by the Family Educational Rights and Privacy Act, as amended, 20USCA 1232g (a)(4)(B)(iv) or employment records held by the Covered Entity in its role as employer.
- 1.13. **Security Rule** means the Security Standards at 45 CFR Part 164, Subparts A and C, in effect or as amended.
- 1.14. **Subcontractor** as used in this Agreement means a person to whom a business associate delegates a function, activity, or service, other than in the capacity of a member of the workforce of such business associate.
- 1.15. **Underlying Agreement** means one or more agreements or contracts, incorporated herein by reference pursuant to which Business Associate will perform the services as outlined in Agreements and all accompanying documents.

ARTICLE 2 – SCOPE OF USE OF PHI

2.1. Services

- 2.1.1. Except as otherwise specified herein, the Business Associate may use PHI solely to perform its duties as set forth in the Underlying Agreement. Except as otherwise limited in this Agreement, Business Associate may use and disclose PHI for the proper management and administration of the Business Associate, to carry out the legal responsibilities of the Business Associate and to provide any data aggregation services pursuant to the Underlying Agreement.
 - 2.1.1.1. Business Associate may disclose PHI for the purposes pursuant to the Underlying Agreement only to its employees, subcontractors and agents, in accordance with Section 2.3.1.5. as directed by the Covered Entity.
 - 2.1.1.2. Except as otherwise limited in this Agreement, Business Associate may disclose PHI for the proper management and administration of the Business Associate, provided that such disclosures are required by law or Business Associate obtains reasonable assurances from the person to whom the PHI is disclosed that the PHI will remain confidential and used or further disclosed only as required by law or for the purpose for which the PHI was disclosed to the person, the person implements reasonable and appropriate security measures to protect the PHI, and the person notifies the Business Associate of any instances of which it is aware where the confidentiality of the PHI has been breached.

2.2. Breach or Misuse of PHI

Business Associate recognizes that any breach of confidentiality or misuse of information found in and/or obtained from records may result in the termination of the Underlying Agreement and this Agreement and/or legal action. Unauthorized disclosure of PHI may give rise to irreparable injury to the Individual or to the owner of such information, and the Individual or owner of such information may seek legal remedies against Business Associate.

2.3. Responsibilities of Business Associate

- 2.3.1. With regard to its use and/or disclosure of PHI, the Business Associate hereby agrees to do the following:
 - 2.3.1.1. Use or disclose PHI only to perform functions, activities, or services for, or on behalf of, Covered Entity, as expressly permitted or required by this Agreement or the Underlying Agreement or as otherwise required by applicable law. Further, Business Associate agrees that it will not use or disclose PHI in any manner that violates federal law, including but not limited to HIPAA and any regulations enacted pursuant to its provisions, or applicable provisions of Washington State law. The Business Associate agrees that it is subject to and directly responsible for full compliance with the Privacy Rule that applies to the Business Associate to the same extent as the Covered Entity.
 - 2.3.1.2. Use commercially reasonable efforts to maintain the security of the PHI and to prevent unauthorized use and/or disclosure of such PHI, including, but not limited to the following:
 - 2.3.1.3. Any physical files on location at the agency must be kept in locked cabinets. Any PHI transported must be safeguarded against

unauthorized access at all times.

- 2.3.1.4. In addition, the Business Associate agrees to implement and maintain administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of all Electronic Protected Health Information that it creates, receives, maintains, or transmits on behalf of the Covered Entity in accordance with 45 CFR Part 164, subpart C for as long as the PHI is within its possession and control, even after the termination or expiration of this Agreement. The Business Associate agrees that it is subject to and directly responsible for full compliance with the HIPAA Security Rule that applies to Business Associates, including sections 164.308, 164.310, 164.312, and 164.316 of title 45 CFR, to the same extent as the Covered Entity. Business Associate shall apply the HIPAA Minimum Necessary standard to any use or disclosure of PHI necessary to achieve the purposes of the Underlying Agreement. See 45 CFR 164.514(d)(2) through (d)(5).
- 2.3.1.5. Require all of its employees, representatives, subcontractors and agents that create, receive, maintain, or transmit PHI or use or have access to PHI under the Underlying Agreement to agree in writing to adhere to the same restrictions and conditions on the use and/or disclosure of PHI that apply herein, including the obligation to return or destroy the PHI if feasible, as provided under Sections 5.4 and 5.5 of this Agreement.
- 2.3.1.6. Promptly report to the designated privacy officer of the Covered Entity, any use and/or disclosure of the PHI that is not permitted or required by this Agreement, or any Security Incident involving Covered Entity's PHI, by telephoning the privacy officer within twenty-four (24) hours of becoming aware of it and providing a written report of the unauthorized disclosure within five (5) business days.
- 2.3.1.7. The name and contact information for the Covered Entity's privacy officer is as follows:

Contact Officer: Chris Foster

Telephone: 360.763.5798

E-mail: chris.foster@tmbho.org

Address: 670 Woodland Square Loop SE Ste 301
Lacey, WA 98503

- 2.3.1.8. Mitigate, to the extent practicable, any harmful effect that is known to Business Associate of a use or disclosure of PHI by Business Associate in violation of the requirements of this Agreement or the law.
- 2.3.1.9. Within twenty-four (24) hours of the discovery of a breach as defined at 45 CFR § 164.402, notify the Covered Entity's privacy officer of any breach of unsecured PHI and take actions as may be necessary to identify, mitigate and remediate the cause of the breach. A breach shall be treated as

discovered by the Business Associate in accordance with the terms of 45 CFR § 164.410. The notification shall include the following information which shall be updated promptly and provided to the Covered Entity as requested by the Covered Entity:

- 2.3.1.9.1. The identification of each individual whose unsecured PHI has been, or is reasonably believed by the Business Associate to have been accessed, acquired, used, or disclosed during such breach;
 - 2.3.1.9.2. A brief description of what happened, including the date of the breach and the date of the discovery of the breach, if known;
 - 2.3.1.9.3. A description of
 - 2.3.1.9.4. the types of unsecured PHI that were involved in the breach (such as whether full name, social security number, date of birth, home address, account number, diagnosis, disability code, or other types of information were involved);
 - 2.3.1.9.5. Any steps individuals should take to protect themselves from potential harm resulting from the breach;
 - 2.3.1.9.6. A brief description of what the Business Associate is doing to investigate the breach, to mitigate harm to individuals, and to protect against any further breaches;
 - 2.3.1.9.7. Contact procedures of the Business Associate for individuals to ask questions or learn additional information, which shall include a toll-free telephone number, an e-mail address, web site, or postal address; and
 - 2.3.1.9.8. Any other information required to be provided to the individual by the Covered Entity pursuant to 45 CFR § 164.404, as amended.
- 2.3.2. To the extent the Covered Entity deems warranted, the Covered Entity may provide notice or may, in its sole discretion, require Business Associate to provide notice at Business Associate's expense to any or all individuals whose unsecured PHI has been or is reasonably believed by the Business Associate to have been, accessed, acquired, used, or disclosed as a result of such breach. In such case, the Business Associate shall consult with the Covered Entity regarding appropriate steps required to notify third parties. The Business Associate shall reimburse the Covered Entity, without limitation, for all costs of investigation, dispute resolution, notification of individuals, the media, and the government, and expenses incurred in responding to any audits or other investigation relating to or arising out of a breach of unsecured PHI by the Business Associate.
- 2.3.3. Reproductive Health
- 2.3.3.1. Disclosure Restriction: The Business Associate shall not use or disclose PHI related to reproductive health care without the Covered Entity's written approval, except as required by federal law.
 - 2.3.3.2. Additional Safeguards: The Business Associate shall implement

safeguards to ensure that reproductive health care PHI is not disclosed across state lines or to unauthorized parties without explicit patient authorization or Covered Entity approval.

2.4. Covered Entity Obligations

- 2.4.1. With regard to the use and/or disclosure of PHI by the Business Associate, the Covered Entity hereby agrees to:
 - 2.4.1.1. Upon request, provide the Business Associate with a copy of the notice of privacy practices that the Covered Entity provides to Individuals pursuant to 45 CFR § 164.520, and inform the Business Associate of any changes in the form of the notice that materially affects the Business Associate's uses and disclosures of PHI under this Agreement;
 - 2.4.1.2. Inform the Business Associate of any changes in, or withdrawal of, the authorization provided to the Covered Entity by Individuals that materially affects Business Associate's ability to use and/or disclose PHI under this Agreement; and
 - 2.4.1.3. Notify the Business Associate, in writing and in a timely manner, of any restrictions on the use and/or disclosure of PHI agreed to by the Covered Entity in accordance with 45 CFR § 164.522, to the extent that such restriction materially affects Business Associate's use or disclosure of PHI under this Agreement.

ARTICLE 3 – AMENDMENT OF PHI

3.1. Amendments by Business Associate

Should Business Associate make any Material Alteration to PHI, Business Associate shall provide Covered Entity with notice of each Material Alteration to any PHI and shall promptly cooperate with Covered Entity in responding to any request made by any subject of such information to Covered Entity to inspect and/or copy such information. Business Associate shall not deny Covered Entity access to any such information if, in Covered Entity's sole discretion, such information must be made available to the subject seeking access to it. To the extent that Business Associate maintains PHI in a Designated Record Set, Business Associate agrees to make any amendment(s) to PHI in a Designated Record Set that the Covered Entity directs or agrees to pursuant to 45 CFR § 164.526 within ten (10) days of the request of Covered Entity or an Individual, and in the time and manner designated by Covered Entity.

ARTICLE 4 – AVAILABILITY, ACCOUNTING OF DISCLOSURES, AUDITS AND INSPECTIONS

4.1. Availability of PHI

To the extent Business Associate maintains PHI in a Designated Record Set, Business Associate agrees to make PHI available to Covered Entity or, as directed by Covered Entity, to an Individual, within ten (10) days of the request of the Covered Entity and in the manner designated by Covered Entity in accordance with 45 CFR § 164.524.

4.2. Accounting of Disclosures

Business Associate agrees to make available the information required for Covered Entity to provide an accounting of disclosures in accordance with 45 CFR § 164.528. Business Associate will provide such accounting of disclosures to Covered Entity as soon as possible,

but no more than ten (10) days from request by Covered Entity. Each accounting shall provide (i) the date of each disclosure; (ii) the name and address of the organization or person who received the PHI; (iii) a brief description of the PHI disclosed; and (iv) the purpose for which the PHI was disclosed, including the basis for such disclosure, or a copy of a written request for disclosure under §§ 164.502(a)(2)(ii) or 164.512.

Business Associate shall maintain a process to provide the accounting of disclosures for as long as Business Associate maintains PHI received from or on behalf of Covered Entity.

4.3. Access to Department of Health and Human Services

Business Associate shall make its facilities, internal practices, books, records, documents, electronic data and all other business information relating to the use and disclosure of PHI received from, or created or received by Business Associate on behalf of Covered Entity available to the Secretary of the Department of Health and Human Services, governmental officers and agencies for purposes of determining Covered Entity's compliance with HIPAA. Business Associate shall promptly, and in no event later than five (5) business days after a request by the Secretary, notify Covered Entity in writing of any request made by the Secretary and provide Covered Entity with copies of any documents produced in response to such request..

4.4. Access to Covered Entity

Upon written request, Business Associate agrees to make its facilities, internal practices, books, records, documents, electronic data and all other business information available to Covered Entity within five (5) business days during normal business hours so that Covered Entity can monitor compliance with this Agreement.

ARTICLE 5 – TERM AND TERMINATION

5.1. Term

This Agreement is valid as of the Effective Date and remains effective for the entire term of the Underlying Agreement, or until terminated as set forth herein.

5.2. Termination

This Agreement may be terminated by Covered Entity for convenience upon the same number of days prior written notice to the Business Associate as set out in the Underlying Agreement, otherwise upon thirty (30) days prior written notice. The notice will specify the date of termination.

5.3. Termination for Cause

Covered Entity may immediately terminate this Agreement and the Underlying Agreement without penalty if Covered Entity, in its sole discretion, determines that Business Associate has: (a) improperly used or disclosed PHI in breach of this Agreement; or (b) violated a material provision of this Agreement. Alternatively, the Covered Entity may choose to provide the Business Associate with written notice of the existence of an alleged material breach and a period of fifteen (15) days in which to cure the alleged material breach upon mutually agreeable terms. Failure to cure in the manner set forth in this paragraph is grounds for the immediate termination of this Agreement and the Underlying Agreement.

5.4. Alternative to Termination

If termination is not feasible, the Covered Entity shall report the breach to the Secretary of the Department of Health and Human Services.

5.5. Return/Destruction of PHI

Business Associate agrees that, upon termination of the Underlying Agreement, for whatever reason, it will return or destroy, in Covered Entity's sole discretion, all PHI, if feasible, received from, or created or received by it on behalf of Covered Entity which Business Associate maintains in any form, and retain no copies of such information. This provision shall apply to PHI that is in the possession of subcontractors or agents of Business Associate. An authorized representative of Business Associate shall certify in writing to Covered Entity, within five (5) days from the date of termination or other expiration of the Underlying Agreement, that all PHI has been returned or disposed of as provided above and that Business Associate no longer retains any such PHI in any form.

5.6. No Feasible Return/Destruction of PHI

If Business Associate determines that the return or destruction of PHI is not feasible, Business Associate shall notify Covered Entity of the conditions that make return or destruction infeasible. To the extent that Covered Entity agrees that the return or destruction of PHI is not feasible, Business Associate shall extend the protections of this Agreement to the PHI retained and limit further uses and disclosures to those purposes that make the return or destruction of the information infeasible. Business Associate shall remain bound by the provisions of this Agreement notwithstanding termination of the Underlying Agreement, until such time as all PHI has been returned or otherwise destroyed as provided in this section.

ARTICLE 6 – INDEMNIFICATION/INSURANCE

6.1. Defense and Indemnification

Business Associate shall defend, indemnify and hold Covered Entity harmless from and against all claims, liabilities, judgments, fines, assessments, penalties, awards or other expenses, of any kind or nature whatsoever, including, without limitation attorney's fees, expert witness fees, and costs of investigation, litigation, or dispute resolution, relating to or arising out of any use or disclosure of PHI in a manner not permitted by HIPAA or breach of this Agreement by Business Associate, its employees, officers, agents, or subcontractors.

6.2. Disclaimer

Covered Entity makes no warranty or representation that compliance by Business Associate with the Agreement or HIPAA or the HIPAA Rules will be adequate or satisfactory for Business Associate's own purposes or that any information in the possession of Business Associate or Business Associate's control, or transmitted or received by Business Associate, is or will be secure from unauthorized use or disclosure; nor shall Covered Entity be liable to Business Associate for any claim, loss or damage relating to the unauthorized use or disclosure of any information received by Business Associate from Covered Entity or from any other source. Business Associate is solely responsible for all decisions made by Business Associate regarding the safeguarding of PHI.

6.3. Insurance

Business Associate shall obtain and maintain cyber liability insurance coverage against improper uses and disclosures of PHI by Business Associate naming Covered Entity as an additional named insured. Promptly following a request by Covered Entity for the maintenance of such insurance coverage, Business Associate shall provide a certificate evidencing such insurance coverage.

ARTICLE 7 – COMPLIANCE WITH 42 CFR PART 2 REQUIREMENTS

In the event that Business Associate is also considered to be a Qualified Service Organization (“QSO”) under the federal regulations governing the Confidentiality of Substance Use Disorder Patient Records found at 42 C.F.R. Part 2 (“Part 2”), with access to PHI that is protected by Part 2, Business Associate agrees to the following:

- a) In receiving, storing, processing, or otherwise dealing with any PHI protected by Part 2 from Covered Entity, Business Associate is fully bound by the provisions of Part 2; and
- b) If necessary, Business Associate will resist in judicial proceedings any efforts to obtain access to such PHI covered by Part 2 unless such access is expressly permitted under Part 2.

ARTICLE 8 – MISCELLANEOUS

8.1. Construction

This Agreement shall be construed as broadly as necessary to implement and comply with HIPAA and the HIPAA Rules. The parties agree that any ambiguity in this Agreement shall be resolved in favor of a meaning that complies and is consistent with the HIPAA Rules.

8.2. Notice

All notices and other communications required or permitted pursuant to this Agreement shall be in writing, addressed to the party at the address set forth in the Underlying Agreement, or to such other address as either party may designate from time to time. All notices and other communications shall be mailed by registered or certified mail, return receipt requested, postage prepaid, or transmitted by hand delivery or telegram. All notices shall be effective as of the date of delivery of personal notice or on the date of receipt, whichever is applicable.

8.3. Modification of Agreement

The parties agree to take such action as is necessary to modify this Agreement to ensure consistency with amendments to and changes in the applicable federal and state laws and regulations, including, but not limited to, HIPAA and the HIPAA Rules. This Agreement shall not be waived or altered, in whole or in part, except in writing signed by the parties.

8.4. Invalid Terms

In the event that any provision of the terms and conditions are held by a court of competent jurisdiction to be invalid or unenforceable, the remainder of the provisions of this Agreement will remain in full force and effect.

8.5. Transferability

Covered Entity has entered into this Agreement in specific reliance on the expertise and qualifications of Business Associate. Consequently, Business Associate's interest under this Agreement may not be transferred or assigned or assumed by any other person, in whole or part, without the prior written consent of Covered Entity.

8.6. Governing Law and Venue

This Agreement shall be governed by and interpreted in accordance with the laws of the State of Washington in accordance with HIPAA and the HIPAA Rules without giving effect

to the conflict of laws provisions. Thurston County, Washington, shall be the sole and exclusive venue for any litigation, special proceeding or other proceeding as between the parties that may be brought under, or arise out of, this Agreement.

8.7. No Third-Party Beneficiaries

Nothing express or implied in this Agreement is intended to confer, nor anything herein shall confer, upon any person other than the parties hereto any rights, remedies, obligations or liabilities whatsoever.

8.8. Binding Effect

This Agreement shall be binding upon, and shall inure to the benefit of, the parties hereto and their respective permitted successors and assigns.

8.9. Execution

This Agreement may be executed in multiple counterparts, each of which shall constitute an original, all of which shall constitute but one agreement.

8.10. Gender and Number

The use of the masculine, feminine or neuter genders, and the use of the singular and plural, shall not be given an effect of any exclusion or limitation herein. The use of the word "person" or "party" shall mean and include any individual, trust, corporation, partnership or other entity.

8.11. Priority of Agreements

If any portion of the Agreement is inconsistent with the terms of the Underlying Agreement, the terms of this Agreement shall prevail. Except as set forth above, the remaining provisions of the Underlying Agreement are ratified in their entirety.

8.12. Survival

The obligations of Business Associate shall survive the termination of this Agreement and the Underlying Agreement.

8.13. Recitals

The preamble to this Agreement is not a mere recital of facts but consists of binding agreed upon statements that form the basis of this Agreement.

[Signature Page Follows]

IN WITNESS WHEREOF, the parties hereto have signed this Agreement effective the day and year firstabove written.

FOR BUSINESS ASSOCIATE:		FOR TMBH-ASO and/or OHRS:	
Name:	Mark Zeigler	Name:	Joe Avalos
Title:	City Manager	Title:	Executive Director
Address:	525 West Cota Street	Address:	670 Woodland Square Loop SE Ste 301
City, ST, Zip:	Shelton, WA 98584	City, ST, Zip:	Lacey WA 98503
Email:	mark.zeigler@sheltonwa.gov	Email:	Joe.avalos@tmbho.org
Phone:	360.432.5194	Phone:	360.763.5801

Signature (Authorized Representative)

Signature

Date

Date



CITY OF SHELTON COUNCIL BRIEFING REQUEST (Agenda Item F1)

Touch Date: **12/17/2024**
Brief Date: **03/04/2025**
Action Date: **03/04/2025**

Department: **Executive**
Presented By: **Mark Ziegler**

APPROVED FOR COUNCIL PACKET:

Action Requested:

ROUTE TO:

REVIEWED:

PROGRAM/PROJECT TITLE:

**Settlement Agreement – Engles
v City**

☐

Ordinance

☐ Dept. Head

☐ Finance Director

☐ Attorney

☒ City Clerk

☒ City Manager

03/27/25

ATTACHMENTS:

**- Resolution No. 1371-0225
- Settlement Agreement
- Consent Decree**

☒

Resolution

☒

Motion

☐

Other

DESCRIPTION OF THE PROGRAM/PROJECT AND BACKGROUND INFORMATION:

On October 2, 2024 the City of Shelton was served a lawsuit from the Northwest Justice Project on behalf of Ms. Engles. The alleged violation occurred on February 22, 2024 when Shelton Police Officers were asked to assist in the trespass of a tenant in a residence leased by Crossroads Housing. The City's represented attorney provided by Washington Cities Insurance Authority(WCIA) has negotiated a settlement agreement with the Northwest Justice Project that, in staff's and WCIA's opinion, is reasonable and timely to not incur further attorney fees or proceed to a trial.

The settlement agreement includes a declaratory judgement that the City of Shelton will not oppose any motion that the Plaintiff may make seeking a declaratory judgement that transitional housing is covered by the Residential Landlord Tenant Act. The settlement also includes a consent decree that the City agrees not to participate in forcible eviction or removal of tenants from a dwelling who claim to reside there without a court order.

ANALYSIS/OPTIONS/ALTERNATIVES:

N/A

BUDGET/FISCAL INFORMATION:

Legal costs are anticipated not to exceed \$3,000.

PUBLIC INFORMATION REQUIREMENTS:

Information is available from the City Clerk's office.

STAFF RECOMMENDATION/MOTION:

"I move to approve Resolution No. 1371-0225 as presented."

RESOLUTION NO. 1371-0225

**A RESOLUTION OF THE COUNCIL OF THE CITY OF SHELTON, WASHINGTON
AUTHORIZING THE CITY MANAGER TO SIGN A SETTLEMENT AGREEMENT
IN THE CASE OF ENGLS VS. CITY OF SHELTON**

WHEREAS, the City of Shelton (“the City”) was named in a suit, Engles v. City, on October 2, 2024; and

WHEREAS, the City engaged Washington Cities Insurance Authority for legal representation; and

WHEREAS, legal representation has reached a reasonable settlement with the plaintiff and provided a settlement agreement for Council review; and

WHEREAS, the City Council approves the settlement agreement; and

THEREFORE, BE IT RESOLVED by the City Council of the City of Shelton, Washington that the City Manager is authorized to sign the settlement agreement in the case of Engles v. the City of Shelton.

INTRODUCED on the 4th of March 2024 and **PASSED** by the City Council at its regular meeting on the 4th of March 2025.

ATTEST:

Mayor Onisko

City Clerk Nault

SETTLEMENT AGREEMENT

This settlement agreement (“Agreement”) is between Plaintiff Michelle Engles (“Plaintiff”) and Defendants City of Shelton, Calvin Moran, Justin Whitley, Chris Downs, and Gary Portillo (“Defendants”) (collectively “the Parties”). This agreement is a global settlement regarding the disputed claims between the Parties in the Action reference below.

RECITALS

1. Plaintiff commenced this Action (“Action”), 3:24-cv-05834-DWC, on October 2, 2024, in the U.S. District Court for the Western District of Washington, Tacoma (the “Court”), against Defendants. Plaintiff rented a home in Shelton, Washington. Plaintiff alleged that Defendants wrongfully removed her from her home on February 22, 2024, in violation of her constitutional rights and the Residential Landlord Tenant Act.
2. Defendants acknowledge their potential liability to Plaintiff for her attorneys’ fees arising from the claims set forth in the Complaint. As part of the settlement of this matter, Plaintiff agrees not to seek to collect these fees against the parties to this Agreement.
3. The Parties acknowledge that a real and immediate dispute has arisen as to their legal obligations to each other and now desire to fully and finally settle all disputes between them regarding the claims in Plaintiff’s complaint.

AGREEMENT

1. **Representations and Warranties.** The Parties, and each of them, represent and warrant that they are voluntarily entering into this Agreement as a result of arm’s-length negotiations and that, in executing this Agreement, they are relying upon their own judgment, belief and knowledge, and the advice and recommendations of their own counsel, concerning the nature, extent, and duration of their rights and claims hereunder and regarding all matters which relate in any way to the subject matter hereof. The Parties, and each of them, further represent and warrant that they have carefully read the contents of this Agreement; they have made such investigation of the facts pertaining to thereto as they deem necessary; and this Agreement is signed freely by each person executing this Agreement on behalf of each party. Each individual executing this Agreement on behalf of any other person does hereby represent and warrant to the other parties that he or she has the authority to do so.
2. **Declaratory Judgment.** Defendant City of Shelton agrees not to oppose any motion Plaintiff may make seeking a declaratory judgment that transitional housing is covered by the Residential Landlord Tenant Act.

3. **Consent Decree.** Defendant City of Shelton agrees to sign a Consent Decree, the proposed form of which is attached as Exhibit A.
4. **Payment.** Defendant City of Shelton agrees to pay Plaintiff \$75,000 within fourteen days of the Court's signing of the Consent Decree. The check shall be made out to "Northwest Justice Project in trust for Michelle Engles" and delivered to Plaintiff's attorneys at 711 Capitol Way S., #704, Olympia, WA 98501.
5. **Attorneys' Fees:** Nothing in this agreement shall be construed as a waiver of Plaintiff's claims for attorneys' fees against other defendants not party to the Agreement. Nothing in this agreement shall be construed as prohibiting or restricting Plaintiff's ability to seek her attorneys' fees against other defendants not a party to the Agreement.

6. Pending and Dismissing Litigation

6.1 *Retention of Jurisdiction.* Upon signing of this Agreement, the Parties shall submit the Consent Decree to the Court, under which the Court shall retain jurisdiction to enforce the Consent Decree's terms for its duration.

6.2 *Dismissal of Individually Named Defendants.* Upon the signing by the Court of the Consent Decree (paragraph 3), the Parties agree that this matter shall be dismissed with prejudice as to Defendants Moran, Whitley, Downs, and Portillo.

6.3 *Release and Discharge.* In consideration of the actions to be taken by the Defendants as called for by this Agreement, each party to this Agreement hereby releases and forever unconditionally and irrevocably discharges each other party to this Agreement of and from any and all claims, actions, demands, causes of action, complaints, agreements, promises (express or implied), contracts, undertakings, covenants, guarantees, grievances, damages (including, without limitation, actual, compensatory, consequential, exemplary, treble, punitive or otherwise), injunctive relief and declaratory relief, whether known or unknown, of whatsoever kind or nature that each had, now has, or hereafter can, shall, or may have related to or arising out of claims that are asserted in the Complaint.

6.4 *Agreement is Not an Admission.* It is hereby acknowledged by the parties to this Agreement that this Agreement is the compromise and accord and satisfaction as to disputed claims, and that nothing about this Agreement is to be construed as an admission of liability, wrongdoing, illegality or other default on the part of any individual or entity, by whom liability is expressly denied. The uncertainty of outcome and costs of defense of the Action is one of the reasons the Defendants are entering into this Settlement Agreement.

7. Termination of Agreement to Settle Claims

7.1 Court Rejection. If the Court declines to sign the Consent Decree as referenced in Paragraph 3 of this Agreement, the Parties to this Agreement shall negotiate in good faith to cure any deficiency identified by the Court or find another mutually agreeable resolution that preserves the Agreement. If the Parties cannot reach an agreement within a reasonable time, then any party may declare that this Agreement shall terminate.

7.2 Court Modification. If the Court issues an order in the Action modifying the Consent Decree, and if within 31 calendar days after the date of any such ruling, the Parties to this Agreement have not agreed in writing to proceed with all or part of this Agreement as modified by the Court or by the Parties, then, provided that no appeal is then pending from the ruling, this Agreement shall automatically terminate, and thereupon become null and void, on the 31st calendar day after issuance of the order referenced in this section.

7.3 Limitation of Terminations. Notwithstanding the foregoing, this Agreement shall become final and conclusive upon entry of the Consent Decree by the Court, as referenced in Paragraph 3 of this Agreement, and thereafter the parties may not terminate the Agreement once it has gone into effect.

8. Consequences of Termination. If the Agreement is terminated and rendered null and void for any reason, then the following shall occur:

8.1 Reversion of Action. The Action shall revert to its status as of the signing of the Agreement.

8.2 Releases and Terms Void. All releases given or executed pursuant to this Agreement shall be null and void and none of the terms of the Agreement shall be effective or enforceable.

9. Miscellaneous

9.1 Dispute Resolution. The Parties agree that any dispute regarding the terms, conditions, releases, enforcement, or termination of this Agreement shall be resolved through no-cost mediation provided by the Court. If mediation is unsuccessful, or if no-cost mediation is not available from the Court, then any party may seek to resolve the dispute through the Court.

9.2 Governing Law. This Agreement shall be governed by the laws of the United States and the State of Washington, with venue in the U.S. District Court for the Western District of Washington. In the event of a conflict of law regarding contractual interpretation, Washington law shall govern.

9.3 Severability. The provisions of this Agreement are not severable.

9.4 *Amendment*. Before entry of an order dismissing this litigation, this Agreement may be modified or amended only by written agreement signed by or on behalf of all Parties to this Agreement. Following entry of a dismissal order, this Agreement may be modified or amended only by written agreement signed on behalf of all Parties to this Agreement.

9.5 *Waiver*. The provisions of this Agreement may be waived only by an instrument in writing executed by the waiving party. The waiver by any party of any breach of this Agreement shall not be deemed to be or construed as a waiver of any other breach, whether prior, subsequent, or contemporaneous, of this Agreement.

9.6 *Construction*. None of the parties hereto shall be considered to be the drafter of this Agreement or any provision thereof for the purpose of any statute, case law, or rule of interpretation or construction that would or might cause the provision to be construed against the drafter thereof.

9.7 *Further Assurances*. Each of the Parties agree, without further consideration, and as part of finalizing this Agreement, that they will in good faith promptly execute and deliver such other documents and take such other actions as may be necessary to consummate the subject matter and purpose of this Agreement.

9.8 *Survival*. All representations, warranties, and covenants set forth herein shall be deemed continuing and shall survive the effective date of the settlement and entry of the Consent Decree.

9.9 *Entire Agreement*. This Agreement contains the entire agreement among the Parties to this Agreement. No agreements, representations, oral statements, understandings, or courses of conduct that are not expressly set forth in this Agreement shall be implied or will be binding on the Parties unless made in writing and signed by all of the Parties to this Agreement.

9.10 *Counterparts*. This Agreement may be executed by exchange of executed faxed or PDF signature pages, and any signature transmitted in such a manner shall be deemed an original signature. This Agreement may be executed in two or more counterparts, each of which shall be deemed to be an original, but all of which, when taken together, shall constitute one and the same instrument.

9.11 *Binding Effect*. This Agreement binds and inures to the benefit of the parties hereto, their assigns, heirs, administrators, executors, and successors-in-interest, affiliates, benefits plans, predecessors, and transferees, and their past and present officers, directors, agents, and employees.

SIGNED AND EXECUTED THIS ____ day of February, 2025.

HONORABLE DAVID W. CHRISTEL

**IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF WASHINGTON
AT TACOMA**

MICHELLE ENGLES,
Plaintiff,

v.

CROSSROADS HOUSING, INC., CITY OF
SHELTON, CALVIN MORAN, JUSTIN
WHITLEY, CHRIS DOWNS, and GARY
PORTILLO

Defendants.

No. 3:24-cv-05834-DWC

CONSENT DECREE

(Proposed)

Plaintiff and Defendant City of Shelton agree that this Court has jurisdiction over the subject matter of the claims alleged, and that by their signatures below they consent to entry of this Consent Decree. Defendant agrees that they will not oppose the entry of this Consent Decree. Defendant waives any rights that they may have to appeal from this Consent Decree.

Plaintiff Michelle Engles rented an apartment in Shelton, Washington. She alleges that her tenancy was covered under the Residential Landlord Tenant Act. This action concerned allegations by the plaintiff that Defendant City of Shelton wrongfully removed her from her home and in the process denied her of her due process rights, violated her rights to substantive due process, violated her rights to be free of warrantless search and seizure under both the United States Constitution and the Washington Constitution, wrongfully evicted her, and committed the torts of trespass and assault against her. Accordingly:

1 **The Court hereby ORDERS, ADJUGES, AND DECREES:**

2 1. This Court has jurisdiction over the parties to this Decree and jurisdiction over the
3 subject matter pursuant to 42 USC § 1983 and 28 USC §1367.

4 2. This Consent Decree is binding on Ms. Engles and on the City of Shelton and
5 their agents, employees, representatives, successors, and subsidiaries. (hereinafter, collectively,
6 “Defendant”). Pursuant to the agreement of the parties, all claims against the individual
7 defendants, Calvin Moran, Justin Whitley, Chris Downs, and Gary Portillo are dismissed with
8 prejudice.

9 3. Defendant City of Shelton is enjoined from assisting with the forcible eviction or
10 removal of tenants from a dwelling who claim an entitlement to reside there, absent a court
11 order. A dwelling is a structure or that part of a structure which is used as a home, residence, or
12 sleeping place by one person or by two or more persons maintaining a common household,
13 including but not limited to single-family residences and units of multiplexes, apartment
14 buildings, mobile homes and transitional housing..

15 4. This Order is not intended to include persons lawfully arrested for the commission
16 of a crime other than trespass, nor is this request intended to cover persons excluded from a
17 residence pursuant to a valid criminal no-contact order or civil protection order.

18 5. The terms of this Order shall be enforceable by any resident in the City of Shelton
19 demonstrating an injury by reason of a violation of this Order.

20 6. The parties to this Consent Decree agree that any person living within the city of
21 Shelton claiming an injury by a violation of this Decree is an intended third-party beneficiary of
22 this Decree.

23 7. Defendant shall incorporate the terms of this Consent Decree into the appropriate
24

1 police or city policy manual within 180 days of the entry of this Decree. No city policy, practice
2 or custom shall supersede the terms of the Decree for the extent of its duration.

3 8. Should any person be required to enforce the provisions of this Consent Decree,
4 the Court may award the prevailing party reasonable attorneys' costs or fees in the event the
5 Court finds a violation of this Consent Decree.

6 9. Defendant shall incorporate the terms of this Consent Decree into the appropriate
7 police or city policy manual within 180 days of the entry of this Decree. No city policy, practice
8 or custom shall supersede the terms of the Decree for the extent of its duration.

9 10. A person seeking to enforce this Decree may bring a motion for contempt under
10 this action. The Court may award such person his, her or their damages, costs and fees for
11 moving to enforce this decree, in addition to any other remedies available under the law.

12 11. This Consent Decree may be executed in two or more counterparts, each of which
13 shall constitute an original instrument and all of which together shall constitute one, and the
14 same, settlement. The person signing this settlement represents that they have the authority to
15 enter this settlement on behalf of the respective parties they represent and that this settlement
16 shall be binding upon the parties hereto.

17 12. The Court shall interpret enforcement of this Consent Decree consistent with
18 principles of contract interpretation and Title 59RCW.

19 13. Where any provision of this Order requires Defendant to provide any
20 documentation of compliance with this Order to Plaintiff's attorneys, Defendant shall provide
21 such documentation in electronic format via email to Plaintiff's attorneys email at
22 carrie.graf@nwjustice.org or any other email or address later provided by the Plaintiff's
23 attorneys.
24

14. The Court shall retain jurisdiction for the duration of this Consent Decree to enforce its terms. This Consent Decree shall remain in effect for a period of five (5) years unless modified or terminated by the Court for good cause shown, including but not limited to a change in the law applicable to evictions under Title 59RCW, after which time this matter shall be dismissed..

SO ORDERED, this ____ day of February 2025.

Honorable David W. Christel

**Approved for Entry;
Presented by:**

NORTHWEST JUSTICE PROJECT

Carrie Graf, WSBA #51999
Scott Crain, WSBA #37224
Tyler Graber, WSBA #46780
Attorneys for Plaintiff

Approved for Entry:

Jeffrey S. Myers, WSBA #16390,
Attorney for Defendant