

# Village of Hampshire Village Board Meeting Thursday April 2, 2020 – 7:00 PM Hampshire Village Hall – 234 S. State Street

#### **AGENDA**

- 1. Call to Order
- 2. Establish Quorum (Physical and Electronic)
- 3. Pledge of Allegiance
- 4. Citizen Comments
- 5. Approval of Minutes March 19, 2020
- 6. Village Manager's Report
  - a) A discussion regarding business regulations for food trucks and ice cream trucks in the Village of Hampshire.
  - b) A Motion to approve Ordinance 20-12 amending the Village code to authorize the Village President to declare a state of emergency and to exercise certain emergency powers.
  - c) A Motion to authorize Health & Dental Insurance Renewal
  - d) Introduction of Village of Hampshire FY 2021 budget
- 7. Village Board Committee Reports
  - a) Public Works
  - b) Business Development Commission
  - c) Finance
  - i) Accounts Payable
  - d) Public Relations
  - e) Planning/Zoning
  - f) Public Safety
  - g) Fields & Trails
  - h) Village Services
- 8. New Business
- 9. Announcements
- 10. Executive Session
- 11. Any items to be reported and acted upon by the Village Board after returning to open session
- 12. Adjournment

The Village of Hampshire, in compliance with the Americans With Disabilities Act, requests that persons with disabilities, who require certain accommodations to allow them to observe and/or participate in the meeting(s) or have questions about the accessibility of the meeting(s) or facilities, contact the Village at 847-683-2181 to allow the Village to make reasonable accommodations for these persons

# VILLAGE OF HAMPSHIRE REGULAR MEETING OF THE BOARD OF TRUSTEES MINUTES March 19, 2020

The regular meeting of the Village Board of Hampshire was called to order by Village President Jeffrey Magnussen at 7:00 p.m. in the Village of Hampshire Village Board Room, 234 S. State Street, on Thursday, March 19, 2020.

Present: Arron Kelly, Toby Koth, Christine Klein, Michael Reid

Online: Erik Robinson, Ryan Krajecki

Also Present: Village Manager Jay Hedges, Village Finance Director Lori Lyons, Village Police Chief Brian Thompson, Assistant to the Village Manager Josh Wray, Village Attorney Mark Schuster (online), and Village Engineer Brad Sanderson(online).

A quorum was established.

President Magnussen led the Pledge of Allegiance.

#### **MINUTES**

Trustee Klein moved to approve the minutes of March 5, 2020.

Seconded by Trustee Reid Motion carried by voice vote.

Ayes: Koth, Klein, Robinson, Reid, Kelly, Krajecki

Nays: None Absent: None

#### **VILLAGE ADMINISTRATOR REPORT:**

Trustee Krajecki moved to authorize a grant application to the Kane-Kendal Council of Mayors for 75% of the estimated \$455,390 in construction and engineering costs to resurface State Street from Hampshire Creek north to Allen Road.

Seconded by Trustee Koth Motion carried by roll call vote

Ayes: Klein, Robinson, Reid, Kelly, Krajecki, Koth

Nays: None Absent: None

Trustee Krajecki moved to apply for \$1.1 million of CDBG funds available to Hampshire for Street Scape program after Village staff concluded other priorities do not meet the application criteria.

Seconded by Trustee Klein Motion carried by roll call vote

Ayes: Robinson, Reid, Kelly, Krajecki, Koth, Klein

Nays: None Absent: None Trustee Reid moved to approve Ordinance 20-11; Dissolving Village of Hampshire Special Service Area No. 16, and terminating the related trust indentures by and between the Village and Wells Fargo Bank, N.A.

Seconded by Trustee Klein Motion carried by roll call vote

Ayes: Reid, Kelly, Krajecki, Koth, Klein, Robinson

Nays: None Absent: None

Trustee Klein moved to approve Resolution 20-03; Authorizing the Village President to direct Wells Fargo Bank as Trustee for the Village of Hampshire Special Service Area No. 16 to accept surrender of the outstanding special subordinated refunding obligation related thereto, to terminate all existing trust indenture agreements, and to pay out the balance of proceeds on hand.

Seconded by Trustee Krajecki Motion carried by roll call vote

Ayes: Kelly, Krajecki, Koth, Klein, Robinson, Reid

Nays: None Absent: None

#### **VILLAGE BOARD COMMITTEE REPORTS**

a. Public Works – No report

**b.** <u>Business Development</u> – BDC members have completed first segment of the Mainstreet USA education program and are continuing with the next segment.

The BDC received a report from Village staff on potential structures for a possible new committee focused on downtown development.

The Beautification subcommittee received a new application for funding from the Façade Improvement Program.

There is one vacancy on the BDC.

BDC members will be discussing potential new ordinances for property appearance enforcement through administrative adjudication at the next BDC meeting.

#### c. Finance:

Trustee Klein moved to table the Accounts Payable business until the next regular meeting of the Village Board.

Seconded by Trustee Kelly Motion carried by roll call vote

Ayes: Krajecki, Koth, Klein, Robinson, Reid, Kelly

Nays: None Absent: None

**d.** <u>Public Relations</u> – Trustee Reid acknowledged the need for better electronic meeting equipment while the COVID-19 situation continues.

- e. <u>Planning/Zoning</u> The ZBA meeting scheduled for March 24 is cancelled.
- **g.** <u>Public Safety</u> Chief Thompson reported on public safety procedures and resources during the ongoing COVID-19 situation. He also noted that testing is becoming more available, including at Sherman Hospital, but people will need to go through the procedure set by the Kane County Health Department to be eligible for testing.
- h. Fields & Trails No report
- f. <u>Village Services</u> Trustee Kelly reported that all items outside normal trash bins will be left during regular garbage pick-up until further notice. Trustee Kelly will contact other village service providers to find out about their policies during the COVID-19 situation.

The Village Hall front window will be closed until further notice. People may still utilize the drop box at the front of the building.

#### **NEW BUSINESS**

The Village Board members discussed the need for a stronger social media presence concerning COVID-19.

#### **ANNOUNCEMENTS**

Trustee Kelly reported that Whiskey Acres Distilling Co. will be making hand sanitizer to combat the shortage during the COVID-19 situation.

#### **ADJOURNMENT**

Trustee Kelly moved to adjourn the Village Board meeting at 8:01 p.m.

Seconded by Trustee Klein Motion carried by voice vote

Ayes: Koth, Klein, Robinson, Reid, Kelly, Krajecki.

Nays: None Absent: None

Village Manager Jay Hedges

#### No. 20 -

## AN ORDINANCE ADOPTING CERTAIN REGULATIONS GOVERNING THE OPERATION OF FOOD TRUCKS IN THE VILLAGE

WHEREAS, certain vendors are from time to time operating food trucks in the Village; and

WHEREAS, the Village has authority under the law to regulate places of eating in the Village, which includes the authority to license same; and;

WHEREAS, the Corporate Authorities desire at this time to adopt certain regulations governing the operation of mobile food vendors in the Village for the general health, safety and welfare of the residents of the Village.

NOW THEREFORE BE IT ORDAINED BY THE PRESIDENT AND BOARD OF TRUSTEES OF THE VILLAGE OF HAMPSHIRE, KANE COUNTY, ILLINOIS, AS FOLLOWS:

Section 1. The Hampshire Municipal Code of 1985, as amended, shall be and is hereby further amended to provide for certain regulations governing the operation of mobile food vendors in the Village, in Chapter 4: Business Regulations, Article, in words and figures, as follows:

### See Text of Regulations attached and incorporated herein as Exhibit "A"

- Section 2. Any and all ordinances, resolutions, and orders, or parts thereof, which are in conflict with the provisions of this Ordinance, to the extent of any such conflict, are hereby superseded and waived.
- Section 3. If any section, subdivision, sentence or phrase of this Ordinance is for any reason held to be void, invalid, or unconstitutional, such decision shall not affect the validity of the remaining portions of this Ordinance.
- Section 4. This Ordinance shall be in full force and effect from and after its passage, approval and publication in pamphlet form, as required by law.

ADOPTED THIS DAY OF	, 2020.
AYES:	
NAYS:	
ABSENT:	

ABSTAIN:	<del></del>
APPROVED THIS	DAY OF, 2020.
	Jeffrey R. Magnussen Village President
ATTEST:	
Linda Vasquez Village Clerk	

#### **CERTIFICATE**

nire, Kane County, Illinois.
orate Authorities of the Village rms that it shall be published in
prepared by me, and a copy of 234 South State Street in the ad continuing thereafter for not
public inspection, after the date e Clerk.
la Vasquez nge Clerk

CHAPTER 4 BUSINESS REGULATIONS

ARTICLE XIII OUTDOOR SEATING AT RESTAURANTS; MOBILE FOOD VENDORS

#### **4-13-1: LICENSE REQUIRED:**

A. It shall be unlawful for any person engaged in the business of operating a restaurant in the village to allow outdoor seating of patrons within twenty feet (20') of any village sidewalk, alley or right of way without having first obtained a license therefor.

- B. It shall be unlawful for any person to operate as a mobile food vendor within the village without having first obtained a license therefor.
- **4-13-2: APPLICATION:** Application for such license shall be made to the village clerk, on a form prescribed therefor; said application shall be accompanied by a certificate of insurance for the applicant's premises and/or vehicle, respectively.
- **4-13-3: FEE:** The fee for an annual license shall be established from time to time by the board of trustees; payable in advance; licenses shall be issued on January 1 of each year, and shall expire on December 31 of said year. The fee shall not be prorated for any such license issued at any time during said period.

#### 4-13-4: REQUIREMENTS FOR OUTDOOR SEATING LICENSE:

- A. Sidewalks. Any licensee shall at all times comply with the provisions of Chapter 9 of this code, pertaining to sidewalks in the village.
- B. Noise. The licensee shall not permit such noise as shall cause a disturbance of the peace to any adjacent or surrounding properties and uses.
- C. Hours. Outdoor seating shall not be allowed after ten o'clock (10:00) P.M. on any day.
- D. Condition. The licensee shall maintain any outdoor seating area in a clean, sanitary, and well-kept condition, free of litter, at all times; the licensee shall provide adequate receptacles for trash in the outdoor seating area.
- E. Removal. Any licensee providing outdoor seating within ten feet (10') of the property line of the premises shall at the end of business each day remove any tables, chairs, and other accessories from the outdoor area.
- F. Insurance. No such seating shall be allowed unless there is first deposited with the village clerk a certificate of insurance issued by a liability insurance company authorized to do business in the state of Illinois, naming the village as an additional insured for personal injury and property damage with limits of coverage not less than three hundred thousand dollars (\$300,000.00) per

person and one million dollars (\$1,000,000.00) per occurrence for personal injuries and one hundred thousand dollars (\$100,000.00) for property damage.

**4-13-5: EXEMPTION:** Any person engaged in the business of operating a restaurant and who provides any outdoor seating for its patrons which is located twenty feet (20') or more from any public sidewalk, alley, or right of way shall be exempt from the provisions of this article.

#### 4-13-6: REQUIREMENTS FOR MOBILE FOOD VENDOR LICENSE:

- A. Definitions. The following words and phrases shall have the meanings set forth herein:
  - 1. "Edible goods" shall mean any food prepared for immediate human consumption and shall include pre-packaged food items, pre-prepared food items, and on-site prepared food items for immediate human consumption. Edible goods shall not include food that is intended to be prepared by the purchaser prior to human consumption.
  - 2. "Mobile" means the state of being active, but not necessarily continuous movement.
  - 3. "Mobile food vendor" shall mean any person who sells edible goods from a non-stationary location upon the village roadways or sidewalks and shall include:
    - a. "Mobile food trucks," which shall mean any self-contained motorized unit selling edible goods.
    - b. "Mobile food carts," which shall mean any non-motorized unit selling edible goods.

#### B. Eligibility for License:

- 1. No such license shall be issued to or held by any person
  - a. who has provided incomplete or incorrect information,
  - b. who has violated any provision of state law or the village code,
  - c. who is not a person of good character,
  - d. who has been convicted of a felony within the past ten (10) years, or
  - e. who must register or is registered as a sex offender as required by the Sex Offender Registration Act, 730 ILCS 150;
- 2. No such license shall be issued to or held by any corporation if any officer thereof would be ineligible for a license under sub-section (B)(1) above.
- 3. No licensee shall employ any person who has been convicted of a felony within the past ten (10) years, or who must register or is registered as a sex offender as required by the Illinois Sex Offender Registration Act, 730 ILCS 150.
- 4. Every person who is a licensee, or an officer of any corporation who is a licensee; and who is employed in the operation of any mobile food vendor in the Village, shall undergo a

criminal background check, to be performed by the chief of police, or his/her designee, through the Illinois State Police, Bureau of Identification and the Federal Bureau of Investigation's database systems. A fee in an amount set from time to time by the Board of Trustees shall be paid by the applicant for license, or the person or entity holding such license, for each background investigation to be conducted.

- C. Application. Applications for a license to operate as a mobile food vendor in the Village shall be made on a form or forms provided by the Village for that purpose, and filed with the Village Clerk together with the applicable fee(s). Each application shall contain all required information, and shall be signed by the applicant, under oath, and notarized.
- D. Operators. The licensee shall submit to the Village Clerk a list of persons who will operate a mobile food truck or cart upon application for a license and at such other time as the Village Manager or his/her designated representative shall request.
- E. Conduct of operators. It shall be unlawful for any person operating a mobile food vendor truck or cart while on duty to shout or call out to prospective customers, to disturb the peace in any manner, or to drink any intoxicating liquor or alcoholic beverage.
- F. Vehicles in service. No license shall be issued to any person, firm or corporation that does not have mobile food vendor trucks or carts in service.
- G. Limit on number. The allowed number of business licenses or the number of trucks or carts permitted per licensee may be limited by ordinance.
- H. License for vehicle; inspections. No mobile food truck shall be operated unless it bears a valid, state-issued vehicle license, and no such truck shall be operated in the Village unless it is equipped with proper brakes, lights, tires, horn, muffler, rear vision mirror, and windshield wipers in good condition. It shall be the duty of the owner to furnish to the village an inspection report for each truck on an annual basis, with a certificate of safety, indicating that the truck is in a safe mechanical condition. No truck shall be operated upon the streets of the village without such safety certificate. If any such inspection indicates that the truck is not in a safe mechanical condition, it shall then be operated in the village until it has been repaired, submitted for re-testing, and a safety certificate has been issued indicating that it has no mechanical defects.
- I. Displays: Each mobile food truck or cart display the following:
  - 1. On each side, in letters readable from a distance of fifty (50) feet, the name of the licensee operating it.
  - 2. An operator's identification card, including a picture of the operator, prominently displayed upon the operator so that it is clearly visible to the customers at the point of sale.
  - 3. A copy of any required Kane County Health Department Permit.

- 4. An identifying number displayed on each side of such truck or cart, if more than one truck or cart is operated by a licensee.
- J. Operations: All mobile food vendors shall comply with the following general rules:
  - 1. The exterior of each truck and cart shall be kept in good repair to prevent the entrance of dirt, dust, insects or vermin; and each truck and cart shall be thoroughly cleaned prior to a subsequent day of operations.
  - 2. It shall be unlawful to permit waste matter, including but not limited to stale or outdated food, or decaying matter, to be present or to accumulate in or on any such truck or cart while it is in operation. If unwrapped foodstuffs are transported in any such vehicles, such goods shall be carried in a portion or compartment of the truck or cart which is screened and protected. Each truck or cart shall be equipped with an appropriate trash receptacle.
  - 3. Readily perishable foods or beverages, while in transit, shall be maintained at a temperature of not less than 35° F. and not more than 50° F. and for frozen foods at not more than 32° F. The compartments in the trucks and carts used for carrying such foods shall be so constructed, equipped and maintained as to preserve the required temperature.
  - 4. Only single service edible goods shall be sold.
  - 5. No food of any kind shall be offered for sale which is spoiled, unwholesome, or unfit for human consumption.
  - 6. No food or drink shall be offered for sale that has been adulterated by any harmful material.
  - 7. Only single service food utensils shall be used. Single service items shall be individually wrapped and kept in the clean and sanitary condition.
  - 8. All food and supplies shall be adequately stored within the mobile food truck or cart.
  - 9. All off-site food preparation shall be conducted at a licensed food facility, in strict accordance with all applicable village and county health codes and regulations.
  - 10. All food handlers shall keep themselves clean and shall wear sanitary gloves in the handling of any unpackaged food.
- K. Sales. Sales from a mobile food vendor shall be subject to the following:
  - 1. The licensee shall be permitted to sell food products from the licensed trucks or carts between the hours of 9:00 a.m. and 8:00 p.m. or dusk, whichever is earlier.
  - 2. Sale of food from mobile food trucks or carts shall be allowed only in the M-1 Restricted Industrial Zoning District, M-2 General Industrial Zoning District and M-3 Industrial

Zoning District in the Village, and shall be prohibited at all other locations; provided, sales from a mobile food vendor which offers only ice cream, frozen dairy, and/or other frozen or refrigerated products for dessert and snack purposes shall be allowed anywhere in the Village.

- 3. All sales from any roadway must be conducted from licensed trucks or carts that have come to a full stop at the curb line of the roadway upon which the sales are being made.
- 4. In no event shall the sales activities of any mobile food vendor impede vehicular or pedestrian travel.
- 5. No mobile food vendor shall conduct sales from a stationary location on any roadway or sidewalk for more than thirty (30) minutes' duration; provided, a mobile food vendor which offers for sale only ice cream, frozen dairy, and/or other frozen or refrigerated products for dessert and snack purposes only shall be stationary for no more than ten (10) minutes at any one location..
- 6. No person who operates a mobile food truck or cart shall place any food or supplies on the ground, or on tables or any other object not part of the mobile food truck or cart. No person who operates a mobile food truck or cart shall shall place tables or chairs on the ground adjacent to or in the vicinity of a truck or cart..
- 7. Any mobile food truck or cart equipped with any form of sound equipment shall not exceed limitations imposed under Section 6-3-13 of this Code, and shall not otherwise cause a disturbance of the peace to any adjacent or surrounding properties and uses. No sound shall be allowed during such times as the truck or cart are stopped.
- L. Insurance. No mobile food truck or cart shall be operated unless it is covered by a policy of insurance for liability, naming the Village as an additional insured, in amounts not less than the following: or personal injury and property damage with limits of coverage not less than three hundred thousand dollars (\$300,000.00) per person and one million dollars (\$1,000,000.00) per occurrence for personal injuries and one hundred thousand dollars (\$100,000.00) for property damage. The applicant for license shall furnish to the Village Clerk a copy of an appropriate certificate of insurance prior to the issuance of a license.
- M. Revocation: A license issued pursuant to the Chapter may be revoked by the Corporate Authorities for violation of the provisions of this Article, or for a violation of any other provision of this Code relating to the conduct of such business, the condition of the premises, the articles sold, or to the license required.
- **4-13-7: PENALTY:** Any person who violates any provision of this article shall be fined not less then one hundred dollars (\$100.00) and not more than seven hundred fifty dollars (\$750.00); and each day a violation continues shall be considered a separate violation.



#### AGENDA SUPPLEMENT

**TO:** Village President, Board of Trustees, and Village Manager

FROM: Mark Schuster / Village Attorney

**DATE:** April 2, 2020 **RE:** Food Trucks

Certain food truck vendors are operating from time to time in the Village, and the Board has requested that it have an opportunity to review regulations which might be put in place to govern the licensing of such vendors.

Although the Village currently has in place certain business licensing regulations (§4-21-1), and an ordinance governing restaurants with outdoor seating (§4-13-1), there are no specific regulations for food trucks/mobile food vendors.

Draft regulations for "mobile food vendors" are attached, which include provisions for the following:

- Requirement for licensing with the Village
- Requirement for appropriate Kane Co. Health Dept. licensing
- Registration for payment of sales taxes
- Limitations on locations
- Regulations governing operations

Note: The draft ordinance also re-states the existing regulations governing outdoor seating for restaurants.

#### Action(s) Needed

- A. Review the proposed regulations vis-à-vis accomplishing the goals of the Board.
- B. Add the regulations governing food trucks to the existing business regulations of the Village.

<sup>&</sup>lt;sup>1</sup> These licensing regulations (adopted in 2007) are not generally being enforced at this time.

#### AGENDA SUPPLEMENT

TO: President Magnussen, Village Board and Village Manager Hedges

FROM: Lori Lyons, Finance Director

FOR: April 2, 2020 Village Board Meeting

**RE:** Renewal of Employee Medical Insurance Program with Blue

Cross/Blue Shield of Illinois, Employee Dental Insurance Program

with MetLife

**Background**. On March 5, the board deferred the renewal of medical and dental insurance in favor of obtaining quotes from medical insurance carriers that might save employees and the Village money. The dental renewal presented had no increase.

**Analysis**. Staff updated the census and submitted the information to Mike Moore at Lundstrom Insurance, Hampshire's insurance broker. New quotes were obtained from United Health Care and Humana and the financial details were updated for Blue Cross Blue Shield to include new census information.

While the insurance companies do not offer the exact same policies, Mr. Moore selected the UHC and Humana policies that were most like the Village current HMO and PPO policies. The comparison documents are color coded. Anything in blue is an increased benefit, red is a reduced benefit and green is a different benefit. Both UHC and Humana are higher priced options.

**Recommendation**. Staff requests authorization to renew the medical plan with Blue Cross Blue Shield and dental insurance plan with Metlife for the 2021 fiscal year based on the renewal premiums shown in Tables attached.

#### Village of Hampshire

#### Financial Analysis: BlueCross BlueShield Medical Renewal

Renewal Date: May 1, 2020

	CURRENT	RENI	EWAL	OPTI	ON 1	
НМО	P506PSN	P50	6PSN	P5E:	1PSN	
Metallic Level:	Platinum	Plat	inum	Plati	inum	
Coinsurance (In Network):	100% in Network Only		etwork Only		twork Only	
Deductible - Individual (In/Out):	None		one	\$1,0		
	None		one	\$3,000		
Deductible - Family (In/Out):			-			
OV PCP/Specialist (In Network):	\$10/\$45		/\$45 /*	\$25/\$50		
Virtual Visit (In Network)	N/A	N/A		N/A		
Urgent Care (In Network):	\$45;Referal Required		al Required		al Required	
Emergency Room (In/Out):	\$300 then 100%		en 100%		then 80%	
OP Surgery (In Network):	\$100		.00		then 80%	
IP Admission (In Network):	\$150	\$1	.50	\$200; Dec	then <mark>80%</mark>	
OOP - Individual (In/Out):	\$1,500	\$1,	500	\$3,0	000	
OOP - Family (In/Out):	\$4,500	\$4,	500	\$9,0	000	
Rx (In Network):	\$0/\$10/\$50/\$100/\$150/\$250	\$0/\$10/\$50/\$:	100/\$150/\$250	\$0/\$10/\$50/\$2	100/\$150/\$250	
Rx Formulary:	Marketplace Drug List		ce Drug List		ce Drug List	
Network:	Blue Precision		recision		recision	
Census	Age Rates	Age Rates	Composite Rates	Age Rates	Composite Rates	
EE 3	0	7.95	\$594.28	7.50 110100	\$560.50	
EE+SP 0	Refer to	Refer to	\$1,188.56	Refer to	\$1,121.00	
	Rate Tables	Rate Tables	\$1,099.42	Rate Tables	\$1,121.00	
	nate Tables	rate rables		nate rables		
FAM <u>6</u> Covered Employees 9			\$1,693.70		\$1,597.43	
			4	·	4	
Estimated Monthly Premium	\$9,855.65	\$10,741.11	\$11,945.04	\$9,872.04	\$11,266.08	
Estimated Annual Premium	\$118,267.80	\$128,893.32	\$143,340.48	\$118,464.48	\$135,192.96	
% of increase / decrease over current		8.98%	21.20%	0.17%	14.31%	
PPO	P503PPO		ЗРРО	-	LPPO	
Metallic Level:	Platinum		inum		inum	
Coinsurance (In/Out):	80/50		/50	90/60		
Deductible - Individual (In/Out):			/\$500		\$1,000	
Deductible - Family (In/Out):	\$750/\$1,500	\$750/	\$1,500	\$1,500/\$3,000		
OV PCP/Specialist (In Network):	\$25/\$45	\$30	/\$60	\$20/\$40		
Virtual Visit (In Network)	\$25	\$.	30	\$20		
Urgent Care (In Network):		\$	60	\$75		
Emergency Room (In/Out):		\$400: Ded	then 80%	\$400; Ded then 90%		
OP Surgery (In Network):			then 80%	\$150; Ded then 90%		
IP Admission (In Network):			then 80%		I then 90%	
OOP - Individual (In/Out):		\$1,250/Unlimited			Jnlimited	
OOP - Family (In/Out):		\$3,750/Unlimited			Jnlimited	
Rx Copays (In Network):					120/\$150/\$250	
Rx Preferred Pharmacy:	\$0/\$10/\$35/\$75/\$150/\$250	\$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250			100/\$150/\$250	
			ce Drug List		ce Drug List	
Rx Formulary:	PPO	•	re Drug List PO		ce Drug List PO	
Network:					<u></u>	
Census I	Age Rates	Age Rates	Composite Rates \$889.22	Age Rates	Composite Rates \$878.60	
	Refer to	Pofor to	\$1,778.44	Poforto	\$1,757.20	
EE+SP 3		Refer to		Refer to		
EE+CH 1	Rate Tables	Rate Tables	\$1,645.06	Rate Tables	\$1,625.41	
FAM <u>4</u>	i i		\$2,534.28	i	\$2,504.01	
Covered Employees 11	620 447 57	624 240 46	640 705 46	- 	640 540 05	
Estimated Monthly Premium	\$20,117.57	\$21,248.16	\$19,785.16	\$20,994.52	\$19,548.85	
Estimated Annual Premium	\$241,410.84	\$254,977.92	\$237,421.92	\$251,934.24	\$234,586.20	
% of increase / decrease over current		5.62%	-1.65%	4.36%	-2.83%	
Estimated Combined Monthly Premium	\$29,973.22	\$31,989.27	\$31,730.20	\$30,866.56	\$30,814.93	
Estimated Combined Annual Premium	\$359,678.64	\$383,871.24	\$380,762.40	\$370,398.72	\$369,779.16	
% of increase / decrease over current Combined Pren	nium	6.73%	5.86%	2.98%	2.81%	

See 2020 Coverage Terms and Conditions

For illustration purposes only; not a contract. Refer to Contract or Benefit Booklet for a more complete description of plan benefits and exclusions.

 $This \ contains \ information \ that \ is \ privileged, \ proprietary, \ confidential \ and \ exempt \ from \ disclosure.$ 

Any dissemination, distribution or copying of this information is strictly prohibited without written consent of all parties that presented information.

#### Village of Hampshire

#### Financial Analysis: BlueCross BlueShield Medical Renewal with Humana Options

Renewal Date: May 1, 2020

	BCBS		CBS	HUMANA
	CURRENT		WAL	OPTION 1
нмо	P506PSN	P506PSN		IL NPOS20 Simplicity
Metallic Level:	Platinum		inum	Platinum
Coinsurance (In/Out):	100% in Network Only	100% In Network Only		100/50
Deductible - Individual (In/Out):	None	No	one	\$0/\$5,000
Deductible - Family (In/Out):	None	No	one	\$0/\$10,000
OV PCP/Specialist (In Network):	\$10/\$45	\$10	/\$45	\$35/\$70
Virtual Visit (In Network)	N/A		/A	\$0
Urgent Care (In Network):	\$45;Referal Required		al Required	\$100
Emergency Room (In/Out):	\$300 then 100%		en 100%	\$400
OP Surgery (In Network):	\$100		.00	\$1,000
IP Admission (In Network):	\$150		.50	\$1,000/Day 1st 3 Days
OOP - Individual (In/Out):	\$1,500	\$1,		\$3,000/\$9,000
OOP - Family (In/Out):		\$4,!		\$6,000/\$18,000
Rx (In Network):	\$0/\$10/\$50/\$100/\$150/\$250		100/\$150/\$250	\$5/\$15/\$75/\$150/\$500
Rx Formulary:	Marketplace Drug List		ce Drug List	N/A
Network:	Blue Precision		ecision	Simplicity
Census	Age Rates	Age Rates	Composite Rates	Composite Rates
EE 5	Pofor to	Dofesta	\$594.28	\$866.63 \$1,722.27
EE+SP 0   EE+CH 0	Refer to Rate Tables	Refer to Rate Tables	\$1,188.56 \$1,099.42	\$1,733.27 \$1,603.27
	Rate Tables	Rate Lables	\$1,099.42	\$1,603.27
_			\$1,093.70	\$2,469.91
Covered Employees 12 Estimated Monthly Premium	\$11,708.20	\$12,661.32	\$14,827.30	\$21,622.52
Estimated Annual Premium	\$140,498.40	\$151,935.84 \$177,927.60		\$259,470.24
% of increase / decrease over current	3140,436.40	8.14%	3177,927.60 26.64%	\$233,470.24 84.68%
PPO	P503PPO		BPPO	NPOS 20 Copay OPT 5
Metallic Level:	Platinum		num	Gold
Coinsurance (In/Out):	80/50	80,	/50	80/50
<b>Coinsurance (In/Out):</b> Deductible - Individual (In/Out):	<b>80/50</b> \$250/\$500	<b>80</b> , \$250,	<b>/50</b> /\$500	<b>80/50</b> \$1,000/\$3,000
<b>Coinsurance (In/Out):</b> Deductible - Individual (In/Out): Deductible - Family (In/Out):	80/50	<b>80</b> , \$250, \$750/	/50	80/50
<b>Coinsurance (In/Out):</b> Deductible - Individual (In/Out):	<b>80/50</b> \$250/\$500 \$750/\$1,500	<b>80</b> , \$250, \$750/ <mark>\$30</mark> ,	<b>/50</b> /\$500 \$1,500	<b>80/50</b> \$1,000/\$3,000 \$2,000/\$6,000
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):	<b>80/50</b> \$250/\$500 \$750/\$1,500 \$25/\$45	<b>80</b> , \$250, \$750/ \$30, \$:	/ <b>50</b>   /\$500   \$1,500     / <b>\$60</b>	<b>80/50</b> \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network)	<b>80/50</b> \$250/\$500 \$750/\$1,500 \$25/\$45 \$25	80, \$250, \$750/ \$30, \$, \$1 \$400; Dec	/50   /\$500   \$1,500   /\$60   80   I then 80%	<b>80/50</b> \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):	<b>80/50</b> \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80%	80, \$250, \$750/ \$30, \$; \$400; Dec \$150; Dec	/50 /\$500 \$1,500 /\$60 30 60 I then 80%	<b>80/50</b> \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$150; Ded then 80%	\$0, \$250, \$750/ \$30, \$1, \$400; Dec \$150; Dec \$200; Dec	/50 /\$500 \$1,500 /\$60 30 60 I then 80% I then 80%	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80%
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$150; Ded then 80% \$1,250/Unlimited	\$0, \$250, \$750/ \$30, \$1, \$400; Dec \$150; Dec \$200; Dec	/50 /\$500 \$1,500 /\$60 30 60 I then 80% I then 80% I then 80% Julimited	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$150; Ded then 80% \$1,250/Unlimited \$3,750/Unlimited	\$0, \$250, \$750/ \$30, \$1, \$400; Dec \$150; Dec \$200; Dec \$1,250/ \$3,750/	/50 /\$500 \$1,500 /\$60 30 60 I then 80% I then 80% I then 80% Julimited	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000
Coinsurance (In/Out): Deductible - Individual (In/Out): Deductible - Family (In/Out): OV PCP/Specialist (In Network): Virtual Visit (In Network): Urgent Care (In Network): Emergency Room (In/Out): OP Surgery (In Network): IP Admission (In Network): OOP - Individual (In/Out): OOP - Family (In/Out): Rx Copays (In Network):	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$150; Ded then 80% \$1,250/Unlimited \$3,750/Unlimited \$10/\$20/\$55/\$95/\$150/\$250	\$0, \$250, \$750/ \$30, \$1, \$400; Dec \$150; Dec \$200; Dec \$1,250/ \$3,750/ \$10/\$20/\$55/\$	/50 /\$500 \$1,500 /\$60 30 60 I then 80% I then 80% I then 80% I then 80% Unlimited Julimited Julimited	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500
Coinsurance (In/Out): Deductible - Individual (In/Out): Deductible - Family (In/Out): OV PCP/Specialist (In Network): Virtual Visit (In Network): Urgent Care (In Network): Emergency Room (In/Out): OP Surgery (In Network): IP Admission (In Network): OOP - Individual (In/Out): OOP - Family (In/Out): Rx Copays (In Network): Rx Preferred Pharmacy:	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$150; Ded then 80% \$1,250/Unlimited \$3,750/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250	\$0, \$250, \$750/ \$30, \$1,50; Dec \$150; Dec \$200; Dec \$1,250/ \$3,750/ \$10/\$20/\$55/\$	/50 /\$500 \$1,500 /\$60 30 60 I then 80% I then 80% I then 80% Unlimited Unlimited Julimited Julimited Julimited Julimited Julimited Julimited Julimited Julimited Julimited	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):  Rx Copays (In Network):  Rx Preferred Pharmacy:  Rx Formulary:	\$0/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$150; Ded then 80% \$1,250/Unlimited \$3,750/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250	\$0, \$250, \$750/ \$30, \$, \$400; Dec \$150; Dec \$200; Dec \$1,250/U \$3,750/U \$10/\$20/\$55/\$ \$0/\$10/\$35/\$	/50 /\$500 \$1,500 /\$60 80 60 I then 80% I then 80% I then 80% Unlimited Julimited 595/\$150/\$250 75/\$150/\$250	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A N/A
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):  Rx Copays (In Network):  Rx Preferred Pharmacy:  Rx Formulary:  Network:	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$150; Ded then 80% \$1,250/Unlimited \$3,750/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250 Marketplace Drug List PPO	\$0, \$250, \$750/ \$30, \$. \$400; Dec \$150; Dec \$200; Dec \$1,250/ \$3,750/ \$10/\$20/\$55/\$ \$0/\$10/\$35/\$	/50 /\$500 \$1,500 /\$60 30 60 I then 80% I then 80% I then 80% Unlimited Unlimited Unlimited 595/\$150/\$250 75/\$150/\$250 Cee Drug List	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A N/A Humana
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):  Rx Copays (In Network):  Rx Preferred Pharmacy:  Rx Formulary:  Network:  Census	\$0/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$150; Ded then 80% \$1,250/Unlimited \$3,750/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250	\$0, \$250, \$750/ \$30, \$, \$400; Dec \$150; Dec \$200; Dec \$1,250/U \$3,750/U \$10/\$20/\$55/\$ \$0/\$10/\$35/\$	/50 /\$500 \$1,500 /\$60 30 60 I then 80% I then 80% I then 80% Julimited Julimited Julimited \$95/\$150/\$250 75/\$150/\$250 The Drug List PO Composite Rates	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A N/A Humana Composite Rates
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):  Rx Copays (In Network):  Rx Preferred Pharmacy:  Rx Formulary:  Network:  Census  EE 3	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$150; Ded then 80% \$1,250/Unlimited \$3,750/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250 Marketplace Drug List PPO	\$0, \$250, \$750/ \$30, \$1, \$400; Dec \$150; Dec \$200; Dec \$1,250/ \$3,750/ \$10/\$20/\$55/\$ \$0/\$10/\$35/\$ <i>Marketplac</i>	/50 /\$500 \$1,500 /\$60 30 60 I then 80% I then 80% I then 80% Unlimited Unlimited Unlimited Unlimited Unlimited Unlimited Unlimited Unlimited Unlimited Unlimited Unlimited Unlimited Unlimited Unlimited Unlimited Unlimited S95/\$150/\$250 T5/\$150/\$250 T6 Drug List PO Composite Rates \$889.22	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A N/A Humana Composite Rates \$882.08
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):  Rx Copays (In Network):  Rx Preferred Pharmacy:  Rx Formulary:  Network:  Census  EE 3  EE+SP 3	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$150; Ded then 80% \$1,250/Unlimited \$3,750/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250 Marketplace Drug List PPO Age Rates	\$0, \$250, \$750/ \$750/ \$30, \$; \$400; Dec \$150; Dec \$200; Dec \$1,250/ \$3,750/ \$10/\$20/\$55/\$ \$0/\$10/\$35/\$ <i>Marketplac</i> PI	/50 /\$500 \$1,500 /\$60 30 60 I then 80% I then 80% I then 80% Julimited Julimit	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A N/A Humana Composite Rates \$882.08 \$1,764.16
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):  Rx Copays (In Network):  Rx Preferred Pharmacy:  Rx Formulary:  Network:  Census  EE 3  EE+SP 3  EE+CH 1	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$150; Ded then 80% \$1,250/Unlimited \$3,750/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250 Marketplace Drug List PPO	\$0, \$250, \$750/ \$30, \$1, \$400; Dec \$150; Dec \$200; Dec \$1,250/ \$3,750/ \$10/\$20/\$55/\$ \$0/\$10/\$35/\$ <i>Marketplac</i>	/50 /\$500 \$1,500 /\$60 30 60 I then 80% I then 80% I then 80% Julimited Julimit	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A N/A Humana Composite Rates \$882.08 \$1,764.16 \$1,631.85
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):  Rx Copays (In Network):  Rx Preferred Pharmacy:  Rx Formulary:  Network:  Census  EE 3  EE+SP 3  EE+CH 1  FAM 4	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$150; Ded then 80% \$1,250/Unlimited \$3,750/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250 Marketplace Drug List PPO Age Rates	\$0, \$250, \$750/ \$750/ \$30, \$; \$400; Dec \$150; Dec \$200; Dec \$1,250/ \$3,750/ \$10/\$20/\$55/\$ \$0/\$10/\$35/\$ <i>Marketplac</i> PI	/50 /\$500 \$1,500 /\$60 30 60 I then 80% I then 80% I then 80% Julimited Julimit	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A N/A Humana Composite Rates \$882.08 \$1,764.16
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):  Rx Copays (In Network):  Rx Preferred Pharmacy:  Rx Formulary:  Network:  Census  EE 3  EE+SP 3  EE+CH 1  FAM 4  Covered Employees 11	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$1,250/Unlimited \$3,750/Unlimited \$3,750/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250 Marketplace Drug List PPO Age Rates	\$0, \$250, \$750/ \$30, \$30, \$30, \$30, \$30, \$30, \$30, \$30,	/50 /\$500 \$1,500 /\$60 30 60 I then 80% I then 80% I then 80% Julimited Julimit	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A N/A Humana Composite Rates \$882.08 \$1,764.16 \$1,631.85 \$2,513.92
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):  Rx Copays (In Network):  Rx Preferred Pharmacy:  Rx Formulary:  Network:  Census  EE 3  EE+SP 3  EE+CH 1  FAM 4  Covered Employees 11  Estimated Monthly Premium	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$1,250/Unlimited \$3,750/Unlimited \$3,750/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250 Marketplace Drug List PPO  Age Rates  Refer to Rate Tables	\$0, \$250, \$750/ \$30, \$30, \$30, \$30, \$30, \$30, \$30, \$30,	/50 /\$500 \$1,500 /\$60 30 60 I then 80% I then 80% I then 80% Unlimited Julimit	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A N/A Humana Composite Rates \$882.08 \$1,764.16 \$1,631.85 \$2,513.92
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):  Rx Copays (In Network):  Rx Preferred Pharmacy:  Rx Formulary:  Network:  Census  EE 3  EE+SP 3  EE+CH 1  FAM 4  Covered Employees 11  Estimated Monthly Premium  Estimated Annual Premium	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$1,250/Unlimited \$3,750/Unlimited \$3,750/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250 Marketplace Drug List PPO Age Rates	80, \$250, \$750/ \$750/ \$30, \$30, \$30, \$30, \$30, \$30, \$30, \$30,	/50 /\$500 \$1,500 \$1,500 /\$60 30 50 I then 80% I then 80% I then 80% Jnlimited Jnlimited Jnlimited Jnlimited S95/\$150/\$250 75/\$150/\$250	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A N/A Humana Composite Rates \$882.08 \$1,764.16 \$1,631.85 \$2,513.92 \$19,626.25 \$235,515.00
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):  Rx Copays (In Network):  Rx Preferred Pharmacy:  Rx Formulary:  Network:  Census  EE 3  EE+SP 3  EE+CH 1  FAM 4  Covered Employees 11  Estimated Monthly Premium  Estimated Annual Premium  Estimated Annual Premium  8 of increase / decrease over current	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$1,250/Unlimited \$3,750/Unlimited \$1,250/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250 Marketplace Drug List PPO  Age Rates  Refer to Rate Tables	80, \$250, \$750/ \$30, \$30, \$30, \$30, \$400; Dec \$150; Dec \$200; Dec \$1,250/ \$3,750/ \$10/\$20/\$55/\$ \$0/\$10/\$35/\$ Marketplac Pl Age Rates Refer to Rate Tables	/50 /\$500 \$1,500 \$1,500 /\$60 30 50 I then 80% I then 80% I then 80% I then 80% Julimited Julimited Julimited Julimited S95/\$150/\$250 75/\$150/\$250	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A N/A Humana Composite Rates \$882.08 \$1,764.16 \$1,631.85 \$2,513.92 \$19,626.25 \$235,515.00 -2.44%
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):  Rx Copays (In Network):  Rx Preferred Pharmacy:  Rx Formulary:  Network:  Census  EE 3  EE+SP 3  EE+CH 1  FAM 4  Covered Employees 11  Estimated Monthly Premium  Estimated Annual Premium  % of increase / decrease over current  Estimated Combined Monthly Premium	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$1,250/Unlimited \$3,750/Unlimited \$3,750/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250 Marketplace Drug List PPO  Age Rates  Refer to Rate Tables  \$20,117.57 \$241,410.84	\$0, \$250, \$750/\$, \$30, \$30, \$30, \$30, \$30, \$30, \$30, \$3	/50 /\$500 \$1,500 \$1,500 /\$60 30 50 I then 80% I then 80% I then 80% Unlimited Unlimited Unlimited S95/\$150/\$250 75/\$150/\$250	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A N/A Humana Composite Rates \$882.08 \$1,764.16 \$1,631.85 \$2,513.92 \$19,626.25 \$235,515.00 -2.44%
Coinsurance (In/Out):  Deductible - Individual (In/Out):  Deductible - Family (In/Out):  OV PCP/Specialist (In Network):  Virtual Visit (In Network):  Urgent Care (In Network):  Emergency Room (In/Out):  OP Surgery (In Network):  IP Admission (In Network):  OOP - Individual (In/Out):  OOP - Family (In/Out):  Rx Copays (In Network):  Rx Preferred Pharmacy:  Rx Formulary:  Network:  Census  EE 3  EE+SP 3  EE+CH 1  FAM 4  Covered Employees 11  Estimated Monthly Premium  Estimated Annual Premium  Estimated / decrease over current	80/50 \$250/\$500 \$750/\$1,500 \$25/\$45 \$25 \$45 \$300; Ded then 80% \$100: Den then 80% \$1,250/Unlimited \$3,750/Unlimited \$1,250/Unlimited \$10/\$20/\$55/\$95/\$150/\$250 \$0/\$10/\$35/\$75/\$150/\$250 Marketplace Drug List PPO  Age Rates  Refer to Rate Tables  \$20,117.57 \$241,410.84	80, \$250, \$750/ \$30, \$30, \$30, \$30, \$400; Dec \$150; Dec \$200; Dec \$1,250/ \$3,750/ \$10/\$20/\$55/\$ \$0/\$10/\$35/\$ Marketplac Pl Age Rates Refer to Rate Tables	/50 /\$500 \$1,500 \$1,500 /\$60 30 50 I then 80% I then 80% I then 80% I then 80% Julimited Julimited Julimited Julimited S95/\$150/\$250 75/\$150/\$250	80/50 \$1,000/\$3,000 \$2,000/\$6,000 \$40/\$80 \$0 \$100 \$450 Ded then 80% Ded then 80% \$5,000/\$15,000 \$10,000/\$30,000 \$5/\$15/\$75/\$150/\$500 N/A N/A Humana Composite Rates \$882.08 \$1,764.16 \$1,631.85 \$2,513.92 \$19,626.25 \$235,515.00 -2.44%

See 2020 Coverage Terms and Conditions

For illustration purposes only; not a contract. Refer to Contract or Benefit Booklet for a more complete description of plan benefits and exclusions.

 $This \ contains \ information \ that \ is \ privileged, \ proprietary, \ confidential \ and \ exempt \ from \ disclosure.$ 

Any dissemination, distribution or copying of this information is strictly prohibited without written consent of all parties that presented information.

#### Village of Hampshire

#### Financial Analysis: BlueCross BlueShield Medical Renewal with UHC Options

Renewal Date: May 1, 2020

	BCBS		CBS	UHC
	CURRENT		EWAL	OPTION 1
LINAC				
HMO	P506PSN		6PSN	BHPD w/Rx IJ
Metallic Level:	Platinum	Platinum		Platinum
Coinsurance (In Network):	100% in Network Only	100% In Network Only		100% In Network Only
Deductible - Individual (In/Out):			one one	None None
Deductible - Family (In/Out):			/\$45	\$20/\$40
OV PCP/Specialist (In Network): Virtual Visit (In Network)			/545 /A	\$20/\$40 \$0
Urgent Care (In Network):			ral Required	\$50; Referral Required
Emergency Room (In/Out):			en 100%	\$300 then 100%
OP Surgery (In Network):			.00	100%
IP Admission (In Network):			150	100%
OOP - Individual (In/Out):		\$1,! \$1,!		\$2,000
OOP - Family (In/Out):		\$4,		\$6,000
Rx (In Network):			100/\$150/\$250	\$10/\$35/\$60
Rx Formulary:			ce Drug List	N/A
Network:	Blue Precision		recision	Navigate
Census	Age Rates	Age Rates	Composite Rates	Composite Rates
EE 5	1.50 //4/05	- Age nates	\$594.28	\$770.81
EE+SP 0	Refer to	Refer to	\$1,188.56	\$1,541.62
EE+CH 0	Rate Tables	Rate Tables	\$1,188.50	\$1,426.00
FAM <u>7</u>	nate rables	I Nate Tables	\$1,693.70	\$2,196.81
Covered Employees 12		! !	71,033.70	Ψ2,130.01
Estimated Monthly Premium	\$11,708.20	\$12,661.32	\$14,827.30	\$19,231.72
Estimated Annual Premium	\$140,498.40	\$151,935.84	\$177,927.60	\$230,780.64
% of increase / decrease over current	<b>4</b> 2 10, 1001 10	8.14%	26.64%	64.26%
PPO	P503PPO	_	3PPO	BRYG w/Rx 413
Metallic Level:	Platinum		inum	Gold
Coinsurance (In/Out):			/50	80/50
Deductible - Individual (In/Out):			/\$500	\$1,000/\$5,000
Deductible - Family (In/Out):			\$1,500	\$3,000/\$15,000
OV PCP/Specialist (In Network):		\$30	/\$60	100% First 3 Visits*
Virtual Visit (In Network)	\$25	\$	30	\$0
Urgent Care (In Network):	\$45	\$	60	100% First 2 Visits*
Emergency Room (In/Out):	\$300; Ded then 80%	\$400; Ded	then 80%	\$250; Ded then 80%
OP Surgery (In Network):	\$100: Den then 80%	\$150; Dec	then 80%	\$250; Ded then 80%
IP Admission (In Network):	\$150; Ded then 80%	\$200; Ded	then 80%	\$250; Ded then 80%
OOP - Individual (In/Out):			Jnlimited	\$5,000/\$10,000
OOP - Family (In/Out):	\$3,750/Unlimited		Jnlimited	\$14,000/\$30,000
Rx Copays (In Network):			\$95/\$150/\$250	\$15/\$50/\$100/\$125
Rx Preferred Pharmacy :	\$0/\$10/\$35/\$75/\$150/\$250		75/\$150/\$250	N/A
Rx Formulary:			ce Drug List	N/A
Network:	PPO		PO	Choice Plus
Census	Age Rates	Age Rates	Composite Rates	Composite Rates
EE 3	D. C.		\$889.22	\$710.86
EE+SP 3	Refer to	Refer to	\$1,778.44	\$1,421.72
EE+CH 1	Rate Tables	Rate Tables	\$1,645.06	\$1,315.09
FAM <u>4</u>		i	\$2,534.28	\$2,025.95
Covered Employees 11	¢20 117 57	- 	610 705 46	¢1E 01 <i>E E</i> 2
Estimated Monthly Premium	\$20,117.57	\$21,248.16	\$19,785.16	\$15,816.63
Estimated Annual Premium	\$241,410.84	\$254,977.92	\$237,421.92	\$189,799.56 -21.38%
			-1.65%	_71 22%
% of increase / decrease over current	624 025 77	5.62%		
Estimated Combined Monthly Premium	\$31,825.77	\$33,909.48	\$34,612.46	\$35,048.35
	\$381,909.24			

See 2020 Coverage Terms and Conditions

For illustration purposes only; not a contract. Refer to Contract or Benefit Booklet for a more complete description of plan benefits and exclusions.

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<sup>\*</sup>Subsequent visits subject to deductible/coinsurance

## Village of Hampshire MEDICAL

#### **HMO Rate Table**

	Total Monthly Health		Total Monthly Health		Total Monthly Health		Total Monthly Health		Total Monthly		Total Monthly Health
Age	Cost	Age	Cost	Age	Cost	Age	Cost	Age	Health Cost	Age	Cost
< 15	251.71	23	329.03	32	389.24	41	428.39	50	587.64	59	856.46
15	274.08	24	329.03	33	394.17	42	435.96	51	613.64	60	892.98
16	282.63	25	330.34	34	399.44	43	446.49	52	642.26	61	924.57
17	291.19	26	336.92	35	402.07	44	459.65	53	671.22	62	945.30
18	300.40	27	344.82	36	404.70	45	475.12	54	702.47	63	971.29
19	309.61	28	357.65	37	407.34	46	493.54	55	733.73	64+	987.09
20	319.16	29	368.18	38	409.97	47	514.27	56	767.62		
21	329.03	30	373.45	39	415.23	48	537.96	57	801.84		
22	329.03	31	381.34	40	420.50	49	561.32	58	838.36		

#### **PPO Rate Table**

	C I GDIC										
	Total		Total		Total		Total				Total
	Monthly		Monthly		Monthly		Monthly		Total		Monthly
	Health		Health		Health		Health		Monthly		Health
Age	Cost	Age	Cost	Age	Cost	Age	Cost	Age	Health Cost	Age	Cost
< 15	376.63	23	492.32	32	582.42	41	641.01	50	879.29	59	1,281.52
15	410.11	24	492.32	33	589.80	42	652.33	51	918.18	60	1,336.17
16	422.91	25	494.29	34	597.68	43	668.08	52	961.02	61	1,383.43
17	435.71	26	504.14	35	601.62	44	687.78	53	1,004.34	62	1,414.45
18	449.49	27	515.96	36	605.56	45	710.92	54	1,051.11	63	1,453.34
19	463.28	28	535.16	37	609.50	46	738.49	55	1,097.88	64+	1,476.96
20	477.55	29	550.91	38	613.44	47	769.50	56	1,148.59		
21	492.32	30	558.79	39	621.31	48	804.95	57	1,199.79		
22	492.32	31	570.60	40	629.19	49	839.90	58	1,254.44		

Metlife Premiums	
Employee	42.32
Employee + Spouse	93.31
Employee + Child(ren)	102.84
Family	165.08

State of Illinois ) ) SS. County of Kane )
Declaration of Local State of Emergency In the Village of Hampshire, Kane County, Illinois
Pursuant to the authority vested in the office of Village President by the Illinois Municipal Code Section 5/11-1-6, the Illinois Emergency Management Agency Act Section 3305/11 and Ordinance No. 20 of the Village of Hampshire:
I, Jeffrey R. Magnussen, Village President of Village of Hampshire, do hereby declare that a Local State of Emergency exists in the Village as of this date, April, 2020, and shall continue until such time as allowed by law or as otherwise provided in Ordinance No. 20
This Local State of Emergency is engendered by the ongoing and world-wide pandemic of coronavirus disease (COVID-19), which pandemic threatens to affect and does affect the health, safety and welfare of the residents of the Village. In addition, the Governor of the State of Illinois has declared a state-wide State of Emergency and has put in place various measures to inhibit the spread of the virus; and additional measures may be necessary or advisable to inhibit and/or prevent the spread of the virus in the Village.
During the existence of this Local State of Emergency, the Village President and/or his designated successor shall execute such authority as is provided under the Illinois Municipal Code, the Illinois Emergency Management Agency Act, and Village Ordinance No. 20
Upon execution, this Declaration of Local State of Emergency shall be filed with the Village of Hampshire Clerk; and it shall thereafter be posted at not less than three (3) locations in the Village; and shall be posted on the website maintained by the Village.
I, Jeffrey R. Magnussen, being first duly sworn on oath, state that I have on this date signed and executed this instrument as the Declaration of Local State of Emergency for the Village of Hampshire, Kane County, Illinois, and that I executed same as my free and voluntary act for the purposes therein expressed.
Date:
Jeffrey R. Magnussen Village President Village of Hampshire
On this of, 2020, personally appeared before me the above-named Jeffrey R. Magnussen, Village President of the Village of Hampshire, and acknowledged the foregoing to be his free and voluntary act

(Seal) My Commission Expires: \_\_\_\_\_

NOTARY PUBLIC

No. 20 -

## AN ORDINANCE AMENDING THE MUNICIPAL CODE TO AUTHORIZE THE VILLAGE PRESIDENT TO DECLARE A LOCAL STATE OF EMERGENCY AND TO EXERCISE CERTAIN EMERGENCY POWERS

WHEREAS, the Village of Hampshire is an Illinois non-home rule unit of government; and

WHEREAS, the Illinois Municipal Code, 65 ILCS 5/11-1-6, provides for declaration of a state of emergency and allows for grant of extraordinary authority by the Corporate Authorities to the Village President in the event of such emergency; and

WHEREAS, the Illinois Emergency Management Agency Act, 20 ILCS 3305/11, further provides for a declaration of emergency by the principal executive officer or his or her interim emergency successor; and

WHEREAS, the Corporate Authorities of the Village desire to provide for the exercise of extraordinary powers, by executive order, during a state of emergency existing within and declared by the Village President of, the Village of Hampshire.

NOW, THEREFORE, BE IT ORDAINED BY THE PRESIDENT AND BOARD OF TRUSTEES OF THE VILLAGE OF HAMPSHIRE, KANE COUNTY, ILLINOIS, AS FOLLOWS:

Section 1. The Hampshire Municipal Code of 1985, as amended, shall be and is hereby further amended to provide as follows:

CHAPTER 1 MUNICIPAL OFFICERS AND EMPLOYEES

ARTICLE 1 VILLAGE PRESIDENT

SECTION 1-1-8 LOCAL STATE OF EMERGENCY

A. Definitions. The following words, terms and phrases, when used in this section, shall have the meanings ascribed to them in this subsection, except where the context clearly indicates a different meaning:

Emergency: (1) A riot; or an unlawful assembly characterized by the use of actual force or violence, or any threat to use force or violence made or constituted by three or more persons acting together without authority of law; or (2) Any natural disaster, epidemic, pandemic, or manmade calamity, including outbreak of disease or virus, flood, conflagration, cyclone, tornado, earthquake, or explosion, or imminent threat of any of those events within the corporate limits of the Village, resulting in or threatening the death or injury of persons, or the destruction of property, to such an extent that extraordinary

measures are deemed necessary or advisable to protect the public health, safety and welfare.

Curfew: a prohibition against any person walking, running, loitering, standing, cycling, or motoring upon any alley, street, highway, public property or vacant premises within the corporate limits of the Village, except officials of any governmental unit and persons officially designated to duty with reference to an emergency.

Village President: the duly elected or acting president of the Village, or his or her officially designated successor.

- B. Declaration of Local Emergency. Whenever in the judgment of the Village President, an emergency as defined in sub-section A of this chapter exists, the Village President is authorized to declare a Local State of Emergency. Provided, he or she shall do so by means of a written declaration, executed under oath, setting forth the facts which constitute the emergency, describing the nature of the emergency, and declaring that a Local State of Emergency exists in accordance with the definitions set forth in this section. Such declaration shall be filed with the village clerk as soon as practicable after issuance.
- C. Duration. The declaration herein authorized shall be effective for a period of up to 21 days, or until the adjournment of the next regular or special meeting of the Village Board of Trustees, whichever comes first, unless sooner terminated by a proclamation of the Village President indicating that the emergency no longer exists. The Village President shall have the power to reproclaim the existence of an emergency at the end of each 21-day period during the time said emergency exists or continues.
- D. Curfew Authorized. After proclamation of a Local State of Emergency under this section, the Village President may order a general curfew applicable to the Village as a whole, or to any such geographical areas of the Village, as he or she deems reasonable and advisable, to be applicable during such hours of the day or night as he or she deems to be necessary in the interests of public health, safety or welfare.
- E. Orders Authorized. After the proclamation of a Local State of Emergency, the Village President, in the interest of public health, safety or welfare, and to address the circumstances and/or issues caused or threatened by the emergency, may also take any or all of the following actions by executive order during the state of emergency:
  - a) Order all actions reasonably necessary to respond to the emergency;
  - b) Approve previously appropriated expenditures of the Village for the purpose of continuing the operations of the municipality; and

- c) In the event the Local State of Emergency extends beyond the current fiscal year and a new budget has not been approved, approve new spending by the Village during the existence of the Local State of Emergency.
- d) Order the closing of all retail liquor stores, including taverns and private clubs or portions thereof wherein the consumption of alcoholic liquor of any type is permitted;
- e) Order the discontinuance of the sale of alcoholic liquors by any retailer or wholesaler:
- f) Order the discontinuance of selling, distributing, or giving away gasoline or other liquid flammable or combustible products in any container other than a gasoline tank properly affixed to a motor vehicle;
- g) Order the discontinuance of selling, distributing, dispensing, or giving away of any firearms or ammunition of any character whatsoever;
- h) Order the discontinuance of selling, distributing, dispensing, or giving away of cannabis and/or cannabis-related products, except as otherwise allowed under the Compassionate
- F. Notice. Upon issuing the proclamation herein authorized, the Village Clerk shall notify the news media situated within the Village, and shall cause a copy of the proclamation declaring the existence of the emergency and any curfew to be posted at not less than three (3) locations in the Village, including at the following places within the Village: Village Hall, the police station, the US post office, and when practicable, elsewhere within the geographical area of any curfew imposed.
- G. Violations. Any person violating the provisions of this section, or the provisions of any executive order(s) issued pursuant hereto, shall be guilty of an offense against the Village and shall be subject to a fine of not less than \$25.00 and not more than \$750.00, plus court costs, for each offense. For purposes of this section, each day that an offense occurs or continues shall be considered a separate offense.
- H. Effect. Nothing contained in this section shall be construed to impair the powers set forth in this Code for the Village police department, but shall be construed together with such provisions now in effect for the safety and welfare of the citizens of the Village.
- Section 2. Any and all ordinances and resolutions, or parts thereof, in conflict with the provisions of this Ordinance are, to the extent of the conflict, are hereby superseded and waived.
- Section 3. If any section, subdivision, sentence or phrase of this Ordinance is for any reason held to be void, invalid, or unconstitutional, such decision shall not affect the validity of the remaining portions of this Ordinance, and each invalid provision or application of this Ordinance is severable.

Section 4.	This Ordinance shall be in full force and effect from and after its passage and
approval, a	s provided by law.

	ADOPTED T	HIS	_ DAY OF		_, 2020.
	AYES:				
	NAYS:				
	ABSENT:				<del></del>
	ABSTAIN:				<del></del>
	APPROVED	THIS	DAY OF _		, 2020.
				effrey R. Magnussen illage President	
ATTE	ST:				
	Vasquez e Clerk				

#### AGENDA SUPPLEMENT

**TO:** Village President and Board of Trustees, and Village Manager

FROM: Mark Schuster / Village Attorney

**DATE:** April 2, 2020

**RE:** Office of Village President / Emergency Powers

The Governor of the State of Illinois declared a State of Emergency on March 9, 2020 as a result of the coronavirus outbreak.

The Illinois Municipal Code provides that the Corporate Authorities may grant to the Village President emergency powers in the event of such emergency:

The corporate authorities of each municipality may by ordinance grant to the mayor the extraordinary power and authority to exercise, by executive order, during a state of emergency, such of the powers of the corporate authorities as may be reasonably necessary to respond to the emergency.

#### Such ordinance

- shall establish standards for the determination by the mayor of when a state of emergency exists, and
- shall provide that the mayor shall not exercise such extraordinary power and authority
  except after his signing, under oath, a statement finding that such standards have been
  met, setting forth facts to substantiate such findings, describing the nature of the
  emergency, and declaring that a state of emergency exists.

Such statement shall be filed with the clerk of the municipality as soon as practicable.

A state of emergency declared as provided in this section shall expire not later than the adjournment of the first regular meeting of the corporate authorities after the state of emergency is declared. 65 ILCS 5/11-1-6.

In particular, one emergency power which can be allowed to the Village President is to authorize expenditures during any interim between the end of the prior fiscal year and formal adoption of the next year's budget.

A draft Ordinance authorizing the Village President to exercise emergency powers is attached.

#### Action(s) Needed

A. Consider and review the draft ordinance, including the nature and scope of the emergency powers which might be allowed for the Village President.

# Preliminary Budget for Discussion

		FY 2019/20 9	FY 2019/20	FY 2019/20	FY 2020/21
		MO	PROJECTED	BUDGET	BUDGET
GENERAL FUND (C	01)				
REVENUE	·-·				
PROPERTY TAXES					
01-000-100-3011	PROPERTY TAX - CORPORATE	549,593	549,593	541,835	593,292
01-000-100-3012	PROPERTY TAX - POLICE	352,901	352,901	347,920	374,213
01-000-100-3013	PROPERTY TAX - AUDIT	19.606	19,606	19,330	20,776
01-000-100-3014	PROPERTY TAX - SOCIAL SECURITY	20,243	20,243	19,958	21,560
01-000-100-3015	PROPERTY TAX - I.M.R.F.	13,234	13,234	13,047	4,214
01-000-100-3016	PROPERTY TAX - LIABILITY	41,467	41,467	40,882	41,160
TOTAL PROPERTY TAX	ES	997,044	997,044	982,972	1,055,215
INTERGOVERNMENTA	L REVENUE				
01-000-200-3040	SALES TAX	603,335	804,447	809,000	809,000
01-000-200-3050	STATE INCOME TAX	454,205	555,139	549,263	572,433
01-000-200-3070	USE TAX	136,314	181,752	176,347	193,537
01-000-200-3090	PPR TAX	19,220	25,627	17,500	22,500
01-000-200-3107	TELECOM TAX G.F 50%	45,779	61,039	72,000	61,800
01-000-200-3108	TELECOM TAX 25% RESERV STR.	22,890	30,520	36,000	36,400
01-000-200-3109	TELECOM TAX 25% RESERV STR DBT	22,890	30,520	36,000	36,400
01-000-200-3110	UTILITY TAX-G.F.50%	93,131	124,175	131,000	124,900
01-000-200-3111	UTILITY TAX 25% RESERV. STR	46,564	62,085	65,500	62,450
01-000-200-3112	UTILITY TAX 25% RESERV.STR DBT	46,564	62,085	65,500	62,450
TOTAL INTERGOVERNI	MENTAL REVENUE	1,490,892	1,937,389	1,958,110	1,981,869
REIMBURSEABLE REVE					
01-000-400-3590	ADM SERVICE REIMB FRM REFUSE	-	71.040	71.040	71.010
01-000-400-3591	ADM SERVICE REIMB FRM WTR/SWR	35,520	71,040	71,040	71,040
01-000-400-3592	ADM SERVICE REIMB SSA LEVY	-	2,000	2,000	2,000
01-000-400-3610	REIMBURSEMENT - LEGAL	- 0.402	1,000	5,000	1,000
01-000-400-3611	REIMBURSEMENT - ENGINEERING	8,482	8,482	6,000	6,000
01-000-400-3612	REIMBURSEMENT - OTHER	169,836	169,836	180,315	180,511
TOTAL REIMBURSEABL	E KEVENUE	213,838	252,358	264,355	260,551

FV 2040 /20

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
OTHER INCOME					
01-000-500-3730	INTEREST	45,585	51,585	11,500	36,000
01-000-000-3919	TREE CONTRIBUTIONS	-	-	300	-
01-000-600-3920	MISCELLANEOUS INCOME	3,274	3,274	-	2,000
01-000-600-3921	VIDEO GAMING	84,516	112,688	101,720	109,860
01-000-600-3922	RIVERBOAT GRANT	-	-	-	-
01-000-600-3923	INSTALLMENT CONTRACT PROCEEDS	-	224,000	344,680	-
01-000-600-3924	FRANCHISE FEE/RENT	70,773	85,773	84,600	86,500
01-000-600-3925	TRANSFER FROM CAPITAL IMP FUND (28)				115,000
01-000-600-3926	TRANSFER FROM CAPITAL IMP FUND (04)	-	-	-	77,000
01-000-600-3928	POLICE CONTRIBUTIONS - EQUIPMENT	1,325	1,325	-	1,325
01-000-600-3932	TRANSFER - TRANSPORATION				151,200
01-000-600-3934	TRANSFER - PUBLIC USE		-	37,000	-
01-000-600-3937	PLACES FOR EATING	80,870	107,827	70,000	200,000
01-000-600-3936	GAIN/LOSS ON SALE OF FA/EQUIP	-	-	-	6,000
01-000-600-3940	GRANT - SAFETY PROGRAMS	-	-	1,475	2,128
01-000-600-3941	GRANT - SIDEWALK	-	-	206,000	-
TOTAL OTHER INCOM	ИЕ	286,343	586,472	857,275	787,013
LICENSES, FINES, PER	RMITS, FEES				
01-000-700-3200	LIQUOR LICENSES	22,225	22,225	24,675	24,875
01-000-700-3270	OTHER LICENSES & FEES	7,561	10,081	9,500	9,500
01-000-700-3300	BUILDING PERMITS	251,323	275,323	100,000	114,500
01-000-700-3310	BUILDING PERMIT - ADM FEE	3,949	5,265	5,500	5,500
01-000-700-3350	ZONING FEES	1,000	1,333	1,200	1,200
01-000-700-3360	TRANSITION FEE	26,634	35,512	31,000	32,000
01-000-700-3400	FINES,FEES,REPORTS	64,186	85,581	79,000	85,000
01-000-700-3410	POLICE IMPOUND FEES	18,750	25,000	24,000	25,000
01-000-700-3420	ALARM REGISTRATION & FEES	8,700	11,300	1,875	5,650
TOTAL LICENSES, FIN	ES, PERMITS, FEES	404,328	471,620	276,750	303,225
TOTAL GENERAL FUN	ID REVENUE	3,392,445	4,244,883	4,339,462	4,387,873

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
GENERAL FUND -	ADMINISTRATION (01-001)				
<b>WAGES &amp; BENEFITS</b>					
01-001-001-4000	SALARIES - FULL TIME	171,432	247,382	285,300	348,114
01-001-001-4001	SALARIES - PART TIME	-	-	-	21,840
01-001-001-4002	SALARIES - TRUSTEES	16,575	22,100	27,500	22,100
01-001-001-4006	OVERTIME	-	-	1,126	1,293
01-001-001-4010	EMPLOYER S.S.	11,429	15,338	19,470	24,386
01-001-001-4020	EMPLOYER MEDICARE	2,673	3,587	4,553	5,702
01-001-001-4030	EMPLOYER I.M.R.F.	2,100	3,332	5,731	14,658
01-001-001-4031	EMPLOYER HEALTH INS.	23,072	30,763	56,609	52,146
01-001-001-4033	EMPLOYER DENTAL INS.	121	161	3,439	2,136
01-001-001-4035	EMPLOYER LIFE INS.	198	264	625	804
01-001-001-4037	EMPLOYER VISION INS.	203	271	423	294
01-001-001-4050	UNEMPLOYMENT TAX	-	125	248	764
<b>TOTAL WAGES &amp; BEN</b>	IEFITS	227,803	323,323	405,024	494,237
01-001-002-4100	MAINTENANCE - BLDG	4,033	5,377	37,000	5,000
01-001-002-4120	MAINTENANCE - EQUIP.	59	79	750	500
01-001-002-4210	LIABILITY INSURANCE	44,774	59,699	61,850	64,735
01-001-002-4230	COMMUNICATION SERVICES	4,210	5,613	11,000	7,860
01-001-002-4280	RENTALS	326	435	750	1,000
01-001-002-4290	TRAVEL	-	-	1,000	1,000
01-001-002-4310	TRAINING	-	-	1,500	1,000
01-001-002-4320	POSTAGE	590	787	1,800	1,200
01-001-002-4340	PRINT/ADV/FORMS	2,542	3,389	10,000	3,600
01-001-002-4360	ENGINEERING SERVICES - VILLAGE	16,853	23,600	78,840	24,544
01-001-002-4361	ENGINEERING SERVICES - REIMB	3,556	4,741	3,000	-
01-001-002-4370	LEGAL SERVICES - VILLAGE	33,244	48,893	50,000	51,345
01-001-002-4371	LEGAL SERVICES - REIMB	-	-	5,000	-
01-001-002-4372	LEGAL SERVICES LABOR	<u> </u>	-	2,500	2,500
01-001-002-4375	AUDIT	22,500	30,000	29,000	35,000
01-001-002-4376	EMPLOYEE ASST PROGRAM	49	65	500	175
01-001-002-4380	OTHER PROF. SERV.	19,949	26,599	44,000	32,350
01-001-002-4382	ECONOMIC DEVELOPMENT	598	797	2,500	3,779
01-001-002-4383	VILLAGE BEAUTIFICATION	48,395	64,527	100,000	75,000

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
01-001-002-4390 01-001-002-4391 01-001-002-4400 01-001-002-4430 01-001-002-4435 01-001-002-4470 TOTAL CONTRACTUAL	BLDG INSP. SERVICES BLDG INSP. PROP. MAINT. DIAL-A-RIDE PROGRAM DUES MOSQUITO CONTROL CODIFICATION SERVICES	249,725 - 4,585 4,871 13,876 555 475,290	332,967 - 4,585 4,871 13,876 740 631,640	100,000 5,000 4,000 5,000 15,000 3,000 <b>572,990</b>	100,000 1,600 5,500 4,784 14,292 3,000 439,764
COMMODITIES 01-001-003-4260 01-001-003-4650 01-001-003-4670 01-001-003-4685 TOTAL COMMODITIES	UTILITIES OFFICE SUPPLIES MAINTENANCE SUPPLIES R&M COMPUTER SOFTWRE/LIC	- 7,483 225 8,076 <b>15,784</b>	9,977 300 8,076 <b>18,353</b>	1,200 7,500 150 8,000 16,850	10,000 600 10,480 21,080
OTHER EXPENSES 01-001-004-4690 01-001-004-4691 01-001-004-4785 01-001-004-4800 01-001-004-4910 TOTAL OTHER EXPENS	BOND REPAYMENT INTEREST BOND REPAYMENT PRINC SALES TAX INCENTIVE AGREEMENTS MISCELLANEOUS EXPENSE CONTINGENCY ES	5,688  - 33,104 2,026 2,235 43,053	- 33,104 2,701 2,980 38,785	3,063 4,900 69,000 2,000 5,000 <b>83,963</b>	77,888 2,000 5,000
CAPTIAL OUTLAY 01-001-005-4906 01-001-005-4907 01-001-005-4940 01-001-005-4941 TOTAL CAPITAL OUTLA		3,550 - - 3,550 765,480	3,550 - - 3,550 1,015,651	5,000 7,000 500 5,000 17,500	3,000 7,000 500 - 10,500

		MO	PROJECTED	BUDGET	BUDGET
<b>GENERAL FUND -</b>	POLICE (01-002)				
<b>WAGES &amp; BENEFITS</b>					
01-002-001-4000	SALARIES - FULL TIME	749,010	998,680	1,021,107	1,124,310
01-002-001-4001	SALARIES - PART TIME	39,654	52,872	63,095	62,305
01-002-001-4005	FIELD TRAINING OFFICER	1,241	6,767	5,357	6,276
01-002-001-4006	OFFICER IN CHARGE	13,790	18,387	24,855	19,469
01-002-001-4007	COURT OVERTIME	5,865	7,820	17,115	9,197
01-002-001-4008	OVERTIME	57,203	76,271	69,775	75,180
01-002-001-4009	PEDA PAYMENTS	2,535	21,546	-	-
01-002-001-4010	EMPLOYER S.S.	2,459	3,279	3,794	3,863
01-002-001-4020	EMPLOYER MEDICARE	12,313	16,417	17,419	18,805
01-002-001-4029	EMPLOYER PENSION CONTRIBUTION	275,000	277,000	275,000	300,000
01-002-001-4030	EMPLOYER I.M.R.F.	415	553	1,057	2,159
01-002-001-4031	EMPLOYER HEALTH INS.	104,260	139,013	185,520	196,330
01-002-001-4033	EMPLOYER DENTAL INS.	975	1,300	17,339	16,513
01-002-001-4035	EMPLOYER LIFE INS.	1,308	1,744	2,503	2,400
01-002-001-4037	EMPLOYER VISION INS.	1,096	1,461	1,944	1,974
01-002-001-4050	UNEMPLOYMENT TAX	65	87	979	2,122
TOTAL WAGES & BEN	EFITS	1,267,189	1,623,197	1,706,859	1,840,903
CONTRACTUAL SERVI	CES				
01-002-002-4100	MAINTENANCE - BLDG	2,851	3,801	4,000	1,000
01-002-002-4110	MAINTENANCE - VEHL.	12,008	16,011	20,000	15,000
01-002-002-4120	MAINTENANCE - EQUIP.	1,617	2,156	2,000	2,000
01-002-002-4230	COMMUNICATION SERVICES	7,814	10,419	14,300	13,380
01-002-002-4280	RENTALS	42,087	56,116	58,100	59,675
01-002-002-4285	911 SERVICES	92,979	92,979	92,979	97,628
01-002-002-4290	TRAVEL EXPENSE	-	-	1,000	500
01-002-002-4310	TRAINING	2,460	3,280	5,500	9,350
01-002-002-4320	POSTAGE	821	1,095	800	800
01-002-002-4340	PRINT/ADV/FORMS	1,974	2,632	4,300	4,300
01-002-002-4370	LEGAL SERVICES	10,870	14,493	9,000	12,000
01-002-002-4380	OTHER PROF.SERV.	4,226	5,635	14,128	14,200
01-002-002-4430	DUES	970	1,293	1,200	1,160
TOTAL CONTRACTUAL	L SERVICES	180,677	209,910	227,307	230,993

FY 2019/20 9

FY 2019/20

FY 2019/20

FY 2020/21

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
COMMODITIES 01-002-003-4650 01-002-003-4660 01-002-003-4670 01-002-003-4680 01-002-003-4690 TOTAL COMMODITIES	OFFICE SUPPLIES GASOLINE/OIL MAINTENANCE SUPPLIES OPERATING SUPPLIES UNIFORMS	2,038 25,866 263 756 10,847 39,770	2,717 34,488 351 1,008 14,463 53,027	3,000 40,000 250 5,600 16,000 <b>64,850</b>	3,000 35,000 300 4,600 16,800 <b>59,700</b>
OTHER EXPENSES 01-002-005-4940	INSTALLMENT PAYMENTS	41,928	55,904	55,583	33,774
CAPITAL OUTLAY 01-002-005-4906 01-002-005-4907 01-002-005-4930 01-002-005-4931 TOTAL CAPITAL OUTLA	EQUIPMENT TOW FUND PURCHASES VEHICLES CAPITAL OUTLAY	5,698 6,151 3,711 - 15,560	7,597 15,650 55,000 - <b>78,247</b>	8,800 6,000 44,800 2,000 <b>61,600</b>	13,400 14,890 33,988 - 62,278
TOTAL POLICE		1,545,124	2,020,285	2,116,199	2,227,648
GENERAL FUND - WAGES & BENEFITS	STREET (01-003)				
01-003-001-4000	SALARIES - FULL TIME	217,710	290,280	296,699	363,313
01-003-001-4001	SALARIES - PART TIME	5,010	6,680	-	9,000
01-003-001-4006	OVERTIME	19,379	25,839	37,838	30,300
01-003-001-4010	EMPLOYER S.S.	14,371	19,161	20,740	26,391
01-003-001-4020	EMPLOYER MEDICARE	3,354	4,472	4,561	6,172
01-003-001-4030	EMPLOYER I.M.R.F.	2,682	3,576	6,691	17,026
01-003-001-4031	EMPLOYER HEALTH INS.	58,097	77,463	75,691	118,266
01-003-001-4033	EMPLOYER DENTAL INS.	531	708	6,374	11,251
01-003-001-4035	EMPLOYER LIFE INS.	382	509	775	960
01-003-001-4037	EMPLOYER VISION INS.	530	707	639	990
01-003-001-4050	UNEMPLOYMENT TAX	89	119	372	1,042
TOTAL WAGES & BENE	EFITS	322,135	429,514	450,380	584,711

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
CONTRACTUAL SERVICE	CES				
01-003-002-4100	MAINTENANCE - BLDG	1,855	2,473	5,500	5,500
01-003-002-4110	MAINTENANCE - VEHL.	71,487	80,000	50,000	50,000
01-003-002-4120	MAINTENANCE - EQUIP.	31,316	41,755	20,000	10,000
01-003-002-4130	MAINTENANCE - STREETS	47,455	63,273	50,000	50,000
01-003-002-4140	MAINTENANCE - SIDEWALKS	-	-	10,000	5,000
01-003-002-4150	MAINTENANCE - GROUNDS	-	-	1,000	1,000
01-003-002-4160	MAINTENANCE TREE REMOVAL	25,450	33,933	20,000	25,000
01-003-002-4190	SNOW REMOVAL	9,900	13,200	55,000	25,000
01-003-002-4200	CONTRACTURAL SERVICE - SNOW	2,022	2,696	-	-
01-003-002-4210	CONTRACTURAL SERVICE TREE REPL	1,144	1,525	7,500	2,500
01-003-002-4230	COMMUNICATION SERVICES	4,385	5,847	6,500	6,500
01-003-002-4260	STREET LIGHTING	32,104	42,805	40,000	43,000
01-003-002-4270	STREET LIGHT MAINT	27,193	36,257	20,000	20,000
01-003-002-4280	RENTALS	3,689	4,919	2,500	5,000
01-003-002-4310	TRAINING	-	-	1,000	3,000
01-003-002-4340	PRINT/ADV/FORMS	-	-	-	-
01-003-002-4380	OTHER PROF.SERV.	438	6,584	2,000	2,000
01-003-002-4430	DUES	340	453	500	500
TOTAL CONTRACTUAL	SERVICES	258,778	335,720	291,500	254,000
COMMODITIES					
01-003-003-4650	OFFICE SUPPLIES	3,046	4,061	2,000	3,000
01-003-003-4660	GASOLINE/OIL	13,042	17,389	20,000	15,000
01-003-003-4670	MAINTENANCE SUPPLIES	9,083	12,111	8,000	10,000
01-003-003-4680	OPERATING SUPPLIES	26,156	34,875	20,000	20,000
01-003-003-4690	UNIFORMS	3,314	4,419	3,000	3,500
01-003-003-4700	STORM SEWER MAINTENANCE	1,541	2,055	10,000	5,000
TOTAL COMMODITIES		56,182	74,910	63,000	56,500
OTHER EXPENSES					-
01-003-004-4790	DEBT SERVICE (UT)	7,149	62,226	62,226	77,345

		FY 2019/20 9	FY 2019/20	FY 2019/20	FY 2020/21
		MO	PROJECTED	BUDGET	BUDGET
CAPITAL OUTLAY					
01-003-005-4906	EQUIPMENT			_	
01-003-005-4940	INSTALLMENT PAYMENTS	28,369	42,325	43,300	86,000
01-003-005-4945	VEHICLES	28,309	35,027	306,860	34,400
01-003-005-4951	CAPITAL OUTLAY	<u> </u>	33,027	219,660	34,400
TOTAL CAPITAL OUTL		28,369	77,352	569,820	120,400
TOTAL CAPITAL OUT	LAI	20,303	77,332	309,820	120,400
TOTAL STREET		672,613	979,722	1,436,926	1,092,956
IOIALSINLLI		072,013	373,722	1,430,320	1,032,930
GENERAL FLIND	-PLANNING COMMISSION (01-004)				
01-004-001-4000	SALARIES	430	573	1,920	925
01-004-001-4010	EMPLOYER S.S.	6	8	119	57
01-004-001-4010	EMPLOYER MEDICARE	0	8	28	13
TOTAL WAGES	EIVIPLOTER IVIEDICARE	436	581	2,067	996
TOTAL WAGES		430	201	2,007	990
	MANAGERON	426	F04	2,067	996
TOTAL PLANNING CO	DIVIDISSION	436	581	2,067	330
TOTAL PLANNING CO	INIMISSION	436	581	2,007	330
	-ZONING BOARD (01-005)	436	581	2,007	330
		520	693	1,920	1,080
GENERAL FUND	-ZONING BOARD (01-005)				
GENERAL FUND - 01-005-001-4000	-ZONING BOARD (01-005) SALARIES	520	693	1,920	1,080
GENERAL FUND - 01-005-001-4000 01-005-001-4010	-ZONING BOARD (01-005)  SALARIES EMPLOYER S.S.	520 32	693 43	1,920 119	1,080 67
GENERAL FUND - 01-005-001-4000 01-005-001-4010 01-005-001-4020 TOTAL WAGES	-ZONING BOARD (01-005)  SALARIES EMPLOYER S.S. EMPLOYER MEDICARE	520 32 8	693 43 11	1,920 119 28	1,080 67 16
GENERAL FUND - 01-005-001-4000 01-005-001-4010 01-005-001-4020 TOTAL WAGES CONTRACTUAL SERVE	-ZONING BOARD (01-005)  SALARIES EMPLOYER S.S. EMPLOYER MEDICARE	520 32 8 560	693 43 11 747	1,920 119 28 <b>2,067</b>	1,080 67 16 1,163
GENERAL FUND - 01-005-001-4000 01-005-001-4010 01-005-001-4020 TOTAL WAGES	-ZONING BOARD (01-005)  SALARIES EMPLOYER S.S. EMPLOYER MEDICARE	520 32 8	693 43 11	1,920 119 28 <b>2,067</b>	1,080 67 16
GENERAL FUND - 01-005-001-4000 01-005-001-4010 01-005-001-4020 TOTAL WAGES CONTRACTUAL SERVE	-ZONING BOARD (01-005)  SALARIES EMPLOYER S.S. EMPLOYER MEDICARE	520 32 8 560	693 43 11 747	1,920 119 28 <b>2,067</b>	1,080 67 16 1,163
GENERAL FUND - 01-005-001-4000 01-005-001-4010 01-005-001-4020 TOTAL WAGES  CONTRACTUAL SERVE 01-005-002-4380	-ZONING BOARD (01-005)  SALARIES EMPLOYER S.S. EMPLOYER MEDICARE  ICES ZONING SIGNAGE	520 32 8 560	693 43 11 747	1,920 119 28 2,067	1,080 67 16 1,163
GENERAL FUND - 01-005-001-4000 01-005-001-4010 01-005-001-4020 TOTAL WAGES CONTRACTUAL SERVE	-ZONING BOARD (01-005)  SALARIES EMPLOYER S.S. EMPLOYER MEDICARE  ICES ZONING SIGNAGE	520 32 8 560	693 43 11 747	1,920 119 28 <b>2,067</b>	1,080 67 16 1,163
GENERAL FUND - 01-005-001-4000 01-005-001-4010 01-005-001-4020 TOTAL WAGES  CONTRACTUAL SERVI 01-005-002-4380  TOTAL ZONING BOAR	-ZONING BOARD (01-005)  SALARIES EMPLOYER S.S. EMPLOYER MEDICARE  ICES ZONING SIGNAGE	520 32 8 560	693 43 11 747	1,920 119 28 2,067	1,080 67 16 1,163
GENERAL FUND - 01-005-001-4000 01-005-001-4010 01-005-001-4020 TOTAL WAGES  CONTRACTUAL SERVE 01-005-002-4380  TOTAL ZONING BOAF	-ZONING BOARD (01-005)  SALARIES EMPLOYER S.S. EMPLOYER MEDICARE  ICES ZONING SIGNAGE  -POLICE COMMISSION (01-006)	520 32 8 560	693 43 11 747	1,920 119 28 2,067 500 500	1,080 67 16 1,163
GENERAL FUND - 01-005-001-4000 01-005-001-4020 TOTAL WAGES  CONTRACTUAL SERVE 01-005-002-4380  TOTAL ZONING BOAF GENERAL FUND - 01-006-001-4000	-ZONING BOARD (01-005)  SALARIES EMPLOYER S.S. EMPLOYER MEDICARE  ICES ZONING SIGNAGE  -POLICE COMMISSION (01-006) SALARIES	520 32 8 560	693 43 11 747	1,920 119 28 2,067 500 500 2,567	1,080 67 16 1,163
GENERAL FUND - 01-005-001-4000 01-005-001-4010 01-005-001-4020 TOTAL WAGES  CONTRACTUAL SERVE 01-005-002-4380  TOTAL ZONING BOAF GENERAL FUND - 01-006-001-4000 01-006-001-4010	-ZONING BOARD (01-005)  SALARIES EMPLOYER S.S. EMPLOYER MEDICARE  ICES ZONING SIGNAGE  -POLICE COMMISSION (01-006)  SALARIES EMPLOYER S.S.	520 32 8 560 - - - 560	693 43 11 747	1,920 119 28 2,067 500 500 2,567	1,080 67 16 1,163 - - 1,163
GENERAL FUND - 01-005-001-4000 01-005-001-4010 01-005-001-4020 TOTAL WAGES  CONTRACTUAL SERVE 01-005-002-4380  TOTAL ZONING BOAF GENERAL FUND - 01-006-001-4000	-ZONING BOARD (01-005)  SALARIES EMPLOYER S.S. EMPLOYER MEDICARE  ICES ZONING SIGNAGE  -POLICE COMMISSION (01-006) SALARIES	520 32 8 560	693 43 11 747	1,920 119 28 2,067 500 500 2,567	1,080 67 16 1,163

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
CONTRACTUAL SERVICE					
01-006-002-4300	TRAVEL	<u>-</u>	-	250	250
01-006-002-4310	TRAINING	<u> </u>	-	500	500
01-006-002-4330	TESTING SERVICES	6,267	6,267	4,700	4,500
01-006-002-4340	PRINT/ADV/FORMS	-	-	550	550
01-006-002-4370	LEGAL SERVICES	645	645	2,000	2,000
01-006-002-4430	DUES	-	-	-	
TOTAL CONTRACTUAL	SERVICES	6,912	6,912	8,000	7,800
COMMODITIES					
01-006-003-4380	OPERATING SUPPLIES	-	-	50	50
TOTAL COMMODITIES		-	-	50	50
TOTAL POLICE COMMISSION		7,881	7,881	9,019	8,819
TOTAL GENERAL FUND	DEXPENSES	2,992,095	4,024,867	4,663,105	4,382,051
TOTAL GENERAL FUND	REVENUE	3,392,445	4,244,883	4,339,462	4,387,873
EXPENSES IN EXCESS O	DF REVENUE	400,350	220,016	(323,643)	5,823
EQUIPMENT REPI	LACEMENT FUND (03)				
03-000-100-3730	INTEREST INCOME	54	72	15	15
03-000-100-3920	MISC REVENUE	-	-	-	-
03-000-100-3930	TRANS FROM GENERAL FUND	-	-	-	-
TOTAL REVENUES		54	72	15	15
EXPENSES					
03-002-005-4920	HARDWARE & SOFTWARE	10,507	17,100	180,000	140,000
03-002-005-4930	CAPITAL - VEHICLES	-	-	-	-
TOTAL EXPENSES		10,507	17,100	180,000	140,000
REVENUE VERSUS EXP	ENSES	(10,453)	(17,028)	(179,985)	(139,985)

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
CAPITAL IMPROVE	EMENTS (04)				
04-000-100-3730	INTEREST	36	45	20	20
04-000-100-3926	TRANSFER FROM ROAD/BRIDGE	-	-	-	-
04-000-100-3927 04-000-100-3930	TRANSFER TO/FROM GF TRANSFER FROM GENERAL FUND	-	-	-	(77,000)
TOTAL REVENUES	TRANSPER FROM GENERAL FOIND	36	45	20	(76,980)
EXPENSES					
CONTRACTUAL SERVICE 04-001-002-4340	PRINTING/PUBLISHING/FORMS		-	-	_
04-001-002-4360	ENGINEERING SERVICES	-	-	-	-
TOTAL CONTRACTUAL		-	-	-	-
CAPITAL					
04-003-006-4380	SANITARY REHAB & STORM IMPROV	-	-	-	-
TOTAL CAPITAL		-	-	-	-
TOTAL EXPENSES		-	-	-	-
REVENUE VERSUS EXPE	ENSES	36	45	20	(76,980)
TIF FUND (05)					
REVENUES 05-000-100-3010	DDODEDTY TAY (TIE)	18,837	34,515	37,325	46,623
05-000-100-3010	PROPERTY TAX (TIF) TRANSFER FROM PUBLIC USE	-	45,000	45,000	30,000
05-000-100-3730	INTEREST INCOME	8	11	10	10
05-000-100-3930	BOND PROCEEDS	-	-	-	-
05-000-100-3931	BOND PREMIUM (NET)	- 10.045			
TOTAL REVENUES		18,845	79,526	82,335	76,633
EXPENSES					
CONTRACTUAL SERVIC					
05-001-002-4320 05-001-002-4380	POSTAGE PROFESSIONAL SERVICES	660	880	2,500	2,500
TOTAL CONTRACTUAL		660	880	2,500	2,500

		FY 2019/20 9	FY 2019/20	FY 2019/20	FY 2020/21
		MO	PROJECTED	BUDGET	BUDGET
OTHER					
05-001-004-4690	BOND REPAYMENT	38,063	30,100	43,225	34,400
05-001-004-4691	PRINCIPAL	20,100	37,200	35,000	36,206
05-001-004-4650	TIF ASSISTANCE	-	-	-	-
05-001-004-4659	PAYMENT TO ESCROW	-	-	-	-
05-001-004-4696 TOTAL OTHER	ISSUANCE COSTS	- 58,163	67,300	- 78,225	70,606
TOTAL OTHER TOTAL EXPENSES		58,823	<b>68,180</b>	80,725	73,106
TOTAL EXITERSES		30,023	00,100	00,723	73,100
REVENUE VERSUS EXP	ENSES	(39,978)	11,346	1,610	3,527
PUBLIC USE FUND	0 (06)				
REVENUES	,				
06-000-100-3730	PUBLIC USE INTEREST	352	469	400	350
06-000-100-3800	PUBLIC USE IMPACT FEES	17,634	23,512	28,480	-
06-000-100-3850	PUBLIC USE TRANSITION FEES	-	-	-	-
TOTAL REVENUES		17,986	23,981	28,880	350
EXPENSES					
CONTRACTUAL SERVIC	CES				
06-001-002-4360	ENGINEERING SERVICES	-	-	-	-
06-001-002-4380	OTHER PROFESSIONAL SERVICES	-	-	-	-
TOTAL CONTRACTUAL	SERVICES	-	-	-	-
OTHER					
06-001-006-4800	MISCELLANEOUS		-		_
06-004-004-4780	TRANSFER TO GENERAL	-	-	37,000	-
06-004-004-4781	TRANSFER TO TIF	-	45,000	45,000	30,000
06-004-004-4782	TRANSFER TO CAP IMPROV/DEBT SERV	-	-	-	-
TOTAL OTHER		-	45,000	82,000	30,000
CAPITAL					
06-001-006-4790	CONSTRUCTION	-	-	400,000	160,000
06-001-006-4900	EQUIPMENT STREETS	-	-	-	-
06-004-006-4380	EQUIPMENT PD/STR	-	-	-	-
06-001-006-4905	EQUIPMENT - FIRE HYDRANTS	-	-	-	-

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
TOTAL CAPITAL TOTAL EXPENSES		- -	- 45,000	400,000 <b>482,000</b>	160,000 <b>190,000</b>
REVENUE VERSUS EXF	PENSES	17,986	(21,019)	(453,120)	(189,650)
HOTEL/MOTEL TA	AX FUND (07)				
07-001-001-3730 07-001-001-4370 TOTAL REVENUES	INTEREST HOTEL/MOTEL TAX PROCEEDS	198 10,784 10,982	264 13,091 13,355	20,000 20,800	250 12,000 12,250
EXPENSES  OTHER EXPENSES  07-002-002-4376  07-002-002-4380  07-002-002-4385  TOTAL OTHER  TOTAL EXPENSES	COON CREEK & ASSOCIATED CHAMBER INITIATIVES WEB SITE EXPENSES OTHER CONTRACTUAL SERVICES	16,000 3,500 - 6,016 25,516 <b>25,516</b>	16,000 6,000 - 6,016 28,016 28,016	16,000 6,000 - 4,000 26,000	16,000 6,000 - 4,000 26,000 26,000
REVENUE VERSUS EXF	PENSES	(14,534)	(14,661)	(5,200)	(13,750)
PD EVIDENCE FUI REVENUES 09-000-100-3400 09-000-100-3730 TOTAL REVENUES	ND (09)  EVIDENCE MONEY/DUI/DRUG INTEREST INCOME	- - -	- 1 1	250 5 255	
EXPENSES 09-001-006-4800 TOTAL EXPENSES	EVIDENCE RELATED EXPENSE	1,553 1,553	1,032 1,032	1,000 1,000	· ·
REVENUE VERSUS EXF	PENSES	(1,553)	(1,031)	(745)	-

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
ROAD AND BRIDG	E FUND (10)				
10-000-001-3730	INTEREST INCOME	2	55	55	55
10-000-100-3010	PROPERTY TAX	110,426	110,426	109,043	109,043
10-000-100-3090	PERS PROP REPLACEMENT TAX TWP	-	1,930	-	-
TOTAL REVENUES		110,428	112,411	109,098	109,098
EXPENSES 10-001-002-4360	ENGINEERING SERVICES				
10-001-002-4380	CONSTRUCTION	177,491	177,491	150,000	100,000
10-001-002-4790	TRANSFERS	-	-	-	-
TOTAL EXPENSES		177,491	177,491	150,000	100,000
REVENUE VERSUS EXPE	NSES	(67,063)	(65,080)	(40,902)	9,098
MOTOR FUEL TAX	FUND (15)				
REVENUES	MET FLIND DISTRIBUTION	140.055	204.020	120.747	227 447
15-000-100-3060 15-000-100-3922	MFT FUND DISTRIBUTION OTHER GRANT	148,955 2,690	204,029 2,690	138,747 100,000	227,447 1,500
15-000-100-3922	INVESTMENT INCOME	9,321	12,428	3,171	10,000
TOTAL REVENUES	INVESTIMENT INCOME	160,966	219,147	241,918	238,947
EXPENSES					
CONTRACTUAL SERVICE					
15-001-006-4362	CONSTRUCTION	-	-	559,475	185,782
15-001-006-4365 TOTAL CONTRACTUAL	MAINTENANCE	_	-	- 559,475	- 185,782
TOTAL CONTRACTOAL		-	-	559,475	165,762
COMMODITIES 15-003-003-4600	ICE CONTROL	39,958	201,535	150,000	250,000
TOTAL COMMODITIES		39,958	201,535	150,000	250,000
TOTAL EXPENSES		39,958	201,535	709,475	435,782
REVENUE VERSUS EXPE	NSES	121,008	17,612	(467,557)	(96,835)

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
SSA #9 FUND (21) REVENUES 21-000-100-3010 21-000-001-3920 21-000-100-3730 TOTAL REVENUES	PROP TAX COLLECTIONS MISC INCOME INTEREST	299,011 - 1,683 300,694	299,011 - 8,313 307,324	303,400 - 4,500 307,900	185,000 - 3,035 188,035
EXPENSES 21-001-006-4440 21-001-006-4780 TOTAL EXPENSES REVENUE VERSUS EXPE	ADMINISTRATIVE FEES TRANSFER TO AMALG BANK BOND PAYTS ENSES	18,125 301,250 <b>319,375</b> (18,681)	24,167 301,250 <b>325,417</b> (18,093)	15,000 301,250 <b>316,250</b> (8,350)	38,579 483,000 <b>521,579</b> (333,544)
	IPROVEMENT FUND (28)	(10,000)	(=5,455)	(0,000)	(555,511)
28-000-100-3530 28-000-100-3531 TOTAL REVENUES	W/S IMPROVEMENT CHARGE PENALTY - W/S CAPITAL CHARGE	242,572 1,418 243,990	323,429 1,891 325,320	328,800 - 328,800	328,300 2,000 330,300
EXPENSES 28-001-004-4800 28-001-006-4700 28-001-006-4701 TOTAL EXPENSE	MISC EXPENSE INTEREST ARRA PRINCIPAL ARRA	- 3,884 63,420 67,304	6,038 63,420 69,458	- 6,068 63,420 69,488	- 3,183 66,305 69,488
OTHER EXPENSES 28-001-002-4790 TOTAL OTHER EXPENSE	TRANSFERS S	116,250	254,500	254,500	240,000
REVENUES VERSUS EXP	ENSES	60,436	1,362	4,812	20,812

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
GARBAGE FUND (2	29)				
REVENUES					
29-000-100-3550	GARBAGE DISPOSAL FEES	407,073	577,386	586,017	594,708
29-000-100-3551	REFUSE - PENALTIES	6,786	8,605	5,860	5,947
29-000-100-3921	GARBAGE LICENSE FEES	600	2,700	2,600	3,900
TOTAL REVENUES		414,459	588,691	594,477	604,555
EXPENSES					
29-001-001-4000	TRANS TO GEN FUND ADM SERV	-	-	-	-
29-001-002-4320	POSTAGE	2,872	3,280	7,460	3,600
29-001-002-4330	GARBAGE DISPOSAL	419,824	578,435	580,215	597,621
29-001-002-4340	PRINTING	1,705	2,312	2,669	2,800
TOTAL EXPENSES		424,401	584,027	590,344	604,021
REVENUES VERSUS EXF	PENDITURES	(9,942)	4,664	4,133	534
WATER FUND (30)					
WATER REVENUE					
30-000-100-3500	WATER SALES	689,538	919,384	944,344	936,184
30-000-100-3501	WATER - PENALTY	7,353	9,804	9,400	9,400
30-000-100-3502	WATER - ADJUSTMENTS	5,050	6,733	5,000	5,000
30-000-100-3521	METER SALES	19,646	26,195	24,000	24,000
30-000-100-3350	W/S IMPROVEMENT CHARGE	85,000	170,000	170,000	125,000
30-000-100-3730	INTEREST	25	33	30	30
30-000-100-3919	INSURANCE SETTLEMENT	-	-	-	-
30-000-100-3920	MISCELLANEOUS INCOME	594	792	500	500
30-001-004-3951	PREMIUM ON BONDS ISSUED		-	-	-
30-000-600-3940	GRANT - SAFETY PROGRAMS	-	- 1 122 241	- 1170.074	-
TOTAL WATER REVENU	DE	807,206	1,132,941	1,153,274	1,100,114
WAGES & BENEFITS			,		
01-002-001-4000	SALARIES - FULL TIME	97,971	130,628	133,220	148,472
01-002-001-4001	SALARIES - PART TIME	-	-	-	
30-001-001-4006	OVERTIME	5,158	6,877	4,418	5,969
30-001-001-4010	EMPLOYER S.S.	6,054	8,072	8,534	9,575
30-001-001-4020	EMPLOYER MEDICARE	1,416	1,888	1,996	2,239

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
30-001-001-4030	EMPLOYER I.M.R.F.	1,118	1,491	2,733	6,178
30-001-001-4031	EMPLOYER HEALTH INS.	31,526	42,035	47,279	49,464
30-001-001-4033	EMPLOYER DENTAL INS.	392	523	4,233	4,703
30-001-001-4035	EMPLOYER LIFE INS.	174	232	313	300
30-001-001-4037	EMPLOYER VISION INS.	317	423	375	513
30-001-001-4050	UNEMPLOYMENT TAX		-	186	382
TOTAL WAGES & BENI	EFITS	144,126	192,169	203,287	227,795
CONTRACTUAL SERVICE	CES				
30-001-002-4100	MAINTENANCE - BLDG	4,097	5,463	6,000	5,000
30-001-002-4110	MAINTENANCE - VEHL.	9,607	12,809	2,500	4,000
30-001-002-4120	MAINTENANCE - EQUIP.	101,915	43,940	55,000	42,000
30-001-002-4150	MAINTENANCE - GROUNDS	836	1,115	1,000	1,500
30-001-002-4160	MAINTENANCE - UTILITY SYSTEM	68,244	90,992	163,500	90,000
30-001-002-4210	INSURANCE/RISK MANAGEMENT	44,774	59,699	60,500	64,735
30-001-002-4230	COMMUNICATION SERVICES	6,884	9,179	10,000	11,950
30-001-002-4260	UTILITIES	127,518	170,024	180,000	180,000
30-001-002-4280	RENTALS	2,644	3,525	1,000	1,000
30-001-002-4290	TRAVEL EXPENSE	60	80	250	250
30-001-002-4310	TRAINING	450	600	600	1,800
30-001-002-4320	POSTAGE	2,527	3,369	3,850	4,000
30-001-002-4340	PRINT/ADV/FORMS	-	-	2,600	2,600
30-001-002-4360	ENGINEERING SERVICES	4,407	5,876	20,000	55,000
30-001-002-4370	LEGAL SERVICES	-	-	-	-
30-001-002-4380	OTHER PROF.SERV.	8,277	11,036	13,000	8,000
30-001-002-4430	DUES	-	-	300	300
TOTAL CONTRACTUAL	SERVICES	382,240	417,707	520,100	472,135
COMMODITIES					
30-002-003-4650	OFFICE SUPPLIES	687	916	1,850	1,000
30-002-003-4660	GASOLINE/OIL	1,898	2,531	3,500	3,250
30-002-003-4670	MAINTENANCE SUPPLIES	16,134	21,512	18,000	20,790
30-002-003-4680	OPERATING SUPPLIES	57,801	77,068	100,000	80,000
30-002-003-4690	UNIFORMS	1,327	1,769	1,000	1,250
TOTAL COMMODITIES		77,847	103,796	124,350	106,290

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
OTHER EXPENSE					
30-001-004-4703	DEBT SERVICE INTEREST	14,203	14,203	14,203	10,375
30-001-004-4704	DEBT SERVICE PRINCIPAL	191,400	191,400	191,400	197,200
30-001-004-4770	ADMIN SERVICES TO GF	17,760	35,520	35,520	35,520
30-001-004-4940	CONTINTENCY	-	-	5,000	-
		223,363	241,123	246,123	243,095
CAPITAL OUTLAY					
30-001-005-4940	CAPITAL - VEHICLES	22,225	22,225	37,000	-
30-001-005-4960	METERS/EQUIPMENT	30,101	71,455	55,000	98,060
30-001-005-4980	FIRE HYDRANTS	-	-	8,000	8,000
		52,326	93,680	100,000	106,060
TOTAL WATER		879,902	1,048,475	1,193,860	1,155,375
EXPENSES IN EXCESS O	OF REVENUE	(72,696)	84,466	(40,586)	(55,261)
SEWER FUND (31)					
WATER REVENUE					
31-000-100-3510	SEWER CHARGES	867,801	1,157,068	1,163,400	1,178,042
31-000-100-3511	SEWER - PENALTY	10,010	13,346	11,630	9,400
31-000-100-3530	W/S IMPROVEMENT FEE	31,250	62,500	62,500	31,250
31-000-100-3920	MISCELLANEOUS INCOME	-	-	-	-
31-000-600-3940	GRANT - SAFETY PROGRAMS	-	-	3,000	30
TOTAL SEWER REVENU	JE	909,061	1,232,914	1,240,530	1,218,722
WAGES & BENEFITS					
31-001-001-4000	SALARIES - FULL TIME	74,068	98,757	96,155	95,877
31-002-001-4001	SALARIES - PART TIME	-	-	-	-
31-001-001-4006	OVERTIME	2,584	3,445	2,528	2,889
31-001-001-4010	EMPLOYER S.S.	4,439	5,919	6,118	6,123
31-001-001-4020	EMPLOYER MEDICARE	1,038	1,384	1,431	1,432
31-001-001-4030	EMPLOYER I.M.R.F.	843	1,124	1,974	3,951
31-001-001-4031	EMPLOYER HEALTH INS.	22,814	30,419	39,471	38,460
31-001-001-4033	EMPLOYER DENTAL INS.	167	223	2,475	2,001
31-001-001-4035	EMPLOYER LIFE INS.	99	132	188	180

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
31-001-001-4037	EMPLOYER VISION INS.	204	272	196	308
31-001-001-4050	UNEMPLOYMENT TAX		124	124	382
TOTAL WAGES & BENE	FITS	106,256	141,799	150,660	151,603
CONTRACTUAL SERVICE	ES				
31-001-002-4100	MAINTENANCE - BLDG	1,535	2,047	20,000	20,000
31-001-002-4110	MAINTENANCE - VEHL.	329	439	2,000	2,000
31-001-002-4120	MAINTENANCE - EQUIP.	53,804	71,739	144,000	138,690
31-001-002-4150	MAINTENANCE - GROUNDS	200	267	1,000	500
31-001-002-4160	MAINTENANCE - UTILITY SYSTEM	18,320	39,427	130,000	50,000
31-001-002-4180	SLUDGE HAUL	16,581	22,108	21,000	26,275
31-001-002-4210	INSURANCE/RISK MANAGEMENT	44,774	60,500	60,500	64,735
31-001-002-4230	COMMUNICATION SERVICES	3,113	4,151	5,510	7,000
31-001-002-4260	UTILITIES	80,285	107,047	110,000	122,000
31-001-002-4280	RENTALS	223	297	1,000	1,000
31-001-002-4290	TRAVEL EXPENSE	-	-	250	250
31-001-002-4310	TRAINING	-	-	600	900
31-001-002-4320	POSTAGE	3,422	4,563	3,450	3,450
31-001-002-4340	PRINT/ADV/FORMS	-	-	2,600	2,600
31-001-002-4360	ENGINEERING SERVICE	7,580	10,107	67,000	51,500
31-001-002-4370	LEGAL SERVICES	-	-	-	-
31-001-002-4380	OTHER PROF.SERV.	12,458	16,611	12,000	14,040
31-001-002-4430	DUES	220	293	150	100
TOTAL CONTRACTUAL S	SERVICES	242,844	339,596	581,060	505,040
COMMODITIES					
31-002-003-4650	OFFICE SUPPLIES	618	824	400	1,000
31-002-003-4660	GASOLINE/OIL	1,671	2,228	3,000	2,500
31-002-003-4670	MAINTENANCE SUPPLIES	13,316	17,755	20,500	52,497
31-002-003-4680	OPERATING SUPPLIES	34,811	46,415	45,000	58,080
31-002-003-4690	UNIFORMS	892	1,189	1,000	1,000
TOTAL COMMODITIES		51,308	68,411	69,900	115,077
OTHER EXPENSE					
31-001-004-4770	ADMIN SERVICES TO GF	17,760	35,520	35,520	35,520
31-001-004-4792	IEPA INTEREST	14,601	30,719	30,719	24,569

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
31-001-004-4793	IEPA PRINCIPAL	228,381	228,381	228,381	234,531
31-001-004-4794	DEBT SERVICE 2012 GO ALT REV	19,011	83,660	83,660	84,569
31-001-004-4810	IEPA ANNUAL PERMIT	17,500	17,500	17,500	17,500
31-001-004-4820	MISCELLANEOUS	-	-	1,000	-
31-001-004-4940	CONTINTENCY	-	-	14,000	-
		297,253	395,780	410,780	396,689
<b>CAPITAL OUTLAY</b>					
31-001-005-4940	EQUIPMENT & VEHICLES	-	-	-	16,368
		-	-	-	16,368
TOTAL SEWER		697,661	945,586	1,212,400	1,184,777
REVENUE IN EXCESS (	OF EXPENSES	211,400	287,328	28,130	33,945
CAPITAL PROJECT	TS (33) - DEBT SERVICE				
33-000-002-3800	PREMIUM ON BONDS ISSUED	-	-	-	-
33-000-100-3520	PROCEEDS OF BOND REFUNDING	-	-	-	-
33-000-100-3530	TRANSFER FROM SEWER FUND	-	-	-	-
33-000-100-3531	TRANSFER FROM WATER FUND	-	-	-	-
33-000-100-3540	TRANSFER FROM TRANSP. FUND	-	-	-	-
33-000-100-3550	TRANSFER FROM STREET BGT	-	-	-	-
33-000-100-3551	TRANSFER FROM PUBLIC USE	-	-	-	-
33-000-100-3730	INTEREST	-	-	5	-
TOTAL REVENUES		-	-	5	-
EXPENSES CONTRACTUAL SERVI	CES				
33-001-003-4650	OFFICE EXPENSE	-	-	-	-
33-001-006-4350	AUDIT	-	-	-	-
33-001-006-4440	FISCAL AGENT FEES	-	-	-	-
33-001-006-4750	WIDMAYER ROAD RESURFACING	-	-	-	-
33-001-006-4751	STATE STREET IMPROVEMENTS	-	-	-	-
TOTAL CONTRACTUA	L SERVICES	-	-	-	-

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
OTHER  33-000-500-4950  33-005-004-4910  33-005-004-4915  33-005-004-4930  33-005-004-4999  33-005-005-4910  33-005-005-4920  33-005-005-4930  TOTAL OTHER	PAYMENT TO ESCROW AGENT INTEREST - SEWER FUND PRINCIPAL & INTEREST - WATER FUND INTEREST - TRANSPORTATION FUND INTEREST - STREET FUND BOND ISSURANCE COSTS PRINCIPAL - SEWER FUND PRINCIPAL - TRANSPORTATION FUND PRINCIPAL - STREET FUND	- 2,893 - - 2,249 - 77,979 60,621 - 143,742	- - - - - - - -	- - - - - - - -	- - - - - - - -
TOTAL EXPENSES  REVENUES VERSUS EX		143,742 (143,742)	-	- 5	-
	JCTION FUND (34)	(2.0), 10,			
34-000-001-3540 34-000-001-3541 34-000-001-3550 34-000-001-3560 34-000-001-3730 34-000-001-3910 34-000-001-3950	CONNECTION/TAP ON CONNECTION/TAP - CROWN WATER SUPPLY/STORAGE W/S IMPROVEMENT CHARGE INTEREST-CONNECTION/STORAGE TRAN FROM WATER FUND DCEO GRANT WELL #9	36,400 - - - - - - -	41,600 - - - - - - -	12,800 - - - - - - -	- - - - - -
34-000-001-3960 TOTAL REVENUES	IEPA LOAN PROCEEDS	36,400	41,600	12,800	-
EXPENSES CONTRACTUAL SERVI 34-001-002-4360 34-001-002-4370 34-001-002-4370 TOTAL CONTRACTUAL	ENGINEERING SERVICES LEGAL SERVICES CONSTRUCTION	- - 84,582 <b>84,582</b>	84,582 <b>84,582</b>	- - - -	- - -

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
OTHER 34-000-005-4790 34-000-005-4910 34-001-006-5500 TOTAL OTHER EXPENS	MISCELLANEOUS EXPENSE SCADA SSA #16 BOND INDENTURE ES			- - -	- - -
TOTAL EXPENSES		84,604	84,604	-	-
REVENUES VERSUS EX	PENSES	(48,204)	(43,004)	12,800	-
SEWER CONSTRU REVENUES 40-000-001-3540 40-000-001-3541	CTION FUND (40)  CONNECTION/TAP-ON  CONNECTION/TAP-ON CROWN	43,855	50,120	62,650	- -
40-000-001-3560 40-000-001-3730 40-000-001-3905 40-000-001-3910 40-000-001-3921	W/S IMPROVEMENT CHARGE INTEREST GRANT #08203512 TRAN FROM SWR FUND 4,000 MO WASTEWATER TREATMENT/IMPACT	- - - -	- - - -	- - - - -	- - - - -
EXPENSES CONTRACTUAL SERVICE 40-001-002-4340	CES PRINTING	43,855	50,120	62,650	- 
40-001-002-4360 TOTAL CONTRACTUAL	ENGINEERING SERVICES	-	-	-	-
CAPITAL 40-001-005-4910 40-001-005-4915 TOTAL CAPITAL	SCADA SEWER CONSTRUCTION PROJECTS	- -		- - -	- - -
OTHER 40-001-006-5105 40-001-006-5200 40-001-006-5500	INTEREST TRANSFER TO SEWER FUND SSA#16 BOND INDENTURE	- - -		- - -	

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
TOTAL OTHER		-	-	-	-
TOTAL EXPENSES REVENUES VERSUS EX	<b>YPENSES</b>	- 43,855	- 50,120	- 62,650	-
SSA #14 BOND AI	ND INTEREST FUND (43)				
43-000-100-3094 43-102-300-3730	PROP TAX - SSA #14 INTEREST	387,660 6,062	753,273 18,186	855,336 20,000	756,367 20,000
43-102-300-3740 43-103-200-4880 43-104-300-3730	UNREALIZED GAIN/LOSS BOND PROCEEDS INTEREST	-	-	-	-
43-104-300-3740 43-104-300-3750	UNREALIZED GAIN/LOSS MISCELLANEOUS				-
43-105-300-3730 TOTAL REVENUES	INTEREST	393,722	771,459	875,336	776,367
EXPENSES 43-102-004-4780	TRANSFER TO IMPROVEMENT FUND				
43-104-004-4790 43-104-004-4696	MISC DISBURSEMENT COST OF ISSUANCE	-	-	-	-
43-105-004-4790 43-105-400-4350	ADMIN EXP FUND - MISC DISB AUDIT	11,310	15,080	25,000	25,000
43-104-300-4500 TOTAL EXPENSES	DEBT SERVICE PAYMENT	752,488 <b>763,798</b>	752,488 <b>767,568</b>	769,258 <b>794,258</b>	765,458 <b>790,458</b>
REVENUES VERSUS EX	PENSES	(370,076)	3,891	81,078	(14,091)
SSA #14 IMPROV REVENUES	EMENT FUND (44)				
44-107-200-4881 44-107-300-3730 TOTAL REVENUES	TRANSFER FROM CAPITALIZED INT INTEREST	- -			

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
EXPENSES 44-107-206-4486 TOTAL EXPENSES	FEES AND OTHER EXPENSES	-		<u>-</u>	
REVENUES VERSUS EX	PENSES	-	-	-	-
SSA #13 TUSCAN'	Y WOODS (45)				
45-102-200-4880	BOND PROCEEDS	5,161,372	5,161,372	-	-
45-102-300-4880	PROPERTY TAX - SSA #13	243,461	481,194	482,374	380,773
45-102-300-3730	INTEREST	3,532	14,128	8,000	-
45-104-300-3740	UNREALIZED GAIN/LOSS	-		-	-
45-104-300-3740	TRANSFERS IN	-	-	-	-
TOTAL REVENUES		-	-	-	-
EVDENCEC		5,408,365	5,656,694	490,374	380,773
EXPENSES	TRANSFER TO INARROVENAENT FLIND				
45-102-004-4780 45-102-004-4790	TRANSFER TO IMPROVEMENT FUND MISC DISBURSEMENT	155,925	165,175	14,500	30,000
45-102-004-4790 45-105-400-4350	AUDIT	155,925	103,173	14,500	30,000
45-102-300-4500	DEBT SERVICE PAYMENT	5,193,569	5,619,677	475,419	350,723
TOTAL EXPENSES	DEDI SERVICE PATIMENT	5,349,494	5,784,852	489,919	380,723
				•	•
REVENUES VERSUS EX	(PENSES	58,871	(128,158)	455	50
SSA #13 IMPROV	EMENT FUND (46)				
46-107-300-3730	INTEREST	-	-	-	-
TOTAL REVENUES		-	-	-	-
EXPENSES					
46-001-006-4440	ADMINISTRATIVE FEES	-	-	-	-
46-001-006-4440	MISC DISBURSEMENT	-	-	-	-
TOTAL EXPENSES		-	-	-	-
REVENUES VERSUS EX	(PENSES	-	-	-	-

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
SSA #16 BOND AN	ND INTEREST FUND (47)				
47-102-300-3730	INTEREST SSA #16	53	212	350	-
47-104-300-3090 TOTAL REVENUES	PROP TAXES SSA #16	108,525 108,578	112,447 112,659	112,447 112,797	-
EXPENSES	NAISC DISDUDGENATAIT SCA HAG	C 400	125.000	112 447	
47-104-004-4790 TOTAL EXPENSES	MISC DISBURSEMENT SSA #16	6,400 6,400	125,969 125,969	112,447 112,447	-
REVENUES VERSUS EXPENSES		102,178	(13,310)	350	-
SSA #2,3,6,7,8,10	, 15 (52)				
REVENUES	DDOD TAV CCA #3	3,000	2,000	2,020	F 003
52-000-100-3010 52-000-100-3011	PROP TAX SSA #2 PROP TAX SSA #10	3,999 3,299	3,999 3,299	3,920 3,234	5,093 8,624
52-000-100-3011	PROP TAX SSA #10 PROP TAX SSA #3	600	600	588	588
52-000-100-3060	PROP TAX 33A #3	12,487	12,487	12,250	12,250
52-000-100-3070	PROP TAX SSA #7	998	998	980	980
52-000-100-3080	PROP TAX SSA #8	4,476	4,476	4,410	6,370
52-000-100-3091	PROP TAX SSA #11	18,399	18,399	18,130	18,130
52-000-100-3092	PROP TAX SSA #12	7,234	7,234	7,105	10,780
52-000-100-3094	PROP TAX SSA #15	12,493	12,493	12,250	12,250
52-000-100-3093	PROP TAX SSA #23	-	-	-	-
52-000-100-3730	INTEREST	81	90	-	-
TOTAL REVENUES		64,066	64,075	62,867	75,065
EXPENSES					
PERSONAL SERVICES	644 4 8 1 5 6 7 1 1 1 7 1 4 5		0.422		40.045
52-001-001-4000	SALARIES FULL TIME	7,993	9,468	5,712	13,918
52-001-001-4001	SALARIES PART TIME	8,853	8,853	12,081	4,600
52-001-001-4010	EMPLOYER AND CARE	1,020	1,129	1,103	1,148
52-001-001-4020	EMPLOYER IMPE	238	264	259	269
52-001-001-4030	EMPLOYER IMRF	60	120	150	557
52-001-001-4050	UNEMPLOYMENT COMP.	27	10.876	42	42
TOTAL PERSONAL SER	VICES	18,191	19,876	19,347	20,533

		FY 2019/20 9	FY 2019/20	FY 2019/20	FY 2020/21
		MO	PROJECTED	BUDGET	BUDGET
OTHER					
52-001-002-4920	SSA #2	-	-	1,070	1,113
52-001-002-4921	SSA #10	-	5,400	885	6,320
52-001-002-4923	SSA #3	-	-	450	468
52-001-002-4926	SSA #6	2,550	2,975	3,700	5,548
52-001-002-4927	SSA #7	225	263	750	780
52-001-002-4928	SSA #8	1,275	1,488	1,950	2,028
52-001-002-4931	SSA #11	-	10,200	31,450	21,474
52-001-002-4932	SSA #12	1,500	1,750	8,925	9,282
52-001-002-4934	SSA #15	6,700	7,817	4,500	4,680
52-001-002-4933	SSA #23		-	4,430	4,607
52-001-002-4998	ADMIN EXP TRANSFERS		-	-	-
52-001-002-4999	SSA EXPENSES	40,865	47,676	45,000	9,195
TOTAL OTHER		53,115	77,569	103,110	65,495
TOTAL EXPENSES		71,306	97,445	122,457	86,028
REVENUES VERSUS E	XPENSES	(7,240)	(33,370)	(59,590)	(10,963)
SCHOOL IMPACT	FEES FUND (60)				
REVENUES	` '				
60-000-100-3730	INTEREST	34	81	5	5
60-000-100-3800	IMPACT FEES - DIST. 300	13,231		-	-
60-000-100-3825	IMPACT FEES - DIST. 158	-	-	-	-
60-000-100-3850	TRANSITION FEES - DIST 300	86,809	115,859	145,587	142,840
60-000-100-3855	TRANSITION FEES - DIST 158	-	-	-	-
TOTAL REVENUES		100,074	115,940	145,592	142,845
EXPENSES					
60-001-004-4780	SCHOOL IMPACT - DIST 300	83,238	83,238	-	-
60-001-004-4785	SCHOOL IMPACT - DIST 158	-	-	-	-
60-001-004-4800	SCHOOL TRANS FEE - DIST 300	10,919	115,859	145,587	142,840
60-001-004-4850	SCHOOL TRANS FEE - DIST 158	-	-	-	-
60-001-004-4860	INTEREST - DIST 300	22	22	-	-
TOTAL EXPENSES		94,179	199,119	145,587	142,840

FV 2040 /20

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
REVENUES VERSUS EXPENSES		5,895	(83,179)	5	5
LIBRARY IMPACT	FEES (61)				
61-000-100-3730	INTEREST	101	135	150	150
61-000-100-3800	LIBRARY IMPACT FEES - ELLA JOHNSON	3,450	4,800	6,000	6,000
61-000-100-3825	LIBRARY IMPACT FEES - HUNTLEY	-	-	-	-
61-000-100-3850	LIBRARY TRANS FEES - ELLA JOHNSON	2,683	3,694	4,500	4,400
61-000-100-3855	LIBRARY TRANS FEES - HUNTLEY	-	-	-	-
TOTAL REVENUES		6,234	8,629	10,650	10,550
EXPENSES					
61-001-004-4780	LIBRARY IMPACT - ELLA JOHNSON	-	-	-	-
61-001-004-4785	LIBRARY IMPACT - HUNTLEY	-	-	-	-
61-001-004-4800	LIBRARY TRANS - ELLA JOHNSON	993	3,694	4,616	4,400
61-001-004-4850	LIBRARY TRANS - HUNTLEY	-	-	-	-
61-001-004-4865	LIBRARY INTEREST - HUNTLEY	-	-	-	-
TOTAL EXPENSES		993	3,694	4,616	4,400
REVENUES VERSUS EX	PENSES	5,241	4,935	6,034	6,150
PARK IMPACT FEI	ES (62)				
REVENUES					
62-000-100-3730	INTEREST	253	276	75	30
62-000-100-3800	PARK IMPACT FEES	13,826	16,130	13,860	- 12.000
62-000-100-3850 TOTAL REVENUES	PARK TRANSITION FEES	7,892 <b>21,971</b>	10,864 <b>27,270</b>	13,236 <b>27,171</b>	12,988 <b>13,018</b>
TOTAL REVENUES		21,971	27,270	27,171	13,018
EXPENSES					
62-001-004-4780	PARK IMPACT - HTPD	335,859	335,859	319,400	-
62-001-004-4800	PARK TRANS FEE - HTPD	8,560	10,864	13,236	12,988
62-001-004-4900	PAYOUT	22	22	-	-
TOTAL EXPENSES		344,441	346,745	332,636	12,988
REVENUES VERSUS EX	PENSES	(322,470)	(319,475)	(305,465)	30

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
FIRE PROTECTIO REVENUES	N DISTRICT IMPACT FEES (63)				
63-000-100-3730	INTEREST	132	144	50	30
63-000-100-3800	FIRE IMPACT FEE - HAMPSHIRE	6,490	8,450	8,950	6,800
53-000-100-3825	FIRE IMPACT FEE - HUNTLEY	-	-	-	-
63-000-100-3850	FIRE TRANSITION FEE - HAMPSHRIE	17,733	28,050	29,720	29,815
63-000-100-3855	FIRE TRANSITION FEE - HUNTLEY	-	-	-	-
TOTAL REVENUES		24,355	36,644	38,720	36,645
EXPENSES					
53-001-004-4780	FIRE IMPACT - HAMPSHIRE	182,452	182,452	_	_
3-001-004-4785	FIRE IMPACT - HUNTLEY	-	-	-	_
3-001-004-4800	FIRE TRANS - HAMPSHIRE	19,233	19,233	29,720	29,815
3-001-004-4850	FIRE TRANS - HUNTLEY	-	-	-	-
3-001-004-4685	HUNTLEY INTEREST	-	-	-	-
OTAL EXPENSES		201,685	201,685	29,720	29,815
REVENUES VERSUS EXPENSES		(177,330)	(165,041)	9,000	6,830
TRANSPORTATIO	ON POLICY FUND (64)				
REVENUE	, ,				
64-000-100-3730	TRANSPORTATION - INTEREST	-	-	-	-
4-000-100-3800	TRANSPORTATION IMPACT FEE	37,628	43,627	65,440	65,440
4-000-100-3900	HAMPSHIRE WEST LLC	-	-	-	-
64-000-100-4000	CROWN - AURORA VENTURE	-	-	-	-
TOTAL REVENUE		37,628	43,627	65,440	65,440

00 000 200 0700					
63-000-100-3800	FIRE IMPACT FEE - HAMPSHIRE	6,490	8,450	8,950	6,800
63-000-100-3825	FIRE IMPACT FEE - HUNTLEY	-	-	-	-
63-000-100-3850	FIRE TRANSITION FEE - HAMPSHRIE	17,733	28,050	29,720	29,815
63-000-100-3855	FIRE TRANSITION FEE - HUNTLEY	-	-	-	-
TOTAL REVENUES		24,355	36,644	38,720	36,645
EXPENSES					
63-001-004-4780	FIRE IMPACT - HAMPSHIRE	182,452	182,452	-	-
63-001-004-4785	FIRE IMPACT - HUNTLEY	-	-	-	-
63-001-004-4800	FIRE TRANS - HAMPSHIRE	19,233	19,233	29,720	29,815
63-001-004-4850	FIRE TRANS - HUNTLEY	-	-	-	-
63-001-004-4685	HUNTLEY INTEREST	-	-	-	-
TOTAL EXPENSES		201,685	201,685	29,720	29,815
REVENUES VERSUS EX	KPENSES	(177,330)	(165,041)	9,000	6,830
TRANSPORTATIO	ON POLICY FUND (64)				
REVENUE					
64-000-100-3730	TRANSPORTATION - INTEREST	-	-	-	-
64-000-100-3800	TRANSPORTATION IMPACT FEE	37,628	43,627	65,440	65,440
64-000-100-3900	HAMPSHIRE WEST LLC	-	-	-	-
64-000-100-4000	CROWN - AURORA VENTURE	-	-	-	-
TOTAL REVENUE		37,628	43,627	65,440	65,440
EXPENSES					
64-001-004-4356	DESIGN ENG - BRIER HILL RESURFACING		7,159	-	-
64-001-004-4360	DESIGN ENG - STATE AND ALLEN	-	-	-	-
64-001-004-4361	DESIGN ENG - US 20 AND BIG TIMBER	-	-	-	-
64-001-004-4362	DESIGN ENG - US 20 AND ALLEN RD INT	-	-		-
64-001-004-4363	BIG TIMBER RD & KETCHUM	-	-	-	-
64-001-004-4366	DESIGN ENG - STATE AND RT 72	-	-	-	-
64-001-004-4800	MISC EXPENSE	22	22	-	-

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
64-001-004-4905 64-003-006-4371 64-004-004-4910 TOTAL EXPENSES	TRANSFER TO GENERAL CONSTRUCTION TRANS TO GF DEBT P&I	5,043 - 5,065	- - - 7,181		151,200 - - - 151,200
REVENUES VERSUS EX	PENSES	32,563	36,446	65,440	(85,760)
EARLY WARNING REVENUES	FUND (65)				
65-000-100-3730	EARLY WARNING - INTEREST	- 220	-	-	-
65-000-100-3800 65-000-100-3920	EARLY WARNING - IMPACT FEE MISC INCOME	230	268	190	-
TOTAL REVENUES		230	268	190	-
EXPENSES 65-001-004-4800 65-001-004-4900 TOTAL EXPENSES	OTHER PROFESSIONAL SERVICES PAYOUT	22 22	22		
REVENUES VERSUS EX	PENSES	208	246	190	-
CEMETERY IMPAC	CT FUND (66)				
66-000-100-3730	INTEREST	9	12	10	10
66-000-100-3800 TOTAL REVENUES	CEMETERY IMPACT FEE	1,330 1,339	1,810 <b>1,822</b>	2,000 <b>2,010</b>	2,000 <b>2,010</b>
EXPENSES 66-001-004-4780 66-001-004-4900 TOTAL EXPENSES	OTHER PROFESSIONAL SERVICES PAYOUT	22 22	22 22		- - -
REVENUES VERSUS EX	PENSES	1,317	1,800	2,010	2,010

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
CAPITAL IMPROV	ZEMENTS/DEBT (70)				
70-000-000-3930	KEYES AVE - IDOT GRANT	-	-	-	-
70-000-000-3931	DIETRICH ROAD IDOT GRANT	-	-	-	-
70-000-000-3932	IDOT GRANT - ROMKE ROAD	-	-	-	-
70-000-000-3960	MISCELLANEOUS INCOME	-	-	-	-
70-000-100-3730	INTEREST INCOME	-	-	-	-
TOTAL REVENUE		-	-	-	-
EXPENSES					
70-003-006-4371	KEYES AVE RECONSTRUCTION	-	-	-	-
70-003-006-4372	STATE STREET LAPP	-	-	-	-
70-003-006-4373	DIETRICH ROAD LAPP	-	-	-	-
70-003-006-4374	TUSCANY WOODS CAPITAL	-	-	-	-
70-003-006-4375	TUSCANY WOODS MAINTENANCE	-	-	-	-
70-003-006-4376	TW ENGINEERING SERVICES	-	-	-	-
70-003-006-4677	ROMKE ROAD CONSTRUCTION	-	-	-	-
70-003-007-4471	CROWN DEVELOPMENT PROJECTS	-	-	-	-
70-003-008-4550	2011 INTERNATIONAL PLOW TRUCK	-	-	-	-
TOTAL EXPENSES		-	-	-	-
REVENUES VERSUS EX	PENSES	-	-	-	-
POLICE PENSION REVENUES	FUND (90)				
90-000-600-3900	OFFICER CONTRIBUTIONS	69,904	84,275	100,000	103,500
90-000-600-3910	EMPLOYER CONTRIBUTIONS	275,000	277,000	275,000	300,000
90-000-001-3730	INVESTMENT EARNINGS	24,845	29,020	13,200	29,000
90-000-001-4800	MISCELLANEOUS	176	176	-	-
TOTAL REVENUES		369,925	390,471	388,200	432,500
EXPENSES					
90-000-600-3200	REFUND OF CONTRIBUTIONS	29,606	29,606	23,111	69,411
90-001-004-4000	PENSION PAYMENTS	18,463	24,617	25,700	53,050
90-001-004-4100	DISABILITY PAYMENTS	-	-	-	-
90-001-004-4200	DEATH BENEFIT PAYMENTS	-	-	-	-

		FY 2019/20 9 MO	FY 2019/20 PROJECTED	FY 2019/20 BUDGET	FY 2020/21 BUDGET
90-001-002-4365 90-001-002-4310 90-001-004-4800 90-001-002-4380 90-001-004-4750	CONTRACTUAL PROFESSIONAL DEVELOPMENT MISCELLANEOUS EXPENSE OTHER PROFESSIONAL SERVICES STATE OF IL COMPLIANCE FEE	3,544 - 145 795 327	4,725 185 193 1,060 327	4,500 3,000 1,500 6,000 600	4,500 3,000 1,500 6,000 600
TOTAL EXPENSES		52,880	60,713	64,411	138,061
REVENUES VERSUS EXI	PENSES	317,045	329,758	323,789	294,439
General Fund		400,350	220,016	(323,643)	5,823
Special Revenue Funds	;	(9,359)	(85,184)	(572,385)	(108,923)
<b>Capital Project Funds</b>		(103,402)	(1,310)	(567,450)	(492,375)
Enterprise Funds		184,849	384,936	71,939	30
Total Village		472,438	518,458	(1,391,539)	(595,445)
Agency Funds		(715,055)	(716,630)	(214,883)	(332,560)
Pension Trust Fund		317,045	329,758	323,789	294,439

# VILLAGE OF HAMPSHIRE

Accounts Payable

### April 2, 2020

The President and Board of Trustees of the Village of Hampshire Recommends the following Warrant in the amount of

## Total: \$565,759.59

To be paid on or before April 8, 2020

Village President:
Attest:
Village Clerk:
Date:

# VILLAGE OF HAMPSHIRE

Accounts Payable

### April 2, 2020

The President and Board of Trustees of the Village of Hampshire Recommends the following **Employee/Trustee:** Nicholas Orsolini Warrant in the amount of

### Total: \$40.00

To be paid on or before April 8, 2020

Village President:	
Attest:	
Village Clerk:	
Date:	

PAGE:

VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

158518A	158511A	B&KPO	53374	12497	B&F	8728-0	1221-0	AT&T	25414	ALGR	10278	ALCO	INVOICE VENDOR #
8A	.A	B & K POWER			B&F CONSTRUCTION	8728-022420A	1221-022420A	AT&T		ALPHA GRAPHICS		ALLEN'S CORN	# H
03/04/20	03/02/20	EQUIPMENT	03/24/20	03/10/20	CTION CODE	02/24/20	02/24/20		12/13/19	CS	03/02/20	CORNER GARAGE	INVOICE DATE
01	01	INC.	01	01	SERVICES	01	01		01		01	e HO	TTEM
CHAIN	NUT		SOLAR PANELS PLAN REVIEW	FEB PLAN REVIEWS/INSPECTIONS	ICES	HAMPSHIRE DR LIFT STATION	WELL 13		PD COMMISSION BUSINESS CARDS		HEAVY DUE TOW	TOWING	DESCRIPTION
010030034670	010030034670		010010024390	010010024390		310010024230	300010024230		010060024330		010030024110		ACCOUNT #
													P.O. #
04/04/20 INVOICE TOTAL: VENDOR TOTAL:	04/02/20 INVOICE TOTAL:		04/24/20 INVOICE TOTAL: VENDOR TOTAL:	04/10/20 INVOICE TOTAL:		03/23/20 INVOICE TOTAL: VENDOR TOTAL:	03/23/20 INVOICE TOTAL:		01/13/20 INVOICE TOTAL: VENDOR TOTAL:		04/02/20 INVOICE TOTAL: VENDOR TOTAL:		PROJECT DUE DATE
21.99 21.99 23.49	1.50		225.00 225.00 5,183.04	4,958.04 4,958.04		72.28 72.28 128.10	55.82 55.82		69.99 69.99 69.99		300.00 300.00 300.00		ITEM AMT

### VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

PAGE:

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DETAIL BOAKD KEFORT

216591A	CAON	90836	243614	238824	BUBR	BPCI00	BPCI	021520A	BLCR	0321020A	B&T	INVOICE VENDOR #
A	CALL ONE				BUCK BROTHERS,	BPC100221950A	BENEFIT PLAN	Д	HEALTH CARE	)A	B&T LEASING,	# H
03/15/20		03/09/20	12/16/19	10/25/19	RS, INC.	02/11/20	PLANNING CONSULTANTS,	02/15/20	SERVICES C	03/10/20	INC.	INVOICE DATE
01		01	01	01		01	LTAN	01 02 03 04	CORP	01		TTEM
1126416		SKID STEER TRAILER ATTACHMENT	CREDIT RADIATOR	RADIATOR		MONTHLY FLEX AND COBRA	rs,	ADM PD STREETS SEWER WATER		PW STORAGE		DESCRIPTION
010010024230		310010034670	010030034680	010030034680		010010024380		010010014031 010020014031 010030014031 310010014031 300010014031		010030024280		ACCOUNT #
												P.O. #
04/01/20		04/09/20 INVOICE TOTAL: VENDOR TOTAL:	01/16/20 INVOICE TOTAL:	11/25/19 INVOICE TOTAL:		03/22/20 INVOICE TOTAL: VENDOR TOTAL:		03/02/20 INVOICE TOTAL: VENDOR TOTAL:		03/10/20 INVOICE TOTAL: VENDOR TOTAL:		PROJECT DUE DATE
306.88		610.00 610.00 670.66	-242.63 -242.63	303.29 303.29		115.00 115.00 115.00		2,532.21 12,260.35 6,544.18 2,868.58 3,895.09 28,100.41 28,100.41		1,650.00 1,650.00 1,650.00		ITEM AMT

VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

PAGE:

M068597	M058070	COMA	10486A	10483A	CILI		030420A	CASE		216591A	CAON	INVOICE VENDOR #
		CORE & MAIN			CITY LIMITS			CARDMEMBER			CALL ONE	#
03/17/20	03/13/20	LP	03/03/20	02/27/20	SYSTEMS INC		03/04/20	SERVICE		03/15/20		INVOICE DATE
01	01		01	01	Ö	05 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	01		0 0 5 6	02		# H MHTI
LID/B-BOX REPAIR	B-BOX REPAIR KIT		PROWASH	PROWASH		LL KEYBOARD AND MONITOR LL CALCULATOR JH PROJECTOR			1126420	1126417 1126418 1126419		DESCRIPTION
300010034670	300010034670		010030034670	010030034670		010030034680 010010044910 010010054940 010010044910	010010024382		300010024230 010020024230	300010024230 010030024230		ACCOUNT #
												P.O. #
04/1 INVOICE TOTAL:	INVOICE		03/0 INVOICE TOTAL: VENDOR TOTAL:	02/2 INVOICE TOTAL:		INVOICE TOTAL:			INVOICE TOTAL:		1 1 1 1 3 1 1	PROJECT
04/17/20 TOTAL:	04/13/20 TOTAL:		03/03/20 TOTAL: OTAL:	02/27/20 TOTAL:		TOTAL:	04/01/20		TOTAL: OTAL:	04/01/20	                     	DUE DATE
248.15 248.15	432.79 432.79		525.20 525.20 568.40	43.20 43.20		44.97 582.89 64.98 309.95 1,297.79 1,297.79	295.00		284.38 143.48 258.38 1,187.40 1,187.40	97.14		ITEM AMT

### VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

PAGE:

INVOICES DUE ON/BEFORE 05/31/2020

																								040120	COMED COMED			M081060	COMA CORE & MAIN		INVOICE # VENDOR #
																								03/12/20				03/19/20	IN LP		INVOICE
	24						18			15	14	13	12	11	10	09	80	07	06	05	04	03	02	01				01		1	TTEM
	7101073024	0/29114032	65/05/03	62308405	1550I	1 9 3	2323117051	1532148012	0030163001	0255144168	2676085011	2289551008	2599100000	0495111058	6987002019	9705026025	4997016005	1862215004	0524674020			7101160	2244132001	1751280				CREDIT FOR B-BOX REPAIR			DESCRIPTION
	310010024260	310010024260	010030024260	010030024260	300010024260	310010024260	300010024260	310010024260	300010024260	300010024260	300010024260	300010024260	300010024260	300010024260	300010024260	300010024260	310010024260	310010024260	010030024260	010030024260	010030024260	010030024260	300	010030024260				300010034670		1	ACCOUNT #
INVOICE TOTAL:																					ė.					VENDOR TOTAL:	INVOICE TOTAL:				TO GET O GET
TOTAL:																								05/12/20		COTAL:		04/19/20			
17,730.55	569.94	77.25	162.29	36.29	892.77	275.81	145.09	203.56	1,460.26	341.58	3,088.27	98.37	1.766.62	137.43	167.61	617.61	153.47	4,082.61	19.08	10.50	2 . 0	67.7	208.9	1,075.29		549.54	131	-131.40		TIEM AMI	

CONEEN CONSTELLATION NEW ENERGY, INC.

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VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

68517A	EEI	031320	DIEN	107185	DEENT	CONEEN 1693529	INVOICE VENDOR #
	ENGINEERING		DIRECT ENERGY		DEENTERPRISES	NEEN CONSTELLATION 69352928101A	#
03/10/20	ENTERPRISES,	03/13/20	GY BUSINESS	03/25/20	ES, INC.	ON NEW ENERGY, 03/09/20 01	INVOICE 1
01 02 03 04 05 05 06 07 07 07 07 07 07 07 07 07 07 07 07 07	, INC	01 02 03		01		Н	ITEM #
HA0757 PRETRIMT INV68517  HA1509 WM RYAN INV68518  HA1604 LOVE'S INV68519  HA1610 HAMP CORP CNT INV68520  HA1706 PRI UTLY PERMT INV68521  HA1809 T-MOBILE INV68522  HA1811 LAZAR INV68523  HA1811 LAZAR  HA1811 LAZAR  HA1814 METRIX INV68525  HA1832 HOME GALLERY INV68526  HA1911 STANLEY INV68527  HA2000 GEN ENG 2020 INV68528  HA2001 GEN ENG WTR INV68529	Ω.	1510867 1510866 1510796 1510797		HAND SANITIZER		INC. ENERGY SERVICE	DESCRIPTION
310010024360 010000002059 010000002072 010000002084 010010024361 010000002105 010000002107 010000002107 010000002108 010000002109 010000002139 010000002133 010010024360 300010024360		300010024260 310010024260 300010024260 310010024260		010020034680		300010024260	ACCOUNT #
							P.O. #
		04/1 INVOICE TOTAL: VENDOR TOTAL:		04/2 INVOICE TOTAL: VENDOR TOTAL:		04/ INVOICE TOTAL: VENDOR TOTAL:	PROJECT
04/10/20		04/13/20 OTAL: TAL:		04/25/20 OTAL: )TAL:		04/09/20 TOTAL:	DUE DATE
47.75 252.00 104.00 378.00 376.50 76.50 2,538.00 197.00 5,526.75 2,165.75 178.00 1,314.25		1,231.22 286.26 2,449.59 7,104.85 11,071.92 11,071.92		132.30 132.30 132.30		100.63 100.63 100.63	ITEM AMT

> VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

INVOICES DUE ON/BEFORE 05/31/2020

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6-954-02761A	FEDEX	20033	200016	ESI	00130227	00129352A	ENCS		68517A	EEI	INVOICE VENDOR #
761A	FEDEX			ESI CONSULTANTS,		2A	ENTRE COMPUTER			ENGINEERING	#
03/11/20		01/15/20	03/09/20	ANTS, LTD	03/31/20	02/27/20	TER SOLUTIONS		03/10/20	ENTERPRISES,	INVOICE DATE
01		01	01		01	01 02 03	SNS	16	14 15		ITEM
JH NORTHERN BUILDERSW		CONSTRUCTION	CONSTRUCTION		100 TECH HOURS	VH - ADM PD STREETS WATER		HA2006 TUSCNY WOODS INV68532 HA2008 RT 20 WTR MAIN INV68533	HA2002 GEN ENG WST WTR IN68530 HA2003 CRS ANNUL CERT INV65831	INC.	DESCRIPTION
010000002114		640030064371	640030064371		010000001800	010010024380 010020024380 010030024380 300010024380		010010024360 300010024360	310010024360 010010024360		ACCOUNT #
											P.O. #
03/2 INVOICE TOTAL: VENDOR TOTAL:		02/1 INVOICE TOTAL: VENDOR TOTAL:	04/0 INVOICE TOTAL:		04/3 INVOICE TOTAL: VENDOR TOTAL:	03/2		INVOICE TOTAL: VENDOR TOTAL:	0		PROJECT D
03/26/20 TAL: AL:		02/15/20 )TAL: ?AL:	04/09/20 TAL:		04/30/20 TAL: 'AL:	7/20			04/10/20		DUE DATE
63.06 63.06 63.06		999.53 999.53 1,894.25	894.72 894.72		9,000.00 9,000.00 16,503.14	2,629.98 3,145.64 577.09 1,150.43 7,503.14		907.25 3,201.50 20,753.25 20,753.25	668.50 2.051.00		ITEM AMT

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FOX VALLEY FIRE & SAFETY

DATE: 03/31/20 TIME: 16:29:24 ID: AP441000.WOW VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT PAGE:

183.74 183.74	04/05/20 INVOICE TOTAL:	010020024110	AIR FILTERS	01	03/05/20	548591
33.44	04/03/20 INVOICE TOTAL:	010030034680	FILTER	01	03/03/20	548412
101.28	04/03/20 INVOICE TOTAL:	010030034680	COUPLINGS AND FITTINGS	01	03/03/20	548368
					RE AUTO PARTS	HAAUPA HAMPSHIRE
96.56 96.56 96.56	04/03/20 INVOICE TOTAL: VENDOR TOTAL:	310010034670	BALLAST KIT	01	03/04/20	9463982844
					R	GRAI GRAINGER
65.85 65.85	04/02/20 INVOICE TOTAL: VENDOR TOTAL:	010020034690	UNIFORM	01	03/03/20	015169696
					LLC	GALL GALLS L
336.86 336.86 1,488.36	04/19/20 INVOICE TOTAL: VENDOR TOTAL:	300010024120	REGULATOR REPAIR	01	03/19/20	INV2000607
1,151.50 1,151.50	04/17/20 INVOICE TOTAL:	310010024120	WWTP MASTER METERS CALIBRATION	01	03/17/20	INV2000580
				INC.	& ASSOCIATES,	GAASIN GASVODA
85.00 85.00 85.00	03/27/20 INVOICE TOTAL: VENDOR TOTAL:	010020024120	RECHARGE	01	02/26/20	INV0338501A
				YTE	LEY FIRE & SAFETY	FISA FOX VALLEY
ITEM AMT	P.O. # PROJECT DUE DATE	ACCOUNT #	DESCRIPTION	ITEM	INVOICE DATE	INVOICE # VENDOR #

#### VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

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13620	ннсі н	550416	550383	549766	549696	549695	549694	549664	549521	549354	548679	HAAUPA H	INVOICE # VENDOR #
02/23/20	HAMPSHIRE HEATING & CO	03/26/20	03/26/20	03/18/20	03/18/20	03/18/20	03/18/20	03/17/20	03/16/20	03/13/20	03/06/20	HAMPSHIRE AUTO PARTS	INVOICE
01	COOLING	01	01	01	01	01	01	01	01	01	01		TTEM
OFFICE HEATER	4)	BRAKLEEN	OIL AND FILTER	BATTERY	WIPER BLADES	CREDIT CORE DEPOSIT	BATTERY/CORE DEPOSIT	VEHICLE BULBS	MIRROR	CREDIT	PENETRANT OIL		DESCRIPTION
010030024100		010030034670	010030034670	010020024110	310010034670	310010034670	310010034670	010020024110	010030034680	010030034680	010030034660		ACCOUNT #
													P.O. #
03/24/20 INVOICE TOTAL: VENDOR TOTAL:		04/26/20 INVOICE TOTAL: VENDOR TOTAL:	04/26/20 INVOICE TOTAL:	04/18/20 INVOICE TOTAL:	04/18/20 INVOICE TOTAL:	04/18/20 INVOICE TOTAL:	04/18/20 INVOICE TOTAL:	04/17/20 INVOICE TOTAL:	04/16/20 INVOICE TOTAL:	04/13/20 INVOICE TOTAL:	04/06/20 INVOICE TOTAL:		PROJECT DUE DATE
630.00 630.00 630.00		10.76 10.76 1,371.94	207.47	5.50 5.50	11.16 11.16	-54.00 -54.00	693.96 693.96	9.47	33.17 33.17	-24.00 -24.00	159.99 159.99		ITEM AMT

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DATE: 03/31/20 TIME: 16:29:24 ID: AP441000.WOW

			N	KONICA MINOLTA BUS SOLUTION	KONMIN
750.00 750.00 850.00	04/19/20 INVOICE TOTAL: VENDOR TOTAL:	-4 010010024380	JANITORIAL SERVICE 3-19 TO 4-4	03/19/20 01	031920
100.00	03/31/20 INVOICE TOTAL:	010010024380	VH CLEANING 3-4/3-18	03/01/20 01	030120A
				JEFFREY R KEEGAN	KCCC .
2,036.00 6,108.00 6,108.00	INVOICE TOTAL: VENDOR TOTAL:	310010024210	MAI WORKERS COMP	C	
2,036.00	05/01/20	010010024210	WORKERS	03/16/20 01 02	61442
				ILLINOIS PUBLIC RISK FUND	IPRF
109.54 317.66	INVOICE TOTAL: VENDOR TOTAL:				
109.54	04/11/20	010010034650	PAPER	03/11/20 01	622052-0
152.60 152.60	04/09/20 INVOICE TOTAL:	010010034650	TONER	03/09/20 01	621870-0
55.52 55.52	04/20/20 INVOICE TOTAL:	010010034650	PAPER PRODUCTS	03/03/20 01	621734-0
			SUPPLY	IPO/DBA CARDUNAL OFFICE	IPODBA
24,304.00 24,304.00 24,304.00	03/28/20 INVOICE TOTAL: VENDOR TOTAL:	310010024120	PUMP 6 IMPELLER REHAB	02/28/20 01	α ω σ
				HYDROAIRE SERVICE INC	HYAIIN
ITEM AMT	P.O. # PROJECT DUE DATE	ACCOUNT #	DESCRIPTION	# INVOICE ITEM DATE #	INVOICE VENDOR #

#### VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

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278.19	INVOICE TOTAL:				
278 19	04/03/20	010030034660	0 01 GAL AND FILTER	03/03/20	A74868A
			ES, INC.	MARTIN IMPLEMENT SALES,	MAIM
1,099.82	VENDOR TOTAL:				
555.25	04/23/20	310010024160	0 01 MCDONALD'S LIFT STATION	03/24/20	20992
544.57 544.57	04/23/20 INVOICE TOTAL:	310010024160	0 01 HAMPSHIRE LIFT STATION	03/24/20	20989
			SPECIALIST	LIONHEART CRTAL PWR S	THE
30.00 30.00 65.00	04/01/20 INVOICE TOTAL: VENDOR TOTAL:	010020024310	0 01 GL TRAINING CONFERENCE	03/11/20	0311200
35.00 35.00	04/01/20 INVOICE TOTAL:	010020024310	0 01 JM TRAINING CONFERENCE	03/11/20	031120B
				LERMI	LERMI
1,840.00 1,840.00 1,840.00	03/13/20 INVOICE TOTAL: VENDOR TOTAL:	010010024380	0 01 ACCOUNTING ASSISTANCE	02/13/20	43512
			LP	LAUTERBACH & AMEN, LLP	LAAM
202.18 202.18 704.38	04/21/20 INVOICE TOTAL: VENDOR TOTAL:	010020024340	0 01 PD MONTHLY MAINTENANCE	706 03/22/20	265000706
502.20 502.20	03/30/20 INVOICE TOTAL:	010010024340	0 01 VH QUARTERLY MAINTENANCE	991A 02/29/20	264541991A
			SOLUTION	KONICA MINOLTA BUS SC	KONMIN
ITEM AMT	P.O. # PROJECT DUE DATE	ACCOUNT #	ITEM # DESCRIPTION	INVOICE # INVOICE	INVOICE VENDOR #

### VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

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### DETAIL BOARD REPORT

MENA MENARDS - SYCAMORE VI	030920A 03/09/20 01 VH INTERNET 010010024230	206052A 03/07/20 01 SSA#10 UNIT 2 520010024921 02 SSA#11 UNIT 4 520010024931 03 SSA#11 UNIT 5 520010024931 IN	030620 03/06/20 01 100.001 MISC MATTERS 010010024370 02 100.002 MEETINGS 010010024370 010010024370 03 100.007 PROSECUTION 010010024370 010010024370 01001002089 05 100.164 DUI PROSECUTION 010020024370 01002002114 0100.208 PETAG 01000002114 01000002114 01000002147 IN MCGINTY BROS. INC.	A74939A 03/06/20 01 CREDIT FOR FILTER 010030034660 II WARSCH MARK SCHUSTER, P.C.	INVOICE # INVOICE ITEM VENDOR # DATE # DESCRIPTION ACCOUNT # P.O. # PROMAIN MARTIN IMPLEMENT SALES, INC.
010010024230		520010024921 520010024931 520010024931	TERS ION 2 2 ECUTION LLC - SU PET		DUE ON/BEFORE 05/31/2020  ACCOUNT #
INVOICE TOTAL: VENDOR TOTAL:	04/06/20	03/17/20 INVOICE TOTAL: VENDOR TOTAL:	04/06/20 INVOICE TOTAL: VENDOR TOTAL:	04/06/20 INVOICE TOTAL: VENDOR TOTAL:	1
	66.90 66.90 66.90	5,400.00 3,600.00 6,600.00 15,600.00	2,726.00 590.00 1,350.00 705.00 1,071.00 1,05.00 1,328.70 7,875.70	-71.50 -71.50 206.69	ITEM AMT

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VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

1534927A	1534926A	MOTREQ	P451119	P451110	MISA	021620A	METL	23148	23013	22708	MENA	INVOICE VENDOR #
		MONROE TRUCK			MIDWEST SALT		METLIFE				MENARDS - S	#               
03/05/20	03/03/20	EQUIPMENT,	03/18/20	03/17/20		02/16/20		03/11/20	03/09/20	03/03/20	SYCAMORE	INVOICE DATE
01	01	, INC.	01	01		01 02 03 04		01	01	01		ITEM
INVOICE 1534927	INVOICE 1534926		WATER TREATMENT SALT	WATER TREATMENT SALT		ADM PD STREETS SEWER WATER		GARAGE CABINET	PVC PIPE	LED WALL PACKS		DESCRIPTION
010030054945	010030054945		300010034680	300010034680		010010014031 010020014031 010030014031 310010014031 300010014031		010030034670	010020024120	310010034670		ACCOUNT #
												P.O. #
03/12/20 INVOICE TOTAL: VENDOR TOTAL:	03/12/20 INVOICE TOTAL:		04/18/20 INVOICE TOTAL: VENDOR TOTAL:	04/17/20 INVOICE TOTAL:		03/01/20 INVOICE TOTAL: VENDOR TOTAL:		04/11/20 INVOICE TOTAL: VENDOR TOTAL:	04/09/20 INVOICE TOTAL:	04/03/20 INVOICE TOTAL:		PROJECT DUE DATE
66,002.00 66,002.00 132,004.00	66,002.00 66,002.00		2,794.44 2,794.44 5,478.12	2,683.68 2,683.68		120.60 1,396.10 531.14 167.05 392.06 2,606.95 2,606.95		219.99 219.99 634.51	81.62 81.62	319.92 319.92		ITEM AMT

VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

PAGE:

457487321001	457434352001	457432913001	450000406001	449321568001	OFDE	030920	NIOR		040120	NICOR	53721	MUWESE	INVOICE VENDOR #
321001	352001	913001	106001	568001	OFFICE DEPOT,		NICHOLAS OR			NICOR		MUNIWEB	# [2] 
03/13/20	03/14/20	03/13/20	03/02/20	02/28/20	T, INC.	03/09/20	ORSOLINI		03/13/20		03/04/20		INVOICE DATE
01	01	01	01	01		01			01		01		HTEM
SUPPLIES	SUPPLIES	SUPPLIES	FLASH DRIVE	DVD/ENVELOPES		CELL PHONE STIPEND		00-00-10047	19-61-05-1000 0 87-56-68-1000 5		WEBSITE HOSTING		DESCRIPTION
010020034650	010020034650	010020034650	010020034650	010020034650		010020024230		310010024260	310010024260 300010024260		010010024230		ACCOUNT #
													P.O. #
04/18/20 INVOICE TOTAL:	04/18/20 INVOICE TOTAL:	04/18/20 INVOICE TOTAL:	04/04/20 INVOICE TOTAL:	04/04/20 INVOICE TOTAL:		04/09/20 INVOICE TOTAL: VENDOR TOTAL:		INVOICE TOTAL: VENDOR TOTAL:	04/28/20		04/04/20 INVOICE TOTAL: VENDOR TOTAL:		CT DUE
/20 36.27 36.27	/20 33.55 33.55	/20 38.07 38.07	/20 59.99 59.99	/20 69.67 69.67		/20 40.00 40.00 40.00		119.93 3,146.38 3,146.38	2,		/20 150.00 150.00 150.00		DATE ITEM AMT

#### VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

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DETAIL BOARD REPORT

QUCO	72013-01	PSI	31037		31037	PITB	022920A	PETPRO		236	PASS		45748	OFDE	INVOICE VENDOR #
QUILL COR	01	PUMP SUPPLY	3103774101A		3103773451A	PITNEY BO	0A	PETERSEN			PASSARELLI		57487905001	OFFICE DE	CCE #
CORPORATION	03/19/20	LY INCORPORATED	02/27/20		02/27/20	BOWES GLOBAL F	02/29/20	FUELS, INC.		03/12/20	I LAW LLC		03/13/20	DEPOT, INC.	INVOICE DATE
	01	ED	01	03	01	FINANCIAL	01			01			01		H TEM
	CHLORINE BOOSTER PUMP PURCHASE		PD LEASE	LEASING CHARGES LEASING CHARGES LEASING CHARGES		IAL	STREETS			PD			SUPPLIES		DESCRIPTION
	300010034670		010020024280	010030024280 300010024280 310010024280	010010024280		010030034660			010020024370			010020034650		ACCOUNT #
															P.O. #
	04/1 INVOICE TOTAL: VENDOR TOTAL:		04/2 INVOICE TOTAL: VENDOR TOTAL:	INVOICE T			03/ INVOICE TOTAL VENDOR TOTAL:		INVOICE TOTAL: VENDOR TOTAL:			INVOICE TOTAL:			PROJECT
	04/19/20 OTAL: TAL:		04/29/20 OTAL: TAL:	TOTAL:	03/30/20		03/29/20 TOTAL: TOTAL:		OTAL:	04/12/20		TOTAL:			DUE DATE
	1,852.72 1,852.72 1,852.72		166.05 166.05 306.63	35.14 35.15 35.15 140.58	35.14		288.88 288.88 288.88		425.00 425.00	425.00		20.20 20.20 257.75		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ITEM AMT

DATE: 03/31/20 TIME: 16:29:25 ID: AP441000.WOW VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

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INVOICE # VENDOR #	INVOICE I	ITEM # DESCRIPTION	ACCOUNT # P.O.	. # PROJECT DUE DATE	ITEM AMT
QUCO QUILL CORP	CORPORATION				
5296540	03/06/20	01 BADGE LANYRD COMBO	010030034680	04/06/20 INVOICE TOTAL:	26.99 26.99
5717027	03/20/20	01 SUPPLIES	010030034650	04/20/20 INVOICE TOTAL: VENDOR TOTAL:	71.56 71.56 98.55
RAOH RAY O'HERRON	ON CO., INC.				
2013838-IN	03/06/20	01 UNIFORM	010020034690	04/06/20 INVOICE TOTAL:	13.73 13.73
2015661-IN	03/16/20	01 UNIFORM	010020034690	04/16/20 INVOICE TOTAL:	781.97 781.97
2017564-IN	03/21/20 (	01 UNIFORM	010020034690	04/21/20 INVOICE TOTAL: VENDOR TOTAL:	640.84 640.84 1,436.54
REAN RENEWAL BY	ANDERSON				
031020	03/10/20 (	01 REFUND OF INSPECTION FEES	010007003300	04/10/20 INVOICE TOTAL: VENDOR TOTAL:	42.00 42.00 42.00
RKQUSE RK QUALITY	SERVICES				
14887	03/05/20 (	01 OIL CHANGE AND FILTER	010020024110	04/05/20 INVOICE TOTAL:	58.69 58.69
14966	03/12/20 (	01 OIL CHANGE AND FILTER	010020024110	04/12/20 INVOICE TOTAL: VENDOR TOTAL:	58.34 58.34 117.03

RODB

ROGER BURNIDGE

### VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

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54478	54477	STARK	021820A	STAINS	D11/19-22A	SPFI	031520	SCHM	030120A	RODB	INVOICE VENDOR #
		STARK & SON	Ð	STANDARD IN	-22A	SPEER FINAN		FREDI BETH	A	ROGER BURN	# E
02/26/20	02/26/20	TRENCHING,	02/18/20	INSURANCE COMPANY	02/21/20	FINANCIAL, INC.	03/15/20	SCHMUTTE	03/01/20	BURNIDGE	INVOICE DATE
01	01	INC	01 02 03 04 06	ANY	01		01		01		TTEM
REPAIR WATER MAIN	REPAIR WATER MAIN		ADM PD STREETS SEWER WATER EAP		GEN OBLIGATION REFUNDING BONDS		FEB'S PROFESSIONAL SERVICES		PD LEASE		DESCRIPTION
300010024160	300010024160		010010014035 010020014035 010030014035 310010014035 310010014035 010010024376		010010024380		010010024380		010020024280		ACCOUNT #
											P.O. #
03/26/20 INVOICE TOTAL:	03/26/20 INVOICE TOTAL:		03/01/20 INVOICE TOTAL: VENDOR TOTAL:		03/21/20 INVOICE TOTAL: VENDOR TOTAL:		04/15/20 INVOICE TOTAL: VENDOR TOTAL:		03/31/20 INVOICE TOTAL: VENDOR TOTAL:		PROJECT DUE DATE
2,490.00 2,490.00	2,176.00 2,176.00		60.64 188.56 53.28 14.15 23.57 9.45 349.65		802.50 802.50 802.50		759.34 759.34 759.34		4,685.36 4,685.36 4,685.36		ITEM AMT

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22922	22911	22910	TEME	241891	240998	237528	237307	TEK	800674	STCO	54510	STARK	INVOICE VENDOR #
			TESSENDORF N					TEKLAB, INC		STERLING COI		STARK & SON	#
03/04/20	03/03/20	03/03/20	MECHANICAL	03/25/20	03/03/20	12/03/19	11/26/19		02/26/20	CODIFIERS, INC.	03/12/20	TRENCHING,	INVOICE DATE
01	01	01	SERVICE	01	01	01	01		01	īc.	01	INC	# # EM
REPAIR BOILER	REPAIR BOILER	REPAIR BOILER	ICE	MONTHLY NPDES TESTING	WWTP CHEMICALS	MONTHLY NPDS TESTING	TESTING		CODIFICATION OF ORDINANCES		REMOVE/REPLACE FIRE HYDRANT		DESCRIPTION
010010024100	310010024100	310010024100		310010024380	310010024380	310010024380	310010024380		010010024470		300010024160		ACCOUNT #
													P.O. #
04/04/20 INVOICE TOTAL: VENDOR TOTAL:	04/03/20 INVOICE TOTAL:	04/03/20 INVOICE TOTAL:		04/24/20 INVOICE TOTAL: VENDOR TOTAL:	04/02/20 INVOICE TOTAL:	02/02/20 INVOICE TOTAL:	12/26/19 INVOICE TOTAL:		03/26/20 INVOICE TOTAL:		04/12/20 INVOICE TOTAL: VENDOR TOTAL:		PROJECT DUE DATE
387.38 387.38 1,006.08	369.75 369.75	248.95 248.95		460.50 460.50 2,792.00	821.00 821.00	460.50 460.50	1,050.00		2,922.00 2,922.00 2,922.00		16,442.88 16,442.88 21,108.88		ITEM AMT

#### VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

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192.50 192.50 2,492.50	04/19/20 INVOICE TOTAL: VENDOR TOTAL:	010030024130	ALLEY REPAIR	03/19/20 01	8078
2,300.00	04/18/20 INVOICE TOTAL:	010030024160	TREE TRIMMING	03/18/20 01	8077
				TREES UNLIMITED C P INC	TRUN
246.13 246.13 246.13	03/29/20 INVOICE TOTAL: VENDOR TOTAL:	010030024130	GLOVES	02/29/20 01	82380
				TRYAD SOLUTIONS, INC.	TRSO
163,022.50 163,022.50 164,022.50	03/12/20 INVOICE TOTAL: VENDOR TOTAL:	010030054945	CONTRACT #VM203006116	03/03/20 01	VM203006116A
1,000.00	03/27/20 INVOICE TOTAL:	010030054945	DOWNPAYMENT 2021 FREIGHTLINER	DA 03/27/20 01	032720A
			INC	TRUCK COUNTRY OF WISCONSIN	TRCOW
16.07 61.07 153.21 153.21	INVOICE TOTAL: VENDOR TOTAL:	010020024380 310010034650	ID	02 03	
76 07	03/25/20	010030034650	SECURE ID CARDS	02/25/20 01	131310
			PRESS	THE POLICE AND SHERIFFS	THPOSHPR
928.57 928.57	INVOICE TOTAL: VENDOR TOTAL:				
309.52 309.52		300010024340	W/S/R UTILITY BILLS	03	
309.53	04/09/20	290010024340	VTILITY	03/09/20 01	24546
			INC.	THIRD MILLENNIUM ASSOC, II	THMI
ITEM AMT	P.O. # PROJECT DUE DATE	ACCOUNT #	M DESCRIPTION	CE # INVOICE ITEM # DATE #	INVOICE VENDOR #

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VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

9850583897	HAMA	9850583896	VWPD	32177823A	VUMA		021720A	VSP	30444A	VETO	118208070	ULIN	INVOICE VENDOR #
83897	VERIZON WIR	83896	VERIZON WIR	823A	VULCAN MATE		0A	VISION SERVICE	А	VETO ENTERP	8070	ULINE	CE #
03/15/20	WIRELESS	03/15/20	WIRELESS	12/17/19	MATERIALS		02/17/20	TCE PLAN (IL)	03/17/20	ENTERPRISES, INC	03/19/20		INVOICE DATE
01		01		01		05	01		01		01		TTEM
ADM		PD		BEDDING STONE		WATER	ADM PD STREETS		NEW SQUAD		GLOVES		DESCRIPTION
010010024230		010020024230		300010034670		310010014037 300010014037	010010014037 010020014037 010030014037		010020054930		010020034680		ACCOUNT # P
													P.O. #
O		04/C INVOICE TOTAL: VENDOR TOTAL:		03/3 INVOICE TOTAL: VENDOR TOTAL:		INVOICE TOTAL: VENDOR TOTAL:	C		03/2 INVOICE TOTAL: VENDOR TOTAL:		04/1 INVOICE TOTAL: VENDOR TOTAL:		PROJECT
04/07/20		04/07/20 TAL: AL:		03/31/20 TAL: AL:		AI:	02/17/20		27/20		04/19/20 TAL: AL:		DUE DATE
56.34		430.88 430.88 430.88		144.32 144.32 144.32		18.40 41.55 277.86 277.86	22.69 135.50 59.72		41,919.00 41,919.00 41,919.00		85.65 85.65	                 	ITEM AMT

## DATE: 03/31/20 TIME: 16:29:25 ID: AP441000.WOW VILLAGE OF HAMPSHIRE DETAIL BOARD REPORT

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565,799.59	TOTAL ALL INVOICES:				
94.91 919.32 919.32	INVOICE TOTAL: VENDOR TOTAL:				
221.97 358.84 187.26	04/07/20	010020024230 010030024230 300010024230 310010024230	02 PD 03 STREETS 04 WATER 05 SEWER	03/15/20	9 a 3 C 5 a 3 a 9 y
				RIZON WIRELESS	VWVH
ITEM AMT	. # PROJECT DUE DATE	ACCOUNT # P.O. #	ITEM # DESCRIPTION	# INVOICE	INVOICE # VENDOR #