

HARTSVILLE/TROUSDALE COUNTY METROPOLITAN GOVERNMENT

**EMERGENCY SERVICES COMMITTEE**

*Amber Russell, Chair*  
*David Nollner, Vice Chair*

*David Thomas, Secretary*  
*Brian Crook*

*Richard Johnson*  
*Lesley Overman*

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*Ex-Officio members by position, non-voting*

*Matt Batey, EMA/EMS*  
*Tim Moore, Rescue*

*Mark Beeler, Vol Fire*  
*Ray Russell, Sheriff*

*Wayland Cothron, Chief Deputy*  
*Dr. CM Tripp, MD Med Ex*

APRIL 10, 2024 | 7:00PM | TC COMMUNITY CENTER

**Agenda**

1. Call to Order
2. Review Minutes from January 29, 2024
3. Discussion Items
  - A. Monthly Reports
    - 1) EMA/EMS – *Matt Batey*
      - (a) Status of Ordered Ambulance
      - (b) White Ambulance – painting/wrapping status
      - (c) New Supply Chain
      - (d) Emergency Shelter update
      - (e) Maintenance needs
      - (f) Hardship Waivers
      - (g) Training
      - (h) Budget
    - 2) Fire – *Mark Beeler*
      - (a) Brush Truck Status
      - (b) Gear
      - (c) 100<sup>th</sup> Anniversary
      - (d) Training
      - (e) Training Instructors
      - (f) Burn Permits and Blasting Permits
      - (g) Per Diem Increase
      - (h) Budget
    - 3) Rescue – *Timmy Moore*
      - (a) Repairs to Vehicles
      - (b) Repairs to Building
      - (c) Surplus Items
      - (d) Tahoe – striped and equipped
      - (e) Training
      - (f) Training Instructors
      - (g) Budget
  - B. Discussion Items
    - 1) Fire/Rescue Per Diem Increase
    - 2) Blasting Permit
    - 3) Other Discussion
4. Public Comments
5. Adjourn



HARTSVILLE/TROUSDALE COUNTY GOVERNMENT  
**EMERGENCY SERVICES COMMITTEE**  
JANUARY 29, 2024 | MINUTES

MEMBERS PRESENT

Amber Russell, *Chair*  
David Nollner, *Vice Chair*

David Thomas, *Secretary*  
Brian Crook

Lesley Overman

MEMBERS ABSENT

Richard Johnson

EX-OFFICIO MEMBERS BY POSITION, NON-VOTING PRESENT

Matt Batey, *EMA/EMS*

Kirk "Bud" Sutherland, *Rescue*

Mark Beeler, *Fire*

Meeting was opened by Chair Amber Russell. A quorum was determined with five of six members present.

Minutes from November 8, 2023 had been passed out prior to meeting and were read for corrections or amendments. A correction was noted that David Thomas made the second motion on the approval of the August 9<sup>th</sup> minutes. David Nollner made the motion to approve with corrections; Brian Crook seconded the motion.

**Minutes were approved with corrections.**

REPORTS FROM DEPARTMENTS

**EMA/EMS** – Matt Batey

- EMPG (Emergency Management Performance Grant) paperwork has begun.
- The Sheriff has asked about constructing an emergency shelter under the Sheriff Station/old fire hall at 210 Broadway for inclement weather such as storms or tornados. Chief Batey and Sheriff are researching the process and costs.
- Hardship waiver application – one was presented to the committee. Committee members reviewed the application.

Motion was made by Brian Crook to approve the waiver application; seconded by David Nollner.

**Application approved w/ opposition.**

- New ambulance is estimated to be delivered in the spring – possibly March/April 2024.
- Batey began the discussion of a potential remount of an older ambulance to a newer chassis. It is a 2018 model with 216,000 miles. Over 200K miles, state requires additional maintenance. This "box" was previously remounted in 2018 for \$96,000. The current costs would be estimated at \$160,000 – 190,000 depending on the chassis. It will be a 18-24 month turnaround.
- New supply tracking system to streamline the management of medical supplies. Found a program with initial cost of about \$2,500 and a recurring annual cost of \$1,875. This would be the same program that Macon County uses and recommends. Thomas asked how they are tracking now. Chief Batey - The current program is not efficient and not user friendly.
- Chair Russell asked about wrapping the orange/white ambulance to coordinate with other vehicles. Chief Batey said it would need to be painted due to it already being painted and wraps do not last long on painted vehicles.
- EMS has been approved for the annual training stipend through the state.

**Fire Dept – Mark Beeler**

- Turn out gear follow up – will need 17sets, have 12 on order. Some items have started arriving in recent weeks. Estimated delivery was 100 days from date of order.
- Commission approved the breathing air compressor. That purchase was made at under \$32,000. Should be at the station within the month. Thomas asked about the issues with the current compressor. Beeler said it is the start switch and a compressor valve. Technician is looking for parts that would fit the 27 yr old compressor. The current will become a backup. Beeler says there is room in the storage area for both.

**Rescue – Kirk “Bud” Sutherland.**

- Training was scheduled for November 2023; however it will need to be rescheduled for another time due to lack of emergency units available. Completed the Vanessa K driving certification in January 2024. An extrication course is being considered from Smith County. Lebanon/WEMA may be offering an advanced extrication course soon. Russell asked if any fees are associated with trainings. With the advanced classes through TARS, there is a \$150 per participating member. Other trainings depend on the vendor used.
- Repairs to the building are needed. Damage from the windstorm in the fall, bathroom walls, insulation in the bays. Priority needs to be on the mold issues in the bathrooms. A heater has been donated to the building and installed in the main office. The heater in the back has been fixed recently. Public Works director Sallee has been over to evaluate the issues. Volunteer Pool and Hardware has also offered solutions to remedy the mold issues. The building is not insulated properly, pictures provided to show the concerns.

**DISCUSSION ITEMS**

1. Incentive training Program for Fire and Rescue – Program offered by the state to certify Firefighters. Beeler stated that locally there is no advantage. It is a cumbersome process. You must use certified instructors, keep impeccable records, and then a small stipend is awarded. If the County is aiming to pay the volunteers more, consider raising the per diem. Currently the rate is \$30 per call. Russell asked the volunteers in attendance if they were interested in the training. Members have already been through the program. The program is for newly enrolled volunteers to the department. Beeler offered there are two courses supplied by the state. Together they have 80 hours of training. This training is included in standard operating requirements. Members must have this training within 3 years of joining the department.
2. Fire/Rescue Evaluation Update – information is not ready for distribution. Chief Batey will be meeting with the consulting service in the coming week. The report will be released when the analysis is complete.

**Public Comment**

None presented.

Motion to adjourn by Thomas; seconded by Nollner

**Adjourned at 6:32pm**

*Minutes submitted by  
David Thomas*

# EMS / AMBULANCE



Health

# INSPECTION REPORT AMBULANCE / INVALID VEHICLE / AIR MEDICAL

Service Name: <i>Transdale County EMS</i>	Date: <i>July 7, 2023</i>	Mileage / Hours: <i>139429</i>
VIN / Serial #: <i>GM F184456</i>	Permit #: <i>85-04-06</i>	License Tag #: <i>2101 CF</i>
Make/Model: <i>GM</i>	Year: <i>2017</i>	Unit ID: <i>11</i>

Please check (✓) one from each column

<input checked="" type="checkbox"/> Pass	<input checked="" type="checkbox"/> Type 1	<input checked="" type="checkbox"/> Current	<input checked="" type="checkbox"/> ALS
<input checked="" type="checkbox"/> Pass with Warning	<input type="checkbox"/> Type 2	<input type="checkbox"/> New Vehicle	<input type="checkbox"/> BLS
<input type="checkbox"/> Conditional	<input type="checkbox"/> Type 3	<input type="checkbox"/> Re-mounted	<input type="checkbox"/> Specialty Use
<input type="checkbox"/> Failed	<input type="checkbox"/> Invalid Vehicle (IV)		
<input type="checkbox"/> Failed - Removed from service	<input type="checkbox"/> Rotor Wing		
<input type="checkbox"/> Re-inspection	<input type="checkbox"/> Fixed Wing		

### Sanitation Requirements

A	U	Required	A	U	Required					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	N	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N	Floor sanitary	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N	Cabinets and storage sanitary
<input checked="" type="checkbox"/>	<input type="checkbox"/>	N	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N	Seats and Ceiling sanitary	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N	Upholstery Intact (No tears or holes)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2)	Oxygen minimum 500PSI	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2)	Portable Oxygen Cylinders
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	Vehicle windows intact.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	Vehicle body and paint intact.

### Safety Devices

A	U	Required	A	U	Required					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (3)	Fire Extinguishers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (3)	Reflective Triangles
<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (2)	Flashlights	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (2)	Reflective Safety Wear
<input checked="" type="checkbox"/>	<input type="checkbox"/>	N	<input type="checkbox"/>	<input type="checkbox"/>		DOT Emergency Response Guide	<input type="checkbox"/>	<input type="checkbox"/>		Reserved

### Oxygen - Airway - Suction - Ventilation Devices

A	U	Required	A	U	Required					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (1ea)	Bag Valve Device - Adult	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (1ea)	Oropharyngeal Airways
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (1ea)	Bag Valve Mask Device - Pediatric	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (1ea)	Nasopharyngeal Airways
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (1)	Bag Valve Mask Device - Neonatal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (1)	Blind Insertion Airway
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (1)	End Tidal CO2 Detector - Adult	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (1)	End Tidal CO2 Detector - Pediatric
<input checked="" type="checkbox"/>	<input type="checkbox"/>	N	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (1)	Nebulizers - Adult and Pediatric	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (1)	CPAP Device
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2ea)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2ea)	Non-Rebreathing Mask - Adult & Ped.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2ea)	Nasal Cannula - Adult & Pediatric
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2)	Installed Suction Device	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2)	Suction Connector Tubing
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2)	Portable Suction Device	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2)	Rigid Suction Tips
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2 ea)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	French Suction Catheters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	Automated External Defibrillator

### Diagnostic and Assessment Devices

A	U	Required	A	U	Required					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	BP Cuff All Sizes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	Stethoscope
<input checked="" type="checkbox"/>	<input type="checkbox"/>	N	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	Bandage Shears	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	Pulse Oximeter
<input checked="" type="checkbox"/>	<input type="checkbox"/>	N	<input type="checkbox"/>	<input type="checkbox"/>		Patient Thermometer	<input type="checkbox"/>	<input type="checkbox"/>		Reserved

### Bandages and Dressing Materials

A	U	Required	A	U	Required					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (2)	Rigid Eye Shields	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (2)	Adhesive Tape
<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (6)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (6)	Gauze Roller Bandage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (6)	Triangular Bandage
<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (25)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (8)	4" X 4" Dressings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (8)	Abdominal/Combine Dressing
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (2)	Occlusive Dressing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N (2)	Burn Sheets
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C (2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	Trauma Tourniquets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	Irrigation Fluid

Hartsville-Trousdale Co Government  
 Statement of Expenditures Summary by Obj by Fund  
 March 2024

Fund : 118 Ambulance Service

Account Number	Account Description	Budget Amount	Budget Amendments	Amended Budget	Month-to-Date Expenditures	Year-to-Date Expenditures	Outstanding Encumbrances	Unencumbered Balance	% Of Budget Exp
<b>50000</b>	<b>General Government</b>								
<b>55000</b>	<b>Public Health And Welfare</b>								
<b>55130</b>	<b>Ambulance/Emergency Medical Services</b>								
131	Medical Personnel	(548,000.00)	56,000.00	(492,000.00)	65,327.94	275,570.59	0.00	(216,429.41)	56.01%
162	Clerical Personnel	(38,310.00)	0.00	(38,310.00)	5,894.40	26,524.80	0.00	(11,785.20)	69.24%
169	Part-Time Personnel	0.00	(56,000.00)	(56,000.00)	997.69	22,745.89	0.00	(33,254.11)	40.62%
187	Overtime Pay	(340,000.00)	0.00	(340,000.00)	55,870.06	253,831.83	0.00	(86,168.17)	74.66%
201	Social Security	(57,431.00)	0.00	(57,431.00)	7,519.89	34,404.21	0.00	(23,026.79)	59.91%
204	State Retirement	(54,467.00)	0.00	(54,467.00)	6,149.25	30,224.37	0.00	(24,242.63)	55.49%
207	Medical Insurance	(84,672.00)	(16,632.00)	(101,304.00)	6,789.53	65,115.05	0.00	(36,188.95)	64.28%
212	Employer Medicare	(13,431.00)	0.00	(13,431.00)	1,758.70	8,046.13	0.00	(5,384.87)	59.91%
306	Bank Charges	(800.00)	0.00	(800.00)	25.46	475.69	0.00	(324.31)	59.46%
307	Communication	(7,000.00)	0.00	(7,000.00)	767.63	3,524.73	0.00	(3,475.27)	50.35%
312	Contracts With Private Agencies	(18,000.00)	0.00	(18,000.00)	960.50	8,484.00	0.00	(9,516.00)	47.13%
317	Data Processing Services	(800.00)	0.00	(800.00)	71.61	633.27	0.00	(166.73)	79.16%
320	Dues And Memberships	(500.00)	0.00	(500.00)	0.00	390.00	0.00	(110.00)	78.00%
322	Evaluation And Testing	(1,000.00)	0.00	(1,000.00)	164.00	572.00	0.00	(428.00)	57.20%
332	Legal Notices, Recording And Court Cost	(200.00)	0.00	(200.00)	0.00	0.00	0.00	(200.00)	0.00%
333	Licenses	(3,000.00)	0.00	(3,000.00)	0.00	680.00	0.00	(2,320.00)	22.67%
335	Maintenance And Repair Services-Buildir	(30,000.00)	0.00	(30,000.00)	0.00	557.90	560.36	(28,881.74)	3.73%
336	Maintenance And Repair Services-Equipr	(2,500.00)	0.00	(2,500.00)	1,660.00	5,312.16	0.00	2,812.16	212.49%
337	Maintenance And Repair Services-Office	(500.00)	0.00	(500.00)	0.00	0.00	0.00	(500.00)	0.00%
338	Maintenance And Repair Services-Vehick	(20,000.00)	0.00	(20,000.00)	6,128.82	15,586.92	503.00	(3,910.08)	80.45%
347	Pest Control	(480.00)	0.00	(480.00)	40.00	320.00	0.00	(160.00)	66.67%
348	Postal Charges	(750.00)	0.00	(750.00)	680.00	1,350.70	0.00	600.70	180.09%
349	Printing, Stationery And Forms	(700.00)	0.00	(700.00)	0.00	0.00	0.00	(700.00)	0.00%
351	Rentals	(3,500.00)	0.00	(3,500.00)	302.32	2,452.72	0.00	(1,047.28)	70.08%
353	Towing Services	(100.00)	0.00	(100.00)	0.00	0.00	0.00	(100.00)	0.00%
355	Travel	(1,000.00)	0.00	(1,000.00)	234.00	234.00	395.75	(370.25)	62.98%
399	Other Contracted Services	(1,500.00)	0.00	(1,500.00)	154.15	1,187.13	0.00	(312.87)	79.14%
410	Custodial Supplies	(2,000.00)	0.00	(2,000.00)	0.00	617.56	0.00	(1,382.44)	30.88%
413	Drugs And Medical Supplies	(38,000.00)	0.00	(38,000.00)	4,070.67	36,279.76	2,332.10	611.86	101.61%
415	Electricity	(6,500.00)	0.00	(6,500.00)	399.81	3,789.35	0.00	(2,710.65)	58.30%
425	Gasoline	(25,000.00)	0.00	(25,000.00)	1,145.67	10,717.23	0.00	(14,282.77)	42.87%
434	Natural Gas	(5,000.00)	0.00	(5,000.00)	510.06	2,477.52	0.00	(2,522.48)	49.55%
435	Office Supplies	(1,500.00)	0.00	(1,500.00)	42.95	557.04	0.00	(942.96)	37.14%

Hartsville-Trousdale Co Government  
 Statement of Expenditures Summary by Obj by Fund  
 March 2024

Fund : 118 Ambulance Service

Account Number	Account Description	Budget Amount	Budget Amendments	Amended Budget	Month-to-Date Expenditures	Year-to-Date Expenditures	Outstanding Encumbrances	Unencumbered Balance	% Of Budget Exp
<b>50000</b>	<b>General Government</b>								
<b>55000</b>	<b>Public Health And Welfare</b>								
<b>55130</b>	<b>Ambulance/Emergency Medical Services</b>								
451	Uniforms	(7,500.00)	0.00	(7,500.00)	175.00	6,220.55	96.75	(1,182.70)	84.23%
454	Water And Sewer	(2,500.00)	0.00	(2,500.00)	0.00	733.42	0.00	(1,766.58)	29.34%
499	Other Supplies And Materials	(500.00)	0.00	(500.00)	89.70	604.64	0.00	104.64	120.93%
506	Liability Insurance	(17,000.00)	0.00	(17,000.00)	0.00	16,874.69	0.00	(125.31)	99.26%
510	Trustee's Commission	(35,000.00)	0.00	(35,000.00)	882.12	20,864.75	0.00	(14,135.25)	59.61%
513	Workman's Compensation Insurance	(33,000.00)	0.00	(33,000.00)	0.00	41,069.60	0.00	8,069.60	124.45%
524	In Service/Staff Development	(5,000.00)	0.00	(5,000.00)	350.00	3,642.79	0.00	(1,357.21)	72.86%
530	Fines, Assessments, And Penalties	(15,200.00)	0.00	(15,200.00)	0.00	0.00	0.00	(15,200.00)	0.00%
599	Other Charges	(2,000.00)	0.00	(2,000.00)	0.00	400.68	0.00	(1,599.32)	20.03%
709	Data Processing Equipment	0.00	0.00	0.00	0.00	610.00	0.00	610.00	100.00%
711	Furniture And Fixtures	(12,000.00)	0.00	(12,000.00)	0.00	4,899.97	0.00	(7,100.03)	40.83%
719	Office Equipment	0.00	0.00	0.00	0.00	4,486.39	0.00	4,486.39	100.00%
<b>Total 55130</b>	<b>Ambulance/Emergency</b>	<b>(1,436,341.00)</b>	<b>(16,632.00)</b>	<b>(1,452,973.00)</b>	<b>169,161.93</b>	<b>913,070.03</b>	<b>3,887.96</b>	<b>(536,015.01)</b>	<b>63.11%</b>
<b>Total 55000</b>	<b>Public Health And Welfare</b>	<b>(1,436,341.00)</b>	<b>(16,632.00)</b>	<b>(1,452,973.00)</b>	<b>169,161.93</b>	<b>913,070.03</b>	<b>3,887.96</b>	<b>(536,015.01)</b>	<b>63.11%</b>
<b>Total 50000</b>	<b>General Government</b>	<b>(1,436,341.00)</b>	<b>(16,632.00)</b>	<b>(1,452,973.00)</b>	<b>169,161.93</b>	<b>913,070.03</b>	<b>3,887.96</b>	<b>(536,015.01)</b>	<b>63.11%</b>
<b>Total For Fund:</b>	<b>118</b>	<b>(1,436,341.00)</b>	<b>(16,632.00)</b>	<b>(1,452,973.00)</b>	<b>169,161.93</b>	<b>913,070.03</b>	<b>3,887.96</b>	<b>(536,015.01)</b>	<b>63.11%</b>

**TROUSDALE COUNTY EMS**

April 01, 2024 3:24:05 PM

**Operations Report**

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Period 09 (24-09)

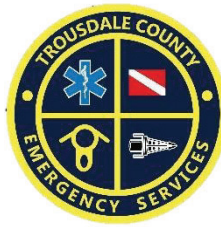
March 2024( Status:Not Closed)

**Cash**

	This Fiscal Year		Last Fiscal Year	
	Month	Year To Date	Month	Year To Date
Total Expenses	\$0.00	\$0.00	\$0.00	\$0.00
Total Non-Transports	0	0	0	0
Total Transports	81	942	95	908
Total Cash	\$58,741.80	\$412,316.28	\$47,638.99	\$414,231.51
<hr/>				
Cash - Adjusted YTD	\$0.00	\$0.00	\$0.00	\$0.00
Total Cash Adjusted	\$0.00	\$0.00	\$0.00	\$0.00
<hr/>				
Total Disc. And W/O	\$45,974.12	\$393,641.22	\$42,439.76	\$419,292.53
Disc. And W/O Adjusted YTD	\$0.00	\$0.00	\$0.00	(\$300.00)
Total Disc. W/O Adjusted	\$0.00	\$0.00	\$0.00	(\$1,138.00)
Total Charges	\$65,553.08	\$764,446.21	\$76,911.94	\$793,276.04
Charges - Adjusted YTD	\$0.00	(\$910.00)	\$0.00	\$0.00
Total Charges Adjusted	\$0.00	(\$922.60)	\$0.00	\$0.00
A/R Balance	(\$39,162.84)	(\$109,656.56)	(\$13,166.81)	(\$51,740.96)
<hr/>				
Cash Per Transport	\$725.21	\$437.70	\$501.46	\$456.20
Cost Per Call	\$0.00	\$0.00	\$0.00	\$0.00
Collection Rate	90%	54%	62%	52%

**Discounts and WriteOffs**

	This Fiscal Year		Last Fiscal Year	
	Month	Year To Date	Month	Year To Date
Discount	\$265.00	\$265.00	\$0.00	\$0.00
Refund - Interest	\$0.00	\$0.00	\$0.00	\$0.00
WriteOff - Auto Insurance	\$0.00	\$0.00	\$0.00	\$0.00
WriteOff - Bad Debt	\$8,572.03	\$80,668.30	\$12,999.71	\$105,990.41
WriteOff - Charity	\$0.00	\$2,605.00	\$0.00	\$3,530.60
WriteOff - Contract	\$0.00	\$0.00	\$0.00	\$257.71
Contractual - Insurance	\$28,549.14	\$206,723.28	\$22,314.47	\$203,170.22
Contractual - Medicaid	\$2,488.47	\$20,641.46	\$2,029.85	\$16,044.55
Contractual - Medicare	\$4,302.05	\$72,823.34	\$5,095.73	\$72,957.59
WriteOff - Other	\$1,797.43	\$9,864.08	\$0.00	\$15,896.14
WriteOff - Self Pay	\$0.00	\$0.18	\$0.00	\$0.00
WriteOff - Timely Filing	\$0.00	\$0.00	\$0.00	\$0.00
WriteOff - Workers Comp	\$0.00	\$50.58	\$0.00	\$1,145.31
<hr/>				
Total - (Minus Discount)	\$45,709.12	\$393,376.22	\$42,439.76	\$418,992.53
Adj. Collection Rate	194.42%	88.81%	100.35%	82.66%



## TROUSDALE COUNTY EMERGENCY SERVICES

95 RIVER VALLEY DR | HARTSVILLE, TN 37074

615-374-9503 | 615-374-4383

**Matthew L Batey, Director / Chief**

matthew.batey@trousdalecountyttn.gov

Date: **4/5/2024**

EMS MONTHLY REPORT FOR: **March 2024**

NUMBER OF CALLS FOR THE MONTH: **126**

NUMBER OF PERSONS TRANSPORTED: **81**

AVERAGE RESPONSE TIME: **86**

TRANSPORTED TO TROUSDALE MEDICAL: **24**

TRANSFERRED FROM TROUSDALE MEDICAL **18**

TRANSFERRED TO OTHER FACILITIES: **57**

PATIENT REVENUE BILLED: **65,553.08**

PATIENT REVENUE COLLECTED: **58,741.80**

TOTAL FISCAL YEAR REVENUE: **412,316.28**

### PAYMENTS RECEIVED BY INSURANCE TYPES

MEDICARE: **4,621.34**

AMERICHoice: **5,498.37**

WELLPOINT **2,565.58**

BLUECARE: **7,449.13**

BCBS: **8,121.94**

PRISON: **14,645.61**

SELF PAY: **3,734.09**

OTHER MISC: **12,105.74**

AMBULANCES STAFFED EACH DAY: **2**

### CALLS BY TYPE

911 EMERGENCIES: **94**

NON-EMERGENCIES: **32**

DIALYSIS TRANSPORTS: **0**

RESCUE ASSIST: **17**

**TROUSDALE COUNTY EMS  
95 RIVER VALLEY DR  
HARTSVILLE Tennessee 37074**

**March 2024( Status:Not Closed)  
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WriteOff Detail**

**TROUSDALE COUNTY EMS**

**WriteOff Detail**

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Patient	Payment Date	DOS	Invoice	Description	Write Off
<b><u>Discount</u></b>					
	03/15/2024	02/07/2024	55224T70189T	Medicaid	\$265.00
<b>Discount Totals:</b>					<b>\$265.00</b>

**WriteOff - Bad Debt**

	03/18/2024	04/07/2023	55123T70422T	Other	\$900.00
	03/18/2024	07/20/2023	55223T200871T	Other	\$493.50
	03/18/2024	08/16/2023	55123T61010	Other	\$858.20
	03/18/2024	08/23/2023	55123T31048T	Other	\$102.05
	03/18/2024	08/25/2023	55123T51065T	Other	\$939.54
	03/18/2024	09/09/2023	55223T91131T	Other	\$438.94
	03/18/2024	09/09/2023	55123T91129	Other	\$768.00
	03/18/2024	09/10/2023	55223T101140	Other	\$250.00
	03/18/2024	09/16/2023	55123T61168	Other	\$852.00
	03/18/2024	09/17/2023	55223T71176T	Other	\$838.00
	03/18/2024	10/07/2023	55223T71269	Other	\$852.00
	03/18/2024	10/09/2023	55123T21307T	Other	\$565.00
	03/18/2024	10/11/2023	55123T11302	Other	\$714.80
<b>WriteOff - Bad Debt Totals:</b>					<b>\$8,572.03</b>

**WriteOff - Insurance Contr**

	03/01/2024	01/31/2024	55424T10153DC	Private Insurance	\$64.18
	03/01/2024	02/17/2024	55224T70239E	Private Insurance	\$337.67
	03/01/2024	02/18/2024	55424T80242	Private Insurance	\$198.83
	03/01/2024	02/20/2024	55224T200248	Private Insurance	\$337.43
	03/01/2024	02/22/2024	55224T20260	Private Insurance	\$344.61
	03/04/2024	02/19/2024	55424T90247T	Private Insurance	\$434.91
	03/05/2024	02/06/2024	55424T60184T	Private Insurance	\$426.16
	03/05/2024	02/10/2024	55224T100198	Private Insurance	\$4.72
	03/05/2024	02/22/2024	55224T20262	Private Insurance	\$427.70
	03/05/2024	02/23/2024	55224T30268	Private Insurance	\$277.16
	03/06/2024	02/25/2024	55124T50279	Private Insurance	\$200.08

TROUSDALE COUNTY EMS

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Patient	Payment Date	DOS	Invoice	Description	Write Off
	03/06/2024	02/26/2024	55224T60281	Private Insurance	\$325.50
	03/11/2024	01/26/2024	55224T60124	Private Insurance	\$81.76
	03/11/2024	01/27/2024	55424T70130	Private Insurance	\$82.12
	03/11/2024	01/28/2024	55424T80136E	Private Insurance	\$82.74
	03/11/2024	01/28/2024	55424T80133	Private Insurance	\$80.02
	03/11/2024	01/28/2024	55224T80137T	Private Insurance	\$88.20
	03/11/2024	01/28/2024	55424T80134	Private Insurance	\$82.12
	03/11/2024	01/29/2024	55224T90141	Private Insurance	\$82.12
	03/11/2024	01/30/2024	55424T300149	Private Insurance	\$406.32
	03/11/2024	01/31/2024	55224T10150	Private Insurance	\$82.74
	03/11/2024	02/01/2024	55424T10156	Private Insurance	\$143.08
	03/11/2024	02/02/2024	55424T20162	Private Insurance	\$358.41
	03/11/2024	02/03/2024	55424T30167	Private Insurance	\$410.39
	03/11/2024	02/03/2024	55224T30168	Private Insurance	\$81.76
	03/11/2024	02/04/2024	55224T40169	Private Insurance	\$82.54
	03/11/2024	02/04/2024	55224T40174E	Private Insurance	\$199.53
	03/11/2024	02/06/2024	55224T60183	Private Insurance	\$82.12
	03/11/2024	02/07/2024	55424T70187	Private Insurance	\$85.26
	03/11/2024	02/07/2024	55224T70186T	Private Insurance	\$431.31
	03/11/2024	02/07/2024	55424T70185E	Private Insurance	\$223.40
	03/11/2024	02/08/2024	55224T80194T	Private Insurance	\$543.64
	03/11/2024	02/08/2024	55424T80191E	Private Insurance	\$200.66
	03/11/2024	02/08/2024	55424T80192DC	Private Insurance	\$68.53
	03/11/2024	02/12/2024	55424T20212DC	Private Insurance	\$68.53
	03/11/2024	02/13/2024	55224T30213	Private Insurance	\$285.06
	03/11/2024	02/13/2024	55224T30216	Private Insurance	\$350.29
	03/11/2024	02/13/2024	55224T30217	Private Insurance	\$341.36
	03/11/2024	02/16/2024	55224T60236T	Private Insurance	\$430.65
	03/11/2024	02/16/2024	55224T60231	Private Insurance	\$197.57
	03/11/2024	02/18/2024	55424T80244	Private Insurance	\$294.87
	03/11/2024	02/23/2024	55124T30269	Private Insurance	\$453.43
	03/11/2024	02/24/2024	55224T40273	Private Insurance	\$270.25

**TROUSDALE COUNTY EMS**

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Patient	Payment Date	DOS	Invoice	Description	Write Off
	03/11/2024	02/24/2024	55224T40271T	Private Insurance	\$556.38
	03/11/2024	02/24/2024	55124T40270E	Private Insurance	\$219.95
	03/11/2024	02/25/2024	55124T50278T	Private Insurance	\$0.00
	03/11/2024	02/25/2024	55224T50274E	Private Insurance	\$193.85
	03/11/2024	02/25/2024	55224T50277	Private Insurance	\$270.26
	03/11/2024	03/01/2024	55224T10289T	Private Insurance	\$479.52
	03/11/2024	03/03/2024	55124T30304	Private Insurance	\$258.10
	03/12/2024	02/06/2024	55224T60182T	Private Insurance	\$720.23
	03/12/2024	02/16/2024	55224T60234T	Private Insurance	\$450.52
	03/12/2024	02/25/2024	55124T50276T	Private Insurance	\$434.91
	03/12/2024	03/02/2024	55224T20240	Private Insurance	\$217.41
	03/13/2024	12/07/2023	55223T71511	Private Insurance	\$272.40
	03/13/2024	12/08/2023	55123T81519T	Private Insurance	\$388.00
	03/14/2024	02/17/2024	55224T70240DC	Private Insurance	\$428.36
	03/14/2024	02/20/2024	55224T200252T	Private Insurance	\$494.68
	03/14/2024	02/20/2024	55124T200250E	Private Insurance	\$203.32
	03/15/2024	02/14/2024	55424T40223	Private Insurance	\$82.12
	03/15/2024	03/04/2024	55424T40309	Private Insurance	\$256.79
	03/15/2024	03/05/2024	55124T50311	Private Insurance	\$366.36
	03/18/2024	02/14/2024	55424T40220E	Private Insurance	\$175.10
	03/18/2024	02/16/2024	55424T60237WC	Workers Comp	\$4.13
	03/18/2024	03/09/2024	55124T90320	Private Insurance	\$197.33
	03/18/2024	03/10/2024	55124T100327	Private Insurance	\$245.40
	03/20/2024	10/29/2023	55123T91370T	Private Insurance	\$1,298.60
	03/20/2024	02/03/2024	55224T30165	Private Insurance	\$256.86
	03/20/2024	03/08/2024	55424T80317	Private Insurance	\$10.03
	03/20/2024	03/08/2024	55124T80318	Private Insurance	\$268.76
	03/20/2024	03/10/2024	55124T100326	Private Insurance	\$314.02
	03/21/2024	03/07/2024	55124T70313	Private Insurance	\$435.04
	03/21/2024	03/07/2024	55424T70315	Private Insurance	\$300.78
	03/21/2024	03/11/2024	55124T10330	Private Insurance	\$283.85
	03/21/2024	03/11/2024	55424T20331	Private Insurance	\$483.66

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Patient	Payment Date	DOS	Invoice	Description	Write Off
	03/11/2024	02/24/2024	55224T40271T	Private Insurance	\$556.38
	03/11/2024	02/24/2024	55124T40270E	Private Insurance	\$219.95
	03/11/2024	02/25/2024	55124T50278T	Private Insurance	\$0.00
	03/11/2024	02/25/2024	55224T50274E	Private Insurance	\$193.85
	03/11/2024	02/25/2024	55224T50277	Private Insurance	\$270.26
	03/11/2024	03/01/2024	55224T10289T	Private Insurance	\$479.52
	03/11/2024	03/03/2024	55124T30304	Private Insurance	\$258.10
	03/12/2024	02/06/2024	55224T60182T	Private Insurance	\$720.23
	03/12/2024	02/16/2024	55224T60234T	Private Insurance	\$450.52
	03/12/2024	02/25/2024	55124T50276T	Private Insurance	\$434.91
	03/12/2024	03/02/2024	55224T20240	Private Insurance	\$217.41
	03/13/2024	12/07/2023	55223T71511	Private Insurance	\$272.40
	03/13/2024	12/08/2023	55123T81519T	Private Insurance	\$388.00
	03/14/2024	02/17/2024	55224T70240DC	Private Insurance	\$428.36
	03/14/2024	02/20/2024	55224T200252T	Private Insurance	\$494.68
	03/14/2024	02/20/2024	55124T200250E	Private Insurance	\$203.32
	03/15/2024	02/14/2024	55424T40223	Private Insurance	\$82.12
	03/15/2024	03/04/2024	55424T40309	Private Insurance	\$256.79
	03/15/2024	03/05/2024	55124T50311	Private Insurance	\$366.36
	03/18/2024	02/14/2024	55424T40220E	Private Insurance	\$175.10
	03/18/2024	02/16/2024	55424T60237WC	Workers Comp	\$4.13
	03/18/2024	03/09/2024	55124T90320	Private Insurance	\$197.33
	03/18/2024	03/10/2024	55124T100327	Private Insurance	\$245.40
	03/20/2024	10/29/2023	55123T91370T	Private Insurance	\$1,298.60
	03/20/2024	02/03/2024	55224T30165	Private Insurance	\$256.86
	03/20/2024	03/08/2024	55424T80317	Private Insurance	\$10.03
	03/20/2024	03/08/2024	55124T80318	Private Insurance	\$268.76
	03/20/2024	03/10/2024	55124T100326	Private Insurance	\$314.02
	03/21/2024	03/07/2024	55124T70313	Private Insurance	\$435.04
	03/21/2024	03/07/2024	55424T70315	Private Insurance	\$300.78
	03/21/2024	03/11/2024	55124T10330	Private Insurance	\$283.85
	03/21/2024	03/11/2024	55424T20331	Private Insurance	\$483.66

**TROUSDALE COUNTY EMS**

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Patient	Payment Date	DOS	Invoice	Description	Write Off
	03/21/2024	03/12/2024	55124T20334	Private Insurance	\$264.07
	03/21/2024	03/13/2024	55424T30341T	Private Insurance	\$516.84
	03/21/2024	03/14/2024	55124T40342T	Private Insurance	\$838.00
	03/21/2024	03/14/2024	55124T50345	Private Insurance	\$320.06
	03/22/2024	01/21/2024	55124T10092DC	Private Insurance	\$103.07
	03/22/2024	02/18/2024	55424T80242	Private Insurance	\$165.33
	03/22/2024	02/19/2024	55424T90246	Private Insurance	\$82.54
	03/26/2024	03/15/2024	55224T50348	Private Insurance	\$463.60
	03/26/2024	03/15/2024	55124T50349	Private Insurance	\$241.30
	03/26/2024	03/17/2024	55124T70357T	Private Insurance	\$319.50
	03/27/2024	03/19/2024	55224T90365	Private Insurance	\$8.85
	03/28/2024	02/14/2024	55224T40225	Private Insurance	\$169.14
	03/28/2024	02/14/2024	55424T40224	Private Insurance	\$302.85
	03/28/2024	03/07/2024	55124T70314	Private Insurance	\$294.01
	03/28/2024	03/15/2024	55224T50347T	Private Insurance	\$0.00
	03/28/2024	03/17/2024	55224T70355	Private Insurance	\$287.19
	03/28/2024	03/17/2024	55124T70356	Private Insurance	\$503.96
	03/28/2024	03/20/2024	55224T200373	Private Insurance	\$203.19
	03/29/2024	01/10/2024	55124T100039	Private Insurance	\$353.54
	03/29/2024	02/14/2024	55424T40222	Private Insurance	\$82.12
	03/29/2024	02/22/2024	55224T20264T	Private Insurance	\$321.55
	03/29/2024	02/22/2024	55124T20259	Private Insurance	\$80.02
	03/29/2024	02/28/2024	55224T80285	Private Insurance	\$82.54
	03/29/2024	03/18/2024	55124T90362	Private Insurance	\$450.18
	03/29/2024	03/19/2024	55124T90363	Private Insurance	\$333.24
	03/29/2024	03/19/2024	55124T90367	Private Insurance	\$369.78
	03/29/2024	03/20/2024	55124T200374	Private Insurance	\$437.29
	03/29/2024	03/20/2024	55224T10375	Private Insurance	\$338.93

**WriteOff - Insurance Contr Totals: \$28,549.14**

**WriteOff - Medicaid Contr**

03/01/2024	10/12/2023	55123T21309	Medicaid	\$113.34
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Patient	Payment Date	DOS	Invoice	Description	Write Off
	03/01/2024	11/12/2023	55223T21428	Medicaid	\$82.68
	03/01/2024	11/28/2023	55123T81485	Medicaid	\$108.97
	03/01/2024	11/28/2023	55123T81485	Medicaid	\$0.00
	03/15/2024	10/01/2023	55123T11243	Medicaid	\$250.00
	03/15/2024	02/02/2024	55424T20160	Medicaid	\$297.34
	03/18/2024	07/09/2023	55123T90820T	Medicaid	\$166.71
	03/18/2024	07/09/2023	55123T90817E	Medicaid	\$81.11
	03/18/2024	02/14/2024	55224T50226T	Medicaid	\$124.84
	03/18/2024	02/25/2024	55124T50279	Medicaid	\$84.42
	03/20/2024	03/04/2024	55424T40309	Medicaid	\$103.91
	03/22/2024	01/22/2024	55124T20098DC	Medicaid	\$53.50
	03/22/2024	02/19/2024	55424T90247T	Medicaid	\$81.93
	03/22/2024	02/20/2024	55224T200248	Medicaid	\$138.86
	03/26/2024	03/10/2024	55124T100326	Medicaid	\$123.57
	03/28/2024	11/01/2023	55123T11388	Medicaid	\$295.00
	03/28/2024	11/20/2023	55223T201459	Medicaid	\$295.00
	03/29/2024	02/16/2024	55224T60234T	Medicaid	\$87.29

**WriteOff - Medicaid Contr Totals: \$2,488.47**

**WriteOff - Medicare Contr**

	03/01/2024	02/14/2024	55224T50226T	Medicare	\$559.78
	03/01/2024	02/16/2024	55224T60233	Medicare	\$278.96
	03/06/2024	02/20/2024	55124T200251	Medicare	\$288.84
	03/11/2024	02/21/2024	55124T10256	Medicare	\$263.35
	03/13/2024	02/27/2024	55224T70283	Medicare	\$671.52
	03/15/2024	02/29/2024	55124T90288	Medicare	\$281.76
	03/15/2024	03/01/2024	55224T10290	Medicare	\$259.76
	03/18/2024	03/03/2024	55424T30305	Medicare	\$282.09
	03/18/2024	03/03/2024	55424T30306	Medicare	\$290.77
	03/18/2024	03/04/2024	55124T40307	Medicare	\$288.00
	03/29/2024	03/12/2024	55124T20336DC	Medicare	\$350.19
	03/29/2024	03/12/2024	55124T20335E	Medicare	\$200.59

TROUSDALE COUNTY EMS

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Patient	Payment Date	DOS	Inyoice	Description	Write Off
	03/29/2024	03/14/2024	55224T40344	Medicare	\$286.44
<b>WriteOff - Medicare Contr Totals:</b>					<b>\$4,302.05</b>

WriteOff - Other

	03/12/2024	03/11/2024	55424T10329	Other <i>County inmate</i>	\$938.00
	03/14/2024	08/26/2023	55123T61071	Other <i>county inmate</i>	\$702.80
	03/27/2024	01/30/2024	55224T300145T	Other <i>County employee</i>	\$156.63
<b>WriteOff - Other Totals:</b>					<b>\$1,797.43</b>

	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST
AMERICHoice	\$ 6,341.32	\$ 3,871.54	\$ 6,007.45	\$ 2,960.33	\$ 3,306.65	\$ 2,710.45	\$ 3,393.83	\$ 3,548.34
WELLPOINT	\$ 2,445.48	\$ 2,553.40	\$ 5,339.05	\$ 1,127.50	\$ 2,219.37	\$ 2,310.19	\$ 4,806.81	\$ 2,457.83
BLUE CARE	\$ 3,384.72	\$ 337.25	\$ 2,745.91	\$ -	\$ 2,572.76	\$ 2,223.72	\$ 562.64	\$ 2,849.26
BLUE CROSS	\$ 861.45	\$ 3,699.63	\$ 3,234.15	\$ 2,720.61	\$ 1,569.77	\$ 6,705.20	\$ 3,056.50	\$ 1,272.00
HEALTHSPRING	\$ 1,715.32	\$ 1,005.67	\$ 920.41	\$ 1,833.02	\$ 2,300.12	\$ 2,578.72	\$ 1,964.13	\$ 1,821.93
MEDICARE	\$ 4,736.26	\$ 8,205.87	\$ 5,860.34	\$ 6,527.68	\$ 4,866.69	\$ 3,308.05	\$ 9,623.64	\$ 14,083.04
MEDICAID	\$ -	\$ 91.51	\$ 268.86	\$ 98.05	\$ 327.31	\$ 326.75	\$ 443.03	\$ 25.37
PRISON	\$ 13,159.26	\$ 4,568.64	\$ 10,315.55	\$ 7,397.08	\$ 20,009.92	\$ 15,739.71	\$ 3,341.20	\$ 4,421.88
UNITED HEALTH	\$ 1,149.54	\$ 1,941.68	\$ 1,597.76	\$ 1,377.54	\$ 1,169.52	\$ 3,240.02	\$ 2,390.80	\$ 2,111.83
COMMERCIAL	\$ 7,892.97	\$ 6,334.79	\$ 6,279.25	\$ 5,014.86	\$ 5,860.36	\$ 6,918.37	\$ 6,327.31	\$ 5,658.02
PATIENT	\$ 3,685.96	\$ 2,427.23	\$ 3,001.30	\$ 4,591.54	\$ 3,120.18	\$ 1,994.80	\$ 2,476.58	\$ 3,570.70
SOUTH EAST	\$ -	\$ -	\$ 258.79	\$ 635.31	\$ 1,105.39	\$ -	\$ 410.09	\$ -
TN CARRIERS	\$ 1,604.56	\$ 922.96	\$ 453.94	\$ 269.22	\$ 550.20	\$ -	\$ 960.54	\$ 1,920.91
TMC	\$ 370.30	\$ 785.43	\$ 448.97	\$ 1,518.73	\$ -	\$ 1,623.25	\$ 398.82	\$ 800.25
FOX	\$ 200.48	\$ 296.32	\$ 907.26	\$ 685.49	\$ -	\$ -	\$ -	\$ 55.27
RUNS	94	72	95	95	88	97	101	119
BILLED	\$ 85,568.14	\$65,094.80	\$76,911.94	\$84,091.58	\$74,009.04	\$82,196.81	\$84,606.11	\$97,262.91
COLLECTED	\$ 47,547.62	\$37,061.92	\$47,638.99	\$36,756.96	\$49,495.54	\$49,679.23	\$40,155.92	\$44,596.33
WRITE OFF	\$ 45,314.86	\$33,244.58	\$42,439.76	\$38,775.58	\$50,522.33	\$32,427.10	\$42,226.36	\$46,159.12

SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY 2024	FEBRUARY 2024	Mar-24
\$ 5,578.81	\$ 1,137.95	\$ 3,152.94	\$ 2,674.31	\$ 2,521.62	\$ 2,918.98	\$ 5,498.37
\$ 2,270.60	\$ 809.00	\$ 4,427.49	\$ 1,880.79	\$ 1,454.67	\$ 2,079.66	\$ 2,565.58
\$ 7,009.80	\$ 2,495.84	\$ 1,057.45	\$ 4,893.49	\$ 2,153.26	\$ 657.61	\$ 7,449.13
\$ 6,661.00	\$ 5,037.75	\$ 5,180.45	\$ 2,494.85	\$ 3,093.90	\$ 4,978.57	\$ 8,121.94
\$ 3,818.09	\$ 2,853.37	\$ 2,756.24	\$ 2,163.96	\$ 1,491.94	\$ 3,076.93	\$ -
\$ 8,605.20	\$ 11,236.04	\$ 8,827.12	\$ 7,566.53	\$ 6,996.32	\$ 9,548.74	\$ 4,621.34
\$ 364.72	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 121.03
\$ 4,655.43	\$ 4,117.98	\$ 9,822.19	\$ 9,368.13	\$ 8,733.85	\$ 6,424.55	\$ 14,645.61
\$ 3,784.29	\$ 1,293.23	\$ 1,043.84	\$ 3,661.54	\$ 1,975.40	\$ 1,041.75	\$ 4,853.38
\$ 6,083.73	\$ 6,900.56	\$ 7,716.63	\$ 6,681.95	\$ 4,770.36	\$ 5,041.13	\$ 4,490.69
\$ 2,955.74	\$ 2,902.14	\$ 2,957.68	\$ 2,622.48	\$ 1,501.70	\$ 2,044.20	\$ 3,734.09
\$ -	\$ 732.70	\$ 437.62	\$ 674.14	\$ -	\$ 297.90	\$ -
\$ 1,476.72	\$ 1,053.36	\$ 841.51	\$ 456.12	\$ 1,253.28	\$ 2,163.97	\$ 798.56
\$ 1,915.44	\$ 268.17	\$ 1,483.89	\$ -	\$ 717.14	\$ 277.32	\$ 1,802.91
	\$ -	\$ -	\$ 571.18	\$ 52.50	\$ 122.50	\$ 39.17
112	106	92	106	120	105	\$ 81.00
\$91,269.64	\$ 87,927.51	\$ 76,655.17	\$85,101.05	\$ 91,233.82	\$84,836.92	\$ 65,553.08
\$55,179.57	\$ 40,838.09	\$ 49,705.05	\$45,709.47	\$36,715.94	\$40,673.81	\$ 58,741.80
\$57,046.61	\$ 41,902.83	\$ 39,322.94	\$38,785.87	\$41,238.60	\$40,300.17	\$ 45,974.12

# FIRE DEPARTMENT

HARTSVILLE/TROUSDALE COUNTY GOVERNMENT

**RESOLUTION #2024-05-802**

**A RESOLUTION SUPPORTING AN INCREASE IN THE PER DIEM RATE FOR THE TROUSDALE COUNTY VOLUNTEER FIRE DEPARTMENT AND RESCUE SQUAD**

**WHEREAS**, Hartsville/Trousdale County Government has a dedicated group of volunteers who are members of the Volunteer Fire Department and/or the Rescue Squad; and

**WHEREAS**, these individuals freely give of their time to protect citizens' properties and keep citizens safe; and

**WHEREAS**, the only payment these individuals receive is a modest amount of \$30 per call or training which they attend and this amount has not been changed since 2016.

**NOW, THEREFORE, BE IT RESOLVED BY THE HARTSVILLE/TROUSDALE COUNTY COMMISSION** recognizes the value of these critical volunteers and supports increasing the per diem rate to \$50 per call or attended trainings.

**BE IT FURTHER RESOLVED** that these volunteers shall be paid with the stated increased rate for all calls or trainings on record and approved by their respective Chiefs beginning January 1, 2024.

<i>Motion</i> _____		
<i>Motion to approve:</i> _____	<b>Voice Vote</b>	
<i>Second motion:</i> _____		<i>Absent</i> _____

**APPROVED:**

**ATTEST:**

\_\_\_\_\_  
**Jack McCall**  
 Commission Chair

\_\_\_\_\_  
**Rita Crowder**  
 County Clerk

HARTSVILLE/TROUSDALE COUNTY GOVERNMENT

**ORDINANCE #303-2024-03**

**AN ORDINANCE ADOPTING MINIMUM TRAINING STANDARDS, AS SPECIFIED IN  
TENNESSEE CODE ANNOTATED § 4-24-112, FOR  
HARTSVILLE / TROUSDALE COUNTY VOLUNTEER FIREFIGHTERS.**

**WHEREAS**, in 2009, the State of Tennessee passed Tennessee Code Annotated § 4-24-112 specifying minimum training standards for firefighters in the State of Tennessee; and,

**WHEREAS**, a number of cities and counties were exempted from this minimum training by this legislation based on their population; and,

**WHEREAS**, the jurisdiction sets certain priorities to provide for firefighter safety and provide for trained and competent firefighters and fire department to serve our community;

**WHEREAS**, meeting minimum training standards are essential to meeting the priorities set;

**NOW, THEREFORE, BE IT ORDAINED BY THE HARTSVILLE / TROUSDALE COUNTY COMMISSION** approved by at least a 2/3<sup>rd</sup> majority of the elected body of the Hartsville / Trousdale County, Tennessee, that the fire department of the jurisdiction will meet, at minimum, the training requirements set in Tennessee Code Annotated § 4-24-112 the public welfare requiring it:

**Section 1.** All firefighters must attend a 16-hour initial training class developed by the Tennessee Fire and Codes Enforcement Academy in firefighting procedures and techniques or complete equivalent training approved by the Tennessee Commission on Firefighting Personnel Standards and Education before being allowed to fight a fire actively.

**Section 2.** Every firefighter shall complete the "basic and live firefighting" course offered by the Tennessee Fire and Codes Academy, or an equivalent course, within three years (36 months) of joining the Fire Department.

**Section 3.** The following firefighters are exempt from the minimum training requirements:

- (1)** Any firefighter in the fire service on July 1, 2009, and who entered the fire service before June 30, 2004; and
- (2)** Any firefighter certified by a medical doctor who is medically or physically unable to complete the training requirements; however, the fire department may not allow these firefighters to engage in active firefighting operations.
- (3)** Any firefighter certified by the fire department's chief officer that they will not operate within an environment that is immediately dangerous to life and health (IDLH) is exempt from the live firefighting portion of the minimum.

**BE IT ENACTED** that this ordinance shall take effect from and after its adoption, the public welfare requiring it.

*As recommended by the Emergency Service Committee \_\_\_\_\_.*

*Public Hearing to be held on \_\_\_\_\_ if passed at 1<sup>st</sup> reading.*

# Hartsville-Trousdale County

## Volunteer Firefighter Incentive Program

**Maximum Incentive \$650.00 per year in addition to incident response incentives**

### Tennessee Minimum Firefighter Training

- Compliance with Tennessee Code Annotated 4-24-112-2 \$75.00
  - FF050 Introduction to Fire and Emergency Services
- AND**
- F102 Basic/Live Firefighting
- Or
- Other Tennessee-recognized training curricula

### Professional Credentials / Licensure

- Tennessee Commission FFI \$75.00
- Tennessee Commission FFII \$75.00
- Tennessee Commission Fire Apparatus Operator \$75.00
- Tennessee Commission Fire Officer I or higher \$75.00
- AHJ Extrication Certification \$50.00

### Emergency Medical Licensure *(Select a maximum of one license)*

- Emergency Medical Responder \$30.00
- Emergency Medical Technician \$40.00
- Emergency Medical Technician-Advanced \$50.00
- Emergency Medical Technician-Paramedic \$75.00

### Public Safety Firefighter-Annual Training Program Completion

- Annual requirements set by the Fire Chief \$75.00

### Service Incentive *(Select a maximum of one category)*

- 25% of annual incidents \$25.00
- 50% of annual incidents \$50.00
- 75% of annual incidents \$75.00

### Incident Response Incentive (Emergency Medical Licensure add \$10.00/Incident)

- Rookie-Not met minimum training requirements \$15.00/Incident
- Meets State Min Training Requirements \$25.00/Incident
- Commission Firefighter I \$30.00/Incident
- Commission Firefighter II *(Credentialed IDLH Firefighter)* \$35.00/Incident
- Commission Fire Pumper Operator \$40.00/Incident
- Commission Fire Officer I or higher level \$45.00/Incident

## 2023 INCENTIVE EXAMPLES

### **FIREFIGHTER 1: APPARATUS DRIVER LEVEL**

#### **Tennessee Minimum Firefighter Training**

- Meets Tennessee Code Annotated 4-24-112-2 training requirement \$75.00

#### **Professional Credentials / Licensure**

- Firefighter I \$75.00
- Firefighter II \$75.00
- Fire Apparatus Operator \$75.00

#### **Emergency Medical Licensure**

- Emergency Medical Responder \$30.00

#### **Annual Training Program Completion**

- Minimum 30-hours state-approved (TN State Paid Incentive (\$600.00)) \$75.00

#### **Service Incentive**

- Responded to 25% of incidents. \$25.00

#### **Total 2023 Training and Service Incentive**

\$430.00

#### **Incident Response Stipend (30 responses at \$40+\$10/each)**

\$1,500.00

#### **2023 TOTAL COMPENSATION**

**\$1,930.00**

### **FIREFIGHTER 2: OFFICER LEVEL**

#### **Tennessee Minimum Firefighter Training**

- Meets Tennessee Code Annotated 4-24-112-2 training requirement \$75.00

#### **Professional Credentials / Licensure**

- Firefighter I \$75.00
- Firefighter II \$75.00
- Fire Apparatus Operator \$75.00
- Fire Officer I \$75.00

#### **Emergency Medical Licensure**

- Emergency Medical Technician Basic \$40.00

#### **Annual Training Program Completion**

- Minimum 30-hours state-approved (TN State Paid Incentive (\$600.00)) \$75.00

#### **Service Incentive**

- Responded to 50% of incidents. \$50.00

#### **Total 2023 Training and Service Incentive**

\$540.00

#### **Incident Response Stipend (40 responses at \$45+\$10/each)**

\$2,200.00

#### **2023 TOTAL COMPENSATION**

**\$2,740.00**



HARTSVILLE/TROUSDALE COUNTY  
**PLANNING OFFICE | CODES, ZONING, AND BUILDING**  
 328 Broadway, Room 1 | Hartsville, TN 37074  
 office (615) 374-1125 | cell (615) 374-5066

<b>Blasting Permit Fee</b> \$ _____
--

## BLASTING PERMIT

*While the State of Tennessee regulates all construction blasting, Hartsville/Trousdale County Planning Department also requires a permit which serves to notify of blasting taking place within the County.*

*If you have questions about construction blasting, please contact the State Fire Marshall's office at (615) 741-2241.*

Application Date \_\_\_\_\_

Check one:  **New work**  **Renewal**  
*(Renewal required after 1 year)*

Expiration Date \_\_\_\_\_

Project Name \_\_\_\_\_

Project Location \_\_\_\_\_

Anticipated Start Date \_\_\_\_\_ *Minimum 5 days after notification date*

Anticipated Completion Date \_\_\_\_\_

Actual Completion Date \_\_\_\_\_ *County to be notified when blasting operations cease*

Reason for Blasting \_\_\_\_\_

Will explosives be stored on site?  YES \*  NO

*If the answer is YES, you must notify the Trousdale County Fire Department.  
 Contact Chief Mark Beeler at [firedept@trousdalecountyttn.gov](mailto:firedept@trousdalecountyttn.gov)*

Name of Blasting Contractor \_\_\_\_\_

Address \_\_\_\_\_

24-hour Contact and Phone \_\_\_\_\_

Email Address \_\_\_\_\_

**Checklist (Attach Copies)**

- Blaster's Certificate of Insurance
- Federal License of Purchase
- TN Explosive Users Registration Certification
- Handler's Card

*The undersigned applicant hereby agrees to comply with all applicable requirements as prescribed by TCA, the Standard Fire Prevention Code, and the National Fire Code as adopted by the State of Tennessee and Hartsville/Trousdale County. In the event of handler changes, the undersigned is to notify the HTC Planning office within 48 hours of the change. This document in no way releases the holder from any liability nor authorizes any practices that are unsafe, malicious, or that violate any law or ordinance, either federal, state, or local. A copy of this document must be kept on the job site during blasting and/or related operations. Hartsville/Trousdale County reserves the right to stop blasting operations on this project if the safety of the general public and/or city facilities are endangered until the situation is mutually resolved.*

**Initial the following statements after reading:**

\_\_\_\_\_ **I UNDERSTAND THAT NO BLASTING IS ALLOWED WITHIN 50 FEET OF STREAMS OR WETLANDS.**

\_\_\_\_\_ **I UNDERSTAND THAT NO BLASTING IS ALLOWED WITHIN 50 FEET OF POLYETHLENE NATURAL GAS LINES.**

\_\_\_\_\_ **I UNDERSTAND THAT NO BLASTING IS ALLOWED WITHIN 100 FEET OF STEEL NATURAL GAS LINES.**

\_\_\_\_\_  
 Signature of Responsible Party (Contractor/Blaster)

\_\_\_\_\_  
 Print Name & Title

*For office use only*

Authorized by: \_\_\_\_\_

Copies to: Gas Dept. Police Dept. Fire Dept. Water and Sewer Dept. EMS Project File

Hartsville-Trousdale Co Government  
 Statement of Expenditures Summary by Obj by Fund  
 March 2024

Fund : 101 General

Account Number	Account Description	Budget Amount	Budget Amendments	Amended Budget	Month-to-Date Expenditures	Year-to-Date Expenditures	Outstanding Encumbrances	Unencumbered Balance	% Of Budget Exp
<b>50000</b>	<b>General Government</b>								
<b>54000</b>	<b>Public Safety</b>								
<b>54310</b>	<b>Fire Prevention And Control</b>								
189	Other Salaries & Wages	(500.00)	0.00	(500.00)	0.00	12.43	0.00	(487.57)	2.49%
201	Social Security	(31.00)	0.00	(31.00)	0.00	0.76	0.00	(30.24)	2.45%
204	State Retirement	(30.00)	0.00	(30.00)	0.00	0.73	0.00	(29.27)	2.43%
212	Employer Medicare	(8.00)	0.00	(8.00)	0.00	0.18	0.00	(7.82)	2.25%
316	Contributions	(51,000.00)	0.00	(51,000.00)	0.00	51,460.00	0.00	460.00	100.90%
320	Dues And Memberships	(200.00)	0.00	(200.00)	0.00	100.00	0.00	(100.00)	50.00%
322	Evaluation And Testing	(2,000.00)	0.00	(2,000.00)	0.00	0.00	150.00	(1,850.00)	7.50%
332	Legal Notices, Recording And Court Cost	(250.00)	0.00	(250.00)	0.00	0.00	0.00	(250.00)	0.00%
335	Maintenance And Repair Services-Buildir	(5,000.00)	0.00	(5,000.00)	42.77	219.48	0.00	(4,780.52)	4.39%
336	Maintenance And Repair Services-Equipr	(6,000.00)	0.00	(6,000.00)	1,843.00	5,843.00	1,300.00	1,143.00	119.05%
338	Maintenance And Repair Services-Vehick	(20,000.00)	0.00	(20,000.00)	754.00	4,429.59	6,930.89	(8,639.52)	56.80%
347	Pest Control	(360.00)	0.00	(360.00)	30.00	180.00	0.00	(180.00)	50.00%
353	Towing Services	(1,000.00)	0.00	(1,000.00)	0.00	0.00	0.00	(1,000.00)	0.00%
355	Travel	(2,000.00)	0.00	(2,000.00)	0.00	0.00	0.00	(2,000.00)	0.00%
410	Custodial Supplies	(750.00)	0.00	(750.00)	102.86	156.85	0.00	(593.15)	20.91%
415	Electricity	(2,700.00)	0.00	(2,700.00)	155.40	1,497.66	0.00	(1,202.34)	55.47%
425	Gasoline	(3,000.00)	0.00	(3,000.00)	0.00	1,342.34	0.00	(1,657.66)	44.74%
434	Natural Gas	(3,500.00)	0.00	(3,500.00)	367.33	1,779.15	0.00	(1,720.85)	50.83%
435	Office Supplies	(500.00)	0.00	(500.00)	0.00	78.29	0.00	(421.71)	15.66%
451	Uniforms	(2,500.00)	0.00	(2,500.00)	0.00	965.00	0.00	(1,535.00)	38.60%
454	Water And Sewer	(1,000.00)	0.00	(1,000.00)	0.00	370.64	0.00	(629.36)	37.06%
499	Other Supplies And Materials	(500.00)	0.00	(500.00)	0.00	0.00	0.00	(500.00)	0.00%
513	Workman's Compensation Insurance	(3,000.00)	0.00	(3,000.00)	0.00	2,496.00	0.00	(504.00)	83.20%
524	In Service/Staff Development	(5,000.00)	0.00	(5,000.00)	0.00	640.00	0.00	(4,360.00)	12.80%
599	Other Charges	(1,000.00)	0.00	(1,000.00)	0.00	546.00	67.22	(386.78)	61.32%
708	Communication Equipment	(5,000.00)	0.00	(5,000.00)	0.00	3,073.90	0.00	(1,926.10)	61.48%
790	Other Equipment	(30,000.00)	(12,000.00)	(42,000.00)	0.00	0.00	0.00	(42,000.00)	0.00%
<b>Total 54310</b>	<b>Fire Prevention And Control</b>	<b>(146,829.00)</b>	<b>(12,000.00)</b>	<b>(158,829.00)</b>	<b>3,295.36</b>	<b>75,192.00</b>	<b>8,448.11</b>	<b>(75,188.89)</b>	<b>52.66%</b>
<b>Total 54000</b>	<b>Public Safety</b>	<b>(146,829.00)</b>	<b>(12,000.00)</b>	<b>(158,829.00)</b>	<b>3,295.36</b>	<b>75,192.00</b>	<b>8,448.11</b>	<b>(75,188.89)</b>	<b>52.66%</b>
<b>Total 50000</b>	<b>General Government</b>	<b>(146,829.00)</b>	<b>(12,000.00)</b>	<b>(158,829.00)</b>	<b>3,295.36</b>	<b>75,192.00</b>	<b>8,448.11</b>	<b>(75,188.89)</b>	<b>52.66%</b>
<b>Total For Fund:</b>	<b>101</b>	<b>(146,829.00)</b>	<b>(12,000.00)</b>	<b>(158,829.00)</b>	<b>3,295.36</b>	<b>75,192.00</b>	<b>8,448.11</b>	<b>(75,188.89)</b>	<b>52.66%</b>

Template Name: FIRE: 54310  
 Created by: LGC

Hartsville-Trousdale Co Government  
 Statement of Expenditures Summary by Obj by Fund  
 March 2024

User: Amy Thomas  
 Date/Time: 4/2/2024 6:56 PM  
 Page 2 of 2

Fund : 111 Urban Services

Account Number	Account Description	Budget Amount	Budget Amendments	Amended Budget	Month-to-Date Expenditures	Year-to-Date Expenditures	Outstanding Encumbrances	Unencumbered Balance	% Of Budget Exp
<b>50000</b>	<b>General Government</b>								
<b>54000</b>	<b>Public Safety</b>								
<b>54310</b>	<b>Fire Prevention And Control</b>								
425	Gasoline	(5,000.00)	0.00	(5,000.00)	0.00	128.82	0.00	(4,871.18)	2.58%
499	Other Supplies And Materials	(1,500.00)	0.00	(1,500.00)	0.00	1,071.46	0.00	(428.54)	71.43%
790	Other Equipment	(3,000.00)	0.00	(3,000.00)	0.00	0.00	200.00	(2,800.00)	6.67%
<b>Total 54310</b>	<b>Fire Prevention And Control</b>	<b>(9,500.00)</b>	<b>0.00</b>	<b>(9,500.00)</b>	<b>0.00</b>	<b>1,200.28</b>	<b>200.00</b>	<b>(8,099.72)</b>	<b>14.74%</b>
<b>Total 54000</b>	<b>Public Safety</b>	<b>(9,500.00)</b>	<b>0.00</b>	<b>(9,500.00)</b>	<b>0.00</b>	<b>1,200.28</b>	<b>200.00</b>	<b>(8,099.72)</b>	<b>14.74%</b>
<b>Total 50000</b>	<b>General Government</b>	<b>(9,500.00)</b>	<b>0.00</b>	<b>(9,500.00)</b>	<b>0.00</b>	<b>1,200.28</b>	<b>200.00</b>	<b>(8,099.72)</b>	<b>14.74%</b>
<b>Total For Fund:</b>	<b>111</b>	<b>(9,500.00)</b>	<b>0.00</b>	<b>(9,500.00)</b>	<b>0.00</b>	<b>1,200.28</b>	<b>200.00</b>	<b>(8,099.72)</b>	<b>14.74%</b>

# RESCUE SQUAD

Hartsville-Trousdale Co Government  
 Statement of Expenditures Summary by Obj by Fund  
 March 2024

Fund : 101 General

Account Number	Account Description	Budget Amount	Budget Amendments	Amended Budget	Month-to-Date Expenditures	Year-to-Date Expenditures	Outstanding Encumbrances	Unencumbered Balance	% Of Budget Exp
<b>50000</b>	<b>General Government</b>								
<b>54000</b>	<b>Public Safety</b>								
<b>54420</b>	<b>Rescue Squad</b>								
189	Other Salaries & Wages	(550.00)	0.00	(550.00)	0.00	0.00	0.00	(550.00)	0.00%
199	Other Per Diem & Fees	0.00	0.00	0.00	0.00	0.00	0.00	0.00	100.00%
201	Social Security	(34.00)	0.00	(34.00)	0.00	0.00	0.00	(34.00)	0.00%
204	State Retirement	(33.00)	0.00	(33.00)	0.00	0.00	0.00	(33.00)	0.00%
212	Employer Medicare	(8.00)	0.00	(8.00)	0.00	0.00	0.00	(8.00)	0.00%
307	Communication	(1,600.00)	0.00	(1,600.00)	0.00	1,572.00	0.00	(28.00)	98.25%
316	Contributions	(15,500.00)	0.00	(15,500.00)	0.00	12,630.00	0.00	(2,870.00)	81.48%
322	Evaluation And Testing	(1,500.00)	0.00	(1,500.00)	0.00	0.00	0.00	(1,500.00)	0.00%
335	Maintenance And Repair Services-Buildir	(1,000.00)	0.00	(1,000.00)	0.00	0.00	0.00	(1,000.00)	0.00%
336	Maintenance And Repair Services-Equipr	0.00	0.00	0.00	0.00	0.00	360.00	360.00	100.00%
338	Maintenance And Repair Services-Vehick	(3,000.00)	0.00	(3,000.00)	149.90	224.87	675.00	(2,100.13)	30.00%
353	Towing Services	(500.00)	0.00	(500.00)	0.00	0.00	0.00	(500.00)	0.00%
355	Travel	(500.00)	0.00	(500.00)	0.00	0.00	0.00	(500.00)	0.00%
415	Electricity	(2,000.00)	0.00	(2,000.00)	139.19	1,120.48	0.00	(879.52)	56.02%
425	Gasoline	(2,000.00)	0.00	(2,000.00)	0.00	713.58	0.00	(1,286.42)	35.68%
434	Natural Gas	(3,500.00)	0.00	(3,500.00)	860.25	1,924.40	0.00	(1,575.60)	54.98%
451	Uniforms	(2,500.00)	0.00	(2,500.00)	0.00	0.00	0.00	(2,500.00)	0.00%
524	In Service/Staff Development	(2,500.00)	0.00	(2,500.00)	0.00	0.00	0.00	(2,500.00)	0.00%
599	Other Charges	(1,000.00)	0.00	(1,000.00)	0.00	463.18	0.00	(536.82)	46.32%
708	Communication Equipment	(7,500.00)	0.00	(7,500.00)	0.00	0.00	0.00	(7,500.00)	0.00%
711	Furniture And Fixtures	(1,000.00)	0.00	(1,000.00)	0.00	0.00	0.00	(1,000.00)	0.00%
719	Office Equipment	(1,500.00)	0.00	(1,500.00)	0.00	0.00	0.00	(1,500.00)	0.00%
790	Other Equipment	(20,000.00)	0.00	(20,000.00)	0.00	0.00	0.00	(20,000.00)	0.00%
<b>Total 54420</b>	<b>Rescue Squad</b>	<b>(67,725.00)</b>	<b>0.00</b>	<b>(67,725.00)</b>	<b>1,149.34</b>	<b>18,648.51</b>	<b>1,035.00</b>	<b>(48,041.49)</b>	<b>29.06%</b>
<b>Total 54000</b>	<b>Public Safety</b>	<b>(67,725.00)</b>	<b>0.00</b>	<b>(67,725.00)</b>	<b>1,149.34</b>	<b>18,648.51</b>	<b>1,035.00</b>	<b>(48,041.49)</b>	<b>29.06%</b>
<b>Total 50000</b>	<b>General Government</b>	<b>(67,725.00)</b>	<b>0.00</b>	<b>(67,725.00)</b>	<b>1,149.34</b>	<b>18,648.51</b>	<b>1,035.00</b>	<b>(48,041.49)</b>	<b>29.06%</b>
<b>Total For Fund:</b>	<b>101</b>	<b>(67,725.00)</b>	<b>0.00</b>	<b>(67,725.00)</b>	<b>1,149.34</b>	<b>18,648.51</b>	<b>1,035.00</b>	<b>(48,041.49)</b>	<b>29.06%</b>